A Guide for Case Review in Children’s Advocacy Centers
2006
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“THE SUCCESS - THAT SO MANY DIFFERENT PARTNER AGENCIES ATTEND THE MEETINGS AND ARE WILLING TO WORK TOGETHER IN SUPPORT OF POSITIVE OUTCOMES FOR CHILDREN. THE PERSONAL RELATIONSHIPS THAT HAVE DEVELOPED HAVE STRENGTHENED EACH OF US INDIVIDUALLY AND AS A COMMUNITY. THE CASE REVIEW SYSTEM HAS ALSO BEEN INSTRUMENTAL IN “RAISING THE BAR” FOR THE WHOLE COMMUNITY REGARDING OUR RESPONSE TO CHILD ABUSE AND CHILD ASSAULT. INTEGRATED INTO OUR CASE REVIEW SYSTEM IS A MONTHLY MEETING DESIGNED TO SOLVE PROBLEMS THAT HAVE BEEN IDENTIFIED AS WE WORK TOGETHER AND PROBLEMS THAT ARE BARRIERS TO PROVIDING THE BEST SERVICE TO THE CHILDREN. THIS PROCESS HAS BEEN THE PRIMARY VEHICLE FOR BRINGING OUR COMMUNITY TOGETHER IN SUPPORT OF CHILDREN.”

CARTOONS BY SAM SMITH AT SAMSMITHCARTOONS@YAHOO.CO.UK.
INTRODUCTION

From its inception, the CAC movement has sought to galvanize communities to be self-reflective and analytical about their response to child victimization. The NCA requirement of regular case review encourages communities to continue this high level of self-evaluation and service audit forever. Case review is an expansion of the idea of coordinating investigation and case management of child abuse. Law enforcement officers, child protective services workers, prosecutors, medical and mental health professionals and advocates can work much more effectively if all of their contacts with child victims are orderly, rational, planned and collaborative; if everybody knows all the facts and opinions about individual cases; and if every practitioner keeps learning up-to-date techniques in his own and other related fields. Simply put, regular case review conferences provide a place where everybody can get together to share various pieces of case information, to contribute their own particular expertise to each child’s case, to train each other and to focus on a child-centered approach. Case review should make explicit the belief that most problems of implementation are system problems, not individual shortcomings.

Multidisciplinary case reviews are deceptively complex experiences. At first glance, they may seem just like any other meetings, just more burdensome to organize. But Child Advocacy Centers all across the country are finding that sustaining a meaningful and productive case review cycle is a continuing challenge. Clearly, bringing together many different professionals and agencies to handle emotional and painful work is really difficult. And running team meetings that are fruitful and interesting enough to sustain attention is just as challenging.

Many CACs report that they have learned to run consistent and fruitful case reviews, and have improved their community response to child abuse via this process. These organizations have directly confronted and solved the most common problems with case reviews around the country: encouraging the right people to show up consistently; bringing forward the right information; creating a pleasant and collaborative meeting tone; reframing the work as system improvement; and really making decisions together as a team. Case reviews have common tribulations because of the natural difficulties people have working in groups, inadequate facilitation of the meeting process, and whisking too speedily over or through the necessary stages of group development.

Many benefits accrue from membership in National Children’s Alliance, including accreditation, targeted materials and training, technical assistance, financial support and grant opportunities. The affiliation can enhance fundraising and community investment as well as raise a CAC’s standing in the community and the state. Conducting regular multidisciplinary case reviews and writing case review criteria and standards into the team protocol are some of the requirements for accredited membership status in National Children’s Alliance and are considered the standard of practice for Children’s Advocacy Centers. Case review meetings must draw the minimum key partner agencies, including representatives from law enforcement, child protective services, prosecution, medical, mental health, victim advocacy and CAC staff. NCA has defined other valuable case review elements. It is considered good practice to name a coordinator for regular case review, who pre-informs partner agencies as to which cases will be reviewed. Those participating in the case review should communicate any recommendations that derive from the case review to the appropriate parties, and agencies should use case review as an opportunity to increase understanding of child abuse cases.

Beyond these core elements, there has been little specialized instruction as to how to organize and run case review, and not much written about how to introduce and improve them. Consequently, CACs have devised a myriad of ways. Many work really well, but some don’t yet meet NCA standards and struggle a bit with consistency and full participation.

The business community has preceded the non-profit world in addressing the performance of diverse teams and providing materials for improving meetings in general. One clear learning is that the way one structures, prepares for and conducts a meeting tremendously influences its outcome. Leadership and expert facilitation methods are as crucial for CACs as they are for big businesses. It’s not enough to assemble groups of people and assume they will behave and be able to accomplish something. Recognition and skilled management of the human experience, the room, the layout, the expectations and assumptions of the team members—all are important to success. Clearly, a successful case review process starts with what a community will accept and moves forward by leading/teaching partners deeper into working together.

The purpose of this document is to describe the historical and current experiences of a number of CACs, to propose some new lenses through which to analyze the case review process, and to suggest some ways to improve the case review process for CACs. The first three sections are directed to CAC Executive Directors, designated facilitators and board or partner agency leaders. The fourth section is primarily a checklist format for stand-alone use by team participants. Results of a small 2004 national survey of CAC case review practices are attached as an appendix for those interested in the actual data.

This document is based on information generated from several sources. First, the Philadelphia Children’s Alliance supported a five-year observational study of multidisciplinary case review meetings that was completed in 1995. This has been updated and supplemented...
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by a small but nation-wide survey of CAC case review practices in 2004, supported by the Northeast Regional CAC. In addition, more material about agency experiences with case review was generated during a large number of broad-ranging data collection interviews for the National Children’s Alliance Strategic Planning Process during 2003. Finally, CAC directors and key partners have given considerable feedback during multiple team and case review training seminars, mostly in the northeast region. Examples cited in this document have been gathered from all of the above sources and cannot be attributed to any particular community.

SEVEN WAYS TO LOOK AT CASE REVIEW

1. A theater where collaboration will show up when it exists.
   We can see case reviews as a stage, where the players will come together and act out their parts in the drama that is the investigation and prosecution of child abuse. When police trust social workers, when prosecutors care about supporting high quality forensic interviews, it will show in the case review. When social services and police are conducting joint interviews and sharing crucial investigative information, it will happen in the case review. If people resent being there, or mistrust and misunderstand each other, it will show here. These meetings are social interactions where people play out their issues about status, power, role, conflicts, and values. It’s very valuable to watch what is happening at these and other major communication events, and teach everyone to watch, in order to analyze the state of the collaboration.

2. A product of all previous interactions and beliefs.
   Everyone brings along his/her complete history and belief system all the time, although little is overtly revealed or even at the level of consciousness at any one time. It is easy for one profession to offend another, knowingly or unknowingly, just by operating under his/her own explicit assumptions, or by judging the other from a personal frame of reference. It is also clear that many professionals bring tremendous skills and experience in multidisciplinary practice, as well as sensitivity and success in working with a wide range of clients.
   Certainly, a history of abuse or deprivation could color one’s perceptions of the activities in a CAC, but could contribute significantly to the process if this history has been therapeutically integrated. Similarly, previous interactions with law enforcement, parents, teenagers, social workers, therapists, or anyone connected with CACs, all these trail into the room. Given the separation of bureaucracies in most communities, the sometimes troubled relationships between them, and the 100% certainty that at least a couple of the participants will have been disappointed with each other around one case or another, it is no wonder that case reviews can feel like pressure cookers ready to blow.
   To make things even more complicated, CAC partners will arrive with their own beliefs about human behavior that may or may not be helpful to the CAC process. Professionals have variously stated in case reviews that: all teenage girls lie; STD’s can be transmitted on doorknobs; failure of the victim to disclose during the first forensic interview precludes successful prosecution; addicts and pedophiles never get better, and some parents are just too nice to abuse their children. Conversely, there are experts in most communities who have inspiring success stories that inform their assessments: victims and families who have recovered from trauma and thrived; victims who have shared their narratives with support over time; complex cases solved by collaboration; police and sheriffs departments well trained in medical aspects of abuse; cases prosecuted and won despite impediments.

   Many communities launch CACs without recognizing either structural disparities or psychological barriers to cooperation. Never forget that anger about structural barriers is just as hurtful and felt just as personally as a private argument. Competent leadership and facilitation can surface negative belief systems and prejudices, showcase successful models, and encourage partners to move towards them.

3. A database for fully informed decision-making and collecting exciting stories.
   We humans are inconsistent. We forget to fax reports, fail to follow-up, don’t re-dial after busy signals. We resent other people in our territory, bugging us. Despite our best efforts, we won’t naturally inform our fellow professionals of everything we know about a case. Yet what is more obvious than that each child victim’s system “record” ought to contain all pertinent information gathered in the course of an investigation. Unfortunately, most communities don’t spontaneously create a system record; there are just pieces here and there. The case review should change that. All players arriving at the case review with complete information, sharing that information, and compiling the data for each case on site is a pow-
ful tool both for the current investigation and for analyzing patterns of case management effectiveness throughout the community. Case review can be a

nexus for developing and implementing a system for monitoring case progress and tracking case outcomes for team components, another requirement for NCA accreditation.

Case reviews are a rich source of exciting stories of collaboration that can feed partner commitment and fundraising. Keep an ongoing volume of great stories where people worked well together, where shared bits of information made a huge difference, where insights flashed collegially, then broadcast them (respecting confidentiality, of course) in brochures, proposals, and recognition ceremonies.

4. An arena for multidisciplinary joint decision-making and cross training.

Again, as one of the few points where all the players can come together, the case review meetings can be the playing field where each agency brings its game and calls the future team plays. Better sharing of information and professional knowledge certainly should improve the quality of investigation, prosecution, and healing. It’s an improvement for each partner to know what the other knows and to inform each other of plans. It is greatly to be desired but a stretch in many communities to ask law enforcement, social services and prosecutors actually to make their case decisions collaboratively.

Connection and information sharing can happen in a million informal conferences and phone calls. Certainly joint decision-making can also work that way too, but the best possible opportunity to realize the CAC ideal is in case review meetings.

5. A platform for boosting fact collection up to system improvement.

Better than any protocol committee, the case review can bring to light all the structural and emotional barriers that prevent communities from working in a truly child-centered way. When the case review meeting is facilitated to be safe and self-consciously aware of its own group process, when partners are trained to view problems as system problems instead of personal problems, then the case review members can integrate the case-by-case analysis into a larger picture of an improved system. This can be particularly effective if reviewers keep running lists of system problems as they are uncovered during each case discussion, then deliver them to a relevant committee.

6. An incubator for synergy.

An incubator provides the warmth and protection needed for delicate ideas to flourish. The energizing idea behind the entire CAC movement is that there is more power in working together than separately, that each child victim needs the best and the most coherent work of the entire crew of professionals who will play a part. In the busy lives of children and youth workers, police officers and forensic interviewers et al., there are really very few opportunities for all these players to talk and plan together about the weighty matters to which they dedicate their working lives. It’s crucial that the case review be that lively, fun, safe, energizing medium for synergistic ideas to emerge from the people who know the challenges best.

7. An important element required to become an accredited CAC.

Typically community founders move to start up a CAC in response to a particularly bad case or contact with an existing program that embodies a more professional model than they know to be functioning in their own jurisdiction (although some amazing places have worked collaboratively for decades!). The NCA requirement of regular case review encourages communities to build self-evaluation and service audit into their formal structure, creating a powerful impetus for successful cross-discipline work. And there are many other benefits that accrue from membership in National Children’s Alliance, including targeted materials and training, technical assistance, financial support and grant opportunities.
“WE WERE FRUSTRATED THAT THE MDT TEAM HAD JUST BEEN BUMPING ALONG ON THE SAME LEVEL FOR YEARS. WE DECIDED TO TRY TO BRING THE MDT TO A MUCH HIGHER LEVEL OF MATURITY AND FUNCTIONING, AND WE DID! THE PROJECT WAS INITIATED IN 1999, WHEN OUR AGENCY DECIDED TO TAKE THE RISK OF RUNNING THE MDT, BY INJECTING A FACILITATOR AND A REAL LEADERSHIP ROLE. PRIOR TO THAT, THE MDT HAD ANNUALLY ROTATING LEADERSHIP, AND EVERY YEAR, 4-5 MONTHS WERE LOST WITH THE CHANGEOVER. WE HAD ALWAYS FEARED THAT PEOPLE WOULD SEE US AS TOO CONTROLLING IF WE TOOK TOO MUCH OF A LEAD POSITION. BUT WHEN WE STEPPED UP OUR LEADERSHIP OF THE MDT, IT REALLY TOOK US ALL TO A DIFFERENT LEVEL.”
II. MANAGING CASE REVIEW AS SOCIAL INTERACTION

Meetings are not just about their stated purpose, like reviewing cases or preparing organization mission statements, but they are also a social forum for a whole series of negotiations and displays showing status, power, roles, conflicts, and values. People tend to have trouble working in any group setting, but the CAC setting is especially challenging because of the different professions involved and the troubling nature of child victimization. Working in the CAC calls attention to the roles each specialist and agency traditionally plays, and how much they are called upon to alter their behavior, stretch fundamental allegiances and overcome their own unspoken fears to accommodate the multidisciplinary model. It is important for all agency leaders to pay careful attention in case review meetings to understand exactly what old ways are in play so that culture change can be realistically planned and truly incorporated.

Because case review involves such a complex social interaction, CAC Executive Directors, Coordinators and key partners together need to engineer the case review process for success. First, leadership should know about the life cycle of teams, how to diagnose problems and move forward. Second, it is essential to develop a keen sensitivity to cultural and psychosocial role issues that surface within a multidisciplinary meeting, beyond the obvious differences in professional training. Third, the more team members know about productively working in groups, the better the team meetings will be. Finally, those who actually run case reviews must be competent in facilitation techniques. A trained facilitator with a toolkit of interventions can make a huge difference in the success of a sustained case review process. The facilitator can perceive barriers and intervene to remove them, but also teach the group to monitor and adjust its own behavior towards the fulfillment of its goals.

DYNAMICS AND DIAGNOSTICS OF ORGANIZATIONAL TEAM DEVELOPMENT

Effective teams have basic needs and work in life cycles just as people do. This section presents first the structural elements – or building blocks – necessary for an organization or team to excel and the progressive stages of development that all organizations traverse. Second is a description of the dysfunctions that result from missing or incomplete elements. The section ends with a diagnostic matrix with some prescriptions for interventions.

STRUCTURAL ELEMENTS AND DIAGNOSIS

Extensive research over the past forty or more years has demonstrated that there are defined structures necessary for an organization or a team to thrive and succeed at its work. Among the most widely acknowledged are Weisbord’s Six Box model, Jay Galbraith’s Star Model, and Peters and Waterman’s Japanese Seven-S. These structural theorists all highlight the synergistic interaction of an organization’s structure, goals, rewards, people, systems, strategy, plans, and so forth.

Organizational success rests on these six essential structures:

- Compelling Vision
- Adequate Resources
- Effective Plan
- Appropriate Skills
- Regular Evaluation
- Recognition & Reward

Compelling Vision: a statement of purpose describing what the organization or team is trying to do; essential ingredients include a vision and clarity of mission and leadership. It is especially important for CAC partners to agree on and put on paper a vision that can be shared with all team members: for instance, to use case review for sharing investigative information, studying collaborative success and/or breakdown and improving systemic response to child abuse.

Adequate Resources: human and financial capital, adequate support systems (technological and otherwise), sufficient partner participation. For CACs, one crucial aspect of resources is the degree of commitment or buy-in from key agency partners. This determines exactly which line investigators, prosecutors and supervisors will be freed up and directed by their organizations to attend regularly; and what kinds of information systems and releases are needed for real-time case review.

Effective Operating Plan: principles of organization (structural relationships, distribution of power, division of labor), layers of goals and objectives, mechanisms of internal and external communication including confidentiality, strategies of work production, delivery, service and support to all partner agencies. It is important for CAC partners to clarify who will lead and facilitate the meetings, when and where meetings will be held, how cases will be referred for review, how many cases will be reviewed, what important information each team member should bring to the case review, how findings will be recorded and communicated, what the meeting climate will be.

Appropriate Skills: the competencies necessary for the organization’s success, plus a mechanism for continuous skill improvement. For CACs, both knowledge experts, including tribal and ethnicity specialists, and decision experts are necessary to a well functioning case review process. Also, the team needs people who are good at encouraging and probing. All participants need to learn and practice how to engage positively in the group task and how to protect and encourage each other. Finally, the team needs a good trained facilitator who knows how to set up meetings for success and how to help groups work together.
Evaluation: a process for regular assessment of the organization’s processes (how all members and parts function together) and impacts or outcomes (what the organization achieved and how well). Most organizations try to push evaluation off onto some special outside committee or consultant, when it should be an ongoing group task. Every meeting could include a brief assessment of the meeting climate, and quarterly special sessions could review the impact of case review on systemic response to abuse.

Recognition and reward: strategies and mechanisms of incentives for all essential skills, tasks and behaviors (and disincentives for non-performance). CACs may be the only organizations that can truly recognize hard-working line workers for their dedication and insightfulness, and reinforce visionary collaborative work at all levels.

Absence or significant weakness of any of these building blocks will cause the team or the organization to suffer. Furthermore, and most importantly, its chances for success will be compromised in fairly predictable ways.

From the viewpoint of organizational diagnostics, then, these undesirable outcomes point their way back to the areas, which should be reexamined and reinforced. Indeed, for the organizational development practitioner, this type of structural assessment is always the first step in diagnosis.

GROUP DEVELOPMENT STAGES AND DIAGNOSIS

When people in groups are asked to work cooperatively, they tend to go through predictable phases of development. Probably the most widely accepted model is Tuckman’s “Four Stages of Group Development” model: forming, storming, norming, performing. Tuckman’s stages have been adapted and elaborated by many others, particularly to add a fifth stage of “esprit” or completing or reenergizing. Despite any differences among these various models, all agree that there are two major dimensions to each stage: task (or content) behaviors, i.e. what work gets done at each stage; and process behaviors (sometimes called “maintenance” behaviors), i.e. the personal and interpersonal dimensions related to how work gets accomplished at each stage, and how people relate to each other.

Task (or content) behaviors. These are the behaviors of the people doing the reviewing work in the meeting. Some are discussing the cases and sharing their information. Others are summarizing or clarifying material already put forward. They can be asking questions or putting information together with greater meaning. Some group members should be analyzing the cases at hand and pulling out larger systemic issues that need further discussion. Some should be proposing future directions for an investigation and articulating what other inputs could further protection, prosecution and healing. All of these activities are necessary for a productive meeting.

Process behaviors. These are the behaviors that move the human interaction along. They are really conversational and personal skills that come to bear in any small or large group situation. There need to be individuals who are adept at harmonizing and encouraging people to contribute; this can be done simply with focused attention, responding warmly, asking questions, and more assertively by interjecting peaceful requests if things get too nasty. At least one person needs to be the gate-keeper, ensuring that the group stays on target, moves to the next issue when one is completed, passes the floor to one speaker to another, prevents others from interrupting, surfaces and helps the group resolve issues that threaten to derail the tasks at hand. Groups function much more effectively if there are lots of group members who display positive behaviors, praising others for their success, motivating people to continue contributing information and insights, having fun in the process. If these people aren’t in the case review, they need to be rounded up. A CAC can choose group members not only for their system roles but also for the smoothing and fostering roles they can play in the meetings. An important part of training teams is highlighting and practicing good process behaviors.

<table>
<thead>
<tr>
<th>IF YOU ARE MISSING</th>
<th>THE LIKELY RESULT IS</th>
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<tbody>
<tr>
<td>Compelling vision</td>
<td>Confusion</td>
</tr>
<tr>
<td>Adequate resources</td>
<td>Frustration</td>
</tr>
<tr>
<td>Effective plans</td>
<td>False starts</td>
</tr>
<tr>
<td>Appropriate skills</td>
<td>Anxiety</td>
</tr>
<tr>
<td>Regular evaluation</td>
<td>Success is erratic</td>
</tr>
<tr>
<td>Recognition/reward</td>
<td>Success is only temporary</td>
</tr>
<tr>
<td>DEVELOPMENTAL STAGE</td>
<td>OBJECTIVE</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Forming</td>
<td>Management of resources</td>
</tr>
<tr>
<td>Storming</td>
<td>Establish working plan and decision criteria &amp; structure</td>
</tr>
<tr>
<td>Norming</td>
<td>Establish task priorities, work groups, &amp; internal/external links</td>
</tr>
<tr>
<td>Performing</td>
<td>Refine work processes, routines and cycles, and get lots of work done</td>
</tr>
<tr>
<td>Reviving (or “completing” if only a temporary group)</td>
<td>Establish mechanics of regular evaluation, improve and reinvigorate</td>
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</table>

This kind of model is eye-opening because it describes the seemingly mysterious process of how groups of people learn to work effectively together. It lays out both the tasks that have to be done as well as the process behaviors needed to support the task work. Most importantly, it shows that the developmental stages are sequential. Each stage follows and builds upon the preceding stage, and it takes time to get to a productive phase. Stages cannot be skipped; each group must go through each of the stages to get to performing, then start up again and reform when things change. With changing personnel, the group will have to go through forming to performing again and again. It is quite possible to become dysfunctionally stuck in one stage, but good leadership can move that. Since a group can see all the tasks and maintenance functions essential to each stage, then the group leaders can and must manage each stage for success. Referring back to the five stages of development and casting each stage’s task and maintenance objectives more specifically for CACs, then the priorities for the team leader (and facilitator, if one) are fairly obvious:
<table>
<thead>
<tr>
<th>DEVELOPMENTAL STAGE</th>
<th>TASK OBJECTIVES FOR CACS</th>
<th>PROCESS / MAINTENANCE OBJECTIVES FOR CACS</th>
<th>LEADER AND FACILITATOR PRIORITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Forming</strong></td>
<td>Line up time, food and space; get agencies to commit realistically the time of their staff to attend regularly; resolve confidentiality; decide who should attend and get commitment from all important participants.</td>
<td>Get clear on vision and mission – what case review is for and exactly what it will accomplish – and operating values – meeting atmosphere and how to help everyone get to know each other’s role and be comfortable.</td>
<td>Build consensus on a clear group vision, mission, roles; seek commitment of sufficient time and information from all partners; assure a welcoming atmosphere &amp; place.</td>
</tr>
<tr>
<td><strong>Storming</strong></td>
<td>Decide which cases to review and how to select them, who should bring and present what information, how meetings will be run, how case decisions will be made and communicated, how to boost fact collection up to system improvement</td>
<td>Plan how to talk about and resolve conflict, how to work through incompatible protocols, how to support everyone to talk about touchy and painful subjects. Write operating rules.</td>
<td>Model and teach calmness, fairness, active-listening, renegotiating expectations, roles and division of labor, surface and use conflict fruitfully.</td>
</tr>
<tr>
<td><strong>Norming</strong></td>
<td>Practice selecting and reviewing cases, establish routines and get used to them, practice communicating and following up on decisions and recommendations, define and establish various protocol working groups</td>
<td>Establish and practice communicating within the case review team about tough issues of high quality investigation, prosecution and healing, communicate and process findings externally</td>
<td>Model and teach supportiveness and monitoring; effective group problem-solving; communicating case information, appropriate recognition for collaboration and investigative excellence.</td>
</tr>
<tr>
<td><strong>Performing</strong></td>
<td>Review lots of cases regularly, make recommendations and decisions cooperatively, place cases within the context of the entire system and work towards system improvement, refine work processes, routines and cycles.</td>
<td>Enjoy a sense of accomplishment, have some fun working together, learn in depth about the experiences of fellow professionals and child victims/families, refine the way meetings are managed.</td>
<td>Promote self-monitoring, collaboration, openness, develop stable and efficient work rhythms, and establish a balance between individual and group recognition.</td>
</tr>
<tr>
<td><strong>Reviving</strong> (or “completing” if only a temporary group)</td>
<td>Regularly, perhaps quarterly, evaluate team performance, improve and reinvigorate the team to encompass new members and ongoing challenges of child abuse; move away from people and habits that don’t work well</td>
<td>Establish “key success indicators” and reward/recognize team members and partner agencies for their own special expertise, collaborative and motivational spirit, high quality work with child victims and imaginative thinking about system improvement</td>
<td>Create a sustainable process of continuous improvement, and respectful ways to revive the team, say goodbye or bring in new participants. Celebrate and reward</td>
</tr>
</tbody>
</table>
THE CYCLICAL VIEW

Sometimes it is helpful to envision the five stages of team development as a cycle. It becomes clearer that each team will, at some point, come to the end of the fruitful Performing stage and will need to regenerate and reorganize in a new way. In a small way, each team needs to move through the cycle at each and every meeting, getting oriented with small talk, planning for that meeting, getting comfortable with each other, before going on to accomplish the work of the meeting. And it is good to end every meeting with a bit of review, assessment and praise.
Keeping the stage-critical tasks of the developmental model in mind, experience shows that there are a relatively few, common problems that present themselves again and again. As such, they are good indicators of what stage a group is “stuck in.” Should any of these behaviors manifest, it is imperative that the team leader summon up the courage to suspend task-focused work (actually reviewing cases) and engage the dynamic problem. The problem behavior points backward to the “leader priorities” for that stage (identified above). The leader must reexamine and reestablish all the critical steps in that stage and the ones before it, starting from vision, mission resource commitment, structural planning and communication.

### DIAGNOSING PROBLEMS

<table>
<thead>
<tr>
<th>DEVELOPMENTAL STAGE THAT OBJECTIVE FALLS IN</th>
<th>PROBLEM: IF YOU HAVE THIS PROBLEM, FIX IT BY REVISITING THIS OBJECTIVE</th>
<th>OBJECTIVE THAT NEEDS ATTENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forming</td>
<td>People argue about what is next … The project seems to be too big. … The team is floundering … People ignore the mission statement. Nothing is measureable.</td>
<td>Goals and Mission</td>
</tr>
<tr>
<td>Forming</td>
<td>Roles result only from a pecking order of system roles … The team is confused about who should be doing what … People don too many hats … Team doesn’t use each member’s talents. … Necessary people don’t show up …</td>
<td>Defining Roles</td>
</tr>
<tr>
<td>Forming</td>
<td>Too many subjects are taboo…. No one agrees on what is acceptable behavior…. Everyone is passive … No one can explain the rules …</td>
<td>Ground Rules</td>
</tr>
<tr>
<td>Storming</td>
<td>Team feels “lost in the woods” … There are too many naysayers …. There is little appropriate training and development…</td>
<td>Planning the structure</td>
</tr>
<tr>
<td>Storming</td>
<td>The team feels no supporting data is needed … No joint decisions are made… Decisions are made by ‘fiat’ … or by default … Conflicts erupt…</td>
<td>Decision-making</td>
</tr>
<tr>
<td>Storming</td>
<td>One or a few control all …. People speak only on “hot buttons” …. The team only listens to “experts” … Many don’t contribute at all….</td>
<td>Balanced Participation</td>
</tr>
<tr>
<td>Storming</td>
<td>No one refers to undercurrent issues … Team is unaware of obvious nonverbal clues, moods, etc. … People discount concept of group process … No one intervenes to correct process problems.</td>
<td>Group Process</td>
</tr>
<tr>
<td>Norming</td>
<td>Team mistrusts data or relies only on “gut-feelings” … People jump to conclusions …. The team relies on quick fixes … Members don’t share information.</td>
<td>Fact-based Approach</td>
</tr>
<tr>
<td>Norming</td>
<td>People don’t contribute … people interrupt …. Words don’t match tone of voice… Strong emotional statements are ignored …. People debate too much or bully …. Discussion strays off course… Case “to-do” lists go nowhere…</td>
<td>Communication</td>
</tr>
<tr>
<td>Norming</td>
<td>Team is dependent on one or two people … No one quiets “big talkers”… no room for introverts … Hallway talk is freer or more productive than the meeting …. People feel unfulfilled …. Team doesn’t initiate ideas, compromises</td>
<td>Effective Team Behavior</td>
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A Guide for Case Review in Children’s Advocacy Centers PG 11
CULTURAL AND PSYCHOSOCIAL ISSUES

SYSTEM ROLES

NCA Standards require that case reviews include both knowledge and decision experts from each of the major partner agencies as well as others who work closely with child victims and their families. These representatives come to meetings in their professional roles as law enforcement officers, investigators, child protective services social workers, prosecutors, forensic interviewers, physicians/PAs, nurses, therapists, victim advocates, teachers, child advocates, etc. Sometimes these system roles are not particularly straightforward, and can be used in both functional and dysfunctional ways.

Role omnipotence. Implicit in the CAC model is that a group of key professionals, working with systematic and professional methodology, will improve investigation, prosecution and healing of child abuse. However, such synergy does not necessarily flow easily. With tremendous faithfulness to their own organizations, law enforcement, child protection, prosecutors, and forensic interviewers each can commonly behave in ways that suggest a private belief that theirs is the most powerful and most important function in the scheme. Not surprisingly, multidisciplinary teams can precipitate considerable display behavior – often disguised - about who is more powerful than the other.

Role omnipotence can be couched in an agency demand to get to the victim first before some other agency’s “corrupting” influence can change outcomes. Another typical conversation revolves around who has the most trustworthy “gut feeling” about credibility. Law enforcement officers may theorize that they are the only ones who know how to interview victims, because it’s what they do all day every day. Social workers may proclaim that only they care about the long-term outlook for families. Prosecutors may focus on prosecution as the only worthwhile intervention and have little tolerance for investigative and therapeutic process discussions on cases that won’t come to court. There is a long history in many jurisdictions of prosecution and law enforcement battling over the charging function - who gets to decide when an arrest can be made – with residual bitterness. Leaders must manage case review meetings so that participants cannot carelessly express superiority or disdain for the proficiencies and opinions of others, as this will have a muffling effect on that meeting and certainly on collaboration as a whole.

Role compensation. Well meaning professionals who truly care about children and families will inevitably try to compensate for what they perceive another agency is failing to do. This is exhausting and cannot be sustained effectively, but it provides a bright red flag of system dysfunction for CAC leadership.

For instance, to keep young male sexual victimizers out of a juvenile justice system they thought would be harmful, police officers in one community worked out their own informal monitoring system to try to keep the alleged offenders in line - within their own families and still in contact with their alleged victims. They described themselves as “social service advocates for the child,” trying to be therapeutic workers when they perceived no other mechanism to help these families. They were also loathe to subject young child victims to perceived potential trauma from testifying in court and cross-examination by ruthless defense attorneys, apparently deciding not to arrest for fear that other advocates and victim witness staff might not be able to support children through the court hearings. Conversely, where it was clear that police had determined not to make an arrest on a child abuse allegation, children and youth workers would ask police officers to scare and intimidate suspects, and once actually threatened a suspect with arrest. In case reviews, other partners may sometimes voice more violent and aggressive feelings towards alleged abusers than law enforcement officers, who are likely to be more knowledgeable and realistic about legal standards and local prosecutorial practices.

Leadership can help the team address the structural barriers that evoke another typical compensatory behavior - furious criticism, either publicly or back channeled, of the poor work of another agency’s worker for messing up a case. Another unspoken tenet of the CAC model is that most problems have to do with unmeshed agency protocols or lack of resources rather than poor individual performance, and case review should be conducted with this understanding made explicit.

If Protective Services must investigate allegations of abuse within 24 hours while the police respond whenever an officer is assigned during the next week, it is inevitable that workers will feel that they must stretch their own roles to compensate for the other’s shortcomings. An example is that law enforcement officers may be upset that protective services workers alert or even interview potential suspects, giving them ample time to flee or to get an antibiotic to cure their STD. While the frustration and anger are real and personal, the problem is systemic. What is really needed is a way for police and social service workers to appear at a household simultaneously, but individual social workers and law enforcement officers have no power to make that happen. CAC- facilitated multidisciplinary teams can and have fixed this in many communities.

Protective territoriality. This is perhaps the most common and persistent response to the CAC model, and is inherent in the very nature of all bureaucracy. An agency establishes its identity through shared belief systems, distinct eccentric vocabulary and dedication to protecting its own existence. Workers who care about their work will defend themselves and their fellow workers, and such fidelity is generally a good thing. However, a high level of defensiveness truly impedes system improvement. In case reviews, protec
Cultural Competence. To truly understand and serve all child victims and families, it is crucial for every CAC to bring culture and language-competent professionals, representative of the major ethnicities and tribes living within the jurisdiction, into every aspect of investigation, prosecution and healing of child abuse. Without genuine expertise, team members will use omnipotence and compensation to cover all that they don’t know. There is no better place than case review meetings to start this inclusion process.

CACs should work towards advancing minority hiring in law enforcement, child and family services, prosecution agencies, medical and mental health providers and CAC staff. But there is immediate benefit to humbly and regularly inviting advocacy and mental health professionals who serve tribal and ethnic communities to contribute their expertise and viewpoint at case reviews. Their perspectives, and the training they can provide, can increase sensitive handling of specific cases but also highlight system-wide adjustments that need to be made in order for CACs to welcome all ethnic and cultural groups.

The Nature of the Work Itself. The work itself is particularly difficult and sometimes painful, triggering deeply held and often unprocessed emotions. Professionals need to discover what is sometimes unknowable - whether and what happened to a child who may or may not tell now and then later. So much rests upon the skill of interviewing children, more an art than a science, and often a hidden art at that. Often there is disagreement on whether criminal, civil, or therapeutic intervention is the best way to proceed or even an option. Estimates of the healing ability of families can vary greatly among even the most seasoned professionals. Those who work with abuse and dysfunctional families can suffer mentally and physically if they and their organization don’t provide enough supports.

PSYCHOSOCIAL ISSUES

The case review is a theatre, and people will play out all of their psychological issues in that room. It doesn’t have to be touchy-feely, but it’s the wise CAC that is able to recognize and work through the feelings that turn up during the work. Many of these emotions are strikingly similar to the material that underlies interviews with victims and victimizers, making it even more crucial that those who investigate, prosecute and treat victims understand their own motives and experiences.

Trust. Most people are careful not to share much in a group until they trust the other people; this is a good self-protective mechanism. We humans hate to appear incompetent, we will go to great pains to avoid showing weaknesses, and privacy is important to us. Work in child abuse means constant transactions with uncertainty and the ultimately unknowable. And clearly, some people are able to trust more quickly than others.

The information professionals are asked to bring to case reviews is not just a collection of detached facts, but data about their own abilities to elicit information from various sources and to use judgment and knowledge. To share that information, some of which touches on deep fears of incompetence, people have to trust that they will not be attacked or ridiculed or ignored. Given the emotional nature of the work, the intense demands on person-power, and the divisions between many partner agencies, not all case reviews can make that assurance of safety.

Control. Humans differ in their need and desire to be in control. Studies show that more men than women will take control of meetings if they are allowed. In every meeting there are usually one or two extroverts who will try to dominate. And there may be agency representatives who believe their role is omnipotent in the system and thus should be equally as powerful in the case review meeting. Ideally, the group will be aware of the dilemma and demand that control of the meeting will be in the hands of the leader and facilitator, and all members will have equal opportunity to contribute.

Another way of exerting control is to guard a few agency practices as taboo for discussion, and react with righteous indignation when anyone dares to question. In CACs, the typical emotion-fraught areas are interviewing child victims and decisions to arrest or file
dependency petitions.

Identity and Status. Social scientists who have studied meeting behavior have found that individuals use meetings both to establish and to read their place in a particular social system. In multidisciplinary team meetings, there are inevitably professionals with naturally higher status than others (think doctors and lawyers, among others). There are also people who think of themselves as smarter than everyone else, more experienced in the field of child victimization, more powerful in shaping the future, richer, nicer, or more beautiful. Some members like to hold back through a discussion, then come in at the end with a grand statement that renders all the preceding work pathetic. Others crave recognition and attention, and will seek it out positively or negatively. The case review is not just about what is happening in cases, but also a stage on which people act out their own sense of identity. To function effectively, somehow the meeting must still have plenty of time and energy for its real mission. Hopefully the group, with its facilitator, can be aware of various kinds of display behavior and mold itself into some kind of fair and fruitful model.

Competition. Competition is not always about being the best, but sometimes about being the baddest. During one meeting, group members engaged in a competition to determine who would hurt their own natural child the worst if she were caught consorting with an older man. This seemed particularly inappropriate in a discussion of child abuse, but may very well have been accepted verbal play in their home-agency setting. A meeting facilitator would need considerable skill and tact carefully to redirect any inappropriate talk and help the team shape its own standards without offending or ridiculing any party.

A bit of competitiveness could be very fruitful if it were about who can be the most collaborative, who brings the most interesting cases, who has the most useful suggestions, and prizes could be awarded for that. Praise is so lacking in the work lives of most professionals involved in child abuse. The CAC should become the community’s major bestower of admiration and honor in the field.

Communication Patterns. There are accepted communication patterns for different settings. For instance, students in a classroom might expect their teacher to lecture, not engage exclusively in idle chitchat during class. Yet being lectured by a boss or colleague is distinctly uncomfortable. There are common patterns of talking and listening in conversations. We expect someone to answer the phone with a “hello” and if there is silence, it’s weirdly uncomfortable. People who talk too much in a conversation are simply annoying.

A large part of the training for effective forensic interviewing is about adopting communication patterns that produce the space for the child to tell her experiences. Interviewers must learn not to lead the disclosure in an inevitable direction and not to nervously change the subject when things become too sexually explicit. Without reshaping, their natural inclinations can jeopardize the interview.

Teams may have to learn new communication patterns for effective case reviews as well. As mentioned above, domination by one or two group members will smother the case review. Subgroups of people can get into the habit of whispering and joking together through meetings, creating their own little club that cuts out everyone else and displaying their disdain for the real purpose of the meeting. Beware of people who never select a chair at the table but always sit outside of the circle at the farthest boundaries of the room; they do not plan on participating, and may find the process useless or intimidating. It is important to provide space for everyone “at the table” in order to send a clear message that everyone’s input is desired and needed.

Participants who hurl negativity upon every idea, every contribution can lead the group to exhaustion and despair. A group can’t afford to allow personal attacks or angry blame – ever. Once a single social worker or police officer comes to present at a case review and is made to feel personally guilty for his/her agencies’ shortcomings, the case review is in long-term jeopardy. It is the responsibility of the facilitator or leader, as well as the entire group, to prevent such behavior and to establish protective rules of appropriate demeanor.

Going back to kindergarten, the case review team may have to learn and practice some new good behaviors, which will benefit both the case review as well as relationships with child victims and the community. CACs invest considerable time and energy in state-of-the-art training in forensic interviewing, but forget that many of the same skills are needed for interdisciplinary work with adults as well. Such good behaviors include awareness of one’s own emotions, responsive empathy, growing real relationships with coworkers, encouraging open discussion about all work areas, sharing air time, seeking out the facts to back up opinions, avoiding attributing motives to people without asking them, acknowledging the contributions of others and using conflict creatively.

The case review team should hash out some actual operating rules to be posted at every meeting, especially for those teams where many investigators come in and out of meetings in progress. These should detail how the group plans to deal with inevitable conflicts, decisions, flow of conversation, and protection of participants.
Facilitation is designing the processes to help a group do its work more easily and intervening to manage all these aspects of the group experience. A facilitator does the front work of helping the team to think through what actions will happen in a meeting, who will lead, who will gate-keep the conversation, what equipment and supports need to be in place, what work will get done. But also, the facilitator needs to be very aware of what is happening every moment; what is the climate in the room; who is disengaged, angry, ignored, bored, burned out, hiding something.

Novice forensic interviewers may come up right to an issue, then back away for fear of raw pain or conflict. People in groups tend to do that too. Sometimes participants in case reviews virtually beg for a chance to talk about their anguish over a painful case or an inadequate investigation, and yet the leader and the group conspire to keep it out, keep the meeting dry and “on target”. CAC partner representatives act out in the case review all the issues their agencies have with the multidisciplinary process, and some of this can be quite negative. A facilitator can recognize and surface those experiences, mining the potential conflict for data gathering and deeper understanding of the barriers to collaboration. The trickiest part is to hear all the unspoken messages and use them for the benefit of the meeting and the collaboration. This is not just touchy-feely claptrap; the message of this document is that, in this field, the abuse content and the organizational behaviors are so mixed together that professional meeting skills are as necessary as professional forensic interviewing. It takes skill and concentration to lead the meeting through the case review work, take in all the data put forth during a meeting, and then think what to do to process the issues or change the direction of the group. Most commonly, the CAC ED or the MDT coordinator is trying to do everything in the meeting simultaneously. Few CACs currently use the ideal configuration - both a leader and a facilitator working each meeting. Were there to be both a leader and a facilitator working together, the leader would most likely run the flow of the case discussions, calling on and questioning various participants as an expert in the field of child abuse and community case management. At the same time, the facilitator would help plan the meeting process then concentrate on the climate and process behaviors during the meeting: listening for the unspoken messages about all the cultural and psychosocial issues described above, the level of participation of all parties, and either signal the leader when an intervention might be necessary or intervene him/herself to guide the group, give feedback, deal with resistances or suggest ways of making decisions or handling issues that arose. Clearly, case review leaders/ coordinators can learn to be better facilitators and can accomplish both roles, especially if others on the team are trained to pay attention to the group process.

How well case review meetings are facilitated has a direct impact on the success of the whole venture. It is not enough just to put a multidisciplinary group of people together and expect they will get along, study cases carefully, grapple with difficult problems and come up with creative solutions. Most likely, they won’t. Whoever is leading and facilitating the meetings needs to have training in facilitation and hold a toolkit of interventions to call upon. If case review is not successful, improve the facilitation, or find another proficient facilitator to work with the leader.

Every participant deserves to attend meetings that are led and facilitated well. A good strong leader, trained in facilitation techniques, can set a positive tone and intervene when the personal interaction is off-track. This is especially important to:

- create a pleasant atmosphere
- keep one or two people from dominating,
- give everyone a chance to speak,
- highlight the value of the work,
- keep the group efficiently on target
- stimulate positive and creative thinking,
- redirect inappropriate interchanges
- bring difficult subjects to the surface, and
- help the group become aware of its own behavior and manage its communication better.

Targeted interventions can be as simple as protecting people from personal attacks, pointing out the atmosphere of the room, knowing when to stop the case discussions to talk through conflict, asking each person in turn to share opinions (sometimes in multiple rounds until there is resolution), livening up the room with a short diversion or suggesting an alternative decision-making mechanism. There are also many more
sophisticated techniques like force-field or root cause analyses, decision grids, and others. A good facilitator should teach the group to monitor and adjust its own behavior towards the fulfillment of its mission, and to practice good people behaviors. Moving towards a high degree of group process knowledge can help partners accept that everyone in the room shares responsibility for the meeting and for the protection and encouragement of everyone in it.

If the team is manifesting dysfunction or stuckness in one of the pre-performing stages of group development, the leader or facilitator must have the courage to suspend reviewing cases and help the group revisit the start-up tasks that are precursors to success.

There are many training programs and resources easily available for expanding understanding and skills in meeting facilitation:

- **Facilitating With Ease!** by Ingrid Bens, Jossey-Bass, Inc., 2000 ~$35, and
- **The Facilitator’s Fieldbook** by Justice and Jamieson, HRD Press, 1999, ~$40,
- **The Zen of Groups** by Hunter, Bailey and Taylor, Fisher Books 1995. ~ $20, and many others by HRD Press. There are also a number of good websites providing good tools for improving meetings, for instance, **Facilitator U and managementbymeetings.com**.
- The Facilitation Skills Self-Assessment immediately below provides both an outline of necessary skills and an opportunity to sort out what training might be useful.

Part of facilitation is assessing participants’ reactions to meetings. There are numerous brief evaluation forms from the business world that can be adapted to the CAC environment. One simple format that could be adapted is attached at the end of this document.
### Facilitating With Ease!

**Facilitating With Ease!** By Ingrid Bens, Jossey-Bass Inc., 2000

Assess your current skill levels by rating yourself according to the basic skill areas outlined below.

Rank your current skill level using the 4-point scale below.

1 = NO SKILL  
2 = A LITTLE SKILL  
3 = GOOD SKILL LEVEL  
4 = TOTALLY COMPETENT

**LEVEL 1**

- ___ 1. Understand the concepts, values and beliefs of facilitation
- ___ 2. Skilled at active listening, paraphrasing, questioning and summarizing key points
- ___ 3. Able to manage time and maintain a good pace
- ___ 4. Armed with techniques for getting active participation and generating ideas
- ___ 5. Keep clear and accurate notes that reflect what participants have said
- ___ 6. Familiar with basic tools of systematic problem solving, brainstorming and force-field analysis

**LEVEL 2**

- ___ 1. Knowledge of a wide range of procedural tools essential for structuring group discussions
- ___ 2. Able to design meetings using a broad set of process tools
- ___ 3. Knowledge of the six main decision-making approaches
- ___ 4. Skilled at achieving consensus and gaining closure
- ___ 5. Skilled at using feedback processes. Able to hear and accept personal feedback
- ___ 6. Able to set goals and objectives that are measurable
- ___ 7. Able to ask good probing questions that challenge own and others’ assumptions in a non-threatening way
- ___ 8. Able to stop the action and check on how things are going
- ___ 9. Able to use exit surveys to improve performance
- ___ 10. Able to manage meetings in an orderly and effective manner
**LEVEL 3**

- 1. Able to manage conflict between participants and remain composed
- 2. Able to make quick and effective interventions
- 3. Able to deal with resistance non-defensively
- 4. Skilled at dealing with personal attacks
- 5. Able to redesign meeting processes on the spot
- 6. Able to size up a group and use the right strategies for their developmental stage
- 7. Able to implement survey feedback exercises
- 8. Able to design and conduct interviews and focus groups
- 9. Knowledgeable about survey design and questionnaire development
- 10. Able to integrate and consolidate ideas from a mass of information and create coherent summaries

**LEVEL 4**

- 1. Able to design and implement process interventions in response to complex organizational issues
- 2. Able to facilitate process improvement, customer intimacy and other organizational development activities
- 3. Able to support teams in their forming, storming and performing stages

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**MY CURRENT SKILLS (INCLUDE ALL THE ITEMS YOU RANKED AS 4 OR 5)**

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**THE SKILLS I MOST NEED TO WORK ON (CHOOSE THE ONES MOST IMMEDIATELY IMPORTANT FROM ALL THE ONES RANKED AS 1 OR 2)**

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A Guide for Case Review in Children’s Advocacy Centers PG 18
These six elements must coalesce for organizational and team productivity to be sustained over the long haul. Case review is an expansion of the idea of coordinating investigation and case management of child abuse. Simply put, regular case review conferences provide a place where everybody can get together to share various pieces of case information, to contribute their own particular expertise to each child’s case, to train each other and to focus on a child-centered approach and system improvement. The development of this group process can be and must be competently managed in order to succeed. In this field, the abuse content and the organizational behaviors are so mixed together that professional meeting skills are as necessary as professional forensic interviewing.

COMPELLING VISION AND MISSION STATEMENT

WRITING THE STATEMENTS

The first step is for the leadership team to write a vision and mission statement just for the case review process itself. These statements are beastly to write but invaluable. Vision Statements describe the purpose and the calling towards a certain future: where you want to go. Mission Statements describe today: why you exist today and what you are doing to pursue your vision of the future. Together they provide direction by focusing attention on doing things day-to-day to accomplish your mission, while taking steps to pursue your vision of the future - your long-term intent. Without vision and mission statements and the commitment to them, the case review team will flounder, pull in different directions, or just be boring. Vision and Mission Statements should:

- Be narrow enough to give direction and guidance to everyone on the team, but
- Be large enough to allow the enterprise to grow and realize its potential.
- Inspire the team to a higher purpose beyond just slogging through cases, but also realistic, achievable, and brief
- Capture the essence of the case review process without being so vague that they could apply to every other organization too.

A case review vision and mission statement should include something very specific about:

- Aiding the community to be self-reflective and analytical about its response to child victimization;
- Improving investigation, prosecution and healing of victims;
- Providing an arena for multidisciplinary joint decision making and cross-training;
- Stimulating system improvement, etc. (sound familiar?)

These statements, along with the case review operating rules, should be prominently displayed on the wall during every case review meeting as a constant reminder for old heads and a training tool for new attendees. Working through dozens of cases routinely is fairly boring. The team needs frequent reminders that it is in service of a higher purpose.
PARTNER AGENCY COMMITMENT

This is a plea to educate partners about the value of collaboration and what that commitment really means practically. This is not the manual with instructions for developing the political will in a community for strong commitment to the advocacy center model for multidisciplinary case investigation, prosecution and healing. Idealism or promises in the top echelons is wonderful, but it alone won’t keep law enforcement officers, child protective workers and prosecutors coming faithfully to case review meetings. Of course no community can fully understand the structural barriers to collaboration until knee-deep in them. Yet developing CACs, or those seeking to uplift their case review process, should front-load the process with some straight talking about the issues that are really involved.

Partner agency leaders and line staff need to explore together, and hopefully accept, all the ramifications of exposing their internal decision-making to community scrutiny. They need to recognize that poking around in decisions is exactly what happens at a real case review meeting, so line staff have to be prepped for it, not sent in to be ambushed or with only stonewalling as a defense. They shouldn’t have to confront hostility and aggression – that is the issue of the structure and facilitation of the meeting itself. But they should know that everyone else will want to know how they decide when to believe a child victim, substantiate a case, arrest a suspect, and proceed to prosecution, and will want to understand why they chose not to or can’t. In many communities, these decision points have been secrets for a long time, and are closely guarded prerogatives even in functional CACs. One of the clear messages of the CAC movement is professionalizing all these functions.

Partner agency leaders and line staff should delve further into what it means to make these decisions both with input and with influence from other partners, and then decide how far they might be willing to go. A very happy nearly 70% of the recently surveyed group of CACs recounted that there is some degree of joint decision-making in their multidisciplinary teams. Lots of communities are doing it, and could probably do it more. Of the other 30%, some expressed despair of that ever happening in their bureaucratized systems, and shared that predetermined, dictatorial or guarded decisions made for fairly boring reporting at meetings.

Another major issue is time and availability. Line workers can’t attend meetings consistently until leadership directs their supervisors to carve out the time and make sure they get themselves there. Neither can they bring important investigatory information with them until their agency works through confidentiality and information management issues. Similarly, the timing of case assignment within agencies may adversely affect availability. Finally, agencies have issues around staffing levels. Some CACs report that law enforcement cadres dramatically reduced by military reserve call-ups have adversely affected them. Less transparent can be bureaucracies who try to deny obvious staffing shortages in crucial child-related investigations. If important people are not consistently attending case reviews, the most useful intervention is up their chain of command; pursue the hearts of their agency leadership, work through the real fears about transparent and joint decision-making, as well as human resources. Then court the line workers with good meeting structure and facilitation.

Local case studies are one of the best instruments to educate public agencies of the values of collaboration. Many CACs start up hard on the heels of a very bad and very public case. But other communities seem to be able to absorb many bad cases with no astute response. Stories of what happened to kids when agencies didn’t collaborate, when well researched and analyzed, can be powerful inspirational tools. Such stories should be collected devotedly by the CAC, from every possible source, especially from case reviews, and shared liberally. Once case reviews are under way, fervent collection of great stories of collaboration as well will yield great dividends in fundraising and commitment. Include in this bouquet any example of how efficiency has been improved with better access to partner agencies.

Another ingredient of strong partner commitment is sharing through the CAC sufficient information in order to assemble a complete picture of what happened to a child from outcry through prosecution and treatment. This is one of the hallmarks of a real system, that one can track clients from beginning to end. This is necessary for the case review process to work, and certainly a key part of evaluating the effectiveness of the CAC process. The ideal is an information technology system that allows easy access to client information in all courts and public providers, but virtually no community actually has that sophisticated a system. But even if a complete client path has to be manually assembled, still there is a system, case review can proceed, and the CAC has the capability to do a full project evaluation.

EFFECTIVE PLANS AND APPROPRIATE SKILLS

The structure is the operating plan, the times and places, the definition of the work to be accomplished, the output to the system. Designing or redesigning the case review process requires a multi-agency workgroup; issuing forth just from the CAC is the kiss of death. The structure should include goals and objectives, operating procedures, rules and norms.
Case review goals/objectives
Again, the multi-agency workgroup should hash out the goals and objectives of the case review process. The goals portion should include something very specific about the following:

- landing and keeping all important partner agencies and professionals
- the sharing of what specific investigative information
- monitoring recommendations
- forging recommendations and making decisions on case direction as much together as the community can manage,
- communicating recommendations and decisions to all important parties
- learning how to collaborate,
- collecting system and outcome data on child victims,
- supporting and inspiring each other in the work,
- analyzing barriers to collaboration
- understanding the child victim’s experience in the system
- boosting fact collection up to system improvement.

Operating procedures, rules and norms - the who, what, where and when, and how to behave.

Who. Every case review meeting needs some structure experts, some knowledge experts, and some decision experts. Structure experts are the leader, the facilitator, and the scribe to record important information. Most CACs have one person fulfilling the first two roles or maybe all three, thus it is even more important to have that person be competent at running meetings. Every participant deserves to attend meetings that are led and facilitated well. A good strong leader, trained in facilitation techniques, can set a positive tone and intervene when the personal interaction is off-key. This is especially important:

- to keep one or two people from dominating, and give everyone a chance to speak,
- to highlight the value of the work and motivate the team,
- to keep the group efficiently on target
- to stimulate positive and creative thinking,
- to bring difficult subjects to the surface,
- to help the group become aware of its own behavior, and
- to make sure everyone is safe from personal attack.

If an experienced facilitator is not available, keep looking, or send the leader for training. Knowledge experts are the people who know the particular case or who know the field. These are the investigators and interviewers, medical professionals who are either child abuse specialist or examiners of the victim, the prosecutor, mental health clinicians, victim and family advocates, and domestic violence or crisis interventionists. Bringing in experts in the field who have not worked with the particular victim in question can add vitality and variety to the discussion, especially if they are individuals with good interactive skills and can ask thoughtful but not antagonistic questions.

National Children’s Alliance Standards for Accredited Members require that case review include, at a minimum, representatives from law enforcement, prosecution, child protective services, medical, mental health, victim advocacy and the CAC. CACs are least likely to have consistent attendance from victim advocates, medical professionals, law enforcement and prosecutors, in that order of frequency. As purely knowledge and not also decision experts, specialized medical professionals provide contributions of particular importance. Some cases hinge on interpretation of medical findings or the timing of transmission of sexually transmitted diseases. Many communities do not provide for law enforcement consultation with physicians or nurse practitioners, forcing lay determinations of medical issues.

To truly understand and serve all child victims and families, it is crucial for every CAC to bring culture and language-competent professionals, representative of the major ethnicities and tribes living within the jurisdiction, into every aspect of investigation, prosecution and healing of child abuse. There is no better place than case review meetings to start this inclusion process. Their perspectives, and the training they can provide, can increase sensitive handling of specific cases but also highlight system-wide adjustments that need to be made in order for CACs to welcome all ethnic and cultural groups.

Finally, the decision experts are those who have the authority to decide which cases are substantiated, which suspects are arrested and charged, which children will be called to testify: supervisors and administrators, sergeants and lieutenants, prosecutors, child’s counsel, and other tribal or military authorities. Communities who want full joint decision making have to find a way to get the decision experts at the case review meetings, or available by phone, or at least pledged to heed or take note of the recommendations of the MDT. It is most important for everyone to be clear just how much decision-making can be vested in the review team, and to keep inching towards full collaboration according to community mores.
What (and a little when). The first item is to decide which cases to review and by whom. As shown by the brief survey, most CACs try to review all new cases that come before them. Some wait for 8 weeks to put cases on the schedule, so that investigations are farther down the road. However, reviewing “live” cases is crucial, even at the risk of incomplete information; partners will quickly tire of reporting out on done deals, and the meetings will be really boring. It is also common to review only the cases that have been nominated by one of the partners as needing review, or cases that are considered particular complex, difficult, or needing coordination among multiple agencies. This has the potential for discussions that are more interesting.

Most surveyed CACs try to review 10-20 cases per meeting, allowing an average of 5-6 minutes per case. This formula, or one that allows even more time per case, can determine whether to schedule weekly or biweekly. Monthly meetings are more common to smaller programs. The worst case is to try for the impossible and watch it fail time after time. So it is better to decide to review a realistic number of cases, pick them well and coherently, and actually cover them rather than pretending to review the entire universe of cases.

The number of cases to review as well as the workloads of important representative should drive decisions about meeting times. Clearly every last one of the important participants for case reviews will always be overworked, stretched thin, and will never have enough time to accomplish all their work, so minimizing demands on time, and providing an efficient and productive experience, is significant. Several survey respondents reported that they were going to try “something different” – bringing only a few cases and providing an hour per case for really deep review of something obviously complex. If case reviews are shallow and boring, then perhaps more thorough examination of fewer cases might be more productive.

Obviously, reviewing all cases thoroughly is almost impossible for jurisdictions with very large caseloads or with very large geographical areas, yet sharing information about them and analyzing them is still crucial. Some agencies have multiple case review teams working simultaneously, a very labor-intensive venture, but effective in covering the numbers. Another possible formula is a two-tiered review system, where one regular group reviews more cases and a specialized group reviews fewer complex cases in depth or extracts meaning out of the cumulative information. Some CACs build their regular group from line workers and supervisors, or solely from clinicians and managers, with the specialized over-layer involving all partner agency supervisors and higher-level administrators. Some use the entire MDT as the regular group, then tag especially complex cases for review by a smaller group of managers. CACs report that each of these two-tiered models works for their community, although one CAC was still developing their protocol.

Perhaps a three-tiered structure would be optimal, especially where there was good, established collaboration and record keeping. A team of supervisors from each public agency could review all cases to ensure that communication and collaboration was working. They could then flag interesting, complex, or troubled cases to bring to the entire MDT for review, bringing appropriate line workers to present. Finally, a third smaller group of managers could review cumulative data and a few cases in depth, with an eye towards system assessment and improvement.

Another idea is to alternate between multiple quick reviews and fewer in-depth reviews every quarter or so, for variety and freshness of approach. Many CACs do hold quarterly or semi-annual gripe sessions, to provide a venue for conflict resolution and analytic thinking about system issues. An important educational and development tool is to invite agency administrators and local politicians to case reviews from time to time, using special methods to preserve confidentiality, of course. The immediacy of real stories, quandaries and triumphs can truly touch and impact the people who shape the larger conversation.

The multi-agency workgroup should develop a list of information points investigators need to bring for each case they are presenting, including specific data about the alleged abuse and the victim, but also what kinds of working assessments of child victim capabilities, safety, suspects, quality of evidence, etc. would be helpful for the review team. Agencies need to be able to prepare their line workers to feel competent in the case review and to protect them against surprises. And participants need a roadmap of the course children traverse after outcry.

Before each meeting. Select or assemble the list of cases to be reviewed based on the protocol criteria. Inform everyone of the meeting and supply the list of cases, with a reminder of the outline of information points needed. Invite some higher level administrator to sit in. Invite some partner or special guest to give a five-minute training on some aspect of abuse, investigation, treatment, culture or ethnicity, etc.
At each meeting. Post mission, goals and operating rules, and start the meeting with a statement of purpose. Introduce everyone; take the time to continue rolling introductions as people come in. Present the five-minute training. Facilitate the assembling of a total picture of each case using the pre-prepared outline of information points. Record key points for group memory and highlight missing pieces or uncertainties. Articulate together a plan for moving the case forward. Recognize good work right in the moment. Capture stories of good collaboration and put them into a labeled folder. Capture references to incompatible protocols or missing services and categorize them according to service areas or possible task forces.

Analyze the case in the context of the system as it currently functions, including capabilities and inadequacies. File according to service improvement task forces or brainstorm potential task forces to work on different system problems, and collect case examples for them. At the end, briefly assess the climate, the level of participation and productivity of the meeting. Sometimes ask participants to actually do an evaluation sheet.

After each meeting. Record all the case and process data in some kind of database, as well as plans and recommendations. Flag the cases to be revisited. Analyze the system implications, and collate data by task force. Compile stories of good collaboration. Communicate all plans, recommendations, systemic issues and success stories to all appropriate recipients. Catch breath.

When. Try mightily to select the meeting times by true consensus. True consensus is a kind of agreement where everyone accepts the outcome as good, not where some people are just forced to accept a democratically elected or dictatorially pronounced choice. Landing on times that are inconvenient for some people, or times that they assertively resisted, will just encourage them not to appear. Obviously, someone will have to compromise, but work it through until everyone is accepting and feels heard.

Some CACs have worked out phone-in times for geographically distant investigators to give input in case review by teleconferencing. Many CACs ask investigators to drop in and out of the case review according to the scheduling of their particular cases. This can make for lots of interruptions, but can work well if there are mechanisms for quick introductions and if statements of mission, goals and meeting rules are prominently displayed.

Where. Ideally, case reviews should be in a neutral or shared conference room, so that no partner has the home turf advantage. A CAC facility would qualify as both. Of course, in many communities the options are limited. Try to avoid the conference room of the prosecutor, the police, or CPS, even though they may be convenient. Any of these venues gives a clear message that one agency is more important and more powerful than the others, and this is not a good basis for collaboration. Some surveyed CACs are prosecutor driven and do meet in the prosecutor’s office. If there is no other choice, invent ways to send collegial messages via chair arrangement, information on the walls, or something else clever. And of course make sure that everyone has the same chance to speak.

The surroundings should be comfortable and conducive to work. The best room is one that can be lived in and used. There should be space for everyone at the table. If some people are forced or allowed to sit away from the table along the sides of the room, they will not play as vigorous a role in the process, and they will feel the slight. If the room is too large for the group, move furniture or room dividers to right-size the illusion of space. People need some boundaries to feel safe. Make sure the temperature is not too hot or too cold, and that the lighting is soft.

There should be special accommodations for anyone who needs them. The room should be handicap accessible. Some police officers and other investigators like to have locked drawers in which to store their guns while they are at the meeting. There have been officers who have felt disrespected by the lack of safe storage. Those who smoke like to have somewhere to go for a break. People resent being forced to give up their cell phones to enter controlled court or federal buildings. If they retain their devices, participants will inevitably receive pages or phone calls during the meeting and need a nearby spot, perhaps with a phone, for private conversation. Line workers, especially in cities, struggle with parking all during the day; their lives would be much easier if the case review location had plenty of parking.

It is common knowledge that food and drink are crucially important to case review meetings. People are much more likely to appear if snacks or simple meals are provided. It is worth the extra effort to lay out caffeinated, decaf and diet drinks. Check with the group about other tastes. Adults are childlike in their delight at candy. Stress reduction toys to handle can lighten the atmosphere.

The space should have some group memory equipment in place, to help keep everyone “on the same page”. The group memory includes the mission, goals, and meeting rules, all prominently displayed and pointed out at each meeting. There should also be a whiteboard, laptop and projector, or easel pad for note taking. It would be ideal to outline every case via whiteboard or projector for all to see, so that everyone could be literally “working from the same page” and seeing what is missing.

In addition, someone should note down with a big marker every instance of structural barriers to collaboration or points of inadequacy in the system that pop from the cases, so they can be compiled and sent to an appropriate program committee. Making this process very public and visual is
an important trick for elevating its importance in the meeting. Similarly, capture summaries of shining collaborative successes.

Operating Rules: The workgroup should draft some operating rules, some good team behaviors, for case reviews. The case review team can use that draft as a basis to craft their own list, to be posted prominently in all meetings. The idea is to create the expectation of safety and full participation. Equally as important is to inspire the group, as it slogs through details, about the higher purpose of the case review process—improving community response to child abuse.

A healthy organization needs to know its mission, plan the work, develop enthusiasm, and bring things to fruition. It also needs to look at what it’s doing, keep what’s good and try to jettison what isn’t working. Evaluation isn’t a separate topic, it’s just one more piece of the work. The fundamental principle of evaluation is to gather information about whether and how well goals have been achieved. Since the mission and goals of the case review will have already been written, it should be fairly simple to construct an assessment of their achievement.

Just as one person can’t do all the work of an advocacy center, one person simply can’t carry a whole evaluation either. Trying to do it all alone might threaten the physical and mental health of that person, and will also keep the idea of self-appraisal marginalized and minimized. The organization as a whole can’t thrive and grow unless an understanding of self-appraisal is shared.

Since case review is fundamentally an evaluative enterprise, the best course is to use it that way, to include the whole team in keeping communication open and trying to integrate evaluation ideas throughout the organization as a natural part of the work. Brief assessment of meeting climate can be completed at the end of every meeting, or every few meetings. Many CAC case review teams hold quarterly or semi-annual, facilitated, evaluative “gripe sessions” to keep complaining out of the case review and to provide a venue for thoughtful comments about collaboration and the hitches in it. This serves as a two-layer cake: both evaluation of the case review process and, inevitably, evaluation of the whole multidisciplinary CAC process, since the case review is the theatre where collaboration is played out. Managing this session around the pre-stated goals as well as the material sent on from case review to protocol task forces can yield deep and valuable insights. To do this, there have to be people who are insightful, probing and analytical, so make sure some of those people are participating. With the good habits of evaluation ingrained and demystified, an evaluation of the entire CAC will not be so overwhelming.

Mock Operating Rules

1. We will listen carefully without judgment.
2. We will not let a few people dominate.
3. We will protect all from personal attack.
4. We will reject snap judgments.
5. We will use conflict to stimulate understanding and solutions.
6. We will view problems as system problems, not individual failures.
7. We will use today to point us to things we need to improve.

RECOGNIZING, REWARDING AND REVIVING

Hopefully, ongoing assessment and evaluation will reveal many successes in the case review process. Team members will appreciate regular summaries of all they have accomplished and especially of cases that were transformed by the group input or timely sharing of information. Hopefully, case review can be restructured and revitalized if assessments show the need.

CACs may be the only organizations that can truly recognize and reward tireless line workers, supervisors and administrators for their cleverness and insight, high quality work with child
victims and visionary collaborative work at all levels. There is precious little positive feedback for anyone in any job, and this is a particularly hard job. CACs ought to specialize in creative ways to show value, increase fun, and reinforce the kinds of cooperation that really improve community response to abuse. Leaders and facilitators should comment at every case review meeting when they hear about good quality and collaborative work. Many CACs use every fundraiser or public forum to highlight stories of special professionalism, praising team members by name right along with the requisite benefactors and politicos. Certificates and plaques are always good; money is even better!

<table>
<thead>
<tr>
<th>Checklist for Case Review</th>
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<th>Notes</th>
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<tbody>
<tr>
<td>1. Vision and Mission Statement</td>
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<td>2. Adequate Resources</td>
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<td>Partner Agency Commitment</td>
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<td>Exploring scrutiny of decisions</td>
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<td>Exploring joint decisions</td>
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<td>Time/availability of workers</td>
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<td>Case information</td>
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<td>3/4. Effective Plans and Appropriate Skills</td>
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<td>Goals/Objectives</td>
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<td>Operating Procedures/Rules</td>
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<td>Who</td>
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<td>Structure Experts</td>
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<td>Leader</td>
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<td>Facilitator (skilled)</td>
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<td>Scribe</td>
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<td>Knowledge experts:</td>
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<td>Law Enforcement</td>
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<td>Child Protective Services</td>
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<td>Medical</td>
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<td>Mental Health</td>
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<td>Victim Advocacy</td>
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<td>CAC</td>
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<td>Tribal/ethnicity specialists</td>
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<td>Others</td>
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<td>Decision experts</td>
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<td>LE Sgt/Lt/Cpl/Capt</td>
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<td>Prosecutor</td>
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<td>CPS Supervisor/Admin</td>
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<td>Physician</td>
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<tr>
<td>Child’s Counsel</td>
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### Checklist for Case Review

<table>
<thead>
<tr>
<th>What</th>
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<th>Notes</th>
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<tbody>
<tr>
<td>Which cases</td>
<td></td>
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<tr>
<td>How many cases</td>
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<tr>
<td>Reviewed by whom</td>
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<tr>
<td>Before each meeting</td>
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<tr>
<td>How collect case data</td>
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<tr>
<td>During each meeting</td>
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</tr>
<tr>
<td>• Focus on goals, operating norms/rules at the beginning of each meeting</td>
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<tr>
<td>• Post goals, operating norms/rules on visible chart; refer to them as each new person joins the meeting</td>
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<tr>
<td>• Ask each person to introduce him/herself;</td>
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<tr>
<td>• Take 5-10 minutes for training on some topic of abuse, treatment, assessment technique, cultural competence, etc.</td>
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<tr>
<td>• Assemble total picture of each selected case with information from all.</td>
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<tr>
<td>• Record key points of case discussion in group memory</td>
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<tr>
<td>• Highlight missing pieces of information, areas of uncertainty</td>
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<tr>
<td>• Prepare plan for moving case forward</td>
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<tr>
<td>• Place case in context of system right now - adequacies or inadequacies</td>
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<tr>
<td>• Brainstorm potential task forces to work on system problems</td>
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<tr>
<td>• Collect collaboration stories</td>
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<tr>
<td>• Briefly assess the climate, participation, and productivity of the meeting after each meeting</td>
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<tr>
<td>After each meeting</td>
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<tr>
<td>• Record case and process data brought</td>
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<tr>
<td>• Record plans, recommendations, decisions</td>
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<tr>
<td>• Communicate recommendations to appropriate parties</td>
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<tr>
<td>• Mark cases to be revisited by the team</td>
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<td></td>
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<tr>
<td>• Analyze and collate system problems</td>
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### Checklist for Case Review

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<thead>
<tr>
<th>When</th>
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<tbody>
<tr>
<td>Meeting time by consensus</td>
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<tr>
<td>Rolling attendance?</td>
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<tr>
<th>Where</th>
<th>Done</th>
<th>Notes</th>
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<tr>
<td>Neutral or shared room</td>
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<tr>
<td>Pleasant</td>
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<tr>
<td>Space for everyone at table</td>
<td></td>
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<tr>
<td>Accommodations</td>
<td></td>
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<tr>
<td>Food and drinks</td>
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<tr>
<td>Group memory equipment</td>
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<tr>
<th>Operating rules</th>
<th>Done</th>
<th>Notes</th>
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<tr>
<td><strong>5. Regular Evaluation of case review</strong></td>
<td></td>
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<tr>
<td>Based on mission and goals</td>
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<tr>
<td>After each meeting</td>
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<tr>
<td>Quarterly?</td>
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<tr>
<th><strong>6. Recognition and Reward</strong></th>
<th>Done</th>
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IV. FOR TEAM MEMBERS: PLANNING TO LAUNCH OR IMPROVE CASE REVIEWS

WHY DO CASE REVIEW?

Years of experience in the Children’s Advocacy Center movement around the country suggests that regular review of cases by a multidisciplinary team of investigators and supervisors is a very valuable tool for improving the way communities handle child sexual abuse. According to National Children’s Alliance, which requires regular case reviews for accredited membership status, case review meetings should draw, at a minimum, representatives of these key partner agencies,

• law enforcement;
• prosecution;
• child protective services;
• medical;
• mental health;
• victim advocacy; and
• Children’s Advocacy Center.

Each of these representatives should know ahead of time which cases will be reviewed, so that everyone can be prepared with pertinent case information. Those participating in the case review should communicate any recommendations from the case review to the appropriate parties, and agencies should use case review as an opportunity to increase understanding of child abuse cases. Beyond those guidelines, each community can structure their case review the way they wish, to meet their own needs and to accommodate their own partner agencies.

Case review is an expansion of the idea of coordinating investigation and prosecution of child abuse. Law enforcement officers, child protective services workers, prosecutors, medical and mental health professionals and advocates can work much more effectively if all of their contacts with child victims are orderly, rational, planned and collaborative; if everybody knows all the facts and opinions about individual cases; and if every practitioner keeps learning up-to-date techniques in his own and other related fields. Simply put, regular case review conferences provide a place where everybody can get together to share various pieces of case information, to contribute their own particular expertise to each child’s case, to train each other and to focus on a child-centered approach. Hopefully, teams can evolve to a point where actual decisions about arrest, services and referral for treatments can be made jointly at the case review, to whatever extent a community can manage.

To truly understand and serve all child victims and families, it is crucial for every CAC to bring culture and language-competent professionals, representative of the major ethnicities and tribes living within the jurisdiction, into every aspect of investigation, prosecution and healing of child abuse. There is no better place than case review meetings to start this inclusion process. CACs should work towards advancing minority hiring in law enforcement, child and family services, prosecution agencies, medical and mental health providers and CAC staff. But there is immediate benefit to humbly and regularly inviting advocacy and mental health professionals who serve tribal and ethnic communities to contribute their expertise and perspective at case reviews. Their perspectives, and the training they can provide, can increase sensitive handling of specific cases but also highlight system-wide adjustments that need to be made in order for CACs to welcome all ethnic and cultural groups.

For every child of every background, then, case review can be a platform for boosting fact collection up to system improvement. By studying each case carefully and openly, the case review team is uniquely positioned to see just what every key player in the system is doing, what works and doesn’t work both for the victims and the professionals, then come up with ideas together to improve and mesh policies and procedures. Framing case review that way brings it to a higher plane than just rote case presentations week after week. It should be laboratory, an incubator for synergy.

Many CACs report that they have learned to run consistent and fruitful case reviews, and have improved their community response to child abuse via this process. These organizations have worked to:

• encourage investigative teams and their supervisors to be willing and able to attend meetings consistently and bring forward the right information;
• have as many actual investigators as possible present their own cases;
• create a pleasant and collaborative meeting tone.
“SOME POLICE OFFICERS WHO REMEMBER WHAT IT WAS LIKE BEFORE MDT SAY THAT THEY SPENT MORE TIME TRYING TO CONNECT WITH THE DA’S OFFICE ON ONE CASE IN THE OLD DAYS THAN THEY SPEND NOW IN TEAM ABLE TO STAFF ALL THEIR CASES.”
• really make decisions together as team as much as regulations and policies allow.

But this doesn’t necessarily happen naturally, because bringing together different professionals from public and private agencies may create tensions. CAC leadership and team members alike need to manage the experience to be productive, challenging, yet agreeable for everyone.

“The review process has allowed for each discipline to have a better understanding of the other disciplines’ roles, rules, and limitations. Communication has improved, and clients are treated with more respect and dignity by all disciplines. Fewer cases and children are falling through the cracks because the team stays in better touch with the families. Previously cases took so long to get through the system, that victims and witnesses disappeared or recanted. Having snacks or late lunch available has improved team participation.”

The model presented here consists of five stages, each with its own task objectives and process objectives:

**THE STAGES OF GROUP OR TEAM DEVELOPMENT**

When people in groups are asked to work cooperatively, they tend to go through predictable phases of development. Each stage follows and builds upon the stage before; it takes time to get to a productive phase, which can produce anxiety and feel like wasting time. But it is not a waste of time as long as leaders and team members are aware of what has to be done in each stage, and work on it together. Stages cannot be skipped; each group must go through each of the stages to get to performing well, then start up again and re-form when things change. It is possible to become dysfunctionally stuck in one stage, then need some help to move forward. If a team continually revisits the same issues, fights a lot, or feels demoralized, it may be stuck in one of the first two stages. To move, the team needs to go back and redo the previous stages in order, especially regarding commitment of resources, structural planning and communication.

There are two major dimensions to each stage: task behaviors, i.e. what work gets done at each stage, like planning how and actually reviewing cases; and process behaviors (sometimes called “maintenance” behaviors), i.e. the interpersonal interactions related to how work gets accomplished at each stage, like making sure everyone has a chance to speak and feels safe in sharing their information. It shouldn’t be all touchy-feely, but if reviewing cases makes people miserable, defensive, unhappy or bored, they will find ways not to come. Also, each group needs to contain the complete set of skills – both people who are good at doing the work but also people who are good at encouraging, supporting, probing, laughing, summarizing, creating. If skills are missing from the team, go find people who will bring them.
<table>
<thead>
<tr>
<th>DEVELOPMENTAL STAGE</th>
<th>TASK OBJECTIVES</th>
<th>PROCESS/Maintenance OBJECTIVES</th>
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| **Forming**          | • Line up time, food and suitable space resources  
• Decide who should attend to represent the cultural makeup of the community and to bring the whole set of task and process skills.  
• Get agencies to commit realistically the time of their investigators and supervisors to attend regularly  
• Resolve confidentiality restrictions  
• Get commitment from everyone | * Get clear on vision and mission – what case review is for and exactly what it will accomplish  
• Clarify operating values – meeting atmosphere and how to help everyone get to know each other's role and participate comfortably |
| **Storming**         | Plan:  
• How many cases will be reviewed and when  
• What key information points participants should bring  
• How cases will be reviewed  
• How decisions/recommendations will be made and communicated  
• How case information will be stored | Plan:  
• How to talk about and resolve conflict  
• How to work through incompatible protocols  
• How to support everyone to talk about touchy and painful subjects  
• Write operating rules. |
| **Norming**          | • Practice selecting and reviewing cases  
• Establish routines and get used to them  
• Practice communicating and following up on decisions and recommendations  
• Define and establish various protocol working groups | • Establish and practice communicating within the case review team about tough issues of high quality investigation, prosecution and healing  
• Communicate and process findings externally |
| **Performing**       | • Review lots of cases regularly  
• Make recommendations and decisions cooperatively  
• Place cases within the context of the entire system and work towards system improvement  
• Refine work processes, routines and cycles. | • Enjoy a sense of accomplishment  
• Have some fun working together  
• Learn in depth about the experiences of fellow professionals and child victims/families  
• Refine the way meetings are managed |
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<tr>
<th>DEVELOPMENTAL STAGE</th>
<th>TASK OBJECTIVES</th>
<th>PROCESS/MAINTENANCE OBJECTIVES</th>
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| Reviving            | • Regularly, perhaps quarterly, evaluate team performance  
                     • Improve and reinvigorate the team to encompass new members and ongoing challenges of child abuse | Establish “key success indicators”  
Reward/recognize team members and partner agencies for their own special expertise, collaborative and motivational spirit, high quality work with child victims and imaginative thinking about system improvement |

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<tr>
<th>DEVELOPMENTAL STAGE</th>
<th>PUTTING IT TOGETHER</th>
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| Forming             | • Explore realistically with all partner agencies their comfort level about revealing their internal decision-making and sharing joint decision-making. Everyone needs to know before coming to case review exactly what they can or can’t talk about.  
                     • Some participants are more aware than others of “process” issues.  
                     • Some are more comfortable than others presenting cases to a team, and accepting input from other professionals.  
                     • Almost all groups have to learn how to interact respectfully.  
                     • Most quality problems come from inadequate systems more than with individual shortcomings. |
| Forming             | • Most CACs set regular weekly or biweekly meeting times.  
                     • Most CACs try to review every new case, bring some complex ones back  
                     • Most CACs review 10-20 cases during each meeting  
                     • Some CACs have supervisors review all cases, entire team review some; some CACs do the reverse  
                     • Some CACs bring teams of investigators in for a time certain portion of the meeting on their cases only; a few ask investigators to phone in.  
                     • Select the time by true consensus – everyone is comfortable, not just jammed into an inconvenient schedule.  
                     • Always serve refreshments!!  
                     • Consider quarterly Evaluation/Gripe/Venting Sessions |
| Forming             | The room:  
                     • Best if a neutral location  
                     • Table large enough for everyone to be “at the table” and not sitting outside the circle  
                     • Conducive surroundings – comfortable temperature, light, stress-reducers |
| Forming             | Group memory equipment: (so everyone is “on the same page”)  
                     • Charts of Mission and Operating rules on the wall at every meeting  
                     • Easels or overhead projector to record key information bits for all to see |
## Developmental Stage

### Storming

**Good Facilitation**

Every participant deserves to attend meetings that are led and facilitated well. A good strong leader, trained in facilitation techniques, can set a positive tone and intervene when the personal interaction is off-track. This is especially important:

- to keep one or two people from dominating,
- to give everyone a chance to speak,
- to highlight the value of the work,
- to keep the group efficiently on target
- to stimulate positive and creative thinking,
- to bring difficult subjects to the surface,
- to help the group become aware of its own behavior, and
- to make sure everyone is safe from personal attack.

If your group does not have such a leader, then it is up each team member to 1) control the tone and protect participants and 2) find a better leader/facilitator.

### Storming

**Sample operating rules** – this helps set the expectations for the meeting tone and keep eyes on the mission. Write your own as a group.

<table>
<thead>
<tr>
<th>Mock Operating Rules</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. We will listen carefully without judgment.</td>
</tr>
<tr>
<td>2. We will not let a few people dominate.</td>
</tr>
<tr>
<td>3. We will protect all from personal attack</td>
</tr>
<tr>
<td>4. We will reject snap judgments.</td>
</tr>
<tr>
<td>5. We will use conflict to stimulate understanding and solutions</td>
</tr>
<tr>
<td>6. We will view problems as system problems, not individual failures</td>
</tr>
<tr>
<td>7. We will use today to point us to things we need to improve.</td>
</tr>
</tbody>
</table>
### Developmental Stage

<table>
<thead>
<tr>
<th>Storming</th>
<th>Putting it Together</th>
</tr>
</thead>
<tbody>
<tr>
<td>• CACs invest in state-of-the-art forensic interviewing, but forget that the same subtle skills are needed for interdisciplinary work with each other as well.</td>
<td>• Learn some new good people behaviors, such as:</td>
</tr>
<tr>
<td>• Learn some new good people behaviors, such as:</td>
<td>o Be aware of your own emotions; take care of yourself in this stressful work</td>
</tr>
<tr>
<td></td>
<td>o Listen and respond to show empathy; return phone calls, get to know each other</td>
</tr>
<tr>
<td></td>
<td>o Encourage discussion; don’t trash other people’s ideas; don’t keep too many work things off limits</td>
</tr>
<tr>
<td></td>
<td>o Share the air time; make sure even the introverts get to talk</td>
</tr>
<tr>
<td></td>
<td>o Seek facts to back up opinions; this is a professional enterprise, so “gut feelings” are not enough</td>
</tr>
<tr>
<td></td>
<td>o Beware of attributing motives to people; we can’t know what is in peoples’ minds unless they tell us</td>
</tr>
<tr>
<td></td>
<td>o Acknowledge the contributions and ideas of others; be generous with praise</td>
</tr>
<tr>
<td></td>
<td>o Make sure fights are not just for their own sake; use conflict creatively</td>
</tr>
<tr>
<td></td>
<td>o Enjoy the people you work with; it’s not worth it if it’s not fun.</td>
</tr>
<tr>
<td>Norming and Performing</td>
<td>At each meeting, the team should:</td>
</tr>
<tr>
<td></td>
<td>• Focus on goals, operating norms/rules at the beginning of each meeting</td>
</tr>
<tr>
<td></td>
<td>• Post goals, operating norms/rules on visible chart; refer to them as each new person joins the meeting</td>
</tr>
<tr>
<td></td>
<td>• Ask each person to introduce him/herself; continue rolling intros</td>
</tr>
<tr>
<td></td>
<td>• Take 5 minutes for training on some topic of abuse, treatment, assessment technique, cultural competence, etc.</td>
</tr>
<tr>
<td></td>
<td>• Assemble total picture of each selected case with information from all.</td>
</tr>
<tr>
<td></td>
<td>• Record key points of case discussion in group memory</td>
</tr>
<tr>
<td></td>
<td>• Highlight missing pieces of information/assessments/areas of uncertainty</td>
</tr>
<tr>
<td></td>
<td>• Prepare plan for moving case forward</td>
</tr>
<tr>
<td></td>
<td>• Place case in context of system right now - adequacies or inadequacies</td>
</tr>
<tr>
<td></td>
<td>• Brainstorm potential task forces to work on system problems</td>
</tr>
<tr>
<td></td>
<td>• Briefly assess the climate, participation, and productivity of the meeting</td>
</tr>
<tr>
<td>DEVELOPMENTAL STAGE</td>
<td>PUTTING IT TOGETHER</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Norming and Performing</td>
<td>After each meeting, someone on the team should:</td>
</tr>
<tr>
<td></td>
<td>• Record case and process data brought to the meeting</td>
</tr>
<tr>
<td></td>
<td>• Record plans, recommendations, decisions</td>
</tr>
<tr>
<td></td>
<td>• Communicate recommendations to appropriate parties</td>
</tr>
<tr>
<td></td>
<td>• Mark cases to be revisited by the case review</td>
</tr>
<tr>
<td></td>
<td>• Collate data by task force</td>
</tr>
<tr>
<td></td>
<td>• Breathe a sigh of relief</td>
</tr>
<tr>
<td>Reviving</td>
<td>• Briefly evaluate team performance at the end of every meeting (using some quick format like the Meeting Effectiveness Survey below)</td>
</tr>
<tr>
<td></td>
<td>• Improve and reinvigorate the team to encompass new members</td>
</tr>
<tr>
<td></td>
<td>• Recognize each others’ special expertise, collaborative and motivational spirit, high quality work with child victims and imaginative thinking about system improvement</td>
</tr>
</tbody>
</table>
1. People tend to resist the idea of another meeting.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

2. Meetings generally do not start or end on time.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

3. When a member offers an idea, other members do not ask detailed questions or demonstrate active listening.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

4. Discussions begin before it’s clear to everyone exactly what is being discussed.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

5. One or two members dominate the meeting.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

6. Often the meeting ends before everyone has been heard from.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

7. People do not address each other directly, but talk about others as if they were not in the room.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

8. If the objective of the meeting has not been reached, the group schedules a follow-up meeting rather than run overtime.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree
9. Many ideas have to be repeated several times before they get a response.
   - Totally Disagree  
   - Disagree  
   - Doesn’t Apply/ Not Sure  
   - Agree  
   - Totally Agree

10. The formal leader or chair seems to have more weight than other members.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

11. People start to disagree with others before they really understand what’s being said.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

12. Following meetings, there are postmortems behind closed doors about what really went on.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

13. There is never any assessment at the end of meetings to see whether the group has achieved what it set out to do.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

14. People react to new ideas by making fun, uttering put-downs, or ignoring the idea altogether rather than questioning and exploring it further.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

15. Too many people sit in the meetings not really participating.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

16. After the meeting, there is always some confusion about what was agreed upon and who is responsible for implementation.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree

17. Few decisions are made by consensus; the group lets individuals make decisions, or it tends to vote on issues without much preceding discussion/analysis.
    - Totally Disagree  
    - Disagree  
    - Doesn’t Apply/ Not Sure  
    - Agree  
    - Totally Agree
18. The group often cannot make decisions because it does not have the necessary information, or people have not done their homework.
   - Totally Disagree
   - Disagree
   - Doesn't Apply/ Not Sure
   - Agree
   - Totally Agree

19. There is seldom any checking to see whether the group has gone off track, or if the meeting is an effective use of time.
   - Totally Disagree
   - Disagree
   - Doesn't Apply/ Not Sure
   - Agree
   - Totally Agree

20. Too often we agree on a course of action because everyone is tired, or cannot be bothered to delve deeper.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

21. People seem to leave the meeting drained of energy.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

22. The members seem to spend a disproportionate amount of time at the start of meetings trying to define the problem they’re supposed to be working on.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

23. During meetings people arrive late, ask to be excused early, are frequently called out, and so on.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

24. Arguments that have no real bearing on the topic of the meeting often break out.
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree

25. When a serious conflict occurs between some members, no one in the group attempts to help
   - Totally Disagree
   - Disagree
   - Doesn’t Apply/ Not Sure
   - Agree
   - Totally Agree
SUMMARY OF FINDINGS

To enrich the information presented in this document, the Northeast Regional Children's Advocacy Center commissioned a brief telephone survey to collect data on the current case review practices of CACs around the country. The survey showed that there is wide variety around the country in case review design. The most common CAC practice is a single case review team that reviews all new cases between 10-20 cases/meeting, led by the CAC Executive Director/Coordinator. Meeting frequency is equally divided between weekly, biweekly and monthly, with larger CACs reviewing cases more frequently. A third of the CACs surveyed operate on various two-tiered models, with a regular review team and a special team that meets less frequently.

METHOD

The short questionnaire was comprised of eight questions covering timing, attendance, leadership and facilitation, case selection and numbers reviewed, decision-making, and an open-ended section on successes and problems with case reviews. It was sent in May 2004 via e-mail to all participants of the four geographic regional summits held during the Fall of 2003 whose e-mail addresses were listed on the summit directories. Those participants who were chapter directors or coordinators and not currently running CACs were asked to pass the survey along to another CAC in their state. The e-mail survey went out to 69 people; the final response rate was 60%. Forty CAC directors from 24 states, not quite equally divided but including good representation from all four geographic regions, responded to the survey. Of those, 37 were accredited member CACs and the other three were Associate members. Unfortunately, no Native American Children’s Alliance (NACA) representative responded to survey requests.

FINDINGS ABOUT CURRENT PRACTICES IN LIGHT OF NCA STANDARDS

- NCA Standards for Accredited Members require CACs to conduct case reviews regularly with at least the identified team members’ participation and to have case review criteria and standards written into their team protocols. The case review must include the minimum seven important agency representatives:
  - law enforcement;
  - prosecution;
  - child protective services;
  - medical;
  - mental health;
  - victim advocacy; and
  - Children’s Advocacy Center

NCA also declares as necessary for case review that:
- CACs have a Coordinator who pre-informs participants which cases will be discussed;
- Any recommendations that come out of the case review should be communicated to the appropriate people for implementation; and
- The case review should provide the opportunity to increase the community’s understanding of child abuse cases.

Do the surveyed agencies meet the NCA standards? Not all of them do. All of them do have case reviews, though several either do not have a regular schedule (which does not meet the intent of NCA standards) or plan meetings where no one shows, and all but one have completed criteria for selection of cases for review. Only 35% meet the minimum recommendations for full multidisciplinary participation by their own report. NB: This survey did not request attendance records, but just who attends regularly or sometimes, so there is considerable leeway.

85% of CACs reported that they have all three of the triad of law enforcement, child protective services and prosecution involved in case review. This compliance rate falls to 57% when a victim advocate is considered. Almost a full two/thirds, 65% of the surveyed CACs, reported that they were missing some important agency representatives on their case review team. This finding needs some additional clarification because of the difficulties of categorizing positions with job titles specific to each community, especially regarding victim advocates.

The top five missing persons were, in order of frequency:
- Victim advocate (43%);
- Medical professional (33%);
- Law enforcement – CACs report wanting either more officers or more jurisdictions;
- Prosecutor (especially common for hospital-based programs); and
- Mental health

CACs report a wide variety of other professionals beyond the NCA Standards list who do participate in their case reviews. These include: hospital and other private social workers, school counselors and administrators, rape and other crisis intervention specialists, court mediators and other court staff, state CPS, military representatives, tribal representatives, and probation and parole officers. Many CACs report large numbers of law enforcement officers from multiple jurisdictions, as well as local and state prosecutors.

Many teams found that the camaraderie generated in case reviews served to strengthen their community response to child abuse, and the case review did deepen their understanding
of child abuse and led to a more respectful, child-centered system. This will be described further below.

**FREQUENCY OF CASE REVIEW MEETINGS**

There are at least five different team models of case review currently in use by the informants of this survey. 70% of CAC surveyed report that they assemble a one-tier case review team that hears and analyzes every case that the agency reviews. Of these 28 CACs, five of them do have multiple but identically constructed case review teams to cover multiple geographical areas, either different counties or other subsets of their jurisdiction. These teams are evenly divided between weekly, biweekly and monthly meetings, though it seems communities with larger populations meet more frequently (See Figure A). This survey did not gather sufficient data for a full correlation.

The remaining 30% of surveyed CACs operate on four different two-tiered models of case review (See Figure B). These agencies have designated one kind of team to do regular and frequent case reviews, then another special team to review or analyze cases or overall performance less frequently. For some, the regular working team is the entire multidisciplinary team, for others it is mostly investigators with some supervisors or just management. Likewise, the special team can be a management or steering committee, a specialized prosecution-planning group or the entire team. One CAC uses managers only to regularly review cases. Clearly there is no consistency in the frequency of case review meetings, with eight different schedules for regular and special team case reviews (See Figure C). Doing case reviews “as requested” does not meet the intent of NCA Standards for regular case review.

**CASE SELECTION CRITERIA**

The most common criterion described by survey respondents was everything – all new cases that have come to the CAC or are appropriate for the CAC as it is structured (e.g. all major hospital cases for a hospital based program, all sex abuse or all child victims depending upon the purview of the particular CAC). Several communities compile and review all new reports of abuse or new arrests even if they were not interviewed at the CAC. The second most common criterion is that cases are put on the agenda at the request of any partner agency, including the CAC. A few CACs review only complex cases or those that require a multi-agency approach. Several review whatever cases are brought by the people who show up at the meeting; this seems a risky plan with little chance of systematically improving practice. Finally, a few agendas are time-determined – all cases still open after two months or all case with upcoming court dates. One agency reported that its team is currently working on the selection protocol. Seven CACs reported that they flag older cases to bring back for re-conferencing. Except for the “All new CAC cases” division, the categories are not mutually exclusive (See Figure D).

**FIGURE A : MEETING FREQUENCY FOR ONE-TIER TEAM CACs**

<table>
<thead>
<tr>
<th>TOTAL CAC</th>
<th>WEEKLY</th>
<th>BIWEEKLY</th>
<th>MONTHLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>28</td>
<td>10</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

**FIGURE B : TWO- TIERED MODELS**

<table>
<thead>
<tr>
<th>MODEL</th>
<th># OF CACs</th>
<th>REGULAR TEAM</th>
<th>SPECIAL TEAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>5</td>
<td>Entire MDT</td>
<td>Prosecutor/other supervisors or specialists</td>
</tr>
<tr>
<td>#2</td>
<td>2</td>
<td>Entire MDT</td>
<td>Management or Steering Committee</td>
</tr>
<tr>
<td>#3</td>
<td>4</td>
<td>Law enforcement and C&amp;Y Investigators + supervisors or Investigators + a medical child abuse specialist</td>
<td>Entire MDT</td>
</tr>
<tr>
<td>#4</td>
<td>1</td>
<td>Management Team</td>
<td>Entire MDT</td>
</tr>
</tbody>
</table>

**FIGURE C : MEETING FREQUENCY FOR TWO-TIERED MODEL CACs**

<table>
<thead>
<tr>
<th>TOTAL CACs = 12</th>
<th>REGULAR TEAM</th>
<th>SPECIAL TEAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Weekly</td>
<td>Biweekly</td>
</tr>
<tr>
<td>2</td>
<td>Weekly</td>
<td>Monthly</td>
</tr>
<tr>
<td>1</td>
<td>Weekly</td>
<td>Bimonthly</td>
</tr>
<tr>
<td>1</td>
<td>Weekly</td>
<td>Quarterly</td>
</tr>
<tr>
<td>2</td>
<td>Weekly</td>
<td>As requested</td>
</tr>
<tr>
<td>1</td>
<td>Biweekly</td>
<td>Monthly</td>
</tr>
<tr>
<td>1</td>
<td>Biweekly</td>
<td>Quarterly</td>
</tr>
<tr>
<td>2</td>
<td>Monthly</td>
<td>As requested</td>
</tr>
<tr>
<td>1</td>
<td>As Requested</td>
<td>As requested</td>
</tr>
</tbody>
</table>
FIGURE D: SELECTION CRITERIA FOR CASES REVIEWED

<table>
<thead>
<tr>
<th>CRITERION</th>
<th>ALL NEW CAC CASES</th>
<th>BY REQUEST</th>
<th>COMPLEX CASES</th>
<th>TIME DETERMINED</th>
<th>THOSE WHO SHOW UP</th>
<th>FLAG OLD CASES TO REVISIT</th>
</tr>
</thead>
<tbody>
<tr>
<td># of CACs</td>
<td>17</td>
<td>14</td>
<td>7</td>
<td>3</td>
<td>2</td>
<td>7</td>
</tr>
</tbody>
</table>

FIGURE E: NUMBER OF CASES REVIEWED PER MEETING

<table>
<thead>
<tr>
<th># of Cases/mtg</th>
<th>9 cases or less</th>
<th>10-20 cases</th>
<th>21-40 cases</th>
<th>50-60 cases</th>
<th>Over 100 cases</th>
</tr>
</thead>
<tbody>
<tr>
<td># of CACs</td>
<td>9 (26%)</td>
<td>22 (63%)</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

NUMBER OF CASES REVIEWED PER MEETING

Survey data showed that the number of cases reviewed per meeting ranged from three to 150 (see Figure E). Clearly, these extremes show completely different concepts of case review from very thorough to very cursory coverage. One CAC reported that they spend an hour on each of three cases analyzed during a three-hour meeting. However, 63% of those CACs who provided this data fall into the 10-20 cases per meeting range. This prevailing number would allow an average of 5-6 minutes discussion per case in a meeting of 1.5 to 2 hours.

LEADERSHIP AND FACILITATION

CACs use a variety of people to lead and facilitate their case review meetings (see Figure F). In no instance does there seem to be a leader and a separate facilitator, considered a highly desirable configuration in the business world. In half of the respondent CACs, the CAC Executive Director or CAC Coordinator leads the case reviews.

FIGURE F: WHO LEADS AND FACILITATES CASE REVIEW MEETINGS

<table>
<thead>
<tr>
<th>Position</th>
<th># of CACs</th>
<th>Shared</th>
<th>Shared</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CAC ED/Coordinator</td>
<td>20</td>
<td>With other agency</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>MDT Coordinator</td>
<td>10</td>
<td>With Prosecutor</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>CAC Case Mgr/Intake/Interviewer</td>
<td>8</td>
<td>With Medical</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Prosecutor</td>
<td>5</td>
<td>With MDT Coordinator</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Medical Director</td>
<td>2</td>
<td>With other CAC staff</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>CPS</td>
<td>2</td>
<td>With CAC ED</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Law Enforcement</td>
<td>1</td>
<td>With CAC ED</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Court Staff</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotates informally</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Ten of the 40 CACs surveyed have paid MDT Coordinators, 9 of whom actually run the meetings. One MDT Coordinator does only the set-up and note taking while a prosecutor presides. Several CACs commented that their MDT Coordinator positions are very stressful, either because the Coordinator must chase down cases from all over the system or because the meetings are very contentious. In 10 CACs (25%) the responsibility for leadership rotates between two people. And one CAC rotates the meeting-leader role informally month-by-month throughout the year. The effectiveness of leadership and facilitation by various professionals is a ripe area for further research.

JOINT INTERDISCIPLINARY DECISIONS AT THE CASE REVIEW

Almost half of the survey respondents indicated that they actually make decisions as a team. Another 20% answered a qualified yes. 31% reported that their teams style recommendations together or just report various facts to each other, while the prosecutor or each agency makes the real decisions separately (see Figure G).

SUCCESSES AND PROBLEMS

This survey asked CACs to describe both the successes and the problems of their case review system. About 40% of the programs described only successes, and 8 of those CACs were highly enthusiastic about the effectiveness of their teams. 25% of the respondents reported both positive and negative factors. 34% gave completely negative
comments about their case review process. In no way was this an objective measure of team functioning, but sought to capture the mood of the CAC directors about their current case review processes as well as evaluative specifics.

While it is clear that developing and maintaining a productive case review process requires diligence and adaptation, many CACs still report struggle. But many have learned to run consistent and fruitful case reviews, and have improved their community response to child abuse via this process (See Figure H). These organizations have directly confronted and solved the most common problems with case reviews around the country: encouraging the right people to show up consistently; bringing forward the right information; creating a pleasant and collaborative meeting tone; right-sizing the case review load; reframing the work as system improvement; and really making decisions together as a team.

**SOME PLEASING CAC STORIES:**

“On one recent case, involving two children who witnessed a double homicide, our team members showed, once again, just how competent, compassionate, caring and knowledgeable they are as human beings and professionals. I’m very proud to be part of their team.”

“We have been reviewing cases since 1989. Our (prosecutor) has issued a directive to law enforcement that cases have to come through the CAC and law enforcement must attend the staffing or they will not receive charges on their cases. (prosecutor has been issuing charges on 88-90% of “indicated” cases). At the staffings, protective orders have been issued as well as criminal warrants…. The transition to the CAC model was considered an enhancement to child protection and prosecution and did not have to face a period of organization and trust building.”

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**FIGURE G: JOINT INTERDISCIPLINARY DECISIONS AT THE CASE REVIEW**

<table>
<thead>
<tr>
<th>Total CACs = 39</th>
<th>Yes</th>
<th>Some, but qualified (sometimes, rarely, etc.)</th>
<th>No, only making recommendations or reporting out</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19</td>
<td>8 (20%)</td>
<td>12 (31%)</td>
</tr>
<tr>
<td>(49%)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FIGURE H: SUCCESSES AND PROBLEMS**

<table>
<thead>
<tr>
<th>Successes</th>
<th>CACs</th>
<th>Problems</th>
<th>CACs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team works well together, shares info, provides valuable support and camaraderie</td>
<td>15</td>
<td>Lack of attendance</td>
<td>16</td>
</tr>
<tr>
<td>Case Review has improved decision-making and improved community response to children/families</td>
<td>7</td>
<td>Members don’t bring important case information or it isn’t valued</td>
<td>5</td>
</tr>
<tr>
<td>Team has identified areas for system change</td>
<td>2</td>
<td>Conflict, lack of trust, turf issues in meetings</td>
<td>5</td>
</tr>
<tr>
<td>Case Review process has increased agency buy-in</td>
<td>1</td>
<td>Too many cases, too little time to review</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Case review meeting tedious and boring – just a roll call of cases</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hard to integrate new members</td>
<td>2</td>
</tr>
</tbody>
</table>