

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

April 1, 2022
1:30 p.m. – 3:30 P.M.
Virtual Meeting

Minutes

In Attendance:

Christie Bevacqua
Christine Beyer
Jillian Carpenter
Mary Coogan
Jacquelynn Duron
John Esmerado
Martin Finkel
Gladibel Medina
Nydia Monagas
Debbie Riveros
Maria Savattiere
Javier Toro

Middlesex County Prosecutor's Office
NJ Department of Children and Families
Office of the Attorney General
Advocates for Children of New Jersey
Rutgers University School of Social Work
Carella Byrne
CARES Institute
Dorothy B. Hersh Child Protection Center
New Jersey Children's Alliance
Monmouth County Prosecutor's Office
Deirdre's House
Hudson County Prosecutor's Office

Guests:

Peter Boser
Joseph Pargola
Brian Ross

New Jersey Children's Alliance
NJ Department of Children and Families
NJ Department of Children and Families

Staff:

Daniel Yale

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 reviewed the minutes from the February 4, 2022 meeting. Christie Bevacqua made a motion to approve the minutes. Christine Beyer seconded the motion. The Board voted to approve the minutes without edit. Jacquelynn Duron abstained from voting as she was not present at the previous meeting.

III. New Business

Annual Progress Reviews

John Esmerado felt that the format of the Annual Progress Review was improved as the data was segregated differently. John felt that listing the RDTC data next to the CAC data and having more specificity for physical and sexual abuse was very helpful. Dr. Finkel requested that, moving forward, the reviews include the summary information regarding volumes from the previous year or two so that the Board will be able to recognize trends or whether the CAC has improved. Dr. Finkel discussed determining whether the CAC for each specific county had the capacity to meet the needs of their

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

particular catchment area. Dr. Finkel felt that it would be helpful to see the number of investigations completed in each county compared to the number that were referred to the county CAC. Nydia stated that she looked at the New Jersey Child Welfare Data Hub to see if that data was available. Although you can find the data by county for CPS versus CWS, the data for sexual abuse or physical abuse investigations in particular is not available for the year. The data for investigations that were substantiated/established/not established was available unless there were less than 10 cases.

Atlantic County

Maria asked if there were any plans for Atlantic County to include on-site providers or whether they would continue to utilize contracted providers. Pete explained that Atlantic County is just on the verge of completing their independent center. However, if they do plan to offer services on-site, it will still have to be with a contracted provider. They anticipate partnering with local agencies to provide services. Maria also asked who pays for services when the CAC refers to off-site providers. Pete stated that they use grant funding as well as funding from the county government.

John Esmerado made a motion to approve Atlantic County. Maria Savattiere seconded the motion. The Board voted to approve Atlantic County to be eligible for funding.

Bergen County

The Board discussed the relatively low number of sexual abuse investigations in Bergen County when compared with the total population. Maria stated that one way one in which the numbers may be affected is that they are counting the number of children whose case was reviewed by the MDT. That doesn't necessarily capture the number of incidents that were reported as not all cases get to the MDT. Pete stated that he reached out to the NCA to determine their terminology for this measure. New children served is defined as "the multidisciplinary response to child maltreatment". The numbers will vary in different counties because each county MDT may reflect different disciplines. The numbers are different because of different screening processes.

Commissioner Beyer felt that the conversation would benefit from discussion in the child-on-child sexual abuse workgroup as they continue to discuss the system that they want to build and the roles of those involved moving forward. We need to continue to think about the use and collection of data in this workgroup as we are looking toward the future of the system.

Maria made a motion to approve Bergen County. Christie seconded the motion. The Board voted to approve Bergen County to be eligible for funding.

Burlington County

The Board discussed that it was good to see many of the counties are reporting the number of child-on-child sexual abuses cases. Nydia stated that some counties went through their data counted the number of cases while others did not have the capacity to do so. However, as of 2022, all counties and the 4 RDTCs are collecting that data.

Maria felt that Burlington County's numbers had improved from the review last year but was still concerned that they had a low number of children referred for mental health services. Pete stated that, similar to many other counties, their MDT is not gathering that information. In cases where DCPD is involved, the MDT does not refer for services, so they don't collect that data. Nydia noted that in the recommendations section of the review, Pete spoke with Burlington County about tracking and maintaining data.

Jacquelynn Duron made a motion to approve Burlington County. Dr. Finkel seconded the motion. The Board voted to approve Burlington County to be eligible for funding.

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

Cape May County

Nydia reminded the Board that Cape May was reviewed at the previous meeting and was approved pending additional information regarding medical evaluations. Pete informed the members that he reached out to the Cape May CAC coordinator and requested that she reach out to DCPD to obtain information about medical evaluations. Pete was informed that this could not occur because they would have to go through each individual case to obtain the data. Pete spoke with the CAC coordinator about revising their process and a checklist has since been developed to ensure that the data is captured at the MDT meetings.

Maria stated that this is another county that does not offer mental health services onsite. Maria felt that if they are moving to a new practice model where CACs will be responsible for more, it would be helpful to know of the cases receiving mental health services offsite, how many were the responsibility of the CAC, how many were funded by the CAC, and how many were DCPD open cases that were referred to DCPD contracted providers. By collecting this data, the CACs will know what funding is needed to meet the mental health children that are not DCPD involved. The Board discussed that the number of cases in which a county-based CAC would fund mental health services would be extremely low.

Christie made a motion to approve Burlington County. Maria seconded the motion. The Board voted to approve Cape May County to be eligible for funding.

Cumberland County

Cumberland County has great interest in being able to improve services and support. It is a newer CAC with very few staff. The Board discussed that Cumberland County is a good example of why it is necessary to determine what services should be required at CACs and what technical assistance should be provided by this Board or NJCA so that there is more consistency regarding the role of the CAC and MDT. John suggested setting up mentors from long established, well-run CACs with newer CACs or those that are struggling to share information.

Pete pointed out that this is another county that was not previously asking for certain data or updating their system with this data, as DCPD was involved. Dr. Medina asked if there will be a requirement moving forward so that all CACs have an established way to collect data. Pete informed the Board that since all of the CACs are now NCA members, they are required to collect this data and report a majority of this data twice per year. Dr. Medina suggested that the Board set uniform goals that, in order to be approved for funding, each CAC must meet. Debbie suggested that CAC coordinators could create a specific form for case reviews to assist in data collection and consistency.

Maria made a motion to approve Burlington County. John seconded the motion. The Board voted to approve Cumberland County to be eligible for funding.

Essex County

The Board spoke highly of Essex County (Wynona's House) and discussed that their RTC is co-located and all services are provided in-house. The Board discussed the possibility of community-based CACs as the model in the future.

Maria made a motion to approve Essex County. Jacquelynn seconded the motion. The Board voted to approve Essex County to be eligible for funding.

Gloucester County

Maria noted a disconnect between the number of children referred for medical and mental health services. Pete stated that Gloucester County is only reporting the number of cases that they know were referred for services by DCPD.

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

Maria made a motion to approve Gloucester County. Christie seconded the motion. The Board voted to approve Gloucester County to be eligible for funding.

Hudson County

Javier informed the Board that Hudson County CAC will open soon but could not provide a date. Dr. Finkel made a motion to approve Hudson County. Debbie seconded the motion. The Board voted to approve Hudson County to be eligible for funding. Javier abstained from the vote.

Hunterdon County

Dr. Medina informed the Board that from a medical and mental health perspective, Hunterdon County is greatly improved and making sure that families are referred. Jacquelynn made a motion to approve Hunterdon County. Debbie seconded the motion. The Board voted to approve Hunterdon County to be eligible for funding. Javier Toro abstained from the vote.

Mercer County

Dr. Medina felt that Mercer County MDT works very well and the RDTC receives many referrals from their CAC. Maria made a motion to approve Mercer County. Jillian seconded the motion. The Board voted to approve Mercer County to be eligible for funding.

Middlesex County

Dr. Medina stated that the RDTC also receives a good deal of referrals from Middlesex County for both medical and mental health referrals. Dr. Medina informed the Board that the prosecutor is also closely involved with the CAC. John made a motion to approve Middlesex County. Dr. Finkel seconded the motion. The Board voted to approve Middlesex County to be eligible for funding. Christie Bevacqua abstained from the vote.

Monmouth County

Dr. Medina informed the Board that the data listed for Monmouth County for medical and mental health evaluations are provided by the RDTC, but the physical exams are done at Jersey Shore Medical. Christie made a motion to approve Monmouth County. Commissioner Beyer seconded the motion. The Board voted to approve Monmouth County to be eligible for funding. Debbie Riveros abstained from the vote.

Morris County

Maria informed the Board that the data listed is only the statistics that are available from the MDT. Maria state that she knows that there are additional cases, but they do not come through the MDT so this data is not a complete picture of child maltreatment in Morris County. Commissioner Beyer made a motion to approve Morris County. Dr. Finkel seconded the motion. The Board voted to approve Morris County to be eligible for funding. Maria Savattiere abstained from the vote.

Passaic County

Nydia asked for comments or discussion regarding Passaic County. Hearing none, Christie made a motion to approve Passaic County. Debbie seconded the motion. The Board voted to approve Passaic County to be eligible for funding.

Salem County

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

Nydia asked for comments or discussion regarding Salem County. Hearing none, John made a motion to approve Salem County. Debbie seconded the motion. The Board voted to approve Salem County to be eligible for funding.

Somerset County

Dr. Medina informed the Board that the RDTC does not receive as many referrals as they would for medical and mental health, but they are improving. The RDTC has implemented education at all of the MDT meetings to improve the referral rate. Nydia stated that Somerset County has also recently experienced a change in leadership.

Jacquelynn made a motion to approve Somerset County. Maria seconded the motion. The Board voted to approve Somerset County to be eligible for funding.

Sussex County

Nydia asked for comments or discussion regarding Sussex County. Hearing none, Debbie made a motion to approve Sussex County. Jacquelynn seconded the motion. The Board voted to approve Sussex County to be eligible for funding.

Union County

Nydia asked for comments or discussion regarding Union County. Hearing none, Commissioner Beyer made a motion to approve Monmouth County. Jacquelynn seconded the motion. The Board voted to approve Union County to be eligible for funding. John Esmerado abstained from the vote.

Updates

Statewide Data Project

Nydia informed the Board that they are looking to have a report available by the end of April. Once the report is received, it will be shared with the Board for feedback and comments.

Medical Evaluation Referral Workgroup

Nydia informed the Board that one of the goals of this workgroup was to offer their training expertise to DCPD. A meeting was held with staff from the DCF Office of Training and Professional Development and Dr. Silliman-Cohen and Dr. Debellis will be subject matter experts in DCF's update on their child sexual abuse training module. They are also discussing development of a statewide training that all four RDTCs will collaborate on so that there is consistency in the messaging.

Child on Child Workgroup

Commissioner Beyer informed the Board that a large group met one time approximately 6 weeks prior and since that time, there has been a smaller group of 6 to 7 people that represent the RDTCs, CACs, DCF, NJCA, and Prosecutor's Association that have met. The smaller group has been trying to determine what information is needed and so they have been developing survey to be distributed at MDT meetings. Commissioner Beyer and Nydia met with the Prosecutor's Association to discuss financing and challenges regarding payments. A separate survey is being developed to gain further information about this topic as well. There was also conversation about the child on child sexual abuse workgroup with the Prosecutor's Association so that they were aware of the goals of the workgroup.

Child Advocacy Center – Multidisciplinary Team Advisory Board

Nydia Monagas, Chair
John Esmerado, Vice-Chair

In the smaller workgroup, there were discussions about the timeframes in the hopes that recommendations will be available prior to the next budget cycle in October/November. This is also helpful so that all are aware what they would like to accomplish over the next 6 months. Nydia informed the Board that they are also developing a survey to gain information from caregivers who have accessed child on child sexual abuse treatment through DCPD and those who have accessed services on their own to better understand accessibility, payment, availability of services, etc.

IV. Announcements

Nydia announced that NJCA is having a campaign for Child Abuse Prevention Month entitled Shine Hope to raise awareness about child abuse and neglect. On April 11, 2022 the Capital dome will be illuminated in blue for Shine Hope Day.

On April 27, 2022, Camden County CAC will have an open house. If anyone would like to attend, please contact Nydia.

V. Adjourn

Next meeting Friday, June 3, 2022.