GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL Chapter: (9) Eligibility Effective November 2020 Policy Date: Trauma-Informed Removal Title: Policy Previous 9.4 9.4 Number: Policy #:

CODES/REFERENCES

O.C.G.A. §15-11-134 Required Findings Justifying Removal from the Home

O.C.G.A. §15-11-146 Preliminary Protective Hearing; Findings

Title IV-E of the Social Security Act Section 472(a)

Title 45 Code of Federal Regulations (CFR) Part 1356.21 (c), (d), (k) and (l)

REQUIREMENTS

The Division of Family and Children Services (DFCS) shall:

- 1. Ensure that the removal of a child from his/her parent/caregiver is conducted in a manner that minimizes trauma to the child and family.
- 2. Make a child safety determination for every child in the household receiving child welfare services in accordance with policy 19.11 Case Management: Safety Assessment.
- 3. Upon a determination that a child is unsafe due to present danger situations or impending danger safety threats in the home:
 - a. Make reasonable efforts to prevent or eliminate the need for removal and preserve the family in accordance with policy 9.5 Eligibility: Reasonable Efforts.
 NOTE: The child's health and safety must always be the paramount concern in determining reasonable efforts to be made.
 - b. Identify and implement the least restrictive safety plan (in-home or out-of-home safety plan) to control safety threats and ensure child safety (see policies 19.12 Case Management: Safety Plan and Management; 22.01 Use of Voluntary Kinship in Child Protective Services; 22.02 Use of Kinship Caregivers in Foster Care).
- 4. If the safety threat cannot be controlled by any other means:
 - a. Conduct a pre-removal staffing to determine whether foster care placement is the appropriate action to control the safety threats and ensure child safety.
 - b. Convene a Promoting Reasonable Efforts (PRE) Team Consultation prior to seeking removal of a child to review the reasonable efforts made to prevent removal. (See Practice Guidance: PRE Team Consultation for details and exceptions to this process).
 - c. Verify that removal is necessary to control the safety threats.
- 5. Follow legal procedures for removal by ensuring that a child's removal from the home occurs pursuant to:
 - a. A voluntary placement agreement (VPA) entered into by a parent or relative which leads to a physical or constructive removal (i.e., a non-physical or constructive removal of custody) of the child from the home) see policy 10.2 Foster Care: Placement of a Child via Voluntary Placement Agreement or;
 - b. A judicial order permitting a physical or constructive removal of the child from a parent or specified relative.

NOTE: A removal has not occurred in situations where legal custody is removed from the parent or relative and the child remains with the same relative in that home under supervision by the state/tribal agency.

- 6. Consider a child constructively removed on the date of:
 - a. The first judicial order removing custody, even temporarily, from the appropriate specified relative; or
 - b. The signing of the voluntary placement agreement by all relevant parties.
- 7. Ensure the removal and foster care placement of a child is in accordance with a judicial determination to the effect that continuation of residence in the home from which removed would be contrary to the welfare or that the placement would be in the best interest of the child and that reasonable efforts to maintain the family unit were made (see policy 9.5 Eligibility: Reasonable Efforts).
 - a. The contrary to the welfare determination will be made in the first ruling that sanctions (even temporarily) the removal of the child from the home.
 - b. If the determination regarding contrary to the welfare is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E foster care maintenance payments for the duration of that stay in foster care.
- 8. Verify that the judicial determination regarding contrary to the welfare is explicitly documented and made on a case-by-case basis in the court order. If the contrary to the welfare judicial determination is not included as required in the court orders, a transcript of the court proceedings is the only other documentation accepted to verify that the required determination has been made. Neither affidavits nunc pro tunc (or amended) orders will be accepted as verification in support of contrary to the welfare judicial determinations.
- 9. Acknowledge that court orders that reference state law to substantiate judicial determinations are not acceptable, even if the law provides that a removal must be based on a judicial determination that remaining in the home would be contrary to the welfare or that removal can only be ordered after reasonable efforts have been made.
- 10. Document all reasonable efforts to prevent removal, uncontrolled safety threats that cannot be mitigated and therefore supports the need to remove the child and all related activities in Georgia SHINES within 72 hours of completion.

PROCEDURES

The Social Services Case Manager (SSCM) will:

- Review a child and family's trauma and child protective services history when gathering information to determine family needs, child safety and well-being (see policies 19.9 Case Management: Safety Screening, and 19.10 Case Management: Analyzing DFCS History and Practice Guidance: How Trauma History Should be Used to Influence Removal Process)
- Make reasonable efforts to prevent removal by offering appropriate services to address the specific safety threat in accordance with policy 9.5 Eligibility: Reasonable Efforts; 19.17 Case Management: Service Provision)
- 3. Implement an in-home or out-of-home safety plan to reasonably ensure child safety by managing safety threats in accordance with policy 19.12 Case Management: Safety Plan and Management.
- 4. Engage supportive family members and any service providers, when authorized by properly executed release of information, prior to the removal to discuss the needs of

the child and family, the family dynamics, and the present situation.

- 5. When reasonable efforts to prevent removal have been exhausted, initiate a preremoval staffing with the Social Services Supervisor (SSS) (see Practice Guidance Pre-Removal Staffing)
- 6. When the pre-removal staffing determines that removal is necessary, initiate the PRE Team Staffing (see Practice Guidance PRE Team Consultation). **NOTE:** In emergency situations where a child must be removed for their immediate protection, the PRE Team Consultation may occur after the removal. Removals conducted by the SSCM should always be staffed with county supervisory staff.
- 7. Initiate court action to obtain proper legal authority for removal (see policy 17.3 Legal: Court Orders and Placement Authority).
- 8. Coordinate with law enforcement when assistance is necessary to maintain a safe and controlled environment during removal (see Practice Guidance: Trauma Informed Removals with Law Enforcement).
- 9. To avoid or reduce trauma, prior to removal:
 - a. Explain to the parent/caregiver the specific safety threat that has led to the decision to remove the child from the home to ensure the safety of the child(ren).
 - b. Provide the child and parent/caregiver with full disclosure of the foster care process.
 - c. Discuss the court process, court hearings, and permanency planning.
 - d. Make specific plans with the family to eliminate surprise in the removal process when possible.
 - i. Discuss the plan for removal with the parent/caregiver and encourage them to explain the upcoming removal to their child and other family members.
 - ii. Seek assistance from family members and/or service providers to support the child and parents/caregivers during a removal when it is safe and appropriate to do so.

NOTE: Adhere to rules of confidentiality (See policy 2.6 Information Management: Confidentiality/Safeguarding Information)

- iii. Plan the removal for a time that is least disruptive to the child (i.e. not when the child is asleep for the night or in school).
- e. Anticipate and allow the parents/caregivers to experience and express emotions safely.
- f. Create a supportive environment throughout the removal and placement process by allowing the family to incorporate family member supports and service providers when appropriate.

NOTE: Service providers, especially trauma informed clinicians, if in place, may be called upon to assist in addressing child and family thoughts and feelings as they process the removal.

- g. Encourage the parents/caregiver to have open and supportive discussions with their child about the child's feelings of anger, grief, or fear about being removed from their care.
- h. Obtain comprehensive personal information about the child from the parents/caregivers (Including: school history, medical conditions, allergies, medications, known behavior and emotional issues, preference for a special toys or object, food preferences and dislikes, sleep patterns/rituals, fears, special likes, religious preferences, clothing preferences/needs, activities, sports, hobbies, and special interests) (see policy 10.1 Foster Care: Placement of a Child).

- 10. To avoid or reduce trauma to parents/caregivers during removal inform the parent/caregiver:
 - a. Of the specific real-time action being taken (i.e. the emergency or planned removal of the child pursuant to state law) and the reason.
 - b. That a court hearing will be held within 72 hours of the removal where they have the right to be represented by an attorney at the hearing on the removal decision.
 NOTE: When the caregiver is not present at removal, notify them as soon as possible when the child has been placed in protective custody. Face to face notice should be made if possible.
 - c. That parent-child visitation will occur on a regular basis and a face-to-face visit will occur within seven calendar days unless there are court-ordered restrictions (see policy 10.19 Foster Care: Visitation)
 - d. Of their right to jointly develop a written case plan in collaboration with their children, service providers and family supports with specific tasks to address the issues the family is struggling with that caused their child to enter foster care and identify what behavior changes need to occur or the necessary skills a family must demonstrate to ensure child safety (see policy 10.23 Foster Care: Case Planning)
- 11. To avoid or reduce trauma to the child(ren) during removal:
 - a. Explain to each child what is happening and why they are leaving the home in clear developmentally appropriate language without accusing or degrading the parents/caregivers.
 - b. Let them know that the circumstances are not their fault but for their safety and protection.
 - c. Inform them that DFCS staff is there to help the family.
 - d. Maintain visual contact with the child(ren) throughout the removal process and during the request for legal authority to remove a child if parental flight or youth absconding is a concern.
 - e. Explain foster care and court procedures in a developmentally appropriate manner. Include the following information in explanation:
 - i. The reason for removal, specifically that there is a lack of safety in their current home environment and why foster care is appropriate.
 - ii. How long they will be in foster care (i.e. until the judge determines that their home is safe enough for their return)
 - iii. Where and with whom they will be living.
 - f. Reassure the child that visitation with their parent/caregiver and siblings (if not placed together) will occur on a regular basis and a face-to-face visit will occur within seven calendar days unless there are court-ordered restrictions (policy 10.19 Foster Care: Visitation)
 - g. Validate the child's feelings. Let them know that it is normal to feel scared, confused, and worried.
 - h. Ask the child if there is anything they need or want. Discuss their feelings about removal and other issues she/he wishes to discuss.
 - i. Ask the child about any relatives or fictive kin that they may want to visit or live with (See policy 19.20 Case Management: Diligent Search).
 - j. Ask the parents/caregivers for items the child can take with them including: copies of some family photos, additional clothing, toys, special comfort items (i.e. stuffed animal or blanket)

NOTE: Special equipment for the medically fragile child and any prescribed

medications should also be gathered during the removal.

- k. Make every effort to use the same SSCM for both the removal and placement processes.
- 12. Between removal and placement:
 - a. If the child does not already know you, introduce yourself to the child.
 - b. Ensure the child has had food and drink and has taken necessary medication. **NOTE:** Ensure infants have been fed and have a clean diaper.
 - c. Reiterate to the child that they have done nothing wrong.
 - d. Ensure the child understands that you are taking them to a safe placement (i.e. and not to jail or another place they might imagine).
- 13. Review the first order signed by a judge which sanctions the removal of the child from the home to determine if the appropriate judicial finding of "contrary to the welfare" or "best interest of the child" is made.
- 14. Verify the court order includes child specific details which led to the sanctioning of the removal by the judge.
- 15. Document the following on the Legal Action and Outcome Detail page in Georgia SHINES:
 - a. Date Field: The date of the complaint/petition
 - b. Court action date;
 - c. Action: Type of placement authority;
 - d. Hearing type/court order;
 - e. Date shelter care authorized;
 - f. Court order date.

NOTE: Nunc pro tunc (or amended orders) must be carefully reviewed to ensure that only the judge's signature and not the finding is dated back to the actual hearing date.

- 16. Upload all court orders in External Documentation in Georgia SHINES, if not uploaded by the Case Plan Reporting System (CPRS) within 72 hours of receipt.
- 17. Notify the Revenue Maximization (RevMax) Unit via the Notification of Change (NOC) in Georgia SHINES of the uploaded court orders.

The Social Services Supervisor (SSS) will:

- 1. Ask the SSCM about historical trauma experienced by the child or family, specific trauma from recent incidents, and currently identified safety threats to facilitate a greater understanding of the family's needs.
- 2. Facilitate a trauma-informed culture where the SSCM considers a family's complex trauma history before every communication or interaction with a family.
- 3. Conduct pre-removal staffings with the SSCM in order to analyze the reasonable efforts implemented to prevent removal, to ensure solicitation of proper legal authority to execute removal, and to provide guidance to the SSCM about taking steps to reduce or eliminate trauma during the removal.
- 4. Participate in the PRE team consultations.
- 5. Review court orders for appropriate judicial determinations and language.
- 6. Ensure the SSCM documents removal information and uploads corresponding orders timely.
- 7. Consider the well-being of the SSCM after critical events, such as removals involving child deaths, discuss common reactions for staff to self-monitor, provide an opportunity for the SSCM to deal with difficult emotions, and develop a plan for addressing

difficulties that may arise.

8. Provide ongoing check-ins with SSCM staff and provide strategies for stress reduction.

PRACTICE GUIDANCE

What is Trauma?

In general, trauma can be defined as a psychological, emotional response to an event or an experience that is deeply distressing or disturbing. When loosely applied, this trauma definition can refer to something upsetting, such as being involved in an accident, having an illness or injury, losing a loved one, or going through a divorce. However, it can also encompass the far extreme and include experiences that are severely damaging, such as rape or torture. Because trauma reactions fall across a wide spectrum, psychologists have developed categories to differentiate between types of trauma. Among them are complex trauma, post-traumatic stress disorder (PTSD), and developmental trauma disorder.

Trauma and the Brain

The trauma of negative early experiences called adverse childhood experiences (ACEs) can affect brain development and brain functioning including cognition, emotional regulation, planning, maintaining personal hygiene, verbal processing, and goal setting. Removal from the care of one's family is a highly stressful event. ACEs typically cause high levels of stress. Frequent and prolonged exposure to toxic stress can alter how the brain develops. Loss of familiar surroundings through removal may stimulate a fight or flight response in children, triggering the flood of the hormone cortisol in their systems. Long-term elevation of cortisol levels can change brain structure and development impacting how the brain functions. A child's initial placement into foster care brings about change the magnitude of which can cause detrimental effects on neurological functioning. Normalizing trauma informed practices throughout child welfare investigations, removal, and placement can support child and family well-being while minimizing any new traumas to both the child and caregivers.

How is Removal Traumatic?

At times it becomes necessary to remove a child from his/her home in order to keep them safe. While removals may be necessary to secure physical safety, they often leave the child feeling psychologically unsafe and can deepen the emotional scars a child may already have due to abuse or neglect. The child welfare system is charged with protecting the well-being of children and must take great care not to expose abused and neglected children to additional trauma. The investigative process is often a very stressful period for the child and family. It can be particularly stressful if the child welfare investigator uses an approach that causes memories of past trauma and physiological reactions to past trauma to surface. A child who feels psychologically and emotionally unsafe during the investigative process can experience the investigator's actions as traumatic. Also, the family can be further impaired by the investigator's approach if it is insensitive or overly authoritative. Implementing trauma-informed techniques may increase accuracy of the information gathered and enhance engagement of all parties. The main goal should be to avoid new trauma caused by the removal and placement process. Addressing the issue of trauma is particularly critical during the investigation process, as it sets the stage for the family's future interactions with the child welfare system.

How Trauma History Should be Used to Influence Removal Process

Reducing trauma in removal should not be limited in focus to children only. Birth parents/caregivers experience trauma during the separation similar to their children. Although the adult brain is more developed than the brain of a child in ability to think logically, emotions brought about by state intervention and ultimately child removal can overwhelm logical and rationale thought.

Many parents/caregivers involved in the child welfare system have experienced complex trauma. Some have been exposed to dangerous, life-threatening events that have had a great impact on their lives. Frequently disclosed traumatic events include witnessing or experiencing sexual abuse, family violence, emotional abuse, or violence in the community. Common physiological responses to trauma are rapid heartrate, tense muscles, and shallow breathing. Sometimes people feel "jumpy" or "on guard" and have trouble concentrating or sleeping. Some people experience nightmares, memories, or flashbacks. Anything can trigger thoughts of prior trauma. Oftentimes, people avoid things or people that remind them of the trauma. When parents have lived through trauma, they may struggle with reminders of their traumatic experiences causing them to have physical reactions, emotional over-reactions, avoidance, and exhibit coping behaviors through use of drugs and alcohol. A history of trauma may make it hard for a parent/caregiver to: (1) recognize what is safe and unsafe; (2) stay in control of their emotions especially in CPS interviews or court hearings; (3) deal with stress in healthy ways; and (4) trust other people.

Having a child removed from the home and experiencing DFCS intervention are traumatic events. When planning to remove a child from a parent with a known trauma history, special care should be taken to reduce or eliminate trauma during the removal. In advance of the removal, Case Managers can discuss with the parent/caregiver their past trauma, their thoughts and feelings, their known or suspected triggers, what helps them feel safe and relaxed, and any professional service provision they are receiving. The SSCM should then use the information related to a parent/caregiver's trauma history, to make efforts to remove the surprise, chaos, and confusion of a removal that may trigger physiological or emotional reactions in a parent/caregiver. Consideration should be given to the abrupt change of circumstances associated with removal that can cause various reaction in parents who may feel persecuted and without control. Providing information, understanding triggers, and maintaining a calm and respectful approach can assist the parent in managing the stress of a removal episode in spite of prior trauma.

When a parent/caregiver has been under the care of specific service providers for mental health treatment, alcohol/substance abuse treatment, or domestic violence, efforts should be made to involve the service provider in the preparation for removal and during the removal. The pre-existing knowledge of the parent/caregiver's service needs and trauma histories may play a critical role in minimizing trauma for the entire family during removal.

Stages of Grief for Birth Parents

Most notably parent's experience various grief stages:

1. Shock: Parents are in disbelief that their child is gone. Behaviors may include shaking, screaming, crying.

- 2. Protest: Parents may feel sadness or anger. They may be angry at everyone. It may be easier to blame others for the situation rather than to accept responsibility. This could be a way of coping with despair and depression.
- 3. Adjustment: This occurs sooner if the parents have allies. They do not worry about their children's safety or loyalty if trust in the substitute caregiver has been developed. The child becomes the focus of the team.

Factors that Make Removal Traumatic for Children

- 1. Surprise, shock, chaos
- 2. Negative view of police and DFCS
- 3. Repeated interviewing
- 4. Loss of control, sense of being kidnapped, powerlessness, helplessness
- 5. Betrayal, loss of trust
- 6. Confusion, lack of understanding as to why removal is occurring
- 7. No effective communication as to what is occurring- lack of information
- 8. Feelings of responsibility for removal, guilt or failure
- 9. Parent or caregiver reaction to removal (crying, screaming, raised voices, police involvement)
- 10. Fear of the unknown
- 11. Multiple handoffs between various social services staff during the time between removal and placement in foster home.

Factors that Make Initial Out-of-Home Placement Traumatic for Children

- 1. Loss of pets, friends, possessions, and routines.
- 2. Delays (visitation, clothing, school enrollment)
- 3. Change in school
- 4. New living space
- 5. Loss of family, community, activities, culture/language
- 6. New caregiver
- 7. Attachment disruption
- 8. Separation grief and loss
- 9. Worry about parents and other siblings
- 10. Feeling confused and conflicted. Where does their loyalty lie? New family/Old family dilemma.

Trauma Informed Guidance for Family Preservation Social Services Case Manager and Investigators

- 1. Plan ahead as much as possible for investigations and possible removals.
 - a. Reduce the element of surprise.
 - b. Let the family know an assessment is occurring and removal of a child is possible.
 - c. Work with the family to identify relatives and fictive kin during the assessment who can serve as placement resources.
 - d. Collaborate with law enforcement in advance, when necessary, to determine the best way to enter a home and take custody of a child that will reduce trauma to both child and family.

- 2. Do all you can to keep the scene calm and divert an angry parent or caregiver out of the child's presence, when possible.
- 3. Engage the parent in helping the child. Ask the parent or caregiver to reassure the child that he/she is safe and the investigators are here to help the child.
- 4. Seek to talk with the child in a safe and secure setting, even if within a home under investigation.
- 5. Explain in age-appropriate ways what is going on, answer the child's questions, ask what he/she is concerned about, and ask the child what makes him/her feel safe.
 - a. Assure them that the removal is not their fault.
 - b. Assure them they are safe and will be cared for.
 - c. Assure them that their siblings, if separated, are safe and will be cared for.
 - d. Don't make promises you cannot keep.
- 6. Shield the child immediately from any crime scene where a body, seriously injured person or pet, or overt signs of violent death or injury are present.
- 7. Focus the child on the familiar: school, pets, friends, safe relatives, etc.
- 8. Provide sensory comfort, familiarity, and help with settling into a new living space.

Trauma Informed Guidance for Family Preservation Social Services Case Manager and Investigators and when interacting with Adult Caregivers

- 1. Treat the parent or caregiver with respect and use a calm tone of communication even when confronted with aggression and hostility.
- 2. Trauma victims often lose power during traumatic events and may meet loss of power with aggression or superficial compliance
- 3. Stress can cause traumatic response and highly emotional, less than rationale, thoughts and actions.
- 4. SSCM should give parent as much control over the environment as practical during the investigation to defuse some of the trauma-driven patterns.
- 5. SSCM should provide full disclosure prior to and during removal to inform caregivers why their children are being removed. They should use a high level of specificity to describe the safety threat that needs to be resolved.
- 6. The SSCM should explain the conditions for return, what must occur for the children to be returned.
- 7. At the time of removal, reassure all household members that visitation with the child being removed from the home will occur on a regular basis and that arrangements will be made to schedule a face-to-face visit within seven calendar days unless there are court-ordered restrictions (policy 10.19 Foster Care: Visitation)
- 8. Information should be provided to the parent explaining that foster care is a support to them to help increase their protective capacity and achieve safe and timely reunification.

Citation: The Chadwick Trauma Informed Systems Project (2012) Creating Trauma Informed Child Welfare Systems: A Guide to Administrators (1st Ed.) San Diego, CA: Chadwick Center for Children and Families and Reducing the Trauma of Investigation, Removal, and Initial Outof-Home Placement Project (2009), Portland State University, Center for Improvement of Child and Family Services.

Pre- Removal Staffing

The community has recognized that children have a right to be safe from harm. DFCS is vested with the responsibility of providing child protective services to the community. At times,

prevention and intervention services are effectively used to preserve a family unit. In other circumstances, a decision to remove a child must be made if the safety threat to a child cannot be eliminated or mitigated to allow a child to remain safely in a home. The decision to remove a child should be made with careful consideration. Removal is essentially depriving a parent of the custody and control of their child. The state acts under the authority of child protection to intervene in the private lives of its constituents. Therefore, as constitutional rights are at stake, careful consideration should be given to the circumstances of each specific family. The decision to remove a child from his or her home is multi-faceted and complex. Caregiver protective capacity is evaluated against the child's vulnerabilities. Consideration is given to temporary alternatives to foster care placements to reduce the trauma experienced by the child and family. The health and safety of the child is the paramount concern. To facilitate the decision-making process, DFCS uses the team approach of the pre-removal staffing at the county level to determine the necessity of removing a child from their caregiver. The goal is to take decisive and appropriate action only when a child needs protection. Before any removal decision can be made a SSCM must staff the case with their supervisor. The stage progression of the pre-removal staffing allows the involvement of other child welfare stakeholders and professionals to formulate the best decision given the factual circumstance. Those that may be involved in the various stages of the pre-removal staffing include:

- 1. Stage 1: The SSCM, SSS,
- 2. Stage 2: The SSCM, SSS, Social Services Administrator (SSA), and/or County Director
- 3. Stage 3: The SSCM, SSS, SSA, and/or County Director, and a Collaborative Team
- 4. Stage 4: The SSCM, SSS, SSA, and/or County Director, SAAG, and 2-3 additional stakeholders (i.e. parents, relatives, community service providers, faith partners, etc.)
- 5. Stage 5: The SSCM, SSS, SSA, and/or County Director, SAAG, parents, relatives, fictive kin, children (if age appropriate), community service providers, faith partners, additional DFCS staff from various levels and program areas (including CPS, Foster Care, Resource Development, and OFI), and a facilitator.

Determine under the guidance of supervisory staff if a family's safety issue meets Georgia safety threat criteria (See Georgia Safety Threats). Use the pre-removal staffing questionnaire if not in emergency situation. The child's current imminent risk should be evaluated by identifying the presence of a safety threat, the child's vulnerability to those threats, and the caregiver's protective capacity to protect the child from those threats.

The SSCM should staff any case with the guidance of their SSS, SSA, County Director, Special Assistant Attorney General (SSAG) and/or other stakeholders, if appropriate, prior to making a removal decision. The discussion should at a minimum include:

- 1. Reasonable Efforts as alternatives to placement
- 2. Legal Authority for removal and placement
- 3. Family Engagement
- 4. Strategy and options for intervention (i.e. whether a team response is necessary to conduct the removal)
- 5. Whether to seek police assistance when conducting the removal
- 6. How to protect the child and minimize trauma when initiating the actual removal from the home.

Promoting Reasonable Efforts (PRE) Team Consultation

The PRE Team Consultation is a formalized decision-making meeting held before a child's removal occurs led by a skilled internal facilitator who has a Masters of Social Work (MSW)

and at least two years of case work experience. The primary objective of the PRE Team is to promote and ensure reasonable efforts are made prior to seeking agency custody in cases involving a potential removal.¹ The meeting follows any internal county level pre-removal staffing where it is determined that a child should come into DFCS custody. The PRE Team consultation is conducted to review reasonable efforts, explore alternatives to foster care, and consider kinship options available to reduce the trauma of removal if it is determined to be necessary. The PRE Team staffs the case and determines if removal is necessary. Once a consensus is met, the recommendations of the PRE Team are issued and if removal is recommended the county proceeds with seeking a shelter care order for removal. If the PRE Team consultation recommends the child remain in the home, the county initiates safety intervention services and family preservation services with continued assessment.

The PRE Team is staffed with SAAGS, internal partners from Regional and/or State-level offices and external partners including representatives from the Office of Child Advocate. PRE Team participants review case intake information, family functioning and vulnerabilities, child safety and vulnerabilities, parental protective capacities, the reasonable efforts implemented to keep a child safe now, identifies the conditions for return, and ultimately determines whether removal is warranted to protect the child from the identified safety threat.

"Contrary to the Welfare" Determination

The "contrary to the welfare" determination is a long-standing protection afforded to children and their families that recognizes the severity of removing a child, even temporarily, from the home. Judicial oversight is intended to prevent state agencies from acting too quickly and removing children unnecessarily.

The first court order language criterion to establish IV-E eligibility is the judicial determination that continuation in the home is "contrary to the welfare" of the child or that placement would be "in the best interest" of the child. The contrary to the welfare determination must be in the first ruling that sanctions the removal of the child from the home. If the contrary to the welfare determination is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E foster care maintenance payments for the duration of that stay in foster care. The finding should be explicitly documented in the court order and based on individual circumstances/facts of the case that led the judge to conclude the finding. The order must enumerate the specific facts of the case or reference the facts contained in such documents as the complaint, court report, Affidavit of Efforts, etc.

Types of Removal

When DFCS obtains custody, there must be a "removal" for a child to be IV-E eligible. The two types of removals are:

- 1. Physical removal, which occurs when the agency has physically removed the child from their current living arrangement.
- 2. Constructive removal, which is considered a "paper" removal. In a constructive removal, the state/tribal agency has obtained legal custody and supervision of the child but did not physically remove the child from their parent, guardian or legal custodian as the

¹ This process is currently only used in situations when children enter care between the hours of 7 a.m. to 7 p.m. If children enter care after hours or directly from order of the juvenile court judge or law enforcement action, then post PRE Team consultations are held with the purpose of reviewing reasonable efforts made and to strengthen the removal decision.

child was living with an interim caregiver at the time of removal. A child is considered constructively removed on the date of the first judicial order removing custody from the appropriate specified relative or the date that the voluntary placement agreement is signed by all relevant parties.

Preparation and Planning for a Trauma-Informed Removal

- 1. Gather as much information as possible related to the family dynamics and trauma history prior to removal.
- 2. Involving supportive family members/kin and service providers in the execution of a removal can lessen the trauma for both child and caregivers. When on the scene at time of removal, these individuals can show their willingness to be placement or visitation options. They can support the parent in managing grief. They can comfort the child and bring calm to the entire situation. It is best to involve relatives and fictive kin early on in the planning for removal.
- 3. Pre-planning efforts should be made to alert law enforcement when a family is considered a flight risk or violence is anticipated.
- 4. Request that you be accompanied by coworkers to assist in supervising the children and/or managing the environment during removal.
- 5. To lessen trauma to children removed from their caregivers, the provision of a small snack or drink can be calming and comforting. Having certain necessities on hand is also helpful. Similarly, if an infant is removed, having diapers and wipes on hand can help the removal transition go more smoothly.

To ensure a smooth removal, preparation is an invaluable tool to reduce trauma. The primary way to reduce trauma in removal is to minimize the factors that make removal traumatic. (See above Factors That Make Removal Traumatic for Children). When DFCS staff communicates with caregivers and children to eliminate surprise, confusion, and betrayal of trust trauma is minimized. Communication allows appropriate information to be shared with a child in a manner which they can understand. Then children can avoid the burden of guilt and responsibility that often accompanies removal and placement in foster care. When parents are informed and willing to serve as supports to their children, they can manage their own emotions and reactions in such a way that is beneficial to the child during the removal process. The parent is empowered during this process and does not feel like all of the elements of removal are out of their control.

Techniques to Handle Hostile or Angry Situations

- 1. Remain calm. Try not to show fear or anxiety.
- 2. Be firm without raising your voice.
- 3. Make statements simple and direct.
- 4. Recognize and address feelings and do not take hostile statements personally.
- 5. Offer the person a choice between positive alternatives.
- 6. Be alert for the possibility of aggression.
- 7. Attempt to have the person sit down and distract him or her from the source of anger.
- 8. Give the person lots of space. Do not touch them.
- 9. Remember it takes 30 to 40 minutes for a person to calm down physiologically.
- 10. After exiting the home, do not sit out front to write notes.
- 11. Carry a cell phone, and use it if appropriate.

12. Pay attention to gut instinct or intuition and use it if appropriate.

(Citation: Child Protective Services: A Guide for Caseworkers, DePanfilis and Salus, 2003, U.S. Department of Health and Human Services, Administration of Children and Families, Administration on Children, Youth, and Families, Children's Bureau, Office on Child Abuse and Neglect.)

Removing Children from School

As a general rule, children and youth should not be removed while in school. In certain limited instances, removal at school may be the safest and least traumatic means of removal. Some of those circumstances include:

- In physical abuse situations, when the parent, legal guardian, or legal custodian is a threat to the safety of the child, and confrontation between the caregiver and child or with the case manager is likely to bring about physical injury to the child, or, in domestic violence situations, physical injury to the non-maltreating parent/caregiver, and the police are either unable or unwilling to assist with the removal;
- 2. In emotional and/or child sexual abuse situations, when confrontation between the caregiver and the child is likely to cause severe, unusual, and potentially irreversible emotional harm or psychological damage to the child; or
- 3. When the strategy of removing the child from the home is likely to make the child vulnerable to an attempt by the caregiver to take physical custody and flee with the child, or hold the child hostage, and the local law enforcement agency is unable, unavailable, or unwilling to assist with the removal.

Trauma Informed Removals with Law Enforcement

The role of police in removals is categorically public safety. Just as with CPS investigators, the methods used by police can work to establish calm in the face of confusion and chaos, reducing the potential for additional trauma. Each county throughout the state has had the opportunity to jointly develop a Child Abuse Protocol with their local law enforcement. This document is created to establish a protocol for the investigation and prosecution of alleged cases of child abuse. These protocols establish local procedures for early and continued communication with law enforcement and help avoid separate and parallel investigations.

Case Managers are not law enforcement. SSCMs should communicate to child(ren) that they are not law enforcement. SSCMs should make every effort to remove children before an arrest is made. If a removal cannot be accomplished without endangering the SSCM, law enforcement should be contacted immediately. In that emergency situation, law enforcement would execute the removal.

Trust Based Relational Interference (TBRI)

Children who have been victims of abuse or neglect have often experienced complex developmental trauma. Often the trauma experienced by children in foster care is relationshipbased and can only be addressed in the stable relationships offered by nurturing caregivers. TBRI[®] is a therapeutic model, developed at Texas Christian University Institute of Child Development, that trains caregivers to provide effective support and treatment for at-risk children. Studies have shown that children in the American foster care system experience trauma at twice the rate of combat veterans. As we learn more about trauma and its effect on behavioral outcomes agencies, caregivers, and service providers can better learn how to meet the individualized needs of this vulnerable population. TBRI[®] is an attachment-based, traumainformed intervention that is designed to meet the complex needs of vulnerable children. TBRI[®] uses Empowering Principles to address physical needs, Connecting Principles for attachment needs, and Correcting Principles to disarm fear-based behaviors. While the intervention is based on years of attachment, sensory processing, and neuroscience research, the heartbeat of TBRI[®] is connection.

Connecting and Empowering – When Removing a Child from their Home

<u>Correcting Principles</u>- Attention to behavioral needs while teaching children to be selfmanagers

- 1. Encouraging the Positive
- 2. Script practice
- 3. Role rehearsal
- 4. Relaxation practices
- 5. Compliance Games
- 6. "Checking Engines" (emotional regulation/self-check)

<u>Connecting Principles-</u> Attention to attachment needs - Building trust and meeting relational needs

- 1. Nurturing interaction
- 2. Active Listening
- 3. Affectionate activities (reading, snuggling, talking, walks, crafts)
- 4. Family time
- 5. Playful engagement with child
- 6. Healthy eye contact with the child
- 7. Body Position
- 8. Voice and Inflection
- 9. Mirroring (Examples include: If a child is sitting, staff should also sit. If a child is playing on the floor, the staff should also get down on the floor and play while talking about important topics)
- 10. Getting on the child's level is a helpful strategy. Towering over a child can be very intimidating and cause fear. Kneeling, sitting, or stooping down are simple ways staff can talk to children who are smaller than the case manager.
- 11. Use a calm voice and tone to promote safety and decrease toxic stress (Toxic Stress Animate- <u>https://youtu.be/LTcFTpGve4g</u>)
- 12. Playful engagement- when possible and appropriate use play to engage with a child to disarm the fear response in the brain. This can be through a game but can also be in the way one talks to a child playfully.

<u>Empowering-</u>Attention to physical needs. Ecological empowerment supports more primitive systems so that the child can function at a higher cognitive and emotional levels.

- 1. Give the child some choice as often as possible
 - a. Examples include:
 - i. Do you want the red duffle bag or the green one?
 - ii. We are going to go to a new family. Do you want me to walk with you to tour the home or do you want to go with the foster parent to tour the home?
 - iii. Choices and frequency (i.e. every two hours) in food or a snack as well gives a child voice and increases "felt safety"

- 2. Provide predictability by telling a child what is happening and what is going to happen next to prepare them for the transition.
 - a. Give a child a calendar and explain when visits will occur next, both with CM and with birth parents/caregivers, so that they can structure their week and know what to prepare for.
 - b. Give the child a tour of the new home/placement to include where the bathrooms are, bedrooms, kitchen and where the parents sleep and what to expect as far as family routine.
- 3. Be aware of any sensory needs of the child that can be observed- are they sensitive to sound, bright lights, loud noises? Do they seek touch or avoid it? Picking up on early signs of sensory sensitivities can reduce the trauma a child experiences. If a child is sensory avoidant then it will be important to get the child to a quiet place with limited stimuli to help sooth them during a removal. If a child is a sensory seeker then being in a room with lots of toys and activity can be comforting to them.
- 4. Provide consistent rituals and routines (i.e. the morning and bedtime rituals)

Physiological Empowerment

- 1. Nutrition (Blood glucose levels)- ensure a healthy snack is available and if possible have choices a child can make between snacks.
- 2. Hydration- have bottled water available.

Citations:

Purvis, K. B., Cross, D. R., Dansereau, D. F., & Parris, S. R. (2013). Trust-based relational intervention (TBRI): A systemic approach to complex developmental trauma. *Child & Youth Services*, *34*(4), 360-386.

Purvis, K. B., Cross, D. R., & Pennings, J. S. (2009). Trust-Based Relational Intervention™: Interactive principles for adopted children with special social-emotional needs. *The Journal of Humanistic Counseling, Education and Development, 48*(1), 3-22.

Case Manager Well-being (Secondary Trauma)

Secondary trauma, also called secondary traumatic stress or vicarious trauma, can occur when a professional experiences stress or symptoms of trauma when working with children and families who are experiencing abuse, neglect, or family violence. For child welfare staff, secondary trauma normally occurs when a case manager hears about the firsthand trauma experiences of another person. Hearing about the trauma experiences of a child and family are an unavoidable part of the child welfare job. Oftentimes child welfare staff may also be subject to primary trauma as they enter live crisis situations in order to investigate the safety of children. As a result, case managers can develop their own traumatic symptoms and reactions to triggers. Exposure to the events in a family's life is inevitable and may lead to feelings of helplessness, reduced perspective and critical thinking skills, adoption of a negative world view, and difficulty recognizing and monitoring their emotions and reactivity. Repeated exposure to potentially traumatic events may remind a case manager of past cases causing them to over- or under-react to hazards to themselves or clients. While the likelihood of experiencing occupational traumatic stress is high, researchers offer recommendations to promote resilience and reduce the secondary trauma experienced by child welfare staff.

Encouraging and elevating positive feelings associated with serving others can serve as a protective factor for secondary trauma. Adoption of practices of self-care is one way an individual can manage their own stress. Organizational climate can also protect staff from the negative impact of secondary trauma. When child welfare staff feel physically safe, well-trained, and competent to meet expectations, secondary trauma can be mitigated or avoided altogether.

FORMS AND TOOLS

Georgia Safety Threats Pre-Removal Staffing Questionnaire PRE Team Consultation Form PRE Team Process Flow