

# **Child Advocacy Center – Multidisciplinary Team Advisory Board**

Nydia Monagas, Chair  
John Esmerado, Vice-Chair

**December 7, 2018**  
**1:30 p.m. – 3:30 P.M.**  
**DCF Professional Center**  
**Room 104**  
**30 Van Dyke Avenue**  
**New Brunswick, NJ 08901**

## **Minutes**

### **In Attendance:**

Cristie Bevacqua	Middlesex County Prosecutor's Office
Christine Beyer	NJ Department of Children and Families
John Esmerado	Union County Prosecutor's Office
Nydia Monagas	NJ Children's Alliance
Javier Toro	Hudson County Prosecutor's Office
Jacquelynn Duron	Rutgers University
Maria Vinci Savettiere	Deirdre's House
Elahna Strom Weinflash	Office of the Law Guardian
Debbie Riveros	Monmouth County Prosecutor's Office

### **By Telephone**

Brenda Pollack	Joint Base McGuire-Dix-Lakehurst
Julia Glass	NJ Office of the Attorney General

### **Staff:**

Leida Arce	NJ Department of Children and Families
Joseph Pargola	NJ Department of Children and Families

## **I. Welcome and Introductions**

The meeting was called to order and the Open Public Meetings notice was read.

## **II. Approval of Minutes**

The Board voted to approve the minutes from the October 5, 2018 meeting with the following edits:

-page 1, Brenda Pollock was present at the October 5, 2018 meeting. Elahna Strom Wienflash was also present by telephone.

## **III. New Business**

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## **Review and vote on completed Certification Assessments**

Each member received a copy of the certification assessments that the New Jersey Children's Alliance (NJCA) conducted with the remaining developing centers that were not reviewed at the previous meeting. Joseph Pargola reminded the Board that if any member of the Board was associated with a county that was being reviewed, they must recuse themselves from the discussion and subsequent vote. The following were the results of the discussion and voting for each of the remaining developing centers:

- **Bergen County**

A question was raised about whether Bergen County has a physical building for their CAC. Nydia explained that they have a wing of their prosecutor's office devoted to the CAC.

John Esmerado made a motion to certify Bergen County CAC. The motion was seconded and the Board voted to approve the certification of the Bergen County CAC.

- **Hunterdon County**

Maria Vinci Savettiere asked a question about the certification assessment question which asks whether the developing CAC reaches out to underserved populations. The response provided states that Hunterdon County's response is generally on a case by case basis, but it was unclear what that meant. Nydia explained that Hunterdon County is not currently doing general community outreach but that they will be developing a community assessment plan. Another question was raised regarding their process for non-English speaking clients. Nydia informed the Board that they use a staff person, community translator, or, as a last resort, a language line. The final issue raised was that they stated that their MDT does not have a high-level decision maker at the table. Nydia explained that because they are a very new developing center, they are just developing an advisory board.

John Esmerado made a motion to certify Hunterdon County CAC. Elahna Strom Weinflash seconded the motion. The Board voted to approve the certification of the Hunterdon County CAC.

- **Somerset County**

Maria stated that the biggest deficiency in Somerset County is the lack of a child-focused setting. Nydia explained that they will be applying for funds to develop a child-focused setting through the Child Advocacy Development Grant Capital Request For Proposals (RFP). If they are granted funding through the RFP and do not develop a child-focused setting, they will not be recertified after their next reassessment. John informed the Board that Somerset County developing a CAC is a huge turnaround for them as they have been resistant to the CAC model for many years.

John Esmerado made a motion to certify Somerset County CAC. The motion was seconded. The Board voted to approve the certification of the Somerset County CAC.

## **Discuss Annual Compliance Review**

Each member of the Board was previously provided with a draft of the Annual Compliance Review for CACs. Nydia explained that this document is in line with what was done for the certification assessments but was expanded to include all 10 standards. This is a longer version because it includes all of the components of the National Children's Alliance (NCA) 10 standards for accreditation. Maria asked how this applies to the CACs that are already certified. Nydia stated that all 21 counties will be subject to the review. The years during which the accredited CACs have their site visit through NCA, this review will be replaced by the NCA site visit report.

NJCA will be completing the annual compliance reviews. This allows them to hold CACs more accountable and to be a larger part of the process in providing support, training and technical assistance,

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as needed. Having an annual assessment meeting will allow them to see what each county needs and what they can assist with to fill the gaps. The process will include a staff member from NJCA going to each CAC, observing a case review, and making sure that key people are participating in the review. A concern was raised about quality assurance being that much of the information obtained is “self-report”. Nydia explained that the staff member will visit the site so he/she will observe certain aspects and will be able to complete the forms just by observing the case reviews. John stated that the 5-year accreditation review conducted by NCA is a very lengthy process, so to be able to address structural weaknesses identified by this annual assessment, prior to the NCA review, can be very beneficial.

A question was raised regarding whether there is an inclusion of a client satisfaction review? Nydia informed the Board that there is a client satisfaction review included in the NCA 5-year review and it will be assessed by the NJCA on an annual basis. Client satisfaction surveys are already being offered in some centers as it is easier to obtain information from centers that offer mental health services on site. However, the Board was informed that, in general, it is very difficult to obtain client surveys. NJCA is working with each county to determine what the barriers are and help to address them.

They will also be looking at the forensic interview peer review at least once a year per region. The review will make sure that the staff is trained in Finding Words and make sure that they are collecting data. They will be requiring documentation to help collect more objective data for this process. Nydia asked the Board to make suggestions regarding things that should be added to the review. Maria stated that one thing that will come up during the NCA meeting that may be problematic is peer review for medical providers. Nydia explained that peer review for medical providers only need to occur in those cases where they have a significant finding, which does not occur very often. When a nurse makes a significant finding, they are already having a peer review, so it hasn't been an issue.

Nydia stated that she envisions the summary report that they prepare for this Board, including the challenges and areas for development, to show progress compared to the previous assessment as well as identifying additional areas of strength and development based on the annual compliance review. A question was raised regarding what the process will be if there is an area identified for improvement. Nydia explained that the process will depend on where the CAC is in the development process. For the accredited centers, the identified issue should not be something insurmountable, as they are already accredited. If they are lapsing in some way, NJCA will provide support to bring them back to where they were. For the developing centers, the expectation is that it will take a few years to meet all 10 standards. Regarding associate members, NCA allows 5 years before they get accredited. Much of the process will be funding dependent, so if they don't have the funding to continue development, there won't be significant improvement.

John mentioned that a majority of the cases seen at CACs are sexual abuse cases, but for trauma cases, non-accidental head trauma cases are very difficult to solve. John questioned as to whether there can be two separate peer reviews, one for sexual abuse and one for abusive head trauma. It is a very problematic area where there is no consensus. About a third of our medical examiners don't believe in non-accidental abusive head trauma. It helps, legally, to have a peer review process prior to going to court. It may be difficult to have a peer review process for these cases as these patients are seen by many doctors and specialists. Maria felt that this issue is out of the purview of this advisory board, but stated that perhaps the Board could request further training leading to a peer review process. Perhaps NJCA can offer a training on non-accidental abusive head trauma. Commissioner Beyer felt that it would be helpful to know if some hospitals are called into question more than others, or if there are areas in the state where this is more of an issue. Obtaining this type of data would be beneficial so that training can be provided to them.

NJCA would have to take a role in developing guidelines that are universal so that reports from hospitals are consistent. It may be outside the scope of the CAC-MDT Advisory Board but NJCA might be able to

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hold a symposium on the issue. Another idea that was presented was for Rutgers to evaluate different hospitals and compare reports on similar types of non-accidental vs accidental abusive head trauma and how different hospitals handle them.

The other issue is that the Child Protective Service hearings and Termination of Parental Rights hearings occur at a much faster speed than criminal hearings. The cases are taken into court without having the information that the criminal prosecutor might possess. This may cause a judge to find that no child abuse or neglect has occurred, but the criminal side still has a pending indictment.

Nydia asked for a motion to approve the annual compliance review with the addition of attendance sheets for prior meetings so that we know if there is consistency across meetings. Maria made a motion to approve the proposed draft of the annual compliance review. John seconded the motion. The board voted to approve the annual compliance review.

## **Child Advocacy Development Grants RFP discussion and feedback**

Nydia stated that this was included so that the board could discuss the things that went well with the process, things that it didn't address that they hoped it would address, and whether the RFP was in line with the Board's priorities.

Maria stated that main issues with the RFP and that was that it did not have a cap. Maria stated that the cap for the previous RFP was \$300,000 and the hope was that the cap for this RFP would be up to \$500,000 with at least four awards being given. Maria stated that, for this RFP, if four awards are given and the entire \$4 million is used, existing centers will be ignored. The Board also felt that the treatment RFP should have included more funding. The Board felt that if there is a future RFP, it would need to include more funding for the program piece. This is necessary to ensure that once a CAC has a physical location, staff will be hired to ensure that the CAC remains open.

The Board discussed that there was no cap on this RFP because if there were not enough bids for the capital side or the bids did not meet expectations, the money could be moved to the program side in another RFP. The Board also discussed that just because a center requested a certain amount of funding, does not mean that they will receive that amount. Centers can be awarded a portion of what was requested, so the centers were urged to prioritize their funding requests. If there is a future RFP, the cap for capital funding could be \$750,000.

A question was raised regarding a previous discussion about centers receiving a certain amount of funding and then being eligible for other funding. The Board was advised that no particular amount of funding was necessary to be eligible. The county would need to show sustainability and they need data showing that the community that they are serving fits the federal definition of a family in poverty. As soon as you meet that definition, which every center does, crime victims by definition is the same as a family in poverty, they are able to leverage federal funds.

The Board raised an issue with the turnaround time to apply for funds. Even though the turnaround was 7 or 8 weeks, it was a challenge for some counties because they had to have their quotes together prior to their freeholders meeting. Next time the prosecutor's offices will be more prepared because they have already been through this process. Maria felt that the mandatory bidders conference was very helpful because it keeps people from going off in the wrong direction.

## **Discussion about Training**

Commissioner Beyer stated that at a previous meeting they spoke about Problematic Sexual Behavior-Cognitive Behavioral Therapy (PSB-CBT). At a recent New Jersey Task Force on Child Abuse and Neglect (NJTFCAN) meeting, Richard Stagliano provided a Protection Committee report which included mention of Dr. Martin Krupnick developing a training that is similar to PSB-CBT. DCF has a responsibility to ensure that the system and/or training offerings are not bifurcated, this should not be a competition of

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who gets to implement their training first. Commissioner Beyer stated that, if the trainings are different enough or the populations that they serve are different enough, then it is important to have different models so that we have the full spectrum of resources and counseling. However, if the trainings are the same, then it is important to discuss how we can work together.

Nydia explained that there are significant differences. PSB-CBT is for school age youth, while Dr. Krupnick's program is for adolescents who are adjudicated or trying to avoid adjudication. The population that Dr. Krupnick is trying to reach are in the court process and their record will be expunged if they complete the program. They are using the Multisystemic Therapy (MST) model which is evidence based. PSB-CBT is for 6-12 year old children so it is two different populations.

Nydia stated that she informed the Protection Committee that the NJCA is offering this training. Nydia also informed the Board that she extended an invitation to apply for the training to those on the committee that serve abuse clients. Nydia stated that she has forwarded the whole packet of information to Dr. Krupnick and informed him of the training. Dr. Krupnick is not talking about a collaborative, but a case consultation project similar to what was done years ago. This project included 8-10 clinicians that were working with the youth. They would meet monthly and present cases and talk about their work. He wasn't talking about bringing a full MST training like the PSB-CBT training.

It was felt that it is necessary to make it clear to the Protection Committee the differences between the two trainings and that it in some ways it is more of a continuum of services for the age population rather than a competition.

## **Discuss 2019 Meeting Calendar**

It was explained that the meetings held in 2019 will all be held at the DCF Professional Center. There were no objections to the dates and meeting location. There was a motion to approve the 2019 meeting schedule. The motion was seconded and the Board voted to approve the calendar.

## **IV. Announcements**

John informed the committee that the State is now collecting data about sexual assault and there are new standards for treatment of sexual assault survivors. For the first time, the prosecutor's offices will be collecting data on child, adolescent and adult sexual assaults based on investigations, charges, and convictions. This is a huge shift in how the prosecutors release child abuse data and sexual assault data. It is empirical based, so they can study the issue looking at data from DCF and prosecutor's offices.

## **V. Adjourn**