



TN Child Abuse Coordinator Training



Objectives of this Training

- **Review the roles and responsibilities of Child Abuse Coordinators in TN**
- **Increase confidence around reporting concerns of child abuse and neglect**
- **Provide education around the investigative process involving DCS, law enforcement, and Child Advocacy Center**
- **Explore strategies that can be used to prevent future child maltreatment**

Purpose of Child Abuse Coordinators

- **Increase knowledge of best practice responses to child abuse and neglect in school settings**
- **Help educate and provide clarification around child abuse and neglect reporting mechanisms**
- **Strengthen relationships across schools and child and family serving agencies**

Child Abuse Coordinator Responsibilities

The child abuse coordinator and the alternate child abuse coordinator must:

- (1) Have access to an area providing privacy and access to a telephone for reporting suspected child abuse and child sexual abuse;**
- (2) Receive training in regard to:**
 - (A) Mandatory reporting;**
 - (B) Multidisciplinary protocols;**
 - (C) Advocacy centers;**
 - (D) The importance of limited interviews; and**
 - (E) Signs, symptoms, or suspicions of child abuse;**
- (3) Be available for school personnel to share information about suspected child abuse and child sexual abuse;**

Child Abuse Coordinator Responsibilities Cont.

- (4) Assist school personnel in reporting suspected child abuse and child sexual abuse to law enforcement and to the department of children's services;**
- (5) Serve as a liaison between the school, the department, and law enforcement in child abuse and child sexual abuse investigations;**
- (6) Assist law enforcement and department personnel by allowing department personnel to meet with the child individually; and**
- (7) Maintain confidential files in accordance with §§ 37-5-107 and 37-1- 612 regarding all reported suspicions of child abuse and child sexual abuse.**

Fostering a Safe Environment

It is extremely important to note whether a referral is being made to the hotline or if a child is being spoken with or interviewed at school, this should ALWAYS be done in a private and safe setting.

Think about your own school. Where is a place that a child can be safely spoken with? Is there a space that a teacher can use to call DCS?



Recognizing Child Abuse & Neglect

What is Abuse and Neglect?

According TN Law (T.C.A. § 37-1-102), “Abuse” exists when a person under the age of eighteen (18) is suffering from, has sustained, or may be in immediate danger of suffering from or sustaining a wound, injury, disability or physical or mental condition caused by brutality, neglect or other actions or inactions of a parent, relative, guardian or caretaker. Abuse can be physical, verbal, emotional or sexual.

T.C.A. § 37-1-102

Allegations

Physical Abuse
Drug Exposed Child
Environmental Neglect
Nutritional Neglect
Medical Neglect
Educational Neglect
Lack of Supervision
Abandonment
Child Sexual Abuse
Psychological Harm
Abuse or Neglect Death

<https://files.dcs.tn.gov/policies/chap14/WA1.pdf>

How is Caregiver defined?

- **Any relative or any other person living, visiting or working in the child's home**
- **An employee or volunteer at an educational, recreational, medical, religious, therapeutic or other such setting where children are present**
- **Any person in any caretaking role with children, such as a babysitter**
- **Anyone who has allegedly used the child directly or indirectly for the purpose of commercial sexual exploitation of a minor, such as a trafficker.**

<https://files.dcs.tn.gov/policies/chap14/14.1.pdf>

Possible Indicators of Abuse or Neglect

Physical Abuse

- ☐ Unexplained fractures or injuries
- ☐ Previous injuries in various healing stages
- ☐ Patterned injuries consistent with objects of abuse (cigarettes, belt, hands)
- ☐ Burns on extremities, buttocks or genitals
- ☐ Frightened of or shrink at approach of adult caregiver
- ☐ Emotional turmoil (anxiety, depressed, suicidal); developmental delays
- ☐ Self-isolation or undue aggression
- ☐ Fear of going home; many school absences
- ☐ Abuses animals or pets

Neglect

- ☐ Poor growth or weight gain or being overweight
- ☐ Poor hygiene
- ☐ Lack of clothing or supplies to meet physical needs
- ☐ Taking food or money without permission
- ☐ Hiding food for later
- ☐ Poor record of school attendance
- ☐ Lack of appropriate attention for medical, dental or psychological problems or lack of necessary follow-up care

Emotional Abuse

- ☐ Delayed or inappropriate emotional development
- ☐ Loss of self-confidence or self-esteem
- ☐ Social withdrawal or a loss of interest or enthusiasm
- ☐ Depression
- ☐ Avoidance of certain situations, such as refusing to go to school or ride the bus
- ☐ Desperately seeks affection
- ☐ A decrease in school performance or loss of interest in school
- ☐ Loss of previously acquired developmental skills

Sexual Abuse

- ☐ Soreness or bruising, pain or itching in genital or anal areas
- ☐ Sexually transmitted diseases
- ☐ Nightmares or bedwetting
- ☐ Unexplained loss of appetite
- ☐ Becoming isolated or withdrawn
- ☐ Excessive masturbation or sexual play
- ☐ Abuses children, animals or pets
- ☐ Attaches very quickly to strangers or new adults in their environment
- ☐ Obsession with pornography or viewing sexually explicit photos
- ☐ Repeated runaway or suicide attempts
- ☐ Self-destructive behavior/self-injury/cutting, risky or delinquent behavior

Child Welfare Information Gateway

Sexual Behaviors in Children

Natural

- ☐ Between children of similar age, size, and developmental status
- ☐ All children agree to the behavior
- ☐ Tell sexual jokes or use sexual words
- ☐ Exploratory, spontaneous, and occurs in the context of play
- ☐ Children have light-hearted feelings before, during, and after the behavior
- ☐ Children giggling and engaging in the behavior out in the open
- ☐ Self-stimulation to explore genitals and sensations
- ☐ Engage in mutual touching with similar aged friends or cousins
- ☐ Looks at their own bodies and bodies of others
- ☐ Child has made no disclosure

Concerning

- ☐ Child appears unable to stop him/herself
- ☐ Behaviors progress in frequency, intensity, or intrusiveness
- ☐ Behaviors accompanied by aggression or anger
- ☐ Child appears to have too much knowledge of sexuality and behaves in ways consistent with adult sexual behaviors
- ☐ Behaviors continue despite consistent, clear requests to stop
- ☐ Behaviors interfere with social or family relationships
- ☐ They are directed towards adults who feel uncomfortable towards the behaviors

Problematic

- ☐ Behaviors cause physical or emotional pain or discomfort to self or others
- ☐ Preoccupation with the behavior
- ☐ Sexual behavior geared towards younger children/inappropriate age range
- ☐ Planning how to sexually touch others
- ☐ Forcing others (physically or through intimidation) to do sexual acts
- ☐ Tricking others into sexual acts
- ☐ Any penetration
- ☐ Trying to have sexual intercourse with another child or adult
- ☐ Putting mouths on genitalia
- ☐ Manual stimulation, oral, or genital contact with animals
- ☐ Unresponsive to redirection
- ☐ The behaviors are negatively affecting other children

Child Sex Trafficking Red Flags

Physical

- ☐ Has injuries or other signs of abuse and is reluctant to explain them.
- ☐ Appears malnourished.
- ☐ Branded or marked with a tattoo, such as a man's name, symbol of money, or a barcode.
- ☐ Dressed in a provocative manner or in the same clothes, regardless of weather or circumstance.
- ☐ POSSESSIONS
- ☐ Has very few personal possessions.
- ☐ Has an unexplained, sudden increase in money, clothing, or possessions like jewelry without explanation.
- ☐ Doesn't carry identification.
- ☐ Has a number of hotel keys or key cards.
- ☐ Has a prepaid cell phone.

Lack of Control

- ☐ Accompanied by someone who seems to control their every move.
- ☐ Seems scripted in the way they speak.
- ☐ Doesn't have control over their own money.
- ☐ Can't come and go from place to place on their own.

Behavior

- ☐ Fears authority figures.
- ☐ Claims to be an adult, though their appearance suggests adolescence.
- ☐ Seems to move frequently from place to place.
- ☐ Talks about an older boyfriend or sex with an older man.
- ☐ Has inconsistencies in their story.
- ☐ Claims to be visiting and can't state what city they're in or for how long.
- ☐ Isn't able to speak for themselves.
- ☐ Has sexually explicit profiles on social networking sites.
- ☐ Is not enrolled in school or is consistently absent.
- ☐ Seems to be withdrawn, depressed, or "checked out."

End Slavery TN

Understanding How ACEs Impacts Education

- **Adverse childhood experiences (ACEs) are potentially traumatic experiences that can result from abuse or neglect. These experiences have a direct correlation to toxic levels of stress hormones which can interrupt normal physical and mental development.**
- **In childhood, children who have experienced multiple adversities are more likely to struggle in school and have emotional and behavioral challenges, including difficulties with paying attention and self-regulation.**
- **Schools and educators can play a**
- **critical role in promoting caring relationships, helping develop social and emotional skills, and supporting the physical and mental health needs of students.**
- **As the Child Abuse Coordinator, it is important to educate yourself and others around ACEs, the impact on education, and techniques for shifting the culture, norms, and practices of an entire school to create a safe and supportive learning environment for all students**

Things to look out for while video conferencing with children

OBSERVE THE CHILD

- Are there any signs of concerning marks or injuries?
- Are there any signs of illness or malnutrition?
- Pay attention to the child's physical demeanor. Does the child appear nervous or timid during the video sessions? Are they making eye contact? How are they behaving? Does the child appear afraid?
- Does the child appear well rested?
- Are there any hygiene concerns for the child?
- How is the child dressed?

LISTEN TO THEIR BACKGROUND

- What do you hear?
- Who do you hear and what are they saying?
- Do you hear any arguing or fighting?
- Are these noises distracting to the child?

OBSERVE THEIR BACKGROUND

- Who and what do you see?
- Pay attention to other's actions and behaviors. Do the others appear nervous or acting strangely when sessions are occurring?
- What does the child's home environment look like?
- Do you see anything dangerous or unhealthy for the child in the background?
- Are there any signs of substance usage occurring in the home?
- Is there a suitable caregiver in the home during these video sessions?

LISTEN TO THE CHILD

- What are they saying?
- Are they talking slow or fast?
- Is their voice crackling?
- Are they stuttering?
- Do they sound nervous or scared?





Responding to Child Abuse & Neglect

What do I say to a child who discloses abuse?

- **Thank them for their bravery**
- **Assure them they did the right thing for telling someone**
- **Let them know that you believe them**
- **Let them know what happened is not their fault**
- **Tell them that you'll need to talk to someone whose job it is to keep them safe**
- **Tell them you are here to support them**

Note: Your response can have a big impact on their ability to seek further help and recover from the trauma.

(Kids Helpline)

During a disclosure, it's important to avoid:

- Filling in the story – by giving them words or asking leading questions like “Did mom or dad hit you?” or “Do they make you afraid”?
- Asking too many questions – leave the investigating and fact finding to trained professionals
- Expressing anger about the alleged abuser – they may be an adult the child loves and cares for
- Confronting the alleged abuser – it could make things worse or unsafe for the child
- Making promises you can't keep – such as promising you will not tell anyone
- Pressuring the child for information – or for details beyond what they want to say
- Questions that infer blame – like “Did you try to stop them?” or “Did you scream or call out for help?”

(Kids Helpline)

Why do some children not disclose their abuse?

- Threats have been made by their abuser
- They are afraid of the consequences that could come with disclosing
- There is a lack of opportunity (no one has ever asked!)
- There is a lack of understanding that they are being abused
- Despite the abuse, they have a relationship with and even love their abuser. Many children love their abuser but hate the abuse.

Jacob Wetterling Resource Center



Making a Report

Mandated Reporter

“Any person who has knowledge of or is called upon to render aid to any child who is suffering from or has sustained any wound, injury, disability, or physical or mental condition shall report such harm immediately if the harm is of such a nature as to reasonably indicate that it has been caused by brutality, abuse, or neglect or that, on the basis of available information, reasonably appears to have been caused by brutality, abuse, or neglect.”

T.C.A. § 37-1-403 (a) (1)

Internal Procedures

- Organizations can develop internal procedures to track, report, and monitor reports of child abuse and neglect made by their staff.

However, it is against the law for anyone to impede or prevent a report from being made!

T.C.A. § 37-1-403(h)

T.C.A. 37-1-605(d) (1)

If a school teacher, school official, or any other school personnel has knowledge of reasonable cause to suspect that a child who attends such school may be a victim of child abuse or child sexual abuse sufficient to require reporting pursuant to this section and that such abuse occurred on school grounds or while the child was under the care of the school, **then the principal or other person designated shall verbally notify the parent or legal guardian** of such child that a report pursuant to this information has been made and shall provide other information relevant to the future well being of the child while under supervision or care of the school.

Such verbal notice shall be made in coordination with the Department of Children's Services to the parent or legal guardian **within twenty-four (24) hours** from the time the school, school teacher, school official, or other school personnel reports such abuse to the Department of Children's Services, judge, or law enforcement; provided that in no event may the notice be later than twenty-four (24) hours from the time such report was made. **Such notice shall not be sent to any parent or legal guardian if there is reasonable cause to believe that such parent or legal guardian may be the perpetrator or in any way responsible for the child abuse or child sexual abuse.**

T.C.A. § 37-1-605 (d)(1)

Who Should Make the Report?

- **If a child tells their teacher that someone has abused him, that teacher should make the report.**
- **If a child tells her friend she is being sexually abused and that friend tells the bus driver, the bus driver should make the report.**
- **If the principal witnesses a child being abused in the car pick up line, the principal should make the report.**
- **If the teacher observes signs of abuse or neglect, the teacher should make the report.**

Referent Rights

- **Referents have the right to make a report anonymously per state law;**
- **Their personal information may remain confidential and is protected by state law;**
- **They have freedom from civil and criminal liability for reports of suspected abuse and neglect made in good faith;**
- **They have freedom from detrimental change in employment status for reports of suspected child abuse and neglect made in good faith;**
- **The reporter may be notified by mail, email, or web tracking system whether the case was screened out or assigned.**

<https://files.dcs.tn.gov/policies/chap14/WA6.pdf>

What if I am just concerned?

- **You do not have to have proof that child abuse/neglect has occurred in order to report.**
- **The law speaks to making reports based on “available information” and in a situation that “reasonably appears to have been caused by brutality, abuse, neglect, or sexual abuse.”**

Failure to Report

Failure to report is a Class A misdemeanor.

Fine for “failure to report” is not to exceed \$2,500

T.C.A. § 37-1-413



Making a Report to DCS

- **The Child Abuse Hotline Public line : 1-877-237-0004**
- **The Child Abuse Hotline School K-12 Line: 1-855-209-4226**
- **When making a report, it is important to call the Child Abuse Hotline as soon as possible, as opposed to waiting until the end of the school day.**
- **Make report while in a private area.**
- **Avoid placing the child on the phone or having the child in the room with you as you make report.**

Information to have on hand

- **The following information on the child(ren) and their household members/caretakers:**
 - **Name**
 - **DOB or estimated ages**
 - **Relations to one another**
 - **Address or directions**
 - **Phone or other contact information**
- **Does the child or anyone else have any special needs/disabilities? Do they have an IEP?**
 - **This information could impact the level of risk to the child.**
- **Your school's hours of operation and if there are breaks approaching (Christmas break, summer vacation, etc.)**

General Questions Asked

- Describe in detail your concerns
- Does the child have any injuries from the abuse/neglect?
- When did the abuse/neglect occur?
- Where did the abuse/neglect occur?
- What has the child said about the abuse/neglect?
- What has the caretakers said about the abuse/neglect?
- Are there any concerns for domestic violence in the home?
- Is anyone in the home protective?
- Where is the child currently?
- When will the alleged perpetrator have access to the child again?
- Is there concerns for a DCS worker responding to the home?

Reporting Educational Neglect

- **School staff will want to inform the Child Abuse Hotline where they are in their Truancy Intervention plan.**
- **DCS is unable to assign an allegation of educational neglect unless the school has demonstrated attempts to correct the situation under the Three Tier Progressive Truancy Intervention Plan (Attendance Policy 6200).**

Reporting Suspected Physical Abuse/Injuries

When reporting any physical injuries, it is helpful to provide a detailed description of the injuries, including:

- **Size**
- **Shape**
- **Location**
- **Color**
- **Pattern**

It is also helpful to provide the following information:

- **You will also want to provide Is the child reported to be in pain?**
- **Does the child need or have received medical attention?**
- **What did the child say about how the injury was caused?**
- **Do you feel the injuries match the story given?**

Reporting on a child with suicidal ideations

- **Has the child made a threat of suicide?
Already self-harmed?**
- **Did the child say why they are contemplating suicide?**
- **Does the child currently have a plan?
What is the plan?**
- **Has the child attempted suicide previously? How many times? When was the last time? What happened?**
- **Does the child have access to means (guns, knives, prescriptions meds, drugs)?**
- **Are the parents/caretakers aware of the child's suicidal ideations? Are they protective and supportive?**
- **Have the parents attempted to find resources to help the child? What are they?**
- **Does the child need medical attention?**
- **Is there a safety plan in place? Are the parents abiding by the safety plan?**
- **Has Mobile Crisis been contacted? Are they responding?**
- **Does the child have a mental health diagnosis?**
- **Where is the child now?**

Reporting Suspected Sexual Abuse Concerns

- **Child is under 18 and Sex Trafficking**
- **The use of any person under the age of eighteen (18) as defined above in exchange for anything of value either directly or indirectly. Force, threat or coercion is not a factor for Sex Trafficking**
- **Child is 12 and under**
- **Child is 13 -17 and the perpetrator is one of the following:**
 - **A parent, caretaker, or relative (regardless of where the relative lives)**
 - **A person living in the home**
 - **An educator or employee/volunteer of an school, recreational or organizational setting who is responsible for the alleged victim.**
 - **An individual providing treatment, care, or supervision for the child**
 - **If the reporter is unsure about the identity and relationship of an alleged perpetrator**

Criteria for CPS Assignment

Allegation of Harm

Locating
information for the
child and family

Age and
Relationship criteria
based on allegation

<https://files.dcs.tn.gov/policies/chap14/14.1.pdf>

Why are some reports not assigned?

- The information provided does not meet a definition of abuse/neglect as dictated by TN state law.
- The family already has an open case with the department and your concerns are to be addressed in the current open case.
- There is no locating information for the family.
- The information reported has already been investigated by the department in a previous case.
- With sex abuse allegations, the alleged child victim is over the age of 13 and the alleged perpetrator is not a parent, relative, caregiver, or household member. This will be sent to law enforcement.
- The alleged child victim does not reside in the state of TN and will not return to the state of TN in a timeframe that the case could be investigated and concluded.
- The alleged child victim is over the age of 18 who considered an adult in TN and not in DCS Custody.
- Involves alleged physical abuse or neglect by a perpetrator who is not a relative or caregiver and has been referred to the local law enforcement agency as appropriate

DCS Priority Response

Priority 3

Three Business Days

Reports that indicate a low risk of harm.

Priority 2

Two Business Days

Injuries or risk of injuries that are not life threatening and do not require immediate medical care.

Priority 1

Twenty-Four Hours

Reports that indicate imminent threat of serious harm or death

Physical Abuse Immediate Response (PAIR)

A protocol which mandates CPS immediately respond to reports made by licensed school personnel, daycare providers, mental health providers, and medical providers alleging that a child 8 years old or younger, is at risk of further physical abuse.

*Immediate response will be made within 4 hours
from the call to the Child Abuse Hotline.*

Notification



Child Abuse Referral And Tracking

Child Abuse Referral And Tracking

Referrals

Do you need to report the abuse, neglect or exploitation of a child or children?

Please follow the link below to report suspicions of abuse/neglect of children when the suspected abuse/neglect took place in Tennessee. [TCA 37-1-403](#) and [TCA 37-1-605](#) law requires all persons to make a report when they suspect abuse, neglect or exploitation of children.

[Report Abuse or Neglect](#)

Tracking

Did you previously submit a referral and want to know the status?

If you have the **Referral ID**, you can search the referral and find out the status.

[Track a Referral](#)

Pending

Referral Status



Status: Pending

Description of Status

The intake and corresponding case is currently pending.

Links to Applicable TN Law and Policy

37-1-401. Mandatory child abuse reporting.

37-1-102. Definitions.

37-1-601. Prevention of child sexual abuse deemed priority of state - Comprehensive approach - Purpose and construction of part.

37-5-107. Confidentiality of records.

37-1-409. Reports confidential - Authorized access to information - Penalty for violation.

37-1-410. Immunity from civil or criminal liability for reporting abuse - Damages for employment change because of making report.

39-13-107. Fetus as victim.

Policies

In an effort to improve our application, we would appreciate your participation in a short survey.

[Take Survey](#)

Referral Status



Status: Open

County

Shelby

Case Manager

Douglas, Shatoria

(615) 382-2407

Description of Status

The intake and corresponding case has been assigned to the appropriate County and is currently open with a Case Manager

Links to Applicable TN Law and Policy

DCS Regional Offices

37-1-401. Mandatory child abuse reporting.

37-1-102. Definitions.

37-1-601. Prevention of child sexual abuse deemed priority of state - Comprehensive approach - Purpose and construction of part.

37-5-107. Confidentiality of records.

37-1-409. Reports confidential - Authorized access to information - Penalty for violation.

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Policies

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[Take Survey](#)

Processed

Referral Status



Status: Processed

Referral Result

The alleged child victim does not reside in TN. The information has been referred to the state where the child is located.

Links to Applicable TN Law and Policy

37-1-401. Mandatory child abuse reporting.

37-1-102. Definitions.

37-1-601. Prevention of child sexual abuse deemed priority of state - Comprehensive approach - Purpose and construction of part.

37-5-107. Confidentiality of records.

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Case Example: Should A Report Be Called In?

A 7-year-old child disclosed that their aunt had sexually assaulted her last weekend. The child was forced to perform oral sex on her aunt. The child said that the aunt went back home to California yesterday. The aunt does not have current access to the child.

Case Example: Should A Report Be Called In?

Two weeks ago, a 6 yr old came to school with a black eye and redness to her jaw. The child said that mom whipped her and then hit her in the face because the child had gotten in trouble at school the day prior. There are two other siblings in this school. The mother has been repeatedly hostile with school staff, yelling and screaming at both office staff and teachers. One of the siblings is terrified (has uncontrollable crying fits) when something happens at school because of how her mother will react. A CPS referral was called in, and investigators responded to the school. Today, the 6-year-old was absent from school, and one of the siblings said that his sister is not at school today because she has a big bruise on her leg.



Understanding the DCS Response

DCS Response

- **Child welfare is not a one-size fits-all approach. That's why DCS uses the multiple response system to child maltreatment.**
- **Different situations require different responses. DCS has a variety of ways of looking into and responding to allegations. They look at the severity of the alleged maltreatment, and take into account a family's needs. Using the Multiple Response System, child protective services case managers offer a variety of approaches that can be more helpful to families and promise more lasting change.**

When DCS Responds to the School

If at all possible, DCS staff will work with the school to allow minimal disruption to the child's classroom instruction and/or testing.

DCS will need a private and safe environment to meet with the child.

Information Shared

- **All private schools, church-related schools, and state, county and local schools shall give DCS staff, and Law Enforcement if applicable, access to records in their custody pertaining to the child and shall otherwise cooperate fully with the investigation.**

T.C.A. § 37-1-406 (c)

Special Investigation Unit

- **Conducts investigations on allegations of child abuse and neglect which occur while a child is in DCS custody or when the case involves non-custodial children where the alleged perpetrator (AP) is acting in an official employment, volunteer, or foster care capacity.**
- **The SIU conducts investigations where the allegations would affect the employment or volunteer status of those working with children.**
- **When a case involves school personnel, SIU staff immediately notifies the Superintendent or designee assigned to the school district where the allegation occurred.**

TCA 37-1-607 Child Protective Investigative Teams

- **Services basically stipulate:**
 - (a)(1) The department shall coordinate the services of child protective teams. At least one (1) child protective team shall be organized in each county.
 - The department shall convene the appropriate team when a report of severe child abuse have been received.

Child Protective Investigative Team (or MDT)

- “Coordinate intervention so as to reduce potential trauma to children and families and improve services overall, while preserving and protecting the rights, mandates, and obligations of each agency” (NCA, 2017, p. 3)
- “Collaboration among individuals from diverse disciplines and varied expertise will result in more informed decision making and ultimately better outcomes for children alleging victimization” (Jackson, 2012; Lashley, 2005)

CPIT Members

- **Mandatory team members:**
 - **Department of Children's Services**
 - **District Attorney General's office**
 - **Juvenile Court officer or investigator**
 - **One properly trained law enforcement officer with county wide jurisdiction**
 - **Child Advocacy Center staff if CAC is present in county**
- **Other team members**
 - **Medical provider**
 - **Mental health provider**

A Child Focused- Facility

- **Forensic Interviews**
 - Neutral, non-biased and aimed at eliciting facts from children in a developmentally appropriate manner.
- **Victim Advocacy**
 - Offer victim support and advocacy to clients throughout the investigation and legal proceedings. Conduct case tracking to monitor case progress and provide court orientation, as needed.
- **Therapy**
 - Offer mental health services for victims and their families.
- **Multidisciplinary Team Case Reviews**
 - Coordinate a multidisciplinary team for response to child abuse allegations. (CPIT)
- **Medical Exams**
 - When necessary, child advocacy centers will ensure that children receive appropriate medical attention.
- **Community Education & Prevention**
 - Train adults on how to better protect children from child sexual abuse.

tncac.o
rg



Without CACs

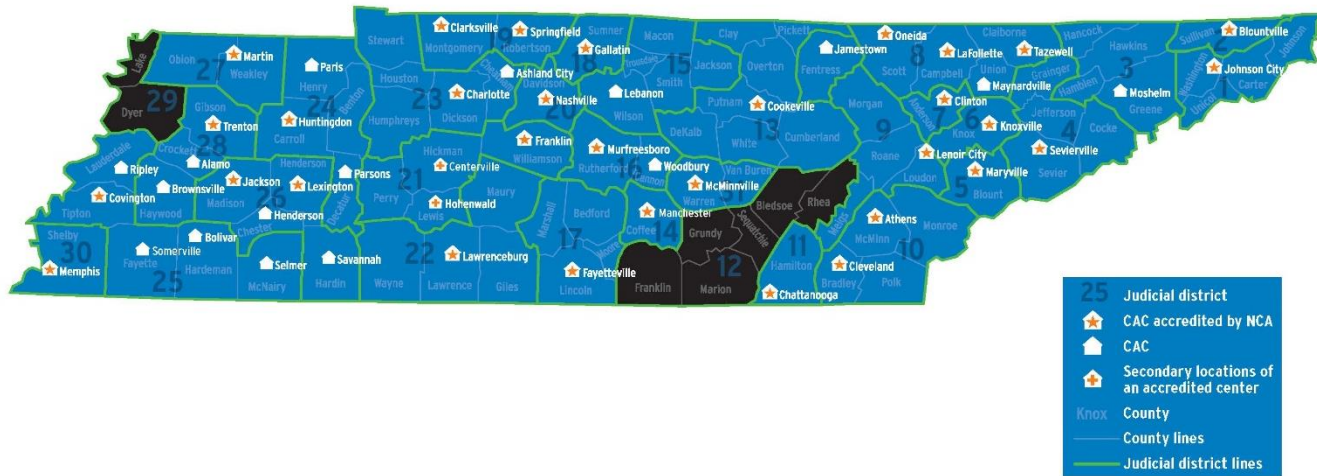


With CACs



tncac.org

CHILDREN'S ADVOCACY CENTERS OF TENNESSEE



The Main Goal

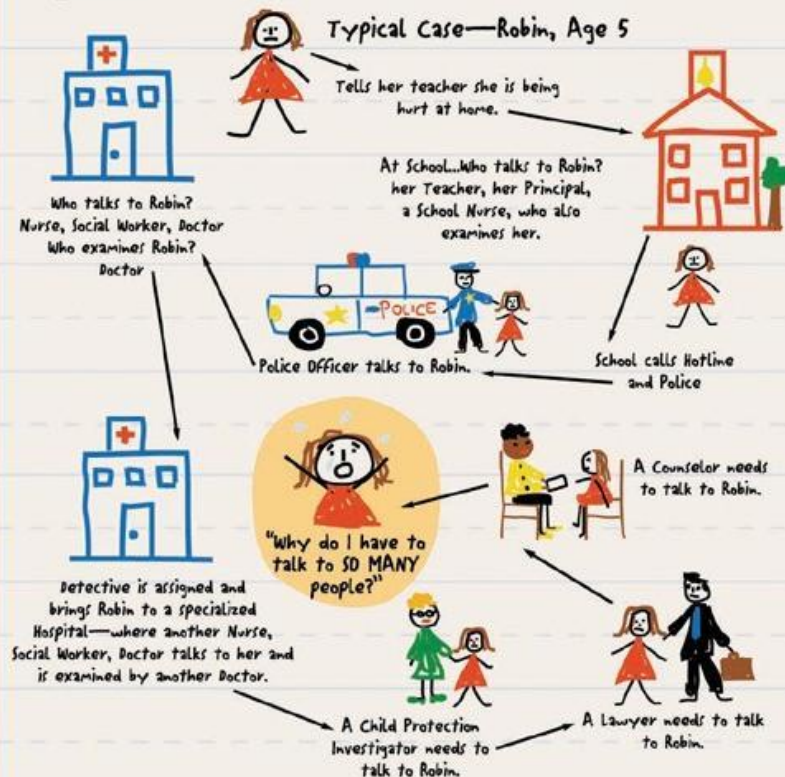
- Collaboration
- Determine if the evidence substantiates the allegation
- Connection to services





Changing the Child Abuse System

WHAT USED TO HAPPEN WHEN KIDS NEEDED HELP FOR ABUSE

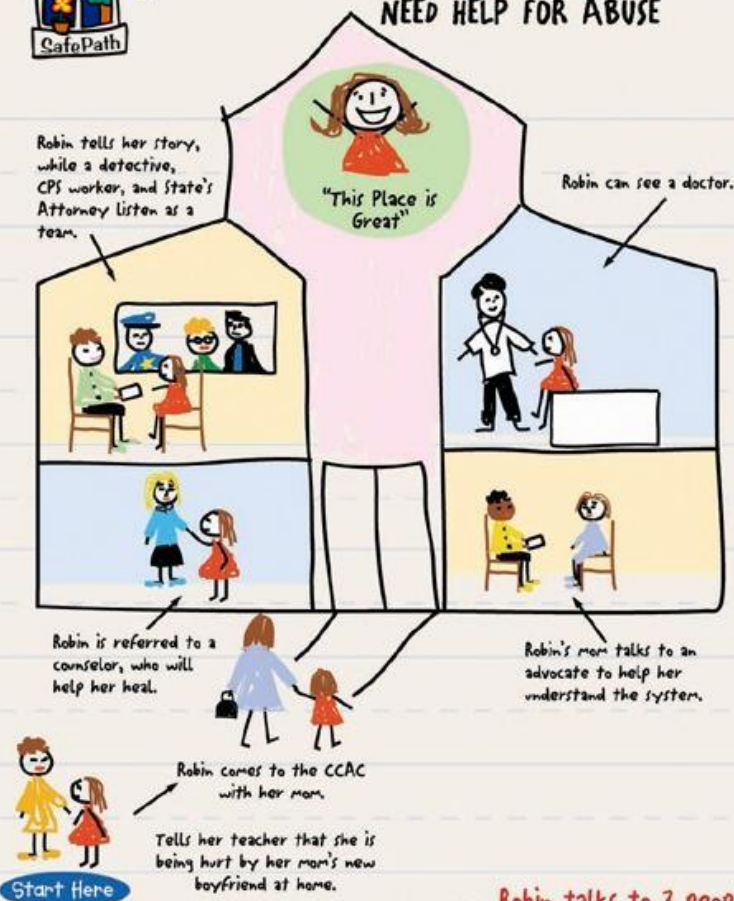


Robin had to talk to 15 people, but now . . .
(turn over)



Changing the Child Abuse System

WHAT HAPPENS TODAY WHEN KIDS NEED HELP FOR ABUSE



. . . Robin talks to 3 people

Forensic Interview

A Forensic Interview is a structured conversation with a child that is intended to elicit detailed information about a possible event that the child may have experienced or witnessed.

- ☐ **Completed in a neutral, child-friendly setting – almost always at the local Child Advocacy Center**
- ☐ **Objective, non-leading, developmentally sensitive**
- ☐ **Forensic Interviewer is specially trained and skilled at talking with children**
- ☐ **Interview is legally defensible – it will stand up in court if the investigation leads to criminal prosecution**
- ☐ **Interviews are video recorded and remotely observed by the Law Enforcement and CPS investigators**

Minimal Facts Interview

- ☐ May be conducted at school by CPS staff
- ☐ Usually a **brief** interview with a child regarding the allegations of abuse
- ☐ **Only** done when required and in consultation with CPIT partners
- ☐ The goal: minimal questioning to yield information necessary for immediate protection
- ☐ Designed to be a SAFETY INTERVIEW
- ☐ Will assess for the need to seek immediate medical care
- ☐ May not be done at all if the CPS investigator can obtain the needed information from other sources

Limited Interviews

“Prevailing practice is for one official interview of the child to be conducted.”

Multiple duplicative interviews are discouraged due to the potential for:

- Increased distress for the child
- Perception of the investigation as harmful
- Increase in “inconsistencies”

NCAC



Preventing Child Abuse & Neglect

"Prevention is possible if we are willing to work in a different, collaborative, and, dare I say, empathetic way. We must work across systems, across silos, and across disciplines to call for a new narrative for all children and families."

-Melissa Merrick

Stewards of Children: Preventing Child Sexual Abuse

Child sexual abuse is not waiting for a cure. Prevention is possible if communities are willing to take necessary steps.

“We are never going to investigate our way out of child sexual abuse cases. The tide changes only with prevention.”

- Steps for Prevention
 1. Learn the Facts
 2. Minimize Opportunity
 3. Talk About It
 4. Recognize the Signs
 5. React Responsibly



Identifying Grooming Behaviors

Targeting the Child

Gaining the Child's and Caregiver's Trust

Filling a Need

Isolating the Child

Sexualizing the Relationship

Marinating Control

Darkness to Light

Using School Policies to Protect Children

Schools can and should create policies that reduce risk of child sexual abuse

- Policies can mandate background checks for job applicants and volunteers and set guidelines about how adults interact with children.
- For example, some policies place limits on when and if an adult may be alone with a child or youth without another adult present.
- Others may allow adults to touch children only within sight of other adults.
- Consider limiting access or locking closets or other rooms that are not in use when children are around.
- Consider adding windows to rooms where older youth or adults gather.

Strategies from Stopitnow.org

Erin's Law (Tenn. Code Ann. § 37-1-601)

- In 2014, the State of Tennessee passed a law (Erin's Law) mandating all public schools to implement a prevention-oriented child sexual abuse program.
- The law requires that the program is taught to children in pre-kindergarten through high school on the topics of sexual abuse awareness, education, and prevention.

To learn more about child sexual abuse prevention efforts in TN and information regarding prevention curriculum programs, please visit our website:

<https://www.tn.gov/dcs/program-areas/child-safety/child-sexual-abuse-prevention.html>

Engaging Families

- **Don't be afraid to engage the families around you in your neighborhoods and communities**
- **Helping families get connected with resources and building up local supports can help child abuse and neglect from ever occurring**
- **Using community resources and supports to help empower families and reduce parental stressors has been shown to reduce child maltreatment**

Understanding Local Resources

- **Keep a list of up to date resources in your area**
- **Use the phone application, “Aunt Bertha” for a comprehensive list of services in your school’s county**
- **Have these resources available if you find that a family is struggling with meeting their basic needs**
- **Many faith based organizations and non-profits have programs designed to empower parents and support the families in their communities**



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Wrap Up

Child-Abuse Coordinator/Co-Coordinator

- According to TN Public Chapter Act 708, Each LEA and each public charter school shall designate a child abuse coordinator and an alternate child abuse coordinator for each school within the LEA or public charter school (Effective August 1, 2020).
- The child abuse coordinator and the alternate child abuse coordinator must:
 - (1) Have access to an area providing privacy and access to a telephone for reporting suspected child abuse and child sexual abuse;
 - (2) Receive training in regard to:
 - (A) Mandatory reporting;
 - (B) Multidisciplinary protocols;
 - (C) Advocacy centers;
 - (D) The importance of limited interviews; and
 - (E) Signs, symptoms, or suspicions of child abuse;

Child-Abuse Coordinator/Co-Coordinator

- (3) Be available for school personnel to share information about suspected child abuse and child sexual abuse;
- (4) Assist school personnel in reporting suspected child abuse and child sexual abuse to law enforcement and to the department of children's services;
- (5) Serve as a liaison between the school, the department, and law enforcement in child abuse and child sexual abuse investigations;
- (6) Assist law enforcement and department personnel by sharing available information regarding suspected child abuse and child sexual abuse, and by providing a private area within the school for law enforcement and department personnel to meet with the child and the reporting school personnel as a group or individually if required; and
- (7) Maintain confidentiality and confidential files in accordance with §§ 37-5-107 and 37-1612 regarding all reported suspicions of child abuse and child sexual abuse.

Additional Recommended Trainings

DCS Mandated Reporter Training

<https://www.tn.gov/content/tn/dcs/program-areas/training/tpd/cw-resources/cwr/mandated-reporter-training.html>



Building Strong Brains videos

<https://www.tn.gov/dcs/program-areas/child-health/aces/building-strong-brains-videos.html>



Introduction to Human Trafficking for Tennessee Educators

<https://courses.endslaverytn.org/courses/Human-Trafficking-TN-Educators>

Additional Recommended Trainings

Drug Endangered Children (DEC) Overview

- This course is designed to help law enforcement officers and other professionals develop an awareness of the potential impact of using a multidisciplinary approach to meet the needs of Drug Endangered Children.

You Can Change the Long-Term Outcomes of Drug Endangered Children

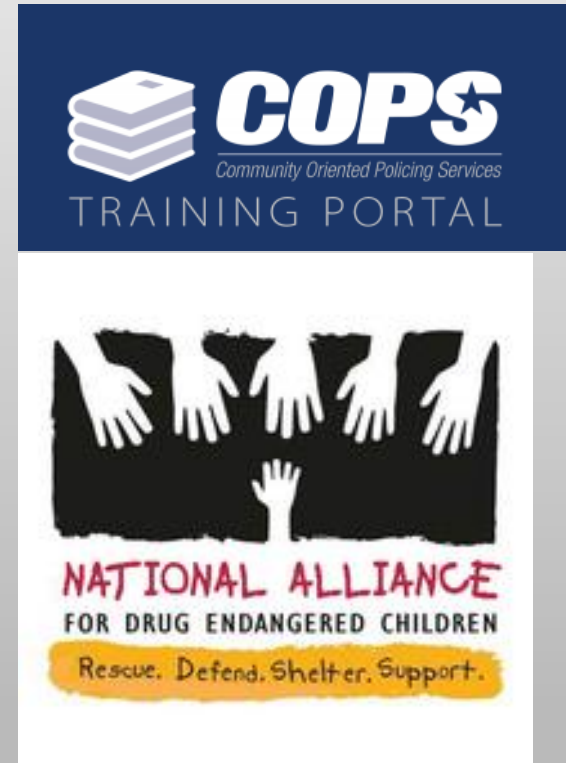
- This course describes the long-term impact and needs of Drug Endangered Children (DEC) throughout their childhood and into adulthood.

Prenatal Substance Exposure – Why Should I Care?

- This course describes how prenatal substance exposure has the potential to cause a variety of physical and developmental challenges for Drug Endangered Children (DEC) throughout their lives.

Postnatal Risks – How You Can Make a Difference

- This course describes how postnatal exposure to an environment where there is substance use and drug activity affects Drug Endangered Children (DEC) throughout their childhood and entire life.



DCS Contact Information



The Child Abuse Hotline Public line :
1-877-237-0004

The Child Abuse Hotline School K-12 Line:
1-855-209-4226

The Child Abuse Reporting and Tracking Site:
apps.tn.gov/carat/

To locate your local DCS office: [TN.gov/dcs/contact-us/](https://tn.gov/dcs/contact-us/)

For
more
informa
tion:



Contact your local
CAC



cactn.org



Amy
Crossland

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(615) 333-5832 ext305

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