Virginia Commission on Youth
2026 Legislative Studies and Initiatives

Review of Funding and Support for Virginia's Children's Advocacy Centers

Draft Recommendations	Public Comment
Address State General Fund and TANF Support: <u>Recommendation 1:</u> Introduce a budget amendment to Item 335 of the Appropriation Act to increase the General Fund (GF) appropriation and ensure a certain funding baseline going forward for Children's Advocacy Centers. In addition to increasing the General Fund allotment, the General Assembly should prioritize balancing the current General Fund and Temporary Assistance for Needy Families (TANF) funding structure.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA strongly supports Recommendation 1. "CACVA has developed several working funding ranges that illustrate the level of investment associated with different policy goals." "Virginia's existing CAC network is currently operating at an estimated cost of approximately $16 million annually, funded through General Funds, TANF, locality funding, fundraising, grants, and public donations." • "CACVA's analysis estimates that simply creating a sustainable core response within the existing 19-CAC network would require a total statewide investment of approximately $21–$23 million annually." • "CACVA estimates that a more comprehensive investment in the existing CAC network, one that also builds greater mental health capacity and dedicated capacity for emerging and increasingly important areas such as problematic sexual behavior response, prevention, grant and financial management, and organizational sustainability, would require approximately $27–$30 million annually." • "CACVA's preliminary estimate for a truly statewide system in which geography does not determine whether a child can reasonably access the full CAC response is approximately $32–$38 million annually."

	"CACVA encourages the Commonwealth to consider the level of service and statewide infrastructure it intends to sustain, rather than using current CAC expenditures as the benchmark for future appropriations. At minimum, Virginia should establish a funding baseline sufficient to sustainably support the core multidisciplinary response expected of the existing CAC network." "Additionally, CACVA strongly supports the Commission's recommendation to better balance Virginia's reliance on Temporary Assistance for Needy Families (TANF) and General Fund support for Children's Advocacy Centers." "CACVA also encourages the Commonwealth to explore additional sustainable and dedicated revenue sources that could supplement state investment in CACs. Other states have developed creative mechanisms for generating recurring support for CACs and multidisciplinary teams, including dedicating a portion of certain state administrative fees to these services." **Highlands Community Services • Valley Children's Advocacy Center • The Center for Alexandria's Children (CAC) • Southern Virginia Child Advocacy Center • Foothills Children's Advocacy Center • Children's Hospital of The King's Daughters (CHKD) Child Advocacy • Center Collins Center • Children's Trust • Greater Richmond SCAN •** These preceding Children's Advocacy Centers all submitted public comments in support of the recommendations and comments submitted by **Children's Advocacy Centers of Virginia (CACVA)** on draft recommendations 1 -13. **The Center for Alexandria's Children (CAC):** "Sustainable and equitable funding is essential. CACs provide critical services regardless of local funding capacity, and state funding should reflect both service volume and the responsibilities of coordinating a multidisciplinary response."

	Foothills Children's Advocacy Center: "We encourage the Commission to recommend a funding structure that recognizes the actual cost of maintaining an accredited CAC, including forensic interviewing, family advocacy, multidisciplinary team coordination, specialized personnel, technology, facilities, and administrative infrastructure." "We recommend a statewide assessment of the actual cost of operating an accredited CAC and the establishment of a minimum operational funding baseline that reflects these responsibilities."
Incentivize Local Government Support: <u>Recommendation 2:</u> Introduce a budget amendment to Item 335 of the Appropriation Act to establish a state matching incentive, above base allocations, for Children's Advocacy Centers that receive direct local appropriations or eligible in-kind support from the localities they serve, with local support representing at least a minimum percentage of combined state and local public support, as established by the Virginia Department of Social Services. Direct the Virginia Department of Social Services, in coordination with the Virginia Association of Counties (VACo), the Virginia Municipal League (VML), <u>and Children's Advocacy Centers of Virginia (CACVA)</u> to establish a formula for distributing the available matching funds to eligible Children's Advocacy Centers that encourages new and increased local investment while recognizing existing local support. The Department shall report on this incentive structure to the Commission on Youth and to the Chairs of the House Appropriations Committee and Senate Finance and Appropriations Committee by November 1, 2027.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 2. "CACVA believes a state matching incentive could be a useful tool to encourage new and increased local investment, provided that it is structured in a way that does not create additional inequities among CACs or the children they serve. A locality's inability or unwillingness to provide financial support should not result in reduced access to CAC services for children living in that community." "CACVA recommends that any matching incentive be established above and in addition to base state allocations and that eligibility for matching funds not affect a CAC's underlying state funding. Base allocations should continue to reflect the service responsibility, workload, geographic coverage, and operational needs of each CAC rather than the fiscal capacity of the localities within its service area." **Foothills Children's Advocacy Center:** "We support incentives that encourage local government investment in CAC services. However, regional CACs serve localities with varying financial resources and willingness to contribute. "A CAC's eligibility for additional state support should not depend on its ability to secure contributions from every locality it serves."

Outcomes and Performance Reporting:

Recommendation 3: (Option A) Introduce a budget amendment to Item 335 of the Appropriation Act directing the Children's Advocacy Centers of Virginia (CACVA) to work with Children's Advocacy Centers to collect and report standardized annual performance and outcome metrics to the Virginia Department of Social Services, which shall report the information annually to the Chairs of the Senate Finance and Appropriations Committee and the House Appropriations Committee and the Senate Committee on Rehabilitation and Social Services and the House Health and Human Services.

Metrics should include system efficiency and outcome measures, such as the average time from referral to forensic interview, average wait time for connection to mental health services, and case disposition outcomes, including plea agreements. This recommendation would formalize the current Children's Advocacy Centers reporting process while placing greater emphasis on measuring outcomes and system performance.

Recommendation 3: (Option B) Introduce a budget amendment to Item 335 of the Appropriation Act directing the Children's Advocacy Centers of Virginia (CACVA) to work with Children's Advocacy Centers to collect and report standardized annual performance and outcome metrics to the Virginia Department of Social Services. The Virginia Department of Social Services and Children's Advocacy Centers of Virginia (CACVA) shall work together to establish the annual performance and outcome metrics to include in this report. This recommendation would formalize the current Children's Advocacy Centers reporting process while placing greater emphasis on measuring outcomes and system performance.

Adeira Wright, Parent, Roanoke:
"As part of CAC performance and access reporting, Virginia should consider collecting aggregate information about cases in which a forensic interview was requested, referred, recommended, discussed, or seriously considered but did not occur. Where feasible and lawful, the system should identify the reason, whether a multidisciplinary review occurred, and how the child's voice was otherwise independently obtained."

Children's Advocacy Centers of Virginia (CACVA):
CACVA supports Recommendation 3. "CACVA already works with CACs to collect statewide data and welcomes the opportunity to further develop a consistent reporting framework that helps policymakers understand not only the number of children served, but also how effectively Virginia's CAC system is functioning for children, families, and multidisciplinary teams."

"CACVA does, however, recommend careful consideration of the specific measures ultimately used. Performance measures should provide meaningful information about the CAC response while recognizing that Children's Advocacy Centers operate within multidisciplinary systems and do not independently control many of the decisions, timelines, or ultimate outcomes associated with a child abuse investigation."

- "Time from referral to forensic interview can be a useful system-level measure, but the length of time between referral and interview may be influenced by factors outside the CAC's control."
- "Wait time for access to specialized mental health treatment is an important measure and can help identify gaps in Virginia's capacity to provide timely trauma treatment. However, the measure should distinguish between circumstances in which

The Virginia Department of Social Services shall report the information annually to the Chairs of the Senate Finance and Appropriations Committee and the House Appropriations Committee and the Senate Committee on Rehabilitation and Social Services and the House Health and Human Services.	a CAC directly provides mental health services and those in which the CAC must rely upon external providers." • "CACVA has greater concern about using criminal case dispositions, including plea agreements, as performance or outcome measures for Children's Advocacy Centers. CACs do not determine whether charges are filed, how a case is prosecuted, whether a plea agreement is offered or accepted, or the ultimate disposition of a criminal case." "CACVA recommends that the framework include a combination of service access, service quality, system coordination, and child/family response measures." "CACVA also recommends that implementation of expanded reporting requirements consider the administrative capacity required both at the local CAC level and within CACVA to coordinate, validate, analyze, and report statewide information consistently across 19 CACs. If Virginia intends to substantially expand outcome measurement and statewide data analysis, sufficient resources should accompany that expectation so that data collection strengthens accountability without unnecessarily reducing capacity for direct services or other statewide CAC support." **The Center for Alexandria's Children (CAC):** "Performance measures must distinguish between outcomes within a CAC's control and those dependent on partner agencies. Forensic interview timelines, access to mental health services, and criminal case dispositions are significantly influenced by law enforcement staffing, treatment availability, and prosecutorial decisions. CACs should not be held accountable for systemic limitations beyond their authority."

	Southern Virginia Child Advocacy Center: “Performance measures should reflect outcomes within a CAC’s influence and recognize the realities of multidisciplinary investigations, service availability, and family access to care. Funding and accountability measures should strengthen service quality and access without unintentionally diminishing a center’s capacity to serve children and families.” **Foothills Children's Advocacy Center:** “We support standardized reporting that demonstrates the value and effectiveness of CAC services. However, measures such as criminal case dispositions and plea agreements are influenced by decisions and circumstances outside the CAC's control.” “We recommend distinguishing between measures of CAC performance and broader multidisciplinary or criminal justice system outcomes, while providing resources to support additional reporting requirements.” **Children’s Hospital of The King’s Daughters (CHKD) Child Advocacy:** CHKD supports establishing standardized performance and outcome metrics and states, “CAC staff should be directly involved in identifying and implementing consistent, standardized metrics to ensure that measures are meaningful, feasible, and reliably measurable across programs. This collaboration is essential to accurately demonstrate CAC impact, promote accountability, and ensure that future funding decisions are informed by consistent measures of service demand, system efficiency, and outcomes.”

Court Fines and Fees Allocations: Recommendation 4: Introduce a budget amendment to Item 40 of the Appropriation Act directing the Indigent Defense Commission, as part of its current two-year study, to review: (i) the potential establishment of an additional fee upon conviction for certain felony sex offenses, crimes against children, or sexual exploitation offenses, with proceeds deposited into a dedicated Children's Advocacy Center operational fund; and (ii) the potential increase of existing fixed court costs and reallocation of a fractional share of those costs to support Children's Advocacy Centers.	**Virginia Indigent Defense Commission (VIDC):** VIDC expresses concerns with Recommendation 4. "The VIDC worked closely with the other workgroup members tasked with reviewing fees and costs to narrowly craft a study within the agency's subject matter expertise and mission. Since the study's impetus was reducing fees and costs, expanding it to examine increasing fees and costs for the agency's clients opposes the agency's mission. Furthermore, the focus of the CACs, their work, and critical details of their operations fall outside the VIDC staff's subject matter expertise. Therefore, expanding the study to areas outside the VIDC's knowledge and mission would require significant resources." **Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 4. "A dedicated CAC operational fund could provide an important supplemental funding stream for services that are directly connected to the Commonwealth's response to crimes against children. CACVA supports further study of both an additional fee upon conviction and the potential reallocation of a fractional share of existing court costs." **Foothills Children's Advocacy Center:** "While we support exploring court fines and fees as a potential revenue source, CAC operational funding should not become dependent on convictions, case dispositions, or fluctuating court collections. These revenues should supplement, rather than replace, predictable state appropriations."

Funding Formula Modernization and Flexibility: Recommendation 5: Introduce a budget amendment to Item 335 of the Appropriation Act directing the Virginia Department of Social Services, in direct partnership with Children's Advocacy Centers of Virginia (CACVA), to convene a Children's Advocacy Centers formula review committee. Currently, Virginia's funding distribution formula is codified in Item 335, establishing fixed percentages. The Committee shall evaluate the current funding distribution model to address: • Recommendations to update formula metrics to better reflect core service demands, including unduplicated children served, forensic interview volume, mental health therapy hours provided, active military MOUs, and geographical/rural coverage challenges. • Recommendations to permit more flexibility in updating the formula while promoting continuity and oversight. Included in this recommendation is one-time funding for the Department to staff and support the formula review committee. The Committee shall submit recommendations to the Commission on Youth and to the Chairs of the House Appropriations Committee and Senate Finance and Appropriations Committee by November 1, 2027.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA strongly supports Recommendation 5. "CACVA believes a revised formula should place greater emphasis on children served and services provided, while still accounting for geographic and rural coverage challenges." "Most importantly, CACVA believes any transition to a new formula should ensure that no existing CAC receives less state funding than it currently receives. Modernizing the formula should address inequities in funding, not simply shift limited resources from one CAC to another. For that reason, additional state investment will likely be necessary to implement a more equitable formula without destabilizing existing CACs." **Southern Virginia Child Advocacy Center:** "As a rural provider serving a large geographic area, we recognize the importance of funding formulas that reflect actual service needs, geographic challenges, travel demands, workforce availability, and the cost of maintaining quality services. Statewide funding strategies should account for differences in local capacity and resources so that children's access to services is not determined by where they live or the financial capacity of their communities." **Foothills Children's Advocacy Center:** "Forensic interview volume alone does not capture the breadth of CAC services. Funding formulas should reflect the ongoing work of coordinating multidisciplinary teams, facilitating case reviews, supporting caregivers, connecting families with services, and maintaining effective regional partnerships." **Children's Hospital of The King's Daughters (CHKD) Child Advocacy:** CHKD supports modernizing the state funding formula and states, "the current formula does not adequately account for the scope and complexity of the CHKD CAC, which serves the largest number of

	children in the Commonwealth and supports nine jurisdictions and three military multidisciplinary teams (MDTs) with formal MOUs, although the military MDTs are not included in the formula. A revised formula should equitably recognize actual service volume, military MDT partnerships, and the breadth of services provided."
Commonwealth Opioid Abatement and Remediation (COAR) Fund: <u>Recommendation 6:</u> Introduce a budget amendment to Item 492 of the Appropriation Act to allocate Commonwealth Opioid Abatement Remediation (COAR) Fund dollars to the Department of Social Services on behalf of Children's Advocacy Centers to provide forensic interviews, trauma-informed mental health treatment, and family advocacy services for children and families impacted by parental substance use disorder and child drug endangerment from the fallout of the opioid epidemic.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 6. "CACs regularly serve children whose abuse, neglect, or family instability is intertwined with substance use, and these cases often require a coordinated multidisciplinary response that includes forensic interviewing, family advocacy, mental health treatment, and connection to additional services. Providing dedicated funding for this work could strengthen CAC capacity to respond to children and families experiencing the effects of the opioid epidemic." "CACVA recommends that any COAR-funded initiative be structured with clear, practical eligibility standards and proportionate reporting requirements, while allowing CACs to focus the majority of their capacity on direct services."
Meta Settlement Funds: <u>Recommendation 7:</u> Request that the Governor include Children's Advocacy Centers as eligible recipients of Meta settlement funds to support a statewide initiative addressing child victimization, technology-facilitated sexual harm, and problematic sexual behaviors.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA strongly supports Recommendation 7. "The proposed uses identified in this recommendation align closely with issues CACs are increasingly called upon to address, including technology-facilitated sexual harm, online exploitation and other forms of child victimization, as well as problematic sexual behaviors among children and adolescents." "CACVA particularly supports consideration of these funds for a coordinated statewide initiative, which could build consistent capacity across Virginia rather than relying on individual

	communities to independently develop responses to these rapidly evolving forms of child victimization."
Department of Criminal Justice Services (DCJS) Funding: <u>Recommendation 8:</u> Request that the Department of Criminal Justice Services (DCJS) review state and federal grant opportunities and state victim assistance funding streams, such as VOCA funding and grants related to sexual assault services, for opportunities to support Children's Advocacy Centers.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 8. "Given this role, CACVA believes it is reasonable and appropriate for DCJS to be a meaningful funding partner for Virginia's CACs. CACVA encourages DCJS to examine existing victim-assistance and criminal justice funding streams, as well as future state and federal grant opportunities, to identify ways those resources can more consistently support CAC services and infrastructure." "CACVA also encourages consideration of whether existing eligibility requirements or allowable-cost restrictions unnecessarily limit CAC access to funding streams that are otherwise closely aligned with the work CACs perform." "CACVA would also encourage the Commonwealth to examine opportunities to provide greater support to Children's Advocacy Centers through the Virginia Sexual and Domestic Violence Victim Fund (VSDVVF) Grant Program administered through the Department of Criminal Justice Services (DCJS). VSDVVF currently supports certain prosecution, law-enforcement, legal assistance, and victim-service activities related to domestic violence, sexual abuse, stalking, and family abuse, but funding opportunities available to CACs through this program remain limited." **Foothills Children's Advocacy Center:** "We encourage the Commission to examine opportunities for dedicated, recurring funding through the Department of Criminal Justice Services. Given the integral role CACs play in the criminal justice response to child abuse, a more formal funding partnership warrants consideration."

Title IV-E Funding: Recommendation 9: Request that the Virginia Department of Social Services explore whether training, service, or administrative costs related to the Children's Advocacy Center model are eligible for federal Title IV-E reimbursement, and work with Children's Advocacy Centers of Virginia (CACVA) to provide guidance to Children's Advocacy Centers in drawing down available funds.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 9. "To the extent eligible costs can be reimbursed through Title IV-E, CACVA believes Virginia should maximize those federal resources. However, any reimbursement strategy should be designed with the administrative capacity of local CACs in mind."
Problematic Sexual Behavior (PSB): Recommendation 10: Request that the Virginia Department of Social Services encourage and find ways to support the Family and Children's Trust Fund of Virginia (FACT) in partnering with Children's Advocacy Centers of Virginia (CACVA) to expand opportunities for multidisciplinary teams to participate in training on responding to children with problematic sexual behavior. Currently FACT is piloting a train-the-trainer model and toolkit to increase access to consistent guidance, training, and evidence-based practices for PSB.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA strongly supports Recommendation 10. "However, CACVA believes this recommendation should go further than training alone." "CACVA is well positioned to help lead the development of a more consistent statewide framework." "CACVA therefore recommends expanding this recommendation from a training-focused initiative to the development of a comprehensive statewide multidisciplinary response to problematic sexual behavior, with FACT, VDSS, CACVA, mental health providers, and other appropriate partners working together to ensure that children and families across Virginia can access a timely, consistent, and evidence-based response." **The Center for Alexandria's Children (CAC):** "Addressing problematic sexual behavior in children requires more than additional training. Clear referral pathways, defined agency responsibilities, coordinated protocols, and access to specialized treatment are necessary for meaningful implementation."

Medicaid Billing Guidance: <u>Recommendation 11:</u> Request that the Department of Medical Assistance Services (DMAS) work with Children's Advocacy Centers of Virginia (CACVA) to provide technical assistance, training opportunities, and guidance on Medicaid billing for eligible clinical and mental health services to Children's Advocacy Centers. Guidance should include information on applicable provider enrollment, licensure, credentialing, and billing requirements for medical and behavioral health services.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 11. "CACVA supports this recommendation and welcomes the opportunity to work with DMAS to provide CACs with clearer guidance, technical assistance, and training related to Medicaid billing for eligible clinical and mental health services." "At the same time, CACVA believes it is important to recognize that Medicaid reimbursement can only support a portion of the mental health work provided within the CAC model." "CACVA would also encourage DMAS to ensure that any guidance provided is practical and accessible to CACs with varying clinical structures and administrative capacity, particularly smaller CACs that may not have dedicated billing or credentialing staff." **Southern Virginia Child Advocacy Center:** "Medicaid guidance should accommodate evidence-based treatment needs beyond current reimbursement limits." **Foothills Children's Advocacy Center:** "We support the recommendation concerning Medicaid billing guidance but encourage a broader examination of the costs associated with providing specialized child abuse medical evaluations. Clinical oversight, specialized training, peer review, staffing, and infrastructure are essential components of these services and may not be fully supported through existing reimbursement mechanisms." "Our experience developing and sustaining onsite forensic medical services has demonstrated the challenges of establishing a financially viable model, whether through healthcare partnerships or CAC-operated programs."

	"The Commonwealth should evaluate sustainable funding models for both approaches, including reimbursement adequacy and support for essential clinical infrastructure."
Service Expansion in Unserved Areas: <u>Recommendation 12:</u> Request the Virginia Commission on Youth to convene a stakeholder work group to examine models for expanding Children's Advocacy Centers' access to Virginia's underserved and rural areas. The work group should look at how to establish a state-administered Seed and Expansion Grant Program to cover initial start-up costs, to establish satellite centers, or new Children's Advocacy Centers in unserved jurisdictions.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA strongly supports Recommendation 12. "CACVA welcomes the opportunity to participate in this work group and help develop a data-informed statewide strategy that considers child population, service demand, geography, travel burden, existing CAC capacity, and the most appropriate expansion model for each identified gap area." **Foothills Children's Advocacy Center:** Efforts to improve access in underserved communities should include opportunities for established regional CACs to expand their service areas. In many circumstances, expanding an existing accredited center may offer an efficient and sustainable alternative to establishing a new organization.
Child Victim and Witness Testimony Laws: <u>Recommendation 13:</u> Request the Virginia Commission on Youth to study § 18.2-67.9 of the *Code of Virginia* regarding testimony by child victims and witnesses using two-way closed-circuit television to evaluate age restrictions and potential barriers to its effectiveness in being used in situations where a child has been impacted by trauma.	**Children's Advocacy Centers of Virginia (CACVA):** CACVA supports Recommendation 13. "CACVA believes the current framework is too restrictive and does not sufficiently account for what is known about child and adolescent development, trauma, and the ways children may respond when required to testify in the presence of an alleged offender." "CACVA believes this study should examine whether current age restrictions and procedural requirements create unnecessary barriers to the use of two-way closed-circuit testimony in appropriate cases, and whether the statute could provide courts with greater flexibility to consider the individual child's developmental level,

	trauma history, and ability to testify effectively in a traditional courtroom setting."
	<u>Additional Public Comment</u>: **Adeira Wright, Parent, Roanoke:** "When multiple mandated reports, child disclosures, law-enforcement concerns, school information, requests for forensic interviews, agency disagreement, or other serious warning signals converge, there should be a defined way for someone independent to look at the whole child and determine what happens next." **Southern Virginia Child Advocacy Center:** Funding strategies should "recognize the role of CACs under Virginia Code § 63.2-1506.1 in conducting forensic interviews of child victims of human trafficking and provide the resources necessary to sustain coordinated, trauma-informed services for these children and their families." **Foothills Children's Advocacy Center:** "CACs provide specialized, coordinated services that support child protective services, law enforcement, prosecutors, and other public agencies. Despite their integral role in the investigative process, CACs often lack the predictable public funding available to their multidisciplinary partners." "We encourage the Commonwealth to explicitly recognize CACs as essential components of Virginia's coordinated response to child abuse and address this structural funding disparity."