

CWS2020W: On-Call for Non-CPS Workers Webinar
LEARNER HANDOUTS

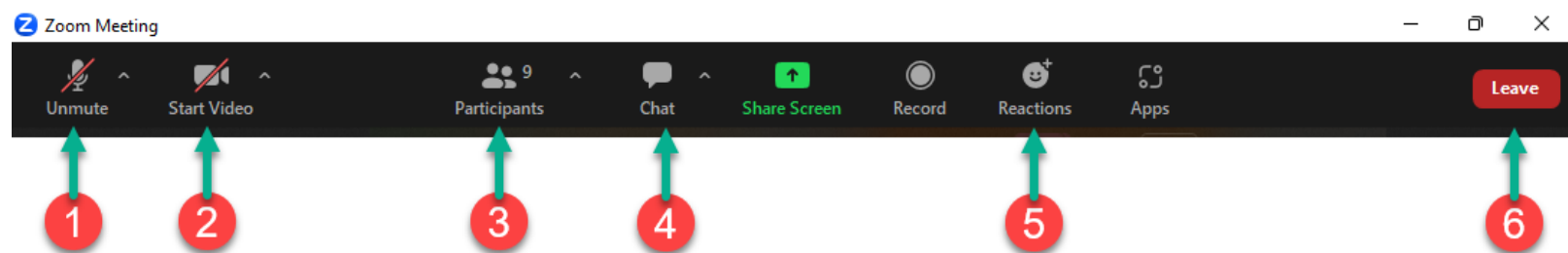


VIRGINIA DEPARTMENT OF
SOCIAL SERVICES

LTD Local Training
and Development

OVERVIEW OF ZOOM ATTENDEE CONTROLS

In every ZOOM meeting, an attendee will see a black bar with various controls listed. The most commonly used attendee controls will be detailed below:



1. **Mute/Unmute** yourself by clicking on the microphone icon
2. **Start/Stop Video** by clicking the camera
3. A list of **Participants** can be found by clicking on the Participants icon. There is an option to **Raise your hand** if you find yourself on the Participants list. To do this, click the raised hand icon next to your name. You can lower your hand by clicking the same icon a second time.
4. **Chat** box can be opened by clicking the speech text icon. You can participate in the chat with other learners, or send a chat message to the trainer individually, by selecting the appropriate designation under “To” in the chat.
5. **Reactions** can be used to offer non-verbal feedback using emojis, thumbs up, clapping ,etc. These reactions remain on screen for five seconds.
6. At the close of the training, select the **Leave** button to end your participation in the Zoom meeting.

VIRTUAL LEARNING AGREEMENT

In our virtual instructor led trainings through the Virginia Department of Social Services, it is expected that:

- We will practice respectful communication, honor each other's time, manage our own distractions, and maintain confidentiality of our peers and any case examples shared.
- We will ask for clarification when necessary. With virtual learning, communication can be challenging. Not being able to talk things through face-to-face leaves room for misunderstanding. If one of us doesn't understand, we'll ask a clarifying question.
- We will spell out acronyms and avoid shorthand to ensure cohesive collaboration.
- We will expect and accept a lack of closure. With online learning it's not unusual to not be able to get to everything and cover every nuance of a topic. We agree to reach out to trainers and our supervisors for follow-up information.

Questions to take back to my agency

What are our MOUs with Law Enforcement, MDTs, Schools, etc?

Do we have a Child Advocacy Center we utilize for forensic interviews?

What is our process and contact information for mandated notifications? (Law Enforcement, Commonwealth Attorney, Regional Specialist, Medical Examiner)

Do we have a community standard or county ordinance regarding minimum age for a child to be unsupervised for a short period of time? Beginning-level babysitting?

[illegible]

State Hotline Call – Gomez Family

A state hotline worker calls you and provides the following information from the complainant:

- Caller, Maria Gomez, is the mother of 3 children who are due to return to their father on Monday after school.
- Caller stated that today she found bruising on her son Nicolas' back and when she asked what happened Nicolas told her that his dad hit him when he got in trouble.
- Caller she does not want the children to return to their father's where they are "obviously not safe!"
- Caller stated that the bruises are approximately 3-4" long x 1" thick. She stated it looks like he was hit 2-3 times with a belt or ruler because there are circles in the center of the bruising.

The state hotline worker also provided you with the following information about the family from OASIS:

There are 2 previous family assessments in OASIS

- Ref XXXXXXXX: Physical Abuse by the father. 3 years ago a call came in about Isabella Gomez. Isabella was 8-years-old at the time and came to school with a bruise on her hip. She told the nurse that father pushed her into the corner of her bed because she had not finished her homework. It was determined that Isabella was not pushed into the bed but fell into it when her father was yelling. The father was referred for parenting classes and the FA was closed.
- Ref XXXXXXXX: Physical Neglect by the mother. 1 year ago an anonymous complaint was made that the 2 younger children were being left home alone after school for hours until their sister got home. This was closed after it was determined that the children were staying with a sitter (neighbor) until the mother got home from work.
- Family
 - Father: Marco Gomez, 32-year-old Hispanic male
 - Mother: Maria Gomez, 31-year-old Hispanic female
 - Children: Isabella (11-year-old female), Nicolas (7-year-old male), and Cortez (4-year-old male)

Both the mother and the father live in your jurisdiction.

Missing/Runaway Youth in Foster Care
Actions to be Taken by Family Services Specialist
As per VDSS Child and Family Services Manual, Chapter E. Foster Care, Section 17.13

| Action | Timeframe | Date Completed |
|---|---|----------------|
| Upon Learning Child/Youth Is Missing Or Runaway: | | |
| Notify local law enforcement (verbal) Provide information and report special circumstances <i>(VDSS Foster Care Guidance, Section 17.13.1)</i> Make a note of who you reported to this information to and the name of the assigned law enforcement investigator. | Immediately | |
| Request Amber Alert when making report to law enforcement IF worker believes child unwillingly left foster home or was removed by unauthorized person Request law enforcement to enter information about child into FBI's NCIC database | Immediately | |
| Once a report is filed with law enforcement, contact the NCMEC at 1- 800-8435678. | Immediately | |
| Notify parents (verbally) (unless parents cannot be found or have had parental rights terminated) Make a note of parent(s) names and date notified. | Immediately | |
| Notify child's/youth's guardian ad litem (verbal) Make a note of name(s) and date notified. | Immediately | |
| Notify any/all of the following: Family members Service providers Names/organizations: Other appropriate persons Names/relationships: Make a note of name(s), organizations, and date notified. | Within 24 hours | |
| Document youth's missing status in the AWOL screen in OASIS. | Immediately but no later than 24 hours | |
| Notify local law enforcement (written report) Make a note of name and address used. | Within 48 hours | |

Reminder: All activities undertaken to locate children and youth missing from foster care should be clearly and completely documented in OASIS, including report numbers received from the police and NCMEC.

| Action | Timeframe | Date Completed |
|--|--|----------------|
| Continued Efforts To Locate: | | |
| Utilize National Center for Missing and Exploited Children's (NCMEC) checklist of actions http://www.missingkids.com/en_US/publications/NC198.pdf | Ongoing | |
| Attempt to track the child's/youth's activities via Facebook or other social media | Ongoing | |
| Work with police or NCMEC to obtain access to restricted information | | |
| Case staffing with supervisor | Monthly | |
| Report all information about possible location of missing child/youth to supervisor to assess most appropriate course of action | Immediately Ongoing | |
| Maintain contact with law enforcement, GAL, birth parents, family members, relatives, former caregivers, service providers, and other parties as appropriate | Ongoing | |
| Make a note of name(s) and date notified for each time contacted. | | |
| Action | Timeframe | Date Completed |
| When Missing Child/Youth Returns: | | |
| Notify law enforcement | Immediately (but no later than 24 hours after worker is notified of return) Within 1 hour if placed on Amber Alert | |
| Make a note of who you reported to: | | |
| Notify parents and GAL | As soon as possible after worker is notified | |
| Make a note of names(s) and dates. | | |
| Action | Timeframe | Date Completed |
| When Missing Child/Youth Returns: | | |
| Notify other parties | Within 24 hours (but no later than 48 hours) of return | |
| Make a note of names(s) and dates. | | |

| | | |
|---|---|--|
| <p>Discussing Runaway Episode with youth.</p> <p>Discussion Prompts:</p> <ul style="list-style-type: none"> • Are you ok? Do you need any supports, services, medical attention? • What do you need right now to feel safe? • Is there anything I can do to make it easier to stay? • Tell me in your own words what happened. • Was there anything that would have changed your mind to keep from running? What did you hope to happen when you left? • Did you have a plan on how to take care of yourself and did it work out? • What made you decide to return? What are your plans for the future? • What do you want to see happen in the next 3 months? <p>Screening for Human Trafficking* (Section 12.5.1)</p> <p>If yes, Notification to Law Enforcement & document in OASIS.</p> | <p>As soon as possible upon youth's return</p> <p>Immediately</p> | |
| Other Outcome/Resolutions: | | |
| i.e. Youth aged out while missing | | |
| Make a note of outcome/resolution and date | | |

Reminder: All activities undertaken to locate children and youth missing from foster care should be clearly and completely documented in OASIS, including report numbers received from the police and NCMEC.

10 Step Forensic Interview

University of Southern California Law

From the Selected Works of Thomas D. Lyon

August 27, 2021

9. Lyon, T.D. (2021). Ten Step Investigative Interview (Version 3)



Available at: <https://works.bepress.com/thomaslyon/184/>

Ten Step Investigative Interview

Thomas D. Lyon, J.D., Ph.D. tlyon@law.usc.edu © 2021 (Version 3)
(Adaptation of the NICHD Investigative Interview Protocol)

A. INSTRUCTIONS

1. DON'T KNOW instruction

If I ask you a question and you don't know the answer, then just say, "I don't know."
So if I ask you "What is MY DOG'S name?" what do you say?
OK, because you don't know.
But what if I ask you "Do YOU have a dog?"
OK, because you do know.

2. DON'T UNDERSTAND instruction

If I ask you a question and you don't know what I MEAN or what I'm SAYING, you can say, "I don't know what you mean." I will ask it a DIFFERENT way.
So if I ask you "Where is your PATELLA?" what do you say?
That's because "patella" is a hard word. So I would say, "Where is your KNEE?"

3. YOU'RE WRONG instruction

Sometimes I make mistakes or say the wrong thing. When I do, you can tell me that I am wrong.
So if I say, "You are THIRTY years old," what do you say?
OK, so how old are you?

4. IGNORANT INTERVIEWER instruction

I don't know what's happened to you.
I won't be able to tell you the answers to my questions.

5. PROMISE TO TELL THE TRUTH

It's really important that you tell me the truth.
Do you PROMISE that you WILL tell me the truth?

B. NARRATIVE PRACTICE & RAPPORT-BUILDING

6. PRACTICE NARRATIVES

Follow-up answers with NEXT and MORE invitations: "you said [X]; what happened NEXT" and you said [X]; tell me MORE about [X]"

a. LIKE TO DO/DON'T LIKE TO DO

First, I'd like you to tell me about things you LIKE to do.

Pick an action-oriented activity the child mentioned and follow up with "You said you like to [activity]. Tell me EVERYTHING that happened the last time you [activity].
e.g., "You said you like to play soccer. Tell me everything that happened the last you played soccer."

Now tell me about the things you DON'T LIKE to do.

Follow up with "You said you don't like to [activity]. Tell me EVERYTHING that happened the last time you [activity]."

b. LAST BIRTHDAY

Now tell me about your last birthday. Tell me EVERYTHING that happened.

Ten Step Investigative Interview (con't.)

C. ALLEGATION PHASE 7. ALLEGATION

(If child discloses abuse, go directly to ALLEGATION FOLLOW UP. Determine IN ADVANCE which allegation questions you will ask.)

a. Tell me why I came to talk to you.

Or, Tell me why you came to talk to me.

It's really important for me to know why I came to talk to you/you came to talk to me. b.

I heard you saw

e.g., "I heard you saw a policeman last week. Tell me what you talked about."

c. Someone's worried

e.g., "I heard the policeman is worried that something may have happened to you? Tell me what he is worried about."

d. Someone bothered you

e.g., "I heard that someone might have bothered you. Tell me everything about that." e.

Something wasn't right

e.g., "I heard that someone may have done something to you that wasn't right. Tell me everything about that."

8. ALLEGATION FOLLOW UP

You said that [repeat allegation verbatim]. Tell me everything that happened.

e.g., "You said that Uncle Bill hurt your pee-pee. Tell me everything that happened."

9. Follow up with invitations: NEXT, MORE, HAPPENED

NEXT: "You said [X]; what happened NEXT"

MORE: "You said [X]; tell me MORE about [X]"

HAPPENED: e.g. "What was the FIRST thing that HAPPENED?" "Tell me everything that HAPPENED in the [room mentioned by child]." EXHAUST INVITATIONS before moving to Wh- Avoid yes/no and forced-choice questions.

10. MULTIPLE INCIDENTS

Tell me everything that HAPPENED the LAST time...

Tell me everything that HAPPENED the FIRST time...

Tell me everything that HAPPENED the time you REMEMBER the MOST...

Tell me everything that HAPPENED the WORST time...


Tell me everything that HAPPENED a DIFFERENT time...


Did (repeat allegation) happen ONE time or MORE than one time?


Only ask this question if you are unclear if the child is talking about multiple incidents

Guidelines for Age Appropriate Questions

ASKING AGE-APPROPRIATE INTERVIEW QUESTIONS

| CONCRETE  | | | | | | | ABSTRACT | |
|---|-----|------|--------|-------|------------|---------------|------------------|------|
| AGE | WHO | WHAT | 1X/>1X | WHERE | SEQUENCING | CIRCUMSTANCES | EPISODIC DETAILS | WHEN |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5-6 | | | | | | | | |
| 7-8 | | | | | | | | |
| 10+ | | | | | | | | |

 Developmentally “typical” child may be able to answer these questions.

 Some children at this age may have the capacity to answer these questions.

Trauma may be an additional impact to ability to answer.

Minimal Facts Interview

A primary goal of the multidisciplinary approach to the investigation of child abuse is the avoidance of multiple, duplicative interviews of a child. Most communities require a joint investigation of child abuse by law enforcement and Child Protective Services, and both agencies have a need for the child to be interviewed as part of their investigation.

When possible, a trained child forensic interview specialist may conduct the forensic interview, with the interview observed by CPS & law enforcement investigators and recorded. The primary goal of employing a skilled child forensic interviewer, recording the interview, and the avoidance of multiple interviews, is to obtain the most complete and non-leading account of the child's statements.

In many cases a forensic interview can be scheduled immediately at a Child Advocacy Center, and a minimal facts interview is not necessary. When the forensic interview cannot be scheduled immediately a minimal facts interview is sometimes needed to assess the immediate safety of the child. Following an initial report of the alleged abuse of a child, an initial response may be made by either the CPS Worker and/or the Law Enforcement Investigator in order to assess safety until the forensic interview takes place.

The CPS worker or Law Enforcement Investigator doing a minimal facts interview should focus on safety and well-being assessment questions. Any spontaneous statements should be accepted and recorded. The first responder should not silence a verbal, forthcoming child; but should not ask for details. All information shared by the child should be recorded in as verbatim a manner as possible, including noting emotional state and behaviors.

In many cases the following information can be gathered from an adult, if they are deemed to be protective of the child and reliable. If there is no protective adult in which to gather the information, the first responder can gather the following information in which to assess the immediate safety of the child:

1. What type of abusive activity happened?
2. Who did it? What is their relationship to the child?
3. What access does the alleged offender have to the child? Does the alleged offender live in the same home as the child?
4. Where did it happen? Where else did it happen?
5. When did the last incident occur? In cases of sexual abuse that happened within the last 72 hours, it might be necessary to refer the child for a pediatric SANE exam.
6. Are there other victims?
7. Are other steps necessary to assure the safety of the child and other potential victims?
8. Is immediate medical attention necessary for the child's health or to gather physical evidence?

If the first responder has any concerns about the emotional or physical safety of the child, she/he should ask the necessary questions to make decisions about removal or safety planning. In order for any type of safety plan to be developed, there must be sufficient information obtained to support the plan. The child's safety takes precedence over all other concerns.

The following are tips to follow when talking to a child you suspect has been abused:

1. Find a private place to talk to the child.
2. Introduce yourself in a way the child understands. "I'm Officer Joe and my job is to keep kids safe."
3. Listen openly and calmly with minimal interruptions.
4. Record the conversation.
5. Reassure the child by saying "I believe you" and "It's not your fault."
6. Be aware of your facial expressions and body language.
7. Do not make promises you can't keep.
8. Use the child's words. Do not correct the child if (s)he uses slang words.
9. Limit your questioning. Don't go further than needed because the inquiry about details will happen during the FCAC forensic interview.
10. Avoid asking leading questions.

The decision for referral to a Child Advocacy Center is established by local protocol.

When such a determination has been made, the following steps should be taken:

1. The first responder should give the caretaker detailed information about the appointment at the CAC, if already scheduled.
2. Questions should be answered and assurances should be provided about the continuity of the process.
3. The child can be given a much simpler and age appropriate explanation of the CAC. ("You will be going to a safe place where there is a person whose job it is to talk to kids.") A first responder's positive contact can provide a bridge to ease the child's anxiety about the forensic interview.
4. Contact information should also be given to the caretaker.
5. All information should be carefully documented.

The safety of all children in the household must always guide practice. If it is the judgment of the first responder that the above questioning should be extended to assess the safety needs of the child and family, the investigator must use his/her professional judgment. If arrest or apprehension of the alleged perpetrator may be facilitated by further questioning, the Law Enforcement first responder should follow procedures recommended by their protocols.

*Reference: Foothills Child Advocacy Center

RISK FACTORS

| | |
|---|--|
| <p><u>Caretaker</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> History of childhood maltreatment <input type="checkbox"/> History of mental health issues <input type="checkbox"/> History of substance abuse <input type="checkbox"/> History of criminal activity (adult or juvenile) <input type="checkbox"/> Domestic violence incidents in past year <input type="checkbox"/> History of prior CPS ; ongoing or foster care services | <p><u>Child</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Developmental or physical disability <input type="checkbox"/> Medically fragile or failure to thrive <input type="checkbox"/> Substance exposed newborn <input type="checkbox"/> Delinquency <input type="checkbox"/> Mental health or behavioral problem <input type="checkbox"/> Prior injury as result of abuse or neglect |
| <p><u>Caretaker and Child</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Blames child <input type="checkbox"/> Justifies maltreatment <input type="checkbox"/> Provides insufficient emotional or psychological support <input type="checkbox"/> Uses excessive or inappropriate discipline <input type="checkbox"/> Domineering <input type="checkbox"/> Provides physical care inconsistent with child needs | <p><u>Other</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Housing is unsafe <input type="checkbox"/> Family is homeless |

SAFETY FACTORS

| | |
|---|--|
| <div style="text-align: center; margin-bottom: 10px;">○</div> <ul style="list-style-type: none"> <input type="checkbox"/> Caretaker caused serious physical harm to the child and/or made a plausible threat to cause physical harm in the current Investigation/Family Assessment. <input type="checkbox"/> Caretaker's explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern. <input type="checkbox"/> There is evidence that the mother used alcohol or other drugs during pregnancy, AND current circumstances suggest the infant's safety is of immediate concern. <input type="checkbox"/> The family is refusing access to the child or there is reason to believe that the family is about to flee, AND available information suggests that child safety is of immediate concern. <input type="checkbox"/> Caretaker does not provide supervision necessary to protect child from potentially serious harm. <input type="checkbox"/> Caretaker fails to protect child from serious physical harm or threatened harm by others. | <div style="text-align: center; margin-bottom: 10px;">○</div> <ul style="list-style-type: none"> <input type="checkbox"/> Domestic violence exists in the home, AND circumstances suggest that child safety (physical and/or emotional) is of immediate concern. <input type="checkbox"/> Caretaker is unwilling or unable to meet the child's most basic needs (food, clothing, shelter, and/or medical/dental/mental health care), AND this causes the child to be in imminent danger. <input type="checkbox"/> Child's physical living conditions are hazardous and immediately threatening, based on the child's age and developmental status. <input type="checkbox"/> Caretaker actions cause significant and excessive emotional distress for the child, AND available information suggests that child safety is of immediate concern. <input type="checkbox"/> Child sexual abuse is suspected, AND circumstances suggest that child safety is an immediate concern. <input type="checkbox"/> Current circumstances, combined with information that the caretaker has or likely has seriously maltreated a child in the past, suggests that child safety may be an immediate concern. <input type="checkbox"/> Other safety factors. |
|---|--|

PROTECTIVE CAPACITIES OF CAREGIVERS

| Cognitive Protective Capacities | Behavioral Protective Capacities | Emotional Protective Capacities |
|---|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Plans and articulates a plan to protect child <input type="checkbox"/> Aligned with the child <input type="checkbox"/> Adequate knowledge to fulfill care giving responsibilities and tasks. <input type="checkbox"/> Reality orientated; perceives reality accurately <input type="checkbox"/> Has accurate perceptions of the child <input type="checkbox"/> Understands their protective role <input type="checkbox"/> Self-aware | <ul style="list-style-type: none"> <input type="checkbox"/> History of protecting others <input type="checkbox"/> Takes action to correct problems or challenges <input type="checkbox"/> Demonstrates impulse control <input type="checkbox"/> Physically able <input type="checkbox"/> Demonstrates adequate skill to fulfill care giving responsibilities <input type="checkbox"/> Possesses adequate energy. <input type="checkbox"/> Sets aside their needs in favor of a child <input type="checkbox"/> Adaptive <input type="checkbox"/> Assertive <input type="checkbox"/> Uses resources necessary to meet the child's basic needs <input type="checkbox"/> Emotionally supports the child | <ul style="list-style-type: none"> <input type="checkbox"/> Able to meet own emotional needs <input type="checkbox"/> Emotionally able to intervene to protect child <input type="checkbox"/> Resilient <input type="checkbox"/> Tolerant <input type="checkbox"/> Displays concern for the child and the child's experience and is intent on emotionally protecting the child <input type="checkbox"/> Strong bond with child and is clear that the number one priority is the well-being of the child <input type="checkbox"/> Expresses love, empathy and sensitivity toward the child; experiences empathy with the child's perspective and feelings |

Gomez- Additional Interview Details**Gomez Family**

After contacting law enforcement to respond, you looked at the significant injuries on Nicolas' back, and discussed the information he disclosed in his interview. You and the law enforcement officer conduct a minimal facts interview with Isabella and learn the following:

Isabella –

This interview was recorded. You, the Family Services Specialist (FSS), and the detective introduce yourselves to Isabella and explain that it is your job to listen to children. FSS reviewed instructions for the interview and then asked Isabella to tell them about something she likes to do. Isabella said she loves to play soccer. FSS asked Isabella to tell them all about her last game of soccer. Isabella told them she played at her school and she plays the goalie. Isabella was smiling and sitting up as she talked about her game and how she blocked the other team from scoring 3 times and her team won 4-1.

FSS asked Isabella to tell them why they came to talk to her today. Isabella, crossed her arms and sat back in her chair, and said her mother had called them about her brother, Nicolas' marks on his back. The FSS nodded and said, "Tell me about the marks on Nicolas' back?" Isabella looked down and was very quiet. After a long pause she quietly said, "I'm not supposed to tell." There was more silence and then she began to cry and said, "I don't want him to kill us!" The detective spoke up and told Isabella that's why she is here, because her job is to keep kids safe. There was more silence and then Isabella said "I just don't want him to do it anymore, and if he'd just stop I'd be ok." The FSS asked, "Who do you want to stop?" Isabella cried harder and said, "My father, I want my father to stop touching me!" The FSS said, "Tell me more about that." There was a long silence again and then Isabella said, "Nicolas walked in when my father was touching me and that is why he got beat. My father touches my private parts and makes me touch his. He told me that if I ever tell he will kill me and my brother. Please don't tell him I told you, please!" Isabella began sobbing hard now and asked for her mother. The FSS and the detective agreed to end the interview for now and got Ms. Gomez for Isabella. Ms. Gomez was able to help get Isabella calm and the FSS told Isabella, "Thank you for talking with us today. We may have some more questions later. Would it be ok if we talked to you again another time about this?" Isabella said, "Ok, but not tonight." The FSS assured her it would not be tonight.

Ms. Gomez –

The FSS and detective spoke with Ms. Gomez and let her know that both interviews with the children were recorded and gave a basic summary of what the children disclosed. It was explained that a follow-up forensic interview for Isabella, with the Child Advocacy Center, is needed and that the assigned FSS would be scheduling that as soon as possible. The FSS

provided Ms. Gomez with a copy of the Investigation Brochure and explained the process of the investigation. The detective explained to Ms. Gomez that their investigation process is different but that she and the assigned CPS worker would be working together for most of the process to limit the number of times the children will need to be interviewed. The FSS asked Ms. Gomez some questions about her family and she provided the following information: Both Mr. and Ms. Gomez were born in the U.S. where their parents moved to make a better life for themselves. She met Mr. Gomez at church and thought he was a good man. He had a job and took care of the family but at night he would get so angry and yell at the kids all the time. She felt like it was affecting their schoolwork and she decided to leave him. Ms. Gomez began to cry as she said, "this is all my fault. If I had not left him he would not have touched my baby!" The FSS assured Ms. Gomez this was not her fault and told her she did the right thing by calling to report about her son's injuries. Ms. Gomez continued to answer the FSS's questions, explaining that she got a job after she left Mr. Gomez so she could support the children. She is grateful for her friend who lives next door and cares for the children when she is at work. Ms. Gomez denied that she has ever used or abused any alcohol or drugs. She said Mr. Gomez does drink and his anger is always worse when he drinks, but she never felt he drank in excess or was an alcoholic. She has no knowledge that he has ever used drugs.

The FSS and detective spoke about the injuries on Nicolas and interviews with the children and mother. The detective said he would like for the forensic interview with the Child Advocacy Center to take place before he arrests the father and has to let him know about the allegations. They agreed that if the forensic interview could not take place on Monday, the detective would arrest the father that afternoon and ask for a protective order based on the injuries to Nicolas.

Nicolas Gomez –

Nicolas is a 7-year-old boy who lives with each parent on alternating weeks. He stated that he prefers his mother's home because he is scared of his father's temper and because of the recent events that happened the last week he stayed with his father. He stated that he is very scared to share what happened when his father gave him the bruises on his back.

Nicolas stated that his father gave him a beating with his belt after he walked in on him doing something to his sister, Isabella. He woke up in the middle of the night and walked to the hall bathroom when he heard a strange noise from his sister's room. He went to her room to check on her and found his father was in the room. His father was on top of his sister and they were not wearing any clothes. Isabella saw Nicolas first and looked terrified.

Nicolas stated that when his father beat him, he told him that if he tells anyone about it, he is going to kill him and his siblings. Since the incident, Isabella has begged him not to tell because their father has been threatening to kill her if she ever tells and she knows he will follow through with his threat.

Checklists for Situations Requiring Additional Action

Sexual Abuse Allegations

- ☐ Notify Law Enforcement (LE) ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify Commonwealth Attorney ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify On Call Supervisor
- ☐ Minimal Facts Interview (See Handout I)
- ☐ Child Advocacy Center (CAC)

- ☐ MOU with MDT

- ☐ Other locality specific information needed:

*All complaints or reports involving a child being left alone in the same dwelling with a violent sexual offender who is not related to the child by blood or marriage must be reported to **local attorney for the Commonwealth** immediately but not more than two (2) hours of receipt of the complaint or report.*

Checklists for Situations Requiring Additional Action

Any Felony, or Class 1 Misdemeanor, child abduction

- ☐ Notify Law Enforcement (LE) ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify Commonwealth Attorney ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify On Call Supervisor
- ☐ Minimal Facts Interview (See Handout I)
- ☐ Child Advocacy Center (CAC)

- ☐ MOU with MDT

- ☐ Other locality specific information needed:

*All complaints or reports involving a child being left alone in the same dwelling with a violent sexual offender who is not related to the child by blood or marriage must be reported to **local attorney for the Commonwealth** immediately but not more than two (2) hours of receipt of the complaint or report.*

Checklists for Situations Requiring Additional Action

Fatalities/Near Fatalities (Sec. 3.7)

- ☐ Notify Law Enforcement (LE) ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify On Call Supervisor
- ☐ Notify Commonwealth Attorney (CA) ***immediately but within two (2) hours of receipt of the report***
- ☐ Notify Medical Examiner (ME)
- ☐ CPS Regional Practice Specialist
- ☐ Child Advocacy Center (CAC)

- ☐ MOU with MDT

- ☐ Other locality specific information needed:

Checklists for Situations Requiring Additional Action

Substance Exposed Infants

- ☐ How has the infant been affected by substances?
 - Withdrawal symptoms
 - Fetal Alcohol Syndrome
 - Baby tested positive for _____
 - Other: _____
- ☐ Was a Plan of Safe Care started for the mother before giving birth?
 - Remember it may not be called a POSC
 - Who started POSC?
 - What services is mom receiving? Or should she be referred to?
 -
 -
 -
 - If no POSC previously started CPS will start
- ☐ Does the family have prior history with CPS/Child Welfare?
- ☐ Other locality specific information needed:

❖ **Remember, being in the hospital DOES NOT make the baby safe!**

Checklists for Situations Requiring Additional Action

Removals

- ☐ Have you explored other options besides placing the child in foster care
 - Relatives
 - Neighbors
 - Fictive Kin
- ☐ Has the family received services previously? If not, what makes this not an option?
- ☐ Contact On Call Supervisor for approval **before** removal
- ☐ Have access to a list of available foster homes for your locality
- ☐ Have a respite foster care agreement (If Applicable)
- ☐ Have you asked about any Indian Heritage in the Family? (See Sec 1.11 & 1.12)
- ☐ Have you obtained demographic and contact information for ALL biological and legal parents?
- ☐ Remember to ask the caretaker for any information needed by those who will be caring for their child(ren): (allergies, medical issues, insurance, feeding routines, etc.)

My On Call Bag

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WORKER SAFETY CHECKLIST

Prior to initiating the home visit:

- ☐ Assess the intake (know potential risk contributors: substance abuse, domestic violence, mental illness, history of violence, etc.)
- ☐ Review any prior case history
- ☐ Determine if assistance from law enforcement is needed
- ☐ Notify office staff when leaving. Provide a contact number, address, and estimated time of return
- ☐ Do not wear excessive jewelry, high heels, or scarves/necklaces that could be choking hazards
- ☐ Familiarize yourself with the area you are traveling
- ☐ Plan the route you will take to the home
- ☐ Make sure the vehicle you are taking is in good working condition and has enough gas
- ☐ Make sure you have your cell phone and that it is charged
- ☐ Lock valuables in the trunk of your vehicle, if you must take them with you

When parking and exiting your vehicle:

- ☐ Park in the direction you wish to leave
- ☐ Park in the street rather than the driveway (if possible)
- ☐ Canvas the neighborhood
- ☐ Take only items necessary to complete the home visit
- ☐ Put car keys and cell phone in an easily accessible pocket
- ☐ Keep vehicle doors locked

When approaching the home:

- ☐ Visually inspect the outside of the home and surrounding area
- ☐ Take note of the entrances/exits to the house
- ☐ Look/listen for signs of disturbance inside the home
- ☐ Listen/look for signs of animals in the residence
- ☐ Look/listen for hazardous chemicals on the property
- ☐ Take note of any smells associated with substance abuse, etc.

When entering the home:

- ☐ Enter a door within plain sight of the street
- ☐ Wait for a person to answer the door; do not enter unless someone greets you
- ☐ Do not enter the residence if no adult is present
- ☐ Make note of any animals in the home
- ☐ Complete an initial environmental scan for barriers to exits
- ☐ Scan for weapons in the space you are in

When in the home:

- ☐ Stay close to an exit (always stay between family members and the exit)
- ☐ Remain alert and observant
- ☐ Know everyone who is in the residence at all times
- ☐ Maintain personal and professional boundaries
- ☐ Use non-threatening body language and remain calm and polite
- ☐ Respect the family's home
- ☐ Listen to your instincts and feelings
- ☐ Be cautious and use common sense
- ☐ Leave immediately if there is a perceived safety risk

When leaving the home:

- ☐ Thank people for their time
- ☐ Have car keys out and ready upon approaching your vehicle
- ☐ Observe the back seat before entering your vehicle
- ☐ Observe for people or activity taking place in relative proximity to the residence

This handout is from GEN1206: Worker Safety. If you have not yet completed GEN1206 it is highly recommended that you register for it in the VLC.

THE FOUR A'S OF SAFETY

| | AWARENESS What information do I have? | ASSESSMENT Am I in danger? Do I feel threatened? | ANTICIPATION What is most likely to happen next? | ACTION What do I need to do? |
|------------------------------|--|--|---|---|
| SELF | <ul style="list-style-type: none"> What do I know about myself? What are my own strengths and weaknesses? What triggers me? What is the limit of my patience? Do I need help? | <ul style="list-style-type: none"> What am I thinking and feeling? What is my mood? Am I already triggered? Am I furthering the situation by my words/behaviors? | <ul style="list-style-type: none"> Are my attitudes, biases, and stereotypes creating more tension? Can I reduce my risk? | <ul style="list-style-type: none"> Do I intervene, call the police, wait for more information, or leave? |
| ENVIRONMENT / CONTEXT | <ul style="list-style-type: none"> What do I know about the environment? What am I observing? What resources are available to me? | <ul style="list-style-type: none"> Am I physically trapped? Are my options limited? Am I physically threatened? Do I sense danger? | <ul style="list-style-type: none"> If danger exists, can I leave if necessary? Are my choices becoming fewer? Is my risk of danger increasing? | <ul style="list-style-type: none"> Do I need to rearrange my current environment or move to a different environment? |
| POLICY | <ul style="list-style-type: none"> What are the policies/laws that protect and support me? What are the professional expectations of conduct? | <ul style="list-style-type: none"> What are the policies/laws that protect and support me? | <ul style="list-style-type: none"> Will my actions protect me legally? Can I expect to be supported? | <ul style="list-style-type: none"> Are my actions logical, reasonable, and necessary? |
| OTHERS | <ul style="list-style-type: none"> What do I know about the person(s)? What am I hearing and seeing? Are there people present who escalate danger? | <ul style="list-style-type: none"> What emotional state is the person in—positive, negative, or agitated? Is the person under the influence of drugs or alcohol? Does the person have mental illness? | <ul style="list-style-type: none"> If behavior is negative or dangerous, can it or will it diminish? Can I reduce my risk? | <ul style="list-style-type: none"> Do I intervene, call police, wait for more information, or leave? |