

Serving Champaign and Ford Counties

Protocol for the Multidisciplinary Investigation of Child Sexual and Physical Abuse



Revised and Board Approved March 23, 2023

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PREFACE AND COOPERATIVE AGREEMENT:

We, the undersigned agencies, by and through our directors/administrators, and through our designated representatives, agree to the following policy supporting the Champaign County Children's Advocacy Center, which will be referred to henceforth as CAC or "the Center."

As directed in the Children's Advocacy Center Act, 55ILCS8 et. Seq, we are supportive of a childoriented program, with a multidisciplinary team approach being utilized in the investigation, assessment, referral for prosecution, and medical/mental health treatment involving child victims of sexual or serious physical abuse.

Each of the undersigned agencies has specific responsibilities with regards to the investigation, assessment, referral for prosecution, and medical/mental health and treatment of cases of child sexual and serious physical abuse and human trafficking. We agree to support the concepts and adhere to the guidelines as outlined. We note that, on occasion, exceptions to the guidelines will be necessary, and at such times exceptions will be granted with the agreement of all parties involved.

We, the undersigned, acknowledge that the multidisciplinary team approach, through the institution of the CAC, serves to enhance the individual efforts of each agency. We acknowledge that through these respective agencies, and through public support and awareness, the CAC unifies our community in the daily struggle to ensure the protection and preservation of the children of Champaign and Ford Counties.

Child Forensic Interviews will be conducted at the Champaign CAC, when at all possible, at a minimum of 75% of the time, and the CAC Family Advocate will work with the family through the interview process and afterwards. Additionally, Ford County investigators will be invited to attend the monthly Multi-Disciplinary Team Case Review meetings, except for months in which there are no Ford County cases to discuss.

GENERAL PROVISIONS:

- 1. Each agency works with and assists the others and the CAC to ensure that the best interests and protection of children are served.
- 2. All reasonable efforts are made by each agency to coordinate each step of the investigation/assessment process in order to minimize the number of interviews and interviewers to which the child is subjected, thus reducing the potential trauma to the child.
- 3. All agencies are invited and encouraged to attend training sponsored by the CAC. The CAC will provide annual training opportunities for professionals and volunteers focused on issues relevant to investigation, prosecution, and service provision for children and their non-offending caregivers.

- 4. It is expressly understood that each agency works within its departmental mandates and policies. Nothing contained herein supersedes the statutes, rules or regulations governing each agency. To the extent that any provision of this agreement is inconsistent with any such statute, rule or regulation, the statute, rule, or regulation prevails.
- 5. All agencies/organizations collaborating with the CAC agree to provide trained professionals with skills in interviewing, assessment, and investigation to handle cases of child sexual and serious physical abuse. At a minimum, any professional in the role of a forensic interviewer must have initial and ongoing formal forensic interviewer training that is approved by the National Children's Alliance.
- 6. Agencies/organizations participating as members of the multidisciplinary team will share and receive pertinent case information in a timely manner and in adherence to relevant state laws. To enable the MDT to respond to the immediate and ongoing needs of the child, caregiver, family every effort will be made to gain informed consent from the legal guardian of the child clients with appropriate parameters on the scope and timeframe of said consent.

MISSION STATEMENT:

The mission of the Champaign County Children's Advocacy Center is to coordinate a timely, comprehensive, and multidisciplinary response to child sexual abuse and serious physical abuse allegations in a safe, agency-neutral, child-focused setting. The CAC facilitates and coordinates forensic interviews, makes medical and treatment referrals, and assists with any consequent legal proceedings in an effort to protect and support the children it serves, and their families. The CAC also assists in coordinating education and prevention services.

PHILOSOPHY:

Each child and his/her family have an inherent right to be treated with respect and dignity.

- 1) Child abuse is a problem in this community, and the community is responsible for addressing the issues of education, detection, treatment, and prevention.
- 2) No single agency, individual or discipline possesses the necessary knowledge, skills, and resources to provide all of the assistance needed by abused children and their families. Combining the experience and professional knowledge of the Illinois Department of Children and Family Services, local law enforcement agencies, prosecutors, medical and mental health professionals, and victim advocacy programs provides more effective and efficient handling of these cases.
- 3) The best interest of each child is foremost in all recommendations related to a multidisciplinary response.
- 4) Child victim or witness interviews are conducted by a specially trained interviewer in a neutral and child-focused setting.

ROLES OF PARTICIPATING AGENCIES:

The following agencies provide the members of the multidisciplinary teams that conduct and assist with investigations of allegations of child sexual and serious physical abuse:

The Illinois Department of Children and Family Services (DCFS) is the state agency mandated to investigate reports of child abuse and neglect, including all allegations of sexual and serious physical abuse of children by family members or caretakers. In all cases, DCFS is required to ensure that the child is in a safe environment and, if not, to take appropriate action. DCFS operates the State Central Register, which provides a toll-free number for reporting child abuse.

Law enforcement agencies are established by law to protect the communities they serve through conscientious enforcement of the criminal laws. They are equipped to receive reports of criminal violations, to conduct investigations, and to identify and apprehend alleged offenders. They are also equipped to provide for the safety of victims and witnesses, collect, preserve, and present evidence to the appropriate authorities, and provide cooperation and assistance to other agencies.

The State's Attorney's Office prosecutes violations of the criminal law and cases of child abuse and neglect.

Mental health agencies provide assessments/evaluations and behavioral health treatment and recommendations to victims and their families.

Hospitals and physicians provide appropriate medical evaluations, which may include history, examination, diagnostic studies, and treatment of victims by physicians and other medical personnel with specialized training in child sexual abuse and physical abuse cases.

Victim Advocacy is provided to victims and their families through the CAC's Family Advocate and other area advocacy programs throughout the investigation and subsequent legal proceedings.

ELIGIBLE CASES:

The Champaign County CAC facilitates a multidisciplinary response to all allegations of sexual abuse and serious physical abuse of minors under the age of 18 who live in, have lived in, or who are currently located in Champaign or Ford Counties.

The decision of whether an allegation of physical abuse is serious enough to warrant CAC involvement is determined by the investigator(s).

Cases involving an alleged victim who is of the age when he/she can ordinarily consent to sexual activity under the law, and where the alleged offender is not a family member or in a position of trust, authority, or supervision in relation to the victim, fall outside of the CAC Protocol, even though the victim is under 18 years of age.

Eligible allegations follow the DCFS Rule 300 classification. (Abuse numbers are under 50/Neglect numbers are over 50.)

Allegations Eligible for CAC response:

Sexual Abuse allegations (abuse only):

- 18 Sexually Transmitted Diseases
- 19 Sexual Penetration
- 20 Sexual Exploitation
- 21 Sexual Molestation
- 22 Substantial Risk of Sexual Injury
 - A: Sex offender has access;
 - B: Alleged Perpetrator has access;
 - C: Sexualized behavior of a young child;
 - D: Member of household possesses child porn;

Human Trafficking of Children allegations are eligible for CAC response (abuse or neglect):

40/90	Human Trafficking of Ch	hildren

Physical Abuse allegations (abuse and/or neglect)

1/51	Death
2/52	Head Injuries
4/54	Internal Injuries
5/55	Burns
6/56	Poison/Noxious Substances
7/57	Wounds
9/59	Bone Fractures
10/60	Substantial Risk of Physical Injury (Abuse)/Environment
	Injurious to Health and Welfare (Neglect)
11/61	Cuts, Bruises, Welts, Abrasions and Oral Injuries
12/62	Human Bites
13/63	Sprains/Dislocations
14	Tying/Close Confinement
15/65	Substance Misuse
16	Torture
17/67	Mental and Emotional Impairment

In compliance with National Children's Alliance accreditation standards, Interviews with alleged adult perpetrators (age 17 and over) are not conducted at the Center <u>and</u> alleged perpetrators are not allowed on CAC premises for any reason whatsoever.

REFERRAL AND NOTIFICATION PROCEDURES:

When a law enforcement agency receives a report of child sexual abuse, child victims of human trafficking, or serious physical abuse of a child under the age of 18 by a family or household member, guardian, caretaker, or paramour of a parent or guardian, that agency forwards the information to the **DCFS Child Abuse Hotline (1-800-252-2873)** as soon as possible.

When DCFS receives a report of sexual abuse or serious physical abuse of a child under the age of 18, DCFS forwards that information to the law enforcement agency having jurisdiction over the matter as soon as possible. DCFS also provides to the CAC the SACWIS (Statewide Automated Child Welfare Information System) client record number assigned by the State Central Register for Champaign County cases containing Level #1 allegations of child sexual or physical abuse.

An Assistant State's Attorney is available for consultation concerning legal issues during the entire investigative process.

Except when impracticable due to the circumstances of a particular case, if the initial investigation by DCFS or a law enforcement agency indicates that a child has been the victim of sexual abuse or serious physical abuse, that agency contacts the CAC and schedules a time for a forensic interview of the child at the Center with the assistance of the multidisciplinary team. Interviews are scheduled in a timely fashion through the CAC staff, which notifies the other members of the multidisciplinary team as defined by the needs of the case. The make-up of the multidisciplinary team is case specific and varies from case-to-case.

The lead investigator will assess the need for interpreter services during the initial contact with the family. The lead investigator will share this information with the CAC staff member when scheduling an interview. The investigative agencies will work together to ensure interpreter services are provided to the child victim and/or caregiver in their native language throughout the life of the case. It is the expectation of agencies that any interpreter brought to the CAC will have obtained a background check including a DCFS CANTS (child abuse and neglect tracking systems) clearance.

Except where necessitated by the circumstances of a particular case, investigating agencies do not conduct lengthy or comprehensive investigatory interviews of victims of child sexual or serious physical abuse other than at the CAC and with the assistance of the multidisciplinary team.

In the event that a comprehensive investigatory interview with a child victim occurs outside the CAC, it is the responsibility of the responding agency or department to contact the CAC within 24 hours. The responding agency or department provides the Center with pertinent case information so that CAC services for the child and their non-offending family members can be initiated.

CONTACTING THE CHILDREN'S ADVOCACY CENTER STAFF:

CAC staff can be reached during normal working hours (Monday -Friday from 8:00 a.m. to 4:30 p.m.) at **(217) 384-1266**. Kari Miller, CAC Executive Director, is accessible at all times at **(217) 552-6848**. After normal working hours, members of the multidisciplinary team have been instructed to contact Kari Miller, who will contact CAC staff and arrange for the interview to take place as appropriate.

INTERVIEW PROCEDURES:

The CAC is used at all times unless it is determined by law enforcement and/or DCFS that it is more appropriate to conduct an interview at another suitable location. Safety of the child shall always be an overriding consideration. The CAC is used when the preliminary investigation determines that a comprehensive investigatory interview is appropriate.

In cases being jointly investigated by DCFS and law enforcement, the investigators will jointly make the decision regarding who will conduct the forensic interview of the child. In all other cases, the investigator from the law enforcement entity having jurisdiction over the case will make the decision regarding who will conduct the forensic interview. The CAC will ensure that any forensic interviewer conducting interviews at the CAC has completed training from the National Children's Alliance list of approved forensic interview trainings.

Forensic interviews are conducted by a single certified forensic interviewer, while other members of the multidisciplinary team with investigative responsibility observe the interview by audio/visual transmission in a separate room.

Observers of forensic interviews are limited to law enforcement officers, Assistant State's Attorneys, DCFS personnel, and personnel from agencies contracted by DCFS to provide foster care case management services (e.g., Center for Youth & Family Solutions, Lutheran Social Services, Bethany Christian Services, etc.).

At the discretion of the multidisciplinary team, persons serving internships with the aforementioned departments/agencies, as well as interns for the CAC, are permitted to observe interviews. Attorneys are permitted to observe forensic interviews at the CAC of any child for whom they have been appointed *guardian ad litem*.

The child being interviewed is informed that the interview is being video and audio recorded and other professionals in another room are monitoring the discussion. The parent/caregiver is informed of this as well.

Parents/caretakers of children interviewed at the Center, attorneys for non-offending parents/caretakers, attorneys for suspects, Court Appointed Special Advocates (CASAs), mental health professionals, medical personnel, and victim advocates are not permitted to participate in or observe forensic interviews at the CAC. At the discretion of the multidisciplinary team, non-offending parents/caretakers, CASAs, Assistant State's Attorneys, mental health professionals, medical personnel, and victim advocates in pre-and/or post interview meetings.

Because forensic interviews are not conducted in a confidential setting, notes taken during the interview are not privileged or confidential and are subject to discovery and disclosure in any legal action, civil or criminal, to which the interview may be relevant. Law enforcement and DCFS personnel are to comply with their respective departmental protocols for the retention and/or destruction of notes and records.

The interviewer consults with members of the multidisciplinary team before the forensic interview to clarify the matters to be discussed in the interview. Whenever possible, the interviewer and members of the multidisciplinary team meet immediately after the conclusion of the interview to discuss and coordinate plans for additional investigation as well as appropriate treatment referrals for the child and his/her family. Multidisciplinary team (MDT) members are encouraged to suggest issues addressing CAC procedures and operations at pre and post interview meetings, during monthly case review meetings or during the annual MDT member satisfaction survey.

INFORMATION SHARING:

The CAC shall ensure caregivers sign a consent, so the permission is obtained for information sharing among MDT members. Information sharing is imperative during the scheduling of the forensic interview, conducting the forensic interview and during the pre and post forensic interview meetings. Information sharing is also the heart of the MDT case review meetings. All MDT members need information to complete their investigations and respective assessments and evaluations. Every effort will be made to avoid unnecessary duplication of information gathering from the child and caregiver.

CAC-BASED CHILD FORENSIC INTERVIEWER:

The CAC shall employ a Child Forensic Interviewer (CFI). The CFI will possess all required credentials and professional experience, including documented completion of a course in child forensic interviewing and ongoing training in accordance with accreditation standards. The CFI will conduct child forensic interviews at the request of the case investigators. The CFI may meet with family members before and after the interview, if requested to do so by the investigators.

The CFI will complete documentation as required by accreditation standards, the Champaign County State's Attorney's Office, and the CAC Executive Director. In addition, the CFI will participate in court and legal processes as requested.

The CFI acts as a member of the Multidisciplinary Team (MDT), attends MDT case review meetings, and, if requested to do so, may observe and comment upon forensic interviews conducted by other team members.

The CFI will participate in continuing professional education including, but not limited to, submitting recorded interviews and attendance at peer reviews on a regular basis. The Governing Board of the CAC will commit to assuring that there are a sufficient number of trained child forensic interviewers, spread among the associated investigatory agencies, to conduct child forensic interviews in the absence of the CAC-based CFI.

RECORDING OF INTERVIEWS:

All forensic interviews of children ages 17 and under conducted at the CAC are audio and visually recorded to provide an accurate record of the child's behavior and statements as well as to

document that the interview techniques used were appropriate and legally sound.

CAC staff ensures proper functioning of the recording equipment prior to the start of the interview. The recording begins before the child and the forensic interviewer enter the interview room and recording continues until the child and the forensic interviewer have exited the interview room. Upon completion of the interview, the compact disc recording is tendered to the investigating law enforcement agency. Law enforcement agencies follow all statutory requirements as well as their respective departmental procedures for tagging, logging and storing evidence. The integrity and confidentiality of recordings produced are preserved and protected in the same manner as other pieces of evidence obtained during the investigation. Two additional copies of the interview are provided to the investigating law enforcement agency for submission to the State's Attorney's Office, upon request. The CAC is not responsible for transcription of the recorded interview. The law enforcement agency receiving the recording of the interview conducted at the CAC is required to acknowledge receipt of the recording, in writing. The signed acknowledgment is retained in the appropriate CAC client file.

The CAC does not retain a copy of the interview and the interview is automatically deleted from the recording system's computer hard drive thirty (30) days following completion of the interview.

In the event that there is a need for other members of the multidisciplinary team to access the recording, team members will contact the State's Attorney's Office or the investigating law enforcement agency to request and schedule access to the recording. Any individuals not able to be present during the forensic interview will be debriefed by the Multidisciplinary Team Coordinator to avoid unnecessary duplication of effort.

EXPANDED/MULTI-SESSION FORENSIC EVALUATIONS/INTERVIEW (EM-SFE):

The investigative entities along with the forensic interviewer will determine if there is a need for an EM-SFE. If the team determines that there is a need for an EM-SFE, the interviewer will adhere to the same protocol for which he/she was trained. The same recording, reports, and record storage protocols will apply to all EM-SFE. The evaluation will take place over several interviews, as needed, for a thorough and complete interview. This may be shortened or lengthened as necessary for the comfort of the child.

An Extended Forensic Evaluation may be considered for the following reasons:

- Children who are developmentally delayed
- Children who have cognitive deficits
- Children who were emotionally unable to provide adequate information
- Children who are very young
- Children who have multiple traumas to report
- Children who have a discrepancy between their initial interview and their medical evaluation

RECORD OF THE INTERVIEW:

As soon as possible following the conclusion of each forensic interview, a representative of the law enforcement agency having jurisdiction over the case or a representative of the Department of Children and Family Services who conducted or observed the interview completes a Record of the

Interview form. That Record identifies the name, date of birth, address, parent(s)/guardian(s) of the child interviewed and their addresses. The Record also identifies the person conducting the interview and all persons who observed the interview, as well as the time, date, and place of the interview. Additionally, the Record identifies the person(s) alleged to have committed any act of child sexual or serious physical abuse and the name(s), date of birth, and parent(s)/guardian(s) of all alleged victims, if different than or in addition to the child interviewed. The summary of the interview is completed by the lead investigative entity.

The original Record of the Interview is retained by the CAC in the appropriate client's file. Copies are provided to participating agencies involved in the case as requested.

CASE REVIEWS/MULTIDISCIPLINARY TEAM MEETINGS:

In accordance with the CAC's philosophy of promoting a team approach to the investigation and prosecution of child abuse cases and collaboration in addressing the needs of children and families served by the Children's Advocacy Center, the CAC conducts monthly Multidisciplinary Team (MDT) Case Review meetings in order to facilitate a process in which professionals work together more effectively and efficiently. Meetings are held at the Urbana DCFS Field office located at 508 S. Race Street, Urbana, IL.

The CAC shall employ a Multidisciplinary Team Coordinator (MDT Coordinator) who is responsible for the coordination of case review/team meetings, training of new MDT members, and statistical tracking for case coordination and funding agencies.

MDT meetings are held at noon on the first Tuesday of each month unless otherwise noted at the Urbana DCFS Field office located at 508 S. Race Street, Urbana, IL. The CAC Multidisciplinary Team Coordinator prepares the agenda and notifies Team members of the cases scheduled for review approximately one week prior to the meeting date. All open cases are subject to review; however, all cases opened within the last 30 days and not discussed at a previous MDT meeting are included on the agenda. Any Team member may request that a case be added to the agenda by contacting the CAC. A case that involves some urgency may be scheduled as needed and case-specific Team meetings may be arranged at the request of any Team member.

All professionals directly involved in an identified case shall attend MDT meetings (i.e., Law Enforcement Investigators/Detectives, DCFS Investigators, DCFS Caseworkers, Assistant State's Attorneys, SAO Victim Advocates, Child Protection Team personnel, CAC staff, Counselors/Therapists, Crisis Intervention Counselors, etc.). If the designated agency representative is unable to attend, it is the responsibility of the agency to contact the MDT Coordinator with updated information on the case or have another person with adequate knowledge of the case be present on behalf of that agency.

During the MDT Case Review meetings, members discuss the status of the investigation, family dynamics, developmental/emotional disabilities, socio-economics, legal status, etc. of each case. Team members provide varying perspectives regarding the situation. Team members also bring their experience working with families and victims of abuse and can share with other team members their experience and the benefits of relevant training they have received. This discussion often leads to

ideas, suggestions, and decisions to assist the investigation and the family.

The MDT Coordinator will be responsible for the facilitation and documentation of the review and documentation of any suggested follow up recommendations. The MDT Coordinator will ensure that team members are informed of the review outcomes and/or recommendations, and meeting attendance records. Copies of case review forms will be provided upon request to MDT members.

MDT members are also encouraged to suggest issues addressing CAC procedures and operations at case review meetings, individually with the CAC Executive Director, or bi-annually through the MDT satisfaction survey.

PEER REVIEW:

As a matter of quality assurance, individuals who conduct forensic interviews at the CAC are required to participate in a minimum of 2 structured peer reviews per calendar year. The CAC will provide opportunities for investigators and others to participate in a formalized peer review process for child forensic interviewers, both on the local and regional levels. Peer review helps to reinforce methodologies used as well as allow participants the opportunity to consult, problem solve and provide support for one another.

FIREARMS:

Guns are not allowed in the CAC facility, with the exception of guns carried by law enforcement personnel.

Law enforcement officers not directly participating in face-to-face interviews with children are permitted to carry firearms while at the Champaign County CAC. Any officer participating in a face-to-face interview with a child must either remove and secure his/her firearm or he/she must ensure that his/her firearm is concealed from the child at all times.

MEDICAL EVALUATIONS:

In cases of reports of recent trauma or abuse, DCFS and law enforcement investigators responding to the report are responsible for scheduling a medical evaluation. In cases involving delayed reporting of abuse, if an appropriate medical evaluation has not been completed, the CAC staff assists in scheduling medical evaluations in the following cases:

- all cases involving allegations of sexual penetration;
- all cases in which an investigator has reason to believe that evidence of sexual molestation may be present;
- all acute cases in which it is alleged that the child has been sexually abused within the preceding 72 hours;
- all cases in which the child has genital complaints;
- all allegedly sexually abused pre-pubescent children;

- all allegedly sexually abused adolescents will be referred to the Child Safety Team at Carle; however, The Child Abuse Safety Team may elect to refer adolescents to the Sexual Assault Nurse Examiner or to their personal physicians;
- all children alleged to have been seriously physically abused;
- any case in which an investigator or parent requests a medical examination.

The purpose of the medical examination is to evaluate potential physical and psychological injury to the victim and possible presence of Sexually Transmitted Diseases (STDs). The medical examination also serves to detect and preserve any and all forensic evidence of sexual or physical abuse.

Child victims requiring a specialized medical examination are referred to the Child Abuse Safety Team at Carle (CAST). Members of the CAST have specific training in and child sexual abuse and comply with the requirements of the National Children's Alliance accreditation standards & Sexual Assault Survivors Emergency Treatment Act as described in the written memorandum of understanding. On those occasions when the Child Abuse Safety Team receives a report of a sexually abused child from an agency/individual other than the CAC, the Child Abuse Safety Team evaluates the report and, except in unusual circumstances, defers initial evaluation to the CAC. The CAST makes every effort to schedule immediately an examination for any child who has been sexually abused within the preceding 72 hours and works collaboratively with the CAC, law enforcement agencies, and DCFS to ensure that all referrals are seen as promptly as possible. Referrals of CAC clients to the Child Abuse Protection Team and/or the Sexual Assault Nurse Examiner are made by the CAC Family Advocate or DCFS upon request of the investigating team. For all children referred for medical evaluation, CAC staff provides medical personnel with appropriate information that expedites the evaluation process and minimizes distress to the child. If requested by the family/guardian, and if staffing patterns allow, the CAC Family Advocate accompanies the child to the medical examination.

To the extent permitted by law, reports of medical examinations are provided to DCFS and law enforcement investigators. Medical examination findings are also shared with the multidisciplinary team at pre- and post-interview briefings, if available, and at case review meetings, as confidentiality permits.

No child is denied medical services due to inability to pay for those services. In cases where DCFS is involved, the cost of specialized medical examinations may be covered by the Department of Children and Family Services when the child is referred to Carle Clinic/Hospital. In cases where DCFS is not involved, Carle bills the client's insurance company or processes payment through the Department of Human Services (medical card). Medical examinations not covered by one of the above are routinely covered through victim compensation funds administered by the Illinois Attorney General's Office.

Medical professionals on The Child Abuse Safety Team who provide services to CAC clients must demonstrate continuing education in the field of child abuse according to the National Children's Alliance accreditation standards.

CRISIS INTERVENTION/MENTAL HEALTH SERVICES:

Through contracts with local therapists (hereinafter referred to as Crisis Intervention Counselors), the Champaign County CAC offers crisis intervention services to every child referred to the Center and their non-offending family members/caregivers. These services are provided at no cost to clients of the CAC. Crisis intervention includes trauma-focused services such as: crisis intervention assessments for child victims and their non-offending family members; crisis counseling and emotional support in the short-term; education, information and referral; and linkage to long-term treatment, when appropriate.

Crisis intervention screenings are completed in the child-friendly, child-focused atmosphere of the CAC. Follow-up services are typically delivered in the offices of Crisis Intervention Counselors contracted by the CAC to provide mental health services. Telephone contacts are also utilized to provide emotional support as needed to children and their families. The Crisis Intervention Counselors are required to complete continued education in the field of child abuse and maintain their licensure in good standing to be able to provide quality mental health services to the children and families served by the CAC. Crisis Intervention Counselors will follow requirements set forth in the crisis intervention counseling contract.

Crisis intervention services continue until the client has been linked with long-term mental health and/or counseling services, if deemed appropriate. In most cases, it is expected that crisis intervention services will continue for a period of 8 weeks. While recognizing that the family has the right to decline those services, the Crisis Intervention Counselor and the CAC Family Advocate advise the child's parent/caretaker of the availability and importance of mental health counseling to child sexual and/or physical abuse victims and strongly encourage the parent/caretaker to seek such counseling at an appropriate facility.

As part of the CAC's multidisciplinary team and subject to applicable confidentiality protections, the Crisis Intervention Counselors also attend meetings, staffings, and MDT case review meetings and advocate for clients and their families. The CAC Family Advocate and the Crisis Intervention Counselors also meet monthly to discuss cases in which the victim and/or nonoffending family members have been referred for crisis counseling.

In the event that the family wishes to access mental health services through private healthcare providers, the Crisis Intervention Counselor and the CAC Family Advocate will facilitate and coordinate the delivery of those services to the extent possible. No child is denied mental health services due to inability to pay for those services.

Crisis Intervention Counselors also offer consultation to the team regarding the effects of trauma on children and their non-offending caregivers. After receiving a signed authorization for release of information, mental health professionals may attend case reviews to communicate the needs of the child and to share information about the child and/or the family's emotional state. Families may decline to sign the confidentiality waiver. To the extent permitted by law and in keeping with the need to protect the clients' right to confidentiality, mental health professionals participating in case reviews agree to cooperate fully with the CAC and the MDT, and to abide by this Protocol. Mental health providers maintain client files

separate from those of the CAC.

VICTIM ADVOCACY SERVICES:

Victim advocacy services are provided to all CAC child victims and their non-offending family members through the CAC Family Advocate, the Crisis Intervention Counselors, and other area advocacy programs throughout the investigation and subsequent legal proceedings. Those services include assistance with obtaining protective orders, legal advocacy, housing, public assistance, domestic violence intervention, substance abuse programs, community food programs and transportation. Community-based programs providing advocacy services include, but are not limited to: Courage Connection, Rosecrance, Rape Advocacy, Counseling and Education Services (R.A.C.E.S.), the Victim Advocacy Program of the Champaign County State's Attorney's Office and the Family Advocacy Center. The CAC Family Advocate and the Crisis Intervention Counselors maintain information on community-based advocacy services and make that information available to those receiving services from the CAC.

Individuals who provide victim advocacy services for children and families at the CAC complete continued education and trainings in accordance with the National Children's Alliance performance standards to provide a consistent level of comprehensive, coordinated support and education to the families the CAC serves. Victim Advocates will provide the following constellation of services:

- Crisis Assessment and intervention, risk assessment, and safety planning and support for children and family members at all stages of involvement with the CAC
- Assessment of individual needs and cultural considerations for the child and family to ensure those needs are addressed
- Presence at the CAC during the forensic interview in order to participate in information sharing; inform and support the family about the coordinated, multidisciplinary response; and assess needs of the child and non-offending caregiver
- Provision of education and access to victim's rights and crime victim's compensation
- Assistance in procuring concrete services (housing, protective orders, domestic violence intervention, food transportation, public assistance, etc.)
- Provision of referrals for specialized, trauma focused, evidence supported mental health and medical treatment
- Facilitation of access to transportation to interviews, court, treatment and other caserelated meetings
- Engagement in child and family response regarding participate in the investigation and/or prosecution process and help ensure understanding of victim's rights
- Participation in case review to communicate and discuss the unique needs of the child and family and plan associated support services, ensure the seamless coordination of service, and ensure the child and family's concerns are heard and addressed
- Provision of updates to the family on case status, including investigations, court date, continuances, dispositions, sentencing and inmate status notification (including offender release from custody)
- Provision of court education and courthouse/courtroom tours, support and

accompaniment

• Coordinated case management meetings with all individuals providing victim advocacy services.

All cases resulting in criminal prosecution also receive services through the Victim Advocacy Program of the Champaign County State's Attorney's Office. The Victim Advocacy Program assigns Victim Advocates whose responsibility it is to schedule meetings and familiarize the victim with the criminal court process in order to make court proceedings more understandable and less frightening to children and their families. These meetings can be held at the CAC and may also include tours of the courthouse facilities, including the courtroom where the child may be called upon to testify. Through these meetings, Victim Advocates from the State's Attorney's Office attempt to assess the child victim's ability to function within the court proceedings and communicate that information to the prosecuting attorney. Victim Advocates from the State's Attorney's Office notify clients of the filing of criminal charges and accompany children and their families to hearings, providing support and advocacy throughout all consequent legal proceedings.

The Victim Advocacy Program initiates and maintains written, telephone, and/or personal contact with victims of criminal cases filed by the State's Attorney's Office and the staff of that Program provide guidance and support to victims throughout their involvement with the criminal justice system, which may include accompanying crime victims to court. The Victim Advocacy Program also identifies and refers victims to appropriate community-based services and develops and distributes informational brochures for use by crime victims. The CAC Family Advocate and Victim Advocates from the State's Attorney's Office work closely together to provide transitional services and provide support to the client and family throughout the process.

DIVERSITY, EQUITY AND INCLUSION:

The CAC promotes policies, practices and procedures and ongoing learning that reflect diversity, equity, and inclusion (DEI). The CAC values diversity, equity and inclusion and annually participates in DEI training and provides MDT members access to DEI training and information. The CAC staff understand that integrating issues of DEI into professional practice are not accomplished in a single training and requires an intentional, ongoing and evolving exploration of the personal and professional meaning of DEI and how it impacts the accessibility of services and support to their clients. The CAC staff are trained to understand the capacity to function in more than one culture, requiring the ability to appreciate, understand and interact with members of diverse populations within the local community. This involves the awareness of cultural differences and the integration of this awareness into practical skills that enhance one's ability to adequately serve diverse populations. Diversity issues influence nearly every aspect of working with children and families, from welcoming a child to the CAC, employing effective interviewing techniques, gathering information, selecting appropriate mental health providers and securing help for a family in a manner which is likely to be utilized.

It is the policy of the Champaign County Children's Advocacy Center that children and families from all backgrounds feel welcomed and acknowledged by staff, multidisciplinary team

members, and Governing Board members, regardless of their appearance, background or beliefs. While receiving services at the CAC, children and families of all backgrounds and abilities are welcomed, valued and respected. During the scheduling of a forensic interview information is gathered to ascertain cultural, linguistic and physical accessibility needs so that services are implemented in ways that address identified needs. The team provides services to a diversified target population regardless of age, race, color, religion, national origin, ancestry, gender, marital status, sexual orientation, physical disability, mental health challenges, socioeconomic status or any other cultural descriptors. CAC services are provided free of charge. No victim referred through the multidisciplinary team process is denied services based on inability to pay.

The CAC's work environment promotes the highest levels of performance and integrity from the employees and other members of the multidisciplinary team. In keeping with this commitment, the CAC strives to create an environment where employees and diverse multidisciplinary team members are valued as individuals who together comprise the working team.

Clients, CAC employees, multidisciplinary team members, Governing Board members and anyone else with whom we have dealings are treated with the utmost respect, dignity and fairness. Members of the CAC team promote not only awareness of the issues surrounding diversity, equity and inclusion but demonstrate sensitivity to these issues by interacting in an appropriate manner with members of all cultures.

Additional information can be found in the annually reviewed Cultural Competency Plan adopted by the CAC Governing Board.

When an investigation involves non-English-speaking children and family members, the CAC makes provisions to overcome any barriers in communication by enlisting the assistance of interpreters. The CAC does not use family members to interpret during child forensic interviews conducted at the Center. The CAC maintains a list of private interpreters as well as interpreters associated with the University of Illinois and The East Central Illinois Refugee Mutual Assistance Center and contracts with them to provide services as needed throughout the investigation, intervention and case management process. The CAC also maintains a list of sign language interpreters to provide assistance for the hearing impaired. Prior to their involvement in an investigation or follow-up services, CAC staff orients interpreters to the CAC facility and applicable CAC and multidisciplinary team procedures.

CASE TRACKING:

The Champaign County Children's Advocacy Center provides comprehensive case tracking for each case referred to the Center, both manually and electronically. When a case is first referred to the CAC, the Family Advocate opens a file and assigns a case number to the case based on the year and sequential number of the case (e.g., 2020-CAC-100 would be the 100th case referred to the CAC during the year 2020). The CAC case number is an identity number that is used on all documents referring to this particular case. The Family Advocate also enters case information in the CAC electronic database.

The CAC file for each case contains the following:

- A completed Social History Form
- The Record of the Interview
- Notice of Recording form signed by CAC staff
- Receipt of Recording form(s) signed by law enforcement
- Authorizations for Release of Information signed by parent/caretaker and child, if applicable
- Copies of reports provided to the CAC by the multidisciplinary team
- Copies of case correspondence
- Documentation of Case Review Meetings
- Crisis Intervention Counseling Referral Form, if applicable

The CAC maintains a computer database for tracking the status of cases referred to the Center. To the extent permitted by law, members of the multidisciplinary team provide information for inclusion in the CAC computer database. To the extent available, the database includes the following information for each case as needed for the National Children's Alliance and grant reporting:

- CAC Case Number, police report number and DCFS case number
- Date Case Opened
- Date Case Closed
- Referral Source
- Reason for Referral
- Name of DCFS Investigator
- Responsible Law Enforcement Agency
- Name of Law Enforcement Investigator
- Demographics for Child & Family (name, address, telephone, date of birth, age, gender, race, ethnicity, guardian at the time of the interview, previous involvement with the CAC, medical exam information)
- Information on Initial Forensic Interview (date, location, agency and name of forensic interviewer, agencies and names of persons observing the interview, disclosure, recommendations)
- Information on Additional Forensic Interviews (date, location, reason for additional interview, name of person and agency conduction the interview, disclosure, recommendations)
- Support Service Referrals (referral date, type of referral, person contacted and type of contact)
- Therapist Information (name of agency and counselor)
- MDT Case Review Dates and updates
- Case Notes
- Demographics for the alleged offender (name, gender, date of birth, age, relation to victim, allegation, diagnosed results of abuse, DCFS disposition, Law Enforcement disposition, charges filed and disposition of charged)

The CAC Multidisciplinary Team Coordinator and Family Advocate gather and input necessary

data into the database. The Executive Director of the CAC will maintain and monitor the case tracking systems. The case tracking system provides essential information for demographic and case related data that is used to monitor program services, to provide cumulative data for quarterly and annual reporting cooperation among participating agencies, to document the number of multidisciplinary forensic interviews conducted as well as the number of case reviews conducted, to provide collective data of the incidence of court involved child sexual and serious physical abuse cases and the disposition of such cases in Champaign and Ford Counties, to insure that all children served by the CAC have been referred for appropriate treatment services, to identify and document other pending or prior involvement, and to identify and document demographic changes and activity trends as they relate to child sexual and serious physical abuse in Champaign and Ford Counties. MDT partner agencies may obtain case-specific and/or aggregate data by contacting the Multidisciplinary Team Coordinator.

The CAC utilizes the NCA Outcome Measurement System (OMS) to evaluate client service delivery. Families complete surveys electronically or by hand while at the CAC. The Multidisciplinary Team Coordinator contacts families approximately four weeks after intake and gathers information to evaluate client follow up service delivery.

CONFIDENTIALITY:

All multidisciplinary team members, including CAC staff and Governing Board members, within the bounds allowed by law and the rules and regulations of their respective agencies, agree to maintain the confidentiality of all records and information gathered on all cases investigated through the CAC. All multidisciplinary team members further agree not to release any record or information on any CAC case except as it relates to the legitimate program operations of their agencies.

All members of the multidisciplinary team agree to respect the privacy of persons served by the CAC and to hold in confidence all information obtained in the course of professional service. The members of the multidisciplinary team further agree to maintain confidentiality when storing or disposing of client records, and to maintain a professional attitude that upholds the confidentiality rights of individuals served, colleagues, applicants, and the CAC. Upon termination of employment, all multidisciplinary team members agree to maintain client and co-worker confidentiality, and to hold as confidential any information obtained concerning the CAC and its clients.

For the purpose of facilitating communication between the members of the multidisciplinary team and agencies/organizations to which clients of the CAC are referred for services, the CAC Family Advocate requests that clients and/or their legal guardians sign appropriate consent forms. Clients and/or their legal guardians may refuse to execute consent forms and may revoke consent at any time.

The individual case files and any information obtained by the CAC are designated confidential. Any outside requests for information are referred to the appropriate DCFS investigator, law enforcement officer, or Assistant State's Attorney to process according to the existing policies of their respective agencies. Requests to the CAC for information are referred to the Executive Director. All requests for release of information must be in the form of a written authorization to release information, which meets the following conditions:

- Addressed specifically to the CAC;
- States the specific information requested;
- States the purpose for which the information is intended;
- Signed and dated by the legal guardian and/or client, if applicable; and
- Received by the CAC no more than 90 days from the date of signature.

If subpoenas or requests by the court are received, legal counsel will be consulted prior to the release of any confidential information.

To ensure confidentiality of records and the integrity of the investigation, the CAC only maintains necessary identifying information on the child and the family. All official documentation is to be retained by investigative team members in compliance with Illinois statutes.

All CAC records are secured at all times to protect the clients' right to privacy and are maintained in a locked filing cabinet. Only authorized CAC staff members are issued a key to the locked filing cabinets.

CAC staff members are responsible for securing clients' files at all times when those files are in their possession. Staff members are not to leave files unattended in office or client areas, take files from the facility, or keep files outside of the locked filing cabinet overnight.

All client records are retained for a minimum of seven (7) years or until all litigation and/or adverse audit findings are resolved.

ORGANIZATION CAPACITY:

Due to the sensitive and high-risk nature of CAC work, the CAC conducts a formal screening process including a criminal background check and Department of Children and Family Services Background Check (includes sex offender and child abuse registry) for staff and volunteers and board members. All persons employed by the CAC will receive initial and ongoing training and supervision relevant to their role and in accordance with NCA standards for accreditation.

The CAC has a written success plan, strategic plan, and community assessment developed by the multidisciplinary team, Governing Board and staff of the CAC.

The CAC promotes employee well-being by providing training and information regarding the effects of vicarious trauma. The CAC affords opportunities for CAC staff and multidisciplinary team members to debrief following critical incidents and provides written materials, articles and tools that address the issue of vicarious trauma.

USE OF CAC FOR NON-CENTER CASES:

The Champaign County Children's Advocacy Center was established for the coordination of child sexual and serious physical abuse cases in Champaign and Ford County. However, interview rooms are available to any investigator who needs to interview child victims of other serious crimes and/or child witnesses to serious crimes. The investigator should contact the Executive Director to schedule an interview. The Executive Director also has discretion to allow use of the Center for interviews of children by investigators from other counties and agencies (i.e. FBI).

MISCELLANEOUS:

The Champaign County Children's Advocacy Center is a smoke-free facility. Smoking is prohibited in the facility at all times.

To the extent that those policies do not conflict with policies set by the CAC Governing Board, the CAC complies with policies established by the Champaign County Board, including, but not limited to, personnel, equal employment, purchasing, travel, information technology, ethics in government, and drug and alcohol policies.

Children/adolescents being interviewed at the CAC are prohibited from possessing any type of electronic equipment, communications devices, or audio/video recording devices in the interview rooms, including, but not limited to: cell phones, pagers, cameras, tape recorders, DVD/Compact Disk players/recorders, iPods, and MP3 players.

EVALUATION & AGENCY PERFORMANCE:

All Families will be giving the opportunity to complete a satisfaction survey upon completion of the initial intake and forensic interview. All families will also be sent a caregiver follow up survey 30 days after their initial interview requesting feedback. All MDT members are asked to complete a satisfaction survey annually and provide feedback during monthly case review meetings. All children ages 10-17 are also offered the opportunity to provide feedback regarding their experience. Information received from surveys is compiled and presented to the Board annually (or more often if necessary).

The Champaign County Children's Advocacy Center Governing Board reviews this Protocol and agency evaluations at least once each year. The Board evaluates the effectiveness of the Protocol as well as day to day operations and considers any revisions/suggestions from program evaluations deemed appropriate. The Board may also amend the Protocol at other times when necessary. MDT members also receive a copy of the CAC Annual Survey Results.

Any amended Protocol is filed with the local DCFS office which serves Champaign & Ford County and with DCFS office in Springfield, Illinois and with the Children's Advocacy Center of Illinois. Amended Protocols are forwarded to each agency in the county that has responsibility for the investigation of child sexual abuse or serious physical abuse cases.

GRIEVANCE PROCEDURE:

From time to time, there may be disagreements among participating agencies or members of the multidisciplinary team concerning the handling of particular cases, which cannot be resolved in the normal course of case discussion and planning. Any such grievances should be directed in writing to the agency concerned or the agency employing the member(s) of the team concerned. If the agencies involved in the disagreement are unable to resolve the matter, they may request the assistance of the State's Attorney's Office in resolving their differences.

DISCLAIMER:

This Protocol is intended solely to be a set of guidelines to assist in creating, facilitating and maintaining mutual cooperation and teamwork among the participating agencies. It is not intended by any of the participating agencies to be a contract with any of the other participating agencies or any other persons or entities, nor to be the basis for the assumption of any legal obligation or liability. The Board members and participating agencies recognize that certain cases and situations may call for procedures or actions different than or contrary to the guidelines in this Protocol. The Board members and participating agencies agree that, when such situations arise, agencies will follow alternative courses of action or procedures that will facilitate the goals and objectives of this Protocol.

Any substantial deviation from the guidelines set forth in this Protocol should be documented and the reason(s) for the deviation explained.

The CAC has a signed memorandum of understanding from the following partner agencies who agree to commit to the Protocol and to the vision and work of the Champaign County Children's Advocacy Center.

- Carle Hospital Child Abuse Safety Team
- Champaign County Probation & Court Services Department
- Champaign County Sheriff's Office
- Champaign County State's Attorney's Office
- Champaign Police Department
- Illinois Department of Children & Family Services
- Illinois State Police
- Mahomet Police Department
- Rantoul Police Department
- Fisher Police Department
- Tolono Police Department
- Regional Superintendent of Schools
- University of Illinois Police Department
- Urbana Police Department
- Ford County Sherriff's Office

- Paxton Police Department
- Gibson City Police Department

USE OF INTERVIEW AIDS IN THE FORENSIC INTERVIEW:

The goal of the forensic interview is to have the child verbally describe his or her experience. The forensic interviewer will take into account the child's age, development, disability and/or any needs for special accommodations. The interviewer may engage in the use of visual aids to assist the child in his/her description of the event. Visual aids may include an anatomical doll, body diagram or use of paper and markers.

INTRODUCTION OF EVIDENCE IN THE FORENSIC INTERVIEW:

Forensic Interviewers may present evidence to the child in the forensic interview. The following guidelines should be followed:

- The interviewer should tell the victim that they have the evidence during the rapportbuilding phase of the interview. The interviewer should not be specific but should tell the victim they have some photos or text messages, etc. that they will ask the victim about later in the interview.
- 2. The interviewer should not show the victim video footage of the offense. If the evidence is in video form, the interviewer should print out stills of sections of the video.
- 3. If the victim did not know the images were taken, the interviewer should give the victim the choice of whether they show the victim the images or describes the images to the victim.

*Recent trainings emphasize that pictures can be a traumatic event for a victim, especially if they are unaware that photos were taken. We would encourage all MDT members to utilize other avenues to identify the victim before introducing evidence.