

RESOLUTION NO. 2017- 163

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AUTHORIZING THE COUNTY ADMINISTRATOR, OR HIS DESIGNEE, TO EXECUTE THE CIRCUIT 7 PROTOCOL AND INTERAGENCY AGREEMENT BETWEEN THE UNIVERSITY OF FLORIDA, BOARD OF TRUSTEES, FOR THE BENEFIT OF THE FIRST COAST CHILDREN'S ADVOCACY CENTER/CHILD PROTECTION TEAM AND THE COUNTY.

RECITALS

WHEREAS, the mission of the First Coast Children's Advocacy Center/Child Protection Team is to improve the lives of children and their families through coordinated responses to child abuse and neglect; and

WHEREAS, the County through contract NJ206 with the Department of Children and Families has its own mission to carry out related to child protection; and

WHEREAS, it is in the best interest of the children and families that an interdisciplinary approach be adopted as it relates to child protection; and

WHEREAS, the agreement promotes the sharing of information and resources between organizations for the purpose of enhancing investigations and criminal prosecution of child maltreatment cases as well as to facilitate treatment of child victims and their families; and

WHEREAS, bringing the training, experience and resources of all agencies to bear on the fundamental problem of abuse facing children and their families will aid in child protection; and

WHEREAS, promoting training opportunities for all agencies involved in the child abuse system, as well as the community at large; and

WHEREAS, active participation in the prevention of child abuse serves a public purpose.

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY:

Section 1. Incorporation of Recitals.

The above recitals are incorporated by reference into the body of this resolution and such recitals are adopted as findings of fact.

Section 2. Approval and Authority to Execute.

The Board of County Commissioners hereby authorizes the County Administrator, or his designee,

to take the necessary steps to implement the Circuit 7 Protocol and to execute the Circuit 7 Interagency Agreement.

Section 3. Correction of Errors.

To the extent that there are typographical or administrative errors or omissions that do not change the tone, tenor, or context of this resolution, this resolution may be revised without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County
this 16th day of May 2017.

BOARD OF COUNTY COMMISSIONERS
OF ST. JOHNS COUNTY

By: _____


James K. Johns, Chair

ATTEST: Hunter S. Conrad, Clerk

By: Pam Halterma
Deputy Clerk

RENDITION DATE 5/19/17



Protocol

PURPOSE:

The University of Florida, Board of Trustees for the benefit of the First Coast Children's Advocacy Center/Child Protection Team (hereafter known as CAC/CPT) is treating victims of child maltreatment through a multidisciplinary approach that protocol identifies appropriate goals, objectives and procedures designed to meet them.

MULTIDISCIPLINARY TEAM MEMBERS:

The following agencies/disciplines will be represented as permanent members of the multidisciplinary team, which will be referred to as the MDT:

Department of Children and Families (DCF)
University of Florida First Coast Child Advocacy Center/Child Protection Team
First Coast CAC – Sexual Abuse Treatment Program (for therapy)
Betty Griffin Center – Sexual Abuse Treatment Program (for therapy)
First Coast CAC – Family/Child Advocates
State Attorney's Office, 7th Judicial Circuit (SAO)
St. Johns County Sheriff's Office (SJCSO)
St. Augustine Police Department (SAPD)
St. Augustine Beach Police Department (SABPD)
Other appropriate law enforcement agencies (FBI & FDLE)
Family Integrity Program (CBC)
Children's Legal Services (CLS)

REFERRALS:

Cases should be referred to the University of Florida's Children's Advocacy Center/Child Protection Team (CAC/CPT) in accordance with the Florida Statutes listing of mandated referrals to the Child Protection Team. For a full understanding of all cases mandated to be referred to the CAC/CPT, refer to F.S.

Chapter 39. It should be noted that all children from birth to eighteen (18) years old are eligible for CAC/CPT services, if a report has been made to DCF and/or law enforcement. Referrals to the CAC/CPT can be made by calling 904-633-0300, during regular business hours and speaking to an Intake Coordinator or Case Coordinator. After hours emergent referrals can be made by calling the above number and speaking to the on-call Case Coordinator. The CAC/CPT program is available to provide services 24 hours a day, 7 days a week, with after-hour cases being triaged/staffed with a Case Coordinator and Medical Provider.

The following is a breakdown of the particular case types to be referred to the CAC/CPT:

Physical Abuse Cases

The following cases will be referred to the CAC/CPT when there is concern that the injuries are a result of abuse and/or neglect:

- Burns/Scalds
 - Fractures
 - Head Trauma/Internal Injuries
 - Munchausen by Proxy Syndrome
 - Injuries to the head/neck in a child of any age
 - Injuries to any child five years old or younger
 - Death of a child
 - Other injuries at the request of the CAC/CPT staff member
- Some of these children will not actually visit the CAC due to being hospitalized, but services will be provided, at the child's location, by the CAC/CPT staff members.

For cases to be referred to the CAC/CPT for an assessment a call must be made, and accepted, to the Florida Abuse Hotline or a report must be made to law enforcement.

Interviews:

Interviews (specialized or forensic) will be conducted for child victims, 17 years of age and younger (when verbal) by the CAC/CPT staff member.

Medical Examinations:

Medical Examinations will be conducted and coordinated by the CAC/CPT staff members for all identified physical abuse referrals accepted for services. (Exams may be required in all DCF cases with documented or suspected injuries as specified in the list above).

After-hour interviews will be conducted at the CAC/CPT by staff members in situations involving immediate safety risk to children at the request of DCF or law enforcement. The CAC/CPT staff will ensure both DCF and law enforcement are notified of the after hour services, if applicable.

Sexual Abuse Cases:

The following cases will be referred to the CAC/CPT:

- Sexual abuse cases for all children, under the age of 18, involving the following allegations:
 - Any allegation of sexual abuse/molestation/lewd acts on a child.
 - Any sexually transmitted disease in a prepubescent child.
 - Any allegation of sexual exploitation of a child.
- Child on Child sexual abuse cases, when services are requested by DCF and/or Law Enforcement.

Interviews:

Interviews will be coordinated by the CAC/CPT staff for verbal children between the ages of 4 and 17 years of age. Interviews of children under the age of 4 years of age may be conducted, but the decision to do so will be weighed on a case-by-case basis, depending on the child's competency level. (Law Enforcement reserves the right to conduct interviews with child victims over 12 years of age for investigative purposes).

After-hour interviews will be conducted at the CAC/CPT by staff in situations involving immediate safety risks to children. The CAC/CPT staff will ensure both DCF and Law Enforcement are notified of the after hour services, if applicable.

Medical Examinations:

Acute sexual abuse exams will be conducted at the CAC and will be conducted by a CAC/CPT Medical Provider. Law Enforcement and DCF will be present, in the CAC facility, during the exam, whenever possible.

Non-acute exams of children, from birth to 18 years of age, who are alleged to have been sexually abused, will be conducted at the CAC by the CAC/CPT Medical Providers. The CAC/CPT staff (Medical Provider & Case Coordinator) will evaluate each case in conjunction with DCF and/or Law Enforcement to determine whether a medical examination is appropriate. In cases where a forensic interview will be conducted, the medical examination will typically occur after the interview in order to avoid duplication of the information provided during the interview and the taking of the medical history.

Other Referrals/Cases

The following cases will be referred to the CAC/CPT for services, which can include interviews and medical evaluations:

- Other types of abuse and/or neglect involving the following allegations –
 - Alleged malnutrition of a child
 - Alleged failure to thrive of a child
 - Alleged medical neglect of a child
 - Symptoms of serious emotional problems in a child, when emotional or other abuse, abandonment or neglect is suspected
 - Neglect
 - Other cases referred at the request of a MDT member

ADDITIONAL SERVICES:

The University of Florida's Children's Advocacy Center/Child Protection Team (CAC/CPT), provides a multitude of services outside of the medical examinations and forensic video recorded interviews. The identification of these services' are done in coordination with the staff from the CAC/CPT, the CAC/SATP therapy programs, the Department of Children and Families and Law Enforcement.

Listed below are a lists of the services that can be provided at the CAC/CPT as part of the assessment process in determining if abuse/neglect has occurred or to determine what additional services will be beneficial to the case and/or the child and family, as well as for ongoing treatment, advocacy and intervention for children impacted by abuse/neglect.

- Specialized interviews are conducted by the CAC/CPT staff with children and/or adults to gather additional information in the assessment of abuse or neglect allegations. These interviews are not video recorded, but are documented in a report written by the provider of the service.
- Psychosocial/Social Assessments are a series of specialized interviews completed by the CAC/CPT staff resulting in one comprehensive report that synthesizes all of the information gathered, resulting in recommendations about the family's strengths, risks and service needs.
- Medical Consultations are conducted by the CAC/CPT Medical Providers following the review of medical records and other documentation.
- Multidisciplinary staffings are conducted at the CAC/CPT on a regular basis to bring together all the professionals involved in a case for purposes of identifying the family's strengths, risks and service needs. These staffings include all members of the multidisciplinary teams to ensure the benefit of all case information for the various parties involved, so that there is a broad approach in the identification of the family's strengths, risks and needs.
- Psychological evaluations are available at the requests of the CAC staff and completed by the CAC/CPT Team Psychologist to assist in the assessment of the abuse/neglect allegations or treatment recommendation in a case.
- Therapeutic services are available for children ages 3 to 18 years of age, who have been the victims of sexual abuse, physical abuse, neglect or who have witnessed family violence or violent crime. Services are also available for the non-offending caregiver and the siblings of the identified victim of the abuse and/or neglect.
- Community Outreach Prevention Services are available through the CAC's Victim Rapid Response Program. The VRRP provides safety education to children at preschools, elementary schools and day camps. In addition, the VRRP provides additional advocacy services, which include assistance with obtaining victim's compensation and referrals to other resources in the community.

- The CAC/CPT staff provides community education and trainings, to other local agencies and groups, on a variety of topics related to child abuse and neglect.

LAW ENFORCEMENT:

Law Enforcement's involvement at the CAC/CPT is focused upon the criminal investigation. The timely notification of the respective agency involved in the investigation of a child abuse case is of extreme importance. Law Enforcement must be notified in a timely manner when a member of the CAC/CPT/MDT believes a crime has been committed and the crime has not been previously reported to the proper agency. This protocol will follow each individual agency's policies for notification, which would require a telephone call to the agency's communication center to activate a law enforcement response. Each law enforcement agency will then follow its policies on responding to the CAC/CPT.

DEPARTMENT OF CHILDREN AND FAMILIES:

The Department of Children and Families involvement at the CAC/CPT is focused upon child safety of the victim and the victim's siblings, which have been referred. The timely notification of the respective child protective services agency involved in the investigation of a child abuse/neglect case is of extreme importance. DCF must be notified in a timely manner when a member of the CAC/CPT/MDT believes a child's safety is at risk and the report has not been previously reported. This protocol will follow the agency's policies for notification, which would require a telephone call to the DCF's state hotline number, where the information can be provided and an investigation initiated. The DCF's child protective investigators will then follow their policies on responding to the CAC/CPT.

INVESTIGATIONS:

The following is a description of the investigative process and protocol each agency will endeavor to follow when involved with a child abuse investigation. The appropriate law enforcement agency is determined by the jurisdiction in which the alleged abuse occurred.

When an allegation of child abuse is received by DCF or law enforcement, the protective investigator or officer will conduct an initial cursory interview. The protective investigator or officer's primary purpose in having initial contact with the child is to assess the nature of the complaint and the safety of the child and to determine if further investigation is warranted. If needed, the protective investigator and/or officer will immediately notify the CAC/CPT in accordance with his/her agency's policies and procedures. All forensic interviews and/or medical evaluations will occur within 48 hours of the initial referral to the CAC/CPT or as soon thereafter as practicality and scheduling permits. If cases require immediate forensic interviews, they will be conducted by the CAC/CPT.

All follow-up investigations of abuse and interviews of suspected abuse victims, (after the initial services) shall be carried out by the appropriate personnel using this protocol and approved procedures.

CAC/CPT staff members will endeavor to share information throughout the investigations, as appropriate, to minimize the questions asked of families and to ensure a comprehensive investigative response. State Statutes governing confidentiality and rules, policies and procedures of each of the participating agencies will be followed.

All investigations shall be approached as though they will ultimately result in criminal prosecution by investigators (DCF and Law Enforcement) and CAC/CPT staff considering the following:

1. The need to intervene for the child's immediate protection
2. The need to preserve physical evidence
3. Suspect interviews will be coordinated with law enforcement in any case in which law enforcement may be involved.
4. The need to interview the victim in a child-friendly environment and in such a way that all agencies obtain the information they need so that multiple interviews are minimized and services are non-duplicative
5. Victim interviews will be coordinated with DCF and law enforcement so that multiple interviews are minimized.

VICTIM FORENSIC INTERVIEWS:

Prior to the forensic interview at the CAC/CPT, the CAC staff should determine which team member will conduct the interview based upon consideration of the following factors:

- Language spoken by the child
- Special needs of the child, if any
- Age and gender of the child
- Specific expertise of the team interviewers
- Is qualified interpreter required for interview, as needed, to ensure effective exchange of information? Family members will not be utilized for interpreting.

All forensic interviews conducted at the CAC will be digitally recorded. All completed digital video recordings shall be stored in a specified area of the CAC. Video recordings will be released in accordance with the established policy and procedures set by the CAC/CPT.

Forensic interviews of children covered by this protocol shall be conducted at the CAC in age-appropriate interview rooms, unless the child has special needs that mandate an interview at an alternative location. There will be some forensic interviews conducted at the CAC's Satellite offices, located in the outlying counties. Staff involved in the investigations will view the interview live from the monitoring room whenever possible, so as to reduce the need for additional interviews. Viewing of the forensic interview is restricted to the investigative staff. CAC/CPT staff, who conduct forensic interviews will have specialized training in forensic interviewing and gathering statements from children in a developmentally and culturally sensitive, unbiased and fact-finding manner that will support accurate and fair decision making by the involved MDT in the criminal justice and child protection systems. The forensic interviewing guidelines provided by the American Professional Society on the Abuse of Children (APSAC) shall be generally followed. At a minimum, anyone in the role of a forensic interviewer should have initial and ongoing formal forensic interviewer training.

Utilization of interview aids will be limited and include things such as blank paper to allow the child to draw or write information, if necessary. Appropriate body drawings may also be utilized. Other interview aids may be used if clinically

indicated and allowed if permitted by the forensic interview guidelines. Pre and Post interview information sharing will be a part of the forensic interview process to facilitate collaborative case planning.

Interviews of non-offending adults/siblings/other family members will be conducted at the CAC/CPT in available family/interview rooms. DCF and Law Enforcement will also be present during these interviews.

Every effort will be made to exclude perpetrators from any contact with child victims while services are being rendered to the child and non-offending caretaker at the CAC. In sexual abuse cases in which an alleged perpetrator is on-site, the CAC/CPT Director or their designee will be immediately notified by a CAC/CPT/MDT team member, at which time the alleged perpetrator will be escorted out of the CAC. Law Enforcement may conduct interviews with alleged perpetrators, in physical abuse and/or neglect cases, on-site only with the approval of the CAC/CPT team members. If occurring, the child victim must be supervised and supported in an area away from the interview to all no contact with the alleged perpetrator. Under no circumstances will the alleged perpetrator be arrested in the presence of any CAC clients. If an arrest occurs, law enforcement is requested to escort the alleged perpetrator out of the rear entrance of the CAC building and not through the lobby.

Juvenile perpetrators may be interviewed at the CAC to determine if they were victimized, as long as they are supervised at all times.

SCHEDULING OF FORENSIC INTERVIEWS:

All forensic interviews shall be scheduled through the CAC/CPT Intake Coordinators or Case Coordinators. The forensic interview must be scheduled and completed within 48 hours of the referral to the CAC/CPT in abuse cases, when the perpetrator has access to the child, or as soon as practicality and scheduling permits. Referrals to the CAC should be made as soon as possible and in accordance with each agency's guidelines. Forensic interviews will be conducted on an immediate basis for more emergent cases as determined by the CAC/CPT and the MDT.

MEDICAL EXAMINATIONS:

Medical Examinations are coordinated with the CAC/CPT staff and MDT members after the case is referred to the CAC. Non-acute exams of children, ages birth to 18 years of age, will take place at the CAC/CPT or at one of the designated CAC/CPT satellite offices, unless the child is hospitalized, in which case the child may be examined by the CAC/CPT Medical Provider at the hospital, as deemed appropriate. All acute exams of children, age's birth to 18 years of age, will be performed at the CAC on an emergent basis, as needed.

Medical exams will be performed on alleged victims of abuse by a *qualified Child Advocacy Center/Child Protection Team Examiner at no cost to the child/family. Examinations will occur at the CAC whenever feasible and are coordinated to avoid multiple examinations of the children. If a child has been examined by a medical examiner, who does not specialize in determinations of child abuse, a judgment call shall be made as to whether or not consultation with the non-forensic examiner shall be sufficient to make a qualified opinion in reference to the medical determination of abuse/neglect.

*Qualified refers to any state or local accreditation or training

Determination of an exam:

The examiner and CAC/CPT staff will determine the need for an appropriate exam based on the history, the need for forensic evidence and the needs of the child.

Timing of the exam:

The exam will be scheduled at a time most appropriate for the individual case. Availability for examination is provided by the Child Advocacy Center/Child Protection Team, 24 hours a day; 7 days per week. Factors to be taken into consideration, when scheduling exams will be:

- Preservation of forensic evidence
- Well-being of the child and family
- History of the type of abuse and the last reported occurrence

Type of exam:

Exams will be performed according to current standards for abuse exams. This will include all necessary forensic photographic evidence that is appropriate. In addition, appropriate written and/or typed documentation of the exam will be

provided. Written reports will be legible. All examination findings will be provided to the DCF and Law Enforcement person assigned to the case immediately after the exam, whenever feasible, and within a minimum of 24 hours for positive physical findings. Written/typed reports should be provided to the appropriate MDT members within no more than 10 business days.

Purpose of exam:

Exams are undertaken to assist in the determination of whether or not abuse or neglect has occurred. The exams help to ensure the health, safety and well-being of the child. The exams are also a mechanism for diagnosing, documenting and addressing medical conditions. The exams provide an assessment of developmental, emotional or behavioral problems that may need further evaluation and treatment and also result in referrals for additional evaluations as needed. These exams also provide an opportunity to reassure and educate the child and family and are the starting point for the therapeutic process.

THERAPEUTIC INTERVENTION:

Mental Health services, for both the child victim and the non-offending family members are a core component of the MDT response. Although the mental health services are separate from the forensic process, these services are available regardless of the families' ability to pay for the services. If a Family/Child Advocate is assigned to the respective case they will assist in the coordination of mental health services for the child and non-offending family members. If a Family/Child Advocate is not assigned the case, the CAC/CPT Case Coordinator will coordinate the mental health services referral.

PROSECUTION:

The Special Victims Unit (SVU) of the State Attorney's office will be available to provide appropriate feedback to law enforcement agencies that are conducting the criminal investigations. At law enforcements discretion, they may consult with an Assistant State Attorney assigned to the SVU regarding any problems that arise during an investigation. The decision to arrest is a joint decision between law enforcement and the State Attorney's Office.

CAC MULTIDISCIPLINARY STAFFINGS/CASE REVIEW:

Investigating teams will report findings of investigations to the MDT at the regular multidisciplinary staffings and will recommend courses of action. The MDT members will review and evaluate cases. It is expected that each actively involved MDT member will contribute to the case review process.

Multidisciplinary staffings will occur monthly at the CAC and more frequently, if needed. The multidisciplinary staffings will be coordinated by the CAC/CPT. The CAC/CPT staff will forward notice to all MDT members identifying the cases to be staffed five days prior to the scheduled staffing date, unless an emergency staffing is required, which does not allow that much notice. Appropriate cases, as determined by any MDT member will be presented for discussion and input from all the MDT members. Cases with significant investigative information and multiple collateral informants will be particularly coordinated for staffing to ensure appropriate information sharing across the disciplines. The multidisciplinary team should include, but not be limited to the following:

- Department of Children and Families
- Child Advocacy Center/Child Protection Team Staff
- Law Enforcement
- State Attorney
- Child/Family Advocates
- CAC/CPT Medical Providers
- Children's Legal Services
- Mental Health Providers
- Community Based Agencies

****Other community agencies/parties may be involved based on the needs of the specific case being reviewed/discussed.**

The Multidisciplinary staffings will result in written recommendations, which should identify the responsible parties to ensure clarity across the multidisciplinary team and avoid duplication of effort. Completion of the recommendations shall be communicated to all the MDT members, as appropriate.

MEDIA:

With all Case Information being strictly confidential any media inquiries, regarding subjects of a law enforcement or Department of Children and Families investigation will be referred to that agency's Public Information Office.

TRAINING:

All MDT members, in particular those conducting investigations and interviews, shall be trained in risk assessment, the dynamics of child abuse/neglect, legally sound and age-appropriate forensic interviews and investigatory techniques. There will be periodic cross-training among the members of the MDT. A training committee made up of core agency representatives will meet quarterly to discuss and implement training programs for each of the agencies.

SIGNATURES:

Tina Bottini, Assistant Dean
University of Florida, Board of Trustees

Date

Patricia Medlock, NE Regional Director
Department of Children and Families

Date

Randell Alexander, M.D., Ph.D. – Chief
Division of Child Protection & Forensic Pediatrics
University of Florida, Pediatric Department

Date

Valerie Stanley, Director/Team Coordinator
Child Advocacy Center/Child Protection Team
University of Florida, Pediatric Department

Date

James Vallely, Psychologist/SATP
Child Advocacy Center/Child Protection Team
University of Florida, Pediatric Department

Date

Joyce Mahr, Executive Director
Betty Griffin Center, Therapy Program

Date

R. J. Larizza, State Attorney
7th Judicial Circuit
State Attorney's Office

Date

Jason Lewis, Division Chief
State Attorney's Office – St. Johns County

Date

George Beckwith, Regional Director
Children's Legal Services

Date

David Shoar, Sheriff
St. Johns County Sheriff's Office

Date

Barry Fox, Chief
St. Augustine Police Department

Date

Robert Hardwick, Chief
St. Augustine Beach Police Department

Date

Shawna Novak, Chief Executive Officer
Family Integrity Program

Date

John Burke, Special Agent in Charge
Florida Department of Law Enforcement
Jacksonville Regional Operations Center

Date

Charles Spencer, Special Agent in Charge
Federal Bureau of Investigations
Jacksonville, FL Field Office

Date

Circuit 7

Interagency Agreement

1. Mission Statement

The mission of the **University of Florida, Board of Trustees, for the benefit of the First Coast Children's Advocacy Center/Child Protection Team**, is to improve the lives of children and their families through a coordinated response to child abuse and neglect.

2. Memorandum of Understanding

This agreement is made by and between the University of Florida, Board of Trustees, for the benefit of the First Coast Children's Advocacy Center/Child Protection Team, and the undersigned agencies to take effect on June 1, 2016 and will remain in effect until notification of partner agencies to void this agreement.

This agreement is an extension of the agreement made in accordance with the realization of the University of Florida's Children's Advocacy Center/Child Advocacy Center in May 2006 and the accumulation of additional counties in July 2014. While each of the undersigned agencies seeks to carry out its own mission, each also agrees to adopt an interdisciplinary approach to the common goal of child protection as follows:

- Sharing information and resources to enhance the investigation and prosecution of child maltreatment cases and facilitate treatment of child victims and their families.
- Bringing the training, experience and resources of all agencies to bear on the fundamental problem of abuse facing children and their families.

- Promoting training opportunities for all agencies involved in the child abuse system, as well as, the community at large.

- Participating actively in the prevention of child abuse.

3. Interagency Agreement of Purpose

Each of the undersigned agencies recognizes that as a society we are presently a part of a system designed for and oriented to children, a system that has few provisions and concessions to the specific needs and fragile state of those children who have been subjected to maltreatment.

As participants in the system, we recognize that many children remain at risk for re-victimization by excessive interviews, lack of communication between agencies, incomplete investigations and the unavailability of immediate and long-term therapeutic treatment.

We therefore specifically agree to the following:

- All agencies will participate in a multidisciplinary team approach to addressing child maltreatment.

- All reasonable efforts will be made by each undersigned agency to coordinate each step of the investigation/assessment process in order to minimize the number of interviews and the interviewers to which the child is subjected, thus reducing the potential trauma to the children.

- All agencies participating in current investigation/assessment and treatment will have representation within multidisciplinary case staffing meetings as scheduled.

- All agencies will be invited and encouraged to attend trainings sponsored by the University of Florida's First Coast Child Advocacy Center/Child Protection Team

- All agencies will do their best to limit the trauma associated with the investigative process for child victims and ensure proper treatment is provided as early as possible.

- Agencies will serve as a source of information, education and referral for the community on issues related to child abuse.

4. Confidentiality

- All agencies will adhere to their individual confidentiality requirements as prescribed by law.

- The undersigned agencies and their representatives agree that information pertaining to children and their families will be held in the strictest confidence. Information will be shared outside the team only as it is needed to properly investigate a case, develop a case plan, or to carry out the treatment or dispositional recommendations.

5. Disclaimer

It is expressly understood that each of the undersigned agencies has specific responsibilities imposed by law and will continue to perform those functions designated to them. Nothing contained herein supersedes the statutes, rules and regulations governing each agency. In the event that any provision of this agreement is inconsistent with any statute, rule or regulation, the statute, rule or regulation shall prevail.

This Interagency Agreement is not a binding contract. It is an expression of cooperation for the purpose of providing services to clients and coordinating activities to the extent possible. No contract rights attach to this Agreement for the parties or for any third-party beneficiaries.

SIGNATURES:

Tina Bottini, Assistant Dean
University of Florida, Board of Trustees

Date

Patricia Medlock, NE Regional Director
Department of Children and Families

Date

Randell Alexander, M.D., Ph.D. – Chief
Division of Child Protection & Forensic Pediatrics
University of Florida, Pediatric Department

Date

Valerie Stanley, Director/Team Coordinator
Child Advocacy Center/Child Protection Team
University of Florida, Pediatric Department

Date

R. J. Larizza, State Attorney
7th Judicial Circuit
(Flagler, Putnam, St. Johns, Volusia Counties)

Date

George Beckwith, Regional Director
Children's Legal Services

Date

Rick Staley, Sheriff
Flagler County Sheriff's Office

Date

Homer "Gator" DeLoach, Sheriff
Putnam County Sheriff's Office

Date

David Shoar, Sheriff
St. Johns County Sheriff's Office

Date

Michael Chitwood, Sheriff
Volusia County Sheriff's Office

Date

Matthew Doughney, Chief
Flagler Beach Police Department

Date

Tom Foster, Chief
Bunnell Police Department

Date

Jason Shaw, Sr., Chief
Palatka Police Department

Date

Barry Fox, Chief
St. Augustine Police Department

Date

Robert Hardwick, Chief
St. Augustine Beach Police Department

Date

Craig Capri, Chief
Daytona Beach Police Department

Date

Stephen Dembinsky, Public Safety Director
Daytona Beach Shores Police Department

Date

Bill Ridgeway, Chief
Deland Police Department

Date

David Arcieri, Chief
Edgewater Police Department

Date

Steven Aldrich, Chief
Holly Hill Police Department

Date

Mike Coffin, Chief
New Smyrna Beach Police Department

Date

Peter Thomas, Chief
Orange City Police Department

Date

Robert Godfrey, Chief
Ormond Beach Police Department

Date

Frank Fabrizio, Chief
Ponce Inlet Police Department

Date

Thomas Grimaldi, Chief
Port Orange Police Department

Date

Ronald Wright, Chief
South Daytona Police Department

Date

Steve Sally, Executive Director
House Next Door/SATP

Date

Joyce Mahr, Executive Director
Betty Griffin Center

Date

Mary Garcia, Director
VIPP – Putnam Health Department

Date

Mark Jones, Executive Director
Community Partnership for Children
(Flagler, Putnam, Volusia Counties)

Date

Shawna Novak, Chief Executive Officer
Family Integrity Program
(St. Johns County)

Date

John Burke – Special Agent in Charge
Florida Department of Law Enforcement
Jacksonville Regional Operations Center

Date

Danny Banks – Special Agent in Charge
Florida Department of Law Enforcement
Orlando Regional Operations Center

Date

Charles Spencer – Special Agent in Charge
Federal Bureau of Investigations
Jacksonville, FL. Field Office

Date