We are pleased to announce the first recipients of CAPSAC’s Neal Snyder Outstanding Service Award: Patty Shimek and Kathy Baxter of Partners in Prevention in San Francisco.

Neal Snyder graduated Phi Beta Kappa from UC Berkeley with a BA and MA in sociology, and obtained his JD from Hastings College. As an attorney, he specialized in protecting children from abuse and became a role model for many others in the field. Neal worked for the California State Department of Social Services in day care licensing litigation. He was a co-founder of CAPSAC, drafted its initial bylaws, and assisted with its incorporation. Neal was an intelligent, even-tempered, positive, athletic, and kind man who loved jazz, his wife Yvonne, their annual visits to Thailand, his children, and grandchildren.

Like Neal, Patty and Kathy serve as role models and motivators for the child maltreatment community. They are absolutely dedicated to working to protect children from abuse, and they overcome any obstacles they encounter with the message that “Every Child Deserves a Childhood.”
They operate through Partners in Prevention, developing child abuse safety education and awareness materials and promoting collaboration between professionals, the business community, and the public. They distribute materials to Child Abuse Prevention Councils, Child Advocacy Centers, schools, parents, and professionals across California and beyond. By partnering with professionals (as well as non-professionals), they increase the capacity of a great number of people to become involved in child abuse prevention.

Their previous work has been significant as well. Working closely with Dr. Moses Grossman, Dr. Eliana Gil, and others, Kathy was Director of San Francisco’s Child Abuse Prevention Center for many years. She has served as President of the State Consortium of Child Abuse Councils; Chairperson of the State Advisory Committee on Child Abuse and Project Director of the Region IX Institutional Abuse Project and on several local boards and advisory councils in the Bay Area.

Patty is also a force in a number of regional efforts to bring together colleagues from the private and public sectors to become active in child abuse prevention.

During Child Abuse Prevention Month in April, Partners in Prevention works with the Greater Bay Area Child Abuse Prevention Coalition, the CATTA Centers, and dozens of other organizations to keep prevention efforts focused and moving in the state. Patty hosts an outreach effort at the carwash her family owns on Divisadero Street in San Francisco, handing out hundreds of blue ribbon pins and educational materials to the public.

“The excellent work that Partners in Prevention does is matched only by how uplifting it is to work with them,” says Kris Murphey of CIR, who nominated them for the award. “They make child abuse prevention both meaningful and enjoyable.” Carol Carrillo of the Contra Costa Child Abuse Prevention Council, agrees. “PiP is an important partner in the field of child abuse prevention,” she says. “This award is well deserved!”

The California Professional Society on the Abuse of Children (CAPSAC) established the Neal Snyder Outstanding Service Award in 2019 to recognize professionals who demonstrate extraordinary dedication and efforts on behalf of children. We are grateful to Patty and Kathy
for their dedication to child abuse prevention, and pleased to honor them with this award.

Partners in Prevention can be reached through their website: https://partnersinprevention.org/

Those wishing to submit a nomination for next year’s award should contact CAPSAC’s Award Committee Chair: Toni Cavanagh Johnson, Ph.D. at toni@tcavjohn.com/ +1(626) 817-2142.
Also, watch for the nomination form in the next issues of The Consultant.

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You’re Invited to…

Connect with Colleagues in San Diego!

You are invited to join us for light refreshments Sunday, January 26, 2020 from 4:30 to 6:30 PM in the Royal Palm Terrace of the Town and Country Hotel in San Diego. CAPSAC will award the first recipients of the Neal Snyder Outstanding Service Award: Patty Shimek and Kathy Baxter of Partners in Prevention in San Francisco. CAPSAC will also present the Paul Crissey Award for Outstanding Graduate Student Research to Mayra K. Cazares, MSW, Ph.D. Candidate, University of California, Berkeley. This will be a fun and relaxed opportunity to network with colleagues and to meet leaders from our reception co-hosts, the California Professional Society on the Abuse of Children (CAPSAC), the American Professional Society on the Abuse of Children (APSAC), the Young American Professional Society on the Abuse of Children (YAPSAC), the Academy on Violence and Abuse (AVA), the National Children’s Alliance (NCA), the International Society for the Prevention of Child Abuse and Neglect (ISPCAN), and the Zero Abuse Project (ZAP). All members of these organizations, as well as anyone interested in learning more about them, are welcome to attend. We look forward to seeing you there!
And the Award goes to…

Mayra K. Cazares, MSW, Ph.D. Candidate, University of California, Berkeley, winner of CAPSAC’s Paul Crissey Award for Outstanding Graduate Student Research! Mayra will be presented with the award, which includes a grant of $750 and a one-year paid APSAC membership, by the CAPSAC Board of Directors at the Joint Reception of CAPSAC, APSAC, YAPSAC, AVA, NCAN, ISPCAN, and ZAP held Sunday, January 26, 2020 from 4:30 to 6:30 PM at the 35th Annual San Diego International Conference on Child and Family Maltreatment. Mayra will present a summary and poster of her research, “Why Self-Love & Connectedness Matters: Enhancing Positive Outcomes among Transition-Age Youth”, at the reception. The event marks the 21st year CAPSAC has given this award. Please watch for the study summary to be published in the Spring 2020 issue of The Consultant.

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Training Opportunities…

Forensic Interviews with Non-English-Speaking Families

Join the American Professional Society on the Abuse of Children (APSAC) in San Diego on January 26, 2019, in partnership with the Chadwick Center’s 35th Annual Conference, for a forensic interview institute designed specifically for professionals who work with children and families who speak English as their second language.

To learn more and register, visit us at www.APSAC.org/san-diego

Scholarships are still available! Contact Sue Hardie at suehardie@aol.com for more information.

Professionals are faced with many challenges when interviewing children and their families whose first language is not English. Deciding the language in which to conduct the forensic interview is critical, as is determining when it is necessary to utilize an interpreter. In this institute, participants will learn how to utilize an interpreter properly in a forensic interview and
how to guide an interview with an interpreter, particularly when interviewing children. Presented by Maria Rosales-Lambert

Entrevistas Forenses de Familias que no Hablan Inglés

Los profesionales enfrentan muchos desafíos cuando entrevistan a niños, y sus familias, cuyo primer idioma no es el inglés. Decidir el idioma en el que se llevará a cabo la entrevista forense es fundamental, al igual que determinar cuando es necesario utilizar un intérprete. En este instituto, los participantes aprendan como utilizar un intérprete adecuadamente en una entrevista y como guiar una entrevista con un intérprete, particularmente al entrevistar a niños. Presentado per Maria Rosales-Lambert

Munchausen by Proxy: Clinical and Case Management

An all-day pre-conference to the San Diego International Conference on Child Maltreatment offered by the California Chapter of APSAC (CAPSAC)

Sunday, January 26, 2020 - Institute G: Pacific Salon 3

Town and Country Resort, San Diego, CA

Cost: $200.00 - 7 units CE/CME available

To register: http://www.cvent.com/d/2yqrfg/6X
This all-day workshop provides multidisciplinary guidance for identifying, investigating, and prosecuting fabricated illness in a child. New APSAC Guidelines for Practice will be used to illustrate effective interventions in cases of MBP and Medical Child Abuse. Attendees are encouraged to bring difficult cases for expert consultation. The day will include working in small groups with a disciplinary specialist. In addition, case studies and the experiences of an adoptive family of a victim of MBP will be shared. There will be opportunities for expert consultation on cases brought by attendees, as well as resources for ongoing professional support.

**Presenters:** Mary Sanders, PhD; John Stirling, MD, FAAP; Bill Waybourn, Sheriff, Tarrant Co. TX; Michael Weber, BS; Beatrice Yorker, JD, RN, MS, FAAN.

**For more information**, go to [https://www.chadwickcenter.com/conference/](https://www.chadwickcenter.com/conference/)

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Zealously Protecting the Youngest Crime Victims:

The Strength of Child Abuse Multidisciplinary Teams

by Kathy Cady

Child abuse is an insidious crime, the investigation of which requires a coordinated effort to keep children safe, hold offenders accountable, and zealously protect the youngest crime victims. While child abuse investigations are confidential, the investigating agencies are statutorily permitted to share information. Cross-reporting abuse allegations is mandatory between child welfare agencies, law enforcement, and district attorney’s offices. Cross-reporting may be effectuated by Internet-based reporting. Each county must develop and implement cooperative arrangements between law enforcement and child welfare agencies to investigate child abuse allegations pursuant to Penal Code section 11166.3(a), so it should come as no surprise that a multidisciplinary team (MDT) approach for child abuse cases is a best practice. This article discusses five multidisciplinary models: Children’s Advocacy Centers, Family Justice Centers, Sexual Assault Response Teams, Suspected Child Abuse and Neglect Teams, and Child Death Review Teams.

A Brief Overview of MDTs

A multidisciplinary response to child abuse allegations typically includes

A prosecutor in Los Angeles County since 1989, Kathy Cady recently retired as the deputy-in-charge of the Victim Impact Program, overseeing DDAs who vertically prosecute cases involving adult sexual assault, physical and sexual abuse of children, elder abuse, family violence, stalking, and hate crimes.
representation from law enforcement, child protective services, prosecution, mental health, medical personnel, and victim advocacy professionals. The purpose of MDTs and interagency collaboration is to coordinate intervention and share information that optimizes results and reduces potential trauma to children and their families. Every agency may have a slice of knowledge about the child and family, but when the information is shared, a fuller picture emerges. A multidisciplinary response also improves services, while preserving the rights and obligations of each agency to pursue their respective mandates. Multidisciplinary responses, particularly when provided in a neutral, child-focused setting, are associated with less anxiety, fewer interviews, increased support, and more appropriate and timely referrals for needed services.

Sometimes these MDTs are co-located. The “Team” for each of these MDTs are often made up of the same agencies and individuals. The core team members always include law enforcement, prosecution, and child welfare agencies.

Counties may also have specific MDTs that collaborate to protect children and hold offenders accountable for children who are commercially sexually exploited children and/or abducted, although these models are not addressed in this article.5

The California Children’s Justice Act Task Force (CJA) is dedicated to improving the investigation and prosecution of child abuse crimes in California. To that end, this multi-agency task force developed the Minimum Standards Protocol (MSP) for the Investigation of Child Abuse and Neglect. The MSP identifies the key concerns and issues that should be addressed when developing a written investigative protocol for child abuse cases.

Experience has shown throughout the state of California that multi-disciplinary and multi-agency responses to a specific population are improved and enhanced when the partners are cooperating. A written county protocol can help initiate such cooperation. There are several advantages to a written protocol for the investigation of child abuse and neglect. First, the very process of developing the written document builds cooperation and support among the key players. A written document formalizes what is already working well within a county or region and allows for a clear understanding of the practices and procedures agreed upon. A written protocol also survives the inevitable change in personnel in the key agencies affected by the protocol. Lastly, a written protocol facilitates training.[6]
Children’s Advocacy Centers

A children’s advocacy center (CAC) is a child-friendly facility [that provides a coordinated, evidence-based response by] in which law enforcement, child protection, prosecution, mental health, medical, and victim advocacy professionals work together to investigate abuse, help children heal from abuse, and hold offenders accountable.\[7\]

A CAC’s mission is to protect the child, provide justice, and promote healing. The rst CAC was established in 1985 in Huntsville, Alabama. CACs are modeled on the simple but powerful concept of coordination between community agencies and professionals involved in the intervention system.

The National Children’s Alliance (NCA) is the national association and accrediting body for CACs. NCA has been providing support, technical assistance, and quality assurance for CACs, while serving as a voice for abused children for more than 25 years.\[8\] The American Bar Association (ABA) endorses the use of CACs.\[9\] Today, there are over 850-member CACs in all 50 states. Each CAC is designed to meet the unique needs of the particular community in which it is located.

Children’s Advocacy Centers of California (CACC) is the accredited state chapter of NCA and is dedicated to helping local communities respond to allegations of child abuse in ways that are effective, efficient—and puts the needs of child victims rst. CCAC provides support, advocacy, training, technical assistance, and leadership to local child advocacy centers and multidisciplinary teams throughout California responding to reports of child abuse and neglect.\[10\]

NCA-accredited advocacy centers must meet all of the following standards:\[11\]

1. Multidisciplinary Team
2. Cultural Competency and Diversity
3. Forensic Interviews\[12\]
4. Victim Support and Advocacy
5. Medical Evaluation
Family Justice Centers

Pursuant to Penal Code section 13570(c), family justice centers (FJCs) are defined as:

multiagency, multidisciplinary service centers ... [that] provide services to victims of domestic violence, sexual assault, elder or dependent adult abuse, or human trafficking from one location ... to reduce the number of times victims must tell their story, reduce the number of places victims must go for help, and increase access to services and support for victims and their children.

The involved agencies may include law enforcement, medical, prosecution, victim advocates, domestic violence shelters, rape crisis centers, child protection, legal services, and others. The core concept is to provide one place where victims can go to talk to an advocate, plan for their safety, talk with a police officer, meet with a prosecutor, receive medical assistance, receive information on shelter, and get help with transportation. Some FJCs and CACs are co-located.

The Family Justice Center Alliance (FJCA), a program of Alliance for HOPE International, focuses on developing and supporting multiagency collaboratives and multidisciplinary models where victims of domestic violence, sexual assault, elder abuse, human trafficking, and other forms of violence can come to one place for services. FJCA also sets standards for affiliated centers.

[Their mission is] to create a network of national and international Family Justice Centers and Multi-Agency Centers with co-located services, close working relationships, shared training and technical assistance, collaborative learning processes, coordinated funding assistance, and transformational leadership.

To this end, the FJCA provides technical assistance and resources for communities around the world ... and serves as the technical assistance and training provider for the United States Department of Justice for federally funded Centers.
The FJC model has been identified as a best practice in the field of domestic violence intervention and prevention services by the United States Department of Justice. The documented and published outcomes of Family Justice Centers include: reduced homicides; increased victim safety; increased autonomy and empowerment for victims; reduced fear and anxiety for victims and their children; reduced recantation and minimization by victims when wrapped in services and support; increased efficiency in collaborative services to victims among service providers; increased prosecution of offenders; and dramatically increased community support for services to victims and their children through the family justice center model.\(^{[16]}\)

**Sexual Assault Response Team (SART)**

SART is a coordinated, interdisciplinary intervention model between law enforcement, the crime lab, the prosecution, medical providers, and advocacy experts to meet the forensic needs of the criminal justice system and the medical and emotional needs of sexual assault victims, including children.\(^{[17]}\) A SART’s mission is to counter the experience of sexual assault with a sensitive and competent multidisciplinary response, support efforts restoring the victim’s well-being, and bring responsible person(s) to justice.

Pursuant to Penal Code section 13898.1(a)–(b), each SART may consist of law enforcement, district attorney’s offices, rape crisis centers, sexual assault forensic examination teams, crime laboratories, child protective services, victim and witness assistance centers, forensic interview centers, as well as others. The components of a SART exam include obtaining a detailed history of events; documenting physical injury; collecting forensic evidence, including DNA and trace evidence; treating the victim; referring the victim to specialists; and counseling.\(^{[18]}\) SART teams meet on a regular basis for case review and may be co-located at a CAC or FJC.

“Established by California Penal Code [section] 13823.93, the California Clinical Forensic Medical Training Center (CCFMTCT) was established by state law in 1995 to increase access by victims of interpersonal violence to trained nursing and medical professionals.”\(^{[19]}\) California Sexual Assault Forensic Examiners (Cal SAFE) was formed to support examiners, legislate, and improve care for victims. Cal SAFE serves as a network of forensic medical providers working to advance
evidence-based forensic science and establish the highest standard of care through education, peer review, and mentoring. The Office for Victims of Crime has many resources for SARTs and provides guidance on best practices.20 The Los Angeles County Department of Health has also developed SART center standards.21

Suspected Child Abuse and Neglect (SCAN) Teams

SCAN teams are comprised of child abuse medical experts, hospital social workers, children’s social workers, law enforcement, prosecutors, and local child advocacy groups and other service providers.22 SCAN teams meet at hospitals on a regular basis to discuss suspected child abuse cases. Their main objective is to review cases of child abuse and neglect, emphasizing identification, assessment, and treatment planning. Medical professionals provide expert opinions on the causes of injuries and treatment; social workers provide family history and dependency proceeding status; law enforcement provides investigation updates; prosecutors provide information about legal issues; and advocates discuss service options. The team also examines ways to prevent any additional abuse or neglect to the child and siblings in the home.

Child Death Review Teams

Pursuant to Penal Code section 11174.32(a):

Each county may establish an interagency child death review team to assist local agencies in identifying and reviewing suspicious child deaths and facilitating communication among persons who perform autopsies and the various persons and agencies involved in child abuse or neglect cases. Interagency child death review teams have been used successfully to ensure that incidents of child abuse or neglect are recognized and other siblings and nono ending family members receive the appropriate services in cases where a child has expired.

Subdivision (c) outlines the team members from the following elds:

1. Experts in the eld of forensic pathology.

2. Pediatricians with expertise in child abuse.

3. Coroners and medical examiners.
Conclusion

Coordination and collaboration of child abuse investigations is best practice, and there are several statutes that allow for information sharing among members of a multidisciplinary team. When agencies share information on children and families, a fuller picture of the child emerges. This holistic approach allows each agency to follow their own mandate to protect the child, investigate the allegations, hold offenders accountable, and provide important services to the victim and non-offending family members. Using a multidisciplinary team approach is the most effective way agencies that prosecute crimes against children can work together to keep children safe.

Author’s Note: Thank you to the Los Angeles County District Attorney’s Office Victim Impact Program Child Abuse Multidisciplinary Team Coordination Subcommittee for their contributions to this article and their incredible dedication to protecting children and holding offenders accountable.

ENDNOTES

1. For the purposes of this article, “child abuse” is broadly defined and includes physical abuse, sexual abuse, neglect, endangering (including children who witness domestic
violence), human trafficking, child abduction, and victims of child pornography

2 Pen Code § 111675(a)–(b); Welf & Inst Code §§ 827; 830 Welfare & Inst Code § 18951(d) define multidisciplinary personnel as: “a team of three or more persons who are trained in the prevention, identification, management, or treatment of child abuse or neglect cases and who are qualified to provide a broad range of services related to child abuse or neglect. The team may include, but need not be limited to, any of the following:

1. Psychiatrists, psychologists, marriage and family therapists, clinical social workers, professional clinical counselors, or other trained counseling personnel
2. Police officers or other law enforcement agents
3. Medical personnel with sufficient training to provide health services.
4. Social workers with experience or training in child abuse prevention, identification, management, or treatment
5. A public or private school teacher, administrative officer, supervisor of child welfare and attendance, or certificated pupil personnel employee
6. A CalWORKs case manager whose primary responsibility is to provide cross-program case planning and coordination of CalWORKs and child welfare services for those mutual cases or families that may be eligible for CalWORKs services and that, with the informed written consent of the family, receive cross-program case planning and coordination.

Pen Code § 11166(j)–(k)

Pen Code § 1116602 In 2009, Los Angeles County began Internet-based cross-reporting between all law enforcement agencies, the Department of Children and Family Services, and the district attorney’s office which is referred to as eSCARS.

5. The California Governor’s Office of Emergency Services (Cal OES) has a Child Abduction Task Force whose mission is to reduce the risk and incidence of child abduction and increase the effectiveness of a multidisciplinary response by enhancing skills, knowledge, and awareness of child abduction [http://www.caloes.ca.gov/cal-oes-divisions/grants-management/criminal-justice-emergency-management-victim-services-grant-programs/task-forces-committee-councils] (accessed May 9, 2019)

6. [https://cirinc.org/catta/resources.html] (accessed May 9, 2019); Minimum Standards Protocol Checklist [pdf]

7. [https://www.cacc-online.org] (accessed May 9, 2019)
Prosecutors may elect to have the law enforcement of cer testify for the child at a preliminary hearing when a child has previously participated in a recorded forensic interview that has been recorded. Some reasons for this may include minimizing trauma to the child and minimizing inconsistent statements. Recorded forensic interviews may also be admissible at jury trial. Evid Code § 1360 provides that in any case when a child under the age of 12 has made a statement describing any act of child abuse or neglect, the statement is admissible once the child testifies. All forms of sexual and physical abuse are covered under the definitions referenced in Pen. Code §§ 273a, 273d, 288.5, 111651 or 111652.

Pen Code § 13750(c)(1)–(14) is the authorizing legislation for establishing a SART Program.
. 18 Pen Code § 138982 sets forth the objectives of a SART Program:

“(a) Review of local sexual assault intervention undertaken by all disciplines to promote effective intervention and best practices

(b) Assessment of relevant trends, including drug-facilitated sexual assault, the incidence of predatory date rape, and human sex trafficking.

(c) Evaluation of the cost-effectiveness and feasibility of a per capita funding model for local sexual assault forensic examination teams to achieve stability for this component of the SART program

(d) Evaluation of the effectiveness of individual agency and interagency protocols and systems by conducting case reviews of cases involving sexual assault

(e) Plan and implement effective prevention strategies and collaborate with other agencies and educational institutions to address sexual assault perpetrated by strangers, sexual assault perpetrated by persons known to the victim, including, but not limited to, a friend, family member, or general acquaintance of the victim, predatory date rape, risks associated with binge alcohol drinking, and drug-facilitated sexual assault”

. 19 <https://www.ccfmtc.org/> (accessed May 9, 2019)

. 20 <https://ovc.ncjrs.gov/sartkit/index.html> (accessed May 9, 2019)


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