



Care Coordination Resource Guide

Care Coordination Teams and Children's Advocacy Center Multi-Disciplinary Teams



developed by
Texas CASA



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Introduction

How stakeholders and partners work together to best advocate for, support and protect children and youth who have been or are at risk of being exploited or trafficked is the focus of this resource. Community partners often work together through a Care Coordination Team (CCT) or a Children's Advocacy Center Multi-Disciplinary Team (CAC MDT).

Courts have established CASA volunteers as Guardians ad Litem and friends of the court to advocate with and for youth who are in foster care. Being in foster care is a risk factor for youth to be trafficked or exploited. In these instances, the CASA volunteer has an important role in the team involved with the youth.

CASA programs and volunteers should ask to be included in CCTs and/or CAC MDTs when restorative services for youth are discussed. CASA volunteers may attend meetings regarding the youth for whom they are appointed. When meeting, CASA programs can share information about the CASA ACT program guide and explain that only those volunteers who receive additional training will be involved. CASA volunteers are overseen by CASA staff. To advocate for the youth's best interest, CASA volunteers can provide information and advocate for youth in court through regular court reports.

As appropriate, local programs and volunteers engaging with CCTs and/or CAC MDTs can be crucial, valuable community partners. More information about both is explained further in this guide.



Care Coordination Team (CCT)

The Office of the Governor's Child Sex Trafficking Team (CSTT) and local communities are establishing CCTs to implement the Texas Model for Care Coordination, which creates a commercially sexually exploited youth (CSEY) care continuum. The Texas Model for Care Coordination employs awareness, education, creativity, collaboration and capacity-building to identify and recover youth who have been trafficked and to facilitate tailored, accessible, trauma-informed and holistic resources through a coordinated network of providers. The goal is that every identified child survivor of sex trafficking and exploitation has access to non-punitive, responsive, high-quality, community-based services that meet their unique short and long-term needs.

Members of the CCT may include Children's Advocacy Centers, community stakeholders, Court-Appointed Special Advocates (CASA), CSEY Advocate Agencies, The Texas Department of Family and Protective Services (DFPS), medical providers, service providers, Juvenile Probation Department, law enforcement, county and district attorneys, legal service providers, prosecutors and sexual assault programs. CCTs build trust, transparency and solutions with team members to help avoid duplication of work, ensuring that local and statewide partners are bridges instead of barriers to services for children, youth and families. To better understand Care Coordination, read the [Texas Model for Care Coordination Overview](#), [Endorsement Process](#) and [Care Coordinator Responsibilities](#).

Local care coordination teams often have existing relationships. CSTT Regional Advisors can introduce local programs to care coordination teams. Discuss your local program's desire to engage with care coordination teams and explain CASA ACT and the extensive training CASA volunteers receive. CASA staff will reiterate that CASA volunteers will participate on a case-by-case or topic-specific basis. CASA staff and volunteers are never involved in criminal cases of the youth they serve.

CASA volunteers and staff are essential in CCTs as they work alongside the care coordination partners and CSEY Advocates. Many decisions are made in CCTs, and it is imperative that the CASA volunteer be present whenever possible.

Some areas of Texas do not have CCTs established. If there is no CCT in your area, the human trafficking protocols revert to the CAC MDT process established within the local CAC. Without a CCT, the CASA volunteer can help fill the gap and advocate for the youth's best interest. CASA staff and volunteers can discuss the process in their area with CSTT Regional Advisors.

Children's Advocacy Center Multi-Disciplinary Teams (CAC MDTs)

Local CACs are charged with supporting and coordinating the efforts of a multi-disciplinary team (MDT) known as CAC MDTs, made up of professionals including law enforcement investigators, prosecutors, Child Protective Service workers, medical professionals, mental health professionals and victim advocates which may include CASA. Other local service providers may also serve on the MDT in many communities. In the neutral setting of the CAC, MDT members can collaborate on strategies that will aid investigators and prosecutors without causing further harm to the child. This approach significantly increases the likelihood of a successful outcome in court and long-term healing for the youth.

CAC MDTs collaborate to:

- Coordinate investigations, therefore limiting when possible, the number of times each child is interviewed
- Provide comfortable, child-friendly settings for forensic interviews
- Reduce the child victims' travel to investigative agencies
- Coordinate medical and mental health services
- Increase public awareness about the incidence and impact of child abuse

CAC MDTs are valuable members of care coordination teams because they are the partner agency conducting forensic interviews and overseeing the criminal investigative process.

Once the CASA program has a foundational understanding of anti-trafficking in their community and has made the necessary connections, it may become involved in its local CAC MDT.

When reaching out to CAC MDTs, CASA programs should be clear that:

- CASA staff and volunteers will have a limited role in CAC MDTs because they focus on healing services for the young person they are appointed to, not legal or investigatory procedures
- They are present as a resource about the youth for CAC MDT members

CASA staff and volunteers who attend are there to help fill in any gaps about what is going on with the youth and share updates, or they can answer the investigatory team's questions about the youth.

Differences and Similarities of Care Coordination Teams and CAC Multi-Disciplinary Teams

#1) While both are team-based approaches, they have different structures and authorities. CAC MDTs were created statutorily in the 74th Legislature (1995) in Chapter 264.406 of the Texas Family Code, while CCTs were created by the Office of the Governor in the 84th Legislature (2015).

#2) CCTs are facilitated by care coordinators who could be CSEY Advocate Agencies, CACs or other nonprofit organizations. Any agency can be a care coordinator if they meet requirements set forth by the [Care Coordination Endorsement Process](#).



#3) A difference between CCTs and CAC MDTs is how young people are referred to each of them. CCTs may receive referrals from both non-investigatory entities, such as CCT partners, and from investigatory partners, such as law enforcement and DFPS. Community members seeking resources for a young person can utilize CCT partners to make a referral to care coordination. CAC MDTs only receive referrals from investigative partners, either law enforcement or DFPS. A CAC MDT cannot respond outside of these parameters. Therefore, CCTs and CAC MDTs serve the same population, but in different capacities.

#4) While both CCTs and CAC MDTs coordinate therapeutic services, only CAC MDTs are involved in criminal investigations.

#5) CAC MDTs play a vital role in CCTs. They focus on situations with an active criminal investigation to secure safety, justice, and healing for youth who have been trafficked.

#6) Few care coordination teams have been established, but the Office of the Governor is working to create more across Texas. CASA programs should contact their local CCT if one exists, or their CAC MDT, to discuss their collaboration, best practices and protocols.

Texas CASA ACT Program Guide

Texas CASA's ACT Program Guide explores more fully how local CASA programs can be active and beneficial partners within their communities in the anti-trafficking space, which is the first step to implementing survivor-centered advocacy. CASA programs should focus on collaborating with CCTs and CAC MDTs and establishing local agreements that guide practices for confidentiality, notification of clear concern scores, etc. Some of the recommended steps are:

#1) Contact Texas CASA to notify them of your program's interest in the CASA ACT framework. They can be a resource in navigating the process.

#2) Contact your CSTT Regional Advisor to notify them of your CASA program's interest, involvement and work in this area. CSTT Regional Advisors can be a valuable asset, helping to connect you to other stakeholders. If needed, contact CASA ACT for the CSTT Regional Advisor's information in your region.

#3) Reach out to DFPS's Human Trafficking and Child Exploitation (HTCE) Division to let them know of your CASA program's interest in supporting anti-trafficking efforts in your area and/or reach out to your local SSCC leadership/designated person, if applicable.

#4) The DFPS HTCE Division can then facilitate a joint meeting to provide geographic specifics on existing human trafficking initiatives and efforts, including the existence of care coordination teams, introductions to local CAC MDTs, CSEY Advocate Agencies, taskforces and coalitions, DFPS data and complete introductions to all known stakeholders.

#5) Learn about local CCTs and/or CAC MDTs, anti-trafficking diversion courts, law enforcement victim service departments, juvenile probation offices, human trafficking task forces or coalitions and community awareness teams to understand their roles and objectives for your geographic area.

#6) Research local community and/or county statistics on sex trafficking/commercial sexual exploitation of youth. Prevalence ratings will help show the magnitude of trafficking in your area. This can begin with an online search like "sex trafficking in (city/county)." Take note of other stakeholders mentioned in these online results.

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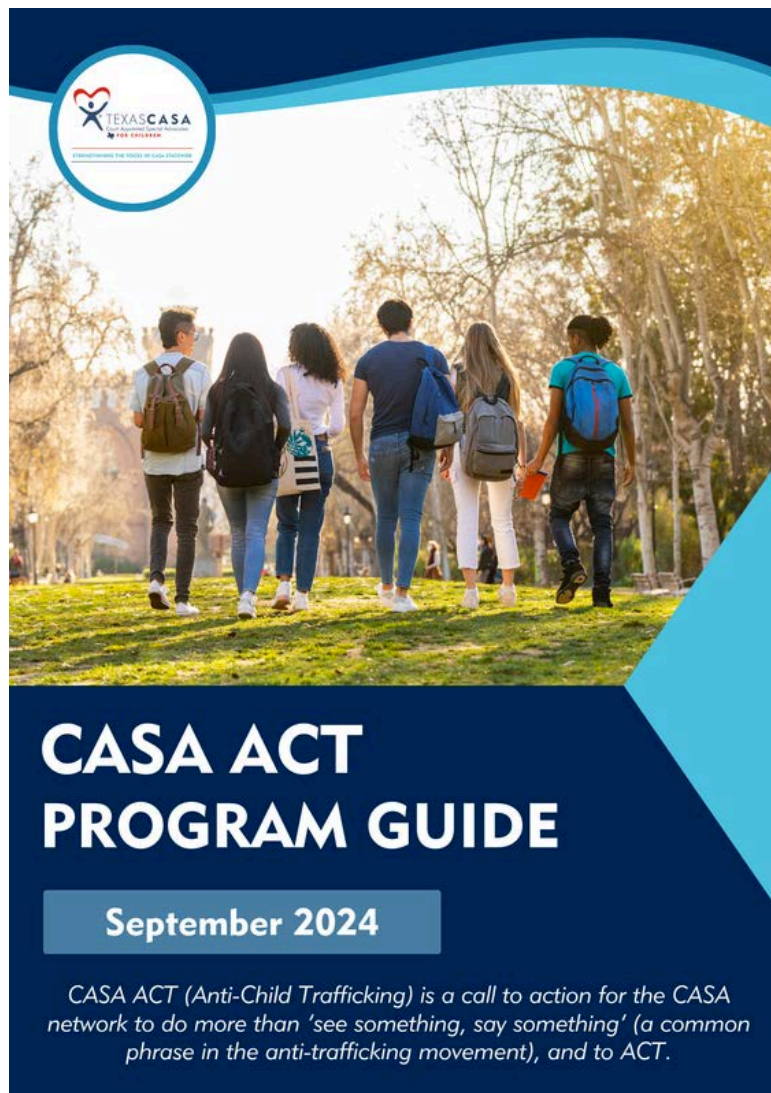


Texas CASA ACT Program Guide

#7) Visit your local Children's Advocacy Center (CAC) to share about CASA ACT and discuss collaboration regarding anti-child trafficking. Regional Advisors with the Governor's CSTT can also introduce you to your local CAC.

#8) Coordinate with CSEY Advocate Agencies for information on youth they are serving.

#9) Speak with your local District Attorney's office to learn about the magnitude of sex trafficking prosecutions.



Local Agreements

It is important to note that many limitations apply to what information can be shared without local agreements/MOUs in place between the CASA program and the CCT and CAC MDT. CASA cannot share information about the youth they are appointed to without these agreements in place and/or without the agreement of DFPS. As the state is the child's guardian (whether DFPS or the SSCC), information sharing is at their discretion unless shared directly with the judge, the child's attorney or other party to the case.

Establishing local agreements to govern how all stakeholders will work together provides clarity and guidance for sharing information, attendance and participation in meetings and referrals for concerns. CASA programs' engagement as active partners with their local stakeholders in the anti-child trafficking space is necessary for ultimately providing the best advocacy to the children and youth they are appointed to.

Every community will have different agencies involved and practices in place to guide their anti-child trafficking work. Therefore, no one-stop approach can be replicated across the state. However, ideas can be shared, and communities can learn from one another to best inform their work at the local level. Local agreements should be initiated as soon as possible to mitigate barriers in the future.



Relationship with CASA Programs/Staff/Volunteers and CSEY Advocate Agencies

Building relationships with local stakeholders is imperative for successful care coordination. It is best practice for CASA programs to become involved in CCTs and/or CAC MDTs when possible. With CSEY Advocate Agencies, it is helpful for CASA programs to understand how they and the CSEY Advocate Agencies differ. The CSEY Advocate Agency is present from the beginning of the case until the end. CASA volunteers supplement this advocacy by understanding they can take the recommendations of care coordination and share them with judges in court. Together, CSEY Advocate Agencies and CASA volunteers provide the best advocacy both in services and court.



Local Example: Harris County

One example of how care coordination teams, multi-disciplinary teams, CASA and others all work together can be seen in the TRIAD Child Sex Trafficking Continuum of Service out of Harris County. In this example, the CAC MDT process begins immediately after the recovery of a youth who has been trafficked and involves law enforcement, medical personnel, DFPS and the CSEY Advocate. Then, within 24-72 hours, a rapid response meeting is held where more law enforcement becomes involved, focusing on placement, medical needs and forensic planning. Within two weeks to 30 days of the youth's recovery, a case review meeting (sometimes called the multi-disciplinary team meeting) is held to discuss the investigation, service plan and long-term placement. More service providers participate in this meeting, but in this area and example, CASA does not become involved until the following step, a 'family empowerment meeting' that takes place 30-45 days after recovery. This meeting is about engaging the local partners and doing long-term planning for the youth. These meetings occur every 30 to 90 days until the case closes. In summary, in this local example, the CASA program is involved in this CAC MDT process around 30-45 days after recovery at the family empowerment meeting.



Conclusion

In conclusion, the efforts to advocate with, support and protect children and youth at risk of exploitation or trafficking are complex and multifaceted, involving various stakeholders and organizations working together. While these teams have distinct structures and purposes, they share a common goal of promoting the well-being and recovery of youth who are vulnerable. Through collaboration, innovation and commitment to survivor-centered advocacy, care coordination teams and Children's Advocacy Center Multi-Disciplinary Teams across Texas strive to address the unique needs of each individual and facilitate access to comprehensive services and support. As highlighted in this resource guide, establishing local agreements, clear communication channels and active engagement with all stakeholders is essential in ensuring effective care coordination and maximizing the impact of anti-trafficking efforts. By fostering strong relationships and sharing best practices, communities can continue to evolve and improve their approach to combating child trafficking, ultimately safeguarding the rights and dignity of every child and youth.

