INTRODUCTION

The intent of this guide is to help you expand and enhance your Victim Advocacy services. It was developed by the Regional Children’s Advocacy Centers, in collaboration with NCA and the National Children’s Advocacy Center (NCAC). The hope is that this document will help you meet the standard for accreditation, and will help your staff and MDT provide specialized victim advocacy services to the children and families in your community. This is one tool to assist in your development. Other ideas can be found within the document Putting Standards Into Practice: A Guide for Implementing the 2017 Standards for Accredited Members.

Definition: The standard is defined by NCA as: Victim support and advocacy services are provided to all CAC clients and their caregivers as part of the Multidisciplinary Team response (National Children’s Alliance • Standards for Accredited Members • 2017 Edition). The goal is for the CAC and MDT partners to work together to ensure specialized victim advocacy and support services to children and their non-offending caregivers. This includes a process for seamless transition from CAC advocate to community agency advocate (if any) to prosecutor’s office advocate.

Content included in this guide:
- Initial and ongoing training requirements for NCA standards;
- In person and Online training available;
- To do list for creating Victim Advocacy Protocol
- Draft Protocol
- Resources
- Victim/Family Advocate Checklist (draft template)
- Victim Advocacy Linkage Agreement (draft template)
- Regional and NCA contact information

INITIAL TRAINING REQUIREMENTS

The NCA standards for accreditation requires that Victim Advocates have a minimum of 24 hours of training on the following topics.

1. Dynamics of abuse
2. Trauma-informed services
3. Crisis assessment and intervention
4. Risk assessment and safety planning
5. Professional ethics and boundaries
6. Understanding the coordinated multidisciplinary response
7. Assistance in accessing/obtaining victims’ rights as outlined by law
8. Court education, support and accompaniment
9. Assistance with access to treatment and other services, including protective orders, housing, public assistance, domestic violence intervention, transportation, financial assistance, interpreters, among others as determined for individual clients.

(National Children’s Alliance • Standards for Accredited Members • 2017 Edition)

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This initial training can be obtained and documented from a variety of sources, either in person or online. If training has been conducted in a more informal way, it is required that an agenda and a list of topics be outlined and documented for submission with the application for NCA accreditation. If you have multiple advocates working with the CAC (CAC Advocate, Community Advocate and Prosecutor Advocate), each Advocate must have the 24 hours of initial training (with documentation).

### In Person Training

| Training for Advocates Working in a Child Advocacy Center | 3-day training in Duluth, MN, various dates | First Witness CAC training |
| Victim Advocacy in the Child Advocacy Center | 3-day training in Huntsville, AL, various dates | NCAC Victim Advocacy Training |
| | Customized On-Location Available by Request | |
| Statewide Victim Advocate Academy | Offered in some states | Check with your state victim service agency |

### Online Training

| Victim Assistance Training | 40 hours Foundational on-demand Web-based victim assistance training program | OVC VAT training |
| NOVA Victim Assistance Academy | 40 hours Meets nine consecutive Wednesdays, in a live, distance learning classroom. | NOVA Victim Assistance Academy |
| EduNet 2.0 Webinar Series | 2 hours Webinars Monthly webinars on a variety of topics featuring experts on child abuse related topics | MRCAC webinars |

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NCAC Virtual Training Center
Free online trainings on a variety of topics featuring experts on child abuse related topics
Live and recorded available
NCAC online trainings

Child Victim Web
https://www.tdcj.state.tx.us/php/prod/tvatacademy/index.html
A multimedia, online training resource designed for professionals from all disciplines who work with children and adolescents who have experienced or witnessed serious violence. (free)
Child Victim Web

**ONGOING TRAINING**

Individuals who provide victim advocacy services for children and families at the CAC must demonstrate participation (and documentation) of ongoing education in the field of victim advocacy and child maltreatment consisting of a minimum of 8 contact hours every 2 years. This ongoing training may be either in person or online. Victim Advocates can meet the standard by one or more of the following suggestions:

1. Victim Advocates have attended statewide, regional or national child abuse conference/training, including state Victim Advocate Academy;
2. Victim Advocates have completed free MRCAC webinars on a variety of child abuse topics;
3. Victim Advocates have completed free NCAC online trainings;
4. Victim Advocates have completed free OVC VAT training;
5. Victim Advocates have completed free Child Victim Web

**TO DO LIST FOR CAC VICTIM ADVOCACY PROTOCOL**

1. Identify Statewide Victim Advocacy Resources
2. Identify Statewide Victim Bill of Rights
3. Identify training needs for ongoing and new Advocates
4. Review/update Child/Victim Checklist to fit to your CAC needs
5. Identify topics to be outlined in your Protocol
6. Review draft protocol with MDT and evaluate annually

**DRAFT PROTOCOL**

CACs should have a written protocol that outlines the constellation of services provided by a family/victim advocate. The protocol should outline the different advocates (CAC Advocate, Sexual Assault Center Advocate, Prosecutor Advocate) that may be involved with a case and their roles and responsibilities. Please note this is intended as a SAMPLE and should be carefully reviewed by the CAC Board of Directors or other governing entity

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so that it can be revised appropriately to accurately reflect YOUR organization, its capacity and service provision.

Victim/Family Advocacy services are provided at _____________________________ through the initial investigation, follow up services, and prosecution (if any) for all child abuse cases. Advocacy services are provided to all victims and non-offending family members regardless of their financial background or ability to pay. Children and families in crisis need assistance in navigating the multiple systems involved in the CAC response such as law enforcement, child protection, prosecution, medical and mental health services. Specialized victim support and advocacy will reduce trauma to children, improve outcomes of investigations and prosecutions, and provide critical support and crisis intervention to the non-offending parent/guardian.

**Initial and Ongoing Training:**

Victim/Family Advocates will receive on-site training by ____________. Additional training is provided through various partnering agencies including ________________, along with online trainings available through Midwest Regional CAC (mrcac.org), National Children’s Advocacy Center (nationalcac.org), Northeast Regional CAC (nrcac.org) and National Children’s Alliance (http://www.nationalchildrensalliance.org). The Victim Advocacy Protocol is based on the Victim Bill of Rights, ____________ General Laws, Chapter ________ which provides for rights and services to crime victims and survivors within the criminal justice system. A copy of ____________ General Laws chapter _________ is attached.

**Services Provided:**

(a Victim/Family Advocate checklist is available to document these services):

1. Crisis assessment and intervention, risk assessment and safety planning and support for children and family members at all stages of involvement with CAC,
2. Assessment of individual needs, cultural considerations for child/family and ensure those needs are addressed,
3. Presence at CAC during the forensic interview to participate in information sharing, inform and support family about the coordinated, multidisciplinary response, and assess needs of child and non-offending caregiver,
4. Provision of education and access to victim’s rights and crime victim’s compensation,
5. Assistance in procuring concrete services (housing, protective orders, domestic violence intervention, food, transportation, public assistance etc.),
6. Provision of referrals for trauma focused, evidence – supported mental health and specialized medical treatment, if not provided at the CAC.
7. Access to transportation to interviews, court, treatment and other case-related meetings,
8. Engagement in the child’s/family’s response regarding participation in the investigation/prosecution,
9. Participation in case review to: communicate and discuss the unique needs of the child and family and associated support services planning; ensure the seamless coordination of services; and, ensure the child and family’s concerns are heard and addressed,

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10. Provision of updates to the family on case status, continuances, dispositions, sentencing, inmate status notification (including offender release from custody),
12. Coordinated case management meetings with all individuals providing victim advocacy services. (National Children’s Alliance • Standards for Accredited Members • 2017 Edition)

**Role at the Forensic Interview:**

A Victim/Family Advocate is present at the time of the forensic interview to meet with the MDT team during the pre-meeting to discuss and share information with the MDT; the advocate meets with the caregiver during the forensic interview to provide information and support, along with a folder of information for the caregiver that includes a brochure about the visit to the CAC, including the forensic interview, medical exam options, mental health services, Victim Compensation information, names and contact information of all team members present, referrals for follow up services and any other appropriate materials for non-offending parents. The Advocate will meet with the team for the post-meeting with the MDT to discuss the outcome of the interview and the next steps, before bringing in the caregiver for the post-meeting. Ideally, other CAC staff/volunteer will sit with the child during this time.

**Role at Case Review:**

A Victim/Family Advocate is present at Case Review to discuss the needs of the child and family and how things are going in the aftermath of the disclosure and forensic interview. The Advocate also reports on referrals made and services in place. The Advocate also discusses any concerns of the child/family about services or potential prosecution.

**Multiple Advocates**

More than one victim advocate may perform these functions at different points throughout a case, requiring continuity and consistency in service delivery. Several examples are:

- The CAC Advocate may work with the child and family at the time of the forensic interview to provide information, support, crisis intervention, referrals and follow up calls/meetings.
- The CAC Advocate may refer the child/family to a sexual assault advocate from a community agency.
- The sexual assault advocate may continue with advocacy and crisis intervention for a period of time and then transition to the prosecutor advocate if the case proceeds to court.
- The prosecutor advocate is responsible for provision of updates to the family on case status, continuances, dispositions, sentencing, inmate status notification (including offender release from custody), provision of court education & courthouse/courtroom tours, support, and court accompaniment.

**Additional notes:**

- CACs use different terms for this role: victim advocate, family advocate, family services facilitator, family support services etc. In some CACs the Advocate will remain the same though the March 2018
● Victim Advocacy protocol must outline the array of advocacy services, using linkage agreements if multiple agencies. Protocol also must outline how follow up services are documented throughout the life of the case.

● Some Victim/Family Advocates have multiple roles throughout the initial phases. Please outline in the Victim Advocacy section of the protocol if Advocates have other duties, such as intake, case tracking, facilitating case review, etc.

● NCA site reviewers will look to ensure advocacy practices match what is outlined in the protocols and practices.

RESOURCES

Victim Rights Laws by State
VictimLaw is a searchable database of victims’ rights legal provisions including federal, state, and territorial statutes, tribal laws, state constitutional amendments, court rules, administrative code provisions, and summaries of related court decisions and attorney general opinions.

Confidentiality Laws by State
A pdf document listing out a Summary of U.S. State Laws Related to Advocate Confidentiality.

The Advocates Guide for Working with Parents of Children who have been Sexually Abused
This guide is designed for sexual assault program advocates working with non-offending parents and/or caregivers of children who have experienced sexual assault. The suggestions and strategies are intended for use with children under the age of 13.

The National Child Traumatic Stress Network
The National Child Traumatic Stress Network (NCTSN) brings a singular and comprehensive focus to childhood trauma. NCTSN’s collaboration of frontline providers, researchers, and families is committed to raising the standard of care while increasing access to services. Combining knowledge of child development, expertise in the full range of child traumatic experiences, and dedication to evidence-based practices, the NCTSN changes the course of children’s lives by changing the course of their care.

National Children's Advocacy, © 2016. Victim Advocacy: A Selected Bibliography
This bibliography was prepared by the research librarian of NCAC Child Abuse Library Online (CALiO™) in consultation with the NCAC forensic interviewers for research and education, and for the convenience of our readers.

The Field Guide to Family Advocacy
Field Guide to Family Advocacy, a resource developed for Family Advocates at Children’s Advocacy Centers (CACs) to help build a knowledge foundation for this central component of the multidisciplinary team (MDT) response, promote reflections on practical applications of that knowledge, and serve as a vehicle for supervisory or peer conversations about the essential elements of advocacy.

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VICTIM/FAMILY ADVOCATE CHECKLIST

This sample Victim/Family Advocate Checklist was created to serve as a resource for CACs. Please note this is intended as a SAMPLE and should be carefully reviewed by the CAC Board of Directors or other governing entity so that it can be revised appropriately to accurately reflect YOUR organization and advocacy services provided.

<table>
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<tr>
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Referral reviewed prior to forensic interview to assess individual needs, cultural considerations for child/family during the interview;

Present at the CAC during the forensic interview to participate in information sharing with the MDT before/after the interview;

Meeting with family during/after the forensic interview to support parent/guardian, provide education, information and referrals about:

- Dynamics of child abuse;
- Information about the MDT response, investigation and follow up;
- Information about crime victim’s compensation;
- Referrals for trauma focused, evidence-supported mental health and specialized medical treatment, if not provided at the CAC;
- Overview of safety planning including information about protective orders and domestic violence services;
- Referrals to other services needed (housing, food, transportation, public assistance, etc);

Documentation of above referrals made;

Discussion of family support systems available to the parent/guardian/family;

Consent for Interview and/or information releases reviewed and signed;

Parent folder of information was explained to the parent/guardian, including names and contact information for the MDT team members;

OMS was offered to the parent/guardian at the completion of their visit to the CAC;

All referral information and narrative of first visit to the CAC was entered into NCATrak as soon as possible;

Participation in case review to: communicate and discuss the unique needs of the child and family and associated support services planning; ensure the seamless coordination of services; and, ensure the child and family’s concerns are heard and addressed;

Coordinated case management meetings with any and all individuals providing victim advocacy services to ensure seamless transition to court advocate or other;

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Coordinated access to transportation to interviews, court, treatment and other case-related meetings;

Provided updates to the family on case status, continuances, dispositions, sentencing, inmate status notification (including offender release from custody);

Provided ongoing support and/or referrals for caregivers throughout the case;

Assessed the child’s/family’s response to participation in the prosecution of the case;

Provided court education & courthouse/courtroom tours, support, and court accompaniment;

All notes, contacts, attempted contacts, referrals, and outcomes are documented in NCATrak (or other tracking system) and the file.

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LINKAGE AGREEMENT

___________ Children’s Advocacy Center (CAC) and _________________ (victim advocacy provider) agree to collaboratively provide victim advocacy services to child victims of sexual and severe physical abuse for all children and their non-offending families. This linkage agreement outlines the following:

1. CAC staff _______________ is responsible for notifying victim advocacy provider ________________of the case information, time & location of the forensic interview.
2. CAC staff ________________is responsible for making the initial referral to the non-offending parent/guardian for victim advocacy services for the child and non-offending family members.
3. The victim advocacy provider agrees to prioritize CAC referrals by placing these referrals at the top of waiting lists when they exist, and when no waiting list exists efforts will be made to schedule an appointment within a reasonable amount of time.
4. The victim advocacy provider agrees to protect confidentiality of their patients as outlined in their own agency policies and procedures.
5. The victim advocacy provider confirms that the advocates have the following 24 hour training
   ● Dynamics of abuse
   ● Trauma-informed services
   ● Crisis assessment and intervention
   ● Risk assessment and safety planning
   ● Professional ethics and boundaries
   ● Understanding the coordinated multidisciplinary response
   ● Assistance in accessing/obtaining victims’ rights as outlined by law
   ● Court education, support and accompaniment
   ● Assistance with access to treatment and other services, including protective orders, housing, public assistance, domestic violence intervention, transportation, financial assistance, interpreters, among others as determined for individual clients. (National Children’s Alliance • Standards for Accredited Members • 2017 Edition)
6. The victim advocacy provider confirms that the advocates providing treatment to child victims of sexual and physical abuse and their families complete continuing education in the field of child abuse consisting of a minimum of 8 contact hours every two years
7. The victim advocacy provider confirms the following constellation of services are provided:
   ● Crisis assessment and intervention, risk assessment and safety planning and support for children and family members at all stages of involvement with CAC,
   ● Assessment of individual needs, cultural considerations for child/family and ensure those needs are addressed,
   ● Presence at CAC during the forensic interview to participate in information sharing, inform and support family about the coordinated, multidisciplinary response, and assess needs of child and non-offending caregiver,
   ● Provision of education and access to victim’s rights and crime victim’s compensation,
   ● Assistance in procuring concrete services (housing, protective orders, domestic violence intervention, food, transportation, public assistance etc.),

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● Provision of referrals for trauma focused, evidence–supported mental health and specialized medical treatment, if not provided at the CAC.
● Access to transportation to interviews, court, treatment and other case-related meetings,
● Engagement in the child’s/family’s response regarding participation in the investigation/prosecution,
● Participation in case review to: communicate and discuss the unique needs of the child and family and associated support services planning; ensure the seamless coordination of services; and, ensure the child and family’s concerns are heard and addressed,
● Provision of updates to the family on case status, continuances, dispositions, sentencing, inmate status notification (including offender release from custody),
● Provision of court education & courthouse/courtroom tours, support, and court accompaniment.
● Coordinated case management meetings with all individuals providing victim advocacy services.

(National Children’s Alliance • Standards for Accredited Members • 2017 Edition)

8. The victim advocacy provider confirms that advocacy services are available and accessible to all CAC clients regardless of ability to pay
9. The CAC will work with the victim advocacy provider to provide information about victim compensation.
10. As mandated reporters, the victim advocacy providers agree to report all suspected cases of child sexual and severe physical abuse to state/local office of child protection.
11. The CAC staff is responsible for notifying the victim advocacy provider or designee of regularly scheduled Case Review meetings. The victim advocacy provider or designee shall attend scheduled Case Review in order to provide consultation, expertise and input on victim advocacy issues to the MDT and to discuss (or not discuss) specific case information.

The CAC believes in protecting the client’s right to confidentiality. To that end the CAC and __________________________ agree that all victim advocacy records are the property of the provider, records are maintained inside the victim advocacy provider’s offices, and records can only be accessed via authorized release of information signed by the child’s parent/guardian or by court order.

________________________________________  __________  __________________________  ______
Children’s Advocacy Center  Date  Victim Advocacy Provider  Date

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### Contact Information for additional support from Regional CACs

<table>
<thead>
<tr>
<th>Regional CAC</th>
<th>Address</th>
<th>Phone</th>
<th>Website</th>
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<tbody>
<tr>
<td>Midwest Regional Children’s Advocacy Center</td>
<td>5901 Lincoln Drive, Edina, MN 55436</td>
<td>952-994-5277</td>
<td><a href="http://www.mrcac.org">www.mrcac.org</a></td>
</tr>
<tr>
<td>Northeast Regional Children’s Advocacy Center</td>
<td>300 East Hunting Park Ave, Philadelphia, PA 19124</td>
<td>(215) 387-9500</td>
<td><a href="http://www.nrcac.org">www.nrcac.org</a></td>
</tr>
<tr>
<td>Western Regional Children’s Advocacy Center</td>
<td>Chadwick Center for Children and Families, Rady Children’s Hospital San Diego. MC 5016, 3020 Children’s Way, San Diego 92123</td>
<td>858-966-1700 ex 6581</td>
<td><a href="http://www.westernregionalcac.org">www.westernregionalcac.org</a></td>
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### Contact Information for NCA support

<table>
<thead>
<tr>
<th>Contact</th>
<th>Phone</th>
<th>Email</th>
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<tbody>
<tr>
<td>Dave Betz</td>
<td>202-548-0090 ext 111</td>
<td><a href="mailto:dbetz@nca-online.org">dbetz@nca-online.org</a></td>
</tr>
<tr>
<td>Alyson McKenzie</td>
<td>202-548-0090 ext 210</td>
<td><a href="mailto:amackenzie@nca-online.org">amackenzie@nca-online.org</a></td>
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