



NATIONAL CHILDREN'S ALLIANCE

## National Children's Alliance Standards for Accreditation

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NATIONAL CHILDREN'S ALLIANCE

### NCA Accreditation Standards Revision Project

**WHY?**  
Evidence-supported - research and best practice evolves over time

- Last revised in 2010/11
- NCA Standards are re-evaluated for revision approximately each 5-6 years.

**HOW?**  
The current revision process involved 75+ CAC and MDT professionals, as well as discipline experts from across the country.

- 5 subject matter expert Task Forces - each worked on 1-3 standards using 2013 updated (NCAC) Annotated Bibliography as their guide.
- Proposed revisions were reviewed by Regional staff, NCA Board of Directors, 20 member Reader's Pool prior to final Board approval.

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NATIONAL CHILDREN'S ALLIANCE

### NCA National Standards for Accreditation

- Multidisciplinary Teams
- Cultural Competency and Diversity
- Forensic Interviews
- Victim Support and Advocacy
- Medical Evaluation
- Mental Health
- Case Review
- Case Tracking
- Organizational Capacity
- Child Focused Setting

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**Accreditation Scoring Considerations**  
**Structure for the Current Standards**

**Essential Components**

- Each of the 10 standards has essential components which are mandatory and must be met to be recommended for accreditation.
- These are scored on a pass or fail basis.

**Rated Criteria**

- Each standard has rated criteria which is rated by the quality of the manner in which it is met.
- These are scored on a 2, 1, or 0 point scale. At least 50% of the rated criteria within each standard must be met.
- Any Site Review where an Essential Component is not met, or if the total score of Rated Criteria within a given standard is below 50%, the CAC is recommended to the BOD as "Pending Improvement" - with 12 months to make corrections.

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**Accreditation Scoring Considerations**  
**Structure for the Revised Standards**

- The 10 existing standards (categories) will remain the same.
- All components **will be Essential Components** and must be met by a CAC to be considered for Accreditation.
- All existing Rated Criteria has either been removed or revised to an Essential Component.
- Revisions have removed those areas within the standards that were found to be ambiguous, redundant, unclearly measurable, and/or not supported by evidence-based practice and research.
- Revisions have separated written requirements from practice requirements.
- Scoring documents will provide the reviewer with objective/measurable strategies to apply to each component as they observe the CACs practice and review their written documentation.

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**Multidisciplinary Team Standard**

**A multidisciplinary team for response to child abuse allegations includes representation from the following:**

- Law Enforcement
- Child Protective Services
- Prosecution
- Medical
- Mental Health
- Victim Advocacy
- Children's Advocacy Center Staff

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### Multidisciplinary Team Standard

**Essential Components**

- Written Interagency Agreements signed by all MDT partners.
- New Essential - Written Protocols addressing roles & responsibilities of each discipline.**
- MDT members and CAC staff involved in all investigations/ interventions.
- Written documents addressing information sharing among all MDT members and CAC staff.
- New Essential - MDT members participate in effective information sharing**
- New Essential Component - Opportunities for MDT feedback regarding policies and procedures. (previously rated)**
- New Essential Component - Ongoing/relevant training opportunities - cross-discipline. (previously rated)**

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### Cultural Competency and Diversity Standard

The Child Advocacy Center provides culturally competent services for all CAC clients throughout the life of the case.

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### Cultural Competency Standard

**Essential Components**

- New Essential - CAC conducts a community assessment, minimally every 3 yrs. (previous - Cultural competency plan that includes community assessment, goals, and strategies)**
- Provisions are made for non-English speaking and deaf or hard of hearing children and family members throughout the investigation, intervention, case management process.
- New Essential- services are accessible and tailored to meet special needs of children and family. (previous -All services are provided in a manner that addresses culture and development)**

**Previous Rated Criteria**

- Community Outreach to underserved populations. **Removed, but specifically addressed in the above community assessment.**
- New Essential - CAC Recruits staff, volunteers and BOD members reflective of community demographics.**
- Cultural Competency plan has been implemented. **Removed - incorporated into the community assessment requirement**

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## Forensic Interviews Standard

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Forensic interviews are conducted in a manner that is legally sound, of a neutral, fact-finding nature, and are coordinated to avoid duplicative interviewing.

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## Forensic Interview Standard

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**Essential Components**

- Forensic interviewers have specialized training in conducting forensic interviews. **Minimum 32 hrs instruction and practice - curriculum must be included on NCA's approved list of nationally or state recognized F/I trainings or submitted with accreditation application.**
- **New Essential - ongoing training 8 hrs every 2 yrs**
- **Written documents describe the forensic interview process and interview procedures. Now contains 12 specific requirements.**

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## Forensic Interview Standard

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- **MDT members with investigative responsibility are present. New language specifies that MDT members with investigative responsibility observe and participate in F/I.**
- **Forensic interviews are conducted at the CAC. New language specifies minimum 75% of cases meeting CAC acceptance criteria.**
- **New Essential - Individuals who conduct F/Is at the CAC must participate in structured peer review at least 2 times per year. (previously rated)**
- **New Essential - CAC coordinates information gathering to avoid duplication. (previously rated)**

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### Victim Support and Advocacy Standard

Victim support and advocacy services are provided to all CAC clients and their caregivers as part of the multidisciplinary team response.

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### Victim Support & Advocacy Standard

#### Essential Components

- **New Essential** - Comprehensive, coordinated victim support and advocacy services provided by designated individual with specialized training. (Advocates must have minimum 24hrs instruction with list of required topics)
- **New Essential** - 8 hrs of ongoing training every 2 years.
- **New Essential** - Victim Advocates serving CAC clients must provide (lists a constellation of 12 specific advocacy services that must be provided).

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### Victim Support & Advocacy Standard

- **New Essential** - Active outreach and follow-up services for caregivers are consistently available. (Previously rated - Procedures in place for initial and ongoing support and advocacy for child and family members)
- Written documents include availability of victim support and advocacy services for all CAC clients - added - throughout the life of the case.

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**Medical Evaluation Standard**

Specialized medical evaluation and treatment services are available to all CAC clients and coordinated with the multidisciplinary team response.

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**Medical Standard**

**Essential Components**

- Medical evaluations are conducted by health care providers with specific training in child sexual abuse. (training & eligibility standards listed)
- Medical professionals providing services to CAC clients must demonstrate continuing education in field of child abuse 8 hrs every 2 yrs.
- **New Essential** - Medical professionals providing services to CAC must demonstrate that 50% of findings deemed abnormal or "diagnostic" of trauma from sexual abuse have undergone expert review.

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**Medical Standard**

- Specialized medical evaluations for the child client are available onsite or through written linkage agreements.
- Specialized medical evaluations are available and accessible to all CAC clients regardless of ability to pay.
- The CAC/MDT's written protocols/guidelines include access to appropriate medical evaluation and treatment for all CAC clients.
- The CAC/MDT's written protocols/guidelines include the circumstances under which a medical evaluation for child sexual abuse is recommended

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**Medical Standard**

- Documentation of medical findings by written record and photo-documentation.
- MDT members and CAC staff are trained regarding the purpose and nature of the medical evaluation for suspected sexual abuse. Designated MDT members and/or CAC staff educate clients and/or caregivers regarding the medical evaluation.
- Findings of the medical evaluation are shared with the MDT in a routine, timely and meaningful manner.

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**Mental Health**

Evidence based, trauma-focused mental health services, designed to meet the unique needs of the children and caregivers are consistently available as part of the multidisciplinary team response.

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**Mental Health Standard**

**Essential Components**

- Mental health services are provided by professionals with pediatric experience and child abuse expertise. *Not changed but specifies evidence-based treatment for trauma training, AND licensed or licensed eligible/ intern requirement.*
- New essential - 8 hrs ongoing training every 2 years (previously rated - Ongoing training and peer review.)*
- Evidence-supported, trauma-focused* mental health services for the child client are consistently available *(adds a list of required included services)*
- Evidence-supported, trauma-focused* mental health services are available and accessible to all CAC clients regardless of ability to pay.

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### Mental Health Standard

- Written documents include access to appropriate **trauma-informed M/H assessment** and treatment for all CAC clients.
- **New Essential**- Written documents include: Role of M/H provider, **to include** sharing of information, **participation in MDT case review**, serving as clinical consultant to **MDT on issues relevant to child trauma, supporting the MDT in monitoring of treatment progress and outcomes.** (Previously rated)

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### Mental Health Standard

- **New Essential** - Written protocols include provisions about sharing of mental health information and how client confidentiality and m/h records are protected in accordance with state and federal laws.
- **New Essential** - must provide supportive services to caregivers. (must address: safety of child; emotional impact of abuse allegations, reduce or eliminate risk of future abuse; issues or distress which allegations may trigger. Services made available on-site or through linkage agreements
- **New Essential** - Clinicians must participate in ongoing supervision-clinical consultation

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### Case Review

A formal process in which multidisciplinary discussion and information sharing regarding the investigation, case status, and services needed by the child and family is to occur on a routine basis.

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**Case Review Standard**

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**Essential Components**

- Written documents include criteria for case review procedures. - including: frequency, attendees, case selection criteria, facilitator, distribution of agenda, procedures for follow-up, location of meeting.
- Case review is conducted on a regularly scheduled basis. *Added at least once per month*
- MDT partner agency representatives actively participate in case review. *Added list of at minimum - L.E, child protective services, prosecution, medical, M/H, V/A, CAC. (previous Rated criteria)*
- Informed decision making process with input from all MDT members.
- Designated individual coordinates and facilitates case review process. *Added -and communicates the recommended follow-up.*

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**Case Tracking Standard**

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Children's Advocacy Centers must develop and implement a system for monitoring case progress and tracking case outcomes for all MDT components.

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**Case Tracking Standard**

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**Essential Components**

- Written documents include tracking case info until final disposition.
- CAC tracks and minimally able to retrieve NCA statistical data. *Adds a specific list of data points.*
- **New Essential Component** - Individual identified to implement case tracking process. (previously rated)
- **New Essential** - MDT partner agencies have access to tracked information and defined in written documents
- **New Essential** - CAC has mechanism for collecting client feedback to inform client service delivery.

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**Organizational Capacity Standard**

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A designated legal entity responsible for program and fiscal operations has been established and implements basic sound administrative policies and procedures.

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**Organizational Capacity Standard**

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**Essential Components**

- CAC is incorporated, non-profit, or government based agency, or a component of such an organization.
- CAC maintains commercial liability, D&O liability insurance - appropriate to its organizational structure.
- CAC has written administrative policies for staff, MDT members, BOD members, volunteers and clients.
- CAC has annual financial audit (budget over \$200K) or financial review Budget under \$200K).
- CAC has personnel for operations and program services. removed
- CAC has and complies with screening policies for staff and volunteers - criminal background/child abuse registry checks.

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**Organizational Capacity Standard**

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- New Essential - CAC has a written succession plan.
- New Essential - CAC has addressed sustainability through the implementation of a strategic plan approved by governing body.
- New Essential - CAC promotes employee well-being by providing training and info regarding the effects of vicarious trauma.
- New Essential- CAC promotes MDT well-being by providing access to training and info on vicarious trauma and building resiliency to MDT members.

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**Child Focused Setting Standard**

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The child-focused setting is comfortable, private, and both physically and psychologically safe for diverse populations of children and their non-offending family members.

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**Child Focused Setting Standard**

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**Essential Components**

- CAC is designated, well-define, task appropriate facility, or contiguous space within an existing structure. *Added: physically & psychologically safe; provides observation or supervision of clients within sight or hearing distance by CAC staff or MDT members; CAC is convenient and accessible; toys and other resources are "childproofed", cleaned and sanitized to be safe as possible.*
- CAC has written policies and procedures that ensure separation of victims and alleged offenders.
- CAC makes reasonable accommodations to make the facility physically accessible.

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**Child Focused Setting Standard**

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- The facility allows for live observation of interviews by MDT members.
- **New Essential Component** - Separate and private areas available for those awaiting services, case consultation, meetings and interviews

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**NCA Accreditation Process**

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Questions??

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**NCA Accreditation Process**

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For any questions regarding the NCA Accreditation process, please contact:

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*Available resources:*  
NCA website: <http://www.nationalchildrensalliance.org/>  
Online Bootcamp: <http://www.mrcac.org/edunet/>  
Regional CACs: WRCAC, MRCAC, SRCAC, NRCAC  
Your State Chapter

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