

Ensuring Safety, Permanency and Well-Being: Suggestions for Conducting Contacts with Children and Caregivers

Early Adolescence (10–12 years old)

Reviewing Safety Concerns with Caregivers

- Who provides supervision for this child when you are not home? How do you know this person? How old is this person? Is there a way for this child to reach you when you are away from home?
- How did this child get to and from school?
- Did you know where the child was when s/he was not at school and was away from home? What are your rules for your child when not s/he is not at school or home? Is there a way for the child to reach you when s/he is away from home?
- Does the child know your address and phone number?
- What have you told your child to do if a stranger talks to him/her on the street?
- Can you show me the family's list of phone numbers for your doctor, local hospital, police department, fire department, poison control center and a friend or neighbor near the phone?
- What is the emergency plan for your family in case of fire? Does this child know where smoke alarms and carbon monoxide alarms are located in your home?
- If the worst case situation were to occur and this child was in danger of being abused again, does this child know what to do? Is there someone besides you available 24/7 the child can call for help?
- Did this child have any serious injuries, either before or since coming into your care? How did you handle them? How is this condition being handled since foster care placement? How will you handle this condition when the child returns home?
- Have you noticed any physical or emotional changes in this child? As the child is becoming a teenager, are there changes in his/her behaviors? How has that changed your relationship with this child? Has it changed how you discipline this child or the rules you have for this child?

- Does this child have any chronic health conditions? Do you have the necessary medications, medical equipment, and medical staff support to adequately deal with this condition? How do you handle this condition?
- Do you have a First Aid Kit in your home? Does this child know where it is and how to use it?
- How do you get the child to wear safety gear, including a helmet, for activities such as cycling, in-line skating, skateboarding or riding a scooter?
- What are your rules for the child when s/he is with friends or alone?
- Do you know the child's friends? What are the names and phone numbers of the parents of the child's friends?
- Does the child have any problems or issues about safety at school? (Friends, other students, bus rides, following rules, etc.)

Safety suggestions are NOT requirements for birth parents.

Reviewing Safety Concerns with Early Adolescents

- Who takes care of you when your family is not at home? How do you feel about staying with this person? Do you know how to reach your parent when s/he is away from home?
- What is your safety plan if your parent or someone else tries to harm you or is just getting out of control? Who can you call if something happens in the middle of the night? What are your fears? (Specific questions related to the type of maltreatment the child experienced should be included. Example: When you see your mother's red flags that she might be thinking about taking drugs, what is your plan for safety?) Would you be able to make that call? (Do you know the phone number, have access to a phone, etc.?)
- Do you know what to do in case of an emergency, like a fire? Can you tell me what you would do?
- Do you know where the First Aid Kit is kept? Do you know how to use the different items in it?
- Are you ever left alone without any adults around? What is this like for you?

- Do you ever stay over at someone else's house? How often do you do this? Do you like this? Are you allowed to do this as frequently as you want?
- How do you get to and from school?
- Does your family know where you are when you are away from home and not at school? What are your family's rules about being away from home or school? (Curfew rules, reporting in rules, who you are with, where you can or cannot go, etc.)
- What do you do if a stranger talks to you on the street or asks you to go somewhere with him or her? Does anyone you know ever ask you to do things you are not sure are ok?
- Do you spend time on the internet? Have you ever had anyone on the internet ask you to do something? What was it?
- What can I do as your caseworker to help you? Tell me how you would reach me if you wanted to talk.

Reviewing Well-Being & Permanency with Caregivers

Living Arrangements:

- Show me the child's personal things, books or other things s/he plays with. How does this child comfort himself/herself?
- Show me the child's bedroom. Who else lives in this room? How does the child get along with the others in the family?
- What type of chores or expectations do you have for this child?
- Describe a typical day for this child.

Daily Routine:

- If you had to teach this child a new skill, like cleaning the house, how would you do that? If the child does not follow rules, what do you do? How does the child respond to this?
- Describe a typical time when the child did not follow a rule. How does this child comply with your requests and demands? When the child does not follow family rules, what type of discipline do you use?

Social/Emotional:

- Have you seen any signs that the child is feeling grief, loss, or is traumatized by the events in his/her life? What are they? How have you tried to help the child handle this? Have the behaviors/emotions gotten better or worse?
- Describe how the child transitioned into your home/family? What have you been able to do to help the child transition (i.e. cook food s/he is familiar with, have

pictures of his/her family in the bedroom, have books or music from the child's home, etc.)?

- How does this child show warmth and affection? What does s/he do when s/he is happy? How does the child show that s/he is upset, hurt, sad or feeling other emotions?
- Who does this child seek comfort from when s/he is hurt, frightened, or ill?
- Is this child able to seek you out and accept your help when needed?
- Does this child show preference for a particular adult?
- What does this child do when upset? How easy is it to soothe this child when s/he is upset?
- How does this child comply with your requests and demands?
- How has this child changed since coming here? What do you think about that? In what ways has the child adjusted to this placement?
- Is this child involved in any religious activities? Any cultural activities?

Family and Friends:

- Have you met the child's parents/siblings/family? What happened when you met them? Do you have any concerns or questions about the family?
- Who does the child talk to, play with, or spend time with? Is the child's behavior different with these people than with you? In what ways?
- Is the child allowed to call friends from your home? Have friends over for a visit? Visit a friend's home?

Special Interests:

- What kinds of things does this child like to do? What does the child do besides school and case activities?
- What are this child's special talents?
- What do you do to support the child in being involved in things s/he likes to do? Do you need any help to do this?

Education:

- Would you describe this child as developmentally typical or not? Can you give me examples of his/her behaviors/skills? Do you think the child needs any help in any developmental skills?
- How is the child doing in school? Who is her/his teacher(s)? Have you gone to a school conference or received any reports from school? Can I see them so I can make a copy of the file? If the child were to have troubles at school, who would you contact?
- Has the child begun to attend a school where s/he has multiple teachers? How has the child transitioned into his/her new school? Is the school a very different type than the last school the child attended? (Going from a single teacher to multiple teachers is one example of a large transition for a child this age.)

Health:

- Who is taking the child to medical examinations? Who decides what type of medical care (even routine care such as immunization shots) the child should have? Does the child have any special medical problems? Do you know how to provide care for this type of condition? Where do you keep the child's medical records? Show me any recent medical reports so I can have a copy for the child's records.
- Describe the child's sleeping pattern. Describe the child's eating habits.
- Have you seen any weight changes since this child has been with you? Any other types of changes? Has the child begun the physical changes into adolescence? Who is talking to the child about these changes?
- Are there any signs the child is involved in sexual activities, using drugs, harming himself/herself or any other dangerous activities?

Case Planning:

- Is this child receiving any educational, medical and/or psychological services? Which ones? How often? What do you think/feel about these? Do you think that the services are meeting this child's needs? Are there any other services that you think this child needs?
- What is your greatest fear about your child returning home? What is your greatest fear if your child does not return home?
- When the child visits his/her parents or other family members, what happens? How does the child behave before or after the visit? What do you think of the family visits with the child?
- What are the case goals for this child and his/her family and what do you think/feel about that? What makes that okay; not okay?
- If the child goes home, how do you imagine you might still be involved with the child and his/her family? If the child cannot go home to any family member, how might you imagine being involved with the child?
- What is the permanency goal for this child? What do you think/feel about this? What makes it okay; not okay?
- How have you been included in the family conferences/treatment/team case planning meetings? What is your role in achieving the case goals?
- What do you need to know or tell me about the child that would help all of us do a better job making this child safe and getting him/her a permanent family?

Self Care:

- On a scale of one to ten with ten being the easiest child you have ever cared for – how easy is it to parent this child? Describe who this child is. What about the child is easiest and most pleasurable? What is the most difficult aspect of this child for you to deal with? What are the things about this child that you think will help him/her in the future? What do you think might be harder for him/her?
- Tell me how you handle the stress of having this child in your home. What do you do to take care of yourself?
- What are your concerns right now? How can I help you?

- What was/is it like for you to care for this child? What has been the effect on your family of having this child placed in your home? What did you expect it to be like? Help me understand what it has been like for you dealing with this child.
- To whom do you go if things aren't going too well?
- What things do you need to support your continued care of this child?

Reviewing Well-Being and Permanency with Early Adolescents

Living Arrangements:

On a scale of one to ten, where ten is the best place to live and one is the worst, how would you rate this family? What makes it a ____? Is there something that could be done to make it better? How is it for you living at _____'s house?

My biggest fear is.....?

Who else lives here with you? What do you think about the other people who live here? What is it like living with them?

What are some of rules this family has? What happens if you break a rule? How often does this happen?

Who do you want to live with? How would that be better than where you live now?

Are there things that you can and can't do at _____'s house?

Daily Routine:

Tell me what a typical day is like from when you get up to when you go to bed. (Get the child to tell their story rather than just asking him/her a list of questions.) Here are some prompts if you are having difficulty getting the child to answer:

- How do you wake up in the morning?
- What do you do in the morning to get ready for school?
- Does anyone make breakfast for you? Who? What are some things that you eat for breakfast?
- Do you bring lunch with you to school or do you get lunch at the school cafeteria? What are some things that you eat for lunch?
- Who makes you dinner? What are some things that you eat for dinner?
- What do you do after dinner?
- What time do you go to bed?
- Where do you sleep? Do you share a room with anyone? Who? What is this like for you?

- What type of chores do you do? How often? Do you get allowance for doing chores?

Social/Emotional:

If life could be just as you wanted, what would it be like? How is that different from what is happening now?

If you are upset or angry about something that happens, what do you do to calm yourself? Is there anyone that you can go to? Who?

What happens when the adults in the house get angry at you, each other, or someone else who lives in your house? How often do they get angry? What does it feel like for you when they are angry?

Is there anyone at home or anywhere else that you go who makes you feel scared? Are there any adults or kids who do things that make you feel sad, mad, scared or confused?

Do you ever wake up in the middle of the night? If so, what happens?

Do you ever get scared hanging out in your neighborhood or anywhere else you go? If so, what are the things that make you scared? Is there anyone who you are able to talk to about this?

If something is really worrying you, who can you talk to?
If you need to get in touch with me, do you know how to do that? How?

Are you involved in any religious, spiritual or cultural activities?

Tell me about one time when you felt sad, mad or scared about something that happened at _____'s house. What did you do? What did the adults do?

Do you have a favorite thing you do when you feel sad? (Check other emotions, too.) Do you have a favorite thing or activity that helps you feel happy? (For example, a personal belonging, listening to music, reading, etc.)

Do you go to any religious activities? How do you get there?

Family and Friends:

How are visits with your family? What kinds of things do you with your family on visits? How often do you see them? Do you speak with them on the telephone in between visits? What could be done to make visits better?

Do you see your brothers and/or sisters who are in foster care or live somewhere else? How is it to see them?

Who are your friends? What do you like to do with them? Where do you see them? Do you get to visit with friends from your last school or past foster families who you miss? Do you get to call them?

Is there anyone who you miss or would like to visit? (For example, former foster parents, other kids in the foster home, school friends, family, etc.)

Do you have a boyfriend or girlfriend? Tell me about him/her?

Special Interests:

What do you do on the weekends? Who do you do this with? What do the other people in _____'s house do? If applicable: Is this different from what you used to do on weekends? If so, how is it different?

What kinds of things do you like to do for fun? (For example, sports, music, art, video games, etc.) Do you do these things while you are living with _____? Are there any things that you'd really like to be doing that you aren't doing now?

Education:

What is your current school like? How is that better or worse than your last school? A lot of kids find it hard to move to a new school in the middle of a year. How has the move to this new school been for you?

You are in the ____ grade, right? Tell me about what happens in that grade. Who is your teacher(s)? How is school? What are some of the things that you like best about school? What are some of the things that you like the least about school? How is that different than your last school?

What things do you do after school? Are you in any special things like sports, music, scouting, art, or other activities?

Who helps you with homework or other school assignments? Do you have access to a computer or other things you need to do your school work?

Do you have friends at school? Does anyone cause you problems?

Who helps you choose your classes?

Do you ever have problems at school, between classes, going home from school, etc. with any other kid or adult?

Health:

Are you ever sick? Tell me about what happened when you felt bad.

When was the last time you went to the doctor? What did you see this doctor for?
Have you been to any other doctors? If so, why? Do you take any medications?
Have you seen a dentist in the last six months?

Who do you go to when you have questions about your health or body?
On a scale of 1 to 10 where 10 is: I have adults I trust and can talk to about this,
where would you place yourself regarding:

- smoking
- drugs
- changes in my body
- sex and sexuality

What can I do to help with any of these important issues?

Do you go to see a counselor or therapist? What is this like for you? Do you
know why you are seeing this person?

Have you ever thought about hurting yourself in any way? Tell me more about
that?

Have you ever tried alcohol, smoking, illegal drugs, prescription drugs, etc.? Do
you know other kids who do this? What do you think about that?

Case Planning:

Tell me what you know about why you live with this family.

What questions do you have about what will happen?

It is your right to go to the court hearing and to attend some of the meetings
where we talk about what might happen to you. Do you want to attend? What do
you want to know about these meetings/hearings?

Do you have a CASA/GAL or attorney? How often do you talk to this person? Do
you feel like this person is helping you?

If you could choose, what would happen? What would be good about this?

Do you have any fears or concerns about the future?

Many children have mixed feelings about their birth parents and foster parents.
What are your feelings?

If you woke up tomorrow and everything was perfect, what would be happening?
How is that different than now?

What is your biggest fear/concern?

Tell me who you would call if you had questions or a problem?
Do you know how to reach me?

Tell me what I can do to make things better for you?

Sources:

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Center for Development of Human Services. (2002). *Child Development Guide*. Buffalo, NY: Research Foundation of SUNY/CDHS.

Child Welfare League of America. (2003). *PRIDEbook*. Washington, D.C.: Child Welfare League of America.

Maine Department of Human Services. *Child Well-Being and Safety Review*.

Massengale, J. (2001). Child Development: A Primer for Child Abuse Professionals. *National Center for the Prosecution of Child Abuse: Update Newsletter*, 14(8), 1-4.

Ozretich, R., & Bowman, S. (2001). *Middle Childhood and Adolescent Development*. Corvallis, OR: Oregon State University Extension Service.

Pennsylvania Child Welfare Training Program. Module 11: Family Service Planning Process/Case Transfer and Closure. Handout #16. Web link:
http://www.pacwcbt.pitt.edu/curriculum/CTC/MOD11/Hndts/HO16_SltnFcslQstns.pdf