GUIDELINES FOR BUILDING PARTNERSHIPS THAT PROTECT OUR CHILDREN

FOLLOW-UP TO THE IACP CHILD PROTECTION SUMMIT

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Guidelines for Building Partnerships That Protect Our Children

I. INTRODUCTION

In every city, community, or municipality across the United States of America, child abuse is a daily occurrence. In 2000, three million children were reported as abused or neglected. Authorities confirmed 900,000 of these cases. Three children die every day in America from child abuse and neglect, and most are less than one year old.

Child abuse and neglect impact all aspects of the community and thus involve a number of community agencies, including child welfare, police, and the justice system. When officials from these agencies work separately, they may fail to respond to the full dimensions of a case, and may even place children at further risk. When agencies work together in multi-disciplinary teams (MDTs), the potential to respond to and prevent abuse and neglect increases dramatically.

Without true community support, however, professional partnerships can only go partway. A community must acknowledge the problem of child abuse and must also own the solution. Community partnerships with neighborhoods, faith communities, businesses, the media, and others can raise the level of understanding of what constitutes child abuse, how to report suspected cases, and how to prevent child abuse through supporting families at risk, and building a community of caring for children and families.

In 2001, the IACP’s National Child Protection Summit focused on building partnerships to protect our children by reducing the incidence of, and responding effectively to, child abuse and neglect. The International Association of Chiefs of Police (IACP), the Child Welfare League of America (CWLA), and National Children’s Alliance (NCA) collaborated to sponsor this summit with the assistance and support of the Office of Juvenile Justice and Delinquency Prevention (OJJDP).
During the two-day summit, over 120 participants developed 57 recommendations delineating a comprehensive approach to child protection. The summit report, *Building Partnerships That Protect Our Children*, available from each of the sponsoring agencies, contains the summit recommendations and a leadership action agenda.

These guidelines complement the summit recommendations, providing concrete assistance for child welfare, law enforcement and other leaders who want to strengthen MDTs in their local jurisdictions. The summit yielded a consensus among all participants that combining integrated, cross-discipline programs responding to child abuse and neglect with community-based strategies for preventing child maltreatment will enable us to protect and nurture the greatest number of children. Thus, the guidelines contain practical guidance in two major areas:

1. Building Professional Partnerships to Respond to Child Abuse and Neglect
2. Building Community Partnerships to Prevent Child Abuse and Neglect

We can no longer continue to do business as usual. We must create innovative MDTs to save children’s lives, to safeguard their futures, and to protect our nation from the long-term effects of child abuse.
II. BUILDING PROFESSIONAL PARTNERSHIPS TO RESPOND TO CHILD ABUSE AND NEGLECT

No matter what your professional role, law enforcement professional, child protection services worker, medical provider, mental health specialist, prosecutor, or victim advocate, you have something to give to a child abuse investigation and follow-up. Each of us has our own unique and important role. For law enforcement, the job is to determine whether a crime has been committed. Child protective services must assess risk and determine if a child is safe from harm. Medical and mental health professionals are responsible for diagnosis and treatment.

We have learned from our work together over the last two decades that none of us, no matter how competent a professional, can do this work alone. We need the entire spectrum of resources to ensure a child’s safety. No longer is it expected that any one discipline will shoulder the weight of a child abuse investigation alone. We are finally in a position where we can, as a team, share the pain, the horror, the hard work, and, often, the success of working with child abuse cases.

Building effective teams, however, is no easy matter. Each of us knows of failed partnerships, where good-faith intentions did not result in effective team action. To help jurisdictions address the issue of child abuse and neglect through strong partnerships, IACP, CWLA, and NCA have designed a nine-step partnership development model. This model can guide those who are interested in partnering through the critical actions they must take if the collaborative effort is to meet its chosen objectives. In summary, those steps are:

1. Define the issues
2. Identify and engage potential partners
3. Agree on a mission statement, goals, and objectives
4. Assess strengths and needs
5. Design a multi-disciplinary response model
6. Leverage and share resources
7. Build team capacity
8. Implement the multi-disciplinary response model
9. Evaluate the impact of the multi-disciplinary response model

These guidelines refer to two primary teams: 1) the child protection leadership team, comprising agency heads who design, provide resources, and evaluate the multi-disciplinary model; and 2) the multi-disciplinary team, whose members implement the multi-disciplinary response model developed by the leadership team.

1. **Define the Issues**

The first step in forming a multi-disciplinary partnership to respond to child abuse and neglect is to define the issue in such a way that others will be motivated to work together while addressing it. One such way is to state the desired outcome in a positive, non-blaming way. An example is “to investigate and treat child abuse and neglect in a more integrated and collaborative fashion”. Supplement the outcome statement with any available data that supports it.

Timing is important. Unfortunately, agencies sometimes wait to engage in partnerships in the wake of tragedy. Often, changes in leadership or the infusion of new resources signal an opportunity to initiate partnerships.

2. **Identify and Engage Potential Partners**

If a community aims to build a better multi-disciplinary response to child abuse and neglect, the following six professional groups, at minimum, should be involved in the partnership:

- The local law enforcement agency
- The prosecutor’s office
- The child protection or child welfare agency
- Medical personnel
- Mental health professionals
- Victim advocates
In addition, juvenile and criminal court judges, local elected officials, court-appointed special advocates (CASAs), and others should be considered as potential partners.

Once potential partner agencies are identified, contact their leaders to enlist them in a formal partnership. Remember, the child protection leadership team you are forming should include agency representatives who have the decision-making power to enter into a collaborative agreement with other agencies.

As you meet, ask for their feedback on your preliminary issues statement. Also, keep the following partnership requirements in mind:

- Each agency must be willing to consider all the aspects of its work in relation to the partnership and be willing to change its approach when change would be beneficial to the treatment of the abused or neglected child.
- Each agency must have a strong belief in the value of partnering and a long-term view to creating a viable team approach.
- Each agency must be willing to give up a certain level of autonomy in order to gain the greater good, which is more effective response and treatment for the abused or neglected child.
- Each agency must be willing to enter into a signed agreement with the other partner agencies, evidencing both its enduring commitment to child protection and its programmatic and financial support of the partnership.

Once partners have agreed to participate, send a letter to them announcing an initial meeting. The letter should include the revised needs statement, the meeting agenda, and a list of participating partners.

3. **Agree on a Mission Statement, Goals, and Desired Outcomes**

At the first child protection leadership team meeting, each partner can state his or her agency’s role in child protection and their reasons for participating in the team. Together, partners can develop a list of ground rules for team interactions.
Formalizing a good-faith statement of interest among the parties at the first team meeting will lay the groundwork for a series of roundtable discussions to develop the team’s formal mission, goals, and expected outcomes that all can agree upon and adopt.

Typically, this defining document is a synthesis of individual agency goals, with the addition of strong partnership and collaboration for the common good as an overriding factor. Common outcomes for teams dedicated to integrated responses to child abuse and neglect include the following outcomes for children served, their families, and perpetrators:

- safety from further harm, achieved through child welfare and child advocacy casework, police work, and civil and criminal court intervention
- seamless treatment and services, to remediate the impact of harm and improve overall well-being
- permanency, through family preservation, reunification, guardianship, or adoption
- accountability for perpetrators who harm children

At the first meeting, decisions should also be made regarding who will host, staff, and facilitate the team meetings and the frequency of and schedule of subsequent meetings.

4. Assess Strengths and Needs

After finalizing its mission, goals, and desired outcomes, the child protection leadership team should assess how well the current response system is achieving the desired outcomes. For example, how many abused children are reported or abused again? What are the criminal dispositions of cases involving child abuse perpetrators?

Some of this information will be attainable through examining available outcome data from each partner agency. However, this alone may not suffice since each agency defines success in its own terms and collects different information in response to
separate reporting requirements and funding sources. Therefore, additional outcome data may need to be gathered through case reviews. The multi-system case analysis (MSCA) developed by the Child Welfare League of America (CWLA), tracks a sample of children who were allegedly abused through legal and social service systems. The review focuses on the level of information sharing and collaboration among the professionals involved, rationales for decisions made and actions taken, and on the child and perpetrator outcomes achieved.

In addition to case reviews, focus groups, surveys, and interviews with line staff in involved agencies and with former child victims and their family members can produce valuable information regarding the quality of current services and strategies for improvement. Mapping the investigation process can also yield important insights into the strengths and gaps in the current response system. Process mapping should involve line staff since they know the most about the day-to-day workings of the system.

The completed assessment should include a set of targeted child protection objectives that can best be met through organizational partnerships. It can also provide baseline performance and outcome data from which to measure success.

5. Design a Multi-Disciplinary Response Model

Once clear objectives are established, the child protection leadership team may design a multi-disciplinary team that provides joint investigation of cases, works together to review cases, and identifies resources for children and families. They may decide to replicate an existing model, such as the Children’s Advocacy Center (CAC) model. In this environment, the team not only works collaboratively, but does so in a dedicated, child-friendly setting where the needs of the child come first.

While the child protection leadership team can agree on an overall response model, the details will most likely need to be worked out within subcommittees comprising supervisors and line staff from each involved agency. Communities that
choose the CAC model can use CAC standards and consultants from the National Children’s Alliance to assist them.

Key aspects in the design of an integrated response model implemented by a (MDT) include:

- The MDT clearly documents roles for each partner and for the team, and makes explicit MDT policies and procedures related to reporting, investigation, and referral.
- Law enforcement officers responding to suspected severe or life-threatening child maltreatment cases partner with child protection workers who are trained and available to accompany them 24 hours a day.
- Single, coordinated interviews are a central component of investigations conducted by MDTs. They can produce more accurate and complete information than multiple separate interviews, and they place less stress on the child.
- Abused children experience assessment, evidence gathering, and intervention in a child-friendly setting. This streamlines and expedites medical, investigative, and judicial proceedings, and reduces trauma to victims and their families.
- Child protective services, law enforcement and health services, and intervention capabilities are located at the same place. This improves coordination and provides one-stop functionality while reducing the likelihood of re-traumatizing the child.
- Child welfare services, law enforcement, courts, and states attorneys’ offices develop integrated strategies that allow for joint case planning and ongoing case coordination. This will also increase the likelihood that cases involving young victims will be successfully prosecuted.
- Trained professionals use validated assessment tools to enhance the consistency, clarity, and effectiveness of their decisions on behalf of children. These assessment instruments augment, but do not replace, professional judgment.
Members of the child protection leadership team establish interagency agreements or memoranda of understanding (MOU) that explicitly describe mutual roles and MDT policies and procedures.

Members of the child protection leadership team review their state statutes and policies to ensure that they permit the sharing of information that is needed to make quality case-specific decisions. Then, CPLT members include in their interagency agreements what information will be shared, how it will be shared, by whom, with whom, and for what purposes.

Members of the CPLT require the routine request for informed consent through a signed comprehensive or multi-agency release of information form that authorizes selected disclosure for a limited period of time. Whether a single or a multiple agency release of information is desired, consumers should receive notification and a clear explanation of the need to disclose or release information.

Once the multi-system response model design is finalized, it should be documented in written MOUs that clearly define roles, responsibilities, and work processes.

6. Leverage and Share Resources

All systems that share responsibility for child protection are constrained by resource limitations. When the CPLT moves through team building steps 1 through 5 successfully, the next step is to address these resource issues. All member agencies must be willing to provide staffing support to the team, and some must commit financial support as well.

CPLT leaders must at some point address the issue of not only how the multidisciplinary team will function, but also where it will work. One of the more successful models of a facility-based program is the Children’s Advocacy Center. Many of the components of a CAC can be developed and implemented successfully without a freestanding children’s facility. However, the concept of a CAC requires a child-focused, child-friendly facility that is physically and psychologically safe for child clients. The CAC
should maximize the separation of children from alleged offenders to the greatest extent possible. To maintain the child-focused nature of CACs, the facility should have the “offices” of the intervention system apart from the waiting areas, interview rooms, and other areas where children will be while at the CAC. The entire center should be designed to evoke a sense of safety and security for children.

The ultimate goal of a CAC is to provide a safe, comfortable, and convenient place where interviews can be conducted and services provided for the child and non-offending family members. Over the past few years, more and more CAC programs are now moving to the co-location of the team staff. In some more urban areas, this co-location has meant that the entire child protective services and law enforcement units responsible for child abuse investigations are actually housed at the center, with other staff also co-located as appropriate. This “under one roof” idea has arisen from the demand of team members to have greater access to the MDT members as well as to the services and support of the CAC staff and facility. In other communities, “under one roof” might mean one or two child protective services staff, one or two law enforcement personnel, a designated prosecutor, and the forensic medical examination units are all housed at the CAC.

There is no “right” building structure, design or decorating scheme for a facility. The most important aspects are that the members of the CPLT have agreed that this is the best location for the facility and that it is convenient to the team members, the courts, and to the children and their families. The center should reflect the community and the children and families it will serve. Care should always be taken to ensure that the center is culturally appropriate and comfortable for those who will use it, especially the children and families.

Beyond the existing resources of the agencies themselves, governing bodies must also step up with support. When significant organizations like the police department, the prosecutor’s office, and the child welfare agency come together in partnership, they can promise more and better services to a critical population. When
the entire CPLT, using data generated from their strengths and needs assessment, makes a strong case for additional resources, citizenry and their legislatures are inclined to support their efforts.

7. Build Team Capacity

After the CPLT has designed a multi-disciplinary response model and has committed the needed resources, it needs to develop an implementation plan that details the capacity-building needed to support the model and an actual plan for rolling out the model.

The community’s capacity to protect children fundamentally depends on a core infrastructure that supports the delivery of quality services. Human capital is the linchpin in building capacity to keep children safe from harm. The workforce that responds to suspected cases of child abuse must be knowledgeable, skilled, diverse, culturally competent, sufficient in number, and stable.

Recruitment and Retention

Partnership agencies should employ the following incentives to motivate people to enter and remain in professions such as police work, social work, mental health care, victim advocacy, forensic medicine, and prosecution:

Recruit

- competitive salary commensurate with job demands
- on-the-job educational opportunities
- student stipends and loan forgiveness
- sabbaticals
- flexible work schedules
- relevant and flexible benefit packages
- family-oriented policies, including supports for parental leave, childcare and elder care
Retain

- a sense of connection and commitment to the unifying mission of their organization
- opportunities for open and honest dialogue within and across all levels of the organization
- emphasis on relationships, partnerships, professional support, and teamwork
- emphasis on learning, innovation, and development at both the individual and the organizational levels
- decision-making authority; freedom to take action without meeting barriers
- meaningful recognition for jobs done well
- opportunities for advancement – career ladders

To successfully recruit and retain staff members from diverse racial and cultural groups, agencies should:

Recruit

- formally commit to and implement the recruitment, hiring, mentoring, and advancement of staff members from the groups their agency serves
- develop positive relationships with the communities served and work with them to determine recruitment needs and responsive recruitment plans and activities
- develop relationships with relevant professional schools of higher education that encourage the enrollment of students from relevant diverse communities
- consider bilingual and bicultural competency in addition to formal training and experience when evaluating applicants

Retain

- establish career advancement policies that provide opportunities for staff members from diverse groups to assume supervisory and administrative positions
- demonstrate cultural responsiveness to all staff members as well as to the populations the agency serves
• acknowledge and respect different points of view in the workplace
• establish personnel policies that are supportive and responsive to all staff
• provide leave-time policies that accommodate the holidays and important community or family events of the various cultures staff members represent
• specify the need for cultural competence and responsiveness in all job descriptions and assess these qualities in all performance evaluations
• reward cultural competence and penalize incompetence
• be sure that board and governance structures reflect cultural make up of community
• create opportunities for mentoring within and from outside the agency for staff members of diverse groups

Workload/Caseload Standards

All members of the MDT should conduct a workload analysis to determine the amount of time required to competently perform routine job activities and functions. This analysis should serve as a foundation for the establishment of appropriate workload standards for their staff members.

   Every agency should establish maximum workload standards that enable staff to complete the required tasks and activities. Once workload standards are established, agencies should advocate aggressively for the resources needed to meet those standards.

Training

Members of the CPLT must develop the capacity to identify and meet the cross-systems training needs of all the individuals and agencies involved in serving abused and neglected children and their families on an ongoing basis.

All MDT members should have, at a minimum, a working knowledge of:
• high-risk factors for and indicators of maltreatment
• child development
• forensic interviewing
• the emotional and psychological impact of abuse
• the legal issues that pertain to child victims, offenders, and other parties to an incident
• the laws and legal framework related to child abuse and neglect

Productive working relationships across disciplines and sectors are essential. Thus, specialized training and technical assistance for multi-disciplinary team members should address:
• team building
• information sharing and confidentiality
• conflict resolution
• community engagement
• community needs assessment
• cultural diversity

8. Implement the Multi-Disciplinary Response Model

The implementation plan developed by the CPLT needs to address implementation oversight. An implementation committee composed of middle managers or other staff from each partner agency may be formed for this purpose. It is helpful if most members of the implementation committee have been involved in planning the model. The purpose, authority, and responsibilities of this committee should be documented, including how often and in what form they report on implementation progress to the CPLT.

In addition, based on the MOU, each partner organization should define its new responsibilities related to implementation of the multi-disciplinary response model in its agency’s operating plan, and commit needed resources in their budget.

The implementation plan should also address how long the multi-disciplinary response model will be piloted and how accountability will be ensured. It should also
include MDT and implementation committee procedures for decision-making, communication, and feedback.

While careful planning, targeted training, and written procedures will help to smooth the transition to new ways of doing business, bumps in the road are to be expected. The implementation plan must also address how conflicts will be aired and managed.

The implementation committee and MDT members should reexamine the functioning of the MDT and the effectiveness of the operational procedures regularly. They can analyze practice, policy, and political barriers that arise and develop strategies to deal with them. When necessary, these issues and recommended strategies can be referred to the CPLT for action. The focus should be on learning and on ensuring that the model addresses the needs of the clients, the community, and the professionals.

9. Evaluate the Impact of the Multi-Disciplinary Response Model

Any new collaborative effort must be evaluated to ensure that it is achieving its stated goals and objectives. Planning for evaluation and measurement should begin very early on. Measurement is typically divided into two phases: process evaluation and impact evaluation.

**Process Evaluation**

Teams moving ahead with partnership initiatives should lay out a set of steps and then document how the planned approach works at each step. Documenting missteps, obstacles, and successes will allow other jurisdictions to use the lessons learned to replicate the approach with increasing degrees of success.

**Impact Evaluation**

Measuring impact is the most difficult step in the entire collaborative model. While anecdotal evidence that a new approach is working may be easily found, serious, data-driven analysis of that success is harder to come by. Teams that are serious about
evaluating impact must, at the outset of the partnership, lay out a set of measurable outcomes. Baseline data gathered during the assessment process described in step 4 can be used later for comparison and progress.

Members of the MDT should identify key data elements that provide meaningful information on their effectiveness in the response to, investigation of, and prosecution of serious child abuse and neglect, and the protection of children at imminent risk of harm. Once baseline data and measurable goals are documented, the team can invite researchers to conduct an impact evaluation. Local universities are a good source of research partners. Evaluations should be long term (at least five years), since gradual changes may take years to surface as measurable outcomes.

One of the standards for child advocacy centers is built on the necessity to develop and implement a system for monitoring case progress and tracking case outcomes for all team components. In the short term, this effort will provide aggregate data that serve as interim markers of progress that are necessary to:

- track and evaluate progress
- demonstrate forward movement
- modify strategies as necessary
- publicize results
- sustain commitment

These data elements, or a subset of the elements, will also serve as the foundation of integrated local information systems that meet front-line staff needs. They can also lay the groundwork for:

- standardized record-keeping systems across local and state agencies to avoid duplication of effort and facilitate information sharing, and
- computerized prosecution data tracking systems for cross-systems data collection and evaluation.
III. BUILDING COMMUNITY PARTNERSHIPS TO PREVENT CHILD ABUSE AND NEGLECT

Child Protection Leadership Teams (CPLTs) and Multi-Disciplinary Teams (MDTs) can provide opportunities for community members to learn the facts about child abuse and neglect, can create a sense of community responsibility towards children and a willingness to respond proactively, and can support community partners in their efforts to support at-risk children and families.

MDT members have traditionally encouraged the reporting of suspected child abuse and neglect, and participated in community education efforts. They must also become increasingly involved, both as leaders and as supporters, in working with schools, non-profit agencies, congregations, parents, and other community partners to prevent child abuse and neglect.

Law enforcement's involvement in community child protection partnerships fits the community-policing model perfectly since that model calls for police to identify community problems at the earliest stage, and then respond to each problem effectively through community, police, and government partnerships.

1. Promoting Appropriate Reports of Suspected Child Abuse and Neglect

Every state and the District of Columbia have statutes that identify individuals who are required to report suspected child maltreatment (known as mandated reporters) and describe the circumstances they must report. Today, reporting laws embrace virtually all professionals who work with children.

Any person, however, may report incidents of abuse or neglect. In approximately 18 states, any person who suspects child abuse or neglect is required to report. (*Clearinghouse on Child Abuse and Neglect, State Statute Series*)

MDT members should educate all citizens, including mandated reporters, to better understand, identify, and respond to the suspected maltreatment of children.
MDTs, along with other community representatives, should develop a strategy for broad-based dissemination of written information that addresses the following:

- Who are the mandated reporters in this state, and what is expected of them?
- How does state law define child abuse and neglect?
- What are the physical and emotional indicators that will help citizens identify maltreated children?
- Who should be contacted to make a report of child maltreatment? (Provide agency and telephone number.)
- What questions will be asked when a report is made?
- What happens if the report is accepted? What happens during investigations?
- Will the reporter be notified of the decisions made in cases?
- What legal protections are afforded to mandated reporters?
- What are the possible penalties for failure to report?

MDT members should work with relevant community agencies to ensure that policy guidance and written protocols that provide a simple process for reporting suspected child maltreatment are available to all mandated reporters.

States should consider establishing a centralized intake process and a user-friendly, toll-free hotline that operates 24 hours a day, 7 days a week. In order to be effective and relevant, such systems require:

- advance and ongoing publicity on the availability of the service (brochures, community newsletters, public service announcements, bumper stickers)
- a fully staffed, highly skilled group of intake workers who can determine safety and risk factors from each telephone call. (This must include nighttime and weekend staff.)
- an automated call distribution system that can give special answering priority to reporters such as law enforcement personnel
- an adequate computerized system to log calls, assist with screening, and track reports
• the participation of community residents and staff in the development, implementation, monitoring, and review of the service
• a solid financial base from which to sustain operations

2. Increasing Community Awareness of Child Abuse and Neglect

Members of MDTs should take the lead in developing partnerships with private non-profit organizations, public organizations, and civic, faith-based, and community organizations and their members to build a safety net that protects all children from harm.

Through these partnerships, partners should share information about the nature of child abuse and neglect problems that face their community, including the number of children affected, the needs of abused and neglected children and their families, and the interventions available and still needed to prevent and address abuse and neglect.

MDT members should improve community awareness by building partnerships that provide a stronger community presence for child abuse- and neglect-related interventions. Examples include:

• Specialized child abuse investigation units and/or staff members in law enforcement agencies and prosecutors’ offices that provide a community presence in and a priority for child protection.
• Community Oriented Police Services (COPS) that provide a consistent, authoritative presence in neighborhoods to give children and their families a sense of security, enables officers to solve problems before they escalate into violence, and brokers services for families in need of supports. For example, the Strategic Home Intervention and Early Leadership Development (SHIELD) Program developed by the City of Westminster Police Department in Orange County, California, uses contacts that law enforcement officers make in the normal course of their duties to identify at-risk youth and connect them with community resources.¹
• Child welfare and CAC investigative and service staff who are stationed in neighborhoods can get to know the community resources and residents; share their knowledge and understanding of child safety and child protection with parents, residents, and community-based organizations; and participate in social, recreational, and other community-building activities.

• Differential responses to reports of child abuse and neglect that screen CPS hotline calls into one of two response tracks: investigation or family assessment. While CPS workers and police respond to reports tracked for investigation, trained staff from community-based agencies respond to reports tracked for family assessment.

MDT members should reach out to the natural networks of family, kinship, cultural and ethnic identity, neighborhoods, and faith communities. They are powerful resources for protecting children and strengthening families.

3. Supporting the Community’s Prevention Efforts

By engaging citizens and community leaders, MDT leaders can mobilize support for effective community prevention strategies. For example, communities can:

• prevent violence in a coordinated manner, through community action teams that include religious institutions, schools, community-based organizations, and law enforcement (adapted, IACP Summit Recommendation, October 1996)

• create mentoring programs in neighborhood centers, schools, libraries, and other neighborhood settings

• bring parents, schools, and related organizations together to create after-school opportunities for children to be safe, increase their academic prowess, learn social development skills, and enjoy friendship and recreation.

The MDT should enlist faith-based and community-based organizations as integral participants in violence prevention strategies. These organizations and their members can:
• teach skills for building nonviolent, nurturing relationships in religious education, summer camps, adult education, and special community events
• create a pool of volunteers from a congregation to provide respite for children and parents
• learn about the problem of child maltreatment, commit to community prevention efforts, and report all suspected child abuse to civil authorities

MDT members should support schools and other community institutions to promote and provide:
• prevention curricula to equip children with the knowledge and skills they need to cope with the challenges of childhood and adolescence. The components of such a curriculum would include self-protection training and family life education
• policies to eliminate corporal punishment in institutional settings
• programs for children with special needs, to reduce the stress on families
• offender prevention programs, such as Stop It Now!

4. Supporting the Community’s Early Intervention Efforts

There is growing recognition of the need for early intervention to promote the healthy development of children and youth, and ensure the safety and wellness of our communities. Intervening after problems occur is more labor-intensive than intervening early, because behavior patterns have become entrenched. Institutions must intervene early.

MDT members should promote and participate in community-based family support initiatives that strengthen families and prevent child maltreatment. These initiatives include:
• self-help and mutual-aid groups that provide nonjudgmental support and assistance to troubled families
• natural support networks that provide families with a supportive network of informal helpers and community resources
• child care and respite care programs to reduce the stress employed parents experience and provide positive modeling and supportive contact for parents and children
• self-care programs for children to reduce the emotional and physical risks that latchkey children may face
• programs that address the impact of lack of resources on children and families, such as those that provide shelter, nutrition, and health care
• public education and media campaigns to increase public awareness of what child abuse is, how it affects children’s lives, and how to prevent it

5. Promoting Legislative Advocacy
   Include definition – mobilize colleagues, citizens can have a strong voice with their legislatures – mobilize colleagues and citizens – vote, etc. Federal and state legislation can restore, promote, and enhance a community child protection agenda. Legislation can:
   • provide preeminence to the issue of child protection
   • promote the work of multi-disciplinary teams
   • support the establishment and operations of child advocacy centers
   • sanction information sharing
   • eliminate categorical rules and requirements
   • sponsor research to identify best practices in prevention and intervention
   • leverage and expand available resources
   • authorize and appropriate funds

   MDT members should mobilize colleagues and neighbors to realize the potential of supportive legislation. They should encourage community leaders and residents to advance the vision of communities in which all children are safe.

   MDT members should get to know candidates who are running for elected office; meet with those who already hold key positions; and garner their support of legislation,
policy, and programmatic initiatives that embrace MDTs, CACs, and community child protection.

**Conclusion**

Working together, chiefs of police, MDT’s and child protective teams, directors of child advocacy centers, and administrators of child welfare agencies, can lead community members and other child protection professionals – one community at a time – to assure that all children are safe in the United States.

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SELECTED RESOURCES

I. Building Professional Partnerships to Respond to Child Abuse and Neglect

Office of Juvenile Justice and Delinquency Prevention
Juvenile Justice Clearinghouse
P.O. Box 6000
Rockville, MD  20849-6000
800/638-8736
Fax:  301/519-5212
www.ojjdp.ncjrs.org

Forming a Multidisciplinary Team To Investigate Child Abuse

Forming a Multidisciplinary Team To Investigate Child Abuse delineates the benefits that an MDT offers and provides advice on forming and operating an effective team. Diverse MDT models are described and keys to making the team a success — confidentiality policies, conflict resolution practices, and periodic review — are discussed.
Available online at http://www.ncjrs.org/pdffiles1/ojjdp/170020.pdf

Law Enforcement Referral of At-Risk Youth: The SHIELD Program
This bulletin provides an overview of Westminster’s Strategic Home Intervention and Early Leadership Development (SHIELD) program. SHIELD uses contacts that law enforcement officers make in the normal course of their duties to identify at-risk youth and connect them with community resources. By improving coordination among law enforcement, social services, community service providers, and the school system, the SHIELD program facilitates early identification and treatment of at-risk youth who might otherwise be overlooked.
Available online at http://www.ncjrs.org/pdffiles1/ojjdp/184579.pdf

Child Development-Community Policing: Partnership in a Climate of Violence
This resource document describes a unique collaborative program between the New Haven, Connecticut, Department of Police Service and the Child Study Center at the Yale University School of Medicine to address the psychological impact of chronic exposure to community violence on children and families.
Available online at http://www.ncjrs.org/pdffiles1/164380.pdf
IACP Summits and Reports
In 1994, the IACP began a series of national policy summits on critical issues facing law enforcement, the justice system, and the community. Previous summit topics were:

- 1994 Violence in America
- 1995 Murder in America
- 1996 Youth Violence in America
- 1997 Family Violence in America: Breaking the Cycle for Children Who Witness
- 1998 Hate Crime in America
- 1999 Victims of Crime – What do Victims Want?
- 2000 Juvenile Crime and Victimization
- 2001 Safety in Indian Country

At each summit, approximately 100 leaders from a broad spectrum of professions and communities came together to develop strategies that could more effectively address the key policy and practice issues raised. Summit reports that detail participants' recommendations have been disseminated to community organizations, government leaders, and police administrators throughout the United States. Each report contains a law enforcement action agenda to help police leaders understand the key role they can play in implementing the overall summit strategy. IACP summits have been catalysts for proactive partnerships between police and other organizations that have improved community capacity to reduce crime and increase quality of life.

Available online at [http://www.theiacp.org/research/#reports](http://www.theiacp.org/research/#reports)

National Children’s Alliance
1612 K Street, NW, Suite 500
Washington, DC 20006
Phone: (800) 239-9950 -or- (202) 452-6001
http://www.nca-online.org


First published in 1989, the National Children’s Alliance Best Practices manual provides operational guidance toward the establishment of children’s advocacy centers in all communities in order to provide information for the evaluation and investigation of child
abuse cases and child-friendly locations where abused children can receive the comprehensive services they need to heal from the injury and trauma of maltreatment.

**Developing a Children’s Advocacy Center: A Four-Step Methodology**

Northeast Regional Children’s Advocacy Center in collaboration with Southern Regional CAC; Midwest Regional CAC; Western Regional CAC; National Children’s Alliance; and M. Christine Kenty, Ph.D. *Developing a Children’s Advocacy Center: A Four-Step Methodology*

This document details initial procedures recommended by the National Children’s Alliance to communities considering the possibility of developing a Children's Advocacy Center (CAC). The process is designed to be used with the “Best Practices” manual published by the National Children’s Advocacy Center and uses resources in a time and cost-effective manner. The steps in the process are progressive--each step requires an increased commitment of time by the emerging CAC and requires a positive outcome from the previous step to warrant the continuation of the process.

**Child Welfare League of America**

440 First Street NW, Third Floor
Washington, DC 20001-2085
202/ 638-2952
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www.cwla.org

The Child Welfare League of America standards of excellence are intended to be used as ideals or goals for practice in the field of child welfare services. Keeping children safe from abuse and neglect is the foundation of child protective services. The standards emphasize the importance of a community-based approach to protecting children and supporting families.

*Available From CWLA Press*
http://www.cwla.org/pubs

This book was written to help practitioners who work on interdisciplinary teams understand the team approach, so that behavior resulting in real teamwork produces effective services. In a light, non-jargon style, the author addresses all helping fields such as, child care, education, social work, physical therapy, counseling, and specialized therapies, as well as all professionals in these fields who deal with clients, patients, or students.

The second edition of this popular book includes new information on teamwork and new strategies on how to achieve team goals in human services and education. The new
edition also provides a training workbook including masters for overhead presentations and team exercises for use in team building and in teaching teamwork skills.

*Available From CWLA Press*

http://www.cwla.org/pubs


Designed to be of practical assistance to families, agencies, and communities, *Cross System Collaboration: Tools That Work* presents one outcome of the CWLA's and Annie E. Casey Foundation's "Mapping a New Direction III" initiative.

This book works as a toolbox of effective principles for collaboration, using a strengths-based philosophy that emphasizes what *works.* An important read for anyone involved with integrating human services at the local level through cross-system collaboration.

*Available From CWLA Press*

http://www.cwla.org/pubs

*Methods*

**Multi-System Case Analysis** (developed by Child Welfare League of America)

The Multi-System Case Analysis (MSCA), tracks a cohort of allegedly maltreated children across a community’s legal and social service systems, focusing on the actions taken and decisions made within each system and on the level of coordination among systems. The MSCA provides valuable data to communities, enabling them to identify strengths and to formulate strategies to reduce gaps, deficiencies, and barriers in existing prevention and intervention policies, procedures, and practices.

Participating in a facilitated multi-system collaboration process and implementing the Multi-System Case Analysis (MSCA) has enabled communities to:

- convene a forum for conflict resolution, education, consensus building, and mutual accountability among the many entities responsible for child protection.

- gather and analyze data that show how a community’s agencies and systems work together to report, investigate, and treat incidents of child violence, and to track and document the client outcomes.

- develop a set of community outcome measures to track progress in protecting children from violence and minimizing its harmful effects.

- identify system strengths and needs, and areas needing support through policies, protocols, and training.

For more information contact Linda Jewell Morgan, Director of National Projects, cwla-morgan@citylinq.com
Other Resources


This toolkit provides practical guidance to law enforcement agencies as they develop and sustain partnerships that support community policing. The toolkit will benefit law enforcement personnel, community-based organizations, educators, youth, government officials, and others seeking to combine efforts to reduce crime and social disorder problems.


This research examined trends in multidisciplinary team system design. Interviews were conducted with individuals knowledgeable about this approach in all 50 states (92% were CPS staff). Of the 50 states, 33 reported having statewide participation, 30 have implemented the multidisciplinary approach using legislative mandate, and 3 have used departmental regulation or directive. Of the 17 states not requiring statewide participation, 11 have enacted statues encouraging the development of teams under specific conditions. States identified the investigation of reported cases, treatment plans, and consultation as the most common functions.

A majority of respondents referred to increased coordination and collaboration and broader and joint decision making processes as the major benefits of MDTs. Challenges included confusion about leadership roles, ownership issues, and scrutiny of their work. Although the most frequent strategy to deal with these challenges was training, only 30% of respondents reported their state providing ongoing training.

This study suggests a change in multidisciplinary team functions from advising and consulting to investigation and treatment planning. This study also indicates that law enforcement and legal services have taken larger roles due in part because team activities are often determined by legislation. Community education and monitoring of cases have become more prominent functions.
II. Building Community Partnerships to Prevent Child Abuse and Neglect


This Bulletin, part of OJJDP's Family Strengthening Series, introduces the program's components, provides a participant profile, examines the structure of Parents Anonymous® meetings, and reviews research that indicate the program's efficacy. Available online at http://www.ncjrs.org/pdffiles1/171120.pdf

Circle of Parents
200 South Michigan Avenue
17th Floor
Chicago, IL 60604-2404
312-663-3520 tel
http://www.circleofparents.org/

Mutual self-help parent support programs are a time-tested child abuse prevention approach that promote positive parenting through open-ended weekly meetings free to anyone in a parenting role. This program model provides for confidential and non-judgmental groups. Under the mentorship of a trained facilitator parent leaders learn to help members offer and receive insight into common problems. Sites often provide parallel children's programs as well.

The Center for Community Partnerships in Child Welfare
700 Broadway Suite 301 New York, NY 10003
Phone: (212) 979-2369
Fax: (212) 995-8756
Susan Notkin, Director
http://www.cssp.org/center/index.html

Community child protection addresses child safety by bringing together all the people in a neighborhood who can play a role in preventing child abuse and neglect, protecting children from maltreatment and supporting families. In addition to traditional service workers, those involved can be relatives, neighbors, teachers, health professionals, elected officials, business representatives, members of the clergy, law enforcement and many others. In short, everyone has a role to play in keeping children safe.

The Community Partnerships initiative addresses child abuse and neglect by raising neighborhood awareness of child safety issues, empowering neighborhood residents to become more involved with families at risk of abusing or neglecting their children,
strengthening locally based organizations and helping them to form networks concerned with child safety, and fostering policy, practice, and organizational changes within public sector child protective services agencies.

Previously the Edna McConnell Clark Foundation Program for Children

National Clearinghouse on Child Abuse and Neglect Information
Service of the Children's Bureau, Administration for Children and Families, Department of Health and Human Services
330 C Street, SW
Washington, DC 20447
(800) 394-3366 or (703) 385-7565
Fax: (703) 385-3206
http://www.calib.com/nccanch/pubs/prevention.cfm

Lessons Learned: The Experience of Nine Child Abuse and Neglect Prevention Programs (1996)
Available online at http://www.calib.com/nccanch/pubs/otherpubs/lessons/index.cfm
CSR, Incorporated, conducted a cross-site evaluation of the nine prevention projects to examine and document their experiences and contribute to an understanding of ways to strengthen families through enhancing community resources and partnerships. This report presents highlights of the experiences of the nine grantees and discusses the policy recommendations derived from those experiences.

Prevention Fundamentals
Available online at http://www.calib.com/nccanch/pubs/prevenres/fundamentals.cfm
Bulletin provides information and resources to assist in understanding prevention activities.

Prevention in Action
Available online at http://www.calib.com/nccanch/pubs/prevenres/action.cfm
Bulletin provides information to assist in planning and/or improving your child abuse prevention program.

Toolkit for Community Collaboration and Child Abuse Collaboration (March 2002)
Available online at http://www.calib.com/nccanch/pubs/prevenres/toolkit.cfm
Toolkit contains:
- Actions for Faith Communities for Child Abuse Prevention
- Actions for the Business Community for Child Abuse Prevention
- Actions for the Media for Child Abuse Prevention
- Community Collaboration Measurement Scale
Murphey, D. *Preventing Child Abuse and Neglect in Your Community.* (Vermont Agency of Human Services Planning Division, April 2000)
This booklet is one of a series produced by the Planning Division of the Vermont Agency of Human Services to assist the work of its regional and local partners achieve positive outcomes for Vermont citizens. The What Works series offers brief overviews of strategies and programs that research has shown to be effective in achieving outcomes by preventing problem conditions and behaviors and promoting positive ones.


The five key elements of a national strategy for the prevention of child maltreatment are detailed in this report along with the approach to implementation of this strategy recommended by the U.S. Advisory Board on Child Abuse and Neglect.
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