



# Action 4 Child Protection

Making **Quality** Child Welfare  
Practice **Possible**

## WEBINAR TITLE:

Adapting Practice During a Public Health Crisis:  
Guidelines for Public Child Welfare Intake/Hotline  
Assessment and Pre-Commencement

## DESCRIPTION:

During a Public Health Crisis, circumstances change rapidly. As the COVID-19 pandemic has significantly changed our social environments through social distancing and isolation policies to control the spread of infectious disease, public child welfare agencies remain steadfast in working to ensure child safety. In practical terms, with respect to being responsive in day-to-day service delivery, social distancing requires public child welfare agencies to think critically about how to maintain the highest standard for assessing and managing child safety, while accounting for caseworker and community safety.

Public child welfare agencies are compelled to consider the distinction between essential and non-essential functions. Many child welfare workers and supervisors have been identified as essential personnel in a large majority of the country. This webinar and related resources provide support for intake/hotline information collection and investigation/assessment pre-commencement considerations to inform initial contact with children and families. During this period of heightened social distancing, these materials are intended to assist hotline/intake workers, CPS investigators, and case managers in sufficiently assessing and planning for initial contacts with children and families.

## RESOURCES:

- Adapting Practice During a Public Health Crisis Guidelines for Public Child Welfare: Intake/Hotline Assessment and Pre-Commencement Information Collection Standards and Decision Making

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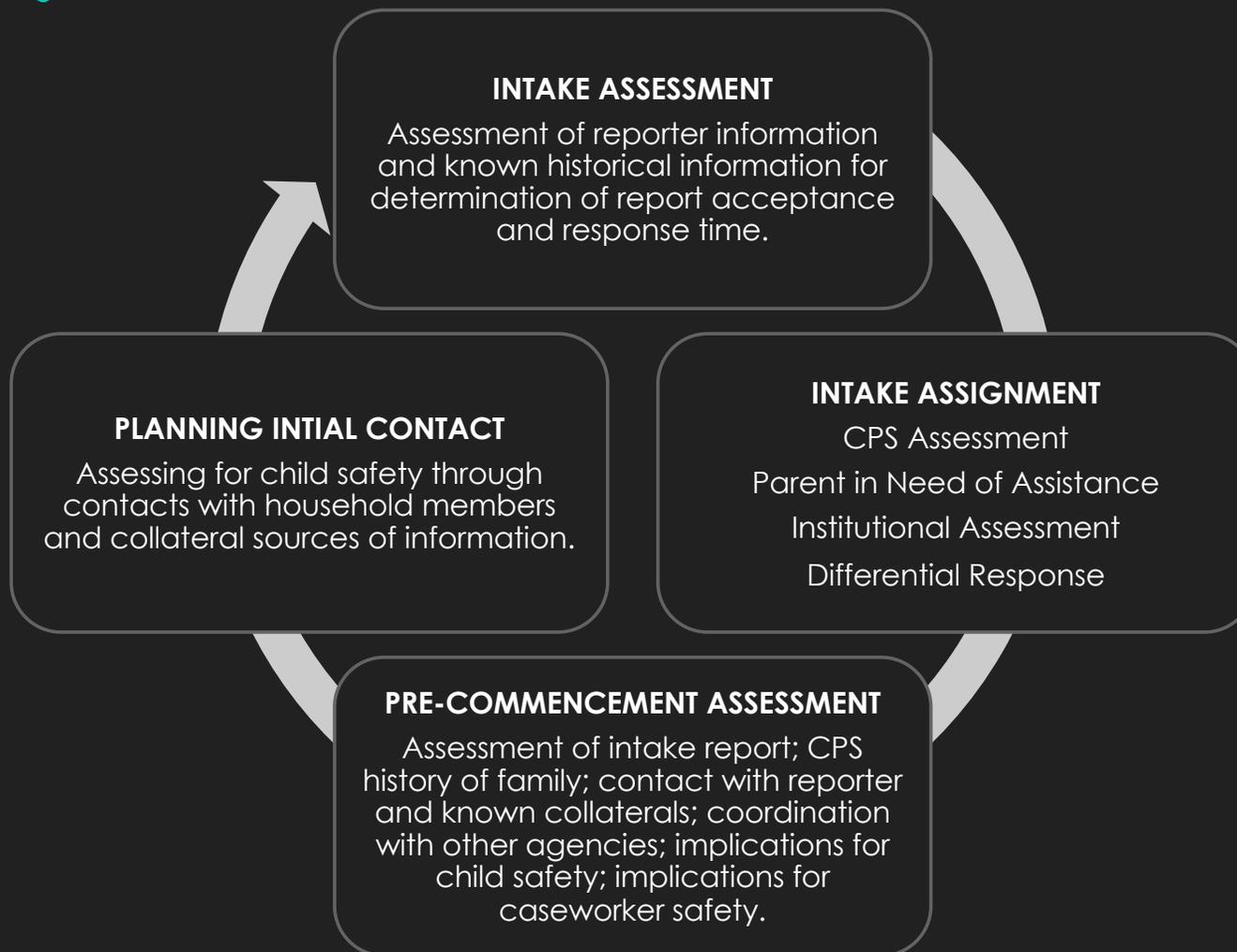
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# Adapting Practice During a Public Health Crisis: Guidelines for Public Child Welfare

Intake Assessment and CPS Initial Family Assessment  
Pre-Commencement Information Collection Standards and  
Decision Making

Action  Child Protection

# Child Welfare Process: Intake through Planning Initial Contact



# Intake Assessment: Information Collection

- State and local standards
  - Report type and criteria for acceptance
- Best Practice Standards: Intake Assessment Process
  - Introduction Stage
  - Exploratory Stage
    - Information Collection Domains
      - Maltreatment
      - Nature of Maltreatment
      - Child Functioning
      - Adult Functioning
      - Parenting General
      - Parenting Discipline
  - Closing Stage
    - Screening Criteria and Response Time



# Intake Assessment: Exploratory Stage



- Exploration is focused on gathering sufficient information to inform the screening and response time decisions.
- Adapt standardized approach for exploration due to social distancing and stay at home orders.
  - Increased isolation;
  - Increased stress;
  - Decreased tolerance and increased negative coping mechanisms;
  - Change in parenting roles and responsibilities;
  - Concerns for caseworker health due to COVID-19.

## Maltreatment

- Reporters observations regarding the allegations of abuse/neglect
- Virtual contact or in person
- COVID-19 Medical Concerns for Children

## Nature of Maltreatment

- When did they first have concerns for become child safety?
- When was the last time the reporter was able to observe the child(ren)?  
Virtual contact or in person
- Has the household composition changed recently due to social distancing?
- Parent/Caregiver separated from household due to high exposure job?
- Current location of parents/caregivers.

## Child Functioning

- Are they participating in virtual school?
- Are children still attending daycare? Or are children being watched by relatives due to parent/caregiver essential employment?
- Are those needs of children being addressed by service providers? If so, in person or virtually? Such as child with complex medical needs, mental health treatment, developmental therapies, etc.
- Are there changes in the child's behavior due to social distancing?
- Children with prior conditions, was the condition isolated, situational or chronic prior to social distancing and has the condition increased?

# Intake Assessment: Information Collection Domains

# Intake Assessment: Information Collection Domains

## Adult Functioning

- Parent/caregivers current furloughed due to social distancing?
- Are the parent/caregivers receiving unemployment or other financial benefits?
- If currently working, are they working in high exposure work settings?
- How are the parent/caregivers accessing their supports to address mental health and/or substance abuse during social distancing?
- How have the parents/caregivers been managing their stress during social distancing?
- Have there been any family or close friends that have been diagnosed with COVID-19?
- Has there been any loss due to COVID-19?

## Parenting General

- How as the parent/caregiver's interactions with their children changed since social distancing and stay at home orders?
- How have the parenting roles changed?
- Is the parent/caregiving a single parent?
- Have there been any changes in how the parent/caregivers relate to the children?
- Have there been any changes in the parent/caregiver's satisfaction with parenting?
- Are the parent/caregivers able to meet the needs of the children?

## Parenting Discipline

- Has there been a change in the parent/caregiver's ability to manage typical child behavior?
- Has there been an increase in expressed frustration by the parent/caregiver with the child's behavior?
- Has there been a change in disciplinary approaches?

# Intake Assessment: Caseworker Health and Safety Exploration

- Known travel by household members or frequent visitors.
- Household member employment at high risk of exposure work settings.
- Household practicing social distancing.
- Household utilizing personal protective measures when in public.
- Household members or frequent visitors exhibiting symptoms of COVID-19.
- Known service providers to the home:
  - Frequency.
  - Use of protective measures by the family and providers (PPE, abiding by social distancing).



# Intake Assessment: Screening and Response Priority

- **Best practice standard remains, despite COVID-19.**
  - Adherence to state statute and policy for screening and priority response determination.
- Adapting the priority response assignment **should only be considered when report information does not indicate that children are in present or impending danger.**
- Response time adaptations do not abdicate the responsibility for an assessment to occur in a safe, and timely manner.
  - Examples:
    - Truancy reports, with no allegations regarding present or impending danger, and last known contact was prior to social distancing and school closure.
    - Institutional reports where the institution is currently closed, and abuse and neglect was alleged prior to social distancing.

# Child Protective Initial Family Assessment Pre-Commencement Activities: Caseworker Review of Case Information

- Review of Intake Assessment Narrative
- Review Caseworker health and safety concerns
- Review of Child Protection Services History and Criminal History



# Child Protective Initial Family Assessment: Pre-Commencement Activities Reporter and Collateral Contacts

- Best practice standards is the caseworker verification of information and exploration of additional information with the reporter prior to initiating contact with the family.
- Adapting practice explores concerns for COVID-19 that may affect the initial contact and potential safety planning for children identified as unsafe.



# Child Protective Initial Family Assessment: Pre-Commencement Activities

## Planning for Initial Contact

- Preparation allows the caseworker to recognize potential threats to child safety identified in the intake report, as well as think about specific information needed to reconcile the report and assess for present and impending danger.
- Best practice standard is for caseworkers to adhere to state statute and policy for making face to face contact with all household members when commencing the assessment.



# Planning for Initial Contact

## Interview and Home Observation

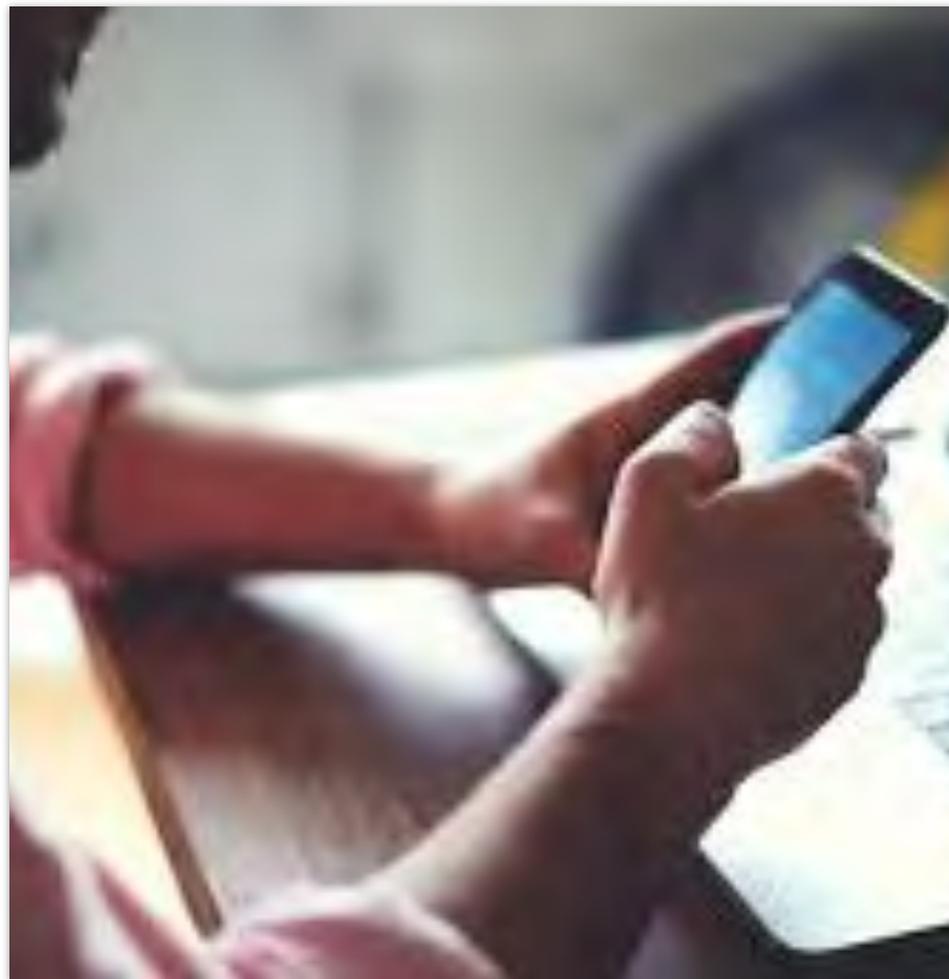
- Conduct interviews outside when possible
  - Ensure confidentiality through assessing surroundings
- Home Observation
  - Can the home accommodate social distancing during the assessment?
  - Use of facetime, skype, and/or zoom to conduct the home observation.
  - Walk around the outside-observe through windows/doors.
- Dynamics of the home considering COVID-19 illness.
  - If someone in the home is ill, how has the family been managing the quarantine of the household member?

## Caseworker Health and Safety

- Personal Protective Equipment
  - Gloves
  - Mask
  - Sanitizer
- If exposed while in the field, what is the protocol for response.

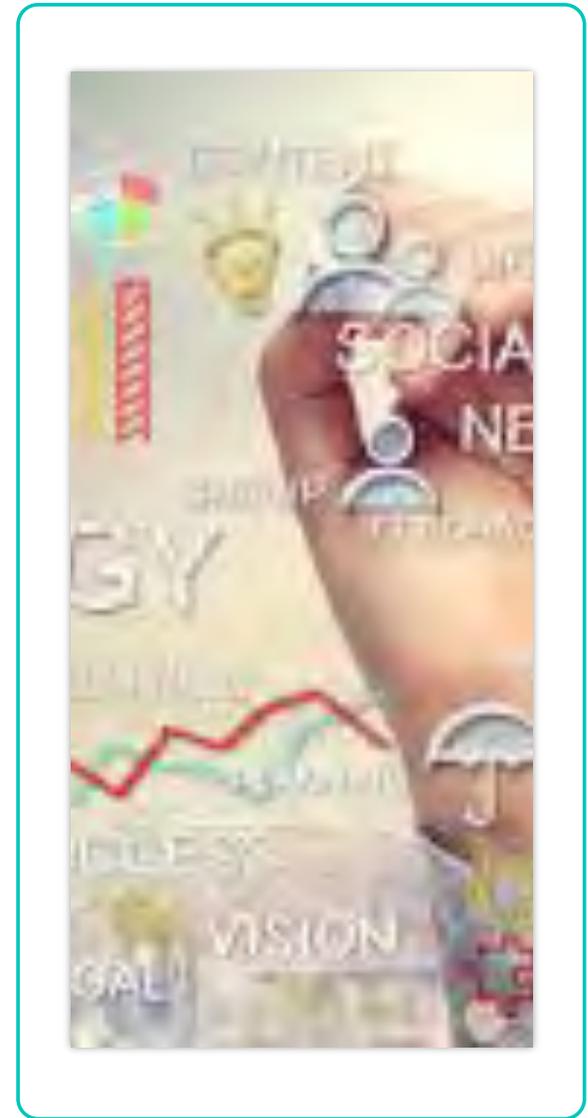
## Supervisory Consultation: Pre-Commencement Assessment and Planning

- Consultation related to practice and decision-making is one of the most important activities as a supervisor.
- Assisting caseworkers to gather information to assess threats to child safety.
- Key role in increasing job satisfaction, caseworker competency and confidence.



# Supervisory Consultation

- Additional information that may need to be considered prior to making contact;
- Caseworker plan for initiating contact and considerations or precautions due to COVID-19;
- Considerations regarding resources if a safety plan is needed;
- How can you support the caseworker during their initiation of the report?



Questions?



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**Thank you  
for  
attending.  
Be well  
and safe.**

# Adapting Practice During a Public Health Crisis: Guidelines for Public Child Welfare

**Intake Assessment and  
CPS Initial Family Assessment  
Pre-Commencement  
Information Collection  
Standards and Decision Making**

April 22, 2020

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## Adapted Practice Guidelines and Reference Guides

During a Public Health Crisis, circumstances may change rapidly. As the crisis has significantly changed in our social environments, caused by social distancing and isolation policies to control the spread of infectious disease, public child welfare agencies remain steadfast in working to ensure child safety. In practical terms, with respect to being responsive in day-to-day service delivery, social distancing requires public child welfare agencies to critically think about how to maintain the highest standard for assessing and managing child safety, while accounting for caseworker and community safety.

Public child welfare agencies, operating in the current climate of uncertainty, are compelled to consider the distinction between essential and non-essential functions. Child welfare professionals, child protective service workers and supervisors, have been identified as essential personnel in a large majority of the country. This guide provides a resource for Intake information collection and pre-commencement considerations to inform initial contact with children and families. During this period of heightened social distancing, these guides are intended to assist caseworkers in sufficiently assessing and planning for initial contacts with children and families during COVID-19; while accounting for the caseworker and community safety.

This guide for Intake Assessment and pre-commencement is intended to provide a resource support during this period of heightened social distancing; to assure that Intake Assessment and pre-commencement activities remain sufficient, including if necessary, adapting Intake information collection standards and initial contact standards based on social distancing and stay at home orders.

## Intake and Pre-Commencement: Key Definitions

**Intake:** An Intake is the report that contains the information received from a reporting party alleging child abuse, neglect, present danger, impending danger and/or requesting services.

**Caseworker:** Professional who responds to and assesses allegations of child maltreatment, present danger, and or impending danger.

**Screening:** Screening is the process of determining whether a referral will be accepted as a report based on conditions of alleged maltreatment, present danger, and/or impending danger.

**Response Priority:** The time required to initiate face-to-face contact with the family identified in the Intake. Priority is based on the screening determination and reported present and/or impending danger.

**Pre-Commencement:** Pre-commencement activities are intended to adequately prepare the caseworker for completing the Initial Family Assessment of the family. Emphasis should be placed on the significance of planned, purposeful interventions and sufficient information collection as the key to safety decision making during all phases of working with the family. Pre-commencement consultations related to specific case practice issues provide an ideal instructional opportunity for both assessing and developing worker competencies including, but not limited to, analyzing known information, guiding information collection and planning initial assessment activities.

## Information Collection: Six Domains

### **Maltreatment**

This question is concerned with the maltreating behavior and immediate effects on a child. It considers what is occurring or has occurred and what the results are (e.g., hitting, injuries, lack of supervision, etc.). Information that answers this question includes: Type of maltreatment; Severity of maltreatment; Description of specific events; Description of emotional and physical symptoms; Identification of the child and maltreating caregiver; Condition of the child.

### **Nature of Maltreatment: Surrounding Circumstances**

This question serves to qualify the maltreatment by placing it in a context or situation that 1) precedes or leads up to the maltreatment, or 2) exists while the maltreatment is occurring. By selectively "assessing" this element separate from the actual maltreatment, we achieve greater understanding of how serious the maltreatment is. Information that answers this question includes: The duration of the maltreatment; History of maltreatment; Patterns of functioning leading to or explaining the maltreatment; Parent/Caregiver intent concerning the maltreatment; (assessment of intent re: parenting/discipline vs. intent to harm) Parent/Caregiver explanation for the maltreatment and family conditions; Unique aspects of the maltreatment, such as whether weapons were involved; Parent/Caregiver acknowledgement and attitude about the maltreatment and; Other problems occurring in association with the maltreatment.

### **Child Functioning**

This question is concerned with the child's general behavior, emotions, temperament, and physical capacity. It addresses how a child is from day to day, rather than focusing on a point in time (i.e. caseworker contact, time of maltreatment event). Information that answers this question includes: General mood and temperament; Intellectual functioning; Communication and social skills; Expressions of emotions/feelings; Behavior; Peer relations; School performance; Independence; Motor skills; Physical and mental health; Functioning within cultural norms.

## Information Collection: Six Domains

### **Adult Functioning**

This information element has strictly to do with how adults (the parents/caregivers) in a family household are functioning. This question is concerned with how the adults (parents/caregivers) in the family household typically feel, think, and act daily. The question here focuses on adult functioning separate of parenting. Information that answers this question includes: Communication and social skills; Coping and stress management; Self-control; Problem solving; Judgment and decision making; Independence; Home and financial management; Income/Employment; Citizenship and community involvement; Rationality; Self-care and self-preservation; Substance use; Mental health; Family and/or domestic violence; Physical health and capacity; and Functioning within cultural norms.

### **General Parenting**

This question explores the general nature and approach to parenting which forms the basis for understanding parent/caregiver-child interaction in more substantive ways. When considering this information element, it is important to keep distinctively centered on the overall parenting that is occurring and not allow any maltreatment incident or discipline to shade your study. Information that answers this question includes; Reasons for being a parent/caregiver; Satisfaction in being a parent/caregiver; Parent/Caregiver knowledge and skill in parenting and child development; Parent/Caregiver expectations and empathy for a child; Decision making in parenting practices; Parenting style; History of parenting behavior; Cultural practices; and Protectiveness.

### **Discipline or Behavior Management**

Discipline is considered in a broader context than socialization; teaching and guiding the child. Usually, staff focuses on discipline only within a punishment context, so emphasis on the importance of viewing discipline as providing direction, managing behavior, teaching, and directing a child are considered in answering this question. Information that answers this question includes; Disciplinary methods; Approaches to managing child behavior; Perception of effectiveness of utilized approaches; Concepts and purpose of discipline; Context in which discipline occurs; and Cultural practices.

## Guideline I.

### Exploratory Stage of Intake Assessment: Considering Social Distancing and COVID-19

The Intake Assessment is conducted to identify parents/caregivers who are unable or unwilling to protect their children from present and/or impending danger; families that the agency must further assess due to concerns for child safety. Best practice standard is Intake workers conduct exploration with reporters utilizing the six information collection domains to inform decision making. During this time of social distancing and stay at home orders, states have reported a decrease in reports of abuse and neglect (New Jersey, Wisconsin, Florida, Pennsylvania). During this time, adherence to the best practice standard should include exploration concerning changes in socioeconomic stability, health, accessibility to resources, implications for accessibility of children and families to assess child safety by the assessment caseworker, and concerns for caseworker health due to COVID-19.

**Ability to Maintain Best Practice Standard Intake Assessment**



In addition to state and local standards, adaptation of additional exploration requirements to include current family dynamics affected by COVID-19 and adherence to social distancing and stay at home orders.  
**As essential employees, decreasing the potential risk of exposure to COVID-19 through exploration by the Intake worker with the reporter is essential.**

**Exploratory Stage of Intake Assessment: Information Collection**



**Maltreatment:** Potential increase in Medical Neglect Reports: intake workers should be familiar with local and federal guidelines for COVID-19 testing and medical triage protocols.

**Nature of Maltreatment:** Exploration concerning the timeframe for abuse/neglect and reporter contact with the child and family.

**Child Functioning:** Exploration regarding the current day to day schedule, including location of the child during the day. Exploring the needs of the child(ren) and if there are services occurring in person or virtually in the home.

**Adult Functioning:** Exploration of impact on adult household members due to COVID-19.

- Employment status;
- Financial supports or access/eligibility for public benefits;
- Support system (virtual or in person);
- Increase in marital tension or discord;
- Feelings of isolation/frustration;
- Increased negative behaviors (substance use, avoidance, etc.);
- Family or close friend death and/or illness due to COVID-19.

**Parenting General:** Exploration of impact on parenting role and responsibility due to COVID-19.

- Single parents;
- Role changes due to employment status between parents/caregivers;
- Managing child(ren)'s needs (emotional, basic, educational).

**Parenting Discipline:** Exploration of impact on parenting disciplinary practices due to COVID-19.

- Tolerance for normal child behaviors;
- Avoidance of addressing behaviors.

## Intake Worker Reference Guide for Conducting Exploration: Information Collection Domains and Caseworker Health and Safety

### Maltreatment

What type of maltreatment is being reported?

- Is the report of maltreatment consistent with policy (State/Agency child abuse and neglect definitions)?
- What is the condition of the child at the time of the report?
- **What is the reporter's opinion regarding a child's need for medical care?**
  - **Concerns for COVID-19: trouble breathing, high fever.**
  - **Parent/caregiver response to symptoms.**
- Did the maltreatment result in an injury?
- What specific type of injury exists, severity, symptoms and location?
  - **Was the reporter able to observe the injury; in person or virtually?**
- How did the injury occur and by whom?
- What other specific condition or circumstance indicates abuse and/or neglect?

### Nature of Maltreatment

What led up to the abuse/neglect?

What influenced the abuse occurring?

How often is a child abused/neglected?

Are concerns regarding abuse/neglect pervasive?

How long has the child been maltreated?

- **When did the reporter first have concerns for child safety?**
- **When was the last time the reporter was able to observe the child(ren)?**
  - **Was their observation in person or virtual?**

What is/was parent/caregiver's reaction to the maltreatment?

What explanation did the parents/caregivers provide?

What is the parents/caregivers' accessibility to the child?

**Has the household composition changed recently due to social distancing?**

- **Parent/Caregiver separated from household due to high exposure job.**
- **Current location of parents/caregivers and children**

Is the incident or negative condition ongoing or currently in process?

Is there more than one maltreating parent/caregiver?

Is/was the maltreatment intentional or impulsive?

## Intake Worker Reference Guide for Conducting Exploration: Information Collection Domains and Caseworker Health and Safety

### Child Functioning

Who are all the children in the home?

What are the ages of the children?

**School Age Children:**

- **Are they participating in virtual school?**

**. Daycare:**

- **Are children still attending daycare if parents/caregivers are still working?**
- **Children spending time with relatives due to parent/caregiver employment.**

Is one or more of the children vulnerable?

How does a child interact with peers?

How does a child relate to the parents/caregivers in the home?

Does a child have any special needs?

- **Are those needs being addressed by service providers?**
- **Are the service providers visiting the home; in person or virtually?**

Is a child in need of immediate or routine medical care?

Does a child have any mental health needs?

- **Are service providers attending to child mental health needs; in person or virtually?**

Is a child on medication or actively being seen by physical or mental health professionals?

- **How are these needs being met since social distancing?**

**Are there changes in the child's behavior recently due to social distancing?**

**Was the child's condition isolated, situational or chronic prior to social distancing and has the condition increased?**

### Adult Functioning

Is a parent/caregiver employed and where does he/she work?

- **Are they currently furloughed due to social distancing?**
- **Are they receiving any unemployment benefits?**
- **Are they working in a high exposure job?**

Is a parent/caregiver socially active, involved in the community?

Does a parent/caregiver have a criminal record?

Are there any indications of violence or history of domestic violence?

How does a parent/caregiver relate or get along with others?

Is there any history of or current mental health issues?

Is there any history of or current substance abuse?

Has a parent/caregiver been in treatment or currently being seen by a mental health and/or substance abuse professional?

- **How is the parent/caregiver accessing their supports to address their mental health and/or substance abuse during social distancing?**

Are there significant stressors in the home and how does a parent/caregiver deal with stress?

- **How have the parents/caregivers been managing during social distancing?**

**Family or close friends that have been diagnosed with COVID-19 ?**

- **Loss of family or friends due to COVID-19?**
- **How have the parents/caregivers been coping with grief due to loss?**

## Intake Worker Reference Guide for Conducting Exploration: Information Collection Domains and Caseworker Health and Safety

### Parenting General

How does a parent/caregiver interact with the child(ren)?

- **How has their interaction changed since social distancing and stay at home orders?**
- **How have parenting roles changed within the household due to social distancing and stay at home orders?**
- **How are single parent/caregiver coping with social distancing and stay at home orders?**
  - **Social supports;**
  - **Family supports.**

How does a parent/caregiver relate to the child?

- **Have there been any changes in how the parents/caregivers relate to the children due to social distancing and stay at home orders?**

How does a parent/caregiver perceive his/her parenting role?

What is a parent/caregiver's satisfaction in the parenting role?

- **Has there been a change in the parents/caregiver's satisfaction due to social distancing and stay at home orders?**

What is the parent/caregiver's knowledge and skill related to parenting?

- **Are the parents/caregivers able to meet the needs of the children considering social distancing and stay at home orders?**
  - **Child with special needs;**
  - **Child with complex medical needs;**
  - **Educational needs;**
  - **Basic needs (food, shelter).**

What is the parent/caregiver's willingness and ability to provide care?

What is the parent/caregiver's willingness and ability to protect?

### Parenting Discipline

What are the parent/caregiver's expectations of the child?

What are the parent/caregiver's tolerance for the child?

- **Has there been a change in the parent/caregiver's ability to manage typical child behavior during social distancing and stay at home orders?**
- **Has there been an increase in expressed frustration by the parents/caregivers with the child's behavior?**

What disciplinary approaches are used?

- **Has there been a change in the disciplinary approaches recently due to social distancing and stay at home orders?**

## Intake Worker Reference Guide for Conducting Exploration: Information Collection Domains and Caseworker Health and Safety

### Caseworker Health and Safety

#### Exploration of Potential Caseworker Safety Concerns:

- Is there any current criminal involvement;
- Is there a history of violence towards others;
- Is the home currently dangerous due to:
  - Drug manufacturing, infestation of animals or pests, condemned property, etc.)
- Are there concerns about the neighborhood?
  - High level of violent crime.

#### Exploration of Potential Caseworker Health Concerns related to COVID-19:

- **Known service providers to the home;**
  - **Frequency of providers to the home and use of Personal Protective Equipment (PPE) or protective measures by the family and/or providers.**
- **Household members or frequent visitor to the home traveled or not been abiding by social distancing guidelines?**
- **Does anyone in the household work in a high risk of exposure environment/job?**
  - **Healthcare;**
  - **Grocery or other retail deemed essential;**
  - **Food delivery;**
  - **Shipping/Mail delivery;**
  - **Police/Fire/EMS**
  - **Other exposed fields**
- **Is the household practicing social distancing guidelines?**
- **Is the household utilizing personal protective measures when in public? (face masks, hand sanitizer, washing hands, etc.)**
- **Household member or frequent visitor to the home exhibited symptoms of COVID-19;**
  - **Shortness of breath, fever, cough.**

## Guideline II.

### Intake Screening Criteria, Decision and Response Time: Considering Social Distancing and COVID-19

Intake screening criteria refers to the standard, rule, or test by which reported information can be judged with respect to who the agency must serve; which children and families will require further assessment by the agency due to child maltreatment, present danger, and impending danger.

Accepted reports by the agency are assigned a response priority based on safety concepts; present and/or impending danger. Response Time refers to designated times that in-person initial contact is expected to be initiated.

#### Ability to Maintain Best Practice Standard: Screening Decision



Best practice standard remains, despite COVID-19, adherence to state statute and policy for acceptance for assessment. With the current health crisis, family dynamics may have changed that have resulted in increased stress within the home that may impact the safety of children. Exploration of family dynamic changes and coping mechanisms of the parent/caregiver assist in determining present and/or impending danger; screening decision.

#### Ability to Maintain Best Practice Standard: Priority Response



Best practice standard remains, despite COVID-19, adherence to state statute and policy for priority response assignment for children who have been identified in present or impending danger through the Intake assessment.

Adapting or adjusting response assignment due to COVID-19 should only be considered when based upon thorough and detailed information suggesting children are not in present or impending danger. Response time variations would not abdicate the responsibility for an assessment to occur in a safe, and timely manner.

- Truancy reports where the last known contact with the child was prior to social distancing and currently school is suspended.
- Institutional reports where the institution is currently closed, and abuse/neglect was alleged prior to social distancing.

### Guideline III.

## Pre-Commencement Initial Family Assessment: Caseworker Review of Case Information

Pre-commencement activities prepare the caseworker for initial contact with children, families, and collaterals. During this time of social distancing, consideration of limitations and potential need for adaptations of the interview protocol and approach should be assessed during pre-commencement activities by the caseworker and supervisor.

### Review of Intake Narrative



Assessing for patterns of maltreatment (frequency and duration).  
Current injuries to child or recent medical interventions due to abuse and/or neglect.  
Current CPS or services in the home.  
Review of domains to identify areas for further information collection.

### Review Caseworker Safety Concerns



Is there a history of violence or weapons?  
Does the report suggest there are health concerns related to COVID-19?  
Has any household member or frequent visitor tested positive for COVID-19?  
Has any household member or frequent visitor exhibited symptoms such as shortness of breath, fever, and/or cough?  
Has any household members or frequent visitors traveled recently, if so, where?  
Does anyone in the household work in a high exposure job?

- Healthcare;
- Grocery or other retail store deemed essential;
- Food delivery;
- Shipping/Mail delivery;
- Police/Fire/EMT
- Other exposed fields

### Review of Prior CPS History and Criminal History



Parent/caregiver characteristics.  
Victim and other children in the home characteristics.  
Other household members in non-caregiving role.  
Patterns of criminal history.  
Dangerous criminal history and implications for worker and child safety.  
Current probation/parole conditions.  
Current or historical restraining orders/no contact orders.

## Guideline IV.

### Pre-Commencement Activities: Reporter and Collateral Contacts

The caseworker must attempt to contact the reporter prior to commencing the assessment in order to verify information contained in the report and to explore additional information the reporter might have on the maltreatment incident or on the child/family in general.

#### Reporter/ Collateral Contact Additional Considerations



During this time, visibility of children and families has been restricted. Seeking additional information from the reporter regarding their contact and contact by others with the family will assist the caseworker in planning for initial contact and potential safety planning, if danger is identified.

- Reporter history with family:
  - Relationship;
  - Observations;
  - Exploration of Information Collection Domains
- What they believe should happen with the report or what are they hoping to have happen?
- If the children were identified to be unsafe and needed to be placed in out of home care, are they a resource? Or do they know of anyone that could be a resource?
- Anticipated time to see child and/or family again?
- Are there any other people that can be contacted for collateral information regarding the family? Such as service providers that are having contact with the household (in person or virtually).

#### Reporter/ Collateral Contact COVID-19 Related



Consideration of caseworker health and safety to inform planning for initial contact should be explored with the reporter to ensure appropriate planning for initial contact by the caseworker.

- When was the last time the reporter observed or had contact with the child and/or family?
- Knowledge of whether any household member or frequent visitor tested positive for COVID-19.
- Knowledge of whether any household member or frequent visitor exhibited symptoms such as shortness of breath, fever, and/or cough.
- Knowledge of any household members or frequent visitors traveled recently, if so, where?
- Does anyone in the household work in a high exposure job? Healthcare, Grocery or other retail store deemed essential, Food delivery, Shipping/Mail delivery, Police/Fire/EMT, Other exposed fields

## Guideline V.

### Pre-Commencement: Planning for Initial Contact:

Preparing to complete the initial contact in response to the Intake report is essential on every case. Preparation allows the caseworker to recognize potential threats to child safety identified in the Intake report, as well as think about specific information needed to reconcile the report and assess for present danger. Best practice remains, despite COVID-19, state statute and policy for making face to face contact with all household members be followed when commencing the assessment.

#### Ability to Maintain Best Practice Standard Initial Contact



In addition to state and local standards, additional consideration should be given regarding the current family dynamics due to social distancing and/or stay at home orders.

#### Initial Contact COVID-19 Related



Location of interviews: Conduct interviews outside when possible. Consider confidentiality of the interview when conducting interviews outside the home. Consider whether the home observation can occur via FaceTime or other video call; looking through windows; or does the home allow for maintaining social distancing to do a walk through by the caseworker.

Understanding the dynamics of the home: Are any household members in quarantine? If so, how is the quarantine being managed? Separate room/bathroom; leaving food outside the door; medical care being performed by household members? Can video conferencing be utilized to interview that household member?

#### Initial Contact Additional Considerations



What type/amount of Personal Protective Equipment (PPE) is needed when making contact. Additional information to know prior to making contact: Who to contact if you believe you have been exposed to COVID-19 in the field; What to do if you find out after commencing your initial contact with the family that they have tested positive for COVID-19.

## Caseworker Reference Guide for Pre-Commencement: Planning for Initial Contact

Information assessed during pre-commencement activities should be utilized by the caseworker to identify:

- Location of interviews; **conduct the interviews outside the home when possible**
  - **Confidentiality of the interview when conducting the interviews outside the home;**
  - **Home Observation:**
    - **Looking through windows;**
    - **Parents/Caregivers or other household members doing walk through via Facetime or Facebook Video;**
    - **Does the home allow for maintaining social distancing to do a walk through?**
- **Is more Personal Protective Equipment (PPE) needed prior to making contact.**
  - **Who do I contact if I believe that I have been exposed in the field?**
  - **What do I do if I find out after starting my initial contact with the family that they have COVID-19?**
- **Are any household members in quarantine?**
  - **How is the quarantine being managed in the home? Separate room/bathroom, etc. What does the quarantine procedures look like (food at door, medical care needed that is being performed by household member)**
  - **Can video conference be utilized to interview that household member?**
- Information for reconciliation based upon identified gaps in Intake report and review of case information;
- Information collection to inform overall family dynamics (Six domains of information collection).
- Consideration of coordination with other agencies. If unable to respond with caseworker, are they available via Facetime/conference call or other means?
  - Law enforcement due to caseworker safety concerns; Physical safety concerns due to history of violence, dangerous persons in the home, dangerous locations.
  - Mental health professional due to crisis intervention;
  - Domestic violence advocate;
  - Medical response and/or Child Advocacy Center (CAC).

Best practice is to adhere to interview protocol for information collection. Interviews should be conducted separately, and information utilized from one interview to reconcile information in subsequent interviews.

### Interview Protocol

1. Identified child victim
2. Siblings and other children in the household
3. Non-alleged maltreatment parent/caregiver, including other adult household members
4. Alleged maltreating parent/caregiver

## Guideline VI.

### Supervisory Consultation: Pre-Commencement Initial Family Assessment and Planning

Consultation related to practice and decision-making is one of the most important activities as a supervisor. Supervisory consultation is crucial for assisting caseworkers to gather information, assess threats to child safety and establish sufficient safety plans, when needed. Supervisors also play a key role in increasing job satisfaction, competency, and confidence of caseworkers. This relationship is especially important during the current COVID-19 crises.

#### Review of Intake Report and Case Information



Does the intake report suggest there are health concerns related to COVID-19? Has any household member or frequent visitor tested positive for COVID-19? Has any household member or frequent visitor exhibited symptoms such as shortness of breath, fever, and/or cough? Has any household members or frequent visitors traveled recently, if so, where? Does anyone in the household work in a high exposure job? Healthcare, Grocery or other retail store deemed essential, Food delivery, Shipping/Mail delivery, Police/Fire/EMT, Other exposed fields

Consultation should assist the caseworker in planning the safest way to initiate contact with the family, while adhering to state and local standards

#### Planning for Initial Contact



How does the caseworker plan on contacting family members? What considerations and precautions need to be made due to COVID-19? Preparing a plan should the caseworker be exposed to COVID-19 while in the field.

In the event it is necessary to develop a safety plan, what considerations need to be made due to COVID-19 when thinking of potential safety plan resources?

#### Addressing Caseworker Concerns



Prior to ending the consultation, the supervisor should take the time to check in with the caseworker on how they are feeling. Does the caseworker have any concerns about responding to this report? Concerns for support while in the field? Concerns for exposure to COVID-19? Concerns regarding coordination with other agencies?

## Supervisory Reference Guide for Consultation: Pre-Commencement Initial Family Assessment and Planning

### Review of Intake and Case Information

- What significant gaps in information does the caseworker identify in the Intake report? Does the caseworker believe that the gaps in information may have implications for child safety?
- What does the Intake report reveal to the caseworker about child functioning, parenting practices and parent/caregiver functioning?
- What other information is known about the family and how does the caseworker relate that information to the information in the current Intake report?
- What is the caseworker's assessment of what is being reported with respect to child abuse/maltreatment?
- If an Intake report indicates that a child may be in danger (Present or Impending Danger), does the caseworker clearly understand the basis for that judgment?
- Does the Intake report reveal the immediate, current location(s) of family members?
- Who does the Intake report identify as collateral contacts of information? What information could collateral contacts provide? What collateral contacts should be contacted immediately?
- Does information in the Intake report indicate that caseworker safety may be an issue?
  - **Is there any indication that household members are positive for COVID-19 or have had exposure to COVID-19?**
  - **What PPE does the caseworker need to ensure their safety? How does the caseworker secure these PPEs? Does the caseworker know how to use and dispose of PPE properly?**

### Planning for Initial Contact

- When will the caseworker make initiate contact? Is he or she allowing enough time to make contact within the designated response time?
- What additional information needs to be considered prior to making contact (e.g., access law enforcement report, previous caseworkers assigned to the case, prior history)?
- How does the caseworker plan on contacting family members? In what order will the caseworker conduct the interviews?
- **What considerations and precautions need to be made due to COVID-19?**
- What questions does the caseworker have about collecting information?
- Based on what the Intake report reveals about child functioning, parenting and adult functioning, what key pieces of information must be understood by the conclusion of the assessment? How will the caseworker access that information?
- If the Intake report indicates the potential for Present or Impending Danger, what are the caseworker's thoughts regarding the development of a Safety Plan?
- In the event that it is necessary to develop a Safety Plan, what potential resources might be available to participate in the plan?
  - **What considerations need to be made due to COVID-19 when thinking of potential resources?**
- What is the plan for the caseworker to contact the supervisor in the event that the child is in Present or Impending Danger at the point of initial contact?