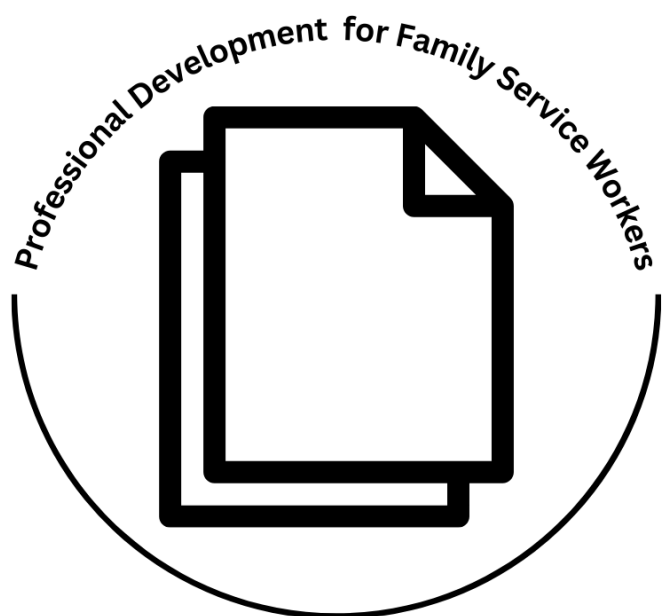


# Investigations Unit 8

## *Table Handouts*



MidSOUTH  
COLLEGE OF BUSINESS, HEALTH,  
AND HUMAN SERVICES  
UNIVERSITY OF ARKANSAS AT LITTLE ROCK

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**Online Handout 8.3.2**  
**ONE PER TABLE**

## The Starkey Family

This investigation involves some situations that are a little out of the ordinary. Let's test your skills at using policy to find the answers these questions.

The Hotline received a report from Little Angels childcare center that 4-year-old Angel Starkey came to the center with 8 bite marks on her. The center personnel thought that the bites looked "too big" to be made by a child. The bites were also symmetrically placed. Two bites were on the face – one on each cheek. Two bites were on the back just below the shoulder blades – one under each shoulder blade. Two bites were on the buttocks – one on each side. And two bites were on the legs – one on each calf. The bites were a dark, purplish red and the skin around them was swollen. One of the bites on the buttocks had broken the skin.

When staff asked the mother about the injuries, she said that Angel's 2-year-old brother Jason bit her when they were fighting over a toy. The center called the Hotline on June 5, 2017, at 4:30 pm. The mother had taken the two children home. The call was accepted for investigation and assigned to DCFS.

You complete a Division Information Management System search on the mother, Janice Starkey. You find two old referrals on her that were both unsubstantiated. These were for environmental neglect when Angel was 18 months, and for locking out when Angel was 3 and Jason was not quite 1 year old.

You attempt to see Angel on June 7, 2017. You had hoped to see her at the childcare center. However, when you got there the center staff said that Angel and Jason had not been back since the Monday (June 5th) when the center made the call.

You make a visit to the address in the childcare records, which was the same address provided in the Hotline report. This house is located in Pope County. When you arrive, you find a woman named Darla Brown. Ms. Brown has 3 children Jack Brown (age 6), Elizabeth brown (age 8) and Marcie Brown (age 11). Darla tells you that Janice was her cousin and had been living with the Browns for about 4 months. On Monday, she came home, told Darla. "I think the Welfare's on me," picked a few belongings and left the home. She told Darla that she was going to her sister's (Denise Starkey) house. The address Darla provided for Denise is in a town that is in Newton County.

When the worker from Newton County went out to the address, she found Janice Starkey in the home with her sister Denise. Denise has a 6-month-old son named Dan.

Questions:

1. Did you (Pope County) initiate the investigation?
2. Which county is primary?

3. Does the Newton County worker need to interview Angel? How soon?
4. List all the people you (worker in Pope County) need to interview)
5. Household Assessed
6. List all the people the worker in Newton County needs to interview.
7. Who completes the Safety Assessment (Immediate Safety Plan, and Risk Assessment)?

PREPARING FOR INTERVIEW QUESTIONS



Name of Person:

Where/How to Interview (EXPLAIN):

When to Interview:

What Do You Need to Learn from this Person (Purpose/nature of this Interview)?

Issues, Feelings, Concerns (Yours & Theirs)	
Ideas for Introduction:	Specific Questions or Statement or Strategy:
Ideas to Engage and Connect:	Specific Questions or Statements or Strategy:
Ideas to Gather Information:	Specific Questions or Statements or Strategy:
Ideas for Closure:	Specific Questions or Statements or Strategy:
Forms or Pubs Needed:	

## QUESTION TYPES

<b>Open ended question or directive</b>	To gather a lot of information and allow the person opportunity to tell the story	Tell me about what has been going on.
<b>Closed ended question</b>	To get facts, answers to specific questions	When did that happen?
<b>Clarifying</b>	Clarifying usually get more information, fact-based, specific	If I understand correctly, after he threw the soda can, you came into the room to check on him. Is that what you said?
<b>Probing</b>	Gets the other person to think and expand on what they have said.	What happened next? What would happen if...?
<b>Active listening (reflecting)</b>	To communicate understanding of the entire message and to help identify the feeling associated	You seem to feel frustrated/stuck because it does not appear that things are moving along on our work together.
<b>Summarization</b>	To help organize information.	So far, you've mentioned that you are worried about money, your health, and whether you need to find a job or stay home with your youngest child. Did I miss anything?
<b>Redirection</b>	To keep the interview focused.	Let's go back to your worries about your health. I'd like to find out more about that.
<b>Giving options, advice</b>	Offering range of solutions, direct toward action	It seems like you could work on your GED and still apply for the job at the dollar store or even keep your sister's children a few days a week. What do you think?
<b>Confrontation</b>	Nudge or push the person toward acknowledge or admission.	Your words say you want to have your children back in your care, but your actions say it is not a priority for you right now.
<b>Silence</b>	Allows space for the person being interviewed to gather their thoughts.	

## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Safety Threats: An Overview

**Purpose** - Provide standard guidance for promising practices when gathering information to assess the immediate safety of children.

**Related Policy** - Policy II-D, SDM Safety and Risk Manual

**Related Practice Model Goals/Principles -**

- Enhancing safety for children and youth in the home is the top priority for everyone involved.
- Maximize family strengths and build on their skills, abilities, and connections.
- Partner with the whole family, including relatives and fictive kin to create long-term safety, ongoing permanency, and well-being.
- Recognize and appreciate the family's culture.

**How We Do the Safety Assessment-** Although there are various ways to gather information necessary to complete an accurate safety assessment, the SDM Safety and Risk Manual provides step by step guidance on completing the Safety Tool and Risk Tool. Since the dynamic of every household is different, an assessor's approach may require flexibility in the approach to information gathering.

The state inserting a worker into a family's life sets up an adversarial situation from the beginning. Under such conditions, it is the assessor's job to create an atmosphere of discussion, not an interrogation. Through appreciative inquiry, DCFS can obtain information without being seen as attacking, disrespectful, or judgmental. DCFS cannot count on families to become more cooperative, so we must examine and modify our own behavior and techniques to increase transparency and information gathering. Staff should consider using SDM tools such as the Three Houses, Safety House, Three Column Map, and CAP Framework to help increase transparency and information gathering while working with a family.

*The goal is to gather enough information about actions of protection within the family and their network to make the right decisions about child safety. DCFS needs to obtain a balanced assessment of what's already working well and what the worries are for a family which effect child safety.*

For a safety assessment to be effective in structuring and impacting decision making, it must be conducted during the first contact with the family. **If the assessor leaves the household without removing the children or implementing an immediate safety plan, a safety decision has been made.** Subsequent contacts and additional information gathered may alter that decision, making it very important to slow down and gather as much information as possible during the first contact with the family.

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.
- Complete Safety Assessment Tool during first interaction with the household and alleged victim child.

**Documenting Safety Threats** - For each safety threat identified, the assessor should include explanation for injury, facts that support or do not support explanation, quotes, worker observations, Safety Assessment System Guidance, Safety Planning Interventions considered, and other professional assessments as applicable.

**Outcomes -**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Child Safety and Risk and make a determination for an allegation: Preparation

**Purpose** - Provide standard guidance for promising practices when preparing to gather information to assess child safety and risk.

**Related Policy** - Policy II-D, SDM Safety and Risk Manual

#### Related Practice Model Principles -

- Recognize that enhancing safety for children and youth in the home is the top priority for everyone involved.
- Build shared understanding and agreement through family engagement.
- Honor and incorporate the voices of children and youth.

#### How We Do the Work of Preparing to Gather Information to Assess Safety and Risk-

1. **Have a plan & be prepared!** Don't think you can figure out what to do when you get there. This is occasionally successful, but more often it leads to an incomplete gathering of information and poor decision making. Consider the following:
  - Begin with what's working well in the family and build a rapport before discussing worries.
  - How will the allegation be addressed? Would a Safety House or 3 Column Map be helpful?
  - Who should be interviewed first? What is the alternate plan?
  - Who needs to be interviewed? Have you identified the household that needs SDM Tools applied, if any? Make a list of all members of the household (not the dwelling) so everyone gets interviewed.
  - How will you deal with the caregiver's feelings about being reported?
  - How will the children's voices be included? Would the 3 Houses or Safety House be useful?
2. **Know as much as possible before you go!**
  - Carefully read all the intake information. Know the children's names and ages. This lets caregivers know you are aware of the number of kids and plan to see them all. It also helps the children feel more comfortable. (Sometimes the intake doesn't contain the names, but often provides basic information – genders, approximate ages, races, etc.).
  - Become familiar with prior child maltreatment reports. Were there any worker safety issues noted in the prior maltreatment interviews and documentation?
  - Are there major pieces of family information missing at the time of intake? (siblings, other adult residing in the home, other caregivers, sick child's specific ailment, police reports for domestic violence)
3. **Think about the best order to interview subjects.** Although it varies, what is generally considered best practice is listed below. This method provides you with the best opportunity to let each interview build upon the previous one – that is, use the information from the preceding interview to help with the next one.
 

**If the alleged victim is at home:**

  - a. First, after a brief introduction, interview the alleged victim.
  - b. Next, interview the siblings.
  - c. Then, interview the caregiver who was not identified as an alleged offender (if there is one).
  - d. Then, interview the alleged offender.



**If the alleged victim is not at home:**

- a. First, interview the alleged victim, wherever they are located.
- b. Then, proceed in the order listed above.

4. **Try to make each interviewee feel their opinion is valued.** Spend time using appreciative inquiry. Learn what's working well and ask about the allegations. Ensure that each interview is private, and don't violate their confidentiality in subsequent interviews with other subjects. It is not easy to rebuilt trust. The interviewees are our primary sources of information.

**Initial Introduction** - Our initial approach with caregivers will likely set the tone for our entire involvement with the family. Remember the old saying "you only get one chance to make a first impression" – don't get started on the wrong track. DCFS must make it clear that we are involving caregivers in the information-gathering process because they serve a critical role in their family. Be sincere, respectful, attentive, specific, and objective. Let them know DCFS is coming in with an open mind about the allegations.

- **Be direct about why DCFS is involved.** Tell them a report was filed and DCFS is required by law to investigate. Provide an overview of the report without getting into specifics at this time. It is okay to ask them why they believe someone reported them.
- **Provide DCFS identification (badge) and be clear about DCFS' role.**
- **Remind them this is "an allegation" at this point,** anyone can call the hotline and all reports must be investigated.
- **Park on the street to prevent being blocked in and think about an "escape route"** should the situation become dangerous.
- **Let them vent.** Think about how you would act if you thought you were being accused of child abuse or some other serious action. However, be sure to note their specific attitudes and responses (defensive, clarity in their statements, in touch with reality, denial of ever doing anything wrong, how emotional, etc.) You will have to deal with emotions before you deal with facts.
- **Give them your contact information** (phone number, business card).
- **Tell them what the next steps are** – how you plan to proceed with the assessment.
- **Keep it general at this point,** although you will get very specific about the details of the current allegations during the individual interviews. Too much focus on the allegation will cause them to start defending themselves, rather than working cooperatively with you. At this point it is better to talk about the family in general – build rapport with members - how they do in school, do they get along with each other, etc.
- **Begin to think about whether there are immediate safety threats to yourself or the children.** This could include other threatening individuals in the home, weapons, bizarre behaviors, assaults on the child, etc. If these occur to the extent that you cannot proceed with a standard assessment, take immediate protective action - leave, get the police involved, etc.
- **If immediate safety threats are identified for a child, begin immediate safety planning.** This includes getting the caregiver involved in the planning. For example, "Your child needs medical care now; how can we get that done?" Or, "Your child cannot remain in the home with your boyfriend who allegedly molested him; what options do we have?" Help the family identify their safety network and include those people in building an immediate safety plan.
- **Proceed with the interviews** if an immediate safety threat seems possible but you need more information to make an accurate determination. Make decisions based on a rigorous and balanced assessment.
- **Answer questions about their rights.** If they question whether they have to let you inside their home, tell them the alternatives.
- **Try to verify the demographics noted on the intake form** – children's names (including nicknames if that's what they are usually called), ages, races.
- **Get caregivers' assistance in arranging interviews.** Ask them where would be the best spot for privacy. Also, let them know you want to interview them after you interview the children. Let them know you will review the situation with them at the end of your assessment, but don't promise them you will tell them what the child says. Consider having a caregiver introduce you to the child.

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.
- Complete SDM Safety Assessment Tool **upon initial contact** with the household.
- Complete Risk Assessment **within 30 days** of receipt of the child maltreatment report.

**Documenting** – After each interview, remember to document who you spoke with and perhaps how you coordinated and scheduled the meeting. If you spoke with your supervisor about the interviewee, document that as well. You may include this information in your narratives. For example: *Worker contacted the reporter prior to visiting with the alleged victim to prepare for the interview and conferenced with supervisor about interviewing the alleged victim and alleged offender.* Document SOP Tools used for interviews (Safety House, 3 Houses, 3 Column Map, etc.) and document all efforts to develop the family network (Genogram, Ecomap, CLEAR, etc.) and include network members in efforts to create immediate safety plans, as necessary.

**Outcomes of Quality Preparation to Gather Information to Assess Safety and Risk:**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

Resources: 2010 Child Protective Services Training: Structured Decision Making; Hornby Zeller Associates, Inc.  
*Gathering Information Series* (2 of 6) (02/2023)

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## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Safety and Risk: Interviewing the Alleged Victim & Siblings

**Purpose** - Provide standard guidance for promising practices when interviewing the alleged victim and their siblings in order to gather information to assess child safety and household risk.

**Related Policy** - Policy II-D, SDM Safety and Risk Manual

##### **Related Practice Model Principles and Agency Practice -**

- Ensure that the child/youth's voice is gathered/represented at every meeting to inform key decisions and focus on safety, permanency, and well-being.
- Continuously focus on how the abuse/neglect impact the child or youth.
- Identify ways to lessen trauma to children/youth by using a trauma informed perspective to promote healing.

**How We Do the Work of Interviewing the Alleged Victim** - Most interviews with children should be 30 minutes or less to be effective. However, if you are making progress and the child is still focused, don't hold to this time limit. Assessors must probe deeply, but carefully, into the family situation and the allegations. Your interview with this child will greatly increase your understanding of the household dynamics and the factors that affect safety for the child.

- **Explain who you are to the family.** Tell them how you came to be involved and assure them you are there to try to help the entire family.
- **Let the child know they can ask questions.**
- **If the child is old enough, explain confidentiality to them.**
- **Ask the child questions that you know he knows the answer to:** birth date, teacher's name, sibling's names, etc. This helps him get used to speaking with you about non-scary topics.
- **Watch for signs that the child doesn't understand your questions or comments.** Recapping what the child said is a good way to allow them to correct any misunderstandings. Not all 10 year olds function at the same level. During the interview, alter your questions as you get a better feel for the child's functioning level. Consider using the 3 Houses and Safety House with children who aren't very talkative.
- **As you talk about the family, probe into safety-related areas:** what frightens them; who do they see as a protector; what family members are involved and what do those family members do? Who is the child's network?
- **Pay attention to the child's body language** and how they react to questions about caregivers.
- **Be aware of your body language.** Get down to eye level with the child or elevate them to your level, if possible.

Questions should center around the child, caregivers, and the family in general, and could include the following. It is not recommended you ask all these questions— you should pick those you are comfortable asking. When rapport is established, move to questions about the allegations.

##### **Questions About the Child -**

1. Who are your best friends? Who do you play with at school?
2. What do you like to do for fun?
3. What part of school is easiest/best? What is hardest/worst?
4. Who cooked dinner last night? What did you have? Do you like that?
5. What makes you afraid? Who can you go to when you get afraid?
6. Who woke you up for school today? Who made breakfast?



7. Where do you sleep? Where do other family members sleep?

#### Questions About the Family -

1. How old are your brothers and sisters? What are their names? Are they nice to you?
2. Who lives here? Does anyone else spend the night sometimes?
3. What does the family do for fun together?
4. Does your grandmother (aunt/uncle/grandpa) visit? Is that fun? Do they help out with anything?

#### Questions About Caregivers -

1. What fun thing did you do with Mom/Dad/Caregiver this week?
2. Did you get in trouble with Mom/Dad/Caregiver this week? For what? What happens when you get in trouble?
3. What happens when your brother/sister does something wrong?
4. What grown-ups visit your house? When was the last time? What did they do?
5. Are there things your caregivers do that scare you? Someone else scare you?
6. Does Mom/Dad/Caregiver work? Where?

Up to this point, you have not asked about the maltreatment that led to the report. However, you have begun to create a relationship that will make it easier for the child to talk to you about the allegations. At the same time, you are receiving background information that will better help you understand the whole family situation.

When you believe the child is comfortable talking to you, the alleged maltreatment must be brought up. You should "have a feel" for the child by now and recognize signs of anxiety so you know when to slow down and when to proceed.

#### Questions About the Maltreatment Allegations-

1. Can you tell me what happened (how your eye got hurt, or whatever the specific allegation is)?
2. Remind them they are not in trouble.
3. Ask if they received medical care for the injury if there is one. Ask if they have been hurt before and needed to go to a doctor or the hospital.
4. Always ask what else happened. This allows the child to provide additional information. Their responses may not always be relevant, but it helps you see what is important to the child.
5. If there were others present, ask what they did – did they intervene or stop the maltreatment. This is particularly important when one of the caregivers is not identified as an alleged offender. Even if the caregiver wasn't present during the alleged maltreatment, it's important to hear how the child feels the caregiver responded when they did find out.
6. Ask pointed questions about the when, where, why, and how of the incident. What happened before that may have led up to it. However, avoid making the child feel that you believe the maltreatment was justified.
7. Ask if similar things were done to the child's siblings.
8. Ask them to show you where they were hurt – bruises, scratches, etc.

At the conclusion of the interview, provide the child with as much information as possible about next steps. You may not know exactly what's going to happen, but provide what you do know. Recognize their fears and attitudes and offer reassurance if you can.

**How We Do the Work of Interviewing the Siblings** - Interviews with siblings should build on the information obtained from the alleged victim, with several purposes in mind:

1. Could the siblings also be victims? How deeply you probe this issue should be based upon information that the alleged victim provided about their siblings.
2. Get the siblings' perceptions of the caregivers – how they react, how they function, how they treat the alleged victim, how they treat the siblings and other family members.
3. Determine whether the siblings' information supports the statements from the alleged victim, both regarding family functioning and the alleged incident.
4. Observe them to determine whether they are fearful of the caregivers.
5. Determine whether the siblings are safe.
6. Ask if anyone else knows about the alleged abuse/neglect.

7. If one caregiver was hurting the victim, try to probe at how other caregivers reacted. Did they encourage the abuse? Did they try to make the abuser stop?

Follow the same interviewing techniques and questions as provided above for the alleged victim. Help siblings feel comfortable and build some rapport before approaching the maltreatment incident.

Particular care should be given to any indication of differential treatment of the alleged victim, or any notion that the alleged victim is "bad." Probe to find out where that notion came from.

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.
- Complete SDM Safety Assessment **upon initial contact** with the household.
- Complete SDM Risk Assessment **as soon as possible** and always within 30 days of receipt of the child maltreatment report.

**Documenting** - For each safety threat identified, the assessor should include explanation for injury, facts that support or do not support explanation, quotes, worker observations, and other professional assessments as applicable. The assessor should also include documentation and corresponding explanation of identified risks.

**Outcomes of Quality Interviews with Alleged Victim & Siblings -**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

Resources: 2010 Child Protective Services Training: Structured Decision Making; Hornby Zeller Associates, Inc.

*Gathering Information Series (3 of 6) (02/2023)*

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## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Safety and Risk: Interviewing the Non-Offending Caregiver

**Purpose** - Provide standard guidance for promising practices when interviewing the non-offending caregiver in order to gather information to assess immediate safety threats to children.

**Related Policy** - Policy II-D

**Related Practice Model Principles and Agency Practice-**

- Partner with the whole family, including relatives and fictive kin, to create long-term sustainable safety, ongoing permanency, and well-being.
- Engage the family and their network in safety planning to avoid removal of the child from caregivers by using respectful, honest, and transparent communication.
- Recognize that enhancing safety for children and youth in the home is the top priority for everyone involved.

**How We Do the Work of Interviewing the Non-Offending Caregiver**— Depending on whether you are dealing with a single-caregiver home, a two-caregiver home, or other household situations, all items in this section may not be relevant to every case. The information is presented to provide direction when the child lives in a two-caregiver home or the child is being abused by an alleged offender who has a relationship with the caregiver. However, many of the points are applicable to single-caregiver homes or other household situations. This interview is critical for the following reasons:

- This is the person who you will most often depend upon to keep the child safe. You must gather as much information as possible to ensure that you make an informed decision. A substantial number of cases of child abuse deaths and critical injuries came about after an assessor made a quick assumption that the non-reported caregiver would be the protector of the child. You will be judging not only their willingness to protect, but whether they are capable of providing what is needed to protect the child.
- Interview the non-offending caregiver privately, whenever possible.
- This caregiver is the one with whom DCFS will work closely to complete safety assessments and risk assessments and to design a family case plan if a case is opened.
- The assessor will get insight into the alleged offender from an adult viewpoint, which may differ from the information gathered from the child interviews. This interaction will help you decide the best way to manage the interview with the alleged offender.

Major points to remember when conducting an interview with the non-offending caregiver:

- It is crucial to get this caregiver to work with you to carry out the best assessment and plan for the family, while keeping the children safe. It is not a good idea to force this person to choose between the child and the alleged offender at this point, as they may be in an agitated state and cannot rationally make a good decision. It is better to get them to work with you to establish a protective and safe living situation for the child.
- Be supportive and understanding of their mixed loyalties.
- Many non-offending caregivers will be angry with the assessor for being there, and may be in denial about the maltreatment. However, this does not necessarily mean they cannot work with you to protect their child. They may be willing to take whatever steps necessary to keep their child safe, even if they don't fully believe that maltreatment occurred.

**Questions About the Child -**

1. In order to get the non-offending caregiver talking, start with some basic questions that they know the answers to: How old are your kids? How does she do in school? Does she have a favorite television program?
2. What works well when parenting the child?
3. Then ask some pointed questions about the alleged victim – How do you feel about his behavior? How often does he misbehave? Why do you think he (throws food on the floor)?
4. Ask about the child's friends – who are they, what age, do they sleepover, does he sleepover with any of them.
5. Anything that worries you?
6. What chores does he do?
7. What does the child do well?

**Questions About the Family -**

1. Who does what chores in the home – laundry, cleaning, cooking, making beds, etc?
2. Who makes the major decisions? What happens when someone doesn't listen to caregivers? (Ask for an example, or provide one.)
3. How do various family members show they care about other family members – this can also be gathered somewhat from observation.
4. Ask about relatives. Are they in the area? Do they visit often? What kinds of things do they do when they are visiting? What is their relationship with the kids? With the alleged offender?
5. Ask about the neighbors and the neighborhood. Are there get togethers? Can you safely walk down the street at night?
6. If they are married or in a relationship, ask about it. What would they change? What is good about the relationship?
7. Ask who handles the discipline in the family, and how it is administered.

**Questions About the Interviewee -**

1. Ask about their birth family. Where they grew up, what they did for fun, good and bad memories.
2. What do you like about parenting the alleged victim? What do they do that's most frustrating for you? How do you handle that? What did you do the last time the child misbehaved?
3. Ask about their feelings about themselves in relation to the family. Are they happy? What would they change?
4. Ask about their friends. Who are they? What activities do they do together?
5. Do they take part in any outside activities, such as PTA, church groups, clubs, etc?
6. Come back to how they think the alleged victim is doing in general. Look for signs of the level of attachment, blame, empathy – are they bonded? Will they protect him?

**Questions About the Maltreatment Incident -**

1. Ask pointed questions about the maltreatment. Do they believe it occurred as the child said? If so, what do they think led up to it? If not, why not? Why would it be reported differently (if it was)?
2. Do they feel the child is safe at home? Do they think the child is afraid of the alleged offender? Do they feel the alleged offender is a danger to the child? Why or why not?
3. If you have received any information from other interviews that they also maltreated the child or knew about it and allowed it to occur or continue, explore this in a very direct manner. Remember, this may be the person who you are going to entrust with the child's safety, so you must know all the facts.
4. Get them to work with you to figure out a way to provide protection while you are conducting the full investigation. Can they be trusted to do that?
5. Ask why this person thinks this report was called to the hotline.



**Attitude Toward DCFS Involvement -**

1. Assess whether he has had previous involvement with a state agency, particularly a child welfare/protection agency. If so, how did it work out?
2. Identify what she wants from the agency and you (even if it's just to have you go away), then talk about how to accomplish that.
3. Will she be open with you, or do her negative feelings about state intervention make it likely that she will not be honest or fully disclose?
4. Is this a person that you feel can be convinced to trust you?

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.

**Documenting** - For each safety threat presenting immediate danger, the assessor should include explanation for injury, facts that support or do not support explanation, quotes, worker observations, and other professional assessments as applicable. The assessor should also include documentation and corresponding explanation of risk factors.

**Outcomes of Quality Interviews with Non-Offending Caregiver -**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

Resources: 2010 Child Protective Services Training: Structured Decision Making; Hornby Zeller Associates, Inc.

*Gathering Information Series (4 of 6) (02/2023)*

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## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Safety and Risk: Interviewing the Alleged Offender

**Purpose** - Provide standard guidance for promising practices when interviewing the alleged offender in order to gather information to assess household safety and risk.

**Related Policy** - Policy II-D

**Related Practice Model Principles -**

- Hold a clear understanding of the definition of safety.
- Recognize that enhancing safety for children and youth in the home is the top priority for everyone involved.
- Recognize that behavior change and process of achieving change are part of our daily work.

**How We Do the Work of Interviewing the Alleged Offender** - Before this interview begins, the assessor should be clear on what this person's role and relationship is in this family. If it's a birth parent, do they live there? Do they serve an active parenting role, or only an occasional visit? Are they involved in making decisions about the child's life? If they are not the parent, what is their role with this family and the alleged victim? How much access is granted? Do they discipline the child? Do they contribute to the finances of the family?

Also, before beginning the interview, anticipate what you will encounter – anger, denial, demand for information (such as reporter's name), etc. Decide what your responses will be ahead of time, not on-the-spot. In addition, decide just how much information you will provide. You want to get a full understanding of the issue, but you do not want to put any child or the non-offending caregiver in danger.

Your objectives in this first interview with the alleged offender should include:

- Getting their assessment of the family dynamics. How does this person see the family's functioning level?
- Getting their version of the incident.
- Determining whether this person can work with DCFS to mitigate any safety threats, or will they be a hindrance?
- Assess for other variables that impact the safety of the child – domestic violence, mental health issues, drug or alcohol abuse, temper outbursts, depression, actions of protection.

Some pointers:

- Aggression doesn't work. If you want to gain information, you need to work to avoid setting up a hostile interaction.
- If they are loud and demanding, speak quietly so they have to quiet down to hear you. If they continue to rant, wait for them to take a breath, then calmly jump into the conversation with your next question.
- Keep focused on getting information, you need to know as much as possible to gain a balanced assessment of what's working well and what the worries are.
- Observe body language and facial expressions as 80-85% of our communication is non-verbal. Listen to the words, but observe the person.
- Observe your own body language – try not to show anger, fear, disgust.

- Keep information about the report general, otherwise the conversation will quickly deteriorate into defiance and denial.

#### Questions About the Interviewee -

1. Ask how they think the child is doing – in school, with friends, helping around the house, being polite, etc. This is a step toward determining what level of bonding or attachment exists – does this person care about the child?
2. Ask about the easiest and most difficult thing about parenting.
3. Ask about finances as a potential stress inducing issue.
4. If it is a two-caregiver home, ask about whether the adults agree on how to raise the kids. Focus on areas of disagreement and how they are worked out.
5. Ask about a network (friends, family, kin) – who are they, how often they get together, what activities they do, how they support each other. Is there a best friend that this person can talk to about anything?

#### Questions About the Child -

1. Ask about their relationship with the child. Is the child easy to get along with? Is the child a smart Aleck, does the child try to get along with this caregiver?
2. What chores is the child responsible for? Does the child do them regularly and well?
3. Does the child have tantrums? Does the child seem depressed? What makes the child happy?
4. How does the child do in school?
5. Describe the child's closest friends.
6. Does the child have any medical issues?
7. Does this person think the child feels safe and secure at home? Do they believe the child is happy to see them when they come home? Why or why not?

#### Questions About the Family -

1. Who makes the decisions in the house?
2. How do the caregivers show affection for the kids? How do the kids show affection? How do the caregivers show affection for each other?
3. When a child doesn't follow directives or complete chores on time, what happens?
4. If two-caregiver home, explore the relationship – what would they want to change?
5. Ask about extended family members on both sides? Are they helpful, or do they cause problems for the family? Explore the role the family and fictive kin could play in sustainable child safety.
6. Ask them to describe relationships with the neighbors. Do they interact? How?

#### Questions About the Maltreatment Incident -

1. Ask what the caregiver is worried about and how DCFS or the network can help.
2. Ask directly about what happened that resulted in injuries sustained by the child.
3. Ask "what do you think we can do to make sure the children are safe and happy."
4. Ask pointedly about stresses they are experiencing – job issues, substance use, relationship, death of a loved one, etc.
5. If you have formed an opinion about the maltreatment, tell this person what that is. Don't push it, but simply acknowledge, for example, that "Johnny got that black eye from you hitting him, not from falling off a bike" – then focus on "where we can go from here."

#### Attitude Toward DCFS Involvement -

1. Assess whether they had previous involvement with a state agency, particularly a child welfare agency. If so, how did it work out?
2. Assess their attitude toward the investigation and the assessor's role. Is this person open enough to be a positive force in controlling the safety threats?

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.

**Documenting** - For each safety threat identified, the assessor should include explanation for injury, facts that support or do not support explanation, quotes, worker observations, and other professional assessments as applicable. The assessor should also include documentation and corresponding explanation of identified risks.

**Outcomes of Quality Interviews with Alleged Offender -**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

Resources: 2010 Child Protective Services Training: Structured Decision Making; Hornby Zeller Associates, Inc.

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## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Gathering Information to Assess Safety and Risk: Investigation Closure

**Purpose** - Provide standard guidance for promising practices when closing the interviews after gathering information to assess household safety and risk.

**Related Policy** - Policy II-D, SDM Safety and Risk Manual

**Related Practice Model Principles and Agency Practice-**

- Recognize that enhancing safety for children/youth in the home is the top priority for everyone involved.
- Maximize family strengths and build on their skills, abilities, and connections.
- Build shared understanding and agreement through family engagement.
- Partner with the whole family, including relatives and fictive kin to create long-term safety, ongoing permanency, and well-being.

**How We Do the Work of Closing the Interviews -**

1. Get the network together, including the children if appropriate (based on the interview results). Tell them what the next steps will be.
2. Let them comment on your statements. Pay close attention to their reactions, both verbal and non-verbal. Don't let the process start over – focus on moving forward and creating sustainable child safety.
3. Tell them whether you believe immediate safety planning is necessary to ensure the child's safety while you complete additional investigative activities (collaterals).
4. If you think protective action is needed, ask their help in identifying what that will look like.
5. Work out actions of protection together, ensuring immediate safety plans can be monitored.
6. If you determine that immediate safety planning is not needed, make sure the family and network understands that does not mean the investigation is over or that the allegations are unsubstantiated.
7. Begin the process of identifying actions of protection and risk. When necessary, discuss services that can be put into place, and assess their reactions.

**Time Frames -**

- Begin investigations of severe maltreatment **within 24 hours**.
- Begin all other investigations **within 72 hours**.
- Complete all interviews **within 30 days** of receipt of the child maltreatment report.
- Complete Risk Assessment as soon as possible and always **within 30 days** of receipt of the report.

**Documenting** - For each safety threat identified, the assessor should include explanation for injury, facts that support or do not support explanation, quotes, worker observations, actions of protection, and other professional assessments as applicable. The assessor should also include documentation and corresponding explanation of identified risks. Assessors should follow the SDM Safety and Risk Manual when applying definitions and overrides to ensure cases are opened according to SDM guidance.

**Outcomes -**

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.
- DCFS interventions are provided to households where they are most effective.

Resources: 2010 Child Protective Services Training: Structured Decision Making; Hornby Zeller Associates, Inc.

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## Arkansas Division of Children & Family Services Practice Guide Series

### *How We Do the Work is as Important as the Work We Do*

#### How We Do the Work of Preparing a Child for Adoption: Good-bye Visits

**Purpose** - Provide standard guidance for preparing children and families for adoption by effectively preparing for and conducting good-bye visits.

**Related Policy**

- Policy VIII-D
- Policy VIII-E

**Related Practice Model Goals/Principles**

- Identify living situations that support children and their relationships as soon as work with the family begins.
- If children have to leave the home actively strive to preserve their connections to: siblings, family and familiar people, school and community of origin, culture, religion, and tribal affiliations

**How We Do the Good-bye Visit**

An important step in preparing a child for adoption is the good-bye visit with their birth parents. The good-bye visit represents a significant change in the child's life and relationship with the birth parents. It is an opportunity to continue the process of preparing the child for a new family, for parents to give their "blessing" as the child embarks on this new stage of life, and possibly a chance to gather some previously missing information that may be helpful for the child.

Preparation for the "goodbye" visit involves much more than scheduling a date, time, location, and notifying the appropriate parties. Consideration must be given to factors such as length of time since last contact with the child, prior relationship with the child, therapist recommendation, and preference of the child. It is crucial that the FSW gains the cooperation of the birth parents, child's current caregivers, and service providers to ensure the child and family are supported. The visit should be well-planned (e.g., make sure everyone understands their role; hold the visit in a location that is conducive to positive and confidential family interaction) and conducted in a way (e.g., allow ample time for the visit), that can be beneficial for the child and birth family. It is important to recognize that this can be a highly emotional event for all parties.

**How We Prepare the Child for the Good-bye Visit**

- In a face-to-face meeting, tell the child about the upcoming good-bye visit. The purpose and significance of the good-bye visit should be explained to the child in terms they can understand, with consideration to the child's age and intellectual functioning. It may be helpful to have current caregivers or the child's therapist, if applicable, present for this meeting to provide support. Decide prior to the meeting whether the FSW, therapist, or caregiver will take the lead in this discussion with the child.
- If the child's therapist will not attend the preparation meeting, make sure the therapist knows the date of the good-bye visit and schedule an appointment with the therapist following the good-bye visit to allow the child the opportunity to process the event with the therapist.
- Be prepared to answer the child's questions. Often a child will have questions regarding future contact with the birth family.
- Determine if there are other individuals the child would like to be present for the goodbye visit. This may include extended family members or other important people in the child's life.
- Ask the child, as age appropriate, if they would like to write down questions they would like to ask the birth parents during the good-bye visit.

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- Ask the child, as age appropriate, if they would like to draw a picture or write a letter to give to the birth parents at the good-bye visit.

#### **How We Prepare the Birth Family**

Regardless of how it is approached, TPR is devastating to parents. Here are some tips that may help prepare the birth parents for the good-bye visit:

- In a face-to-face meeting, discuss with the birth parents the purpose and importance of the good-bye visit. Because this can be such a difficult conversation, take safety into consideration. If possible, do not have this conversation by yourself with the birth parents.
- Reinforce the important role the parents have played in the child's life. Emphasize that because of the child's love for the parent, it is important for the parents to give the child "permission" to be happy and to love and trust another family. Research indicates children are less likely to disrupt from an adoptive placement if the birth family has given "permission."
- Make sure the birth parents' issues relating to the case or court proceedings have been addressed. The birth parents should understand the good-bye visit is time for them to spend with their child, not to bring up the case or court issues again in front of the child.
- Discuss with the birth parents whether there are special activities they would like to do at the good-bye visit such as sharing family pictures, telling the child the story of their birth or early childhood, or bringing keepsakes that have special meaning to the child or birth parents.
- Consider giving parents the chance to write a good-bye letter or video a "good-bye" or "blessing"—their child will need this at different stages of their life. Ensure any letter or video is appropriate for the child to view.
- It may be helpful to practice with the parents what they will say to the child during the visit. Emphasize the importance of telling the child:
  - how much they are loved
  - how much they will be missed
  - involvement with the child welfare system is the not child's fault
  - it is okay to be happy and love other important adults in the child's life
 Most children need to hear from the parent that attaching to an adoptive family is not a betrayal of the birth parent.
- Determine with the birth parents if there are other extended family or network members the birth parents would like to invite to the good-bye visit, or whether the birth parents are agreeable to inviting significant people the child has mentioned.

#### **How We Prepare Resource Parents for the Good-bye Visits**

- Ensure resource parents are prepared for what may be a very emotional meeting for everyone in attendance.
- If the plan is for the child to be adopted by the current resource parents, initiate a discussion in advance with the resource parents to determine their plans for future contact with birth family members. The child can then be given honest and consistent answers.
- If the resource family is opposed to future contact, or if such contact would not be in the child's best interest, it may be helpful to discuss other ways that connections can be maintained; for example, sharing photographs, keepsakes, child's life book, letters or cards, contact other significant figures in the child's life, etc.

**Time Frames**

- A good-bye visit should occur within 30 days of the TPR ruling, if no appeal has been filed.

**Documenting the Good-bye Visit**

- Document the date of all preparation meetings as well as the date of the good-bye visit in the contact screens in the Division information management system. Be sure to note who attended all meetings, a brief description of what took place during the meeting, any next steps determined during the meetings, and any other important information related to the meetings.

**Outcomes**

- Children have permanency and stability in their living situations.

Resources: Kentucky Department for Community Based Services Standards of Practice 13.8.  
North Carolina Division of Social Services, Children's Services Community Practice Notes. Vol. 6, No. 1

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