The fifth meeting of the Jolene’s Law Task Force for the 2015 interim was called to order by Senator Deb Soholt at 10:00 a.m. (CDT) in Legislative Conference Room 1 of the State Capitol, Pierre, South Dakota.

A quorum was determined with the following members answering the roll call: Senator Deb Soholt, Chair; Senators Alan Solano and Jenna Haggar, Representatives Peggy Gibson and Tona Rozum (electronically); Public Members Christine Bisek, Cameron Corey, Daniele Dosch, Ann Larsen, Jolene Loetscher, Hollie Strand, Virgena Wieseler, Colleen Winter, Wendy Kloepnner, Tatewin Means, Dr. Nancy Free, and Angela Lisburg.

Legislative Research Council staff members present included Roxanne Hammond, Legislative Attorney, and Jason Simmons, Senior Fiscal Analyst; and Public Members Cynthia Tobin and Krista Heeren-Graber, the South Dakota Network Against Family Violence and Sexual Assault staff.

NOTE: For purpose of continuity, the following minutes are not necessarily in chronological order. Also, all referenced documents distributed at the meeting can be found on the Department of Health website at http://doh.sd.gov/news/JolenesTaskForce.aspx. This meeting was webcast live. The archived web cast is available at the DOH website.

Approval of Minutes

REPRESENTATIVE PEGGY GIBSON MOVED, SECONDED BY SENATOR JENNA HAGGAR, THAT THE MINUTES OF September 28th, 2015, TASK FORCE MEETING BE APPROVED. The motion prevailed by a voice vote.

Remarks from the Chair

Senator Deb Soholt welcomed the committee to their fifth meeting of 2015 and summarized the last meeting of September 28th, 2015.

Marsy’s Law

Mr. Jason Glodt, State Director for Public Effort, shared his leadership for the non-partisan Marsy’s law. He described the campaign process of collecting statewide signatures to have the issue on the 2016 ballot, and that petitions will soon be submitted to the Secretary of State. Mr. Glodt shared the history behind the law, which is intended to assure rights for victims of
violence. Key to the effort is notification of victims when perpetrators are released from any type of incarceration. South Dakota is one of the weakest in the nation in terms of law for victim’s rights. Should Marsy’s law be successful through a vote of the people, the South Dakota constitution would be amended to include victim’s rights.

Statistics/Benchmark Working Group

Senator Alan Solano (Chair), Cameron Corey, Dr. Nancy Free, Wendy Kloeppner, Angela Lisburg, Tatewin Means, Casey Murschel, Virgena Wieseler

Senator Alan Solano shared the process of data collection to estimate the numbers of reported child sexual abuse in South Dakota. After analyzing the data, it is estimated that close to 1,000 children have reported sexual abuse in three months. He also reviewed the statistics gathered, such as demographic information. There was only one reservation that was included in the data collection. Juvenile perpetrators are not captured in the data. The statistics will be used in a methodology called Probabilistic Matching (Predictive Analysis) to estimate data for a whole year. The next meeting will have results from the Probabilistic Matching (Predictive Analysis). Recommendations will be developed at November 17th, 2015 meeting.

III. Improving Criminal Justice & Child Protection Responses

Angela Lisburg & Casey Murschel (Co-Chairs), Cameron Corey, Wendy Kloeppner, Virgena Wieseler, Hollie Strand

Ms. Casey Murschel described the end goal to improve criminal justice and child protection responses, which includes all children who have experienced abuse, through referral to a Child Advocacy Center (CAC). In addition, all children are responded to with trained multi-disciplinary team (MDT) of professionals (such as law enforcement, doctors, prosecution and mental health). In the nation, some states already require MDT response through statute.

It is proposed that South Dakota develop regional MDT’s with locations that coincide with Child Protection Service (CPS) regions to extent possible. A map of South Dakota service areas 1 – 5 was presented. To accomplish, CPS Regions 1 and 2 along with 6 and 7 would combine to fold into the proposed 1 – 5 MDT Regions. To begin development of a statewide infrastructure of regional MDT’s, a pilot project in the Watertown area was discussed.

The sub-committee will be collaborating with Ms. Tatewin Means and Ms. Daniele Dosch to determine a pilot within one tribal community (Pine Ridge) ass well. The sub-committee has collaborated with Legislative Research Committee to determine best practice statutes when utilizing an MDT, or a Child Advocacy Center (CAC). The statute may need definition of an MDT, CAC or Victim’s Crime Unit. Sample statutory language was discussed.

The sub-committee anticipates using a two-pronged approach to address MDT training and sustainability. The MDT will provide basic training for front line responders to understand what to do and what not to do when responding to a child sexual abuse call. In terms of sustainability, professionals already exist in South Dakota. The responsibilities, mileage, and time commitment will increase for the professionals. In addition, the MDT will need in-person meetings and structure for case debriefing.
The team presented a very comprehensive draft of Regional MDT SVU-CSA (Special Victims Unit – Child Sexual Abuse) Response Teams, Regional MDT Response Team Members, Local MDT SVU-CSA Response Teams and Local MDT SVU-CSA Response Teams Responsibilities.

Ms. Angela Lisburg described the specific roles and responsibilities of a local MDT SVU-CSA Response Team. All Child Advocacy Centers are part of MDT’s. She discussed the process of how an MDT would work with the utilization of the Child Advocacy Center Model and how research has shown vastly improved outcomes with this model.

Ms. Hollie Strand further discussed the Regional MDT SVU-CSA Response Team process. Tasks would include case management, assess and provide training, local MDT oversight, data collection, identifying partners, coordinate interagency, agreements.

Mr. Cameron Corey added that the Regional MDT SVU-CSA team would be the oversight or accountability team. He distinguished between local and regional MDT’s. He described the protocol of elite response to a child sexual abuse call and back-up response if the members of the elite response are not available.

Ms. Tatewin Means inquired if Child Sexual Abuse Kits were going to be used in South Dakota. Dr. Nancy Free and a working group have been looking at the Louisiana Child Sexual Abuse Kits and possibility of implementation in South Dakota.

Roll call for endorsement of the following was conducted:
- Regional MDT SVU-CSA Response Team,
- Regional MDT Response Team Members,
- Local MDT SVU-CSA Response Teams,
- Local MDT SVU-CSA Response Teams Responsibilities,
- Preliminary platform and how dollars are leveraged,
- Child Advocacy Center Model of Response,
- Pilot Project to Begin in Watertown Region,
- 5 Regional MDT Areas Defined.


Third Year of Jolene’s Law Task Force
Senator Deb Soholt

Senator Soholt informed the committee it possibly will continue for another year as an oversight committee if endorsed by Governor Daugaard. Senator Soholt asked the committee to contact her if unable to participate in 2016. Senator Soholt described the different activities that Jolene’s Law Task Force created, and present grants that can be utilized to further efforts.
STOP Violence Against Women Formula Grant Program grant of $79,000 can be used to train law enforcement, and considered ongoing funding. The Improving Criminal Justice & Child Protection Responses Sub-Committee will start assembling a curriculum that would begin 2016. The Sub-Committee will collaborate with University of South Dakota to assure best practices and other agencies can be invited. The money can be leveraged to invite law enforcement and other professionals.

The Unified Judicial System has provided $52,000 for judicial education, which also can become ongoing. State’s Attorneys fit the criteria of judicial education. Senator Soholt will coordinate a meeting with Wendy Kloeppner and Paul Bachand, Executive Director of the South Dakota State Attorney’s Association, and bring a proposal to the November meeting.

The State of South Dakota has learned that there will be an increase in dollars from the Victim of Crime Act (VOCA). There have been preliminary conversations with Department Of Health and Department of Social Services to assemble a planning group to most effectively use this funding to combat child sexual abuse. In 2016, the planning group would set a 10 year plan of implementation. The team will include, but not limited to, the Child Advocacy Center, The South Dakota Network against Family Violence and Sexual Assault, Children’s Home Society, Law Enforcement, and the South Dakota Sheriff’s Association. The goal would be to define specific prevention and response strategies, and begin the pilot in northeast South Dakota. Additionally a pilot will ensue at Pine Ridge, with Kyle as the hub. In 2016, the named stakeholders will come together and move forward the work of Jolene’s Law Task Force to develop a plan, assess statutory changes, discuss a tribal pilot, and begin professional training. Jolene’s Law Task Force will meet to hear progress and assure intended goals are moving forward.

**Child Abuse and Neglect Statute**

Roxanne Hammond, LRC Attorney

Ms. Roxanne Hammond shared the “Mandatory Reporter Laws” document which includes the most relevant child abuse and neglect statutes. At the last meeting, the child centric versus perpetrator centric language was discussed. However, the language may not affect the ability to prosecute or protect children, as the language including “parent, guardian custodian” is for civil matters. If the perpetrator is not parent, they are charged under different codes. The civil side may not need to be changed. Ms. Hammond provided example legislative language from other states on CAC implementation. Some state used a basic definition and/or protocol. She also provided examples used for MDT’s.

Senator Jenna Haggar suggested bringing a bill to have an operational definition of a CAC be put into statute as a platform for further development as the MDT model becomes solidified. Additionally it would keep the subject of child sexual abuse in front of the legislature.

Ms. Wendy Kloeppner added that when CAC’s are defined, there also needs to be discussion of confidential information sharing amongst MDT’s and Regions.

Ms. Hollie Strand added that she recently conducted a training to emergency response personal and learned that they cannot report child abuse or trafficking, but can when elder abuse.

Ms. Roxanne Hammond will determine if front line responders are under emergency response statute, and will bring language to endorse that would operationally define CAC’s, MDT’s and protected sharing provisions.
I. Improving Education and Training

SD School Survey Update

Jolene Loetscher, Dr. Michael Lawler, Dr. Amy Schweinle

Dr. Michael Lawler and Dr. Amy Schweinle joined the meeting via phone conference to discuss the analysis of the school survey that was conducted in 2014.

Dr. Schweinle summarized the findings by discussing the various topics: curriculum, school characteristics, reporting and training, along with concerns and barriers to reporting.

Dr. Michael Lawler shared recommendations if a 2015-2016 survey that could be conducted in all 151 school districts in South Dakota is desired to be developed. A survey of this type would help define strategies for improvement that are based on school needs.

Mr. Cameron Corey added that schools have Title IX coordinators to discuss child sexual abuse.

Senator Solano suggested adding questions to inquire teachers if they were trained on how to complete a mandatory report, and when was the last time they were trained. Other questions may need to measure the level of comfort of applying a child sexual abuse curriculum to schools.

Dr. Schweinle summarized the needs of the committee in the second survey to South Dakota schools. The first focus would be on the logistics of curriculum development within schools. Questions may include what topics that schools are comfortable implementing. The second focus of the survey would be on teachers and mandatory reporting training. A pre and post test may be conducted to determine change in function.

The survey can be implemented in the next couple of years after strategic planning. Dr. Lawler and Dr. Schweinle and the rest of their team will continue to work with the sub-committee and bring a proposal of a 2016 survey concept to the November meeting.

Current Mandatory Reporters Education and Statute

Task Force Members

Ms. Hollie Strand stated that the development of Mandatory Reporting Education Platform is underway. The platform will have modules that can be started and stopped easily. EPIC will be putting the platform together, to include a roster of those completing the modules for tracking purposes. It will be ready within 6 months.

The Unified Judicial System, Department of Social Services, Licensure websites would have information or a link. Task force members suggested that the school survey may have a flyer attached with information included about mandatory reporting to help get the word out.

Ms. Virgena Wieseler stated that typically DSS only has 15 min time slot to train. The Mandatory Reporting Training platform would be available at any time for professionals.
**K-12 Educators**

Task Force Members

Ms. Ann Larsen stated the Department of Education highly recommends child sexual abuse education. Department of Health and Department of Education have sent joint support letters. School district staff state they are unsure of how to respond to a child and may need more assistance. If there is a tool box to add into courses, counselors may be interested to use tool box options.

**Improving the Development & Delivery of Prevention Initiatives**

Task Force

Representative Peggy Gibson described Massachusetts’s campaign called, “Enough Abuse”. Their mission is “enough secrets, shame, hurt, confusion and denial...Enough Child Sexual Abuse.” They are addressing interpersonal factors, societal factors, and public policy to create cultural change.

Ms. Wendy Kloeppner added that National Education Association website does not have any resources for teachers per Center of Disease Control.

Ms. Jolene Loetscher inquired how to integrate a tool kit for schools.

Ms. Virgena Wieseler clarified that there may be a misunderstanding that the removal of children from parents is considered a solution. Removing children from parents may not be the most appropriate solution to solve the issue.

Ms. Hollie Strand stated that Darkness to Light was not flexible.

Ms. Daniele Dosch asked Mr. Cameron Corey to elaborate about Title IX, and it was shared that schools are required to conduct their own investigation of alleged child sexual abuse under Title IX independent of law enforcement.

Krista Heeren-Graber suggested Nan Stein, Ed.D, and expert in Title IX, to speak at the next meeting.

**Improving Public Awareness, Public Policy and Research**

Representative Peggy Gibson (Chair), Ann Larsen, Jolene Loetscher, Colleen Winter, Tatiewin Means, Dr. Nancy Free

Representative Gibson has explored different campaigns to determine the effectiveness. Representative Gibson and Senator Solano have been on monthly calls with national and international professionals to eradicate child sexual abuse. Ms. Loetscher has participated in national dialogue. In Florida, Lauren Book who was abused by a nanny, is advocating for two unique populations such as children in fostering families and children with special needs. Lauren Book does a statewide walk, receives grants and does speaking engagements for child sexual abuse. Pamela Pine lives in Washington D.C. and is the CEO of “Stop the Silence: Stop Child Sexual Abuse, Inc.” She is willing to share a comprehensive prevention and treatment
materials with the group. The “Enough Abuse” campaign addresses interpersonal factors, societal factors, and public policy to create cultural change. Public awareness campaign is creating public activation. Representative Gibson described national campaigns from different states. Center of Disease Control claims that Massachusetts is the leader in preventing child sexual abuse.

Senator Alan Solano described latest update from NPEIV, with his sub-committee currently coordinating congressional briefings. He summarized the meaning of a culture of violence. This is greater than just child sexual abuse, but comprehensive and pervasive within society. Senator Solano will send link with slides from the NPEIV that provide extensive learning.

**Sexual Violence Institute**

Krista Heeren-Graber, Executive Director of The South Dakota Network against Family Violence and Sexual Assault, is coordinating The Sexual Violence Institute. The conference will start December 2nd through December 4th which is sponsored by Department of Health, Department of Social Services, Verizon and Avera. Mike Domitz, Safe Date, a survivor with an overwhelming of poly-victimization and a deaf survivor of abuse, will be a plenary speaker. Verizon is sponsoring a lunch which Senator Soholt will be speaking at. The fee is $35 to cover for food due to federal funding not being able to pay for that. There will be many workshops that will benefit a variety of professionals.

**Improving Medical and Mental Health, and Spiritual Care Responses**

**No Hit Zones Update**

Ms. Angela Lisburg is leading stop violence effort within Avera St. Mary’s hospital, and Avera Health overall. This will address families in high stress with staff being able to provide intervention and family education to assist with handling situations in the future. The “No-Hit Zone” is a policy where no hitting is allowed – between adults and children, or child-to-child. It is an element of stopping violence within society and establishing a culture of appropriate handling of stress situations.

**Medical Response**

Dr. Nancy Free stated Jolene’s Law Task Force is addressing child sexual abuse on multiple levels, such as starting to teach professionals in the undergraduate level. New culture can be created if parts of child sexual abuse can be de-stigmatized in order for professionals to feel comfortable tackling this issue. Trainings need to be ongoing and imbedded within professional medical associations. Traditional primary care needs to link with mental health in order to improve medical practice with respect to child sexual abuse.

Dr. Free recommends that a system of professionals who use trauma-informed care for different age groups needs to be developed. Like the child, the family needs treatment too. This will require extensive therapy to address child sexual abuse. The cost will be better now versus not
addressing it and causing a ripple effect. Dr. Free describes best delivery care depends on readiness and receptivity which leads up to culture change.

Medical expertise needs to be involved in every MDT and be developed within the CAC’s at the diagnostic level. Design and implementation will need stakeholder buy-in. A mechanism will need to be developed to assure a medical champion to address sexual abuse. With technology, it is something that can be done.

Mental Health

Ms. Strand commented about trauma-informed response. How do we know that practitioners know what they are doing? Behavioral Management in Rapid City has great partnership. Training funds can be offered to create training and create a list.

Dr. Free states trauma needs to be addressed. Trauma symptoms mimic other mental health symptoms. Trauma needs to be addressed before diagnosing. Otherwise, the diagnosis can be difficult to remove and a self-fulfilling prophecy will occur.

There was much task force dialogue about mental health and trauma, that mental health professionals are being imbedded in primary care, the cohesive link between mental health and poly-victimization, that victims and families often perceive betrayal from the very systems that should be helping them and that victims advocates/specialists need to help victims and families navigate all the systems to recovery.

Public Testimony

Terry Dosch, Executive Director of the South Dakota Counselor and Mental Health Counselors and Executive Director of South Dakota Counselor substance abuse, testified that he represents 18 unduplicated services. He shared concerns about the role of the mental health professional be on an MDT as mental health staffing is a major challenge. Qualified and available mental health professionals are difficult to come by. This should be part of continuum of expertise for families with an emphasis on the competencies of best practice. Integrated care competencies are needed to realize the most powerful outcomes in eradicating child sexual abuse.

Future Meetings

Next and final meeting is on November 17th, 2015 in Pierre, South Dakota

Adjourn

The motion prevailed unanimously on a voice vote THAT THE JOLENE’S LAW TASK FORCE BE ADJOURNED.

Meeting adjourned at 3:20pm