

Foundations Unit 3

Trainer Guide



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

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Revision Tracking Sheet (Classroom)

Classroom Unit Reviewed	Unit 3	Date	04/2025
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Revision Key: **Green** = content added **Strikethrough** = content removed

Note: All changes are indicated in **green** font in the trainer guide for easy reference. Strikethroughs will only appear in the revision tracking sheet to indicate specific deleted materials as needed. If a larger section is removed the section will be referenced in the tracking sheet.

Document	Revision Tracking
General/All	<ul style="list-style-type: none"> Update Section Numbers (Example: from Section 3.1 to Section 1). Links provided in the Trainer Guide text have been removed. Links for videos will only be found in the Training Materials section and in the Section Overview page. DCFS Arkansas Annual Report updated to 2024. ICWA video updated in Training Materials section and in the Section Overview. REMOVED Duplicated CANS / FAST content from the entire Unit. (covered in unit 4, Day 2) Changed references from The Structured Decision-Making System and SDM Safety Assessment to SDM Safety and Risk Assessment or Safety and Risk Assessment Tool (whichever is applicable) on Title Areas, Agenda, Header Space and in material. Removed the term “parent” from the material, replaced it with the term “caregiver”
Trainer Guide	<ul style="list-style-type: none"> REMOVED Sympathy v Empathy Brene Brown optional video. This video will be moved to Unit 2. Link removed from Section Overview as well. <p>Pg. 22 –</p> <ul style="list-style-type: none"> ADDED information regarding policy for use of recording devices <p>Pg. 39 –</p> <p>Pass out the Safety and Risk Assessment Manual (most recent is November 2023 March 2024). An electronic copy of the manual is located on the website.</p> <p>Pg. 55 – 56 -</p> <ul style="list-style-type: none"> Updated “Answer Key for Practice 1 and 2 and clarifying language

Document	Revision Tracking
	<ul style="list-style-type: none"> • Pg. 57 – The risk assessment identifies families that have a very high, high, moderate, or low likelihood of future system involvement. • Pg. 57 – <ul style="list-style-type: none"> • ADDED information regarding use of eDoctus • Pg 61 - 62 – <ul style="list-style-type: none"> • ADDED clarifying information and related policy regarding ICWA • REMOVED Land Acknowledgement (duplicated from Unit 2)
Trainer Resources	<ul style="list-style-type: none"> • REMOVED TEDTalk – Dr. Nadine Harris transcript. (closed captioning available in the video directly) • UPDATED Legal Definition Crossword Answer Key.
Participant Guide	<ul style="list-style-type: none"> • ADDED Agenda to Participant Manual
Handouts	<ul style="list-style-type: none"> • UPDATED Handout 7 – Safety Planning Capacities / Safety Intervention Practice • UPDATED Handout 10 – Legal Definition Crossword Puzzle • UPDATED Handout Numbers (i.e. Handout 1, Handout 2, etc) • REMOVED Agenda (previously Handout 1) • ADDED Handout 11 – Uploading to eDoctus
Power Point	<ul style="list-style-type: none"> • N/A

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AGENDA

Day 1

I. **Section 1: Dynamics of Maltreatment**

- A. Welcome, Agenda and Agreements
- B. TEDtalk ACES
- C. Let's Talk Statistics
- D. Legal Definitions of Maltreatment
- E. Dynamics of Child Maltreatment
- F. Family Social Histories

II. **Section 2: Generational Trauma**

- A. Generational Cycles Video
- B. Protective Capacities
- C. Engaging Parents with Traumatic Histories
- D. Class Review

Day 2

III. **Section 1: The Effects of Child Maltreatment on Children**

- A. Through the Eyes of the Child
- B. Indicators of Abuse PowerPoint
- C. What is your Stress Level?

IV. **Section 2: Relation of Maltreatment Dynamics to SDM Safety & Risk Assessments**

- A. Fundamental Assessments
- B. Tools for Assessing Safety & Risk
- C. SDM Safety & Risk Assessment Manual

Day 3

V. **Section 1: SDM Safety & Risk Assessment Tools Continued**

- A. SDM Safety & Risk Assessment
- B. Identifying Current Safety Threats
- C. Safety Planning Capacities & Safety Interventions
- D. Safety Assessment Documentation
- E. Structured Decision-Making Risk Assessment
- F. Uploading to eDoctus

- VI. Section 2: Introduction to Legal Issues**
 - A.** Review and Connections
 - B.** Laws, Policies, Funding and Practice
 - C.** Indian Child Welfare Act (ICWA)
 - D.** Legal: Life of a Case
 - E.** Legal: Overlay
 - F.** The Clock is Ticking: A Review of Court Processes
 - G.** Affidavits
 - H.** Preparing for Court
 - I.** Ticket Out

BEFORE YOU TRAIN

This unit focuses on enhancing the FSW’s knowledge of the dynamics of child maltreatment, the cycles of generational trauma, and how to utilize the Structured Decision-Making Assessment Tool during investigations.

- ❑ Remind learners that practicing new skills may feel awkward. Some workers (and trainers) dislike “role-playing.”
- ❑ Any online or classroom training they complete or attend **MUST** be reinforced with field learning, regular supervision, and mentoring.
- ❑ Remind workers that they also have other professional resources to utilize, i.e., get to know CASA volunteers, make it a point to observe court and get introduced to OCC, etc., learn who does what and get their contact information.
- ❑ We also recommend that learners seek to further their knowledge, understanding, and skill development in the key elements of Safety Organized Practice through ongoing continuing education and self-directed learning.

TRAINER MATERIALS LIST

Day 1

- Chart Paper/ Markers / Post It Notes
- Family Scenario Posters & Handouts 1 - 4
- Handout 5 – Parents’ Trauma History
- Handout 10 – Legal Definition Crossword Puzzle
- Legal Definition Crossword Puzzle Answer Key
- Small Object (i.e. ball)
- Have the following items cued up and ready:
 - [Child Maltreatment | The Administration for Children and Families \(hhs.gov\)](https://www.hhs.gov/child-maltreatment/the-administration-for-children-and-families)
 - Dr. Nadine Burke Harris's TEDtalk (15:58)
https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime?utm_campaign=tedspread&utm_medium=referral&utm_source=tedcomshare
 - DCFS Arkansas 2024 Annual Report Card:
<https://humanservices.arkansas.gov/wp-content/uploads/ARC-SFY-2024-FINAL-NEW.pdf>
 - Legal Definition PowerPoint
 - Generational Cycles – Repeating Patterns of Child Abuse in Families (5:54)
https://www.youtube.com/watch?v=3P-Ykt1t3_M

Day 2

- Chart Paper / Markers / Post It Notes
- Paper for Participants
- Feelings Thermometer Poster
- SDM Safety & Risk Assessment Manuals for Participants (March 2024)
- Handout 6 (Safety Threats) & Handout 7 (Safety Planning Capacities)
- Have the following items cued up and ready:
 - Through Our Eyes: Children, Violence and Trauma (7:53)
<https://www.youtube.com/watch?v=z8vZxDa2KPM>
 - Indicators of Abuse PowerPoint

Day 3

- Chart Paper / Markers / Post It Notes
- Answer Key for Scavenger Hunt
- CFS-411 (per table)
- Red & Yellow Paper for Red Card / Yellow Card Game
- Legal Overlay Paper Strips (Trainer Resource)
- Handout 8 (Affidavits – Key to the Case)
- Handout 9 (DCFS Internal Procedure – Professionalism in the Courtroom)
- Reasonable Efforts Scenarios 1 – 5
- SDM Safety & Risk Assessment Manuals for Participants (March 2024)
- Have the following items cued up and ready:
 - Life of a Case PowerPoint
 - The Clock is Ticking (11:50)
<https://youtu.be/UOxId1puQH8?si=RDGYONYEar5P9Ome>
 - ICWA Video (5:35) <https://youtu.be/quYwcvZQVEM?si=CHUNiYRTKwvq97DH>

COMPETENCIES LIST

- **100-1** - The worker knows how to use the state's legal definitions of physical abuse, sexual abuse, neglect, dependency/neglect, dependency and endangerment to determine the validity of child maltreatment reports.
- **100-2** - The worker understands the Family Service Worker's role in court systems and how to use court systems to protect children including:
 - How to gather pertinent evidence and write effective affidavits and court reports
 - How to prepare for court
 - How to present effective testimony
- **101-1** – The worker knows the values of family centered child welfare practice and understands that effective family-centered services can strengthen families, promote positive change and help prevent removal of children from their homes.

Family-centered child welfare values include:

 - safe and stable families
 - permanence for children
 - preservation of parents' and children's rights and dignity
 - client self-determination
 - reasonable efforts
 - respect for individual and cultural differences
 - awareness of how one's own values and culture can impact the delivery of child welfare services.
- **101-3** - The worker can accurately identify the physical, behavioral, and emotional indicators of child maltreatment and can identify and evaluate how individual, family, developmental, situational and environmental factors contribute to child maltreatment.
- **101-8** - The worker can recognize indicators of mental health problems, substance abuse, and interpersonal violence and can assess the degree to which these problems are impacting child safety and family stability.
- **102-1** - The worker understands knows the importance of effective assessment, case

planning and concurrent planning and understands the factors that must be addressed in a thorough assessment including contributing factors to maltreatment, the functioning of the family as a unit, the cognitive, behavioral, social and emotional strengths and limitations of each family member, the formal and informal resources available to the family, and any other domains address by agency assessment tools and protocols.

- **102-6** - The worker knows strategies to conduct effective interviews. These include communicating the purpose of the interview; controlling the process and direction of the interview while encouraging family participation; and using a variety of interview methods including open and closed ended questions, clarification, support, summarization, confrontation and helping families communicate feelings as well as facts.
- **102-7** - The worker knows how family-centered casework methods are used to promote safe and stable families and to promote permanency for children by involving parents and other family and/or community members in assessment and case planning; providing services to maintain children in their own home; assuring family members' involvement with their children in placement; and providing the necessary services to achieve timely reunification or other permanency options.
- **103-2** - The worker knows the potential negative impacts of maltreatment and trauma on normal development and can identify indicators of developmental delay or problems related to trauma in children who have been abused or neglected.
- **103-4** - The worker is able to educate and advise families, caregivers, and foster parents about the effects of abuse and trauma on children and help them have reasonable expectations for abused, neglected and traumatized children.

DAY 1

SECTION 1: Dynamics of Child Maltreatment

Time Estimate:	<ul style="list-style-type: none"> 3 hours
Learning Outcomes:	<ul style="list-style-type: none"> Family Service Workers will review data, facts, and process ideas regarding the scope of child maltreatment. Family Service Workers will examine and evaluate how individual, family, developmental, situational, and environmental factors contribute to child maltreatment. Family Service Workers will review legal definitions of child maltreatment, including abuse, sexual abuse, neglect, sexual exploitation, and abandonment.
Competencies:	<ul style="list-style-type: none"> 101-1 101-3
Participant Content:	<ul style="list-style-type: none"> N/A
Trainer Materials:	<ul style="list-style-type: none"> Child Maltreatment The Administration for Children and Families (hhs.gov) Dr. Nadine Burke Harris's TEDtalk (15:58) https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime?utm_campaign=tedsread&utm_medium=referral&utm_source=tedcomshare DCFS Arkansas 2024 Annual Report Card: https://humanservices.arkansas.gov/wp-content/uploads/ARC-SFY-2024-FINAL-NEW.pdf Legal Definitions of Child Maltreatment PowerPoint Legal Definition Crossword Puzzle Answer Key Handout 10 – Legal Definition Crossword Puzzle Family Scenario Posters (Johnson, Kennedy, Rodriguez and Wilson) Handouts 1 – 4 (Family Social Histories)

WELCOME

Before you dive into the content, welcome them to Foundations – Unit 3. Break the ice with the class with a fun icebreaker that will allow for small conversation amongst the class.

Ice breaker ideas:

- Name That Tune
- Peak v. Pit
- Two Truths and a Lie
- Myth v. Fact

Break the ice with the class in whatever way you feel comfortable. After the welcome and ice breakers. Follow up with a group discussion on shared agreements for the classroom and refer the participants to Page 1 of their Participant Manual for the agenda for this week. Review the agenda and the shared agreements with the class.

TEDTALK VIDEO

Watch the TEDtalk of Dr. Nadine Burke Harris – in this video she talks about the correlation between adverse childhood experiences and the damaging effects on the brain. The video is 15:58 minutes. To access the video, go to the TEDtalk website and search for Dr. Nadine Burke Harris or click the link in the Training Materials section. Following the video lead a discussion regarding the information that the class reviewed on the Administration for Children & Families website and the TEDtalk video.



ACTIVITY: Let's Talk Statistics

The online content instructed participants to review the Administration for Children & Families (ACF) website Child Maltreatment | The Administration for Children and Families (hhs.gov) for child maltreatment data to familiarize themselves with some of the research regarding the pervasive nature of this problem. According to the World Health Organization, child maltreatment is a global issue with serious life-long consequences. Additionally, closely related to the issue and data of maltreatment among children is the issue of how some of the adult survivors of maltreatment are now caregiving parents.

TEACHING NOTES

TEACHING NOTES

Trainer Note: Optional variation of this activity is to place the participants in groups. Ask the participants to review the Arkansas statistics and the National statistics and note one similarity between the statistics and one difference. Also, list one item or issue that surprised them. Return to large groups, watch the video, and lead the group discussion.

Questions to generate discussion:

- After reviewing the data on the ACF website, what surprised you the most?
- Why is it important to learn about and discuss how child maltreatment affects child development?
- Have you considered that some of the parents you will encounter as a FSW may have a history of childhood trauma?
- What are some of the common characteristics of parents or caregivers that may increase their likelihood of being offenders of child maltreatment?
- What are some of the characteristics of children that may increase the likelihood of being victims of abuse?
- How does family-centered practice come into play when dealing with families that have generational histories of child maltreatment?

Following your discussion, instruct participants to retrieve their personal cell phones or tablets and direct them to the DCFS home page and locate the 2024 Annual Report Card to find out specific information related to Arkansas statistics. Have the report pulled up on the screen for the class to ensure all participants can see the statistics there as well. Inform participants that they can refer to this page periodically to review the quarterly reports.

TEACHING NOTES

Trainer Note: Please emphasize to participant that it is more important to know about trends than to memorize specific number. **For example,** since states and the federal government first began gathering data, the most common type of maltreatment in the U.S. is **neglect**.



ACTIVITY: Legal Definitions

During this section, there is review of the legal definitions of child maltreatment. The PowerPoint for legal definitions can be located on the website.

Before you start the PowerPoint presentation, pass out the Legal Definitions Crossword Puzzle located in the Handouts section (Handout 10). Have the participants complete the crossword puzzle as you review the PowerPoint with the class.

The Legal Definition Crossword Puzzle Answer Key can be found in your Trainer Resources on page 5 and 6.



DYNAMICS OF CHILD MALTREATMENT

As a segue into the next group activity ask participants to think about a time when they as children could have been considered victims of child abuse because their caregiver's or parent's actions.

On the other hand, participants could also think of a time that they as caregivers could have had a True finding against them for child maltreatment. Invite participants to share their stories with the class if they feel comfortable.

TEACHING NOTES

Trainer Note: This voluntary activity can generate a discussion. As a word of caution, participants may not want to share any traumatic events that may cause them to be triggered.

As with any other activity that may create discomfort for participants, it is always helpful to remind participants that EAP counseling is available if the need ever arises.

Additionally, remind the participants of the group guidelines they established at the beginning of Unit 2. Emphasize that information shared during training should be kept confidential.

Depending on your class size, you should allow no more than **5-10 minutes** for participants to share. The purpose of this exercise is to provide an opportunity for participants to examine various individual, familial, environmental, and cultural factors that may contribute to child maltreatment. Workers will be able to identify similarities and differences between themselves and the families that they will encounter.

This activity will encourage workers to conduct a critical assessment of themselves. It will also help them identify how they view the families they are working with. Additionally, this will motivate workers to suspend their judgment towards others; thereby, making it possible to respect and support families while also holding them accountable for their actions.



ACTIVITY: Family Social Histories

After allowing the class to reflect on their own experiences, introduce them to the Johnson, Kennedy, Rodriguez, and Wilson families.

For this exercise, you will use case scenario posters. There are four different family (Johnson, Kennedy, Rodriguez and Wilson) posters. Evenly divide the class into four different groups and assign each one a different family to review. Once they have had an opportunity to look at the posters and read the scenarios, instruct them to answer the questions that you have written on the board. Have them write down their answers on a blank sheet of paper.

Discussion Questions:

- What are your initial thoughts about the caregivers?
- What are your worries for the family?
- What else would you want to know about the caregivers?

TEACHING NOTES

After the participants have reviewed their scenarios and answered the questions within their groups, pass out **Handouts 1 - 4 (Family Social Histories)**. Each handout will correspond with each family scenario that the groups just discussed. Once the participants have had a chance to read the social histories of their case scenarios, allow each group time to perform a ‘teach-back’ of what they learned about their families and what their initial thoughts on their family.

The questions below should be used to generate discussion:

1. Can you identify what type of maltreatment the caregivers were subjected to?
2. Knowing what you know now, does your perception of the caregivers change? Why or why not?
3. How would you approach each family in a way that is family centered?

Prior to breaking for lunch, instructors can summarize the activity by reminding them that research indicates that some caregivers who maltreat their own children describe a history of maltreatment in their own lives. Although condoning child maltreatment is never the objective, FSWs need to remember that clients are human beings. If they can approach them and skillfully engage them, it may help bring the clients to the point that they can acknowledge and address how their actions have affected their children.



DAY 1, SECTION 2: Generational Trauma

Time Estimate:	<ul style="list-style-type: none"> • 4 hours
Learning Outcomes:	<ul style="list-style-type: none"> • Family Service Workers will examine how a caregiver's trauma history can potentially interfere with their ability to act as nurturing and safe caregivers for their own children.
Competencies:	<ul style="list-style-type: none"> • 101-8 • 102-1
Participant Content:	<ul style="list-style-type: none"> • Participant Manual – Page 5 - Engaging Caregivers with Trauma Histories • Participant Manual – Page 6 – Suggestions for Trauma-Informed Practice with Families
Trainer Materials:	<ul style="list-style-type: none"> • Generational Cycles – Repeating Patterns of Child Abuse in Families (5:54) https://www.youtube.com/watch?v=3P-Ykt1t3_M • Chart Paper • Markers • Post It Notes • Handout 5 – Caregiver's Trauma History • Small Ball or Light Item that can be tossed

WELCOME

Welcome the class back from lunch with a quick ice breaker of your choice.

GENERATIONAL TRAUMA

Ask the class to reflect on a family trait or generational action that takes place in their family or has taken place in their family. It could be a recipe that has been passed from generation to generation or a family tradition. Correlate this to how adult survivors of child maltreatment statistically may continue the cycle with their own children. Remind participants about the discussion from this morning related to how a parent's history of being a victim of child maltreatment can interfere with their capacity to act as a nurturing and safe caregiver for their own children. Participants will routinely encounter adult survivors of child maltreatment in their line of work.

TEACHING NOTES

**ACTIVITY: Generational Cycles Video**

Watch the YouTube video – Part 2: Generational Cycles – Repeating Patterns of Child Abuse in Families. You can access the video in the Training Materials section.

Instruct participants to write down 1-2 things that stood out to them in the video, once the video is complete have participants conduct a “Pair Share”. Instruct the participants to discuss the key elements that stood out to them with the person next to them for one minute. Once completed bring the class back together to further discuss the key elements as a class.

Discussion points from the video:

- Historically, punishing children has been seen as normal and part of being a loving parent.
- Parents repeat what they have learned in childhood. “Learn and repeat”.
- Some children believe that maltreatment is normal.
- People can make a conscious decision to refrain from abusing their children.
- Children still have immense love for their parents despite being abused by them, and some children are not willing to betray their parents.

The ability to assess and engage family members is critical to developing collaborative plans. Each plan should build on family strengths, foster behavioral changes, and enhance a child ‘s safety. When working with family members, staff must be cognizant of how past trauma may have adversely affected how a parent will be able to interact, accept responsibility or articulate a plan to keep their child(ren) safe.

When assessing a parent that has experienced past trauma, workers need to skillfully engage them in a way that does not cause further trauma. Interactions with families should involve solution-focused interviewing strategies when possible. Remember, one of the major tasks of this approach includes involving the parent in every part of their care, clarifying their desired future, and identifying and building on what is right, what they have done well, and what they are doing well. Lastly, try to empower progress, regardless of how small the change or improvement is or was. This approach will be instrumental when addressing the identified safety threats.

TEACHING NOTES

During this training, participants will talk about the importance of assessing the caregiver's behavior plus the impact on the child. We will also look at the protective capacities associated with their ability to care for and keep their child safe. Inform participants that you will spend some time discussing parental protective capacities.

**ACTIVITY: Protective Capacities**

For this next activity you will need chart paper, markers, and post-it notes available for the participants.

Trainer Note: Before conducting the activity, create the chart pages and hang them around the room or for virtual training, prepare the charts and be prepared to share your screens. The charts should be created prior to the start of the training.

Questions for the chart pages should be as followed (**the answers will be bolded under each question, if needed refer to the Trainer Resource section for more examples**):

1. In your own words, define protective capacity.
 - **Behavioral, cognitive, and emotional characteristics that can specifically and directly be associated with a person's ability to care for and keep a child safe.**
2. List some examples of behavioral protective capacities.
 - **History of being protective - people who have raised children (now older) with no evidence of maltreatment or exposure to danger.**
 - **The caregiver demonstrates impulse control – a person who is deliberate and careful, who acts in managed and self-controlled ways.**
 - **Ability to set aside own needs in favor of a child – people who delay gratifying their own needs, who accept their children's needs as a priority over their own.**
 - **Supports the child – actual, observable sustaining, encouraging, and maintaining a child's psychological, physical, and social well-being.**
3. List some examples of cognitive protective capacities.
 - **The caregiver articulates a plan to protect the child – people who are**

TEACHING NOTES

- realistic in their idea and arrangements about what is needed to protect a child.**
- **The caregiver is reality oriented; perceive reality accurately – people who can distinguish threats to child safety.**
 - **The caregiver is aligned with the child – people who think they are highly connected to a child and therefore responsible for a child’s well-being and safety.**
4. List some examples of emotional protective capacities.
- **The caregiver expresses love, empathy and sensitivity toward the child; experiences specific empathy with the child’s perspective and feelings – people who relate to a child with expressed positive regard and feeling and physical touching.**
 - **The caregiver displays concern for the child and the child’s experience and is intent on emotionally protecting the child – people who physically act or provide physical responses that reassure a child, and generates security.**

Once you are prepared to start the activity instruct the participants to read the questions on the chart paper and to write on sticky notes examples of each protective capacity. Instruct them to place their examples of each protective capacity on the correlated chart paper that is taped to the training room walls. Once they have completed writing and attaching their responses, they should then take a “gallery walk,” touring the room and reading the responses of other participants on each piece of chart paper. Instruct participants to take notes about anything that they would like to comment about during the class discussion.

Upon completing the Gallery Walk, discuss the individual protective capacities as a class. Conclude this discussion by reviewing **Handout 5-Caregiver’s Trauma History**.

Reminding participants that adult survivors of child maltreatment may be susceptible to long-term consequences. These consequences may interfere with their ability to keep their children safe and work effectively with child welfare organizations. Workers will need to identify and assess a caregiver’s behavioral, cognitive, and emotional fitness to determine their ability to build a collaborative plan that will enhance the child’s safety.





ACTIVITY: Engaging Caregivers with Trauma

This is a role-playing activity. Instruct the participants to break into pairs at their tables and turn to **page 5 in their Participant Manuals** for a case scenario. Ask one person to play the role of the caregiver and one person to play the role of the Family Service Worker. Allow 5 minutes for the first round. After 5 minutes, ask participants to switch roles and allow another 5 minutes for the role-play. Direct participants **to page 6, in their Participant Manuals** for suggestions regarding trauma-informed practice with families.

The purpose of this activity is to provide participants with an opportunity to learn and practice techniques that can help to foster a positive working relationship with caregivers that does not re-traumatize or trigger them, but instead serves to strengthen a caregiver's resilience and hope. Participants were introduced to the concept of working with caregivers with trauma histories in Unit 2.

Case Scenario – Denise is a parent that you have been working with for several months. Family time with her 3-year-old son, Joey, is scheduled for one hour at the child welfare office on Mondays and Wednesdays. For the last five family times, Denise has either been a no-show or has come to family time acting erratic and has tested positive for heroin. Denise hasn't seen Joey in more than two weeks despite your calls to her to check on her and to tell her how much Joey misses her and wants to see her. You are aware that Denise has experienced some trauma in her lifetime. You schedule a meeting to talk to Denise about the family time plan and try to understand what can be done to make the family time a good experience for her and her son. In the past, when you have met Denise, she has often gotten upset and raised her voice with you. She has stated on several occasions that the resource parent hates her, and that the system is rigged to keep her child away from her.

Questions to generate discussion:

- What did the Family Service Worker do to help understand the caregiver's trauma history?
- What were some of the ways that the Family Service Worker responded to Denise that showed empathy and understanding?
- For those that played the caregiver role, how did the Family Service Worker let you know that they heard and understood you?

TEACHING NOTES

TEACHING NOTES

- What are some ways that you can hold Denise accountable, while also being understanding?

Trainer Note: As of 8/1/2023, all caregivers should receive a copy of the DCFS Statewide Family Time Guidelines and Requirements. This information should be reviewed with the caregiver with a DCFS team member before they sign the documentation. NOTE: If a caregiver refuses to sign, this is NOT a reason to deny family time.

Also, remind participants that DCFS staff are strictly prohibited from using recording devices at any time when interacting with caregivers and families. This includes, but is not limited to, investigators conducting interviews, caseworkers making home visits and during family time.



ACTIVITY: Class Review Activity

This review activity is to see if each participant understands the material that was covered for the day. For this activity you will need a small ball or a light item that can be tossed.

Prior to conducting this activity, explain the game to the class.

How to play: Take the ball and toss it to a participant while calling their name. The participant will catch the ball and answer the open ended question, “Share one thing you have learned today” or “Share a question or a worry you have about the content that was presented today.” The student that catches the ball will share their experience and pass the ball to another student by calling out their name. This will continue in the same manner until each participant has answered the question and the ball is passed back to the facilitator. This is known to be the “ball toss” technique.

Once this activity is completed, tell the participants that during the training, you will take a closer look at the effects of maltreatment on children along with the indicators of abuse.

Trainer Note: In preparation for this discussion review the Indicators of Abuse PowerPoint and Family Service Worker Foundations Unit 3 Trainer Guide training notes for Day 2.

DISMISS FOR THE DAY

DAY 2

SECTION 1: The Effect of Child Maltreatment on Children

Time Estimate:	<ul style="list-style-type: none"> 3 hours
Learning Outcomes:	<ul style="list-style-type: none"> Family Service Workers will examine some of the effects of abuse and trauma on children. Family Service Workers will examine the physical and behavioral indicators of child abuse and neglect.
Competencies:	<ul style="list-style-type: none"> 103-2 103-4
Participant Content:	<ul style="list-style-type: none"> Participant Manual – Pages 7 – 9: ‘Red Flags’ Identifying Physical Abuse & Indicators of Abuse Participant Manual – Page 10 - Feelings Thermometer SDM Safety & Risk Assessment Manuals for Participants (March 2024)
Trainer Materials:	<ul style="list-style-type: none"> Indicators of Abuse PowerPoint Through Their Eyes Video (7:53) https://www.youtube.com/watch?v=z8vZxDa2KPM Feelings Thermometer Poster Indicators of Abuse Charts Spot Signs of Child Abuse (TEN 4 Rule) Chart Paper Markers Post-It Notes Paper for Participants

WELCOME

Before you dive into the content, welcome the class back for Day 2. Break the ice with the class with a fun icebreaker that will allow for small conversation amongst the class. Or prior to starting the classroom instruction for the day, make sure to address any “Ticket Out” questions from the previous day. If there are no questions, conduct a brief review of the content from yesterday.

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THROUGH THE EYES OF A CHILD

Watch the YouTube video, “Through Our Eyes: Children, Violence, and Trauma—Introduction. This video is 7:53 minutes. The video captures victims and their first-hand accounts of how their exposure to child abuse as children has affected them.

**ACTIVITY: Indicators of Abuse PowerPoint**

Allow participants to stand up for a brief stretch break if needed. After giving participants a few minutes to stretch introduce the PowerPoint presentation and explanation of what they will be viewing. The slides are available on the MidSOUTH website.

You should also direct participants to review **pages 7-8 in the Participant Manual for “Red Flags” of physical abuse**. While reviewing the slides participants can take notes on **page 9 in the Participant Manual**.

The presentation is organized as follows:

- The first set of slides presents the Behavioral and Physical indicators of the different forms of abuse.
- The next set of slides in the series will have a split screen with the picture of the injury on ½ the screen and an explanation of the major learning points on the other ½ of the screen. Ask participants to briefly talk about what they see on the slide. Reinforce correct answers.

Trainer Note: Use the PowerPoint that is on the MidSOUTH website, use of other formats could cause the videos that are embedded in the PowerPoint not to play while presenting.

The first activity for this PowerPoint will be a quick teach back activity. You will need to print the Indicators of Abuse charts and the Spot Signs of Child Abuse (TEN 4 Rule) document; you can find the charts in the Trainer Resources. You will need to evenly split the class into seven different groups. Once the class is divided into groups, give each group one of the Indicators of Abuse charts or the Spot Signs of Child Abuse (TEN 4 Rule).

Instruct the class to review the document they received as a group and create a teach back for the class based on the information received. Have the groups use the big post it board paper in the training room for their presentation. Inform the class for their teach backs you want them to answer the question

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what could be reasonable explanations for the indicators that they are reviewing?

Give the groups 5 - 10 minutes to review and create their teach backs. Once completed, each group should present their indicators of abuse information to the class. During their presentations, have the corresponding chart showing on the screen for the class to see (located in the Indicators of Abuse PowerPoint). Once this activity is completed proceed to present the Indicators of Abuse PowerPoint.



Trainer Note: Here's a another (*optional*) activity that you can do with the class prior to (or during) the PowerPoint presentation. Select different images from the Indicators of Abuse PowerPoint prior to the presentation. Place an image on each table and have each participant write a description of the injury on a sheet of paper. Give the class 5 – 10 minutes to complete their narrative. Once completed have participants volunteer to read their description. While they read their description have the image showcased on the board for the class. After each description is read see if any other participants have different views or perspectives on the injury that is displayed.

This will help the participants get used to describing injuries they may see in the field and see how others may see the same thing but have different ways of describing what they see.



CONTENT ADVISORY

Prior to starting the PowerPoint and PowerPoint activities, please take a moment to give a trigger warning to the class in reference to the content you are about to review with them. The content that will be reviewed contains images that may be emotionally challenging and sensitive in nature. Inform the class that the point of this content is not to trigger them, but to educate and inform them on the different forms of abuse and give them an idea of what to look for while in the field.

The slides are organized in the following manner:

- Indicators of Abuse charts and Spot Signs of Child Abuse (TEN 4 Rule) slides. These should be shown during the teach back activity.
- Trigger Warning
- 13 Useful Grounding Techniques Video
- **Cuts/welts/bruises** - The first set of slides addresses primarily bruises and abrasions.

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- As the slides on severe maltreatment – head injuries, subdural hematomas, and fractures – are presented, emphasize that these injuries **may not have any visible external signs of trauma**. This emphasis is very concerning as it relates to some of the subtle bone fractures. It is difficult for adults to conceive of a fracture that does not cause severe pain.
- **Coining and Cupping Slides** – Please review the trainer notes in the PowerPoint that are listed for the folk medicine practices. The top picture on both slides showcases extreme and severe examples of both, the bottom picture for both slides showcases when the practices are done correctly.
- **Mongolian Spots** – Slide 38 showcases Mongolian Spots on various skin tones. Please review the trainer notes on the PowerPoint that gives more information on the birth mark. The following slide is a short video on Mongolian Spots. Make note that this birth mark can appear anywhere on the body, though they are commonly seen on the posterior. There is a video for more information on Mongolian Spots built into the PowerPoint, be sure to utilize the PowerPoint from the MidSOUTH website to ensure all embedded videos play properly.
- **GROUNDING BREAK SLIDE** - Take a short break! Have the participants choose one of their favorite grounding techniques from the video earlier in the presentation to manage any overwhelming emotions that may have come up during this presentation.
- **Burns** - This set of slides addresses the various types of burns.
- **Fractures** - After these slides there are a few radiology slides. It is important to discuss the significance of certain types of fractures than to show lots of bone slides. Page 7 - 8 in the Participant Manual has some brief explanations of the mechanisms of certain fractures. Metaphyseal fractures are still highly suggestive of abuse.
- **Failure to Thrive** - The next set of slides displays a child diagnosed with failure to thrive (FFT). FFT indicates insufficient weight gain or the absence of adequate physical growth in children compared to children of similar age and sex. FFT is usually defined in terms of weight and can be evaluated either by low weight for the child's age or by a low rate increase in weight. FFT is most commonly diagnosed before two years of age, although it can present among children and adolescents of any age.
- Sources for the Indicators of Abuse PowerPoint
- Grounding Technique to close out the PowerPoint

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Although there are scripts available with the slides, do not read it to the group. Stop periodically and make group members describe what they are seeing.

Trainer Note: *Severe internal injuries:*

Head injuries – they are the leading cause of child abuse deaths. Abusive head trauma (Shaken Baby Syndrome) is a constellation of symptoms including subdural hematoma, shearing injuries to the bridging veins in the brain, and often, but not always, retinal hemorrhages. Abdominal injuries are the second leading cause of child abuse deaths. Life-threatening injuries of these types frequently have no externally visible signs.

Processing: At the conclusion of the PowerPoint presentation, take some time to solicit feedback from the group. After the slide show ask, the questions listed below:

- How do you determine whether injuries left during corporal punishment are reasonable and moderate?
- Why do you suppose the law addresses shaking and striking with a closed fist?
- How do they feel about working with alleged offenders of abuse and neglect?
- What are some examples of abuse/neglect cases that would be difficult for participants to work with?
- What are some things the participants would need to do in order to prepare themselves to work with alleged offenders and or alleged victims of abuse?
- Should abused or neglected children be removed from their caregivers? Why or Why not?
- What are some of the physical indicators of child maltreatment (physical, neglect, sexual that were observed)?





ACTIVITY: What is Your Stress Level

The instructor will give each participant a scenario for them to read to themselves. The scenarios are available in the Trainer Resources. They should then place their name on a post-it and place it on the “Feelings Thermometer” Poster at the level that best represents their feelings and stress level based on their scenario.

There is also a copy of the thermometer in **the Participant Manual on page 10**. Instruct each participant to explore their physical and emotional reactions, as well as any behaviors that would be associated with their feelings. They could also list any coping mechanisms that they might use. Once participants have had an opportunity to reflect individually, they should discuss/explore their stress level, feelings, and reactions to their scenario with their tablemates. Each group should report to the larger group.

Purpose - There is a definite benefit for workers to understand how their own reactions to stressors can affect their behaviors. Having this understanding can help to increase a worker’s empathic response to the children that they will encounter in the child welfare system that are experiencing multiple stressors and demonstrating behaviors that may be labeled as being “bad”.

Processing - The instructor should relate the activity back to the children and youth that we work with. Other points to mention:

- Multiple stressful events can compound upon each other causing the child to demonstrate maladaptive behaviors.
- Ask participants how their reactions/behaviors would affect their ability to participate in the training today. How would the stress of experiencing child maltreatment impact how a child is able to participate in school, interact with peers, etc.
- In what ways could the participants minimize some of the stressors for children that are involved with child welfare?
- What do participants remember from Unit 2 regarding the effects of trauma exposure on children? What do they remember about the correlation between a child’s experiences and their reactions?

Trainer Note: References: California Common Core Curriculum, <http://calswec.berkeley.edu/common-core-curricula-child-welfare-workers> (retrieved May 2017)..



TEACHING NOTES

DAY 2, SECTION 2:**Relation of Maltreatment Dynamics to SDM Safety & Risk Assessments**

Time Estimate:	<ul style="list-style-type: none"> • 3 hours
Learning Outcomes:	<ul style="list-style-type: none"> • Family Service Workers will understand how to effectively use casework assessment tools to develop good working relationships with families. The assessment tools will be used to gather information, conduct thorough assessments, and develop collaborative plans to enhance the child's safety. • Family Service workers will demonstrate their ability to use the SDM Assessment tool. • Family Service workers will learn to identify the Arkansas Safety threats.
Competencies:	<ul style="list-style-type: none"> • 102-6 • 102-7
Participant Content:	<ul style="list-style-type: none"> • SDM Safety and Risk Assessment Manuals (March 2024)
Trainer Materials:	<ul style="list-style-type: none"> • SDM Safety and Risk Assessment Manuals (March 2024) • Handout 6 (Safety Threats) & Handout 7 (Safety Planning Capacities)

WELCOME

Welcome the class back from lunch with a quick ice breaker of your choice

FUNDAMENTAL ASSESSMENTS

Prior to beginning the session, ask participants what they already know about SDM Assessment tools, conduct a lecture detailing points listed regarding the SDM assessment tools. Instruct participants to take notes during the session; they will use the information for an activity. The trainer should tie this session to the last two days of classroom content.

As workers embark on the process of investigating allegations of abuse and neglect, they should remember how past trauma can impact a caregiver's ability to adhere to the expectations of the agency. Being aware of this can assist workers with being able to thoroughly assess families and develop collaborative plans to meet the family's needs.

Things for the workers to consider:

- **The safety of the children is the primary goal of the Division of Children and Family Services.** If the interests of caregivers and the interests of children diverge, child safety is always the paramount concern. For example, if there is an issue of remaining in the home versus keeping the child safe, the safety of the child must drive the decision. If there is a question of reunification or child safety, child safety must drive the decision. This is not to say all abused or neglected children must be removed from their homes. There must, however, be a well-considered, collaborative safety plan in place to keep the children safe from further harm if there is an identified safety threat.
- **Shared decision-making results in sound decision-making.** Assessments and plans will have a greater chance of being successful if the family, their safety network, and any other professionals involved with the family contribute to the decision-making.
- **Critical thinking is an important part of shared decision-making.** Critical thinking requires a constant collection and analysis of data by the FSW and the supervisor while using decision support tools. It requires that you recognize that it is possible to make an error in judgment. It also requires factoring new information into the equation. Revising an initial assessment or decision based on new and additional information represents best practice.

Know the difference between assessment as a process and assessment as a product.

- The process of assessment is the on-going gathering of information, seeing how that information fits with information you already have, and figuring out if the new facts indicate that there is more risk of harm, less risk, or the risk stays the same.
- At certain intervals you will stop and complete a formal product – either an assessment tool or a Division Information Management System - generated report. The current Division Information Management System is CHRIS.

Before beginning any assessment, be sure to address the following:

- Do any household members speak a foreign language and is an interpreter required?
- Are any household members hearing impaired? If so, do these members use American Sign Language, and is an interpreter needed?
- Consider how the caregiver's past trauma might affect their ability to provide historical information.

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Crucial to assessment is engaging the family and their safety network in a mutual problem-solving process. Research with Child Protective Service (CPS) populations has shown that involving the family – the whole family, not just the mom and the children – in a collaborative problem-solving process really works. Shared decision-making can result in innovative, successful interventions. Remember, collaborating with other service providers works. During the assessment, you are building relationships with families, their safety network, and providers. You are setting the tone for future work. Involving the family in telling their own story can help engage them in problem-solving.



TOOLS FOR ASSESSING SAFETY & RISK

When you return from break, review the SDM Safety and Risk Assessment training materials introduced during online Unit 3.

The review points are listed below:

- The SDM system is a decision-support system informed by research, policy, and best practices.
- The SDM system consists of a comprehensive set of assessment tools that guide each critical decision in the life of a DCFS case. However, no matter which assessment tool you are using, the goals of the SDM system are the same:
 1. to promote safety,
 2. to reduce subsequent harm to children; and
 3. to facilitate timely and expeditious achievement of permanency, including reunification whenever it is safe to do so

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Trainer Note: Pass out the Safety and Risk Assessment Manual (most recent is March 2024). An electronic copy of the manual is located on the website.

Take a moment to acknowledge and introduce the two SDM Safety Assessment tools (SDM Safety & Risk Assessment and SDM Resource Provider Safety Assessment). Advise staff the time spent in class today will focus on the Safety and Risk Assessment Tool.

Introduce the training materials by walking through the Safety and Risk Assessment manual starting with the glossary on page 4 and ending with Section 4 on page 10 of the SDM Assessment tool.

Remind the participants that the at a glance ‘Arkansas Safety Threat’ card is a great tool, however it should only be used as a cliff note to the Safety and Risk Assessment Manual. Stress the importance of taking their manual with them to identify the safety threats in full detail for each visit.

Direct the participants to the Safety and Risk Assessment Manual:

- Safety and Risk Assessment
- Resource Provider Safety Assessment

Ask them to look at the assessments and compare them. They will see that the assessments are very similar. The difference is the Safety and Risk Assessment manual is for Traditional Investigations and DR Assessments, while the other one, Resource Provider Safety Assessment, is for investigations in Resource Homes.

Give the participants 10 minutes to review the manuals. Next, conduct a brief lecture and walk the Participants through the SDM Safety and Risk Assessment Manual, starting with the SDM Glossary on **page 4**:

The first step is to introduce the SDM Glossary. Advise staff that the SDM assessments are completed on households where there have been screened-in child abuse and/or neglect allegations that resulted in a child maltreatment investigation. The following general definitions apply when completing the SDM assessments beyond screening.

Family -

- Caregivers; adults fulfilling the caregiver role; guardians; children;

TEACHING NOTES

and others related by ancestry, adoption, or marriage; or as defined by the family itself.

Household -

- All persons who have significant in-home contact with the child, including those who may not actually live there but have a family or an intimate relationship with any person in the home.

Direct the participants to **Appendix A1 and A2** and briefly discuss the examples for determining which household to apply SDM assessments to during an investigation or DR assessment.

- If the alleged offender is part of the child's household, assess that household.
- If the alleged offender is not a member of the child's household, do not complete a safety assessment for the alleged offender's household. In this situation, instead complete a safety assessment for the child's caregiver's household, but only if there is also an allegation of failure to protect. NOTE: As of 8/1/2023, ACT 364 adds requirement of serious bodily injury to the definition of "failure to protect" as it pertains to physical abuse and neglect.
- If the abuse or neglect involved more than one household at the same address, assess each household where the alleged abuse or neglect occurred.

Third-party reports-

When the reported harm concerns harm to a child by a non-household member, only complete an SDM safety assessment for the household of the caregiver where the child resides if there is also an allegation on that caregiver. If a safety threat is found, a new investigation should be opened, and an SDM risk assessment is required.

If other children may be victims living in the household with the third-party perpetrator, an investigation with the allegation concerning those children should be added, and an SDM Safety and Risk assessment should be done on that household.

Caregiver -

- A person who is responsible for a child's care, custody, or welfare, such as:
- A parent, guardian, or managing or possessory conservator.
- Another adult member of the child's family or household or

- A person with whom the child's parent cohabits.

Take a moment to conduct a high-level overview of the Caregiver Identification Flowchart, listed on **page 5** of the manual.

Key Points & Additional Considerations -

- A minor may be the primary or secondary caregiver if they are the biological parent of the alleged victim child.
- A minor is anyone under the age of 18. This does not include a child who has been legally emancipated and lives separately from their parents.
- A minor may never be considered the primary or secondary caregiver of their sibling.

Moving forward, direct the participants to **page 6** of the SDM Safety & Risk Assessment Manual.

Walk the participants through the Safety & Risk Assessment tool beginning on **page 6**. Note, the top section of the tool is used to collect identifying information such as:

- Family Name,
- Referral/Case ID:
- Date of the Assessment,
- County,
- Worker's name,
- Assessment type (initial – first face-to-face contact),
- Reassessment- after the initial assessment, any additional safety assessments Case Closure,
- Household Assessed, Caregiver(s) Assessed
- Names of Children Assessed.



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SDM SAFETY & RISK ASSESSMENT MANUAL

When you return from the break, continue the review by introducing the four components of the SDM Assessment tool:

Section 1: Factors Influencing Child Vulnerability (page 14)

These are conditions resulting in the child's inability to protect him/herself.

- Age – 0-5
- Diagnosed or suspected medical or mental condition.
- Limited or no readily accessible support network.
- Diminished mental or physical capacity.



Trainer Note: This **activity** is optional, it's called 'Talking Whip'.

Give the participants 5 minutes to individually review the 14 Safety Threats and the factors influencing child vulnerability in the SDM Assessment Manual on pages 14 – 21.

This is an improvisational activity and a rapid-fire variation of 'Each Teach', in which each learner has thirty seconds to one minute to stand and tell one of the 14 safety threats. When one learner's sixty seconds are up, another learner takes the last person's place stating the next safety threat. The talking "whips" around the room until everyone (or a certain number of learners) has had a turn.

The person talking can choose the next person to take their place, or you can direct the order the learners will follow. You can also give the talker a small throwable object like a Nerf ball. The talker throws the object to the person they decide will "teach" the next safety threat to the class.

After the activity answer any questions, the class may have in reference to the 14 safety threats.

Section 2: Current Safety Threats (pages 7-8)

Current safety threats –The following is a list of safety threats, defined as behaviors or conditions that describe a child being in imminent danger or serious harm.

During this review, direct staff to pages 14-21 of the manual. Allow the participants a few minutes to review the definitions. There is a definition for each safety threat.

1. Caregiver caused serious physical harm to the child or made a plausible threat to cause serious physical harm in the current investigation/differential response (DR) case.
2. Child sexual abuse is suspected, AND circumstances suggest that the child's safety may be of immediate concern.
3. Caregiver is aware of the potential harm AND is unwilling OR unable to protect the child from actual or threatened serious harm by others.
4. Caregiver's explanation or lack of 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.
5. Caregiver does not meet the child's immediate needs for supervision, food, and/or clothing.
6. Caregiver does not meet the child's immediate needs for medical or critical mental health care (suicidal/homicidal).
7. Physical living conditions are hazardous and immediately threatening to the child's health and/or safety.
8. Caregiver's substance abuse seriously impairs their ability to supervise, protect, or care for the child.
9. Domestic violence exists, and offender behavior poses an imminent danger of serious physical and/or emotional harm to a child.
10. Caregiver frequently describes the child in predominantly negative terms or acts toward the child in negative ways; AND these actions make the child a danger to self or others, suicidal, act out aggressively, or severely withdrawn or anxious.
11. Caregiver's mental instability, developmental status, or cognitive deficiency seriously impairs their current ability to supervise, protect, or care for the child.
12. Family currently refuses access to or hides the child and/or seeks to hinder an investigation/DR case.
13. The child may be in immediate danger because of current circumstances AND because the caregiver severely maltreated a child
in their care in the past (where the incident was resolved or unresolved) or because the caregiver has been unable to resolve prior pattern of severe maltreatment.

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14. Other (specify)

After you introduce the first 13 safety threats advise staff that safety threat #14 (Other) is only selected if the safety threat cannot be captured in one of the 13 defined safety threats. If there are no safety threats selected the child is considered safe and the initial assessment is complete.

Safety Decisions

If no safety threats are present, select this safety Decision.

- Safe. No safety threats were identified at this time. Based on currently available information, no children are likely to be in imminent danger of serious harm. Continue to the risk assessment and complete the investigation as required.

After you complete Section 2, stop for the day. Advise the participants that we will continue the review of the SDM Safety Assessment tool tomorrow, starting with Section 3.

Trainer Note: Ticket Out – Remind the participants to write down on their index card anything that they may need further clarification about or a question that they may want to be answered.

DISMISS FOR THE DAY

DAY 3

SECTION 1: SDM Safety & Risk Assessment Tools Continued

Time Estimate:	<ul style="list-style-type: none"> 3 hours
Learning Outcomes:	<ul style="list-style-type: none"> Family Service Workers will identify what's needed to meet the threshold of a safety threat. FSW will practice identifying safety threats. FSW will learn to utilize their skills to identify safety interventions.
Competencies:	<ul style="list-style-type: none"> Family Service Workers will understand how to effectively use casework assessment tools to develop good working relationships with families. The assessment tools will be used to gather information, conduct thorough assessments, and develop collaborative plans to enhance the child's safety. Family Service workers will demonstrate their ability to use the SDM Assessment tool. Family Service workers will learn to identify the Arkansas Safety threats
Participant Content:	<ul style="list-style-type: none"> SDM Safety & Risk Assessment Manuals for Participants (March 2024)
Trainer Materials:	<ul style="list-style-type: none"> SDM Safety & Risk Assessment Manuals for Participants (March 2024) Handout 6 (Safety Threats) & Handout 7 (Safety Planning Capacities)

WELCOME

Before you dive into the content, welcome the class back for Day 3. Break the ice with the class with a fun icebreaker that will allow for small conversation amongst the class. Answer any ticket out questions that were given to you at the end of Day 2.

SDM SAFETY & RISK ASSESSMENT

At the end of Day 2, you completed the discussion over Section 2: Current Safety Threats (pages 7-8). Today you will start the day going over Section: Safety- Planning Capacities and Safety Interventions.

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Section 3: Safety- Planning Capacities and Safety Interventions:

This section is completed only if one or more safety threats are selected.

Safety - Planning Capacities

Document caregiver capacities if present for any caregiver based on information gathered.

- Caregiver is capable of participating in an in-home immediate safety plan.
- Caregiver is willing to participate in an in-home immediate safety plan.
- Caregiver has the support of at least one adult who was not involved in the allegation, and the supporting adult is willing and able to participate in an in-home immediate safety plan. This section asks staff to consider caregivers' behaviors and factors that may impact the ability to develop an immediate safety plan to address those safety threats adequately.
- Other

Trainer Note: Inform participants that all three safety planning capacities must be present in order to initiate an immediate safety plan.

Safety Interventions

Consider each identified safety threat and the safety-planning capacity of the family and network to determine if it is possible to create an immediate safety plan to control the safety threat.

- Safety interventions provided by the worker.
- Safety interventions involving caregiver, other household members, or network.
- Safety interventions provided by agencies or service providers.
- Legal action planned or initiated; the child remains in the home.

Safety Decision

- Safe with immediate safety plan. One or more safety threats are present; however, the child can safely remain in the home with an immediate safety plan. Note: Immediate Safety Planning will be discussed more in the next unit.

Section 4: Placement Intervention - Safety Decision

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- Unsafe. This section is completed if one or more safety threats were present, and an immediate safety plan was considered but could not be created. As a result, placement is the only protective intervention possible for one or more children.

Conduct a brief lecture to summarize the SDM Safety & Risk Assessment tool. Discuss things to know about the SDM Safety Assessment tool:

- The Safety & Risk Assessment tool has mutually exclusive items (you cannot mark more than one item for the same caregiver's worry/behavior).
- The Safety & Risk Assessment tool has definitions for every item on the tool. See pages 14-23.
- Safety threat definitions include both caregiver behavior and impact on the child.
- The Safety & Risk Assessment includes a rigorous immediate safety planning practice with the family and their network.
- The Safety & Risk Assessment integrates the structure of the Three questions and other key concepts into the framework of the assessment itself.
- When gathering the information necessary to conduct the safety assessment, organize your conversations with families around the Three Questions:
 - What is working well?
 - What are we worried about?
 - What do you think needs to happen next to make this better?

Trainer Note: Instruct participants to begin every interaction with families by highlighting strengths. Starting with the positive helps build rapport and encourages families to be more open when discussing their worries.

Staff can use these questions to start getting critical information about safety threats, complicating factors, strengths, and possible interventions; and they can then ask more detailed and pointed questions for further information and rigorous immediate safety planning.

After the review is complete, the participants will move from Paper to Practice as they look at identifying safety threats.



ACTIVITY: SDM Safety Assessment Practice

The purpose of this activity is to review the concept of Caregiver+ Behavior+ Impact on the Child (CBI). All three together create the “nexus” needed to meet the threshold of a safety threat. Ask questions that reveal the Caregiver + Behavior + Impact. To decide whether a DCFS concern exists, the worker must understand the behavior the caregiver is exhibiting and the impact of that behavior on the child. Most SDM definitions require a caregiver’s action and its impact on the child. Caregiver actions include a lack of action, which would be associated with neglect. The formula may also be helpful in identifying protective actions or in determining that safety threats DO NOT exist.

Otherwise, the behavior may only be a complicating factor if the impact doesn’t meet the safety threat definition threshold. (An example of a complicating factor may be, the father receiving a layoff notice because the power plant where he works is going to be closing in three months) This is a complicating factor because in three months the dad may be unemployed. It doesn’t impact safety at this time.

Instructions: Read the example to the class and ask them to pay close attention to the details. This example will help staff understand what is required when assessing Caregiver + Behavior + Impact on the child.

Imagine that a mother returned home after a night out drinking. When she arrived home, her children were asleep and safe because she had arranged for their grandmother to care for them while she was out.

The next morning, the children noticed that their mother was a little grumpy, but she still got them ready for the day just like any other day- fed breakfast, dressed for school, backpacks packed, lunches made, and off to school.

Even though the mother’s behavior in itself may be worrisome, there are no safety threats identified because it did not seem to have a serious or imminent impact on the children. Although the caregiver may have done or failed to do something, we are most concerned about behaviors that have a significant impact on the children OR behaviors that could have a significant or serious impact without intervention.

When engaging with families, workers can encourage them to identify the caregivers’ behaviors and their impact on their children. Focusing on the “impact on the child” takes practice.

To create class discussion, ask the class the following question:

What impact did the caregiver's behavior have on the child?



ACTIVITY: Identifying Current Safety Threats

Divide participants into small groups. Direct them to **pages 7 and 8 of the SDM Safety & Risk Assessment manual**. Provide time for each group to read all safety threats and discuss their impressions among themselves.

Bring the large group back together for further instruction. You may spend a short amount of time addressing any pressing concerns from their discussions if it seems necessary.

Next, assign one to three safety threats to each small group (assign all safety threats, no repeats) for them to study. Ask them to plan how to teach the safety threat to the rest of the room, sharing their observations of the definition and illustrating the safety threat with a fitting example they have experienced or observed in practice.

Trainer Note: The report out of this activity can be done in small groups or as a large group. Ask for volunteers to read the groups' safety threats, their observations, definitions, and a fitting example they have experienced or observed in practice.



ACTIVITY: Safety Threat Practice Scenarios

Now that staff have become familiar with the Safety Assessment tool, let's take some time to continue to test their skills. Direct the participants back to their small groups and facilitate the activity below.

Pass out **Handout 6 – Safety Threats Practice**. Give half of the groups Safety Threats Practice A and the other half Safety Threats Practice B.

Purpose: To practice identifying current safety threats

Processing: Ask for a volunteer to read the vignette out loud. Instruct participants to turn to the safety threats section of their manual and identify

which safety threats are present. Facilitate a report-out and discussion on each of the identified safety threats, by using the answer key below.

Safety Threat Scenario Practice A

Upon first face-to-face visit, worker was invited inside the home. There was a strong odor coming from dirty dishes covered in spaghetti with mold on it; these dishes were on the table. During the visit, the 3-year-old child was eating the moldy spaghetti off these dishes. Cockroaches were observed throughout the family

observed

home, including in the 15-month-old's crib. Both children had visible dirt and a strong odor. The 3-year-old had bite marks on his legs; he also had a rash on his arm that looked red, swollen, and possibly infected. He complained that his arm hurt twice while the worker was in the home. When worker asked about the rash, Mom said she didn't take him to the doctor because it would "heal up eventually."

Answer Key:

6. Caregiver does not meet the child's immediate needs for medical or critical mental health care (suicidal/homicidal). 3- the year-old child has bite marks on his legs and a rash on his arm that is red, swollen, and possibly infected. Mom is not taking him for medical care because she believes it will heal on its own.

7. Physical living conditions are hazardous and immediately threatening to the child's health and /or safety. There are dirty dishes covered in rotting food all over the kitchen, which the child is ingesting; cockroaches are in the home, including in the 15-month- old's crib; these cockroaches are actively biting the children, and this could threaten the children's health.

Safety Threats Practice

Purpose: To practice identifying current safety threats.

Processing: Ask for a volunteer to read the vignette out loud. Instruct participants to turn to the safety threats section of their manual and identify which safety threats are present. Facilitate a report-out and discussion on each of the identified safety threats, by using the **Answer Key below:**

Safety Threats Scenario Practice B

Upon first face-to-face visit, worker noticed that the 7-year-old had a large bruise on his upper arm, as well as several smaller "fingerprint" bruises on his lower arm. When worker interviewed child alone, child said that his dad got mad when child got an answer wrong on his math homework. Child stated that his dad hit him with a closed fist on the upper arm as the child tried to shield himself. He said that dad then grabbed his arm and dragged him to his bedroom. Child said dad told the child he had to stay there the rest of the night. Child reports this happened around 6:00 or 7:00 p.m. and that he did not get dinner that night.

TEACHING NOTES

Answer Key:

1. Caregiver caused serious physical harm to the child or made a plausible threat to cause serious physical harm in the current investigation/differential response (DR) case, as indicated by (select all that apply): Caregiver has made substantial or unreasonable use of physical force. Caregiver [dad] used physical force as a result of the child getting an incorrect answer on his math homework; caregiver also sent the child to his room without dinner for the night; the bruising on the child is consistent with his story and could be considered as unreasonable discipline as well as substantial use of physical force.

Summarize this section by conducting a brief lecture:

- Consider Behavior, Impact on children.
- A safety threat is only selected if the child is in imminent danger.
- A safety threat or danger is about the short term.
- Danger in the context of the SDM system, is looking for serious and imminent threats to a child.
- Serious means the harm would require medical or mental health attention or emergency services.
- If the worker does not think the threat can be contained, the child should not be left in the home.

If a safety threat is identified and the worker believes the child can be left in the home with immediate interventions. The child would be considered unsafe until an immediate safety plan is developed and implemented.

Continue the lecture by telling staff that when completing an Immediate Safety Plan staff must look at the Safety Planning Capacities located in Section 3 on page 8 - 9 of the Safety & Risk Assessment manual.

SAFETY PLANNING CAPACITIES

Direct participants to the safety assessment in the Safety & Risk Assessment manual to read the immediate safety planning capacities and their definitions to themselves. Pause to give a chance for participants to ask questions or share observations about the capacities.

Purpose: To help participants understand the concept of safety planning capacities and the safety interventions section after safety threats on the safety assessment.

TEACHING NOTES

Example: If one or more safety threats have been selected on the safety assessment, the logic of the assessment asks us to consider caregiver behaviors and factors that may impact the ability to develop an immediate safety plan to address those safety threats adequately. If no safety threats have been identified, remember that the outcome of the tool is “safe,” and we will not continue with the rest of the assessment.

The presence of these behaviors or characteristics in one or more caregivers may affect your ability to develop an immediate safety plan with the caregiver. Consider these characteristics and prioritize safety interventions in identifying and developing the immediate safety plan to support the child/family/caregiver as long as it is in the child’s best interest. For example, substance use alone does not qualify as a safety threat. However, substance use in addition to or resulting in a distinct problematic behavior or condition that impedes safety or results in harmful impact on a child may qualify as a complicating factor. Workers must ask caregivers if they are willing and able to participate in an immediate safety plan and explain all bottom lines, such as having at least one adult who could not have caused the harm to participate in the plan.



ACTIVITY: Safety Planning Capacities

Safety Planning Capacities Practice

Purpose: To practice identifying protective capacities.

Pass out **Handout 7 - Safety Planning Capacities and Safety Interventions**. Ask a volunteer to read the Safety Planning Capacities Practice scenario out loud. Instruct participants to turn to page 9 in their Safety & Risk Assessment Manuals, have them use the safety-planning capacities section to determine which safety capacity applies to the scenario at the top of Handout 7.

Conclude the activity by providing the information in the Answer Key below. Please note for each safety-planning capacity selected, the FSW must provide details that demonstrate its presence. The text after each safety capacity (in the answer key) is an example of a detailed narrative demonstrating its presence. These narratives are to be written in the 'details' box on page 9 of the Safety & Risk Assessment manual after the safety capacity is selected.

Answer Key:

A. Caregiver is capable of participating in an in-home immediate safety plan.

Mom is able to recognize the impact her actions had on the child and identifies ways to control her behavior to mitigate the danger.

TEACHING NOTES

B. Caregiver is willing to participate in an in-home immediate safety plan.

Mom said she would participate in the plan and called her sister to help.

C. Caregiver has the support of at least one adult who was not involved in the allegation, and the supporting adult is willing and able to participate in an in-home immediate safety plan. Mom has identified her sister as a support person and the sister has offered to participate in immediate safety planning.

SAFETY INTERVENTIONS

Direct participants to read the safety interventions and their definitions to themselves. When the group has finished, ask participants to share observations or raise questions about anything they just read or practice implications they anticipate.

Purpose

To review and understand the safety interventions section of the safety assessment.

Example

Like the safety planning capacities section, the safety interventions section is completed only if one or more safety threats were identified, and the worker is creating an immediate safety plan so the child may remain in the home.

Select any listed protective actions, strengths, and resources present for any child/caregiver. Consider information from the referral; information from worker observations; interviews with children, caregivers, and collaterals; and review of records.

For “Other,” consider any existing condition that does not fit within one of the listed categories but may support safety-planning interventions. Prior protective actions, strengths, and resources are not sufficient to resolve the danger but can help with determining strengths for immediate safety planning. If a safety threat is identified, a safety intervention must be used.

The decision of whether to use a safety intervention or to remove a child from their family hinges on whether a sufficient immediate safety plan can be put in place. When there is a safety threat, the outcome will either be an immediate safety plan or a plan to remove the child. When considering if the plan is sufficient to address the safety threat, have the participants ask themselves these

questions.

- What safety threat does the child need to be protected from? Do you know that the family understands it?
- What complications must be considered? This includes child vulnerabilities and contributing factors.
- Have there already been any protective actions?
- Is there at least one safety network member?
- What are the specific actions in the plan? How likely is it these will be done? If done, will they protect the child?
- Are there contingency plans?
- Will someone call DCFS if they are worried the plan isn't working?



ACTIVITY: Safety Interventions Practice

Direct the participants to **Handout 7 - Safety Capacities and Safety Intervention Practice**. Ask a volunteer to read the Safety Interventions Practice vignette out loud. Instruct participants to turn to the safety interventions section of the manual and identify which safety interventions (if any) are present. Facilitate a report-out and discussion on each of the identified safety interventions by using the answer key below. Take a few minutes to discuss the safety intervention examples below.

- Grandma will temporarily move into the home to live with the family. Grandma will always be around to provide supervision to children when mom is at work and unavailable to tend to them.
- Mom and child will move to a relative's home while they work on securing formal community support. Both parents agreed that this would give them time to "cool off" from each other to work on themselves and learn new ways to manage their stress. They plan to have their pastor facilitate weekly check-ins about their child. The pastor has agreed to support the family and will contact the worker if needed.

Processing

Ask for a volunteer to read the above scenarios out loud. Instruct participants to turn to the safety interventions section of their Safety & Risk Assessment manual (page 9) and identify which safety interventions (if any) are present. Facilitate a report-out and discussion on each of the identified safety interventions.

Answer Key

TEACHING NOTES

Correct Answer for Practice 1 –

b. Safety interventions involving caregiver, other household members, or network

Extended family members or network will participate as part of an immediate safety plan action step.

Below are description examples for the ‘describe’ section on pg. 9 of the SDM manual:

- Grandma will move into the home to live with the family and provide supervision and support..
- Parents identified their pastor as support. The pastor is willing and able to be a facilitator and will contact the worker for assistance, if needed.

Correct Answer for Practice 2 -

b. Safety interventions involving caregiver, another household member, or network.

Non-offending legal custodian or guardian will move to a safe environment with the child.

Below is a description example for the ‘describe’ section on pg. 9 of the Safety & Risk Assessment manual:

- Mom and child are going to move into a relative’s home.

Trainer Note: Advise participants that in this scenario, an order of less than custody is required. An affidavit must be completed and submitted to their OCC. Additionally, any safety plan that restricts the rights of a legal caregiver must be filed with the court.

SAFETY ASSESSMENT DOCUMENTATION

Document

- Evidence that supports item responses; and
- Specifics for safety interventions

Purpose

To review the importance of documentation specific to the safety decision.

TEACHING NOTES

Example

Every agency has its own way of completing a narrative on the assessment. However, when you complete a narrative, it is vital to provide clear and concise statements of evidence that support the selected safety threats.

The most effective documentation allows the reader to understand the worker's critical thinking that led to the decision. Use the safety assessment summary section to help guide documentation. As we reviewed in the summary section, be sure to do the following.

- Describe the current factors influencing child vulnerability (conditions resulting in a child being more vulnerable to danger).
- Describe any current safety threats you identified (behaviors or conditions that describe a child being in imminent danger of serious harm). If no safety threats were identified, provide your rationale.
- Describe the caregiver's protective capacities and safety interventions that have been taken and how each protected or protects the child from the identified safety threats.

End this section by providing a brief summary of Safety- Planning Capacities and Safety Interventions. Advise staff they must document the safety decisions. Don't worry, documentation and the immediate safety planning tool will be discussed during the next unit.



SDM RISK ASSESSMENT

Direct the participants to [page 40 of the Safety AND Risk Assessment Manual](#). Take a moment to introduce the Risk Assessment and its purpose.

Risk is to classify the likelihood of future child protection system involvement within the caregivers' household. It can also inform staff on how worried they should be about this household during the investigation. The risk assessment identifies families that have a very high, high, moderate, or low likelihood of future system involvement.

UPLOADING TO eDOCTUS

Inform participants that all files from an investigation with a true finding must be uploaded to eDoctus within five business days from the completion of the investigation. The FSW must be added to a FIM Group to access Investigation Files in eDoctus. If the FSW needs access to Investigation Files in eDoctus, they should email John.Lowden@dhs.arkansas.gov to request access. *The FSW must have their Area Director's approval to have access to upload investigation files to eDoctus.*

Inform participants that SDM Safety and Risk Assessments are one of the files that the FSW should upload to eDoctus on true investigations only. Pass out and review **Handout 11 – Uploading files to eDoctus** with the class.

Trainer Note: The participants will further review Safety & Risk Assessments and uploading documents to eDoctus more during the Concentrations. Advise staff that after lunch we will come back and discuss Legal Issues that were introduced during the online unit 3.



DAY 3, SECTION 2: Introduction to Legal Issues

Time Estimate:	<ul style="list-style-type: none"> • 3 hours
Learning Outcomes:	<ul style="list-style-type: none"> • Discuss their graphic organizers and design an overlay of legal interventions in the life of a case that can help to ensure the health and safety of children. • Accurately identify the legal intervention indicated in a series of scenarios. • Identify behaviors that demonstrate reasonable efforts. • Teach each other tips on writing affidavits. • Report on the relationship between the law and DCFS policies and procedures related to child maltreatment investigations.
Competencies:	<ul style="list-style-type: none"> • 100-1 • 100-2
Participant Content:	<ul style="list-style-type: none"> • Family First Prevention Services Act (FFPSA) • John H. Chafee Foster Care Program for Successful Transition to Adulthood • CAPTA (Child Abuse Prevention and Treatment Act) • ASFA (Adoption and Safe Families Act) • Completed a Scavenger Hunt sheet with answers to the legal questions (Unit 3.1) • Page 11 in Participant Manuals – Dependency Neglect Proceedings
Trainer Materials:	<ul style="list-style-type: none"> • Answer Key for Scavenger Hunt • CFS-411 (per table) • Red & Yellow Paper for Red Card / Yellow Card Game • Legal Overlay Paper Strips (Trainer Resource) • Handout 8 (Affidavits – Key to the Case) • Handout 9 (DCFS Internal Procedure – Professionalism in the Courtroom) • ICWA Video (5:35) https://youtu.be/quYwcvZQVEM?si=CHUNlyRTKwvq97DH • Life of a Case PowerPoint • Reasonable Efforts Scenarios 1 - 5 • The Clock is Ticking Video (11:50) https://youtu.be/UOxId1puQH8?si=QULyDPyTA4fHP1oe

WELCOME

Welcome the class back from lunch. Break the ice with the class with a fun icebreaker that will allow for small conversation amongst the class. Answer any ticket out questions that were given to you at the end of Day 2.

Trainer Note: Before the start of Unit 3 Foundations, review and provide feedback to the short answer questions in Unit 3.1 (see Trainer's Map to On-line Training). Review the questions that students submitted after they reviewed a summary of the federal legislation assigned to their primary job duty. For highly technical legal questions advise participants to contact their OCC or speak with their supervisor.



ACTIVITY: Review and Connections

As students return for the day, direct them to the pile of sticky notes on the table. Ask them to write down two things they remember from the morning materials, on two different sticky notes. Next, ask them to write down one way the material in the morning connects to the information they learned in Unit 2- Foundations on Trauma Informed Child Welfare.

- Put the connection statement on the Connections Poster.
- Put one of the notes on things they remember on one Learning Bowl poster and one on the other poster. In small classes, use only one Learning Bowl poster.
- Talk with others who are posting notes and compare thoughts and ideas.
- Talk with others about how they connected the materials from today with the materials from last week.
- Take pictures of the bowls or make notes in your Learning Journal about the things you learned from others.



ACTIVITY: Laws, Policies, Funding Practice

Instruct the participants to get out their Scavenger Hunt Papers. Have them spend some time discussing the questions on legislation with the people at the table. After students have reviewed a summary of legislation, answered

TEACHING NOTES

one question on the law they researched and drafted one question for OCC, consider writing the questions on the white board:

- What law did each person research? How did they answer the questions on their law?
- What question did they note after reviewing the law summary online?
- Does anyone at the table know the answer to the question?
- Students may ask people at other tables if they know the answer to the questions.
- What observations have they made between the law they researched and their primary work duties in DCFS?

Trainer Note: This question was not on their work sheets. It is the application question: Think about how law, through policy and procedures, shapes their work.

As they talk, students should write their answers on a flip chart. (Trainers can use this work for a Gallery Walk review during the next week of class). Trainers will summarize or have the answers to questions based on prior review of the students' work online.

INDIAN CHILD WELFARE ACT (ICWA)

One law that merits a quick mention from the trainers is:

The Indian Child Welfare Act also known as ICWA. ICWA, enacted in 1978, aims to prevent the unnecessary removal of Native American children from their families and to ensure that any removals are handled in a way that reflects the unique values of Native American culture.

The Division of Children and Family Services is respectful of the varying cultures and heritages of the families it serves. To that end, DCFS complies with all mandates of the federal Indian Child Welfare Act.

ICWA is a federal law regulating placement proceedings involving children of Native American descent. ICWA mandates preventive services before removal to protect the best interest of Native American children and to promote the stability and security of Native American families and tribes.

TEACHING NOTES

This includes preventing the unnecessary and arbitrary removal of Native American children from their families and tribes and placing a Native American child who must be removed in an available and safe home that reflects the unique values of the Native American culture (Policy 1-B).

Inform the participants that they should ask if any family member claims membership in an Indian tribe. If the family is part of a tribe, the FSW should contact their supervisor and let OCC know if this family has any court involvement. The tribal court may have exclusive jurisdiction or concurrent jurisdiction with state courts. At this time, the FSW will need the OCC's help and direction.

When handling an ICWA case, the FSW must:

- Ensuring the best interest of the child by ensuring their wellbeing and safety.
- Family preservation by emphasizing efforts to keep Native American children with their families and tribes, whenever possible.
- Provide active efforts to prevent removal of the child from the home and, when removal is necessary, provide services that strengthen the family so the child can be safely returned home.
- Identify a placement that aligns with ICWA's placement preferences.
- Notify the child's tribe and parents promptly about state court proceedings.
- Actively involve the tribal nation, parents, and extended family in case planning and decisions.

Thoroughly review Policy 1-B: Child Welfare Delivery System – Compliance with Indian Welfare Act, with the participants. Once the policy is reviewed, show the ICWA Video (5:35) to give the participants a better understanding of the Indian Child Welfare Act. The video link is in the Training Materials section of your Trainer Guide.



ACTIVITY: Red Card, Yellow Card

Conclude with a quick Red Card, Yellow Card exercise. Inform students Red Cards = False. Yellow cards = True. This activity can be done as a Thumbs UP = True and Thumbs Down = False.

TEACHING NOTES

Read each statement first, allow the participants time to select their appropriate card color or thumb position. Once they have selected their answers, hold up the appropriate card color or thumb position as you read the answer.

- An FSW needs to memorize the fine details of laws that influence child welfare services.

False: FSWs need to know that there are laws that influence their practice and that these laws are reflected in policy and procedures.

- If there is a conflict between law and policy, follow your policy.

False: When in doubt, follow the law. The reason is that legislation may go into effect before policies and procedures can be promulgated. If you have a question about which is most current, consult with your supervisor and with OCC.

- Federal laws “drive the car” so to speak.

True

- You do not need to notify OCC about children whose parents claim Indian tribal affiliation because Arkansas does not have any reservations in the state.

False: Tribal courts may still have exclusive or concurrent jurisdiction. Let the attorneys guide you.

- It is important to know when to involve your OCC attorney in the various stages of a case.

True

LEGAL: LIFE OF A CASE

It is important to know when to involve OCC, look at the places in the life of a case where legal interventions are an option or are required. Instruct the participants to get out their graphic organizers that describe the life of a case. Allow a few minutes for the participants to share their organizer with the people at their table. Give the class the following instructions and have them answer the following questions:

- Take a few minutes to share your organizers with each other and describe some of the things you learned as you constructed it.
- What strategies did you use to help it start making sense?
- Did other people help you figure out how cases unfold?

Allow for a few minutes for group discussion. Before the next activity, present the Life of a Case PowerPoint.

LEGAL: OVERLAY

Now, we are going to add an over-lay to the life of a case. Have the participants determine places where they may need legal interventions to assure child safety. They can use any of the collage materials on their table to expand their organizer.

For example, you can supply strips of paper with legal interventions written on them. If this type of thing helps them organize, they can use them.

This exercise is designed to give the participants the big picture; therefore, some of the materials will be covered quickly. Then come back and explore some of the concepts in more detail. In the sample overlay, there is color-coded interventions by the place(s) where FSW's are most likely to use them.

Start with a *Differential Response* assignment. If these cases proceed, no legal intervention is needed. However, for a variety of reasons, a DR case may be re-directed into a traditional investigation. Be sure the participants's organizer shows that potential to loop back into the traditional investigation.

Now look at a *child maltreatment investigation*.

Question to Class: What state law drives investigations?

Answer: Maltreatment Act

There are several places in an investigation where legal interventions are an option used to ensure safety. Let's look at some of these:

Order of Investigation – used when you cannot get into a home, school, or

other places to initiate or complete an investigation or if you need a drug screen on a child under 13-years-old and parents refuse to give consent for the test.

- Requires an affidavit
- So, what happens if you think that the child's health and safety is in immediate danger?
- Contact local law enforcement and ask for assistance. Keep your supervisor in this loop.
- Contact OCC because they will file to get the order.

Order of Protection – filed by a family or household member. If the situation is such that children and family members' safety requires an Order of Protection, there must be an immediate safety plan in place if the children remain in the home.

TEACHING NOTES

Order of Less Than Custody – used when the Division does not want to seek custody but when a child health and well-being may be in danger.

- Requires an affidavit by DCFS
- Notify your supervisor
- Notify OCC

Trainer Note: An example would be a situation where mother and father are divorced. Father has every other weekend visitation. Three days before they are scheduled to visit their father, the daughter and son disclose that their father is sexually abusing them. The mother is appropriate, and no safety threats are identified in her home. Mom may be able to work through her attorney, but will it be fast enough? DCFS cannot instruct the mother to violate the court order granting the father visitation. This would be a situation to explore an order of less than custody.

72 Hour Hold, aka Protective Custody -

- Requires immediate notification to OCC
- Requires an affidavit
 - Must be amended if new facts emerge during the investigation
- Requires OCC to petition the court for DCFS to keep the child more than 72 hours.
- Emergency Hearing (Ex-parte order, i.e., only one side was there).
- Probable Cause Hearing within 5 business days from the date of the ex-parte order.
- Adjudication Hearing.

Now look at an **In-home case** where there is a True finding on an allegation of maltreatment, with or without a safety threat identified and an immediate safety plan.

30-day petition – used to ensure compliance with a family case plan (sort of like upping the ante and a last effort before a petition for removal)

Filing an Immediate Safety Plan with the court – a dependency-neglect petition must be filed if a 30 - day assessment of an immediate safety plan indicates there is still a substantial risk of harm to the health and safety of the child and, the immediate safety plan must remain in place to ensure the child's safety,

TEACHING NOTES

For both types -

- Require an affidavit
- Will be adjudication hearings
- Risk is that court may decide that removal is indicated even if that is not what the Division recommends.

Order of Less than Custody – could occasionally have the need in an in-home case.

Let's look at the *Anywhere Along the Way Situations*. Direct the participants to the life of the case infographic. This information is not on their graphic organizer. This section includes two other types of juvenile court cases, FINS, and Delinquency cases, where a judge orders a child or youth into DCFS custody, or Dependency cases where there is no abuse or neglect, but children are still in need of a safe placement. This situation will require the FSW to:

- Contact OCC as soon as you find out that something like this has occurred.
- Be sure your supervisor is aware.
- Plan legal intervention in conjunction with OCC and supervisor input and direction.

Trainer Note: As of 8/1/23, ACT 61 authorizes a circuit court to establish family treatment specialty court programs for families involved in dependency-neglect proceedings under certain conditions.

Finally, let's look at legal interventions in Out-of-Home cases.

Question for the Class: What state law drives out-of-home cases?

Answer: Juvenile Code

Adjudication/Disposition Hearing – the decision is made that the children remain in care. The affidavit prepared by the investigator is usually the key piece.

- Usually, the investigator is taking the lead; caseworker may testify if services were offered during the case and the caseworker (not investigator) was the one who arranged them; caseworker may also testify if he/she assisted in locating kin for placement resource.
- Initial permanency goal established
- Document all reasonable efforts to prevent removal

TEACHING NOTES

Review Hearings – to report on the family’s progress on meeting the permanency goal and/or concurrent goal.

- Usually, 90 days in Arkansas but can be up to 6 months
- Requires court report
- Document reasonable efforts to reunify; reasonable efforts to achieve permanency (concurrent planning)

Permanency Planning Hearing (PPH) – the hearing to finalize the Permanency Plan; no later than 12 months from the time the child entered care.

- Requires a special court report
- Documentation of reasonable efforts for reunification or to justify a recommendation for other permanent living arrangements. ACT 363 now includes “by marriage” in the definition of relative and adds “adoption” as a way in which a person may not be related under the definition of fictive kin.
- An array of permanency options covered in more detail in the Out-of-Home Concentration
- As of 8/1/23, ACT 168 allows the court to consider the preference of juveniles if they are of a sufficient age & capacity to reason, regardless of chronological age.

Termination of Parental Rights – can happen at any stage in the life of an Out-of-Home case but it is usually after PPH. NOTE: ACT 348 clarifies when parental rights are no longer attached to Safe Haven infants.



ACTIVITY: Reasonable Efforts Practice

After the Legal Overlay start the next activity. There should be several scenarios posted on the walls of the training room. Have the participants go to each scenario, read it and mark what type of legal intervention or what type of example

(Reasonable Efforts to Prevent Removal, Reasonable Efforts to Reunify or Reasonable Efforts to Achieve Permanency) is indicated or described in the scenario.

Trainer Note: Trainers can find the scenarios in the Trainer Resources – Scenarios 1-5.

Let the members of each table move from scenario to scenario. After students have had a chance to mingle and discuss, take a break.



ACTIVITY: Review Walk

After returning from break conduct a walk around review. Ask the class to stand. Tell them on the count of four to move around the room until you say ‘Stop’. Start the count, let people mingle away from their table groups and call ‘Stop’.

Have the participants turn to the closest person to them and share one “aha” moment or one thing that really stuck with them when comparing the life of a case with the places where legal intervention might be indicated. Once they have shared their partner will share their ‘aha’ moment. Instruct the participants to discuss with each other if there was anything that was confusing or where they need more information.

THE CLOCK IS TICKING

Once everyone is seated from the previous review walk. Direct students to **page 11 in their Participant Manuals**. We cover the types of hearings and the time frames for those hearings in this introduction because the FSW will enter the family’s life at different stages in the life of that case from Hotline report to safe, permanent placement.

So, if the court is involved the FSW needs to know where you are in the process. It is also helpful to know the other people they may see at court depending on the type of

hearing they may attend. As you show ‘The Clock is Ticking’ video, instruct the participants to use **page 11 in their Participant Manual** to take notes. This video is approximately 12 minutes long. At the end of the video, please make the following corrections:

- The Hotline is operated by the Arkansas State Police.
- OCC does not represent the worker. OCC represents the Division.

TEACHING NOTES

TEACHING NOTES

AFFIDAVITS

Discuss with the class the importance of affidavits. They play a prominent part in the Life of a Case, especially in the early part of a case or if a case takes a turn for the worse in terms of children's safety or change in custody.

Question for the class: We know some of you are not investigators. Why do you think it is important for all of you to have knowledge of an affidavit?

At a minimum, the class should recognize that they will be on-call and may have to write one even if they are not investigators.



ACTIVITY: Affidavit Review

Instruct the participants to review the work that they completed for the scavenger hunt. Give the participants five minutes to discuss the following with their table:

- How did you define affidavit?
- What things did you have in common?
- Did some of you find things that appear to contradict what other people found?
- Take your lists and rank the items everyone found from most important to least important.
- Identify the top three on which you can all agree.

Once the participants have completed their group discussions instruct them to write each one of those on a sticky note or note card and post them on the flipchart pad at the front of the room.

If this is a very large class, consider having two boards.

After the notes are posted, have the class take a walking tour to look at the suggestions. Encourage participants to take a picture with their phone, or to jot down things they did not think of. Trainers can collect the class input in one place and email it to class participants (since this is last day).

An alternative way to run this exercise is:

TEACHING NOTES

Tell the class they are going to spend a few minutes reviewing the work they did in the online training with the people at their tables. Their charge will be to take the information that everyone at the table collected and do a 2–3-minute training for the rest of the class. They can use any of the materials at their tables and they can show their work on a flip chart.

As the groups are working, circulate, listen, and check on the progress of the work. As the groups teach each other, ask questions that encourage group members to explore commonalities and differences in what they found on-line and are teaching each other.

After the groups have finished one of the activities above, note that they probably dealt in generalities. Next, look at Arkansas specific expectations in an affidavit.

Refer groups to the **Table Copies of the CFS-411**, the form can be found in the Trainer Resources.

Pass out **Handout 8 - Affidavits: The Key to the Case**. Point out to the group that this handout is a graphic organizer of sorts. It has taken the required data pieces for an affidavit and grouped them into logical sets.

Trainer Note: Be sure to access the most current version of the CFS-411 for affidavits.



PREPARING FOR COURT

After the break, reassure students that they will get additional training on legal issues, practice on writing affidavits and practice testifying.

Pass out **Handout 9 – DCFS Internal Procedure 300: Professionalism in the Courtroom**. Go over this information and instruct new staff to check with their supervisors (and/or experienced staff) to see if there are specific guidelines for their court. There has been a statewide effort to improve workers' preparedness and performance in the courtroom. Professionalism in court is about much more than how the worker dresses or behaves. Professional child welfare staff are prepared for court by taking ownership of their cases and knowing the cases and histories, by developing well written court reports, by knowing what the purpose of the hearing is, and by knowing what recommendations to make to the court based on the current status and

TEACHING NOTES

needs of the children and families. They will be observing court if they have not yet. These observations provide opportunities to learn and reduce anxiety about the court process.

Trainer Note: Advise participants of an optional resource, *Preparing for Court in Child Welfare*. This online course is located on the DCFS portal.

Review the overall content for Unit 3, then move to the lab for the knowledge check. Remind participants that the knowledge check covers items introduced online as well as in the classroom.

TICKET OUT

Remind participants to write down on their index card anything that they may need further clarification about, or a question that they may want to be answered. Instruct participants to hand the card to the classroom trainer before they go to the lab for the Knowledge check. Consider that you may need to give feedback on these questions via email or WebEx as this is the last day.

DISMISS FOR THE DAY