

**CHARLOTTESVILLE/ALBEMARLE COMMISSION ON CHILDREN AND FAMILIES  
MINUTES  
APRIL 4, 2001**

**MEMBERS PRESENT**

Martha Carroll, 16<sup>th</sup> District Court Service Unit  
Dr. Kevin Castner, Albemarle County Schools  
Azzurra Cox, Charlottesville Youth Representative  
Robert Cox, Charlottesville Dept. of Social Services  
Dr. Michael Dickens, Charlottesville Citizen Representative  
Mark Kindler, Albemarle Citizen Representative  
Dr. Susan McLeod, Thomas Jefferson Health District  
Richard Merriwether, Chair, Charlottesville Citizen Representative  
Jim Peterson, Region Ten Community Services Board  
Debby Pomerantz, Charlottesville Citizen Representative  
Kathy Ralston, Albemarle Dept. of Social Services  
Sterling Robinson, Albemarle Citizen Representative  
Marti Snell, University of Virginia  
Ruth Stone, Vice Chair, Private Provider Representative  
Dr. William Symons, Jr., Charlottesville City Schools  
Roxanne White, Albemarle County

**MEMBERS NOT PRESENT**

Happy Darcus, Albemarle Youth Representative  
Larry Miller, Albemarle Citizen Representative  
Linda Peacock, City of Charlottesville  
Cathy Train, United Way-Thomas Jefferson Area

**CCF STAFF PRESENT**

Saphira Baker, Director  
Rory Carpenter, Juvenile Justice Coordinator  
Terrilynn Platt, Project Assistant

**OTHERS PRESENT**

Mark Andrews, Juvenile Court Assessment Center Director, Juvenile Justice Advisory Committee and Detention Center Subcommittee member  
Jacki Bryant, Partnership for Children Coordinator  
Laurie McDade, Teen Pregnancy/Sexually Transmitted Disease Prevention Coordinator

**HANDOUTS (prior to meeting)**

Agenda for April 4, 2001 CCF Meeting  
Director's Update for April 4, 2001 CCF Meeting  
March 7, 2001 CCF Meeting Minutes  
Comprehensive Services Act April 2001 Report  
CART March 2001 Cases  
Blue Ridge Detention Center Community Forum Report  
"Draft Letter to Congressman in Support of Increased Federal Funding" from Kevin Castner

**HANDOUTS (during meeting)**

Summary of Martha Jefferson Hospital's Position of Community Teen Pregnancy and STD Prevention Coordinator  
Partnership for Children Report to the Commission on Children and Families, April 4, 2001  
Juvenile Justice Advisory Committee Meeting Minutes, January 17, 2001  
Martha Jefferson Hospital *Health News*, "Teen Pregnancy and STD Prevention Coordinator at Work in Our Community" (one copy passed around)

**I. WELCOME AND INTRODUCTIONS**

Richard Merriwether called the meeting to order at 5:00 p.m. and welcomed the Commissioners and all others in attendance. He also asked Mark Andrews and Laurie McDade to introduce themselves.

**II. SPECIFICATION OF ITEMS TO BE ADDED AND ADOPTION OF AGENDA**

R. Merriwether asked if anyone would like to add an item to the agenda. No one moved to add an item. Kathy Ralston moved to adopt the agenda. Michael Dickens seconded the motion.

◆ **THE COMMISSION ADOPTED THE AGENDA FOR THE MEETING WITH NO ADDITIONS OR CHANGES.**

**III. COMMENTS FROM THE PUBLIC**

No members of the public were in attendance.

**IV. MINUTES FROM MARCH 7, 2001**

R. Merriwether asked if anyone had changes to the minutes of the March 7, 2001 CCF meeting. Many members noted that they had not received the meeting packet in the mail, and thus had not yet read the minutes. A motion was made and then seconded to table approval of the March minutes until the May meeting.

◆ **THE COMMISSION TABLED APPROVAL OF THE MARCH 7, 2001 CCF MEETING MINUTES.**

Roxanne White noted that she appreciates the listing of meeting handouts at the top of the regular meeting minutes. R. Merriwether added that he likes the addition of printed Director's Updates in the meeting packet.

**V. REPORTS FROM WORK GROUPS**

**A. TEEN PREGNANCY/SEXUALLY TRANSMITTED DISEASE PREVENTION WORK GROUP—LAURIE MCDADE**

Laurie McDade handed out information about her position as Teen Pregnancy/STD Prevention Coordinator and expressed her pleasure in presenting to the Commission.

Since the position of Teen Pregnancy/STD Prevention Coordinator is as new as she is to the position, L. McDade's first task was to establish her priorities. In doing this she has made an effort to meet those most directly involved with teen pregnancy/STD prevention in the area, including the FOCUS-Teensight and Monticello Area Community Action Agency (MACAA) primary care workers. She has worked with Teensight's Reality Check program and MACAA's Camp Horizon and Young Guys of Distinction programs. She is helping to coordinate the April 2001 Teen Parent Panel, an event which originated two years ago as a collaborative effort between Teensight and the University of Virginia's Teen Health Center. Additionally, L. McDade will assist MACAA in organizing a roundtable discussion among service providers in the community who either directly or indirectly affect teen pregnancy.

In addition to this work, L. McDade has worked to identify service gaps and develop solutions to fill these gaps, including examining which schools are underserved and helping teachers, school nurses, and other educators develop and obtain Family Life Education materials and speakers, as well as revise FLE programs. L. McDade has advocated for Albemarle County's Youth Behavior Risk Survey and the replacement of the previously deleted sexual behavior questions at the next survey administration. She has also begun working with the Charlottesville School Health Advisory Board about the possibility of implementing a similar youth behavior risk survey. Neighboring counties have requested her assistance in organizing teen pregnancy prevention

programs for their communities, and she has provided materials for a group facilitator at the women's prison whose participants needed information on talking with their daughters about sex.

L. McDade is working with the University of Virginia's Teen Health Center, the Health Department, Martha Jefferson Hospital, the University of Virginia School of Nursing, and with Planned Parenthood's Emergency Contraception campaign. She is co-planning, with the Thomas Jefferson Health Department, a May 4th videoconference titled "Positive Approaches to Teen Pregnancy Prevention," and as the Better Beginnings Coalition liaison in this area, she will be hosting this group's next meeting.

She has worked to coordinate dissemination of information related to teen pregnancy/STD prevention among primary care providers and other human service professionals in the area. Additionally, the media has been very friendly and helpful, providing significant press for the efforts and programs she's promoting.

The Teen Pregnancy/Sexually Transmitted Disease Prevention Work Group has welcomed a new member—Bob Parker, a Health Counselor with the Thomas Jefferson Health District, who specializes in the counseling of persons with sexually transmitted diseases—as well as elected Steve Stern as the new chair. The fourth Monday of each month, 12:00-1:30 p.m., has been established as the standard meeting date and time. Finally, the work group has adopted five priorities on which L. McDade's work focuses: supporting existing programs; public awareness; evaluation; Family Life Education; and volunteer/community service programs.

L. McDade invited Commissioners to please offer feedback on anything she is doing and to share with her anything they have heard about teen pregnancy/sexually transmitted disease related issues, events, contacts, etc. in the community.

R. White asked how the Teen Pregnancy/STD Prevention Work Group is related to the Council on Adolescent Pregnancy Prevention (CAPP). L. McDade replied that CAPP is the vehicle through which Better Beginnings funds are brought into this community. She added that her work with CAPP is separate from her staffing of the Teen Pregnancy/STD Prevention Work Group.

S. Baker noted that administration of the Albemarle County Schools' Youth Risk Behavior Survey in the Charlottesville School system is something she hopes the City School administration will consider. The grant application for the survey was released yesterday, and she has asked City School staff if there is a lead person to help implement this initiative. K. Ralston asked what S. Baker was asking from the Commission. S. Baker replied that the Commission could neither design and implement the survey nor analyze the findings on its own, but that this was a point of information. K. Ralston asked if S. Baker was having difficulty identifying a City School contact, to which S. Baker replied no. L. McDade noted that she is currently planning to meet with two other individuals to discuss the possibility of pursuing this grant and implementing this survey. Marti Snell empathized that it is often difficult to get in contact with the schools. S. Baker suggested that CCF still could help the City Schools write the grant proposal, but the schools would need to implement it and agree to the grant application.

R. Merriwether asked if there were further questions for L. McDade. K. Ralston praised L. McDade for the volume of her work, and noted that she looks forward to the results of L. McDade's efforts.

## **B. PARTNERSHIP FOR CHILDREN—JACKI BRYANT**

Jacki Bryant, passing around a brief update on the Partnership for Children's Work Groups, explained that since the initial signing of the Memorandum of Understanding in March of 2000, the Partnership has accomplished a great deal to be proud of.

A new work group—the Child Care Work Group—has a wide range of participants, including members in the community concerned about child care in the area. They have designated two priorities: 1) establishing a “Golden Seal of Approval,” denoting quality child care providers, to act as a guide for parents; and 2) enlisting employers in finding solutions to child care issues, such as finding ways to assist families in affording child care.

Though distribution of the literacy kits have been delayed due to difficulties with printing and collection of materials, the Early Literacy Work Group has had success in fundraising efforts. J. Bryant thanked the Charlottesville City and Albemarle County Schools for funding the first phase of the Literacy Kit program. Contributions from the University of Virginia Health System and Martha Jefferson Hospital have forwarded the second phase. In addition, the Rotary Club has donated \$500. A brochure designed to fundraise for the kits is being printed and circulated, and the first kits will be distributed this month. Additionally, the Early Literacy Work Group is planning a follow-up to the Ruby Payne “Understanding Families in Poverty” training at the end of this month, using local facilitators who have trained with Ruby Payne. 80 people have already signed up.

The Home-Visiting Work Group received full funding from the City and County for their programs, and they are currently meeting to allocate these funds to their programs with the hope of expanding services.

The Public Awareness Work Group has organized a set public service announcements for radio and TV, designed to inform parents and the community at large about the Literacy Kits, early literacy in general, and to publicize the Partnership for Children. The Partnership also has a new phone line: 220-KIDS (5437).

The Parent Education Work Group is compiling a catalog, which lists local parent education classes grouped by the age of a child, with the intent to print and distribute it via mail to every household in Charlottesville and Albemarle in September. The catalog will further this work group’s goal of normalizing parent education, thus reducing the stigma attached to such classes. The Parent Education Work Group is also identifying classes they feel should be available to parents at all times, designing a continuum of parent education classes and locating any gaps in the continuum for which there are no, or too few, available classes.

The Benchmarks Work Group has filled its mission with the completion of their report *Reaching for the Future*. This document outlines a continuum of Partnership for Children outcomes and target areas for each of the other work groups. They anticipate a kick-off for the report in the fall, followed by wide distribution to stakeholders and the community.

R. Merriwether remarked that the Partnership for Children is certainly accomplishing a great deal in very little time. K. Ralston praised J. Bryant for the tremendous energy and expertise she lends to the Partnership. Much of the success of the Partnership, she added, can attributed to J. Bryant’s efforts. J. Bryant followed that many people have contributed to the Partnership’s success, including several members who also sit on the Commission. R. White suggested that all the Partnership publications be posted on the CCF website. J. Bryant replied that the application for membership and the Ruby Payne training flyers have already been posted online, and she intends to post minutes and new publications as they arise.

**C. JUVENILE JUSTICE ADVISORY COMMITTEE/DETENTION CENTER SUBCOMMITTEE—RORY CARPENTER**

Rory Carpenter expressed his pleasure and pride in representing the Detention Center Subcommittee to the Commission. This subcommittee has just recently completed its report of the Blue Ridge Detention Center Community Forum, and has presented it to the Blue Ridge Detention Center Commission with success. R. Carpenter recognized the names of the members of the

subcommittee: Mark Andrews, Dave Chapman, Philip Crosson, Jack Gallagher, Chip Harding, Libby Killeen, Lee-Lee Lawless, and Liz Murtaugh.

The forum, he began, was a very positive and unique experience with over 100 people providing input into center programming and selection criteria for the superintendent. The two-part process was designed to educate and to receive input from community on the detention center. Keynote speaker Dave Marsden, Deputy Director of the Department of Juvenile Justice and former Fairfax Detention Center Superintendent, shared his insights on important factors for a successful detention center, including the concept that detention should be a process and not a place. A focus should be on the environment of the center, he said. The Detention Center should stabilize children in crisis, providing them the opportunity and ability to work through their issues during their time at the center. When the children return home and to the community, they should do so as good neighbors, accompanied by the services they need.

The forum panel included Lieutenant Chip Harding of the Charlottesville Police Department, Martha Carroll, Director of the 16<sup>th</sup> District Juvenile Court Services Unit, Kathy Johnson Harris, Coordinator of the Charlottesville Schools Alternative Program, the Honorable Susan Whitlock, Chief Judge of the 16<sup>th</sup> District Juvenile and Domestic Relations Court, and Jack Gallagher, Administrator of Community Attention. The panel members discussed the benefits of having a local detention center as well as the challenge of interfacing the services of the new facility with existing community services. They mentioned the current problems posed by the physical and mental barrier of Afton Mountain, the importance of developing effective programs, and the possibility and potential the detention center has to assist and stabilize families. The panel expressed the positive aspects of the juvenile assessment center annex, which will offer a unique opportunity to build onto existing services and to create a point of entry into the human services system.

Following the panel, small groups discussed the first question—What are the key ingredients of a successful detention center?—listing quality personnel, health and mental health components, parent and guardian involvement, and education, among other ingredients. The remaining three questions—mixed among the groups—were: 1) How do we best meet the educational needs of detained youth? 2) How do we best meet the assessment needs of youth in crisis? and 3) What qualifications do you want to see in a Superintendent? Responses to the first two questions included: establish a School Liaison, provide technical education and job training skills programs, provide immediate and accurate health and mental health assessments, provide 24-hour assessment services at the Detention Center, and maintain continuity and communication by sharing assessment information. In response to the third question, participants noted, among other comments, that the superintendent should: balance security and treatment, effectively use community resources, be fiscally responsible, and balance accountability and advocacy.

The final segment of the report, R. Carpenter continued, details the recommendations developed by the Detention Center Subcommittee with the approval of the Blue Ridge Detention Center Commission. These recommendations focus in the areas of: 1) staff and the environment, with specific recommendations concerning the superintendent, 2) health and mental health programming, 3) educational programming, 4) interagency partnership, 5) post-dispositional programming, and 6) the assessment center annex. Particularly, R. Carpenter highlighted one of the assessment center annex recommendations because it directly involves the Commission's participation: "Personnel of the Juvenile Court Assessment Center, members of the Juvenile Justice Advisory Committee, designated representatives of the Commission on Children and Families and the Detention Center Commission, and community partners should begin program design and planning for use of the Assessment Center Annex as a community resource." He added that the Detention Center Subcommittee feels the recommendations reflect the values of the community.

R. Merriwether asked when the new superintendent is expected to become involved in the planning process. R. White responded that the selection committee has narrowed the pool down to

three candidates. After the County Executive and City Manager interview the candidates, a final hire may occur within three to four weeks. She also thanked the Juvenile Justice Advisory Committee for organizing the forum; many of the questions used during the interviews resulted directly from that community discussion.

R. Merriwether asked what plans exist regarding the hiring of teachers. R. Carpenter replied that Albemarle County Schools has agreed to take on responsibility for the education component of the Detention Center. R. White added that though Albemarle County will provide the teachers, the state will provide funding. A process still needs to be developed by which teachers are hired collaboratively between the superintendent and the school system; a liaison from the State Board of Education is involved in these discussions.

K. Ralston asked what effect the current situation with the state budget is having on the detention center, and if recent budget cuts at Region Ten Community Services Board would have consequences for immediate health and mental health screenings. R. White responded that though the state budget did cut out significant construction funds, the fact that the detention center construction had already begun preserved its funding. The County Attorney has also suggested that funds cut out of the budget this coming year may well be replaced the following year. R. Carpenter felt the question concerning Region Ten was timely; he did not yet know what specifically would be cut. However, he continued, the Detention Center would certainly rely on the services of Region Ten as well as other mental health providers.

R. Carpenter added that on April 19, the Juvenile Justice Advisory Committee will host a live satellite videoconference entitled “Mental Health Issues and Juvenile Justice”; Commissioners were invited to attend. K. Ralston asked if Region Ten would be able to handle the mental health screenings. Jim Peterson replied that Region Ten could handle the screenings, particularly because the budget cuts affect adult services, not children services; though, he added, there is always a need for more mental health services. R. Carpenter noted that the Detention Center is required to provide a minimum level of mental health assessment, though the intent is to make that mental health assessment much more comprehensive.

M. Carroll mentioned that as they consider a transitional component, they would be looking to develop post-dispositional services for the juveniles. R. White said the State does not reimburse for that kind of program. M. Carroll continued, saying that historically Charlottesville/Albemarle has not had access to post-dispositional services, to give detainees a short-term place to stay while awaiting court, rather than sending them to DJJ. Other counties have successfully implemented such post-dispositional programs to reduce the number of detainees going to DJJ. B. Cox agreed that the children do need a secure arrangement, though they do not always need true detention.

R. Merriwether asked for a motion to adopt the report and approve the recommendations. Debby Pomerantz made the motion, and Bill Symons seconded.

◆ **THE COMMISSION ADOPTED THE BLUE RIDGE DETENTION CENTER COMMUNITY FORUM REPORT AND APPROVED ITS RECOMMENDATIONS.**

**D. COMPREHENSIVE SERVICES ACT COMMITTEE—BUZ COX**

B. Cox noted that the monthly CSA report includes the usual financial and CART reports. He remarked that, as stated in the Director’s Update, the CSA Coordinator position is still open. The City’s net expenditures through February, listed in the financial reports, are less than they were last year; the current expectation is that spending will not exceed budgeted funds. The financial reports suggest a promising trend in that the cost-per-case is not growing, but lessening. Also, Medicaid is paying for more, saving local funds. The State Local Advisory Team established its three priorities for the year: 1) increase family involvement in all levels of CSA; 2) clarify “Foster Care Prevention,” which is defined by the State Department of Social Services, but as a mandated

category for funding services under CSA, the term has a different meaning in different localities; and 3) examine how the West Virginia Medical Institute (WVMI) reviews cases under the State's Utilization Management program, and whether WVMI is conducting its reviews with more emphasis on documentation than on efficacy of services. The State Local Advisory Team was dismayed to learn that the WVMI reports suggest this system creates excessive paper work which does not translate into improved or more efficient services. R. Merriwether asked for clarification of the varying interpretations of "Foster Care Prevention." B. Cox responded that how a locality interprets "Foster Care Prevention" affects client eligibility for mandated CSA services. J. Peterson added that the definition used by the State Department of Social Services is based on federal funding.

B. Cox continued the report, stating that the CSA Committee is beginning to track information from service vendors on their outcomes, and the Children Needing Extensive Services Work Group is currently studying recommendations from the last year's CNES report; they expect to report to the Commission in May.

There has also been a growing concern that the availability of IV-E funding is in decline. The State Department of Social Services is trying to rectify this situation by examining why certain children are not qualifying for the funds and why the funding has not been available for local use. One hypothesis is that Virginia is using antiquated procedures for deciding which children can qualify.

R. White asked if outcomes for particular children are known as each child completes treatment. B. Cox replied that they are, however the outcomes for each placement are not generally reported, and these are the outcomes in which there is particular interest. He added that he is unsure what the information that the CSA Committee is gathering on outcomes will indicate, though they are interested in learning whatever conclusions they may find. K. Ralston added that she is interested in uncovering which vendors measure outcomes and which do not.

M. Snell asked if statistical data is available on the number of children suffering mental and emotional difficulties as a result of sexual and physical abuse. B. Cox responded that some of that data is discussed generally in the CNES report, but specific figures are currently not available. M. Snell continued that if the data reveals a strong connection, that would suggest that prevention of sexual and physical abuse should rise as a high priority. She also asked why the race of each child is noted in the CART report, and if tracking that data is necessary. B. Cox replied that this very question has arisen before; race is currently tracked only to provide a sense of the demographics of CART cases. R. Merriwether asked if the services associated with the 17 year old mentioned in the CART report were the first services this child has received. B. Cox responded that this child has received significant services in the past.

R. Merriwether asked if families are moving to Charlottesville to receive better and more services for their children. B. Cox replied that that information is currently not known, however research is being conducted to examine which services the children used in other localities. R. White asked if extensive service data is entered into *Harmony*. B. Cox responded that past service data is not currently tracked in *Harmony*, but they hope to enhance *Harmony* to allow for such data tracking. R. White asserted that she would like to ensure that such data does get tracked.

M. Snell noted that the CART case studies are moving and add a touch of humanity to the CSA reports.

## **VI. DIRECTOR'S UPDATE—SAPHIRA BAKER**

Rather than present the Director's Update, S. Baker referred to the printed version of the Update which had previously been circulated to the Commissioners, and she asked for any questions. K. Ralston asked if there had been any response from the Dental Society to the letter CCF had sent regarding dental care for

uninsured and Medicaid children. S. Baker replied that no conclusive response had been received; Judy Smith of Child Health Partnership had heard from one Dental Association member at the state level, but not from Dr. Bill Viglione or the Dental Society as a whole. K. Ralston remarked that when the Bright Stars Advisory Board met, they reviewed the cases of a few seven year olds with cavities who resorted to visiting dentists outside of Charlottesville/Albemarle in order to secure treatment. She added that a new dentist in Fluvanna is working on a program which will allow her to serve a large number of Medicaid children at once. M. Dickens, referring to comments made during the dental care discussion at the previous Commission meeting, remarked that he does not believe it to be true that Medicaid children have more frequent and severe dental problems than insured children, nor does he believe Medicaid children are any more disruptive than insured children. Consequently, he believes some effort should be made to negate myths surrounding Medicaid and uninsured children. R. White asked for information on the fluoride program in Albemarle County. Susan McLeod responded that the children receiving services from the Health Department's Dental Clinic do receive fluoride treatments. Though fluoride is usually handled by prescription, some schools do have fluoride programs; there is, however, no comprehensive treatment program. Mark Kindler noted that Fluvanna County at one time had a school fluoride program. M. Dickens commented that some of the issues surrounding school-based fluoride programs is that they pose the risk of overdosing children. J. Peterson remarked that he has maintained a particular interest in the dental care problems in the area, and his informal research suggests that the real problems preventing dentists from treating Medicaid children are the horror stories of processing Medicaid reimbursements. He is unsure what it would take to encourage dentists to accept Medicaid. M. Dickens commented that he does not feel issues surrounding Medicaid reimbursements are any more difficult than other insurance processing difficulties.

S. Baker remarked that, regarding the Faith-Based Organization initiative nationally and locally, CCF staff have identified a need to dialogue with local churches to encourage partnerships, to prevent duplication of efforts, to prevent the creation of isolated, unsupported programs, and to ensure that churches have access to available information on children and families, and knowledge of local resources. Informally, a local effort to encourage churches to meet usual standards for human service programs has begun. Additionally, there is increased interest among local clergy to have a meeting group for discussion of these issues, and to obtain data and resource information from CCF.

M. Carroll asked for an update on Office on Youth funding. S. Baker replied that, to the best of her knowledge, it was likely there would be level funding from the State, as communicated to her by David Blount of the Thomas Jefferson Planning District.

## **VII. MEMBERS' COMMENTS**

K. Ralston remarked that she is continually impressed with the work of the Commission staff.

The meeting adjourned at 6:30 p.m.