ALASKA STATE LEGISLATURE
JOINT MEETING
HOUSE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE
February 2, 2010
3:09 p.m.

MEMBERS PRESENT

HOUSE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

Representative Bob Herron, Co-Chair
Representative Wes Keller, Co-Chair
Representative Tammie Wilson, Vice Chair
Representative Bob Lynn
Representative Paul Seaton
Representative Sharon Cissna
Representative Lindsey Holmes

SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

Senator Bettye Davis, Chair
Senator Johnny Ellis
Senator Joe Thomas
Senator Fred Dyson

MEMBERS ABSENT

SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

Senator Joe Paskvan

OTHER LEGISLATORS PRESENT

Senator Linda Menard

COMMITTEE CALENDAR

CHILDREN'S JUSTICE TASK FORCE REPORT

- HEARD

HOUSE BILL NO. 89
"An Act repealing the governor's committee on employment of people with disabilities; creating the state vocational rehabilitation committee and relating to the committee; and providing for an effective date."

- HEARD & HELD

SENATE BILL NO. 101
"An Act relating to questionnaires and surveys administered in the public schools."

- SCHEDULED BUT NOT HEARD

PREVIOUS COMMITTEE ACTION

BILL: HB 89
SHORT TITLE: VOCATIONAL REHABILITATION COMMITTEE
SPONSOR(s): RULES BY REQUEST OF THE GOVERNOR

01/28/09	(H)	READ THE FIRST TIME - REFERRALS
01/28/09	(H)	L&C, HSS, FIN
04/08/09	(H)	L&C AT 3:15 PM BARNES 124
04/08/09	(H)	Moved CSHB 89(L&C) Out of Committee
04/08/09	(H)	MINUTE(L&C)
04/10/09	(H)	L&C RPT CS(L&C) 3DP 1AM
04/10/09	(H)	DP: BUCH, CHENAULT, OLSON
04/10/09	(H)	AM: COGHILL
02/02/10	(H)	HSS AT 3:00 PM CAPITOL 106

WITNESS REGISTER

DR. CATHY BALDWIN-JOHNSON, Chair
Children's Justice Act Task Force (CJATF)
Juneau, Alaska
POSITION STATEMENT: Presented a PowerPoint overview of the Alaska Children's Justice Act Task Force.

PAM KARALUNAS, Statewide Coordinator
Alaska Children's Alliance
Chugiak, Alaska
POSITION STATEMENT: Presented a PowerPoint and answered questions about child maltreatment.

JARED PARRISH
Section of Women, Children & Family Health
Division of Public Assistance
Department of Health and Social Services (DHSS)
Anchorage, Alaska
POSITION STATEMENT: Presented a PowerPoint and testified during the presentation about child maltreatment.

PAULA SCAVERA, Special Assistant
Office of the Commissioner
Department of Labor & Workforce Development (DLWD)
Juneau, Alaska
POSITION STATEMENT: Answered questions about HB 89.

CHERYL WALSH, Director
Statewide Programs
Division of Vocational Rehabilitation
Department of Labor & Workforce Development (DLWD)
Juneau, Alaska
POSITION STATEMENT: Testified and answered questions about HB 89.

JOHN CANNON
Wasilla, Alaska
POSITION STATEMENT: Testified in support of HB 89.

PAMELA STRATTON, Director
Client Assistance Program
Governor's Committee on Employment and Rehabilitation of People With Disabilities
Anchorage, Alaska
POSITION STATEMENT: Testified in support of HB 89.

ACTION NARRATIVE

3:09:05 PM

CO-CHAIR WES KELLER called the joint meeting of the House and Senate Health and Social Services Standing Committees to order at 3:09 p.m. Representatives Keller, Herron, T. Wilson, Holmes, Seaton, Lynn, and Senators Dyson and Ellis were present at the call to order. Representative Cissna and Senators Davis and Thomas arrived as the meeting was in progress.

Children's Justice Task Force Report

3:09:43 PM

CO-CHAIR KELLER announced that the first order of business would be a presentation from the Children's Justice Act Task Force.

3:11:15 PM

DR. CATHY BALDWIN-JOHNSON, Chair, Children's Justice Act Task Force (CJATF), introduced the other task force members who were present.

3:11:49 PM

CO-CHAIR KELLER turned the gavel over to Chair Davis.

3:12:05 PM

DR. BALDWIN-JOHNSON began her PowerPoint presentation, and shared that the Children's Justice Act Task Force (CJATF) was founded in 1999, was federally funded, and was mandated to evaluate the response systems for allegations of child maltreatment. She shared that in addition to evaluations, the group made recommendations for system improvement, and undertook a number of projects. She pointed out the membership list, with its contact information. [Included in the committee packets.] She reported that there would be updates on the programs, and that the staff would offer recommendations for the upcoming year.

3:13:40 PM

DR. BALDWIN-JOHNSON summarized the "Pathway To Hope" initiative, which was an Alaska Native initiative in response to the high rate of child sexual abuse in rural Alaska. She explained that the CJATF had provided funding for the inaugural training in 2008, and since then, more than 200 community facilitators had been trained. She shared that there were ongoing requests for training, which would be maintained for as long as there was funding. She noted that there were ongoing monthly teleconferences, a conference in Kodiak, "Honoring Our Children," during 2009, and additional trainings were planned for the upcoming year.

DR. BALDWIN-JOHNSON remarked on her next slide listing projects for 2009, and talked about the training CD for teaching mandated reporters. She noted the teaching curriculum which accompanied the CD. She discussed the scholarships awarded for professionals dealing with child maltreatment, a multi-disciplinary best practices guideline handbook, and a statewide child forensic interviewing form.

3:16:49 PM

DR. BALDWIN-JOHNSON pointed to the slide on "Forensic Interviewing Forum," and relayed the challenges of talking with kids about difficult things. She described the challenge to ensure that child interviewers had the training to protect the child and to get the best information. She spoke about the challenges of diversity, geography, and a lack of resources. She relayed a recommendation for the essential components in both basic and advanced forensic training, as well as the need for a basic field protocol. She explained that the Child Advocacy Centers (CACs) were based on a national model for bringing together all the personnel involved with evaluating allegations of child maltreatment to one location.

3:18:41 PM

PAM KARALUNAS, Statewide Coordinator, Alaska Children's Alliance, presented a PowerPoint titled "Alaska Children's Alliance Update on CACs." [Included in the committee packets.] She pointed to slide 2, titled "Alaska Children's Alliance," and shared the mission statement "to promote a culturally appropriate multidisciplinary response to child maltreatment throughout Alaska."

MS. KARALUNAS called attention to slide 3, "ACA-State Chapter of National Children's Alliance," and shared that the national organization did a number of important things, which included setting minimum standards for Child Advocacy Centers (CACs) and providing limited funding, support, training, and research for the state chapter.

3:19:46 PM

MS. KARALUNAS introduced slide 4, "Alaska Children's Alliance provides:" and explained that the state chapter offered technical assistance and support to the CACs, the multidisciplinary teams, the child protection teams, and state and local organizations. She stated that it also represented the state on both a regional and national level, provided limited funding to the CACs, collected data, and coordinated statewide protocols.

3:20:51 PM

MS. KARALUNAS presented slide 5, "Alaskan Child Advocacy Centers," and listed the nine CACs in the state.

3:21:20 PM

MS. KARALUNAS indicated slide 6, "Child Advocacy Centers provide:" and said that the CACs were "a child and family friendly environment..."

3:21:58 PM

MS. KARALUNAS commented on slide 7, "Specialized Forensic Interview," and described the training and interview rooms, which allowed one person to interview while the rest of the team monitored.

3:22:36 PM

MS. KARALUNAS explained that the medical exam for children was different than those for adults, slide 8, "Specialized, Non-Traumatic Medical Exam."

3:23:05 PM

MS. KARALUNAS described the significance of mental health services, slide 9, "Collaboration with mental health services for earlier response to referrals."

3:23:34 PM

MS. KARALUNAS said that culturally competent care was essential to make children and families feel comfortable, as shown on slide 10, "Identification of risks and assessment of needs of child and family and referrals to address those issues."

3:23:53 PM

MS. KARALUNAS explained slide 11, "On-going support and follow up for family throughout the system process and beyond," and shared that the support and belief by the caregiver was key to the long term outcome for the child.

3:24:22 PM

MS. KARALUNAS pointed to slide 12, "Case Tracking/Data Collection," and explained the data collection system which provides information to funding sources, communities, and the state.

3:25:04 PM

MS. KARALUNAS evaluated the pie graph on slide 13, "Gender of children seen at Alaska CACs in FY09," and noted that 30 percent were boys. She moved on to slide 14, "Ages...", and pointed out that 22 percent were 13-18 years of age, 37 percent were 7-12 years, and 41 percent were 0-6 years. She showed slide 15, "CAC Research" and spoke about the research on the significant benefits of CACs and the value of the model.

3:26:37 PM

MS. KARALUNAS shared that the nine CACs served 209 communities, and that 12,773 children had received services since FY05, as shown on slide 16, "Numbers of children seen."

3:27:11 PM

JARED PARRISH, Section of Women, Children & Family Health, Division of Public Assistance, Department of Health and Social Services (DHSS), said that he would give a "broad brushstroke" of fatal maltreatment that was occurring in Alaska. He introduced the Alaska Surveillance of Child Abuse and Neglect (SCAN) program.

3:27:45 PM

MR. PARRISH revealed slide 2, "Why Is Public Health Involved With Child Maltreatment (CM)," and slide 3, "Public Health Surveillance" and explained that CM was a serious public health concern with extensive short and long term health issues, which included drug and alcohol abuse, suicide, teen age pregnancy, and obesity. He said that no single agency had jurisdictional responsibility over CM. He explained that his department sought to bring all the information together, and to apply a standardized definition. He pointed out that this allowed a measurement, over time, of the true magnitude and impact to society, and an ability to identify high risk populations.

3:30:36 PM

MR. PARRISH referred to slide 4, "Baby Albert," and gave the history to his death. He described the differing conclusions of various official agency reviews to cause of death.

3:31:36 PM

MR. PARRISH moved on to slide 5, "Heather," and slide 6, "Death Certificate," and described the accidents, and the corresponding official conclusions to cause of death.

3:32:30 PM

MR. PARRISH pointed to slide 7, "Detecting Maltreatment Related Infant Death," and reflected on the difference of conclusion to cause of death between the death certificate and the infant mortality child death review. He noted that neglect was not included in the vital statistics from death certificates, and when all the definitions used in the SCAN program were applied, the death designation disparity was even higher. Of the 133 CM cases identified as preventable, 35 percent were abuse, and 65 percent were neglect. He pointed out that this was statistically in line with other states. He examined the Native and non-Native population statistics, and directed attention to a higher infant mortality due to CM within the Native community. He compared the per capita statistics which showed the Native Alaskan community to have four times the risk of a CM death.

3:35:10 PM

MR. PARRISH summarized slide 8, "Who Is At Risk," and shared that identifying sub populations and fiscal resources allowed interventions to be targeted for those most in need. He explained that maltreatment included abuse, neglect, and gross negligence. He moved on to slide 9, "Distribution of Maltreatment Death Among Children," and identified 135 maltreatment related deaths. He said that 40 percent were abuse related and 63 percent were due to neglect. He pointed to the fivefold increase for risk that Native Alaskans have a neglect related maltreatment death compared to non-Natives. He pointed out that 95 percent of these deaths were due to a lack of age appropriate supervision. He affirmed that education could reduce this risk.

3:38:15 PM

MR. PARRISH described slide 10, "Regional Comparison Of Fatal CM-Related Infant Deaths." He compared Anchorage to the rural regions in the state, and pointed out the 50 percent increase of risk for CM related infant death in rural areas. He compared the CM infant death rate of Anchorage to the Interior and stated that there was not a significant difference.

3:39:22 PM

MR. PARRISH indicated slide 11, "Anchorage v. Southwest" and slide 12, "Anchorage v. Gulf Coast," and said that there was not a significant difference in CM infant death rates. He commented that there was a more significant increase for risk.

3:40:04 PM

MR. PARRISH pointed to slide 13, "Southeast v. Anchorage," and said that there was not a significant difference in CM infant death rates.

3:40:23 PM

MR. PARRISH directed attention to slide 14, "Northern v. Anchorage," and expressed that there was nearly three times the CM infant death rate in the Northern regions.

3:40:44 PM

MR. PARRISH summarized the take home points of the data:

> there are independent associated factors that uniquely differ between Alaska Native and non-Native populations, [and] the implications of this is that we can correctly target public health prevention programs directed at evidence based high risk populations, so we can be fiscally responsible with the resources that are given to us, and measure impact with what we're doing with those resources.

MR. PARRISH continued and said:

> Alaska Native infants do have higher maltreatment-related mortality rates relative to non-Natives for all years examined. However, neglect related deaths account for much of this disparity. So, if we focus on the neglect related deaths we will have the largest impact on reducing maltreatment related deaths, and this is most suited for public health intervention, because we can do risk reduction strategies which are relatively cheap and community empowerment can take place.

MR. PARRISH shared that:

where relative to Anchorage/Mat-Su region, the rural regions have significantly higher infant CM related rates. There is a strong need for innovative CM prevention programs in rural Alaska. The programs that currently exist for prevention really aren't suited well for the geography and the rural Alaska regions. We need to be innovative and think of some new approaches to this issue.

3:42:11 PM

MR. PARRISH addressed slide 15, "Why SCAN Is Critical To Public Health Child Maltreatment Prevention," and reiterated that the application of data to prevent CM in high risk populations is an effective use of resources. He called attention to the ability to measure impact over time, and provide evaluative support. He emphasized that it will reduce the burden of CM on servicing agencies.

3:43:45 PM

DR. BALDWIN-JOHNSON presented a PowerPoint and she shared that the current administration supported initiatives to address sexual assault and domestic violence in Alaska. She detailed some of the points in the initiative to include a public education campaign and improvement to the process for investigation and prosecution.

DR. BALDWIN-JOHNSON observed a need for more and better data. She stressed the need to recognize that child victims needed to be handled differently. She pointed out the inconsistencies within the system, from initial response to sentencing, and the statewide need of a training curriculum for forensic interviewing of children, and a child friendly forensic evidence kit.

DR. BALDWIN-JOHNSON called attention to slides 4 - 9, which depicted various age children who were victims of child assault, and she detailed the sentencing meted out for each incident.

3:51:01 PM

DR. BALDWIN-JOHNSON referred to an Anchorage Daily News article about an Anchorage man, who had beaten his dog with a rifle. She pointed out that the sentencing for this animal cruelty was longer than the sentencing for the child maltreatment. She

described the gaps in the current assault laws, which did not differentiate between children and adults.

3:52:54 PM

DR. BALDWIN-JOHNSON analyzed slide 12, "What Do We Need To Do…" and announced that the time was right for changes, and that children needed a voice as they were not able to speak for themselves. She requested funding for new and existing Child Advocacy Centers (CACs), the Child First forensic training program and curriculum in Alaska, and development of a child forensic evidence kit.

3:54:58 PM

DR. BALDWIN-JOHNSON briefed the committee on slide 13, "Statutes: How You Can Help" and asked for: the requirement to use CACs wherever possible to include law enforcement; the clarification of the medical peer review confidentially process; and the evaluation of separate statutes for assault and crimes against children.

3:55:46 PM

DR. BALDWIN-JOHNSON closed her PowerPoint with slide 14, "What the Task Force will do" and explained that the Task Force would complete its Best Practice guidelines for multi-disciplinary teams, sponsor the Alaska Child Maltreatment conference, assist in the development of the child forensic evidence kit, and offer its services as a resource.

3:57:10 PM

SENATOR DYSON opined that the task force was "on track," and he asked if they had the legal researchers to prepare the proposed changes in statute.

3:58:02 PM

DR. BALDWIN-JOHNSON replied that they did not. She shared that the task force had looked at models, but that they needed assistance.

3:58:19 PM

SENATOR DYSON offered his belief that the current administration was sympathetic, and asked if the task force had contacted either the Department of Law (DOL) or the "governor's team."

DR. BALDWIN-JOHNSON replied "not yet."

3:58:40 PM

REPRESENTATIVE LYNN asked about the rationale to the court sentencing, and asked for suggestions to change in statute.

3:59:25 PM

DR. BALDWIN-JOHNSON, in response to Representative Lynn, opined the need for changes in the law and for more judicial education to the long term consequences of CM. She allowed that children could be very challenging witnesses, which made the cases more difficult to prosecute.

4:00:32 PM

CO-CHAIR HERRON asked for examples of the inconsistent application of AS 47.17.033.

MS. KARALUNAS replied that it had been interpreted that only the Office of Children's Services (OCS) use the CACs. She noted that law enforcement could make a decision not to use the CACs, which could result in improper interview techniques.

4:03:04 PM

CO-CHAIR HERRON reflected on the need for prevention and treatment.

4:03:59 PM

SENATOR THOMAS mused on the inequities of the sentences, and opined that legislation as well as the governor's initiative would be necessary.

4:06:40 PM

DR. BALDWIN-JOHNSON replied that CACs were a proven, effective means of service and support in Alaska.

4:07:38 PM

CO-CHAIR KELLER clarified that operating money was available in this year's budget, and Dr. Baldwin-Johnson agreed.

4:08:34 PM

REPRESENTATIVE SEATON opined that the State Troopers had more difficulty with finding CACs due to the remote access of rural communities. He asked if the task force had spoken with the Department of Public Safety (DPS).

4:10:27 PM

DR. BALDWIN-JOHNSON said that they had conversations with DPS, but not the commissioner. She stated that she understood the difficulties which faced the State Troopers.

4:11:46 PM

REPRESENTATIVE SEATON shared his concern that prior to a child's examination, a determination to remove the child had to be made. He suggested that a meeting with the DPS commissioner would be a more effective route for solution.

4:12:51 PM

CHAIR DAVIS returned the gavel to CO-CHAIR KELLER.

4:13:18 PM

There being no further business before the committees, the joint meeting of the House and Senate Health and Social Services Standing Committees meeting was adjourned at 4:13 p.m.

The committee took an at-ease from 4:13 to 4:20 pm.

4:20:42 PM

CO-CHAIR KELLER brought the House Health and Social Services Standing Committee back to order at 4:20 p.m. Representatives Keller, Herron, Seaton, T. Wilson, and Lynn were present at the call to order. Representatives Holmes and Cissna arrived as the meeting was in progress.

4:21:06 PM

CO-CHAIR KELLER announced that SB 101 would not be heard.

HB 89-VOCATIONAL REHABILITATION COMMITTEE

4:21:30 PM

CO-CHAIR KELLER announced that the next order of business would be HOUSE BILL NO. 89, "An Act repealing the governor's committee on employment of people with disabilities; creating the state vocational rehabilitation committee and relating to the committee; and providing for an effective date."

[Before the committee was CSHB 89 (L&C).]

4:22:28 PM

CO-CHAIR HERRON moved to adopt CSHB 89 (L&C) as the work draft. There being no objection, it was so ordered.

4:23:09 PM

PAULA SCAVERA, Special Assistant, Office of the Commissioner, Department of Labor & Workforce Development (DLWD), said that HB 89 would bring compliance with federal law.

4:23:18 PM

CHERYL WALSH, Director, Statewide Programs, Division Of Vocational Rehabilitation, Department of Labor & Workforce Development (DLWD), explained that the state vocational rehabilitation committee would function as the state rehabilitation council and the assistive technology advisory committee, both of which were required by federal law. She explained that the bill also addressed the appointment, the number, the term, and the composition of the committee members. She shared that the committee members acted as the voice for the stakeholders in the public rehabilitation program. She relayed that the primary purpose of the bill was to bring the current statutes into compliance with federal law.

4:27:05 PM

MS. WALSH opined that the committee would provide an external point of view to assess the needs of Alaskans with disabilities, survey customer satisfaction and allow for public comment, review and make recommendations for the policies and procedures, develop the state rehabilitation plan, and keep the program consumer focused.

4:28:35 PM

CO-CHAIR KELLER asked about the concern with tying this to federal regulation.

4:29:27 PM

MS. WALSH, in response to Co-Chair Keller, said that the role of the committee was very specific to oversight of the public program and the assistive technology program.

4:29:56 PM

MS. SCAVERA noted that, when it was introduced three years ago, the language had been changed at the request of the legislature to include "as prescribed by the [federal regulations]."

4:30:42 PM

CO-CHAIR KELLER commented that the federal regulations specified the board composition, and he asked if this was too restrictive.

4:31:41 PM

MS. WALSH said that it allowed business, labor, and industry.

4:32:23 PM

CO-CHAIR KELLER shared his experience with a tour of a rehabilitation center in Minnesota.

4:33:08 PM

MS. SCAVERA noted that DLWD had a broad interpretation for business, to include all sizes.

4:33:45 PM

JOHN CANNON shared that he served on the Governor's Committee on Employment and Rehabilitation of People With Disabilities. He noted that he had worked in the disabilities field in Alaska since 1981. He spoke in support of HB 89. He explained that a purpose of the committee was to maximize employment for Alaskans with disabilities. He emphasized that there was not a fiscal note attached to the bill. He pointed out that the proposed name change would reduce any confusion with a separate governor's council of similar name. He shared that the

Committee had reviewed and discussed HB 89 and were unanimously in support.

4:38:07 PM

PAMELA STRATTON, Director, Client Assistance Program, Governor's Committee on Employment and Rehabilitation of People With Disabilities, offered her support of HB 89, in order to be in compliance with federal regulation.

4:40:01 PM

CO-CHAIR KELLER announced that HB 89 was going to be held over.

4:41:10 PM

ADJOURNMENT

There being no further business before the committee, the House Health and Social Services Standing Committee meeting was adjourned at 4:41 p.m.