Children's Justice Act

Under the Child Abuse Prevention and Treatment Act

Governor's Task Force on Justice for Abused Children - Three Year Assessment Connecticut 2015-2017

Number:

CFDA # 93.643

Contractor Name, Address and Telephone Number:

State of Connecticut
Department of Children and Families
505 Hudson Street
Hartford, CT 06106

Project Title:

3 Year Assessment- Connecticut - Children's Justice Act

Type of Report:

3 Year Assessment- Connecticut – Children's Justice Act

Name and Phone Number of Project Director:

Tammy Sneed (860)550-6471

Name and Phone Number of Governor's Task Force Coordinator:

Kristen M. Clark (860)297-0549

Date of Report:

May 31, 2018

Connecticut's Three-Year Assessment Report 2015-2017

I. Provide a brief overview of the CJA State Task Force

The Governor's Task Force on Justice for Abused Children (GTF, Task Force, or Governor's Task Force), first established in 1988, identified the need for greater coordination of agencies involved in the investigation, intervention and prosecution of child sexual abuse and serious physical abuse cases. The development of multidisciplinary teams (MDTs), that provide critical coordination at the beginning stages of an investigation, has provided a means of maximizing community resources that strengthen and improve interagency responses and interventions. The guiding principles and values that were established initially continue to guide the direction and focus of the Task Force.

II. Overview of systems improvements that were made to address the Task Force goals/recommendations that resulted from the previous 3 Year Assessment.

PRIORITIES AND RECOMMENDATIONS 2015-2017 THREE YEAR ASSESSMENT

Although each member agency focused on their own initiatives over the last three years, the Governor's Task Force on Justice for Abused Children focused on a number of key initiatives. These priorities were selected after each Task Force member was surveyed regarding proposed priorities, followed by discussion and voting by the full Task Force at the March 2015 quarterly Task Force meeting. The GTF priorities for 2015 - 2017 are cited below:

Finding Words Training

The GTF continued to offer the Finding Words Program training twice annually at the Police Office Standards and Training Council's training academy to approximately 78 professionals statewide annually, including DCF staff, prosecutors, police, medical professionals, victim advocates and other individuals associated with MDTs statewide. The faculty developed a "Beyond Finding Words" advanced course to provide follow up training for Finding Words graduates. This training opportunity was offered to the over 600 students the state has trained. Connecticut joined the ChildFirst Alliance along with 17 other states committed to using this forensic interviewing protocol and has participated in protocol updates and research around several of the tenets of the ChildFirst curriculum.

Statewide Assessment of the Services and System

This was completed in 2009 as a part of that Three year Assessment and continued to provide a framework for the task force pertaining to its work around sexual abuse and serious physical abuse of children. The three workgroups that were developed as a result of the needs assessment (Forensic

Interview and Forensic Medical Workgroup, MDT/CAC Workgroup, and Victim Services/ Victim Advocacy Workgroup) continued their work over the past three years as detailed in each year's CJA applications.

Minimal Facts

First Responder's trainings have been and are currently being offered to DCF investigations staff and law enforcement personnel and Discoverers training is offered to all other mandated reporters statewide.

MDT Data Collection

The GTF continued to modify the data collection system and reporting as needed for optimal use and efficiency. A workgroup met to discuss our mutually evolving data needs and identify the mechanisms and system that will best support timely access to critical program data and oversight information. The National Children's Alliance (NCA), NCAtrak's creator and "keeper" of the database, has been made aware of our need for the system to evolve to assist us in tracking these additional data points in an efficient way at a statewide level. The plan is for NCA to assist in the creation of a tool that will collate data from each of the state's 17 Teams until such time that the system can automatically generate those statistics from a central point. NCA has now developed a tool which states can use to aggregate data and Connecticut has been tapped to pilot this new program.

Children with Disabilities

The GTF recognizes the importance of addressing the issues facing children with disabilities. To this end, the GTF has decided to pursue ways to incorporate this area into all aspects of the Task Force efforts. These issues are addressed during the Finding Words trainings, Minimal Facts trainings and will be prominent in legislation tracked though out the year.

MDT Evaluations

The GTF continues to fund and implement the evaluations of Multidisciplinary Teams statewide through the GTF's MDT Evaluation Committee, with support from The Village for Families & Children. The committee focused on accomplishing the following:

- 1. Analyze the Standardized Team Functioning Survey and compare to previous surveys distributed to teams.
- 2. Update the standards for Connecticut's multidisciplinary teams and best practices for multidisciplinary investigations and assessments. Disseminate and orient team coordinators and members to the new standards/best practices.
- 3. Revise the instruments used to evaluate Connecticut's multidisciplinary teams.
- 4. Provide training and technical assistance as needed on the revised evaluation instruments.
- 5. Analyze results of the first round of the redesign process. Distribute information to teams.
- 6. Begin evaluating multidisciplinary teams for the second time under the redesign process.

Support to MDTs

The GTF continues to provide training opportunities for all team members associated with the investigation, assessment, intervention and prosecution of child sexual abuse. Finally, the GTF continues to support the Connecticut Children's Alliance's ability to develop MDTs and CACs throughout Connecticut through support of the CCA State Chapter Coordinator who has oversight and direction to the planning, development and management of the Connecticut Children's Alliance.

Child Representation

The GTF continues to advocate and support increased competencies among the contracted attorneys who represent minor children and parents in Juvenile Court through training and awareness efforts.

Legislation

Although no formal legislative committee exists, GTF members continue to watch closely legislation concerning children and families. As appropriate, issues and legislation were raised at GTF

committees and full GTF meetings. In 2017, the state's legislative Committee on Children engaged several members of GTFJAC as they revised legislation to include requirements of Children's Advocacy Centers in state law. The bill passed in June 2017.

Human Trafficking of Children and Youths

The Governor's Task Force continues to support the state's response to child victims of human trafficking and sexual exploitation. To date, the GTF has supported mutual training and discussion among DCF staff, prosecutors, MDT coordinators, CAC staff, Finding Words faculty and MDT members statewide and have established a solid foundation to improve the state's response to these children and youth. With the acquisition of one of nine federal grants to combat Human Trafficking, the Connecticut grantee and the Children's Justice Act have and continued to work collaboratively in this area. The coordinator for the GTF is now a member of the Department of Children and Families (DCF) Human Anti-Trafficking Response Team (HART), sits on the leadership team and DCF local HART liaisons are accessing the resources of their local MDT teams. During the last three year assessment time frame, HART included in legislation that human trafficking cases are required to go through a Multi-disciplinary process. The use of the state's 17 MDTs in these cases has greatly increased since the passage of this legislation.

GTF Membership

The Membership Committee continue to ensure that all positions on the GTF remain full and provide members the tools and resources needed to assist their work on the Task Force. Specifically, the committee worked to ensure that the three-year assessment and the retreat was implemented through the transition between consultants. The committee also assisted the workgroups which were developed as a result of the 2017 retreat.

III. Overview of the process used to complete the 2018 3YA.

The GTFJAC engaged a consultant in fall of 2016 to develop a tool to survey the task force and conduct a strategic planning retreat based upon results. Cathy Crabtree was contacted to provide the services and deliverables as follows: strategic planning for Connecticut GTFJAC – to include advance consultation with site; advance survey development, distribution, compilation; materials development, facilitation of planning session(s); development of strategic plan documents; follow-up support regarding implementation. The consultant was given past CJA grant applications, the three-year assessment as well as the Connecticut Statewide Assessment to review in order to create the survey tool. ***A copy of the survey tool used is provided along with this three-year assessment.

Consultant ACTIVITY Proposal

Advance Planning and Preparation - October 2016 - January 2017

- Review organizational documents, GTF meeting records, current Three-Year Assessment/Plan
- Participate in advance communications with GTF Leaders
- Develop, distribute and compile advance surveys for GTF members and CT MDT Coordinators
- Develop Agenda and plan for day; Develop handouts for meeting

On Site Meeting – February 2017

• Facilitation of GTF Planning Retreat

Follow Up - February 2017

- Draft summary report from Planning Retreat
- Communications with GTF leadership, as needed

The initial consultant was able to fulfil the activities through January 2017. Two GTFJAC retreat dates were scheduled and canceled by the consultant before personal commitments resulted in her being unable to complete the contract. This caused a delay from January to April for securing a new consultant. The GTFJAC researched additional consultants and contracted with Laura Downs. Once secured, the new consultant received the survey tool, survey results and analysis, GTFJAC documentation and other items necessary to conduct the retreat.

As noted above, the initial consultant developed the survey tool that was distributed to the entire taskforce electronically. Results were tallied and the retreat agenda was developed based upon those results. During the transition, the two consultants discussed the survey, results and proposed agenda. Once the contract transitioned to the new consultant, the GTFJAC coordinator worked with the consultant and chairs of the Executive Committee to determine the participants for the retreat. Initially, the retreat was scheduled to include the Executive Committee; however there was a need to include additional key stakeholders including MDT team members and other task force members.

Connecticut Governor's Task Force ~ Planning Retreat June 13, 2017 summary

A subgroup of the Connecticut Governor's Task Force (GTF) held a full day retreat on June 13, 2017 to discuss and review priority focus areas for GTF including the partnership between the GTF and CCA.

Results of Survey

The group was reminded that the survey was originally designed and administered by a previous consultant in preparation for a January retreat. Due to illness, the consultant was not able to complete the work and Laura Downs, a new Consultant agreed to complete the work. At the time when the original survey was created, the partnership between the Connecticut Governor's Task Force (GTF) and the Connecticut Children's Alliance (CCA) was a core area of focus. Nineteen (19) GTF members completed the survey and the majority of questions were answered by the 19 respondents. The Consultant shared some of the high-level themes from the January 2017 survey:

Strengths

- The varied expertise of the people gathered around the table
- The multi-agency and multi-disciplinary nature of the Task Force membership
- Promoting best practice standards in investigating child abuse

Opportunities

- Utilizing NCA standards to ensure that all teams/CACS are offering high quality of services
- Providing consistent and cohesive victim advocacy; forensic interviewing
- Effectively servicing DMST cases
- Support for and training of the direct workers
- Improving services for the families by creating a better web of communication between disciplines and service providers

Challenges

- The potential impact the state's financial crisis may have on going funding
- Successfully implementing the new NCA standards

Primary Purpose of GTF

- Coordination between constituencies represented on the Task Force
- Support and monitor the work of the MDTs in the State
- Guiding and standardizing best practice for the investigation of child abuse

Primary Purpose of CCA

- To ensure quality services throughout the State of CT to victims of child abuse and their families by providing oversight, technical assistance, training, legislative and community education and awareness surrounding the work of MDTs and CACS statewide
- To provide services to all child victims and their families through collaboration, systemic change, public awareness and legislative advocacy

The survey also included questions about the composition of GTF and the relationship/partnership between the GTF and CCA. The Consultant noted that a significant number of responses for all the questions related to these topics were "not sure" or "neutral" and that this may be an issue that needs to be addressed. The survey was anonymous. Retreat members asked for a full copy of the survey responses which was distributed with the retreat summary.

GTF and CCA Roles and Responsibilities

The Consultants review of the overall survey responses indicated that the roles and responsibilities of the two groups need further clarification. Retreat participants noted that since the survey was done, efforts have been underway to clarify the relationship between GTF

and CCA. The roles and responsibilities of each group were discussed and although each has a different charge there is some overlap in terms of evaluation. GTF has a statutory responsibility to evaluate MDTs, at the same time MDT functioning is a component of the NCA standards for which CCA is responsible for ensuring they are upheld through regular evaluation. It was also noted that the NCA standards for CACs include other elements that GTF is concerned about including forensic interviews, victim advocacy, and medical evaluation. The timing for each evaluation is different, and occasionally may occur within the timeframe. It was noted that with the new Connecticut CAC legislation there is an opportunity to explore ways to streamline and/or align the GTFJAC and NCA evaluations. There was some discussion about the possibility of outsourcing the GTF evaluation to CCA since they are a nonprofit entity but it was not clear if the legislative language that gives authority for GTF to complete this would permit CCA to do the evaluations. It was agreed that an ad-hoc evaluation group will further explore this issue and bring recommendations back to GTF.

In terms of training, there is some overlap between GTF and CCA in terms of who participates in training since CCA training is primarily for MDT members which includes law enforcement, prosecution, DCF, etc. It was noted that the NCA standards also include case tracking and that GTF and CCA have been working together to look at ways to aggregate data at the state level and streamline the data collection process.

GTF Priority Focus Areas

The group reviewed the federal program instructions which included: state Task Force, investigative, judicial handling, demonstrate models, technical resolutions, court handling, sex abuse, GAL, reform of state laws and procedures, supporting child abuse treatment and prevention programs (not a use of federal funds). Examples of activities included: training law enforcement, DCF, courts; supporting CAC and MDTs; fatality review teams; system response; linkage to anti-trafficking efforts and quality CFSR. It was acknowledged that although Connecticut's CJA application has historically received a favorable review, there are areas that could potentially be bolstered and others that may need a fresh look with an eye toward sustainability as follows:

- MDT functioning -- how to streamline state and NCA evaluations? How to address systems issues that emerge from evaluation? What data does GTF need?
- Finding Words what is the statewide reach, impact and plans for sustainability?
- Minimal Facts what is next step to ensure consistency and fidelity?
- System gaps and barriers –how can GTF structure itself to address the system gaps and barriers that arise? How do we influence policy and practice?
- Staff support -- How we use our fulltime staff to maximum benefit?
- Overall Funding is our funding aligned with our priorities?

The group agreed that there are certain functions which are *coordination priorities*. These are things that others have direct responsibility for but GTF needs to be informed about in terms of implementation and policy/practice issues or concerns. These include: human trafficking; children with disabilities; CFSR; CIP and child fatalities.

The group reviewed current committees, workgroups and activities and agreed that the 2017-2018 priorities are:

1. MDT/CAC Evaluation & Quality Assurance

- 2. Training
- 3. System Gaps & Barriers
- 4. Child Fatalities

The group agreed that ad-hoc workgroups for each of these priority areas should be established to replace all the existing workgroups and committees and that the next six months should be used to develop a framework and plans for the next federal grant application which is due May 2018 as follows:

1. MDT/CAC Evaluation & Quality Assurance (volunteer lead: Paula Schaffer)

This ad-hoc group will develop a plan for how the CT and NCA standards and the MDT evaluation process can be aligned and potentially streamlined and how data is collected and utilized.

2. Training (volunteer lead: Margaret Doherty)

This ad-hoc group will assess what training is provided both GTF and CCA including Finding Words, Minimal Facts, MDT training; explore sustainability options, and identify training needs and gaps.

3. System Gaps & Barriers (volunteer lead: John Leventhal)

This ad-hoc group will look at system/service gaps and barriers as well practice fidelity issues (e.g., forensic interviewers, medical interviews, etc.) that have been previously brought to GTF; develop a systemic process for GTF to discuss and track system gaps/barriers on a regular basis and; identify strategies for GTF to develop a common policy platform or agenda.

4. Child Fatality Response (volunteer lead: Faith Vos Winkel)

This ad-hoc group will explore the potential of a developing a local pilot and a plan for implementation.

It was further agreed that the **Victim Services** ad-hoc workgroup would continue to meet given they have renewed traction, to discuss what if anything needs to be considered by the new adhoc groups and the new grant application.

Structural and Organizational Changes

Retreat participants noted several issues regarding the GTF structure, meeting schedule and meeting agendas including: It was noted that there never seems to be enough time on the agenda to have substantive discussion of issues that may not have been related to committee work. The group was concerned that most of the substantive discussions occur at Executive Committee and if a full task force meeting was cancelled, then the GTF could go for six months without meeting. The retreat participants felt that system barriers needed to be a standing agenda item with action and accountability. Participants wanted to ensure that GTFJAC meetings include education on emerging issues and not merely report outs on committee work that had been completed since the previous meeting. The group agreed that the full Task Force discuss possible options for restructuring the GTF meeting schedule and agenda so there is more substantive discussion and engagement. Preliminary ideas included:

- Meeting every other month
- Having a topical issue discussion and/or speaker
- Having system gaps/barriers as a standing agenda item

• Limiting the Executive Committee role to personnel issues and budget

The consultant prepared a meeting summary, which included recommendations from the retreat discussion. The consultant presented and facilitated a discussion of the retreat recommendations at the July 2017 GTFJAC meeting.

IV. Clear outline of the policy and training recommendations that resulted from the 2018 3YA process, which will guide the work of the Task Force for the next three-year period. (Details provided in V)

Connecticut Governor's Task Force Planning Retreat Recommendations

Recommendation #1: Use the next six months to develop a framework and plans for the next federal grant application which is due May 2018. Four ad-hoc groups will be established to replace all the existing workgroups and committees as follows: (The areas addressed in section of 107 e (1) (A), (B) and (C) is identified next to the topic area)

- 1. MDT/CAC Evaluation & Quality Assurance -- Section 107 e (1)(A) and (B):
- **2. Training** -- Section 107 e (1)(A), (B) and (C):
- **3. System Gaps & Barriers** Section 107 e (1)(A), (B) and (C):
- **4. Child Fatality Response** The proposal has not been submitted, however (A) and (C) would be addressed in this area.

Recommendation #2: Discuss possible restructuring of the GTF meeting schedule and agenda. Retreat participants noted several issues:

- there never seems to be enough time on the agenda to have substantive discussion of issues;
- most of the substantive discussions occur at Executive Committee;
- the role of the Executive Committee;
- frequency of GTF meetings given that if a meeting gets cancelled GTF could go for six months without meeting;
- system barriers need to be a standing agenda item with action and accountability;
- meetings should include education on emerging issues and the membership;
 and
- terms of membership need to be reviewed.

At the July 2017 GTFJAC meeting, the above recommendations were adopted with a few minor changes. The task force determined that the Finding Words committee, MDT Evaluation committee and the Victim Services Workgroup would also continue to function during the 2017-2018 year. The new ad-hoc groups convened in September and the timeline was set that each group would present a plan to the full GTF by February so that priorities and a budget can be voted on in March. After initial plans were submitted, the ad hoc groups continued meeting based upon feedback and direction from the full GTFJAC.

Recommendation #3: GTFJAC and CAC continue to work together to support MDT/CAC development.

Additionally, based on the comments and feedback at the retreat, it is recommended that the GTFJAC and CAC continue to work together to support the on-going needs of Connecticut's Multidisciplinary teams who are legislatively mandated to investigate these cases while ensuring that all Connecticut children and their families have access to high quality, comprehensive, specialized and culturally competent services.

V. Description of Task Force plans to incorporate the new recommendations into the work of CJA. (i.e., preliminary information on activities that will be undertaken over the next three years to address the recommendations).

Recommendation #1: Four ad-hoc groups were established and their individual recommendations are as follows:

1. MDT/CAC Evaluation & Quality Assurance (volunteer lead: Paula Schaffer, Yale)
The MDT/CAC Evaluations work group met several times to review and update the Connecticut standards and finalize a standardized Connecticut protocol for multidisciplinary teams in the state. To ensure both documents accurately represented of the all areas of the state, the different professionals involved with MDTs and CACs the MDT/CAC, the ad-hoc group identified key stakeholders to which the documents were distributed for comment.

These ad hoc committee identified the following groups:

- GTFJAC
- All CT State's Attorneys and the Appellate Unit
- Team Coordinators and their members
- DCF MDT Leads

This ad-hoc committee reviewed the Connecticut statue related to MDT/CACs and determined that the final documents were to be voted on and passed by the Governor's Task Force on Abused Children MDT Evaluation Committee. This work has now been handed off to this committee.

The GTF MDT Evaluation Committee is now responsible for the following next steps:

- Review and update the MDT Evaluation Process to help streamline data collection, ensure the evaluation matches the standard and update the report accordingly.
- Create a plan for dissemination of the new standards, protocol and MDT evaluation process.
- 2. Training (volunteer lead: Margaret Doherty, CAFAF)

The Combined Training Ad Hoc workgroup and committee met several times since our summer retreat and four times before establishing these recommendations in early 2018.

The group has the following responsibilities:

- Review specific requests for funds up to \$1,000 for training of individual MDT committee members to enable them to better perform their roles as MDT members and other professionals within their specific disciplines.
- Evaluate existing training opportunities for MDT members and evaluate the unmet needs for training of MDT members in terms of the investigation, assessment, intervention and prosecution of child sexual abuse.
- Make recommendations for structural and procedural changes to the Governor's
 Task Force for Justice for Abused Children to most efficiently and thoroughly meet
 the training needs of GTFJAC members, law and judicial professionals and the
 professionals within their disciplines.

Specific Training recommendations:

- Establish one "Training Committee" with one annual budget and an annual request deadline; with sub-committees for Finding Words faculty and Minimal Facts faculty and developers
- Minimal Facts process and oversight needs to be reviewed and updated
- GTF and CCA to develop a yearly training agenda after surveying the needs and preferences of all team members and coordinators and to revise the "training funds request form"
- Training committee to respond to requests for trainings from statewide attorney associations
- Complete a training at the Judicial Training Institute
- Complete a Minimal Facts Training at the statewide Foster Care and Adoptive Family Conference
- Ensure that the DCF and State Police Mandate for trainings continue to include Minimal Facts
- Review and include trainings identified in the CJA Optional reporting spreadsheet

3. System Gaps & Barriers (volunteer lead: John Leventhal, Yale)

The Systems Gaps and Barriers Ad Hoc Workgroup met 5 times between 9/20 and 11/9. And have continued to meet since these recommendations were submitted in December 2017.

The Workgroup's charges were the following:

- To examine system/service gaps and barriers as well practice fidelity issues (e.g., forensic interviewers, medical exams) that have been previously brought to GTF
- To develop a systemic process for GTF to discuss and track system gaps/barriers on a regular basis
- To identify strategies for GTF to develop a common policy platform or agenda

The following gaps and barriers were identified:

- 1. Forensic Interviewing (FI):
 - a. Strength uniform training of FI in the state
 - b. Timeliness of interviews needs to be determined so that the NCA (National Children's Alliance) standards are met
 - c. Availability of transportation for families so that appointments are not missed
 - d. Lack of uniformity around the state related to who gets a FI related to age, level of concern about suspected sexual abuse, and decisions of law enforcement
- 2. Forensic Medicals:

- a. Strength that medicals are being done at CT Children's Hospital and at the South Central CAC.
- b. Other parts of the state have less availability of getting a forensic medical exam or there is no trained medical examiner at certain MDTs
- 3. Victim Advocacy (VA):
 - a. Lack of uniformity regarding who provides the victim advocacy and the kind of support that is provided. The new NCA standards provide clear guidelines about VA.
 - b. There is a Victim Advocacy GTF Committee that has been meeting and will attempt to address these topics
- 4. Children with Problem Sexual Behaviors:
 - a. There is no standardized approach to these children in the state, and agencies do not know how to handle these patients or where to refer them
 - b. A standardized approach is needed for families who do not follow through with recommended evaluation and treatment
 - c. Guidelines are needed to decide when such children need forensic interviews
- 5. Mental Health:
 - a. There is no uniform standard across the state related to who gets referred to mental health services, the timeliness of these services, and the skill level of the providers related to trauma-based and evidence-based care.
- 6. Spanish Speaking Services:
 - a. This is likely a problem in certain areas of the state related to FI, VA, and Mental Health, but the workgroup gathered no data on this important topic.
- 7. Law Enforcement (LE) and Prosecution:
 - a. Non-uniformity around the state related to:
 - i. Whether LE always attends the FI
 - ii. Whether LE interviews the child or refers for forensic interview
 - iii. Whether LE makes an arrest and timing of arrest
 - iv. Whether case gets prosecuted
- 8. Data and Quality Assurance (importance of data to help define gaps and whether progress is being made at improving services and reducing gaps):
 - a. Timely availability of data
 - b. Need to standardize reporting of data
 - c. Need to review data and develop action plans

Clarifying the extent of the gaps and barriers in the domains outlined above:

- The Workgroup proposed the following strategy: that each major gap/barrier domain have a
 working committee or focus group of content experts (e.g., Forensic Interviewing
 Gaps/Barriers Working Committee or focus Group) who would identify and prioritize 1 to 3
 gaps/barriers to be monitored and addressed.
- 2. These gaps/barriers would, in part, be based on the state and NCA standards, but also could be proposed by local teams.
- 3. Data would be collected, if necessary, to quantify the extent of the gaps/barriers. This data would be collected by CCA (Connecticut Children's Alliance) based on surveys and focus groups and by the data already being collected within NCA Track and through the MDT Evaluation Committee. The Village may assist in the task of collecting new data and collating the data into a useful format.
- 4. Data would be collected periodically (perhaps quarterly) to monitor a change in the gaps/barriers

5. The Working Committee would propose an approach to address the gaps/barriers

Systematic approach for GTF to discuss, address, and track recommendations put forth by specific working committees regarding an approach to address the gaps/barriers:

- 1. The working committee would present in writing and at a GTF meeting the proposed approach to address the gap/barrier.
- 2. GTF would vote on the proposal and if approved the proposal would be triaged to one of 3 Action Committees, which would work to move the proposal forward.
- 3. Three Action Committees: Policy/Practice, Legislative, Funding
 - a. One committee (GTF Policy/Practice Committee) would focus on state policies/practice and would develop a plan to address the gaps/barriers by changing the state's policy or practice regarding the issue(s) to be addressed.
 - b. One committee (GTF Legislative Committee) would focus on state laws and would develop a plan to address the gaps/barriers by changing the state law regarding the issue(s) to be addressed.
 - c. One committee (GTF Funding Committee) would focus on state (and perhaps grant and private) funding and would develop a plan to address the gaps/barriers by identifying state or other funds regarding the issue(s) to be addressed.
 - d. Each Action Committee would be developed by GTF to include professionals with expertise in the relevant area of policy/practice, legislative agenda, or funding and could include professionals not on GTF.
 - e. These Action Committees are proposed as a way of helping GTF and the state to take concrete steps to move forward with an approved plan to reduce gaps or barriers.

4. Child Fatality Response (volunteer lead: Faith Vos Winkel, OCA)

There was no final report or recommendations submitted in the area of Child Fatality Review. There has been a desire to ensure that we are reviewing these cases at the MDT/CAC level and looking at ways we can address this at GTFJAC. The chair of this workgroup sits on the Connecticut State Child Fatality Review board and is developing a proposal that will be submitted to GTFJAC in the area of Child Fatalities in Connecticut and recommended policy changes. This proposal has not been submitted at the time of completing this document.

Recommendation #2: Discuss possible restructuring of the GTF meeting schedule and agenda.

The GTFJAC voted in March 2017 to move meetings from quarterly to every other month with an earlier starting time. The Executive Committee will dissolve as a standing committee, the GTFJAC approved through a vote that all business will be done with the larger Task Force to increase communication with the various members and to allow for more time to address the identified areas. The task force will meet on the 2nd Wednesday of July, September, November, January, March and May of each year. The GTFJAC coordinator will look to incorporate substantive discussion of issues including reviewing system barriers, education on emerging topic areas and highlighting of key policy updates and action items.

Recommendation #3: GTFJAC and CAC continue to work together to support MDT/CAC development.

The Connecticut Children's Alliance(CCA) is a coalition of Children's Advocacy Centers and Multidisciplinary Teams that work together to improve the system in which child abuse cases

are handled. The CCA director position is supported, in part, by Connecticut's CJA funding allocated to GTFJAC. Since its inception, the Connecticut Children's Alliance, Inc. has provided a forum for education and support to the state's MDTs and CACs via monthly meetings and regular training opportunities. Originally formed as a grassroots alliance of the MDT coordinators, the CCA is now a federally recognized non-profit organization (established in May 2009) as well as an accredited NCA (National Children's Alliance) State Chapter (awarded June 2011). CCA, Inc. is committed to strengthening multidisciplinary collaboration and fostering systemic and societal change to protect children. CCA, Inc. also is committed to ensure that all Connecticut children and their families have access to high quality, comprehensive, specialized and culturally competent services of a Children's Advocacy Center or Multidisciplinary Team.

The MDT coordinators, through CCA, have maintained their commitment to increase their visibility and become a voice for the children and families they serve. Members of the CCA continue to provide education to legislators and other stakeholders about Multidisciplinary Teams, Children's Advocacy Centers and the importance of a coordinated interagency response to child sexual abuse. The CCA continues to be involved in other statewide efforts to improve practice related to the investigation of child abuse cases. The GTFJAC supports the CCA's mission that embraces "national best practice" in multidisciplinary investigations of child abuse.