

Child Protection Accountability Commission

Training Committee

MDT Case Review Workgroup

November 27, 2018

10:00 a.m. -12:00 p.m.

Department of Justice

102 W. Water Street, Dover DE 19901

MINUTES

ATTENDEES:

Det. Bradley Cordrey	Georgetown Police Department
Dr. Stephanie Deutsch	Nemours Alfred I. duPont Hospital for Children
Jennifer Donahue, Esq., Co-Chair	Office of the Investigation Coordinator
Diana Fraker	Division of Family Services
Diane Klecan	Children's Advocacy Center (via Skype)
James Kriner, Esq., Co-Chair	Department of Justice
Sgt. James Leonard	New Castle County Police Department
Det. Joseph Miller	Wilmington Police Department
Stacy Northam-Smith	Division of Family Services
Jen Perry	Office of the Investigation Coordinator
Randall Williams	Child Advocacy Center
Lt. Gerald Windish	Delaware State Police
Sgt. Adam Wright,	Delaware State Police
Shelley Yingling	Division of Family Services

I. Welcome and Introductions

Jen Donahue, Esq. opened the meeting and welcomed attendees.

II. Review of Minutes from 5/16/18

A motion was made by Jim Kriner to approve the minutes as amended, and seconded by Shelley Yingling. There were 2 abstentions. All others voted in favor.

III. Input on the Implementation of Case Review Protocol

The workgroup discussed implementation of administrative closures and special case reviews. Det. Cordrey shared that the first special case review was held in Sussex County. He stated that he felt that it worked well, as the team came together to discuss the case in detail and created and implemented a plan to move forward for the family. Sgt. Leonard stated the reviews have improved with having the direct participants present. He stated that he felt that led to a better plan, and that it holds team members accountable as well as providing more structure and better timeframes for cases.

Jim Kriner, Esq. discussed that he anticipates the administrative closure forms will lead to more closures to the MDT Case Review process instead of allowing cases to linger. Diane Klecan added that the administrative closure forms are being forwarded to Jim Kriner and Jen Donahue for review. The only concern raised by the team was whether or not to utilize the form for closures at the table during the case review itself. Members indicated that it is the consensus that the standard case review numbers

are still high, and that more cases should have been closed utilizing the form prior to the case review. It is suspected that some members may be hesitant to utilize the form as it may lead to confusion that the civil and/or criminal investigations are closed. Jen Donahue suggested making sure that this piece is clarified to all team members. Diane added that the decision about whether or not the case remains on the case review schedule is MDT driven. All agreed that facilitators will start phrasing their questions differently, from “Are we closing this case?” to “What are we doing with this case?”

Lt. Windish indicated that he believes that the team needs to be cautious about quick case closures to the MDT Case Review process when tasks still need to be completed for the investigation. Randy Williams indicated that the CAC facilitator needs to continue to ask members if the case will remain on the MDT Case Review calendar. Randy expressed that he does not want the review process to be a “tickler” for any agency, as then the MDT Case Review process is not being utilized correctly. Jen Donahue indicated that in reality the MDT Case Review process is a tickler system, but as the process grows it will improve. Jim Kriner agreed with the fact that the case review is a tickler system, as it is the only way to keep track of the multitude of cases.

Further, Randy Williams mentioned that participation by MDT members in the MDT Case Review process has been good. Jen Donahue added that the Office of the Investigation Coordinator has had several reach outs to local jurisdictions encouraging their participation in the MDT Case Review process, which seems to have had a positive effect. Diane Klecan indicated that she believes participation and conversations about next steps have improved.

Dr. Deutsch discussed the involvement of the medical team in the MDT Case Review process. She indicated that their team has faced some barriers with her maternity leave as well as staffing issues. The medical team has realized that conference calls/Web X are not ideal, so they are trying to work around utilizing those methods. Dr. Deutsch received feedback from the forensic nurses that filled in during her leave. They expressed that they felt that some of the content was not as meaningful as it needed to be. They also feel that case review should not be the first time that a medical examination should be discussed. She encouraged the group to consider offering medical evaluations to all families for any abuse reason regardless of disclosure. Dr. Deutsch indicated that if this is offered it would streamline the conversations about the medical examinations during the review process. Dr. Deutsch shared that the medical team is basing their decisions regarding whether or not a medical examination is needed on the nature of the allegations, identifiable risk factors of the suspect, and the disclosure. She recognizes that if the recommendations for a medical examination are delayed that the family may not feel that the evaluation is as valuable, and may hesitate to follow up on recommendation. There was also discussion regarding the appropriateness of using the emergency room for non-acute issues. Dr. Deutsch indicated that outpatient facilities are most appropriate for non-acute concerns. Dr. Deutsch shared that a decision has been made that outside of injury, pregnancy, or STI, a case will not be kept open for case review for medical only.

In addition, Randy stated that implementation of the CPAC Guidelines for the Child Abuse Medical Response have been delayed due to resource limitations. Dr. Deutsch shared that a nurse practitioner has been hired in New Castle County for non-acute abuse evaluations. The nurse practitioner will also attend New Castle County case review meetings in person. There was further discussion in regards to the hiring of a nurse practitioner in Milford for the lower counties. This position has been open for two years, but it has not been filled. As a result, A.I. duPont Hospital may lose the grant funding. Dr. Deutsch shared that recruitment has been ongoing, but someone to meet the qualifications has not been located. In addition, a forensic nurse needs to be supervised by a medical doctor, and a nurse practitioner is not an independent practitioner unless he or she is licensed to see patients independently.

Randy Williams suggested that maybe a recommendation needed to be made to CPAC to reconvene the Child Abuse Medical Response Committee. Jen Donahue agreed to follow up with Tania Culley, the CPAC Executive Director, to discuss the handling of non-acute abuse cases and medical examinations. The workgroup also recommended including Kathy Hudson from Nanticoke or Cheri Will from Beebe in the downstate case reviews to provide medical input, but the team is unsure if that would be too difficult given staffing issues for the hospitals. Jen Donahue will reach out to Kathy and Cheri about their involvement in the MDT Case Review process.

Lt. Windish indicated that he believes medical examinations are getting done if the abuse incident occurred within 120-hour timeframe. After that timeframe, law enforcement agencies are still recommending a medical examination to the family. Sgt. Leonard agreed and added that even if the disclosure is a late disclosure they are making the recommendation. Jim Kriner asked the group if part of the discussion at the forensic interview table should be whether or not a medical examination has occurred and where. Diane Fraker asked if it could be added to the paperwork disseminated to the team for reviews as a reminder to have this information for reviews. Randy asked the workgroup if the CAC staff are proactively discussing medical evaluations at the table, and Diane Klecan indicated that they should be discussing it throughout the forensic interview process. Randy and Diane agreed to review the current CAC forms being used for intakes, post-team meetings and case review meetings to ensure that information regarding medical examinations are documented.

IV. MDT & Participation of Child Attorneys

Jen Donahue brought up the discussion regarding the participation of child attorneys in the MDT Case Review process, specifically special case reviews. Jim Kriner was concerned that child attorneys would have access to confidential information regarding the criminal investigations that they could not share with their client, which may bring on ethical concerns. He feels that it would also open the reviews to being subjected to discovery through a subpoena. However, similar to the victim's family, a separate meeting could be scheduled to share specific information with the child attorney, but not the details of the pending criminal and civil investigations. The workgroup as a whole

did not feel that it was appropriate for child attorneys to attend special case reviews. Randy Williams indicated that he feels that there needs to be a separate process developed on how to share information with the child attorneys. However, further discussion should occur between Tania Culley and the Attorney General.

In addition, the workgroup discussed documentation of special case reviews, particularly by the Division of Family Services. It was noted that anything documented in the DFS record is subject to discovery by parties in a civil case, including potentially the suspects if they are the parents. Due to this concern, Jim Kriner stated that a new confidentiality agreement would need to be drafted to address how special case reviews will be documented. Jim and Jen Donahue will review the current confidentiality agreements and suggest changes as appropriate. Sgt. Leonard expressed that he feels that invitees to special case reviews should be limited to fact finders, and that there is a difference between fact finders and advocates. Lt. Windish expressed that he feels that the core MDT members have protocols in place to protect the confidentiality of the investigation; however, others may not have the same protections. The group agreed that further discussion is needed on who is invited to case reviews and how reviews are scheduled.

At the next meeting, the workgroup will consider involving a mental health provider in the MDT Case Review process. Randy agreed to reach out to the Director of the Division of Prevention and Behavioral Health Services, Robert Dunleavy, and Cabinet Secretary Josette Manning to discuss DPBH participation in the MDT Case Review process.

V. Next Steps

Jen Donahue will send out an email to the workgroup outlining the next steps.

VI. Next Meeting Date

The next meeting is scheduled for January 22, 2019 at 10 AM at the Department of Justice office in Dover.