

OREGON DEPARTMENT OF JUSTICE



CHILD ABUSE MULTIDISCIPLINARY INTERVENTION (CAMI) PROGRAM GRANT MANAGEMENT HANDBOOK 2009

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TO OBTAIN A COPY OF THE 2007 CAMI GRANT MANAGEMENT HANDBOOK:

The Child Abuse Multidisciplinary Intervention (CAMI) Grant Management Handbook discusses general program requirements and restrictions relating to the administration of all state CAMI grant awards funded through the Oregon Department of Justice, Crime Victims' Services Division. It is expected that this Handbook will provide a ready resource for those agencies in the process of applying for a CAMI Grant, as well as providing grant recipients with an ongoing reference for the length of the grant period.

The CAMI Grant Management Handbook is available in three (3) formats:

- Downloadable in pdf format on the Department of Justice CAMI website:
<http://www.doj.state.or.us/crimev/cami.shtml>
- Electronic Mail (e-mail)
- Hard Copy

Grantees are encouraged to download up to date reporting forms (i.e., Annual Narrative Reporting Form, Annual Fiscal Reporting Form, HB3328 MDT Reporting Form, MDT Quarterly Reporting Form) from the website above.

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Introduction to CAMI

In 1993, the Oregon Legislature established the Child Abuse Multidisciplinary Intervention (CAMI) Program. The CAMI Program provides funds to counties for both the development and on-going support of community child abuse intervention centers (ORS 418.790 through 418.792), and for the development and maintenance of child abuse multidisciplinary teams (ORS 418.746 through 418.747). These funds are obtained through and made available from the Criminal Fines and Assessment Account Public Safety Fund (CFAA) assessed on persons convicted of a crime, violation, or infraction by justice, municipal, district, circuit and juvenile courts.

The CAMI Program's goal is to support a multidisciplinary approach to child abuse intervention. It is the intention of the CAMI Program that services are provided in a child friendly environment by professionals who are trained in risk assessment, the dynamics of child physical and sexual abuse and neglect, legally sound and age appropriate interviewing, and age appropriate investigatory techniques. Services include assessment, advocacy and treatment to children who are victims or alleged victims of child abuse (ORS 419B.005 through 419B.050).

As an extension of this goal, the CAMI Program also provides funding to five regional service providers (RSPs) throughout Oregon who provide support to MDTs and community child abuse intervention centers. The RSPs provide complex case consultation, peer review for medical assessments and forensic interviews, training regarding medical assessments and forensic interviewing, referral and information services, outreach services, and expert witness testimony and referral.

How to Complete a CAMI Application

CAMI funds are applied for on a biennial basis. The MDT is required to submit an application requesting its share of the CFAA Public Safety Fund according to the requirements established by the Department of Justice. Sufficient information must be submitted to establish the county's eligibility in accordance with the directives established in ORS 418.746 (and subsequent legislation). The application must include an intervention plan consistent with the established intent for use of these funds and those needs identified by the team.

The application form is usually released to MDTs via email from the CAMI Program Coordinator in March of each application year. The application is due to the Department of Justice by May 31 of the application year. Once the applications are submitted, they are reviewed by the Advisory Council on Child Abuse Assessment (the CAMI Advisory Council) during the July meeting of the application year. MDTs are notified of their eligibility status immediately following the Council's review. Grant agreements are generated the following October upon each MDT's submission of the previous year's annual report, due September 30.

In order to write an effective CAMI application, the participation of the entire MDT is necessary. Without the input of all MDT members, the intervention plan and budget submitted will not be comprehensive and thus will not meet the needs of the children in that county. Any intervention plan that is unclear, or is not comprehensive will render an MDT conditionally eligible to receive CAMI funding. MDT participation is vital to the CAMI application process.

In addition to participating in the application process, MDT members are required to sign off on the application's Approval and Assurances Page. By signing this page, MDT members are giving their agency's approval of the application and accepting responsibility for carrying out the activities listed in the intervention plan. As a result, it is important that all MDT members review the application prior to signing the Approval and Assurances Page.

Intervention Plans

The CAMI Program's goal is to support a multidisciplinary approach to child abuse intervention. The intervention plan, created by each MDT, is the most important part of the CAMI MDT application and the cornerstone of the MDT. The intervention plan essentially functions as a strategic plan for the MDT, and a central focus point for the intervention activities in each county. The intervention plan should address child

abuse needs in their county and encourage coordinated, comprehensive services to victims of child abuse and their families.

Each MDT applying for funds must submit an intervention plan in addition to the documentation verifying eligibility (as required by statute). The MDT may propose utilization of funds for MDT purposes or the team may assign these funds to a qualified public or private agency that meets the needs of the county intervention plan, such as a child abuse intervention center.

The county's comprehensive plan may include the use of CAMI funds to purchase services from private or public agencies. The application by private or public agencies for funding must be submitted to and approved by statutorily mandated members of the county's MDT (ORS 418.747(1)). The agency's application to the MDT (including an overview of their program intervention plan, worksheets, budget page, and a contract or letter of agreement between the agency and the MDT indicating the services to be provided), should be included as part of the county's application for CAMI funding.

MDT members are responsible for maintaining an impartial review process when screening applications for CAMI funding from public and private service agencies. Team members who have a personal interest in an agency, who have an interest in a business that would receive financial benefit, or who have any member of their household or immediate family who would receive financial benefit from the funding of a public or private agency must declare such interest. Team member's receiving financial benefit from CAMI or who are applying for funds should be excused from the decision making process. MDTs should take such declarations into account when determining whether the agency best meets the needs of the county's CAMI intervention plan.

The application walks MDTs through the writing of the intervention plan by asking them a series of questions regarding the needs of their county's children in regard to child abuse intervention, barriers to meeting those needs, and how the MDT will use CAMI funds and non-CAMI funds to meet those needs. In order to comprehensively respond to these questions, input from the entire MDT is necessary.

The intervention plan must clearly tie in with the CAMI budget created by the MDT. The budget amounts must be listed and described within the intervention plan. This can be in narrative format, or MDTs can develop a table within the document that lists each budget amount and its corresponding description.

Budget

As stated above, the budget must match and document the expenditures listed in the intervention plan. The budget must be clear, detailed, and calculated correctly.

The budget is broken down into four categories pursuant to OAR 137-082-0220. The categories are:

- **Assessment**: A medical assessment, intervention service or psycho-social assessment of children suspected of being victims of abuse and neglect.
- **Advocacy Services**: Services that reduce additional trauma to the child victims and their families.
- **Treatment Services**: Information, referral and therapeutic interventions for child abuse victims and their families.
- **"Eligible Expenses" (Other)**: Personnel costs for staff, interviewers, interpreters, and expert witnesses; services and supplies, rent, capital purchases, and other operational expenses related to providing assessment, advocacy, or treatment services.

After the MDT has identified the child abuse intervention needs within their county and the activities required to comprehensively meet those needs, the MDT needs to work together to create a budget around those activities.

In the application, a spreadsheet is provided that will inform MDTs of their projected biennial allocation amount for the upcoming grant period. MDTs should allocate monies to the four budget categories above in accordance with their comprehensive intervention plan. In a subsequent chapter in this manual, allowable and unallowable expenses will be defined to assist MDTs with the budgeting process.

Additional Application Requirements

The county MDT is required by statute to establish a child fatality review process. CAMI funds may be used to implement and maintain the mandated child fatality review process. Each application year, the CAMI Program will obtain documentation from the Department of Human Services (DHS) regarding whether the required child fatality reviews have been completed and documentation submitted. If the county MDT has failed to submit the required child fatality review forms to DHS, the application will be considered incomplete and the MDT will be found conditionally eligible to receive CAMI funds. (For more information on conditional eligibility, see page 6.)

Fatality review forms should be submitted to the Department of Human Services at the following address prior to the application due date:

Department of Human Services
Child Fatality Review
800 NE Oregon Street, Suite 772
Portland, OR 97232

Submitting the Application

Please complete the following steps:

1. Fill out the cover page of the application. Include signatures of all statutorily mandated members of your county's child abuse MDT (ORS 418.747(1)). (All signatures do not have to be on one page; you may make multiple copies.)
2. Provide all required information. Blank forms are included with the application; copy them as needed.
3. Provide position and job descriptions for any CAMI funded positions.
4. Complete the Checklist to verify that all information is included. Attach the Checklist behind the cover page.
5. Insert title and/or section materials for the application behind the provided tabs.
6. Provide complete addresses and phone numbers for MDT members and Fatality Team members and check that they are current.
7. Mail or hand deliver the completed original and one copy of the application (including all attachments, using the tab sets provided) to:

Mail to:

Oregon Department of Justice
Crime Victims' Services Division / CAMI
1162 Court Street NE
Salem, OR 97301-4096

Deliver to:

Oregon Department of Justice
Crime Victims' Services Division
4035 12th Street Cut Off SE, Suite 200
Salem, OR 97302

Application Review

The application is reviewed by members of the CAMI Advisory Council and the Crime Victim's Services Division CAMI staff to determine whether the application is:

- ◆ Is in compliance with eligibility requirements.
- ◆ Is responsive to the county's need as identified in their coordinated child abuse intervention plan for comprehensive services to the victims of child abuse.
- ◆ Substantially furthers the goals and purposes of ORS 418.747, 418.780, 418.790, and 418.792.
- ◆ Sufficiently demonstrates that the use of CAMI funds benefits children who are alleged victims of abuse and their non-offending family members.
- ◆ Indicates that the MDT has properly allocated previously awarded CAMI funds.

Conditional Eligibility

An MDT can be found conditionally eligible to receive CAMI funds if:

- Their application is incomplete, unclear, or not comprehensive.
- The required child fatality review forms have not been completed and submitted to the Department of Human Services.

After the application has been reviewed by the CAMI Advisory Council and CAMI staff, and the determination has been made that an MDT has been found to be conditionally eligible, the MDT will be notified via a letter sent by the CAMI Program Coordinator. The letter will detail what items need to be provided in order to resolve issues of conditional eligibility. Additionally, the letter will supply the MDT with due dates for the submission of the required information. **Failure to submit conditional eligibility information by the due date could result in a suspension of CAMI payments.**

Availability and Disbursement of Funds

Four payments will be made for each fiscal year, July 1 to June 30. Regardless of who is designated to administer the funds at the county level, the MDT retains the authority for allocation and final accountability for implementation of the CAMI funded portion of the intervention plan.

County allocations are based on two important considerations:

- CAMI funds for each county are allocated starting with a base amount for each county, and the remainder allocated based on population under eighteen and crime rate.
- By statute ORS 418.746(2), CAMI moneys "shall be allocated by the same formula as, or a formula similar to, the formula used by the Attorney General for equitable distribution of the fund for victims assistance programs under ORS 147.227(1)."

Allowable & Unallowable Costs

Allowable Costs

- Per OAR 137-082-0220 (2), CAMI funds may be used for Assessment Services, Advocacy Services, Treatment Services, and "Eligible Expenses."
- CAMI Program funds can be used for start-up costs or for on-going maintenance of a program. Funds from adjoining counties may be combined to design multi-county child abuse intervention services for their area.
- It is appropriate to use CAMI funds to strengthen the functioning of the county's MDT through training and/or consultation. The CAMI Program particularly encourages cross training that involves team members from different agencies.
- The county MDT may determine that the top priority for funding is directed towards supporting their community child abuse intervention center.
- The legally recognized entity that manages the county's CAMI funds may, if justifiable, submit a budget which allocates 5% of the county's CAMI funds for administrative costs. Whether a county allows a sub-contractor to receive administrative costs is the decision of the county MDT (ORS 418.746(9)).
- CAMI funds may be used for prevention activities ONLY when the prevention activities are connected to, or the result of a child fatality review.

Unallowable Costs

- **CAMI funds may not be used as replacement revenues for currently available funds previously allocated by the county or other funding source for child abuse intervention (ORS 418.746(2)).** The Multidisciplinary Team Approval and Assurances signature page provides verification that CAMI funds will not be used as replacement funds.
- CAMI funds may not be used for expenditures that do not follow the MDT's intervention plan.
- CAMI funds may not be used for expenditures that do not fall in to one of the four categories listed in OAR 137-082-0220 (2), Assessment Services, Advocacy Services, Treatment Services, and "Eligible Expenses."
- The focus of CAMI is to provide services during the initial investigation and assessment of child abuse allegations, including crisis intervention services. It is not intended to support on-going or long-term treatment of individual victims.

How to Complete CAMI Reports

Since CAMI's inception, an annual report has been required of MDTs pursuant to ORS 418.746 (7). The report consists of two reporting forms, the fiscal report and the narrative report. The annual report is due each year on September 30. The CAMI Program Coordinator will notify MDTs of the availability of these reporting forms on the CAMI website via email in early August of each reporting year.

With the passing of HB 3328: Karly's Law on June 27, 2007, the Department of Justice was required to report on the implementation of the law. As a result, MDTs were required to make quarterly reports on Karly's Law implementation activities to the Department. Initially, the reporting quarters were reflective of the emergency clause and reporting requirement included in the bill. Currently, teams are required to submit quarterly statistical reports in line with calendar year quarters.

CAMI Annual Narrative Report

The annual narrative report is broken down into two parts, the narrative report and the supplemental report.

The first section of the narrative report is intended to gather information regarding how each individual county spends its CAMI funds in each of the four budget categories: Assessment Services, Advocacy Services, Treatment Services, and Other. For each category, add up the CAMI expenditures as well as expenditures paid for with other funds the MDT has incurred for the applicable fiscal year. The MDT should be tracking all expenditures related to the activities set forth in their intervention plan throughout the year. This can be done in an Excel spreadsheet or a Word Table. An example of an Excel spreadsheet for tracking MDT expenditures can be found on the CAMI website.

If the MDT has spent more or less than the amount budgeted in your CAMI MDT grant application, provide an explanation as to why the category was over or under the amount budgeted. Provide a similar explanation if the amount budgeted in other funds for these activities was over or under spent.

The second section of the narrative report is intended to gather statistics regarding how children are being served in each county. The report will walk MDTs through a series of questions regarding the intervention activities and expenditures set forth in their intervention plans. The final question of this section asks MDTs what the greatest barrier is to providing an adequate and appropriate response to child abuse

in their county. In order to provide a comprehensive answer to this question, input from all MDT members is necessary.

The supplemental report (part of the CAMI annual narrative report) is designed to gather statistical information from MDTs who provide funds to child abuse intervention centers (CAICs) or any other subcontractor receiving CAMI funds from the MDT. MDTs should send this form to the CAIC or subcontractor to complete well in advance of the September 30 deadline for the submission of the entire annual report so that the CAIC or subcontractor will have enough time to promptly complete the supplemental report.

CAMI Annual Fiscal Report

The CAMI fiscal report tracks whether or not MDTs expend all of their CAMI grant monies budgeted for each year, or if there are funds being carried over. Please take the following steps to complete the CAMI annual fiscal report:

- Divide the county's biennial allocation amount in half and list this number in the top square of the table provided in the reporting form. (The allocation amount is the total amount listed in the grant agreement.)
- List the amount of funds, if any, carried over from the previous year in the second square of the table provided. (This amount can be found in the previous year's fiscal report.)
- Add the first and second squares and list the total in the third square of the table provided.
- In the fourth square of the table provided, list the total amount of CAMI expenditures for the fiscal year. (This amount should reconcile with the expenditure amounts listed in the narrative report.)
- Subtract the amount listed in the fourth square of the table from the third square of the table and list the amount in the remaining square of the table provided. This amount is the amount of CAMI funds being carried over into the next fiscal year.

Karly's Law Reporting

MDTs are required to submit quarterly statistical reports related to Karly's Law. These reporting forms can be found on the CAMI website at <http://www.doj.state.or.us/crimev/cami.shtml>. Reports are due to the Department 30 days after each calendar quarter, January 31, April 30, July 31, and October 31.

Protocol Development

ORS 418.783 (1) (a) reads:

Establish and maintain a coordinated multidisciplinary community-based system for responding to allegations of child abuse that is sensitive to the needs of children.

It is based upon this mandate by the legislature that Oregon MDTs were formed. The legislature recognized that the multidisciplinary approach to child abuse investigations reduced duplication of efforts by agencies and community partners, ensured good professional working relationships over time through collaboration, and, most importantly, reduced the trauma to the child and family.

Collaboration is the key to writing good protocols and ensuring that they are followed. Participation from all MDT members results in a protocol that is clear, concise, and easy to follow. When preparing to write protocols, it is important that all MDT members are invited to the table.

Role Definition

The first step in writing an effective MDT protocol is role definition. Clearly defined roles for MDT members ensure that each individual knows what their responsibilities and duties are. Additionally, the team as a whole is aware of the role each agency plays. Per ORS 418.747 (1), the MDT shall include but is not limited to representatives from the following member agencies:

District Attorney
Law Enforcement
Department of Human Services Child Protective Service Workers
School Officials
County Health Department
County Mental Health Department
Child Abuse Intervention Center
Juvenile Department

Other representatives often included in MDTs are:

Court Appointed Special Advocates (CASA)
Hospital or other Medical Personnel
District Attorney's Office Victims Assistance Programs
Parole and Probation
Commission on Children and Families

Each MDT is responsible for identifying an MDT chair and coordinator. When defining each MDT member's role and responsibilities, the role and responsibilities of the MDT chair and coordinator should also be included.

Investigation Protocols

Pursuant to ORS 418.747 (2) the following protocols are required of MDTs:

- Written protocols for immediate investigation of and notification procedures for child abuse cases and interviewing child abuse victims.
- Procedures to be followed to assess the risks to the child.
- Guidelines for timely communication between member agencies. (Cross reporting.)
- Guidelines for completion of responsibilities by member agencies.
- Notification of parents or guardians when there is an abuse allegation involving their child in a daycare facility.
- Criteria and procedures to be followed when removal of the child is necessary for the child's safety.

The protocols listed above are written broadly so that MDTs may incorporate additional protocols that ensure an accurate, thorough and child-centered child abuse investigation. Other investigation protocols under this umbrella include Drug Endangered Children (DEC) protocols, Karly's Law protocols, and the MDT's compliance mechanism.

The MDT compliance mechanism is important to ensuring that protocols are being followed by the MDT. MDTs individually develop a compliance mechanism that functions as a self evaluation tool. Through the compliance mechanism, teams are not only able to make sure protocols are followed, but also identify what changes or updates need to be made. Some MDTs form protocol subcommittees devoted to reviewing compliance issues and updating the MDT protocol on a regular basis.

Confidentiality

Due to the sensitive nature of the work done by MDTs, confidentiality is vital to the MDT approach. MDTs should have a confidentiality agreement that MDT members sign at each meeting. It is also good practice for MDTs to review the CAMI confidentiality statutes (ORS 418.795) and add confidentiality guidelines and expectations to their protocols.

Other Protocols

Although some protocols are required by statute, MDTs are not limited to protocols set forth in statute. MDTs also develop protocols for MDT business so that the entire MDT is aware of how the CAMI money is spent, and how they might access funding for intervention activities identified in the intervention plan. A business protocol often outlines how expenditure requests are processed, or how training requests are applied for and reviewed.

Legislative Changes

Any change in a statute regarding child abuse investigation requires a change in your MDT's protocol. The MDT compliance mechanism, cross reporting, and Karly's Law are all examples of how changes in Oregon statute changed the way MDTs conduct child abuse investigations and thus changed their protocols.

Each application cycle, the Department of Justice will, to the best of its ability, notify MDTs of important statutory changes. MDTs are required to update their protocols accordingly and submit a copy of their most recent protocol to the Department with their CAMI MDT grant application.

CAMI Policy

Budget Redirection

It is the responsibility of the grant recipient to adhere to the approved budget as submitted with the grant application and/or grant agreement, or to request revision of the budget as changes occur. At no time may a budget modification change the scope of the original grant application and/or grant agreement. Funds may be moved and spent only within the scope of the four budget categories and according to the terms of the grant agreement. Administrative expenses may not exceed 5% of the grant award.

Budget revisions do not change the total amount of funding available for the grant. A budget revision may propose to **redistribute** funds within one budget category (e.g. within "Advocacy Services") or to **redirect** funds from one category to another (e.g. "Assessment" or "Treatment Services").

Budget revisions should be reported on and outcomes indicated in the CAMI MDT Annual Narrative and Fiscal Reports.

Budget redistribution moves funds within one category and do not require prior approval. However, redistribution must:

- Not change the scope of the original grant application and/or grant agreement.
- Be moved and spent only within the scope of the approved budget categories and according to the terms of the grant agreement.

Budget redirects, moving funds from one category to another, must be entered on a CAMI budget redirect page and be accompanied by a budget redirect narrative form. One copy of the form is to be retained by the grantee and one copy must be sent to Oregon DOJ. The following budget redirects require that the grant recipient obtain prior written approval from the Department:

- A redirection of funds from one budget category to another in excess of \$500.00
- Any redirection of funds in excess of 10% of the total grant amount

The budget narrative form must contain the following information:

- Grant number
- Reason for excess funds in one or more Service Areas
- Reason funds can be better spent in another Service Area
- Effect the approval or denial of the revision will have on the grant goals and objectives

Training Outside of Oregon

Should an MDT or MDT member identify a need for training that cannot be met by trainings available within the state, CAMI funds may support training outside of Oregon. For example, grantees may benefit by attending national conferences that offer specialized training for MDT members. In order to maximize scarce CAMI funds, training outside Oregon with a total cost of \$3,000 or more must be approved by the Department of Justice in advance. If the out of state training was specifically identified in the intervention plan, and included sufficient detail indicating the location, number of MDT Members planning on attending and itemized costs, then prior Department of Justice approval is not required.

When requesting approval for out of state training in advance, the following must be provided:

- Agenda
- Reason for attending
- A description of topics sufficient to establish that training is for MDT member skill development
- Itemized costs
- An explanation regarding comparable training being unavailable within the state

Positive Practices for MDTs

New Member Orientation

As MDTs experience turnover on a very regular basis, it is sometimes difficult to bring on new members and give them the information they need to participate effectively in MDT meetings. One way to bring new members up to speed is through a new member orientation handbook.

The Klamath County MDT developed a new member orientation handbook that has been very successful in bringing new MDT members up to speed quickly. The handbook developed by Klamath County includes:

- A list of MDT member agencies and their contact information
- Summary of what cases are reviewed at MDT
- Meeting dates and times
- Meeting guidelines and etiquette
- Acronym list
- The statutes that apply to MDTs and child abuse investigations
- MDT Protocols
- MDT member role definitions

The Department encourages every MDT to develop a new member orientation manual or packet. This will provide new members with the information they need to be an active participant on the MDT and welcome them to the group.

If you are interested in obtaining a complete copy of the Klamath County new member orientation handbook, please contact CAMI Program Coordinator Stacy Liskey at (503) 378-5344 ext. 238 or CAMI Grant Assistant Mackenzie Gray at (503) 378-5344 ext. 239.

Budget Subcommittees

In addition to the challenge of child abuse investigation, MDTs are responsible for managing their CAMI grant and conducting the MDT's financial business. As MDT caseloads are large and MDTs don't always have the time to review finances at their regular meetings, some MDTs have found it helpful to develop budget subcommittees.

The role of the budget subcommittee is to keep track of the CAMI funds that come through the MDT. For some subcommittees this means verifying that expenditures

have been spent in accordance with the intervention plan and approving them. For other subcommittees this means reviewing MDT member's requests for training dollars and awarding them.

Here is an example of an MDT budget subcommittee protocol developed by Clatsop County:

When any entity wants payment for any expenditure which the entity feels is covered by the CAMI grant, such entity shall submit the expenditure to the budget subcommittee along with any cancelled checks, receipts or other verification to support the request.

Upon receipt of any such expenditure, the budget subcommittee shall assure that the proper verification has been provided, determine whether the expenditure is contained within the budget and shall authorize or deny such request as soon as practicable. Those requests which have been denied shall be returned to the entity requesting payment. Those requests which are approved shall be forwarded to the Seaside School District for payment.

A majority of the subcommittee must concur as to either the denial or approval of said payment.

A budget subcommittee ensures that a specific and clear set of checks and balances is in place to track CAMI funding. It also saves valuable MDT meeting time.

Protocol Revision Subcommittee

Similar to the budget subcommittee, the protocol revision subcommittee acts as a timesaver for MDTs. The purpose of this subcommittee is to review and update protocols on a regular basis. This can be annually, every 6 months, or quarterly, depending on an MDT's protocol development needs.

Protocols are constantly evolving with legislative changes or changes an MDT makes pursuant to a case staffing or compliance review. By having a subcommittee that meets regularly outside of the scheduled MDT meeting, the MDT ensures that the protocols are always current and up to date. This is extremely helpful when a copy of updated protocols is required in the CAMI biennial MDT grant application.

Protocol Training

As MDT membership changes on a regular basis, it is important to make sure that all members understand and follow the protocols of the MDT. One way that teams are addressing this issue is to host regular protocol trainings. The Marion County MDT has an annual protocol training that is regularly attended by all MDT members. The training is organized and coordinated by the MDTs protocol subcommittee. This training ensures that new members understand the protocols, and more experienced members are kept up to date regarding any changes in protocol.

Conflict Resolution

Whenever an MDT meets, various disciplines, work styles, and personalities come together. As these differences combine, conflict is natural. MDTs that are able to effectively resolve their conflicts are teams that are strong, healthy, and more collaborative.

Resolving conflict does not mean that everyone has to reach the same conclusion on an issue, but rather that a consensus is reached through constructive discussion. The following points are tips for resolving conflict within an MDT:

Points to Remember When Faced With Conflict¹

- Do not lose sight of the team purpose.
- Look forward to opportunity, not backward to blame.
- Be respectful. Ensure each contention is considered. Listen to one another. Be sure each position is understood. Restate the other position in your own words.
- Clarify the opposing point of view until you are sure you understand. Find something positive in each view. Avoid defending your point of view until you understand the other.
- Do not withhold an opposing point of view.
- State your position clearly, firmly, but without excessive emotion.
- Once you have been heard, do not continue to restate your position.
- Avoid personalizing your position - keep the discussion focused on the issue.
- Offer suggestions rather than mere criticism of other points of view.
- Remember that conflict within a team is natural and work toward a mutually agreeable resolution.
- Base resolutions on consensus, not abdication of responsibility or integrity.
- Keep focused on the team's agreed-upon purpose and refer to your protocol for guidance.

¹ *Forming a Multidisciplinary Team To Investigate Child Abuse - United States Department of Justice, 2000*
<http://www.ncjrs.gov/pdffiles1/ojdp/170020.pdf>

A conflict resolution policy can provide the framework for MDT members to effectively discuss issues and reach resolution. A brief policy that sums up how your MDT has agreed to address conflict within the group can be easily added to the MDT protocol to ensure that all members reach the same understanding.

Child Fatality Review

Not only is child fatality review an important function of Oregon MDTs, it is required by ORS 418.785 as well as the CAMI MDT grant. Child fatality reviews are emotionally challenging for teams, however, the information gleaned from these reviews is invaluable in the prevention of other child deaths.

In order to conduct a comprehensive child fatality review, the team must complete a child fatality review form and submit it to the Department of Human Services. The forms can be found online at:

<http://www.oregon.gov/DHS/ph/ipe/docs/df2000.pdf>

The form can be used as a guide for teams as they review all of the information pertinent to the child fatality. The information collected in this form assists the state child fatality review team in creating and implementing prevention measures statewide.

The team should review all deaths that fall under the jurisdiction of the medical examiner. A review team can choose to review other deaths in addition. At minimum, deaths in the following categories should be reviewed:

- All medical examiner cases
- Homicides
- Accidents
- Suicides
- Undetermined causes
- Sudden or unexpected deaths
- All cases with previous DHS involvement and all cases under investigation by law enforcement

Child fatality review teams should review all deaths that occur in their counties and review deaths of children who die in the county but are residents elsewhere. In some cases, two counties will choose to review the same death. In cases where the child dies in another county because of transport for emergency care, the county where the incident occurred is responsible for reviewing the death.

If a team reviews a non-resident occurrence, the coordinator should notify the resident county's MDT coordinator so that they may also coordinate their review. This is particularly important in rural counties from which children are often transported to tertiary care centers where they are pronounced dead.

In order to have the most effective review process possible, team members are required to:

- Come prepared with information on the deaths to be reviewed.
- Share their information openly and honestly.
- Seek solutions instead of blame.

Questions that team members should seek to answer during the review process are:

- Is the investigation complete, or should we recommend further investigation?
If so, what more do we need to know?
- Are there services we should provide to family members, other children and other persons in the community as a result of this death?
- What risk factors were involved in this child's death?
- What changes in behaviors, technologies, agency systems and/or laws could minimize these risk factors and prevent another death?
- What are our best recommendations for helping to make these changes?
- Who should take the lead in implementing our recommendations?
- Is our review of this case complete or do we need to discuss it at our next meeting?

A thorough review process can provide a team with important information that can lead to the development of prevention measures in their county. While these cases may be difficult for MDTs to discuss, this process plays an important part in saving other children from similar fates.

How to Make it a Good Site Visit

A CAMI site visit is an opportunity for the MDT and Department of Justice to check in with one another. A site visit may be prompted by a routine time for a visit (24 months since last visit), a request for a site visit by the grantee, or concerns regarding the handling of the grant or functioning of the MDT. Prior to the scheduled, in-person visit, the CAMI Program Coordinator will host a teleconference with the MDT Coordinator or Chair. During the teleconference, a series of questions will be asked and information requested.

Upon completion of the telephone portion of the site visit, the CAMI Program Coordinator will inform the MDT Coordinator or Chair regarding what items require review during the in person visit. The in-person site visit typically includes a review of the following:

- A. MDT/Program administration
- B. Financial reporting and accounting
- C. Systems and controls
- D. Compliance with state regulations/guidelines as appropriate

Each grantee is responsible for keeping records that fully disclose the amount and disposition of the proceeds of the grant. This includes financial documentation for disbursements, daily time/attendance records for CAMI funded staff, job descriptions, contracts for services, receipts and other records which facilitate an effective site visit or desk review.

Records shall also be kept pertaining to the total cost of the activities outlined in the intervention plan for which the grant is awarded, and the amount and disposition of the proceeds of the grant. The procedures developed by each grant must provide for the accurate and timely recording of the receipt of funds, expenditures and unexpended balances. Adequate documentation of each transaction shall be maintained to permit the determination, through a site visit or desk review, of the accuracy of the records and whether expenditures charged to grant funds are allowable.

Keeping thorough and organized records will ensure that an efficient site visit will take place and additional time will be available for the MDT or staff to ask questions or solicit additional information or training from the CAMI Program Coordinator.

In addition to reviewing records and documents during the in person visit, the CAMI Program Coordinator may also request to attend an MDT meeting or meet with the MDT chair. This request is geared towards providing both the MDT and the Department of Justice with an opportunity to learn more about what is happening in the field and if there are any child abuse intervention needs that are not being met.

Resources

American Bar Association Center on Children and the Law
202-662-1720
www.abanet.org/child

American Humane Association
800-227-4645
www.americanhumane.org/protecting-children

American Professional Society on the Abuse of Children (APSAC)
877-402-7722
www.apsac.org

American Prosecutors Research Institute (APRI)
703-549-9222
www.ndaa.org/apri

Cares Northwest
503-276-9000
www.caresnw.org

Child Abuse Multidisciplinary Intervention (CAMI) Program
503-378-5344
www.doj.state.or.us/crimev/cami.shtml

Child Welfare League of America (CWLA)
703-412-2400
www.cwla.org

FBI National Center for the Analysis of Violent Crime
<http://www.fbi.gov/hq/isd/cirg/ncavc.htm>

Jackson County Child Abuse Task Force
541-734-5437
www.cac4kids.us

Juvenile Justice Clearinghouse
202-514-9208
<http://ojjdp.ncjrs.org/programs/ProgSummary.asp?pi=2>

Juvenile Rights Project
866-608-1212
www.jrplaw.org

Kempe Center for the Prevention and Treatment of Child Abuse and Neglect
303-864-5300
www.kempe.org

KIDS Center
541-383-5958
<http://kidscenter.org>

Kids FIRST
541-682-3938
www.lanecounty.org/KidsFirst

Missing and Exploited Children's Training & Technical Assistance Program
800-648-4966
www.foxvalley.tec.wi.us/ojjdp

Mt. Emily Safe Center
541-963-0602
<http://mtemilysafecenter.com>

National Association of Medical Examiners
404-730-4781
<http://thename.org/>

National Center for Missing and Exploited Children
800-843-5678
www.missingkids.com

National Center for Prosecution of Child Abuse
http://www.ndaa.org/apri/programs/ncpca/ncpca_home.html

National Children's Advocacy Center
256-533-5437
www.nationalcac.org

National Children's Alliance (NCA)

800-239-9950

www.nca-online.org

Native American Children's Alliance (NACA)

216-321-7989

www.nativechildalliance.org

Office of Juvenile Justice and Delinquency Prevention (OJJDP)

800-851-3420

<http://ojjdp.ncjrs.org>

Oregon District Attorney's Association (ODAA)

www.odaa.state.or.us

Oregon Network of Child Abuse Intervention Centers

www.childabuseintervention.org

Prevent Child Abuse America

312-663-3520

www.preventchildabuse.org

Western Regional Children's Advocacy Center

866-592-4272

www.safepassagecac.org/content/view/27/50