

# **CHILD WELFARE OVERSIGHT AND ADVISORY COMMITTEE**

## **Minutes**

**July 15, 2021**

### **Call to Order and Roll Call**

The Child Welfare Oversight and Advisory Committee meeting was held on Thursday, July 15, 2021, at 1:00 PM, in Room 131 of the Capitol Annex. Representative David Meade, Chair, called the meeting to order, and the secretary called the roll.

Present were:

Members: Representative David Meade, Co-Chair; Senator Julie Raque Adams, Co-Chair; Senator Karen Berg, Denise Harper Angel, Brandon J. Storm, and Whitney Westerfield; Representatives Kim Banta, Josie Raymond, and Nancy Tate.

Guests: Amy Burke, Assistant Deputy Attorney General, Criminal Division, Office of the Attorney General; Heather Wagers, Executive Director, Office of Trafficking and Abuse Prevention and Prosecution, Office of the Attorney General; LeAnna Homandberg, Board Member, Child Sexual Abuse Prevention Board; Jacqueline Sugarman, M.D., F.A.A.P., Associate Professor of Pediatrics University of Kentucky, Medical Director, Children's Advocacy Center of the Bluegrass and Children's Advocacy Centers of Kentucky; Laura Kretzer, Director of Strategic Initiatives and Programming, Blair Lee Finance Director, and Ellie Young, Program Compliance Specialist, Children's Advocacy Centers of Kentucky.

LRC Staff: Ben Payne, Lead Staff, Samir Nasir, Becky Lancaster, and Amanda DuFour.

### **Election of Senate Co-Chair**

A motion was made by Senator Westerfield and seconded by Senator Storm to nominate Senator Julie Raque Adams as Senate Co-Chair. A motion was made by Senator Westerfield and seconded by Senator Storm that nominations cease and Senator Adams be elected Senate Co-Chair by acclamation. Senator Adams continued the meeting as the presiding chair person.

### **Approval of Minutes**

A motion to approve the minutes of the November 16, 2020, meeting was made by Senator Westerfield, seconded by Representative Meade, and approved by voice vote.

**Child Sexual Abuse and Exploitation Prevention Board – Mission, Challenges, and Opportunities**

Heather Wagers, Executive Director, Office of Trafficking and Abuse Prevention and Prosecution, Office of the Attorney General, testified to the committee who were the members appointed to the Child Sexual Abuse and Exploitation Prevention (CSAEP) Board and the scheduled meeting dates for 2021. She listed measures taken by the CSAEP Board to improve operations and further the board's mission. She discussed the CSAEP Board's decision to explore funding opportunities to participate within the (Kentucky Employee Charitable Campaign (KECC). She reviewed how the CSAEP Board advertises upcoming activities, trainings, and grant solicitations on the I Care About Kids Website.

LeAnna Homandberg, Board Member, Child Sexual Abuse Prevention Board, listed the CSAEP Board's standing committees along with a brief description of each. She discussed the five goals within the strategic plan of the CSAEP Board: to increase public and professional awareness and understanding of the nature and scope of child abuse and exploitation; to fund quality services and innovative programs; to have a greater influence on public policy relating to child sexual abuse and exploitation; to increase the effectiveness of the CSAEP Board; and to ensure continued growth and viability of the Child Victim's Trust Fund. She reviewed the "Are They Good for Your Kids" campaign related to online predators and other people influencing children. She went over a graph that detailed the number of child sexual medical exams that were funded by the CSAEP Board and performed in 2019 and 2020. She reported on the fiscal year (FY) 2021-2022 statewide and regional grant recipients. She discussed Child Advocacy Week and its policy initiatives along with the Child Advocacy Center (CAC) site visits and regional trainings.

Amy Burke, Assistant Deputy Attorney General, Criminal Division, Office of the Attorney General, discussed aspects of trauma informed sexual assault investigations such as: sexual assault report writing; survivor statement and community engagement; the Prosecutor's Roundtable; the Sexual Assault Nurse Examiners (SANEs) approach to sex trafficking; and the over overview of changes to human trafficking laws and signs of human trafficking. She mentioned that the CSAEP Board partnered with the Zero Abuse Project to bring training to the state on behalf of state and county prosecutors. She relayed that the trainings were tailored to the needs of the prosecutors and to Commonwealth attorneys in relation to dependency, abuse, and neglect court cases. She discussed the 2021 Stark Prosecutor Symposium that focused on the role of technology within dependency, abuse, and neglect crimes. She reviewed the topics of training and discussion at the national Crimes Against Children Conference. She talked about the Child Abuse Prosecution Toolkit available on the Kentucky Office of the Attorney General's website. The toolkit provides resources, trainings, and best practices as related to working in multidisciplinary teams.

Ms. Wagers reviewed the Child Victims' Trust Fund (CVTF) that is administered by the CSAEP Board. She discussed the CVTF donations and shared a graph with amounts donated each year. Kentucky license plate sales is typically the largest source of revenue for the CVTF. She reviewed a graph that displayed the historical data relating to the license

plate sales, other revenue generated, and how much money has been spent by the CSAEP Board.

In response to the questions and comments from Senator Adams, Ms. Wagers stated that the CSAEP Board has operational money to cover site visits if necessary. She stated that there are no general fund dollars given to the CSAEP Board. She stated that money from license plates sales is a rotating reoccurring fund however the CSAEP Board spends more than it receives to fund multiple programs. She stated that the Office of the Attorney General would welcome all support and resources needed to take on endeavor that would expand the scope of victims beyond sexual abuse victims to include other victims of abuse and neglect. She stated that CVTFs in other states focus on all forms of maltreatment whereas the Kentucky CVTF only focuses on sexual abuse and exploitation. She reviewed other ways that states fund raise money for its CVTF.

In response to the questions and comments from Senator Berg, Ms. Burke stated that the CSAEP Board did not hire private prosecutors for sexual abuse cases. She clarified that prosecutors could apply for a grant to pay for an expert to testify in a child sexual abuse case.

### **Children's Advocacy Centers of Kentucky – Mission, Challenges, and Opportunities**

Laura Kretzer, Director of Strategic Initiatives and Programming, Children's Advocacy Centers of Kentucky (CACs of Kentucky), stated that CACs of Kentucky was established to promote, assist and support the development, growth and continuation of Children's Advocacy Centers in the Commonwealth of Kentucky. She explained that the response to child abuse is complex and requires multiple disciplines that can be found within the CACs of Kentucky model. She reviewed the definition of a CAC as defined by KRS 620.020(4). She followed with a list of key services provided by the CACs of Kentucky. She discussed a map detailing various CACs of Kentucky locations. She reviewed the yearly Victims of Crime Act Formula Program (VOCA) grant amounts awarded to the CACs of Kentucky and the projected amount for 2021. She reviewed the trends in the number of children served in Kentucky with a comparison of the first three quarters in FY 2020 to FY 2021.

Ms. Kretzer discussed how several factors that increased in 2020 correlate to an increase in child abuse such as: unemployment, increased stress, social isolation, substance misuse, and decreased access to childcare. She went over how the CACs of Kentucky adapted to the changes in 2020. She discussed the yearly comparison of the average number of victim advocacy and case management contacts per child, indicating a higher a level of need for the children served. The CACs of Kentucky expect the trend of increasing child abuse reports to continue in August of 2021 when children return to schools. The CACs of Kentucky is requesting \$2 million from the American Rescue Plan Act to replace previous losses in revenue. CACs of Kentucky is requesting \$900,000 to provide an additional

mental health therapist at each of the CACs of Kentucky in anticipation of the increase in mental health needs.

Ms. Kretzer defined a multidisciplinary team and its objectives established in KRS 620.040 (7)(c). She provided a list of the type of members that make up a multidisciplinary team. She discussed that the CACs of Kentucky have prioritized the multidisciplinary team model as part of a multidisciplinary enhancement project in three CACs of Kentucky. She explained the centralized intake initiative's process to begin a joint investigation process with law enforcement and the Department for Community Based Services (DCBS) with a flow chart. She shared four charts regarding the percentages of: reports receiving multidisciplinary team responses; children meeting criteria for a forensic interview who received a forensic interview; children meeting criteria for mental health services who received mental health services; and children meeting criteria for victim advocacy who received victim advocacy. The CACs of Kentucky involvement helped to achieve the true intent of a multidisciplinary team to help families heal from abuse. She stated that the CACs of Kentucky is requesting \$5 million in general operating funds each year to support the work and noted that details of the funding request is part of the meeting materials.

Jacqueline Sugarman, M.D., F.A.A.P., Associate Professor of Pediatrics University of Kentucky, Medical Director, Children's Advocacy Center of the Bluegrass and Children's Advocacy Centers of Kentucky, shared two brief stories of abused children that came to one of the CACs of Kentucky for evaluation and treatment, to illustrate why the CACs of Kentucky are so important. She showed pictures and discussed the differences between hospital emergency departments and the child-friendly CACs of Kentucky to aide in the process of disclosing and treating child abuse. The CACs of Kentucky have state of the art medical equipment such as Cortexflo for photo documentation of injuries. She explained that photo documentation allows for peer review of examination findings and can facilitate consultation with another specialist when needed while minimizing unnecessary repeat examinations for the child. She stated the goal of the CACs of Kentucky is to have experienced, qualified examiners provide comprehensive, child focused, developmentally appropriate, and trauma informed medical exams.

Dr. Sugarman reviewed the requirements of medical providers at the CACs of Kentucky such as: receiving special training; required to have ongoing continuing medical education; subject to peer review findings; and must keep up to date on child sexual abuse medical literature. She reviewed a list of purposes for a medical evaluation of a child and a list of reasons why medical examinations are sometimes necessary at a CAC of Kentucky after the child was seen by another healthcare provider. She discussed adverse childhood experiences (ACEs) and that if left unaddressed, sexual abuse can lead to chronic health problems later in life like heart disease, cancer, obesity, and mental health issues. She referenced a list of long term effects caused by sexual abuse. She discussed the estimated total lifetime economic burden of child sexual abuse in the United States. She reviewed

what reports and assessments the CACs of Kentucky medical providers are responsible for after a child leaves the office.

Dr. Sugarman shared a graphic explaining the CACs of Kentucky model. She listed the advantages of the multidisciplinary team approach. She gave details regarding the role of the medical professional in the multidisciplinary team case review. She provided a list of statistics regarding adolescent sexual abuse. She stated that research conducted by the Centers for Disease Control (CDC) estimates that approximately 1 in 13 boys and 1 in 4 girls experience some form of sexual abuse in childhood. She reviewed a list of perpetrator characteristics. She shared how COVID-19 has impacted children's environments and may contribute to a rise in child abuse. She presented a list of new initiatives by the CACs of Kentucky such as: the development of a statewide child sexual assault and abuse medical protocol; the development of sexual assault healthcare provider training recommendations and statewide education; the establishment of a network that can support new providers; and the establishment of networks for peer review of medical findings.

In response to questions and comments from Senator Westerfield, Ms. Kretzer stated that several CACs of Kentucky have affiliate agreements with the Community Mental Health Centers (CMHCs) for a subset of therapists who have specific trauma training. There are also affiliate agreements with additional mental health providers within a specific region. She stated that the funding request would allow for a mental health provider in each of the 15 CACs of Kentucky.

In response to questions and comments from Senator Berg, Dr. Sugarman agreed that requiring continued education training regarding child abuse trauma would be helpful for providers.

In response to questions and comments from Representative Banta, Ms. Kretzer stated that law enforcement is a key partner in the multidisciplinary team process. She stated there has been feedback from the pilot project regarding coordinating services and improving communication with law enforcement.

In response to questions and comments from Senator Adams, Ms. Kretzer stated that this presentation was the unveiling of the request for the \$2 million Health Advanced Research Projects Agency (HARPA) federal funds. She stated that the \$5 million funding request would be to expand the pilot multidisciplinary team project to allow for an increase in the number of services provided. She stated that there is a Kentucky Medicaid regulation specific to children's advocacy centers to have specialized children's medical clinics with a set reimburse rate. The reimbursement rate has been the same for 20 years. She stated that the regulation also limits reimbursement from Medicaid to the physician providing the exam whereas the standards regulation has allowed for advanced practice nurses to also provide exams. She stated there is a mismatch between what the standards regulation and the Medicaid regulations allow.

**Adjournment**

There being no further business, the meeting was adjourned at 2:37 PM.