

**Criminal Justice Section's
RACIAL JUSTICE IMPROVEMENT PROJECT
February 15, 2015 Task Force Report
*Funded by the Bureau of Justice Assistance***

Jurisdiction: Dane County, Wisconsin
Name of Pilot Project Deferred Prosecution Child Abuse Initiative

Date of Last Task Force Meeting:	January 27, 2015
Date of Upcoming Task Force Meeting:	February 24, 2015
Projected Project Completion Date:	June 30, 2015
Projected Evaluation Completion Date:	June 30, 2015

Please list the name and title of each RJIP task force member in your jurisdiction and also include their email address. We will update our website with the names you list below. If you would like to remove a task force member that is currently listed or make a change, please also state that below. *You can find the list of your jurisdiction's task force members by visiting the project's website and finding "Task Force Information" in the top menu, then by clicking on your jurisdiction in the drop-down menu.*

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Project Updates:

The Racial Justice Improvement Project (RJIP) Team has met monthly to discuss the Child Abuse Initiative—its challenges and successes—and to work collaboratively towards lowering racial disparities in Dane County, Wisconsin. Robust vetting of goals and objectives, along with eligibility, was a common theme of our Task Force Meetings. System change requires collaboration and input from multiple agencies and stakeholders and this also has been central to our ongoing efforts. As we move forward, we look to create solid partnerships between the criminal justice system and human services system.

The Dane County District Attorney's Office enhanced their existing Deferred Prosecution Program by implementing the Deferred Prosecution Child Abuse Initiative (DPCAI). As the larger community

explores non-violent parenting initiatives and the cultural context of corporal punishment, the DA's Office launched a diversion program designed to protect children and strengthen families. Because a disproportionate number of minorities are referred to the DA's Office for cases involving corporal punishment, it is expected that this initiative will impact short-term and long-term racial disparities in the criminal justice system. This initiative provides culturally responsive programming for eligible caregivers to participate in an alternative to the formal criminal justice response following physical abuse of a child as the result of excessive corporal punishment. DPCAI will integrate parenting programs that strive to reduce the number of children who are abused by the excessive use of corporal punishment by replacing current discipline practices with positive parenting methods and eliminate the use of physical discipline.

The enhancements, between July 2013 and present, include:

- Hired a Child Abuse Specialist within the DA's office (December 2013)
- Developed an intake system where every case is evaluated for DPU eligibility immediately rather than waiting for the final pre-trial conference (began use in January 2014, with ongoing improvements)
- Clearly delineated DPCAI mission, goals and objectives (Finalized December 2014)
- Implemented a "No Hit Zone" campaign in the DA's office (September 2014)
- Revised DPCAI eligibility criteria in collaboration with the public defender's office to increase the number of direct/pre-charging referrals (finalized December 2014)
- Collaborated with Child Protective Services and other system partners
- Adults and Children Together (ACT): Raising Safe Kids: staff obtained training and offered this parenting program free of charge to decrease the use of corporal punishment (trained in May 2014, offered group Summer 2014)
- Developed a participant-level data system specifically for the program (Access database)
- Provided professional training opportunities regarding strategies to end violent parenting and efforts to improve cultural competency (June 10-11, 2014)
- Engage the community in a discussion that explores non-violent parenting practices (ongoing)
- Human Services "The Negative Effects of Physical Discipline" references Dr. Stacey Patton's website (conference keynote) as well as documents definitions, potential long term impacts, and resources for parents for alternatives to physical punishment.
- Pretrial Justice Institute reviews updated eligibility and approves eligibility criteria.

Dane County Overall Goals:

Government across the country are implementing racial equity initiatives with the goal of ending the racial inequity that exists in jobs, housing, health, education, the criminal justice system and other areas. Dane County has been addressing the inequities in criminal justice for the last several years. This effort is championed by national supporter, such as the ABA, as well as local partnerships. As a county, we look to reduce racial disparities across the criminal justice spectrum from arrest to incarceration to re-entry. To reach racial equity will require intentional strategies that set clear measurable actions. This is the reason program design as well as evaluation are critical components to long term project success.

Dane County RJIP Project:

The Child Abuse Initiative, with strength in program design and continued evaluation, hopes to reduce racial disparities by providing better response to eligible defendants. In the long term, it hopes to impact collateral consequences of early trauma and criminal justice involvement on families.

As the larger community explores non-violent parenting initiatives and the cultural context of corporal punishment, the Dane County DA's Office launched a new diversion program designed to protect all children and strengthen families. Because a disproportionate number of minorities are referred to the DA's Office, it is expected that this initiative will impact short-term and long-term racial disparities in the criminal justice system. This initiative will provide timely and culturally responsive programming to all eligible defendants filling a current service gap. Additionally, the DA's Office will support professional education opportunities for staff that teach culturally responsive service delivery. We have engaged a professional evaluator, UW-Population Health, to assist in strong program design, measurements and future evaluation data sets.

Current Service Gap -- In addition to law enforcement investigations, the Dane County Department of Human Services - Child Protection Unit (CPS) is responsible for assessing safety when a report of intra-familial physical abuse is received. Because child safety is the mission of CPS, immediate interventions are implemented to address alternative parenting approaches and family reunification. Unfortunately, the criminal justice system does not operate this expeditiously and therefore misses the opportunity to:

- Coordinate services that will help families when they need it.
- Efficiently utilize scarce county resources by minimizing replication of services.
- Support the work of CPS by providing an additional incentive for parents to Embrace services.
- Immediately address child protection without implementing a bail order not allowing Contact between parents and their children.
- Offer offenders a less punitive and more productive response to criminal conduct.
- Collaborate with CPS to structure meaningful services.
- Send a unified, clear and consistent systemic message to families.
- Spare defendants high legal costs that further stress families.

Ongoing efforts to maximize communication and collaboration between the DA's Office, Human Services, as well as other criminal justice stakeholders will need to be maintained and lifted for full systems change to occur. The DA's Office would prefer to work collaboratively with CPS in an effort

to expedite appropriate criminal cases in which offenders are arrested for Intentional Physical Abuse of a Child where excessive physical punishment is the presenting issue. Both parents and their children are likely to receive short-term and long-term benefits from a deferred prosecution model which provides timely intervention focusing on alternative, non-violent discipline. Additionally, this program takes into account the reality that, in most low-level child abuse cases, a defendant is not going to be incarcerated for a long period of time and that children are not going to be permanently removed from a parent's care. This program creates and monitors Deferred Prosecution Unit (DPU) caregiver contracts that utilize community-based services, education, and support to ensure that these children are going to be safe.

Wisconsin Statutes Chapter 950.055(2)(d) pertains to child victims and witnesses' rights and services, and states that child victims have the right to information about and referrals to appropriate social services programs to assist the child and the child's family in coping with the emotional impact of the crime and the subsequent proceedings in which the child is involved. With this in mind, the Child Abuse Initiative seeks to utilize forensic interviews, when appropriate, in order to better preserve the case, and to provide links to appropriate programming. Forensic interviews are provided by Safe Harbor Child Advocacy Center. These interviews are designed so that a child can talk about their experience through a video recorded interview with a highly trained facilitator to minimize the need for additional interviews. Safe Harbor interviews also bring together professionals from all the agencies involved with a case, which provides an excellent opportunity for multidisciplinary communication and case planning. If charges are filed, the recorded statement can be used in court in place of the child's testimony. This process also allows for coordination of services and linking children and families to mental health services that may not otherwise be accessible to them.

Overview/Highlights: DPCAI has effectively enhanced a program to offer Deferred Prosecution to persons charged with child abuse due to the use of excessive corporal punishment. It encourages parents to challenge their belief systems related to the use of physical punishment and work toward gaining healthier parenting skills, leading to behavior changes and a reduction in the use of corporal punishment. Participation in the DPCAI requires signing of a Deferred Prosecution Agreement (DPA) or contract with specific conditions relating to that participant's areas of need. Completion of the contract requirements allows them to avoid the stigma and associated negative societal outcomes (on employment, housing, etc.) associated with a criminal conviction by having charges reduced, dismissed, or avoided altogether. Preliminary analyses suggest that DPCAI has increased speed of processing for these cases, offering participants the opportunity to more quickly resolve their cases. The enhancements have also improved services for children of parents charged with child abuse by providing enhanced coordination with Child Protective Services, timely use of forensic interviews to preserve the case, use of Court Appointed Special Advocates, and referrals to necessary treatment and support services.

In addition to these individual-level factors, DPCAI has also initiated a variety of system-level and community-level elements during the past year in efforts to impact racial disparities and corporal punishment. The District Attorney's Office and Office of the State Public Defender were able to come to a compromise regarding eligibility criteria, which lead to a change in the types of cases deemed eligible for each of the three tracks. This change is expected to result in an increase in pre-charge referrals; allowing additional individuals to reap the benefits associated with not having a child abuse charge on their record.

The high level of collaboration has improved service coordination, created a “No Hit Zone” in the district attorney’s office, created a public service announcement, coordinated a successful professional conference on the intersection of culture and corporal punishment, and conducted extensive community outreach. The DA’s Office developed and facilitated a conference which included a community conversation focused on initiating a dialogue with leaders in the faith based community regarding corporal punishment and its intersections with culture, particularly African American culture. The DA’s Office became the first government institution to establish a “No Hit Zone” based on a model used by several children’s hospitals across the country. A “No Hit Zone” team was created and they were able to provide training to staff members throughout the office who are most likely to encounter issues that the “No Hit Zone” addresses. Staff was trained in summer of 2014, and is currently equipped to provide interruption to caregivers exhibiting maladaptive responses to stress having to do with their children.

The extent to which DPCAI reduces disparities cannot be determined at this early date, but it is expected that the impacts of this initiative will be seen in longer term positive outcomes for the children, improvements to the system of care for these parents and families, community education to impact attitudes and norms related to corporal punishment, and integration of DPCAI into the larger county-wide efforts to reduce disparities. The RJIP Task Force will continue to ask the hard questions, as we collaboratively seek better solutions for families.

Program-Level: The Deferred Prosecution Child Abuse Initiative (DPCAI) is currently offering Deferred Prosecution Agreements (DPA) to individuals facing charges related to their use of excessive corporal punishment in Dane County that, if completed, will result in reduced or dismissed sentences, and in some cases no charges being issued. The DPCAI project staff have reached consensus on program goals and objectives, and documented them in a clear diagram linking goals, objectives, and measures. These program goals and objectives have been communicated to the RJIP team and to ABA.

Significant time and effort were expended to develop the logic model for DPCAI in Figure 1 to delineate goals and measurable objectives to further the program mission of:

To provide meaningful criminal justice diversion programming for parents who have been arrested for child abuse following an incident of excessive use of corporal punishment. This multi-generational initiative will strive to have a short and long-term impact on child safety and protection, racial disparities, belief systems regarding violent parenting practices, and decreasing future criminal behaviors.

Selected staff members were trained to facilitate the “Adults and Children Together (ACT): Raising Safe Kids” parenting curriculum with the goal of implementing it in the DA’s Office. The ACT Parenting Program serves as a no/low cost alternative for program participants who cannot afford to participate in other parenting program options. ACT is an evidenced-based program developed by the American Psychological Association. After being trained in the curriculum, DPCAI began offering ACT in August 2014. The first cohort completed ACT in Fall 2014 and Attachment 2 contains an overview of the pre/post-tests and satisfaction surveys. Due to the limited sample size quantitative analysis is not possible; however, a summary of cohort one and two will be available for the June 2015 report.

Participant-Level: The tables in Attachment 3 examine participant characteristics and services by comparing participants who are White/non-Hispanic with persons of color (African American, Hispanic, Asian, and Native American Indian). None of the comparisons between the two groups revealed a statistically significant difference on any of the measures. [Note that data is missing for some measures in the summary tables data because some participants were referred for charges prior to implementation of the enhanced eligibility screening processes and assessment tools in January 2014.]

Brief Overview/Highlight of Participant Data -- As of December 31, 2014 there were 61 offenders who had been identified as eligible for DPCAI. DPCAI has admitted 49 participants, and there are 12 pending cases. Four participants have successfully completed. Of the 49 admissions to date, roughly one-half were persons of color (29% African American, 10% Hispanic, 10% Asian, 2% Native American Indian, and 49% White/non-Hispanic). Participants were an average of 37 years old, average 2.5 children per defendant, and most reside in their own apartment or home. The educational level of participants is quite high, with 78% having post-high school educational experience and 20% possessing a secondary degree. The vast majority of participants were employed and one-third had an annual income of at least \$30,000.

The majority of admissions were referred post-plea (67%), about one-quarter were direct referrals (27%), and a small proportion were referred for a reduction in charges (6%). The average length of a deferred prosecution agreement (DPA) is 15 months, ranging from 12-24 months.

Nearly one-half had no prior child protective services (CPS) reports and none of the participants for whom data were available had any prior substantiated prior CPS reports. About one-half or more of the participants indicated that they used corporal punishment with their children because they were angry or frustrated, and because they were using the same physical discipline methods as their own parents.

A variety of service referrals have been made for participants: 88% referred for parenting services (12% of participants were already involved in services addressing parenting prior to starting DPCAI, therefore they were not referred to services), 49% for family/in-home therapy, and 22% for aggression, domestic violence, or abuser treatment services.

System-Level and Community-Level: Significant system-level collaborations involve the courts, district attorney's office, public defender, the faith community, RJIP taskforce and Criminal Justice Council-Racial Disparities subcommittee, child protective services, and local service and treatment providers.

- Successfully working with CPS and local service provider agencies
- Creation of District Attorney's Office "No Hit Zone" and public service announcement <https://www.countyofdane.com/da/nohit.aspx>
- Implemented successful 2014 conference on corporal punishment with a great deal of positive feedback
- Currently planning more extensive two-day conference in November 2015 that will include presentations by national experts and a "community conversation" to encourage the involvement of local leaders, stakeholders, and community members, particularly those involved in the faith-based community.
- Outreach and education to schools and community groups - this includes presentations to high school groups, university classes, law enforcement agencies, and community agencies.

Attachment 4 contains conference participant summary and supporting information related to the 2014 Corporal Punishment conference. The Conference received overwhelmingly positive reviews from law enforcement, criminal justice stakeholders, medical professionals, human services, as well as other interested parties. The conference was well attended and gathered participants from the entire State of Wisconsin, as well as other parts of the Midwest.

As a part of the conference, the “Intent to Change” protocol distributed at the Cultural Context of Corporal Punishment Conference in June 2014 which stated that:

“It is a goal of the conference program planners and presenters to provide information that course participants can apply to the enhancement of their professional practice.” (See attachment 4 for specific examples of “intent to change”).

The conference garnered a high level of leadership support with attendees including the District Attorney of Dane County, Ismael Ozanne, and Joe Parisi, County Executive. Local media also covered the event.

On June 10, 2014, at the Fountain of Life Church in Madison, Wisconsin, the Dane County Task Force held a corporal punishment and positive parenting conversation open to the community. The meeting was led by Dr. Stacey Patton, who connected historical information on slavery practices and principles with modern forms of punishment and abuse. The event created a safe forum for candid conversations about race, religion and parenting practices. Ongoing communication and collaboration will need to continue to have the largest effect on children and families.

How will you measure whether or not your proposed reform addresses the problem identified?

Both program-level and participant-level data are used to regularly assess progress toward DPCAI objectives, as shown in Table A. [It should be noted that the table does not yet include percents or statistical testing of differences due to the small sample size.] It cannot be determined at this time whether or what impact the reform has had on the overarching goal of creating a long term impact on child safety and protection, racial disparities, belief systems regarding violent parenting practices, and future criminal behavior. However, the RJIP and DA’s office are continuing to work with system and community level partners to make these longer term changes possible, with the intention that this data will be evaluated at a later date.

Table A reveals that DPCAI has made consistent progress toward their objectives. The majority of admissions are currently referred post-plea (67%), about one-quarter are direct referrals (27%), and a small proportion are referred with the potential for a reduction in charges (6%). The public defender played an effective advocacy role for the RJIP Task Force in reaching a compromise with the district attorney related to DPCAI eligibility criteria. The revised eligibility criteria lead to an immediate programmatic change to increase the number of pre-charging (direct referral) cases referred to DPCAI.

While it is too early in the program implementation process to determine comprehensive effectiveness or impact on participant outcomes, progress toward two of the objectives related to improving the speed of initial processing can be assessed. Preliminary analyses were conducted to compare the speed of initial processing for (a) 24 participants that were referred for charges prior to implementation of the

enhancement with (b) 25 participants who were referred for charges after the enhancement. For these purposes, enhancement refers to the change in procedure for screening cases for eligibility and subsequent referral to DPCAI following law enforcement referral. This change occurred in January of 2014, but did not affect any individuals referred by law enforcement prior to January of 2014. These preliminary results suggest that DPCAI's efforts to change the old procedures of "business as usual" show a pattern of positive impacts on the system-level. The results of these preliminary statistical analyses indicate that:

- DPCAI has significantly decreased the average time between law enforcement referral and determination of eligibility for diversion from 167 days before the enhancement to 26 days after the enhancement.
- DPCAI has significantly decreased the average time between law enforcement referral and signing of a deferred prosecution agreement from 199 days before the enhancement to 102 days after the enhancement.

Participants are being referred to a variety of parenting, treatment, and support services that have been identified as culturally responsive. All DPCAI participants are referred to parenting skills services, regardless of their ability to pay. Participants without access to insurance or financial resources to pay for a parenting program required as a condition of their deferred prosecution agreement are enrolled in the ACT parenting program offered by DPCAI staff. Although ACT has been offered for only a small number of participants so far, it is expected that another cohort will be in February 2015 and that more participants will reap the benefits of this alternative service over time.

It should also be noted, that in the past participants who could not afford the services required by their contract were either turned away at intake or did not successfully complete their contract due to that inability to complete an integral part of the contract. Therefore, with implementation of the ACT program, participants who may not have been afforded the opportunity to complete their contract in the past are able to do so successfully because of elimination of one financial barrier. Participants are now being referred for services within one week of signing the deferred prosecution agreement (or confirmation of current service participation is made). The vast majority of contracts/agreements include treatment services for the defendant (and children if needed) and all providers utilized have been confirmed to use best practices in their area of expertise.

What are your outcome measures?

The plan to assess program-level outcomes and impacts includes (a) reaching consensus on how DPCAI can be a part of system change to decrease racial disparities in Dane County, and (b) measures of positive impacts on families and reduction of trauma in families. The plan to assess longer-term participant-level outcomes is to be determined. It is anticipated that the primary measures may include new child abuse referrals for participants and long-term outcomes for children related to justice system contacts and overall well-being.

The outcome measures for this project relate to identifying the impact this initiative has had on participants and their families as it relates to change in belief systems and use of corporal punishment, and, as a result, reductions in involvement in the criminal justice and human services systems for both the caregiver and the child victim now and in the future. Initially, this measure will include participant level data such as number of new child abuse referrals to law enforcement or human services for the

offender. Later, it will look at juvenile justice and criminal justice system involvement for the child victim, as well as child abuse reports for both the victim and offender.

As these are long-term outcome measures, the true impact cannot be known until enough participants have completed the DPCAI and this type of data is available. After approximately two years of a stabilized program, the outcomes related to recidivism and changes in racial disparity can begin to be evaluated.

How do you define a successful project?

In general, a “successful” program is one structured with clearly delineated goals and measurable objectives, substantial and consistent progress toward those objectives, stated eligibility criteria that are consistently applied, clear admission and discharge criteria, use of assessment results in case and treatment planning, a strong intervention, high levels of system and community collaboration and integration, a high level of commitment to collaborative program evaluation and measurement, and ongoing use of evaluation results to improve program policies and processes.

The Child Abuse Initiative project hopes to help families move forward with less involvement with criminal justice, and improved parenting practices. Data will be used to inform our project success and adapt when deemed appropriate. Data will also be used as ongoing performance measures to monitor progress and ensure that positive changes are sustained.

Table A: DPCAI Progress Towards Program Objectives			
As of 12/31/2014	Defendant's Race		
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	Overall (N = 49)
Objective A1: Increase the number of offers for DPP by offering pre-charge, post-plea, and reduction referrals			
Pre-charge (direct) referrals	9	4	13
Post-plea referrals	13	20	33
Charge reduction referrals	2	1	3
Objective A2: Referred defendants will successfully complete DPP contracts			
# Of Signed Contracts (Admissions)	22	24	46
# Discharged	2	2	4
Contracts completed	2	2	4
Contracts not completed	0	0	0
Objective B1: Refer to providers that have been identified as culturally responsive (based on training and plan, language, and familiarity with cultural group)			
# Service Referrals To Providers (Duplicated Count)	46	43	89
Objective C1: Determine eligibility for DPCAI within 1 week of referral for charges by Law Enforcement (LE)			
Days from LE Referral to Eligibility Determination			
Within One Week (0-7 days)	9	10	19
2-4 Weeks (8-30 days)	3	10	13

Table A: DPCAI Progress Towards Program Objectives			
As of 12/31/2014	Defendant's Race		
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	Overall (N = 49)
1-2 Months (31-60 days)	0	0	0
2-4 Months (61-120 days)	4	3	7
More Than 4 Months (121+ days)	8	12	20
<i>Average number of days</i>	<i>92 days</i>	<i>99 days</i>	<i>95 days</i>
<i>**This is an average of all participants, including those referred prior to the enhanced eligibility determination process. Please see bullets on page 8 for additional information**</i>			
Objective C2: Offer for DPCAI within two weeks of eligibility determination			
Weeks from Eligibility Determination to DPCAI offer			
Within Two Weeks (0-14 days)	13	15	28
2-4 Weeks (15-30 days)	2	3	5
1-2 Months (31-60 days)	4	3	7
2-4 Months (61-120 days)	3	2	5
More Than 4 Months (121+ days)	1	2	3
<i>Average number of days</i>	<i>26 days</i>	<i>28 days</i>	<i>27 days</i>
Objective C3: Defendant signs contract within 6 weeks of LE referral for charges			
Weeks from LE Referral to Signed DPU Contract			
Within Six Weeks (0-42 days)	3	3	6
6-12 Weeks (43-84 days)	3	3	6
12-24 Weeks (85-168 days)	8	7	15
More Than 24 Weeks (169+ days)	7	11	18
<i>Average number of days</i>	<i>154 days</i>	<i>154 days</i>	<i>154 days</i>
[continued next page]			
Objective C4: Within one week of contract signing, active services are confirmed or defendant is referred for services			
Days from Signed Contract to DPCAI Referral for or Confirmation of Services			N = 26
Within One Week (0-7 days)	11	15	26
More than One Week (8+ days)	0	0	0
<i>Average number of days</i>	<i>0.4 days</i>	<i>0.0 days</i>	<i>0.2 days</i>
Objective D1: Increase the number of signed DPP contracts that incorporate treatment services for defendant (and victim if warranted)			
# Contracts That Include Referrals for Treatment:			
Number for defendants	20	22	42
<i>*some participants did not receive referrals due to already receiving services when admitted*</i>			
Objective D2: Utilize providers that commit to using best practices with regard to their particular service/intervention			
# Referrals to Providers That Use EBPs (duplicated count)	46	43	89
Objective D3: Provide referral to evidence-based parenting program for all participants, regardless of ability to pay			
# of Participants REFERRED for Parenting Services			
DPCAI ACT Parenting	1	3	4
Family Services	16	17	33

Table A: DPCAI Progress Towards Program Objectives			
As of 12/31/2014	Defendant's Race		
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	Overall (N = 49)
Triple P	0	2	2
ATTIC Parenting	0	1	1
Center for Families – Parent's Place	0	1	1
Prairie Counseling	0	1	1
CORE Psychoeducational Parenting	1	0	1
Objective D4: Participants will complete an exit survey to assess their program experience			
# Participants Completed DPCAI Exit Survey	TBD	TBD	TBD
<i>*exit survey in development*</i>			
Objective E1: Select providers with zero-tolerance approach to use of corporal punishment (CP)/physical discipline, educate participants on positive (non-violent) parenting alternatives, and educate on child development			
# Referrals to Parenting Providers with Zero Tolerance Approach to Use of CP/Physical Discipline	18	25	43
<i>*100% participate in services with Zero-tolerance provider; not all participants received referral*</i>			
Objective E2: Every defendant will sign a contract agreeing to no use of CP/physical discipline, and agree to participate in an approved parenting service			
# Participants Signed "No CP" Contract	21	24	45 (100%)
# Participants Agree to Parenting Service	21	24	45
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Objective E3: Participants will demonstrate a change in endorsement of use of CP/physical discipline			
# of ACT Parenting participants that decreased their endorsement of the use of corporal punishment from class start to class end (<i>post-test information not yet available for other parenting programs</i>)	1	3	4
Objective E4: Child Abuse Specialist and other DPU counselor(s) will become certified ACT facilitators and provide ACT group to eligible defendants			
# Staff Certified (and when certified)	2 staff trained in May 2014, working toward certification		
# of ACT Sequences/Cohorts Provided	1 cohort completed to date		
Objective E5: Participants will have no new referrals to Human Services or Law Enforcement for use of CP/physical discipline from program admission to one year post successful contract completion [<i>*cannot yet be determined because zero participants are one year post-completion</i>]			
# Participants 1 Year or More Post-Completion	0	0	0
Objective F1: Utilize forensic interviews for child victims in order to preserve the case and assure access to appropriate services based on identified needs			
# Forensic Interviews Conducted With Children	6	7	13
Objective F2: Collaborate with Court Appointed Special Advocate (CASA) on appropriate cases to promote protection of children			
# Contracts That Include CASA	2	4	6

Table A: DPCAI Progress Towards Program Objectives			
As of 12/31/2014	Defendant's Race		
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	Overall (N = 49)
Objective F3: Confirm active services or refer children for services based on needs identified during DPCAI eligibility and intake assessment process			
Child Victims Assessed For Services	TBD	TBD	TBD
Child Victims In Need Of Services	TBD	TBD	TBD
Child Victims Active In or Referred For Services	TBD	TBD	TBD
<i>*Information will be available in 2015*</i>			

Have you remained consistent with your policy reform and implementation plan? Please explain if you have deviated from your original project plan.

Changes to the original evaluation workplan were necessary. The initial approach was to conduct an assessment of the impact of DPCAI on reducing racial disparities in Dane County, with analyses of participant outcomes through development of a data collection system (an Access Database) and identification of a comparison group. However, it quickly became apparent that the pilot program was in need of technical assistance to develop a solid program foundation for future evaluation.

Evaluation, program staff, and the RJIP team worked together during 2014 to develop a program approach to decrease disparities within the criminal justice system involving the typical handling of child abuse cases, reach consensus on a logic model with clear goals and objectives, revise eligibility criteria, define and operationalize data elements, design a data collection tool/system, select assessment tools, and integrate evidence-based practices. In addition, process evaluation was necessary to document program implementation and incorporate evaluation feedback for program improvement, to document system-level coordination, and to document community-level efforts. The evaluation workplan had to be further modified to accommodate the additional unanticipated February 2015 reporting requirement.

Finalization of the eligibility criteria required ongoing communication, especially between the prosecution and defense. The RJIP Team was committed to finalizing eligibility in order to increase transparency and aid in program evaluation. The American Bar Association assisted Dane County and offered Pretrial Justice Institute's expert advice on the agreed upon eligibility criteria. As stated by PJI, "...As you know, District Attorney offices have very wide discretion in the area of pretrial diversion, including whether to offer any kind of diversion opportunity at all for various offenses and, if so, establishing the program eligibility criteria. Having said that, the criteria that the Dane County task force worked out seem very reasonable as a starting point."

For the next several years, it will be critical for our project to continue the robust program evaluation and increased system collaboration to achieve success. The RJIP team has proved to be committed to finding solutions, and although meetings are at times contentious, continue to aim to increase program effectiveness—and hope to decrease racial disparities in the short and long term for Dane County residents. .

Have you commenced your actual pilot reform project? What is the commencement date? If you have not commenced your pilot reform project, why not?

The RJIP Task Force commenced July 2013

The DPCAI program enhancements began January 1, 2014.

Have you determined the requirements of completion and eligibility of the pilot, please describe below. How will you determine the length of your pilot program? Please explain the logistics and administration of the pilot. Please attach the relevant signed copies of the memorandum of understanding, project outlines, agreements, contracts or plans of action.

The program eligibility criteria are presented as Attachment 5.

DPCAI participants successfully complete if they complete all of the requirements of their deferred prosecution agreement (varies by case). If all requirements are completed charges are not issued, dismissed, or reduced.

How many individuals will participate or are projected to benefit from the pilot?

Number of adults: Approximately 50 new admissions annually

Number of child victims: Will vary by number of children in each case; based off current data approximately 50

How will individuals become aware of the option to participate in the pilot program? Please attach all necessary brochures, outlines, and information.

All individuals referred by law enforcement for charges related to physical abuse of a child are screened for eligibility for the DPCAI. At the time of screening, a programs staff member notifies prosecutors in the DA's Office of the eligibility or ineligibility of that individual through the office-wide computer system, PROTECT. The assigned ADA may then make an offer to that eligible individual's defense attorney regarding the option to participate in the DPCAI. If the individual does not currently have a defense attorney, the ADA may extend an offer of potential participation in the DPCAI while also encouraging the individual to seek and discuss with counsel, and provides information on the avenues by which to obtain counsel. The defense bar, and particularly the State Public Defender's Office, have been made aware of the DPCAI as well, and are able to discuss this option with their clients. Each potential participant is provided with an introduction to the program in the form of a program brochure and is directed to the Deferred Prosecution Program website for additional information. Each participant also engages in a two to three hour intake interview with a DPP counselor in order to determine appropriateness for DPCAI, provide participant with additional information regarding what to expect from the program, and to gather information to guide case planning. In addition, Dane County Human Services is aware of this improved option for individuals who are involved in both systems, and are able to make suggestions to or regarding a potential participant.

Overall outreach and community education around DPCAI is increased via public meetings, yearly conferences, community based conversations, faith based discussions, and website upgrades.

Dane County District Attorney No Hit Zone and resource link:

<https://www.countyofdane.com/da/nohit.aspx>

Dane County's Human Services Department's brochure: "The Negative Effect of Physical Punishment" also references Dr. Stacey Patton's work.

How do you plan to track participants involved in the pilot program? Who will be in charge of obtaining and tracking this information

At the point when the Population Health Institute evaluation staff joined the project team in February 2014, information technology staff in the DA's office had already begun to develop a participant-level database specifically for DPCAI. However, without clearly articulated goals and measureable objectives at that time it was necessary to reach consensus on the goals and objectives before proceeding to further develop the data system. The development, pilot testing, and revision of the database continued for the entirety of 2014 to assure both the accurate operationalization of measures and the inclusion of valid measures in the data system to address the objectives.

The resulting Access database is a high quality data system that resides on the DA's network, with links to statewide criminal justice data systems to integrate and utilize existing data to auto-populate some measures. Attachment 7 contains example screens from the DPCAI database. DPCAI staff has been responsible for collecting data and maintaining the database, with data quality review/support from evaluation staff. The coming months will include the development of automated reports within the database to allow DPCAI staff to assess progress toward program objectives without external assistance. It is anticipated that DPCAI will continue to use the data system to document program activity going forward.

The University of Wisconsin Population Health Institute will provide technical assistance with program evaluation through June 30, 2015. External funding will be sought during 2015/2016 to take DPCAI from pilot to full implementation and to adequately fund a future assessment of program implementation and outcomes when the program has stabilized. Currently no funds have been identified for this purpose.

Have you identified mechanisms to track and measure the effectiveness of your reform? Have you met with the Project Evaluator, Inga James? How are you tracking the success of your reform overall and specific projects or programs that you have since carried out? Do you have a formalized evaluation plan for your pilot project?

The RJIP Coordinator and evaluator participated in a teleconference with Inga James on November 6, 2014 to apprise her of project status, strengths, and barriers. She indicated that she agreed with our revised approach and would communicate the reasons for the modifications to ABA staff. Because they are not printable or downloadable from the RJIP website, local evaluation staff requested copies of prior RJIP evaluation reports from Inga James on two occasions (November 2014 and January 2015), but did not receive the materials. A brief summary of some elements of the draft evaluation plan are included as Attachment 8.

What are your key milestone dates/deadlines leading up to the conclusion of your sites reform and evaluation?

Table B: Dane County RJIP Key Milestones	
	Target Date(s)
RJIP Timeline	
Continue monthly meetings (Feb, Mar, April, May, June, July)	monthly
Quarterly updates from evaluator and RJIP coordinator	April 2015
Increase involvement and collaboration with CPS at monthly meetings	monthly
Final Report	July 2015
DPCAI Timeline	
Continue diversion program with strong intervention	2015
Continue to improve program processes	2015
Integrate evidence-based assessment tools and processes	Spring 2015
Expand “No Hit Zone”	
Corporal Punishment conference	
Planning	Jan-Nov 2015
Offer conference	Nov 2015
Continue to explore how the initiative fits into system-wide efforts to decrease disparities	2015
Seek funding to fully implement and evaluate when stabilized	2015
Evaluation Timeline	
Data analysis and report preparation for report to ABA <i>*added to workplan by ABA</i>	Jan/Feb 2015
Work with DAIT to develop automated report(s) in database to facilitate DPCAI staff ability to access the participant data and use regularly to generate reports; use participant data reports to monitor and improve program policies, procedures, and services going forward	March/April 2015
Conduct participant database data quality monitoring	April 2015
Collaborate with DPCAI team to draft outcome evaluation plan	April/May 2015
Present evaluation results to RJIP team and the Racial Disparities Subcommittee	April/May 2015
Analysis and data summary for final report to ABA	May 2015
Collaborate with RJIP Coordinator to prepare final report to ABA	June 2015

Have you gotten other criminal justice stakeholders to buy in to your reform and assist with the implementation process, or have you collaborated with existing projects and initiatives in your jurisdiction or in other jurisdictions doing similar work?

The work of the RJIP-Dane County Task Force is imbedded within a larger subcommittee of the Criminal Justice Council (CJC) the CJC-Racial Disparities Sub Committee. The benefits of adding Task Force reporting to the CJC-Racial Disparities Sub Committee are:

- further transparency with the public (meetings are noticed and minutes are posted)
- Greater Collaboration with criminal justice stakeholders
- Potential new partnerships and engagement of public

In that the Racial Justice Improvement Project itself is not a formal subcommittee, the RJIP team may be more agile in decision making and meeting schedules, lending itself to greater efficiency.

Human Services – Child Protective Services has started to attend meetings and engage with the RJIP Team. As we look at ways to increase racial equity, across systems, this engagement is necessary.

Dane County is a member of the Local and Regional Government Alliance on Race and Equity (GARE) which supports a racial equity framework that clearly articulates a vision for racial equity and the differences between individual, institutional and structural racism, as well as implicit and explicit bias.

Corporal Punishment Conference Partners:

University of Wisconsin School of Medicine and Public Health
 Office of Continuing Professional Development
 University of Wisconsin - Department of Pediatrics
 Dane County District Attorney's Office
 Dane County Criminal Justice Council
 Bureau of Justice Assistance
 American Bar Association - Racial Justice Improvement Project

In Collaboration with:

American Family Children's Hospital - Child Health Advocacy
 Dane County District Attorney - Deferred Prosecution Program
 Dane County Board of Supervisors

We have been not been able to locate another jurisdiction with a similar Child Abuse Initiative in the United States (although there is some indication that certain states have some corporal punishment diversions). Additionally, the cross-discipline collaborations and partnerships created between health and criminal justice leaders seem to be unique.

Have you met any new challenges in accomplishing your task force goals or project deliverables?

If so, have they been overcome? What were the lessons learned?

This RJIP project differs from some others nationwide in that its focus is not implementation of a checklist or new assessment tool, but rather system-level change through development of a model to address the roots the problem (upstream issues). Like some of the other RJIP projects, the evaluation focuses on the development of a pilot program, identification of participant measures to be used in future evaluation efforts, development of data collection processes, and planning for future outcomes evaluation.

While the current short-term evaluation effort could not be expected to produce findings related to participant outcomes for an intervention that is 12-24 months in length, it will inform future iterations of the project and potential expansion/replication of the program. When the program has been fully implemented and stable for two years and is ready for outcomes evaluation, participant outcomes related to recidivism and system-level impacts related to reductions in disparities should be measured.

At this time it is unknown the level to which the current project design will impact racial disparities overall in the criminal justice system. However, it is expected that over time the project will be able to show lower levels of recidivism for the offenders and lower levels of criminal justice or juvenile justice involvement for the victims. The hope is that the participant, community and system-level impacts will work in concert with other local racial disparities efforts to demonstrate systemic change in the current racial disparity present in the criminal justice system.

In Fall 2014 ABA suggested that RJIP team develop a program brochure for potential participants, but team discussions with ABA resulted in an alternative suggestion to instead develop educational materials for the audience of service system providers through print, web presence, and public service announcements. This issue has not yet been resolved. Human Services, Child Protection Services, has included reference to Dr. Stacey Patton's work (keynote from the 2014 Conference and Community Conversation) in their "Alternatives to Physical Punishment" brochure.

An additional challenge was that DPCAI required some assistance to implement and stabilize the project in preparation for future outcomes evaluation. The revised evaluation was in the best interest of the program and RJIP initiative, but the increased evaluation and reporting workload is estimated to have required nearly double the budget allocated. The UW Population Health Institute donated the additional time and resources to accommodate these changes during the course of the project. The Dane County DA's office, Dane County Equity and Criminal Justice Council Coordinator, and the RJIP Task Force members also donated significant staff resources to support this RJIP project.

Finally, the project encountered difficulties related to the structure of the funding mechanism -- providing RJIP funding for the evaluation without support for program staff or activities. ABA wished to impose requirements on DPCAI program operational policies and activities, when program activities were not funded and the RJIP evaluation tasks imposed significant burden on DPCAI and other DA's office staff.

At this point in the project, do you have any recommendations for eliminating or modifying any steps in the project's replication?

- Set a solid program foundation and let the program stabilize prior to initiating evaluation of outcomes. Considered in terms of the "stages of evaluation" outlined by Inga James during a Fall 2014 presentation to RJIP sites, this project would be in Stage 1 (preparation). Prior to subjecting a program to outcomes evaluation, assure that the intervention is stable and there is consensus on goals/objectives, policies and procedures, participant requirements, evidence-based assessment tools, interventions, and RJIP stakeholder understanding.
- Allow sufficient time to conduct a valid evaluation – this report on program effectiveness is being required less than one year after the 12-24 month intervention enhancement began and no participants have yet completed the enhanced services.
- Provide sufficient time/resources for necessary system-level collaboration to integrate program processes into the service system
- This intervention model would benefit from a designated district attorney (prosecutor) assigned to all DPCAI cases. Currently, the program coordinates with dozens of individual prosecutors with varying levels of support/interest/knowledge about the program. A single, designated

prosecutor on the team would improve speed of processing, level of communication, and overall efficiency for the entire team, as well as an improved model to benefit parents and child victims. Outside funding would be necessary to make this possible.

- **Garner High Level Support:**
Leaders within the criminal justice system and influencers in other fields must engage in partnerships, both within criminal justice and the greater community, moving towards racial equity.
- Determine how the effort fits into other ongoing efforts to reduce racial disparities.

To date, what amount of grant funds (if any) do you have remaining? Do you have plans to spend the remaining grant funds? Please explain.

All funds have been encumbered via our evaluation contract with the University of Wisconsin. (Simplified budget in separate attachment).

Please identify supplemental funding and technical assistance needs below. If requesting additional funds, please be very specific about your needs.

Insufficient Staffing::

Current staffing levels in the District Attorney's Office inhibit the speed and efficiency of the cases (stated above). A dedicated Assistant District Attorney would increase the ability of the overall success of project.

Outreach and Education:

Continued community conversation and engagement, via conferences, billboards, written materials and faith based meetings and "world café" engagement sessions, will need to lift the conversation beyond those involved in CPS and the criminal justice system. Frank conversations around race and culture are very challenging in general. As we add child rearing practices and family histories into the mix—they become even challenging. However, these conversations are necessary at the churches, dinner tables, and doctor's offices to truly be impactful.

2015 Conference Support

Transparency and Adaptability:

Through the robust discussion of program design, goals and objectives, and eligibility an increase in transparency between agencies has occurred. To increase impact, data collection and evaluation of program in future years will be critical to judge success and/or challenges. With the resources necessary, we will have developed collaborations (stakeholders and systems) necessary for adaptability.

Internal Capacity Building:

District Attorney staff (2) plus one RJIP member (CPS) would like to attend the following conferences:

The 29th Annual

San Diego International Conference on Child and Family Maltreatment

The 20th International Summit and Training on Violence, Abuse and Trauma

Listing of Attachments

1. Updated program description paper (will be attached to final 2015 report-not included at this time)
2. ACT parenting summary
3. Participant data tables
4. 2014 Corporal Punishment Conference participant satisfaction/feedback summary & links to PSA, No Hit Zone, etc.
5. Eligibility criteria
6. Brochures, press releases, etc.
7. Screen shots of database
8. Evaluation plan

Attachment 2: Summary of ACT Parenting Cohort #1 Results and Feedback**Dane County Deferred Prosecution Child Abuse Initiative (DPCAI)
Preliminary Summary of ACT Parenting Pre/Post Surveys
2014 Participant Cohort #1**

The Office of the Dane County District Attorney has implemented the Adults and Children Together (ACT) *Parents Raising Safe Kids Violence Prevention Program* for parents that are active in the Deferred Prosecution Child Abuse Initiative (DPCAI). The ACT Program is being offered to DPCAI participants referred for charges related to the use of excessive corporal punishment of a child who would be otherwise unable to afford the cost of parenting services in the community as part of the requirements of their Deferred Prosecution Agreement. The first cohort to receive the ACT Program completed the 12-session course in October 2014.

Surveys provided with the ACT curriculum are given to participants prior to beginning ACT and again when they have completed the program. The first cohort completed these pre-test and post-test surveys and UWPHI conducted a preliminary summary. Post-tests surveys were not collected for those participants that did not complete the program. Quantitative analysis is not possible due to the limited sample size; therefore, the preliminary results are being utilized for the purpose of program feedback and improvement only. A summary of the first and second cohort of ACT will be available for the June 2015 report.

At the end of the course, satisfaction surveys were also distributed to the participants that completed the ACT Program. Examination of satisfaction survey results reveals that all of the participants were very satisfied with the program. All participants found the program to be helpful and strongly agreed that the skills that they learned in the program will help them to be better parents. All participants also strongly agreed that they will use the techniques learned in the program in the future. Additionally, all participants found the facilitators to be helpful and said that they would recommend this program to others. The participants chose a variety of parts of the course that they found to be helpful including group discussions, the facilitator's explanations, and activities (such as the "Wheel of Feelings", airplane, collage, etc.). All participants chose the facilitator's attitude, learning new things and the materials as pieces that they liked most about the program. None of the participants chose making new friends, foods and snacks, or prizes and treats as parts that they liked about the program.

Suggestions for Improvement

Question 4 on the satisfaction survey asks: "What would you change in the parent program you just completed?" One participant mentioned that they would like "more space, more people to get other's inputs and ideas." The other participants said that they would not change anything, that the question was not applicable, or left the question blank.

Next Steps

As a next step, the DPCAI staff should review the satisfaction and pre/post survey items to ensure that the program met the desired goals and should make changes to the program as necessary prior to the beginning of the next cohort of ACT Parenting Program that will begin in early 2015.

Attachment 3: Participant Data Tables as of 12/31/2014
Prepared by the University of Wisconsin Population Health Institute

Table 1: Program Activity Overview						
<i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>						
	Defendant's Race				Overall	
	White/ Non-Hispanic		Persons of Color			
				#	%	
Total # Identified for Possible Participation <i>(includes admitted and determined eligible)</i>	27		34	61		
# Admitted	24	44%	25	56%	49	
Pending <i>(have not yet signed contract)</i>	2		1		3	
Active	19		22		41	
Completed	2		2		4	
No charges issued	1		1			
Charges dismissed	1		1			
Other <i>(for example: sent back to court prior to signing a contract)</i>	1		0		1	
					2	
Referral Type						
Direct referral	9		4		13	
Post-Plea	13		20		33	
Referral with reduction	2		1		3	
					6	
Length of Deferred Prosecution Agreement				N = 45		
12 months	9		12		21	
14-16 months	5		3		8	
18 months	6		6		12	
22 months	0		1		1	
24 months	1		2		3	
Average Length of DP Agreement	15.1 months		15.3 months		15.2 months	

Table 2: Participant Demographics				
<i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>				
	Defendant's Race		Overall (N=49)	
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	#	%
	#	#	#	%
Gender				
Male	16	10	26	53%
Female	8	15	23	47
Age				
17-25 years	1	1	2	4%
26-35 years	6	13	19	39
36-45 years	12	11	23	47
46+ years	5	0	5	10
<i>Average age in years</i>	<i>39 years</i>	<i>35 years</i>	<i>37 years</i>	<i>*</i>
Race				
White/non-Hispanic	24	0	24	49% *
African American	0	14	14	29
Native American	0	1	1	2
Asian	0	5	5	10
Hispanic	0	5	5	10
Marital Status				
Single	9	10	19	39%
Married	13	9	22	45
Domestic Partner	2	6	8	16
Number of Children				
None	1	0	1	2%
1	4	4	8	16
2	9	5	14	29
3	8	7	15	31
4	1	3	4	8
5	1	1	2	4
6	0	1	1	2
Unknown/Missing	0	4	4	8
<i>Average number of children</i>	<i>2.3</i>	<i>2.7</i>	<i>2.5</i>	
Current Residence				
Own home/apartment	17	20	37	76%
Relative home	5	1	6	12
Friend home	1	1	2	4
Homeless	0	1	1	2
Unknown/Missing	1	2	3	6

Table 2: Participant Demographics				
<i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>				
	Defendant's Race			
	White/ Non-Hispanic (N=24)	Persons of Color (N=25)	Overall (N=49)	
Education at Admission				
Some high school	1	3	4	8%
High school diploma	4	0	4	8
GED/HSED	1	2	3	6
Some college/1-2 years	8	9	17	36
Associate degree	1	0	1	2
College degree	4	1	5	10
Advanced degree	1	3	4	8
Unknown/Missing	4	7	11	22
Employed at Admission				
Full-time (30-40 hours)	19	15	34	70%*
Part-time (20-30 hours)	1	0	1	2
Part-time (< 20 hours)	3	0	3	6
Part-time (< 10 hours)	1	0	1	2
Homemaker	0	1	1	2
Unemployed	0	4	4	8
Unknown/Missing	0	5	5	10
Individual Annual Income				
0-\$5,000	1	2	3	7%
\$5-10,000	0	0	0	0
\$10-20,000	4	6	10	20
\$20-30,000	3	3	6	12
\$30-50,000	5	5	10	20
\$50-60,000	2	0	2	4
\$60,000+	4	1	5	10
Unknown/Missing	5	8	13	27

Table 3: Child Abuse Offense, Prior CPS Reports, and Adverse Child Experiences (ACE) Score <i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>				
	Defendant's Race		Overall	
	White/ Non-Hispanic	Persons of Color	N= 49	
	N= 24	N= 25	N= 49	
Current Offense/Charge:				
Physical abuse of a child – intentionally cause bodily harm	15	15	30	61%
Physical abuse of a child	6	3	9	19
Second degree recklessly endangering safety	1	0	1	2
Strangulation and suffocation	0	1	1	2
Misdemeanor battery	0	4	4	8
Disorderly conduct	2	2	4	8
Prior Child CPS Reports – ANY REPORT				
Will be available for 2015 report				
Prior Child CPS Reports – SCREENED IN				
Will be available for 2015 report				
Prior Child CPS Reports – SUBSTANTIATED				
Will be available for 2015 report				
Adverse Childhood Experiences (ACE) Score				
Will be available for 2015 report				

Table 4: Criminal History and Criminal Risk				
<i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>				
	Defendant's Race		Overall (N=49)	
	White/ Non-Hispanic	Persons of Color		
	N=24	N=25	N=49	
Hawaiian Proxy Risk Level				
0-4 (low risk)	21	19	40	82%
5-8 (high risk)	5	4	9	18
Hawaiian Risk Proxy Score				
2	12	4	16	33%
3	1	4	5	10
4	6	13	19	39
5	2	2	4	8
6	3	2	5	10
Three Components of the Hawaiian Proxy:				
Age at First Arrest				
24 or older	17	17	34	69%
21-23 years of age	0	2	2	4
20 or younger	7	6	13	27
Number of Prior Arrests				
0-2	22	22	44	90%
3-6	1	3	4	8
7 or more	1	0	1	2
Current Age				
38 or older	16	9	25	51%
34-37 years of age	2	5	7	14
33 or younger	6	11	17	35

Table 5: Participant Reasons Given For Using Corporal Punishment				
<i>Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014</i>				
	Defendant's Race			Overall (N=49)
	White/ Non-Hispanic	Persons of Color		
*duplicated count, multiple reasons possible	N=24	N=25	N=49	
Frustration	16	14	30	61%
Anger	14	14	28	57%
Using same method as own parents	9	11	20	41%
Other methods were unsuccessful	4	9	13	27%
Intoxicated	3	1	4	8%
Deter child from criminal justice system	0	2	2	4%
Teach child to "not act grown"	0	1	1	2%
Deter self-harming behavior	0	1	1	2%
Pressure from family or friends to use this method	0	1	1	2%
Lack of knowledge about cultural norms	0	1	1	2%

Table 6: Services Required as Part of DP Agreements				
<i>Summary of DPCAI Admissions from January 1, 2013 Through December 31, 2014</i>				
	Defendant's Race			Overall (N=49)
	White/ Non-Hispanic	Persons of Color		
Parenting/Psychoeducational Parenting	18	25	43	88%
ACT Parenting Classes	1	3	4	
Other Parenting Services	17	22	39	
<i>*Does not include participants who were not referred for services due to already being involved when starting DPCAI*</i>				
Family/Individual/In-Home Therapy	19	5	24	49%
Family Therapy	4	1	5	
Individual Therapy	10	3	13	
In-Home Therapy	5	1	6	
Aggression/Violence Treatment	4	7	11	22%
Certified Abuser Treatment	1	1	2	
Domestic Violence Treatment	0	1	1	
Generalized Aggression Treatment	3	5	8	
AODA Assessment/Treatment	3	2	5	10%
AODA Assessment	0	1	1	
AODA Treatment	3	1	4	
Other Services (medication management, Court Appointed Special Advocate (CASA), case management, employment assistance, mental health treatment)	2	4	6	12%
<i>*Duplicated count -- multiple service/treatment conditions can be assigned by DPP</i>				

Table 7: Description of Children Served through the DPCAI Initiative				
Summary of DPCAI Eligible Participants from June, 2013 Through December, 2014				
	Defendant's Race		Overall	
	White/ Non-Hispanic	Persons of Color		
	N=24	N=25	N=49	
Total # Of Children Involved In Case				
1	19	23	42	86%
2	4	1	5	10
3	0	1	1	2
Unknown/Missing	1	0	1	2
# Of Children Residing in Home at Time of Incident				
1	5	6	11	22%
2	8	10	18	37
3	8	7	15	31
4 or more	1	2	3	6
Unknown/Missing	2	0	2	4
Children Removed from Home as Result of Incident				
Yes	1	2	3	6%
No	23	23	46	94
Average Age Of Child(ren) at Time of Incident*	10 yrs	11 yrs	10 yrs (N=53)	
Race of Child(ren) Involved in Incident*				
White/non-Hispanic	24	7	31	59%
African American	0	14	14	26
Asian	0	3	3	6
Unknown/Missing	3	2	5	9
<i>*Duplicated count – multiple children can be involved in incident</i>				

Attachment 4: 2014 Corporal Punishment Conference participant satisfaction/feedback summary & links to Program Materials (PSA, No Hit Zone, etc.)

DPCAI 2014 Corporal Punishment Conference “Intent to Change” Participant Responses

Prepared by the University of Wisconsin Population Health Institute

Summary

The “Intent to Change” protocol distributed at the Cultural Context of Corporal Punishment Conference in June 2014 stated that: “It is a goal of the conference program planners and presenters to provide information that course participants can apply to the enhancement of their professional practice.” This protocol asked conference participants:

As a result of your participation in this activity, have you gained new information or understanding that will allow you to affect positive changes in your professional practice? If Yes - Please specify up to three changes you will be able to make:

The narrative responses to this question were analyzed thematically by the University Of Wisconsin Population Health Institute (PHI) to examine the ways in which the conference inspired participants to use and apply the content.

The categories of change identified from the participant responses related to:

- **Cultural factors and faith-based community:** Comments related to *cultural factors and faith-based community* highlighted the importance of engaging local African American churches and church leaders in discussions about corporal punishment and child abuse. Participant comments included strategies for conducting outreach to these churches and ideas for collaboration with churches and other community partners. Comments in this category also included suggestions for examining the cultural elements around corporal punishment, as well as incorporating the historical roots of corporal punishment into existing practices.
- **Sharing information learned at the conference:** Comments related to *sharing information learned at the conference* described a variety of ways to share the information from the conference in personal and professional settings. Many comments included specific ideas to share with others, as well as specific individuals that would benefit from the information shared. Comments also included ideas for incorporating the information into learning opportunities and into existing programs and practices. At future conferences, participants would benefit from specific guidance on ways to share the information with professional colleagues and incorporate the information into existing practices.
- **Applying learning to client interaction:** Comments related to *applying learning to client interaction* included many ideas for guiding conversations with clients including questions to ask and ways to approach difficult conversations with clients. Comments in this category also included ideas for modeling individual behaviors to set a good example for others and ways to interact with others that could have a positive effect on others resulting in decrease in corporal punishment.

- **Use of “frames”:** Comments related to the *use of “frames”* included ideas for incorporating this approach into interactions with clients. Participants found this helpful as a way to discuss corporal punishment issues with clients.
- **Improve approaches for educating parents:** Comments related to *improving approaches for educating parents* included suggestions for educating parents in places such as doctor offices and educating parents about the alternatives to corporal punishment. Comments in this section also included specific ideas for content to share with parents and strategies for approaching parents and families.
- **Individual impact:** Comments related to *individual impact* included discussions of ways to continue to increase their knowledge of issues around corporal punishment. Many comments were made about gathering more information based on topics discussed at the conference. Comments in this area included specific suggestions for content to be included in individual education and ways to use the education to inform current practices. At future conferences, participants would benefit from guidance on where to access additional information about conference topics.
- **Addressing corporal punishment in parenting groups:** Comments related to *addressing corporal punishment in parenting groups* included suggestions for ways to incorporate information from the conference into existing parenting groups being held around the community. Comments in this category also included ideas for creating new parenting groups and ideas for improving the effectiveness of existing parenting groups.
- **How to better identify abuse:** Comments related to *how to better identify abuse* included ways to use information from the conference to better discern the signs of corporal punishment. Comments in this section also included ideas for how to incorporate information about identifying abuse into existing practices.
- **Service system collaboration:** Comments related to *service system collaboration* included suggestions for better collaboration among various partners in the community (such as CPS, law enforcement, DA’s office, treatment providers, etc.). Comments in this section included suggestions for more collaboration and better collaboration among the community partners.
- **Creating a “No hit zone”:** Comments related to *creating a “no hit zone”* included ideas for creating new “no hit zones” in places throughout the community.
- **Other suggestions going forward:** Finally, conference participants had numerous *other suggestions going forward*. Comments included ideas for ways to continue the conversations held during the conference and ways to support this ongoing conversation. Other suggestions for improvement included ideas for ways to make changes to existing strategies and structures.

Participant Response Highlights

Anticipated Participant Changes Related to:

Cultural Factors and Faith-Based Community

- “Acknowledging the importance/power of black churches and using it as a resource.”
- “Work to establish relationships with key black churches.”
- “Reach out to black church leaders.”
- “Map out and do outreach to local church leaders – start the conversation.”
- “Continue with efforts to engage with African American churches in the county.”
- “Talk with faith based subcommittee of DVCCR.”
- “Connect with church leadership to discuss collaboration around parenting groups.”
- “Integrate historical roots of corporal punishment into DV curriculum.”
- “Have better understanding of why some cultures use corporal punishment.”
- “Consider public discussion in CAA (black history) month.”
- “Continue putting a high importance on cultural competence.”
- “Look for or create materials that are culturally appropriate.”
- “During intake process with defendants, delve deeper into their religious, cultural upbringing/beliefs.”
- “Ensure cultural issues are considered in appropriate cases.”

Sharing Information Learned At the Conference

- “I can and will use research to talk about ‘side effects’ of corporal punishment.”
- “Share specific strategies from today’s conference with colleagues at agency.”
- “Incorporate new information in MAC program.”
- “Open agency-wide open dialogue about corporal punishment.”
- “Inform other staff of importance of intervening in a positive, helpful way in situations before it escalates. (Help mom on computer, provide toy for child, and say understanding words to parent).”
- “Either have someone in to present a program or do some information displays.”
- “Continue the conversation with coworkers.”
- “Develop a method of setting corporal punishment free community standard at YWCA.”
- “Include information on positive parenting/negative corporal punishment in educational manuals.”
- “Goal/outcome = implement initiative hospital wide.”
- “Discuss the seminar info with every colleague I can.”
- “Incorporate these concepts into current clinical program.”
- “Discuss corporal punishment and the material from this conference with in-home family treatment teams and develop plan to better address issues with families.”
- “Diffuse knowledge to defendants/defense attorneys during plea negotiations.”
- “Share with families the 4 options vs. using physical discipline (establish a relationship, reinforce, avoid, last resort punish).”
- “Consider having school info session.”
- “Be more concrete with caregivers about the dangers of any corporal punishment.”
- “Share what was learned with fellow staff members, and for staff to consider how to integrate info into treatment.”
- “Use words, demonstrate how to use words, practice patience so children and adults can learn.”

- “Share info at unit meeting. Advocate for parent education/support groups in neighborhood and community centers.”
- “Pass on ‘framing’ as a tool for other professionals in field.”
- “Support internal office dialogue/education within our department.”
- “Discussions within churches we partner with.”
- “Talk to my neighbors.”
- “Talk to friends/family about corporal punishment.”

Applying Learning to Client Interaction

- “Ask better questions to understand parent’s thought process around using physical discipline.”
- “Use of thought-provoking questions with caregivers.”
- “Will always discourage and explain why not to use corporal punishment.”
- “Use cognitive dissonance with clients – while using empathy.”
- “Make fewer assumptions and ask more questions.”
- “Improve my ability to have the conversations with clients – utilize skills taught today (cognitive dissonance).”
- “Build a strong relationship with parents before providing challenging feedback.”
- “Use better strategies for talking to parents about discipline.”
- “Meet with parents for feedback on improving communication about sensitive topics like parenting/punishment.”
- “Demonstrate increased cultural awareness and empathy for families.”
- “Create cognitive dissonance for defendants about their own behavior.”
- “When meeting with individuals, to explore the fear behind the act.”
- “Listen to clients concerns/fears about how to implement new, non-abusive techniques.”
- “Remembering to ask ‘What was their fear’ when corporal punishment is used for self-reflection.”
- “Explore with families where their beliefs of corporal punishment originates.”
- “Ask more questions like ‘What does too far look like?’”
- “Use ‘I wonder’ questions from Dr. Aronson’s talk.”
- “Use ages and stages screening tool to help establish appropriate expectations. Work strategically with my moms to prevent frustrating situations.”
- “If I see stressed parents, offer to help prior to physical contact discipline.”
- “Continue to advocate for clients when experiencing institutional bias.”
- “Provide opportunity for CPS seekers to explore the roots of their beliefs about corporal punishment.”
- “Challenge literal transitions/interpretations of Bible with open questions and listening.”

Use of “Frames”

- “I now have words to use with families to help ‘reframe’ corporal punishment.”
- “Speaking with parents/families through ‘frames’.”
- “Frames utilization with parents in field.”
- “Use more varied frames with families I work with.”
- “Utilize different frames discussed when a client brings up spanking in my parenting group.”
- “Proactive discussions with parents using frames, research, etc.”
- “Introduce frames to use in talking with parents about corporal punishment to all CPS seekers.”
- “Framework for talking to mothers about corporal punishment.”

Improve Approaches for Educating Parents

- “Discuss discipline as part of every well child check.”
- “Post parenting/discipline information in exam room.”
- “Develop signage/poster speaking about abandoning corporal punishment.”
- “Bring up what else can be done instead of punishment.”
- “Discuss discipline in more specific terms with parents.”
- “Direct conversations about parenting strategies in foster homes that goes beyond ‘no hitting’.”
- “Study more and then share historical aspects of corporal punishment with parents.”
- “More facts, research to share with parents.”
- “Be better at educating families of the effects of child abuse (physical discipline).”
- “Discuss medical effects with parents in field.”
- “Educate parents re: their practices and beliefs to help develop alternatives.”
- “Engage non-offending parents in conversation about corporal punishment.”
- “Discuss brain development for kids who experience corporal punishment with parents.”
- “Evidence-based research related to help educate families.”
- “Work to connect parents to positive places for support.”
- “Provide education and support to families that use corporal punishment.”
- “Identify alternatives for parents – collect info from parents – community based research initiative.”
- “Engage and encourage families to address their stressors.”
- “Historical information to help work with families – culturally competent.”
- “Education programs on child development, positive solutions for families, social/emotional development.”
- “Provide families with alternatives to corporal punishment.”

Individual Impact

- “Now that I know, I can keep in mind what I’m doing that could be corporal punishment and change.”
- “Educate myself about the issue.”
- “I have always struggled with my personal views on corporal punishment as opposed to what I do as a worker, this presentation has not only changed my personal views but also has taught me how to more effectively discuss the implications or concerns of corporal punishment with my families.”
- “Have a candid, open, honest conversation about use of corporal punishment.”
- “Bring more resources to use as a professional to improve my practice.”
- “Engage in discussions within my community regarding roots of corporal punishment.”
- “Model non-violent conflict resolution/behavior with others.”
- “Research culture (do your homework).”
- “Find/know resources of community.”
- “Make an effort to discuss this issue more often.”
- “Learn more about brain development and share with clients.”
- “Gather information about religious/spiritual backgrounds.”
- “Continue to learn more effective ways to improve the conversation.”
- “Continue to educate myself in this area (trends, interventions, resources).”
- “Be more effective/culturally sensitive.”
- “Volunteer at DA office to learn alternatives.”

Addressing Corporal Punishment in Parenting Curriculum and Groups

- “Suggest ‘classes’ at Dane County Parent Council (DPCP).”
- “Educate! Incorporate in already scheduled programs.”
- “Learn training for parents program.”
- “Add material to parenting group curriculum to further or better address cultural considerations.”
- “Think through our parenting group and curriculum specifically related to corporal punishment.”
- “Create effective parenting classes. Use education through media, signs on busses, doctor’s office.”
- “Develop parenting programs that work.”
- “Start parenting group for non-mandated clients.”
- “Use/implement more ideas for parenting education/group topics.”

How to Better Identify Abuse

- “I am a sensitive crimes detective and knowing the signs of abuse and knowledge looking more at circumstances as a whole.”
- “Remember to watch non-verbal cues in children who developmentally appear to be acting age appropriately.”
- “Assess discipline practices of parents.”
- “Become more aware of the signs of corporal punishment abuse.”
- “Enhance corporal punishment assessments.”

Service System Collaboration

- “Better collaboration between DCDHS and system.”
- “Encourage more unification between DA, CPS, police and treatment providers.”
- “More collaboration among CPS, law enforcement, community, and justice/legal system.”

Creating a “No hit zone”

- “Collaborate with CPS social worker to present ‘No Hit Zone’ to practice council at UW Health.”
- “Implement ‘No Hit Zone’ at AFCH.”

Other Suggestions Going Forward...

- “Keep the conversation going.”
- “Plan the next community conversation.”
- “Recommend ‘sparethekids.com.’”
- “Better evaluation/acceptance to DPU program.”
- “Support diversion program efforts within our department.”
- “Search for future funding to expand program efforts.”
- “Being able to implement working with our agencies/not being afraid to push the envelope and have open conversations about culture.”
- “Diversity of staff (paid and volunteer) to have people who look like the clients/participants we serve.”
- “Use Zip +4 to identify need areas.”
- “Use more focus on other negative effects of corporal punishment other than physical injury and legal ramifications.”

Responses to 2014 Corporal Punishment Conference Participant Feedback Survey
Suggestions Useful for 2015 Conference Planning
Prepared by the University of Wisconsin Population Health Institute

Potential quotes to use on 2015 conference brochure/announcement

- “I left feeling inspired to make change not only in my work but also my community. She gave me to tools to apply change as well.”
- “All of the information was very useful, from highlighting the short and long term effect on corporal punishment to brainstorming about what solutions we could come up with for our personal jobs and our community as a whole.”
- “Thank you to the planning committee for developing this very important and useful training. I walked away with new information and greater insight into CP and the need for more awareness, education, and action around this issue.”
- “I came to the conference with an open mind. Overall the training met and exceeded my expectations. My knowledge of the back story of Corporal Punishment increased tremendously, including the research, science and the negative implications of engaging in Corporal Punishment as a form of discipline. The conference also gave me the tools I needed to be an agent for change.”
- “This conference was a great starting point for conversations in our community.”
- “I think this just starts the conversation that will continue for a long time.”

Participant Suggestions for Improvement of Future Conferences

1. Priority Conference Planning Action Items

- Include a child welfare professional(s) on the planning committee
- Plan to provide hard copies (or electronic access to copies) of the powerpoint materials at conference so attendees can focus on listening and have a place to take notes
- Improve advertising of conference through more advanced notice and to surrounding counties
- Provide more scholarships rather than providing food for lunch
- Conference length: some felt the information could have been provided in a half-day training, while others felt an additional day would have been beneficial
- Include a brief introduction of the agencies present at the training to increase knowledge of those attending about the services available in the community
- Some felt that content was too basic – depends upon knowledge base of audience
- More thoroughly describe the Racial Justice Improvement Project to audience

2. Specific Feedback on 2014 Content and Suggestions for Future Content

- Duplication of some content between speakers
- “I would have liked to have more information on how to gain credibility in the minority community.”
- “One thing I didn't hear anything about was getting to families that WEREN'T connected to churches. The most frequent scenario I see with Abuse/CP is when the new boyfriend physically abuses his non-biological child. Some strategies to address this problem would be helpful, i.e. help women identify guys who are a danger to their children.”

- “I was also confused when Dr. Fontes would describe a corporal punishment technique and then state that it's ‘not abuse’ but that she didn't see it as ‘ideal’. I have always known abuse as anything that uses power and control over someone else in a negative way, so maybe Dr. Fontes was instead to say that it's not ‘legally’ considered abuse or that the punishment might not cause long-term physical harm. I would still however consider all the forms of corporal punishment that she describe as ‘abuse’ and would caution her in stating that they are not.”

3. Better inform presenters about the characteristics of the audience so that they can tailor the content of their presentations to the audience

- “It would have been helpful if she would have known her audience and the goals of the day. I found the series of photographs she showed to be entirely useless. For anyone in that room that actually conducts examinations and documents abuse as part of their jobs, they have already had extensive training on the injuries and patterns to look for. For the rest of us, you don't have to prove that abuse happens. We all know this. To go through in in such a needlessly traumatizing way is arbitrary.”
- “I found the first half of the presentation to be basic in nature, considering the level of practitioners at the presentation. However, the second (afternoon) portion of her presentation was helpful and new to me. Was somewhat offended when she stated that we should do our ‘master's thesis’ on one of the studies she presented, which indicated to me that she may not have understood who her audience was.”
- “There were many people in the audience who work directly in the child welfare system including many CPS workers. The comments made by DA Ozanne indicating that the DA's office and Children's Hospital were partnering to teach non violent discipline techniques was a little off putting to those of us who have been doing that our entire career.’

4. Videos and pictures too disturbing for some in audience; mixed reactions to usefulness

- Many attendees indicated that the graphic nature of the photos and videos of child abuse were too intense, particularly those present who had trauma issues of their own. They suggested more pointed warnings to those in the audience, more sparing use of the photos, or to move through the photos more quickly to discussion. However, most thought they were educational and moving.
 - “It was tough seeing the videos, especially the ones where a child was being spanked with a belt. I could close my eyes to the image but my ears were another matter. That is a particular trauma trigger of mine - hearing it happens to others. I know you said people could leave the room if needed but by the time I knew what kind of video it was it was really too late to leave.”
 - “Photos were emotionally difficult to see but very educational and useful.”
 - “... the amount of pictures seemed a bit excessive.”

5. Mixed feedback on small group discussion format, with some enjoying the opportunity to share and others not

- “Dialogue with professionals from different agencies that I might not of had an opportunity to meet with (thank you for making us get up and work with someone else)!”
- “I like talking to other professionals that I do not work with on a day to day basis but did not like the way the small group discussions were set up. I would have rather talked about my thoughts with my co-workers than participants who are coming from a community very different than mine.”
- “Break down tasks in smaller chunks, then, give more time to actually create solutions.”

- “I don’t personally find conversing with strangers to be the best way to process information. I think it could be more useful to stay with people that you do actually work with every day in order to begin formulating a concrete plan for how we may be able to implement some of these practices within the spheres that we influence.”
- “Group discussion for a group this size were not helpful.”

6. Provide specific direction to attendees on how to share information gained after the conference (tools, powerpoints, handouts, train-the-trainer, etc.)

- “The biggest change I will make is to talk more with parents about corporal punishment and why they should make other choices. Up to this point I have said that we do not support it but have not taken the conversation any further. I plan to discuss it more and give them things to think about.”
- “I have a lot of tools to take back to my practice, which is often not found in many trainings.”
- “We will integrate material from Dr. Patton's presentation regarding the historical context of corporal punishment. I will present this material to our in-home family therapy teams and discuss how to incorporate this material into our programming with families. I will renew our commitment to providing services in a culturally competent manner.”
- “I will introduce it to our management team and we will consider how we can incorporate it into our client services.”

7. Conference Facility/Physical

- The meeting room was too cold
- “The screen could have been raised higher as it was difficult to see the bottom.”
- “I would have done better with two 10-minute breaks during the morning session. I was getting quite antsy between the first break and lunch time.”
- “The room was cold and lunch was not that good.”
- “Room did not lend itself to forming and reforming groups.”

8. Improving Participant Feedback Survey

- Possible need for Spanish version? One participant answered in Spanish
- Survey was perceived as too long
- Some survey questions stated ‘Click to write choice 1,2,3’ and respondents did not know what that meant.

Attachment 5: Eligibility CriteriaGeneral DPU Child Abuse Initiative Guidelines*

Elements	Not Eligible	Eligible
Severity	Intentional: torture, burns, broken bones, internal head trauma, internal organ damage, bite marks, poly victimization	Bodily harm as the result of excessive corporal punishment, with the exception of Intentional: torture, burns, broken bones, internal head trauma, internal organ damage, bite marks, poly victimization
Frequency	History of chronic excessive corporal punishment causing bodily harm to a child within past ten years**	Lacks chronic history of excessive corporal punishment
Accepting Responsibility	Not Accepting Responsibility	Is accepting responsibility
Prior Criminal Behavior	History of criminal convictions, formal supervision, or Deferred Agreements within past 5 years	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years
Prior CPS involvement	More than three prior CPS referrals (for similar conduct) resulting in recommendations for services, or more than 1 prior substantiated case	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and not more than 1 prior substantiated case.

DPU Child Abuse Initiative Three Tier Eligibility***

Elements	Pre-Charging	Post Charging - Dismissal	Post Charging - Reduction
Severity	Minimal bodily harm	Moderate harm as the result of excessive corporal punishment	More significant harm as the result of excessive corporal punishment
Frequency	Not more than two prior incidents of excessive corporal punishment causing bodily harm	Not more than three prior incidents of excessive corporal punishment causing bodily harm	Not more than three prior incidents of excessive corporal punishment causing bodily harm
Accepting Responsibility	Accepts responsibility	Accepts responsibility	Accepts responsibility
Prior Criminal Behavior	None	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years; no history of assaultive convictions	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years
Prior CPS Involvement	Not more than two prior CPS referrals (for similar conduct) resulting in recommendations for services and no substantiated cases.	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and no substantiated cases.	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and not more than 1 prior substantiated case.
Child Protection	No formal court order; defendant agrees to DPU contract terms of no use of physical punishment	Court ordered signature bond agreeing to minimum of no use of physical punishment	A minimum of Court ordered signature bond agreeing to no use of physical punishment – could involve no contact provision

* These guidelines are subject to change while program continues to develop. Additionally the director maintains ability to make exceptions when compelling circumstances exist.

** Chronic excessive corporal punishment: evidence of more than three incidents resulting in bodily harm

*** Contingent on compliance with WI State Statutes Chapter 950 victim's rights

Attachment 6: Brochures, press releases, etc.**MEMORANDUM OF UNDERSTANDING**

between

Dane County District Attorney's Office

and

Dane County CASA, Inc.

WHEREAS, Dane County CASA, Inc. ("CASA") is an organization that assigns highly trained, well-supported community volunteers to advocate for the safety, permanency, and well-being of children who are under the authority of the Dane County Juvenile Court ("the Court") due to situations of abuse and neglect;

WHEREAS, CASA entered into a Memorandum of Understanding with the Court in 2013 (the "2013 MOU") that set forth certain terms of the relationship between CASA and the Court, and authorized the CASA program to continue performing certain services in the Court and for children under the Court's jurisdiction;

WHEREAS, CASA is an independent not-for-profit organization that is able to provide other services and pursue other activities consistent with its mission beyond those within the jurisdiction of the Court and encompassed within the 2013 Memorandum;

WHEREAS, the Dane County District Attorney's Office (the "DA's Office") is launching a Deferred Prosecution Program (the "DP Program") that will serve parents who encounter the criminal justice system following an arrest for physical abuse to a child which resulted from the use of excessive corporal punishment;

WHEREAS, The Dane County DA's Office continues to respect all individual's rights to participate in diversion programming regardless of race, color, national origin, sex, religion, disability and age. However, due to the disproportionate number of minority offenders and victims who are referred to the DA's Office, it is expected that this initiative will impact short-term and long-term racial disparities in the criminal justice system;

WHEREAS, the DP Program's mission includes (i) providing eligible offenders with an alternative to the formal criminal justice response to physical abuse of a child, while recognizing that there are perceptions in various cultures of corporal punishment as an acceptable form of discipline; (ii) attempting to influence positive change utilizing culturally responsive interventions; (iii) reducing the number of children who are victims of physical abuse within the context of corporal punishment; and (iii) offering parents/defendants and children services in a timely and meaningful manner, among others;

WHEREAS, the DP Program will allow for the expedient settlement of charges against eligible candidates for deferred prosecution who participate in the DP Program;

WHEREAS, the DA's Office will provide services for participants in the DP Program and their children; and

WHEREAS, the participation of CASA volunteers as advocates for the safety, permanency, and well-being of the children of DP Program participants would be a valuable addition to the services provided in the DP Program;

THEREFORE, IT IS AGREED that the DA's Office and CASA, through this Memorandum of Understanding ("Memorandum"), herein set forth certain terms of their relationship, and authorize CASA to perform certain services for the DA's Office and for the children of participants in the Program.

SECTION I - CASES FOR WHICH CASA SERVICES MAY BE PROVIDED

CASA may agree, on the request of the DA's Office, to provide services for cases in the DP Program advocating for the safety, permanency, and well-being of the children of DP Program participants.

SECTION II - ROLE AND RESPONSIBILITIES

On each case to which the CASA program is assigned by the DA's Office, a CASA volunteer or representative shall:

- A. Coordinate with the DA's Office social worker to obtain information about the case;
- B. Provide the child, the child(ren)'s family, and/or the child's caregiver(s) information about the CASA program, as possible and appropriate;
- C. Conduct approximately weekly visits with the child(ren) in their current placement, at the home of another caregiver or family member, in the community, or at school, as appropriate;
- D. Provide regular reports to the DA's Office with information and observations about the case, and when appropriate, recommendations based on advocacy for the child(ren)'s safety, permanency, and well-being;
- E. Correspond and collaborate with other service providers, caregivers, and professionals on the case to further advocate for the child(ren)'s safety, permanency, and well-being.
- F. Attend team meetings for the case when possible.

The CASA program maintains certain policies and procedures to which all CASA volunteers are asked to adhere in their CASA service. The CASA program will make best efforts to set and maintain highest standards for confidentiality and quality advocacy through enforcement of these policies and procedures.

SECTION III - IMPLEMENTATION OF VOLUNTEER ACTIVITIES

A. SELECTION

CASA staff will recruit CASA volunteers based on the qualifications set forth in sec. 48.07(5)(b) and 48.236(2), Wis. Stat., as well as any additional criteria that CASA staff deem appropriate for the identification, selection, and screening of CASA volunteers. Background checks will be conducted on all potential volunteers through the Department of Justice (“DOJ”), Department of Transportation (“DOT”), local law enforcement, and human service agencies. Personal and professional references will also be checked. CASA may require additional information if needed.

B. TRAINING AND SUPERVISION

CASA staff are responsible for volunteer management duties including training, assignment, and supervision. CASA staff will conduct initial and on-going in-service training for CASA volunteers and certify the readiness of those who complete the training program to begin volunteer service. Training will be provided on relevant topics. CASA staff will also assign CASA volunteers to cases and will supervise the volunteers’ work. Program staff will evaluate volunteers six months after assignment of their first case and yearly thereafter.

C. APPOINTMENT

After a CASA volunteer has been trained and approved by CASA, the Court will conduct a swearing-in ceremony authorizing the CASA volunteer to serve as an Officer of the Court. CASA staff will assign CASA volunteers to individual cases in the DP Program as appropriate in collaboration with the DA’s Office, and notify the case parties when an assignment is made.

D. INFORMATION GATHERING AND CASE MONITORING

To the extent allowed by Wisconsin state statute and deemed appropriate by the DA’s Office and CASA, CASA volunteers will have access to information relating to the child, including but not limited to Alcohol and Other Drug Abuse (“AODA”) assessments, psychological exams, school records, law enforcement records and permanency plans.

The CASA volunteer assigned to a case will contact the social worker to schedule an initial case consultation in order to review the background of the case, to identify information sources already contacted, to identify key issues, and to discuss ways in which the CASA volunteer can assist the social worker in carrying out the objectives of the DP Program. The social worker will notify the CASA volunteer of any significant information relating to safety issues. The social worker will share case related information with the CASA volunteer on a timely basis.

A CASA volunteer that obtains access to any report or record regarding the child shall keep the information contained in the report or record confidential and may disclose that information only to the DA's Office.

The CASA volunteer will make arrangements to observe and interview, if appropriate, the child, and can be assisted in making those arrangements by CASA program staff and/or the social worker. Depending upon the facts of the case, other relevant and appropriate persons to be interviewed or observed may include school personnel, social workers, parents, family members, other relatives, foster parents, medical and psychological care providers and other service providers.

E. REPORTING

CASA volunteers are mandated reporters per sec. 48.981(2), Wis. Stat. CASA's volunteer training shall include training on the mandatory reporter role.

CASA volunteers will write regular reports under the supervision of CASA program staff that will be provided to the DA's Office. CASA volunteers may be required to provide verbal reports during meetings.

F. IMMUNITY FROM LIABILITY

Pursuant to section 48.236(5) of the Wisconsin Statutes, a "volunteer court-appointed special advocate designated under sub. (1) or an employee of a court-appointed special advocate program recognized under s. 48.07(5) is immune from civil liability for any act or omission of the volunteer or employee occurring while acting within the scope of his or her activities and authority as a volunteer court-appointed special advocate or employee of a court-appointed special advocate program."

Immunity from liability is granted to CASA volunteers and CASA staff under sec. 48.236(5), Wis. Stat., and, to the extent allowed under Wisconsin law, is extended to all activities undertaken by CASA volunteers pursuant to this Memorandum.

SECTION IV - WORKING RELATIONSHIPS

- A. CASA staff will supervise CASA volunteers and facilitate the interaction of the CASA volunteers with the DA's Office and any other stakeholders.
- B. CASA volunteers will maintain consistent communication with and will seek guidance and assistance from CASA program staff in the performance of their duties.
- C. When possible, the DA's Office will notify the CASA program of meetings or hearings relevant to the case.
- D. The DA's Office will remain accessible to CASA program staff on an as-needed basis to facilitate the smooth and effective participation of CASA volunteers in the DP Program.

- E. CASA program staff may accompany CASA volunteers during meetings and may substitute for the volunteer if the volunteer is unable to attend.
- F. CASA and the DA’s Office will maintain open lines of communication with one another and within their own organizations to support the effective management and operations of CASA’s involvement in the DP Program.

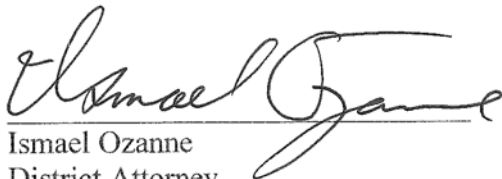
SECTION V – OTHER ACTIVITIES PERFORMED BY CASA

This Memorandum applies only to the activities performed by CASA with respect to the DP Program in partnership with the DA’s Office; it does not in any way limit CASA’s ability to undertake any other activities. CASA is an independent not-for-profit organization. As such, CASA may provide other services and pursue other activities consistent with its mission beyond those encompassed within this Memorandum.

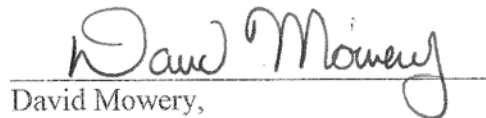
This Memorandum may be executed in counterparts, each of which shall be deemed an original, and all of which together shall constitute one and the same instrument.

Date: 6-17-14

Date: 6-12-2014



 Ismael Ozanne
 District Attorney,
 Dane County District Attorney’s Office



 David Mowery,
 Executive Director, Dane County CASA, Inc.

<p style="text-align: center;">MEMORANDUM OF UNDERSTANDING REGARDING RELEASE OF CONFIDENTIAL RECORDS</p>

**MOU Between the Dane County District Attorney's Office, Dane County
Department of Human Services, and Dane County Corporation Counsel
Regarding Release of Confidential Records In Accordance With
Chapters 48, 938 and 905 of the Wisconsin Statutes**

This Memorandum of Understanding (MOU) between the Dane County District Attorney's Office (DA), Dane County Department of Human Services (DCDHS), and Dane County Corporation Counsel governs the release of confidential records in accordance with Chapters 48, 938 and 905 of the Wisconsin Statutes. This agreement is entered into as of 1-1-12, and shall remain in effect until terminated in writing by either party upon written notice to the other.

Introduction

One of the paramount goals of the Children's Code is the protection of children from abuse and neglect. See § 48.01(1) Wis. Stats. The timely and efficient investigation and prosecution of alleged child abuse and neglect is integral to the realization of this legislative mandate. The DA and DCDHS recognize that the confidential exchange of information between the DA, DCDHS, and law enforcement is essential to successful prosecution of crimes against children and the protection of children in Dane County.

Law

Section 48.981(7)(a), Wis. Stats. sets forth the general rule that all child abuse and neglect reports made to the county child welfare agency and the records of the investigation conducted by the agency must remain confidential. There are several listed exceptions to this general rule of confidentiality that are intended to facilitate cooperation between the various agencies involved in the child welfare system. One of the exceptions permits the release of confidential information by the county agency to the DA and law enforcement for use in related criminal or delinquency investigations or prosecutions. See § 48.981(7)(a)8, Wis. Stats. Sections 48.78(2)(b) and 938.78(2)(b), Wis. Stats. also permit the confidential exchange of client information between a county agency and law enforcement regarding an individual in the care or legal custody of the county agency.

Definition of Record

Section § 48.981(1)(f), Wis. Stats. defines the child abuse/neglect record maintained by the county child welfare agency as follows: "...any document relating to the investigation, assessment and disposition of a report under this section."

Third-Party Records Excluded

In consultation with legal counsel and pursuant to DCDHS policy, DCDHS has determined that for purposes of the re-release of information from its confidential files, the release of records governed by §§48.981, 48.78 and 938.78, Wis. Stats. may not include any document created by an entity other than the DCDHS if the "third party"

<p style="text-align: center;">MEMORANDUM OF UNDERSTANDING REGARDING RELEASE OF CONFIDENTIAL RECORDS</p>

records are confidential and there is no applicable confidentiality or privilege exception authorizing the release of the “confidential third party” records. In such cases, DCDHS will advise the DA of their existence so that the DA can seek their release in accordance with applicable law. The confidentiality of health care records, AODA treatment and school records is protected by both federal and state law. Without the appropriate written client consent or court authorization, DCDHS is prohibited from releasing these “third-party generated” records to either the DA or to law enforcement. Therefore, this MOU *does not apply* to the release of these “third-party” records.

Juvenile Court Records Excluded

This agreement *does not apply* to the release of juvenile court documents, including court-ordered evaluations, court orders, case plans and all dispositional reports, the release of which is governed by §§48.396(2) and 938.396(2), Wis. Stats.

Terms of Agreement

In accordance with the provisions of Ch. 48 and 938, Wis. Stats., the DA and DCDHS agree that the following will govern the routine exchange of otherwise confidential child protection and delinquency records between the parties hereto:

1. Reports of child abuse/neglect and the investigative records created as a result of those reports as defined above will be provided to the DA or law enforcement upon request during the course of the DA's child abuse investigation or prosecution.
2. DCDHS child abuse/neglect records released pursuant to paragraph 1 above will include the records related to the current alleged child abuse/neglect report and investigation. Upon request of either the DA or law enforcement, records related to any previous child abuse and neglect reports/investigations regarding the subject of the current report and investigation shall also be released. The DA will use these earlier reports/investigation records for the purpose of assessing caregiver patterns of behavior and responses to prior service interventions, and to make appropriate charging decisions and plea/sentencing recommendations. Records from open files may be requested from the current intake worker. Records of closed files may be requested from the DCDHS's legal records custodian.
3. Records created by DCDHS for disposition, or after the disposition of any CHIPS case, will be provided to the DA pursuant to §48.981(7)(a)8, Wis. Stats., as requested to further a child abuse investigation or prosecution. Records sought for other law enforcement or prosecution purposes will be provided in accordance with §§ 48.78(2)(b) or 938.78(2)(b), Wis. Stats. The DA may re-disclose information obtained in accordance with this agreement only to further the purpose of a criminal or juvenile court prosecution. Any other re-disclosure must comply with Wisconsin Statutes or a juvenile court order.

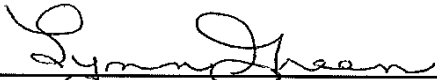
**MEMORANDUM OF UNDERSTANDING
REGARDING RELEASE OF CONFIDENTIAL RECORDS**

4. Records and/or reports stored electronically will be sent electronically and saved in the DA's internal electronic file system; hard copies will be made and stored as necessary. The DA and law enforcement will maintain the confidentiality of these records as required by §§48.981, 48.78 and 938.78, Wis. Stats.

5. The DA will distribute records to defense counsel appearing in any related criminal or delinquency prosecution through standard discovery procedures. Said records may be used in criminal court under the standard rules of evidence and in accordance with Ch. 905, Wis. Stats. The DA agrees that where any such confidential information is released pursuant to this agreement and used in open court, the DA will request that the court seal the confidential record to prohibit unauthorized re-disclosure.

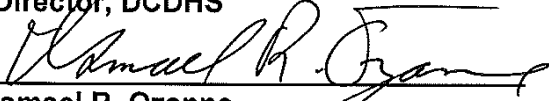
6. The DA acknowledges that DCDHS has discretion to release child abuse/neglect reports, as well as the records of the investigation and disposition of the report, to the "subject" of the report (§. 48.981(7)(a)1. Wis. Stats.), the "subject's" attorney (§ 48.981(7)(c), Wis. Stats.), and to a parent, guardian or legal custodian of the child who is the subject of the report (§ 48.981(7)(a) (3m), Wis. Stats.). However, in cases where DCDHS is involved in a joint investigation with law enforcement, if DCDHS contemplates a discretionary release of information, they must first consult with the Assistant District Attorney (ADA) assigned to any pending investigation or prosecution. If that ADA is unavailable, DCDHS must then first consult with the Felony Unit or Juvenile Unit Deputy District Attorney before the information is released. The DA also acknowledges that the information from a report/record must be released to any party in a Ch. 48 or Ch. 938 proceeding, pursuant to the discovery provisions applicable to juvenile court proceedings (§§. 48.293/938.293, Wis. Stats.).

7. DCDHS employees (including but not limited to social workers, case managers, after-care workers and others) who have a professional connection to a child who is the subject of an investigation or prosecution are permitted to speak with DA staff regarding the content of the records that are the subject of this MOU.



Lynn Green
Director, DCDHS

7-15-14
Date



Ismael R. Ozanne
District Attorney

7-24-14
Date



Marcia MacKenzie
Dane County Corporation Counsel

7-25-14
Date

“No Hit Zone” Press Release

Dane County District Attorney Ismael Ozanne is proud to announce that the District Attorney’s Office, including its public lobbies, is now a **No Hit Zone**. The **No Hit Zone** initiative stems from the District Attorney’s Office commitment to reducing the use of corporal punishment to discipline children because of the proven negative outcomes associated with such punishments. Today, we know that corporal punishment of children puts children at risk of developing increased aggression, antisocial behavior, and mental health problems as well as physical injury¹. Ending the use of corporal punishment will reduce the risk that any given child will suffer child abuse, or engage in criminal conduct as an adult or juvenile.

No Hit Zones represent an explicit and public call to all people in those environments to refrain from the use of violence. The purpose of the Dane County District Attorney’s Office **No Hit Zone** is to create and reinforce an environment of safety and comfort for all people who come into the District Attorney’s Office and its public spaces. The District Attorney’s Office invites other agencies, businesses, schools and families to decide that they, too, want to live, work and learn in **No Hit Zones**.

With this commitment in mind, the Dane County District Attorney’s Office joins children’s hospitals across the country, such as the University of Louisville-Kosair Children’s Hospital, University of Michigan - C.S. Mott Children’s Hospital, Children’s Mercy Hospitals in Kansas, and Gundersen Health System in La Crosse, WI, in establishing a safe and violence free zone, especially for children, with the introduction of the **No Hit Zone**.

¹ Gershoff, E. T. (2008). *Report on Physical Punishment in the United States: What Research Tells Us About Its Effects on Children*. Columbus, OH: Center for Effective Discipline.

Online Resources:

Report on Physical Punishment in the US

www.nospank.net/gershoff.pdf

9 Steps to More Effective Parenting

www.uwhealthkids.org/kidshealth/parents/positive-parenting/family-life/nine-steps-to-more-effective-parenting/22252.html

Discipline Ages 0-13 www.uwhealthkids.org/kidshealth/parents/emotions-behavior/behavior/disciplining-your-child/21713.html

www.uwhealthkids.org/kidshealth/parents/qa/parenting/how-can-parents-discipline-without-spanking/32826.html

Discipline Without Spanking

www.uwhealthkids.org/kidshealth/parents/qa/parenting/how-can-parents-discipline-without-spanking/32826.html

Essentials for Parenting from the CDC

www.cdc.gov/parents/essentials/index.html

The Center for Effective Discipline—Parent support materials www.stophitting.com/index.php?page=trainingmaterials

www.stophitting.com/index.php?page=trainingmaterials

Stacey Patton, PhD: Spare The Kids

www.sparethekids.com/

Play Nicely www.playnicely.org

Local Resources:

Center For Families www.centerforfamilies.org/

Family Resource Center www.fsrcdane.org/

Family Service Madison www.fsmad.org/

Office of Child Care and Family Resources @ UW www.occfr.wisc.edu/

The Rainbow Project www.therainbowproject.net

UW Health www.uwhealthkids.org/

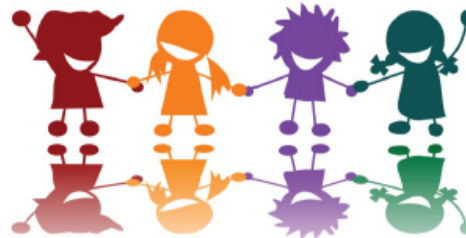


Dane County DA's Office

215 S. Hamilton Street, Room 3000

Madison, WI 53703

(608)266-4211



The No Hit Zone is designed to promote a non-violent and safe environment for all members of the public visiting the DA's Office.

NO HIT ZONE

Dane County

District Attorney's Office

www.countyofdane.com/da



215 S. Hamilton Street, Madison, WI 53703

What is A No Hit Zone?

The Dane County District Attorney's Office is a **No Hit Zone**. This initiative is an extension of public health and safety policies that serve to promote wellness in our community. This means that we do not allow hitting of any kind: by adults or children, including parents hitting or spanking children as part of discipline.

Why Is the Dane County District Attorney's Office a No Hit Zone?

Parents visiting the Dane County District Attorney's Office are often stressed and uncertain. Behaviors of young children intensify these feelings and put parents at risk of engaging in physical punishment. Our goal is to promote a non-violent environment for everyone. Our hope is that this initiative will grow to include communities and families throughout Dane County in an effort to reduce the overall use of physical punishment and the proven negative outcomes including future involvement in the criminal justice system.

Did you Know...

- 1) Physical punishment does not improve behavior in the long-term. It actually leads to more disobedience and aggression in children.
- 2) Hitting or spanking teaches children to use violence to solve problems.
- 3) Using violence as punishment leads to children doing poorly in school and lacking the ability to concentrate.
- 4) Children that experience physical punishment are more likely to become involved in delinquency and criminal behavior.
- 5) Children that experience or see violence view the world as dangerous and scary.
- 6) Experiencing violence as children leads to physical and mental health problems as adults.
- 7) Children that have been physically punished may have difficulty forming healthy attachments and may not be able to trust other people.
- 8) Parents who use physical punishment with their children are at nine times greater risk of physically abusing their child.

Gershoff, E. T. (2008). *Report on physical punishment in the United States: What research tells us about its effects on children*. Columbus, OH: Center for Effective Discipline.

Zolotor A, Theodore A, Chang J, Berkoff M, Runyan D. *Speak Softly - and Forget the Stick: Corporal Punishment and Child Physical Abuse*. 2008. *American Journal of Preventive Medicine* 2008; 35(4) 364-369.

Tools parents can use

- ◆ It's normal for children to get bored waiting. Bring their favorite toy or activity to keep them occupied.
- ◆ Talk to your child and explain why they are asked to behave a certain way; have realistic expectations.
- ◆ Read to your child.
- ◆ Give your child lots of descriptive praise for good behaviors.
- ◆ Teach your child how to resolve conflict without violence.
- ◆ Do something for yourself each day to relieve stress.
- ◆ Set clear limits on your child's behavior; give clear instructions about misbehavior
- ◆ Ask for help if you need it.

We ask everyone who works at or visits the Dane County District Attorney's Office to respect the **No Hit Zone** policy and encourage everyone to avoid hitting others, especially children, in their daily lives.

***Special thanks to the university of Louisville for lending their expertise and materials for furthering No Hit Zones.*

Recursos en la Web

Report on Physical Punishment in the US

www.nospank.net/gershoff.pdf

Nueve pasos para una crianza más eficaz <http://www.uwhealthkids.org/kidshealth/parents/para-padres/paternidad-y-maternidad-positiva-ser-mejores-padres/nueve-pasos-para-una-crianza-más-eficaz/80816.html>

Disciplinando a su hijo <http://www.uwhealthkids.org/kidshealth/parents/para-padres/paternidad-y-maternidad-positiva-ser-mejores-padres/disciplinando-a-su-hijo/25897.html>

Discipline Without Spanking

www.uwhealthkids.org/kidshealth/parents/qa/parenting/how-can-parents-discipline-without-spanking/32826.html

Essentials for Parenting from the CDC www.cdc.gov/parents/essentials/index.html

The Center for Effective Discipline—Parent support materials www.stophitting.com/index.php?page=trainingmaterials

Stacey Patton, PhD: Spare The Kids

www.sparethekids.com/

El programa de Play Nicely <http://www.childrenshospital.vanderbilt.org/services.php?mid=4772>

Recursos Comunitarios

Center For Families www.centerforfamilies.org/

Family Resource Center www.fsrcdane.org/

Family Service Madison www.fsmad.org/

Office of Child Care and Family Resources @ UW www.occfrc.wisc.edu/

The Rainbow Project www.therainbowproject.net

UW Health www.uwhealthkids.org/



Oficina de la Fiscalía
del Condado de Dane
215 S. Hamilton Street #3000
Madison, WI 53703
(608)266-4211



La Zona de No Pegar se diseñó para promover un ambiente seguro y sin violencia para todos que visitan a la Oficina de la Fiscalía.

ZONA DE NO PEGAR

Oficina de la Fiscalía
del Condado de Dane

<https://www.countyofdane.com/da>



215 S. Hamilton Street, Madison, WI 53703

¿Que es una Zona de No Pegar?

La Oficina de la Fiscalía del Condado de Dane es una **Zona de No Pegar**. Esta iniciativa es un extensión de la salud pública y de las políticas de seguridad, que sirven para promover bien estar en nuestra comunidad. Esto significa que no permitimos que ninguna persona, ya sea adulto o niño, le pegue de ninguna manera a otra persona. Tampoco se permite que los padres peguen o den nalgadas a sus hijos como forma de disciplina.

¿Porque es la Oficina de la Fiscalía del Condado de Dane una Zona de No Pegar?

Los padres que visitan a la Oficina de la Fiscalía del Condado de Dane suelen sentirse estresados e inciertos. El comportamiento de los niños pequeños intensifica estos sentimientos y pone a los padres al riesgo de usar disciplina física. Nuestra meta es promover un ambiente sin violencia para todos. Nuestra esperanza es que esta iniciativa se desarrolle para incluir comunidades y familias por todo el Condado de Dane en este esfuerzo de reducir el uso de castigo físico y los resultados negativos comprobados, incluyendo el involucramiento en el futuro con el sistema de justicia penal.

Sabe que ...

- 1) Los castigos físicos no mejoran el comportamiento al plazo largo. En realidad promueva desobediencia y agresión en los niños.
- 2) Pegar o dar nalgadas enseña a los niños usar violencia para resolver sus problemas.
- 3) Usando violencia como castigo resulta que los niños salgan mal en la escuela y que carezcan de la habilidad de concentrarse.
- 4) Los niños que han recibido castigo físico son más probables de participar en delincuencia y comportamiento criminal.
- 5) Los niños que experimentan por si mismos o vean a violencia contra los otros perciben al mundo como un lugar peligroso y espantoso.
- 6) Haber experimentado violencia como niño promueva problemas físicos y mentales después, como adulto.
- 7) Puede ser difícil para un niño que ha recibido castigo físico formar apegos saludables y poder confiar en los otros.
- 8) Los padres quienes usan castigo físico con sus hijos llevan un riesgo nueve veces mas grande de abusar físicamente a su hijo.

Gershoff, E. T. (2008). *Report on physical punishment in the United States: What research tells us about its effects on children*. Columbus, OH: Center for Effective Discipline.

Zolotor A., Theodore A., Chang J, Berkoff M., Runyan D. Speak Softly – and Forget the Stick: Corporal Punishment and Child Physical Abuse, 2008. *American Journal of Preventive Medicine* 2008; 35(4) 364-369.

Mecanismos de acción para los padres

- ♦ Es normal que los niños se aburran esperando. Lleve su juguete favorito u otra actividad para distraerles.
- ♦ Hablar con su hijo y explicar porque pide que se comporte de cierta manera. Mantener expectativas razonables.
- ♦ Leer a su hijo.
- ♦ Dar elogios descriptivos a su hijo para su buen comportamiento.
- ♦ Enseñar a su hijo resolver los conflictos sin violencia.
- ♦ Hacer algo para si mismo cada día para aliviar el estrés.
- ♦ Poner limites en el comportamiento de sus hijos. Darles instrucciones claras sobre su mal comportamiento.
- ♦ Pedir ayuda si lo necesita.

Pedimos a todos que trabajan o visitan a la Oficina de la Fiscalía del Condado de Dane que respeten la política de la Zona de No Pegar y animamos a todos que eviten pegar , especialmente a los niños, en su vida diaria.

**Muchas gracias a la Universidad de Louisville por haber compartido su experiencia y materias para promover las Zonas de No Pegar.

Attachment 7: Partial Screen Shots of DPCAI Participant Database (not all drop-downs or subtables included)
Data system developed by the Dane County District Attorney's Office Information Technology and the University of Wisconsin Population Health Institute

DPCAI Screen shots November 2014

The screenshot displays a web application window titled "DPU Case Info". The main heading is "DPU Case Information". A "Save" button is located in the top right corner. Below the heading is a horizontal navigation bar with tabs: "General Case Overview", "Participant Information", "Fees/Restitution", "Corporal Punishment", "Victim Information", "Conditions And Treatment", "Chrono Log", and "Case Notes". The "Participant Information" tab is selected. The form contains several input fields: "ID" with a "(New)" button and a red asterisk indicating a required field; "Last Name*", "First Name*", "Middle*", and "Suffix*" (all with red asterisks); "DOB*", "Age as of today", "Gender*" (with a dropdown arrow), and "Race From PROTECT Case*" (all with red asterisks); "DPU Case #*" (with a red asterisk); and "Date Offered Intake/Pre-Screen Appt". A text box on the right side of the form contains the instruction: "To associate additional DA case numbers to the DPU case, please manually add them below." Below this text is a "DA Case #" input field. The bottom of the screen shows a status bar with "Record: 2 of 2", "Filtered", a search box, and "Num Lock".

Main-Switchboard | **DPU Case Info**

DPU Case Information

Save

* DPU Case # <input type="text"/>	Date Offered Intake/Pre-Screen Appt <input type="text"/>	<input checked="" type="checkbox"/> Has Attorney
* Referral Type <input type="text"/>	Pre-Screen Assessment Date <input type="text"/>	<input checked="" type="checkbox"/> Referred for SPD Consult (Date)
Date of Law Enf. Referral <input type="text"/>	Intake Assessment Date <input type="text"/>	<input checked="" type="checkbox"/> Legal Consult Received (Date)
Date DPU Determined Eligib. <input type="text"/>	<input type="checkbox"/> Ch950Compliance <input type="text"/>	Represented By <input type="text"/>
Date Offer Made to Def <input type="text"/>	<input type="checkbox"/> Safe Harbor Interview <input type="text"/>	Judge <input type="text"/>
Date of Defendant Response <input type="text"/>	MDT Collaboration Date <input type="text"/>	

All Eligibility Criteria Met

Program Status

DPU Counselor

Contract Start Date

Contract End Date

Rejection Reason

Reason For Def Decline:

Record: 2 of 2 | Filtered | Search

Form View | Num Lock

The screenshot shows a web application window titled "DPU Case Info". The main heading is "DPU Case Information" with a "Save" button to its right. The form is organized into several sections:

- Self-Identified Race(s)**: A dropdown menu.
- Ethnicity/Nationality**: A dropdown menu.
- Current Marital Status:**: A dropdown menu.
- Cohabitants**: A dropdown menu.

Below these are several rows of fields:

- Current Residence**: dropdown menu
- Occupation**: dropdown menu
- Health Insurance**: dropdown menu
- Children**: dropdown menu
- Employment Status**: dropdown menu
- Child Support Ordered**: dropdown menu
- Religion**: dropdown menu
- Gross Annual Individual Income**: dropdown menu
- Public Assistance Receiving**: dropdown menu
- Education Level**: dropdown menu
- Gross Annual Household Income**: dropdown menu
- School Status**: dropdown menu
- Veteran**: dropdown menu

At the bottom, there is a navigation bar with "Record: 2 of 2", a "Filtered" button, and a "Search" field. The status bar at the very bottom indicates "Form View" and "Num Lock".

Navigation Pane

DPU Case Information

Save

<input checked="" type="checkbox"/> Mental Health Issues Primary MH Diagnosis Code <input type="text"/> <input type="text"/>	<input checked="" type="checkbox"/> History of Being Medicated <input checked="" type="checkbox"/> Currently Medicated <input type="text"/>	<input checked="" type="checkbox"/> AOD Issues Primary AOD Diagnosis Code <input type="text"/> Primary AOD Diagnosis Desc <input type="text"/> Primary Drug of Choice <input type="text"/>	Treatment Experience <input type="text"/>
<input checked="" type="checkbox"/> Currently Seeing Counselor/Psychiatrist <input type="text"/>	<input checked="" type="checkbox"/> Saw Counselor/Psych In the Past <input type="text"/>	<input checked="" type="checkbox"/> Medical Problems <input type="text"/>	ACE Criteria Experienced <input type="text"/>
			Total ACE Score <input type="text"/>

Record: 2 of 2 Filtered Search

Form View Num Lock

Main Switchboard **DPU Case Info**

DPU Case Information

Save

Navigation Pane

Prior CPS Reports Number

Prior CPS Reports Screened In

Prior CPS Reports Substantiated

Kids Removed From Home In Past

PriorBanFromContactWithChildren

Ticketed In Past

Prior Juvenile Offenses

Prior DPU Participation

Prior Misd. Convictions

Prior Felony Convictions

Age At First Arrest

No. of Prior Adult Arrests

LSI Score

Record: 2 of 2 Filtered Search

Form View Num Lock

Navigation Pane

Main Switchboard DPU Case Info

DPU Case Information

Save

General Case Overview Participant Information Fees/Restitution Corporal Punishment Victim Information Conditions And Treatment Chrono Log Case Notes

Fee Information

Amount Amount Remaining
Due Date Date Amount Remaining
Payment Arrangement
Paid In Full Date

Restitution Information

Amount Restitution Remaining
Due Date Date Amount Remaining
Payment Arrangement
Paid In Full Date

Record: 2 of 2 Filtered Search

Form View Num Lock

The screenshot displays a web application window titled "DPU Case Info". The main heading is "DPU Case Information". A "Save" button is located in the top right corner. Below the heading, there are two columns: "Corporal Punishment Used" and "Reasons for Using Corporal Punishment". The "Corporal Punishment Used" dropdown menu is open, showing a list of options: Belt, Burn, Cold or hot water exposure, Cord, Dowel/rod, Exposure to noxious smells, Forced ingestion of soap, Hair pulling, Holding heavy objects, Hot sauce/spice, Isolation, Kneeling on rice (or other painful surface), None, Paddle, Pinch, and Punch. The "Belt" option is currently selected. At the bottom of the application, there is a "Record:" section showing "2 of 2" records, a "Filtered" status, and a "Search" field. The bottom left corner indicates "Form View" and the bottom right corner shows "Num Lock" and a keyboard icon.

Main Switchboard **DPU Case Info**

DPU Case Information

General Case Overview | Participant Information | Fees/Restitution | Corporal Punishment | **Victim Information** | Conditions And Treatment | Chrono Log | Case Notes

Number of Kids In Case Number of Kids in the Home at the Time of the Incident
Kids Removed From Home As Result

Victims Snapshot

Double click the victim's row to view their detailed information.
If you do not see the victim listed below, click "Add Victim" to add the victim and their information to the case.


Last Name	First Name	Middle	Suffix	DOB	Gender	Victim's Age At Incident
Record: 2 of 2 Filtered Search						

Form View Num Lock

frm_TxConditions

Condition Details

Save Close

Date DPU Referred  Start By Complete By

Condition # of Sessions Recommended

Provider Name

Intake Date At Provider Duration (In Months) Frequency

Disposition Disposition Date

Notes

Attachment 8: Evaluation Plan

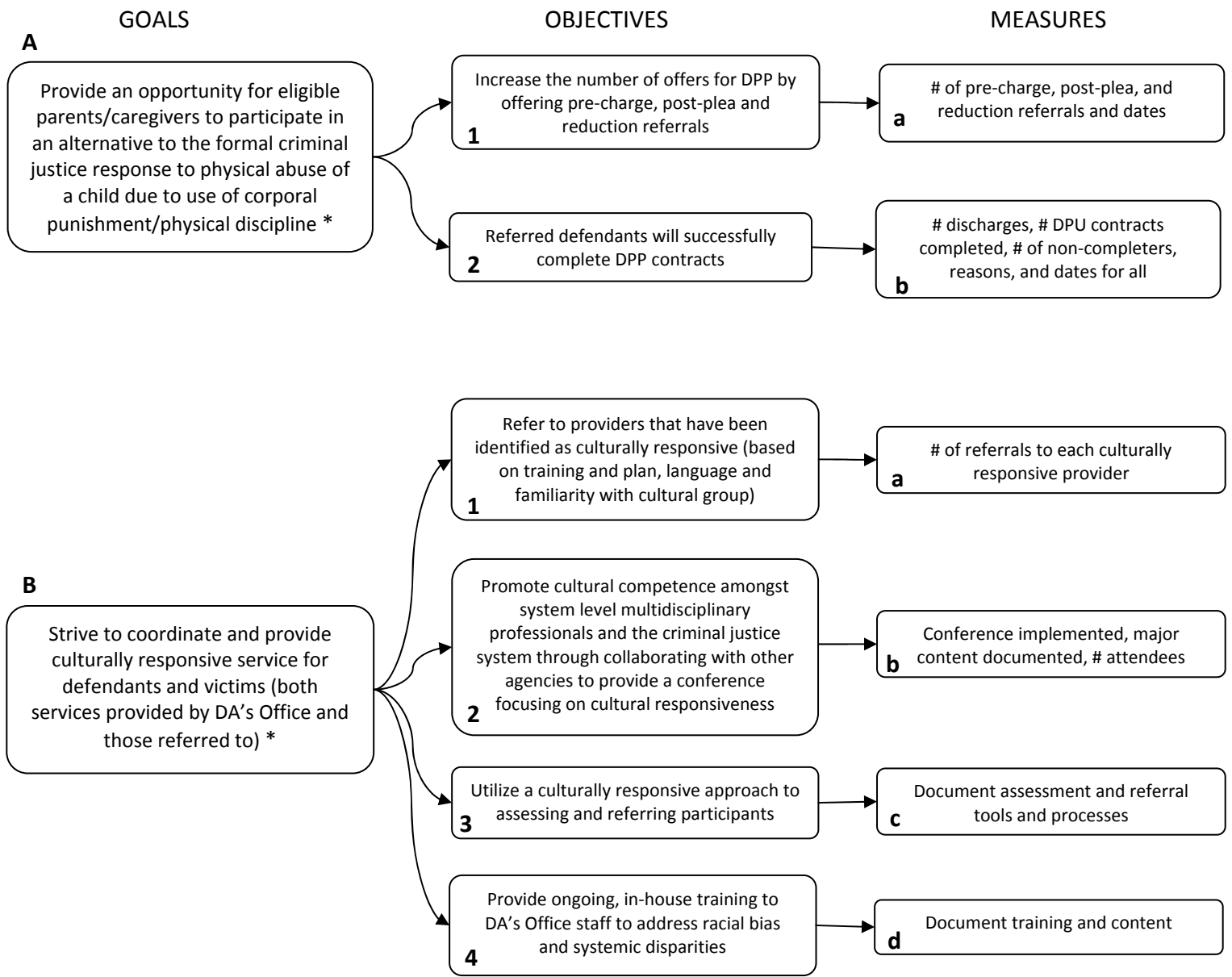
- To create a solid foundation for project evaluation and implementation, DPCAI and PHI partnered to:
 - Define and articulate the project logic model (project goals, objectives, activities, and measures)
 - Identify and select evidence-based assessment tools to be used with participants
 - Operationalize measures, develop Access database on District Attorney's network to collect and document participant-level data, and assure that data elements address the goals and objectives.
 - DA's office IT staff have devoted significant time to development, revision, and linking to other data systems
 - DPCAI staff piloted tested the system and entered the data for past and current participants
- Analysis of participant feedback regarding the Spring 2014 Corporal Punishment Conference
 - PHI received the data file in September 2014 and thematically analyzed the responses to make the information more useful
 - A summary of the results was sent to the DPCAI team and the RJIP Coordinator in October 2014 for use in planning the November 2015 conference
- Program development and implementation support with program measures, data collection, evidence-based practices, and participant satisfaction
- Technical assistance with Adults and Children Together (ACT) parenting program pre/post survey data and satisfaction data (entry, management, and summary to provide initial quality feedback for program improvement)
- Collaboration with DA staff, DPCAI staff, RJIP team, RJIP cross-site evaluator, ABA staff

Figure 1: Goals, Objectives, and Measures

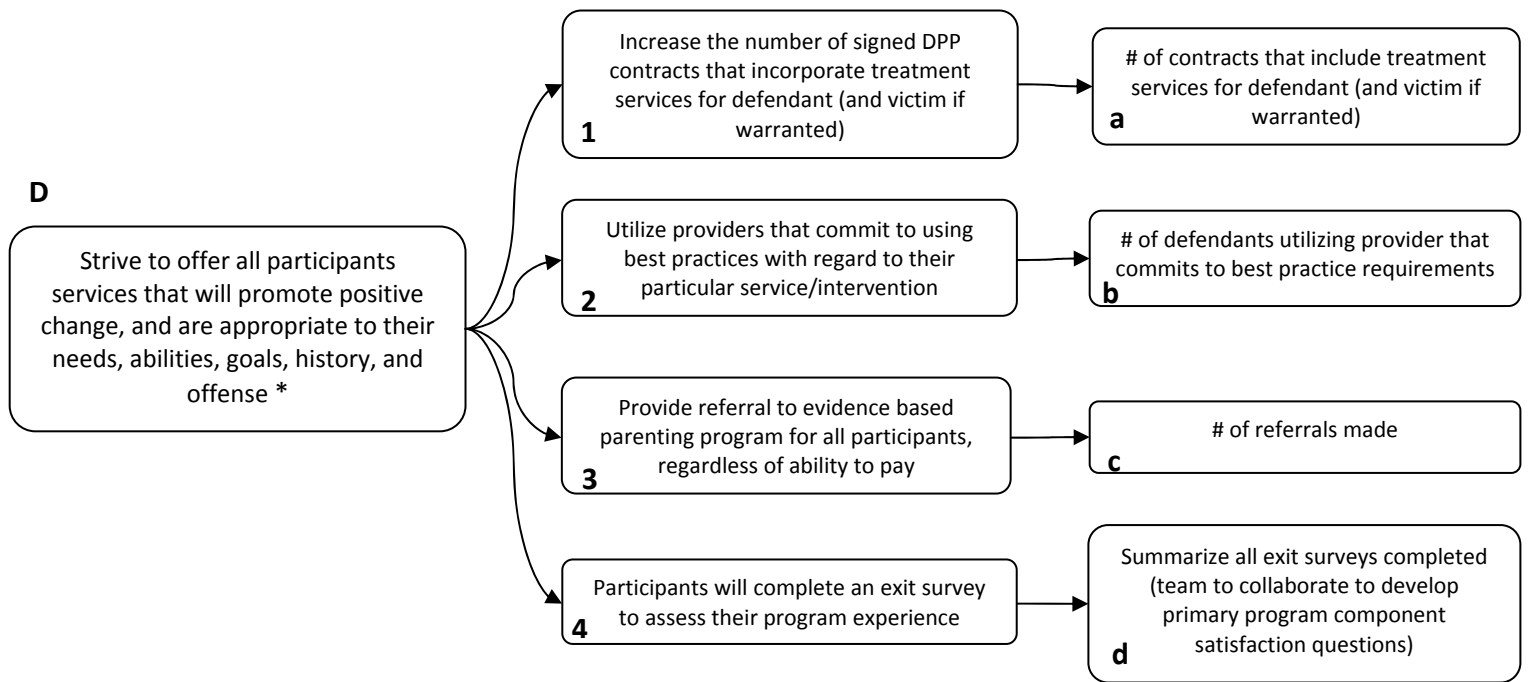
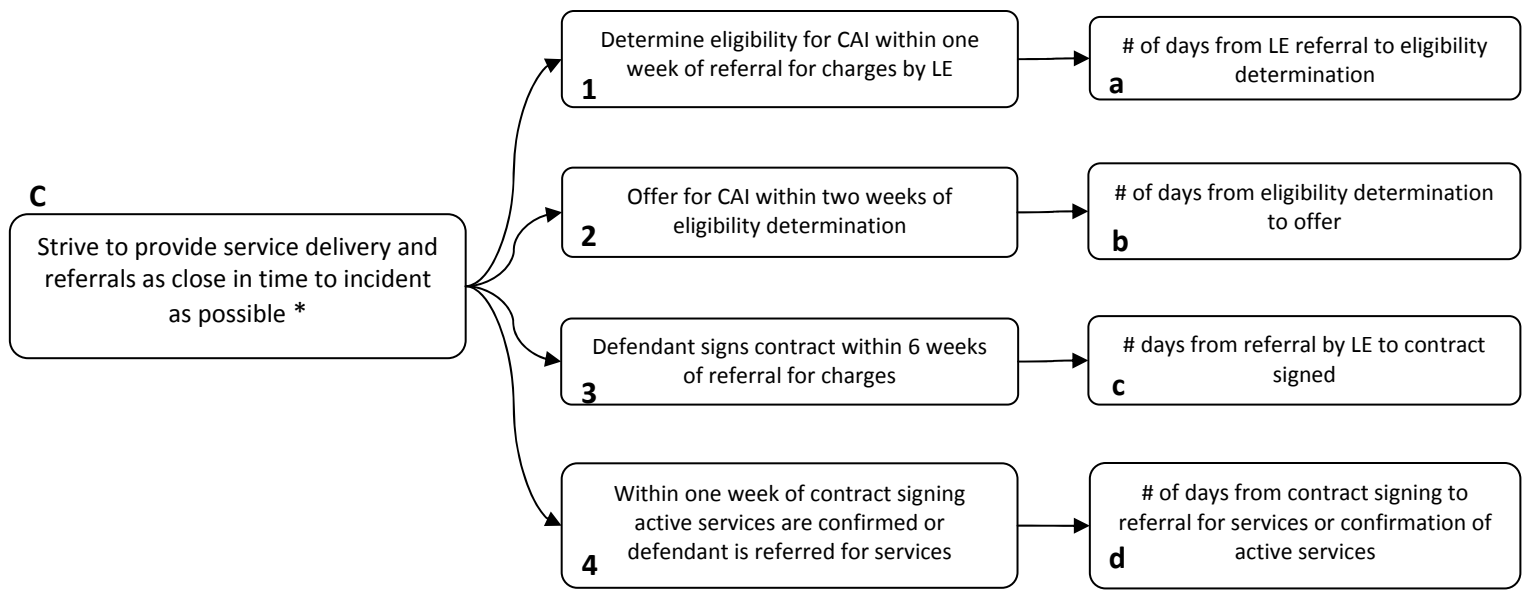
DANE COUNTY DISTRICT ATTORNEY’S OFFICE DEFERRED PROSECUTION CHILD ABUSE INITIATIVE

Mission Statement

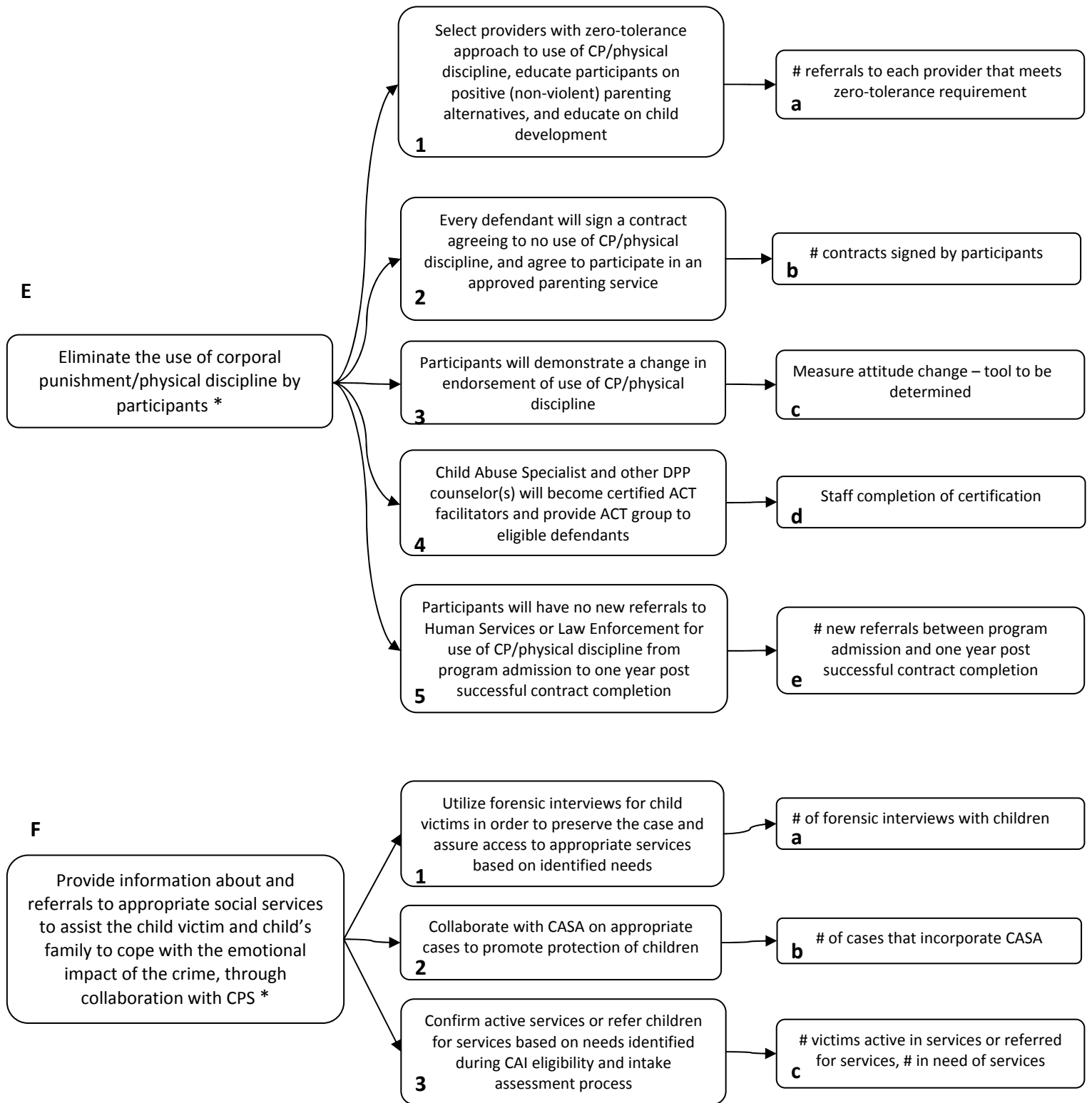
To provide meaningful criminal justice diversion programming for parents who have been arrested for child abuse following an incident of excessive use of corporal punishment. This multi-generational initiative will strive to have a short and long-term impact on child safety and protection, racial disparities, belief systems regarding violent parenting practices and decreasing future criminal behaviors.



*** Due to the disproportionate number of minorities referred to the Dane County District Attorney’s Office, it is expected that this initiative will impact short-term and long-term racial disparities in the criminal justice system ***



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