Assessing Trauma and Child Development

1. Maximize the child's sense of safety. (Immediate)

- [] In-home safety plans in place if the child remains in home
- [] If out-of-home, safety plans or restrictions are developed about who may have access to the child and when
- [] If out-of-home, child has beloved objects that comfort her
- [] Child is with someone who makes them feel safe
- [] Routines or rituals are continued that calm or soothe the child when they are upset

2. Support caregivers of the child in meeting the Child's needs. (Immediate)

- [] Caregiver knows and understands children age 0-5
- [] Immediate physical needs of child are resolved
- [] Caregiver has been given information about what has occurred in the child's life
- [] Caregiver has supports in place for respite that the child knows
- [] Caregiver has people/professionals to contact if she has questions about the child's behavior, mood, or needs
- [] Routine and schedule in the home meets the needs of the child (naps, meals, transitions)

3. Determine if referral for a child if needed

- [] screen whether child is exhibiting symptoms that indicate a need for referral
 - Refer to chart of behaviors
 - Ask the caregivers for weekly contact about the child's behavior, mood, and needs (eating, sleeping, or changes in play)
 - Contact other care providers about any changes in mood or behavior in the child
- [] Fill out the Child Welfare Trauma Tool

THROUGH THE EYES

CHILD INITIATIVE

- [] Use decision tree to determine whether or not a referral should be made
- [] If behavior changes are reported, refer back to the referral tool and decision tree

CHECKLIST for INFANTS and TODDLERS

4. If decision tree ends with referral, choose a therapist who is trained and skilled and make referral

- [] Consider factors of therapist's skill, availability and experience:
 - What tools or assessments does the therapist use to determine whether or not treatment is necessary?
 - Is the therapist trained in Child Parent Psychotherapy or Parent-Child Interaction therapy?
 - Is the therapist trained in any other evidence based model of therapy for children 0-5?
 - Does the therapist have ongoing training, consultation and/or supervision?
 - Are there cultural competency issues or special needs that need to be addressed?
 - Is the clinician willing to participate in the court process, school/daycare meeting, team meetings etc.?
 - How soon will the child be seen?
 - Who needs to accompany the child?
- [] Make referral to the chosen therapist

5. Provide collateral information to the therapist

- [] Information about the traumatic event that occurred
- [] Early Development Network (EDN) Part C Evaluation if they have been done
- [] Pertinent medical information
- [] Signed releases to daycare, medical, and other providers
- [] Access to the biological parents and/or the foster parents

6. Maintain ongoing collaboration with the therapist

- [] Framework for therapy is developed including:
 - [] Goals for treatment
 - [] Who is to be involved in the treatment
 - [] Transportation for those involved in treatment
- [] Therapist has provided you an assessment within 30 days of seeing the child
- [] Therapist is invited to monthly team meetings,
- school/daycare meetings, or court proceedings, if necessary
 [] Therapist provides monthly updates about the progress
- of treatment
- [] Monthly updates include recommendations regarding the needs of the child
- [] Recommendations are being followed



Babies Can't Wait

CAPTA/EDN Part C Evaluation and Services

- [] Make CAPTA Referral to local EDN (Early Development Network) Program (PS-90) copy in file
- [] Ensure EDN evaluation includes social-emotional assessment
- [] Obtain PS-90/CAPTA referral outcome information from EDN – copy in file
- [] If parent is not responding to EDN for evaluation, request order from court
 - *If child *qualifies* for EDN:
 - [] Obtain copy of MDT
 - (Evaluation by Multi-Disciplinary Team)
 - [] Obtain copy of IFSP (Individualized Family Service Plan)
 - [] Submit copies of MDT/IFSP to court/parties
 - [] Attend IFSP meetings
 - [] Submit copies of updated IFSP to court/parties
 - [] Refer to Early Head Start (ages 0-2) or Head Start (ages 3-5)
 - *If child *does not qualify* for EDN:
 -] Obtain copy of MDT
 - [] Submit copies of MDT to court/parties
 - [] Re-Refer child for another EDN evaluation 6 months later if concerned with developmental delays
 - [] Refer to Early Head Start (ages 0-2), Head Start (ages 3-5) or Pre-school program (ages 2-5)
 - [] Include all above information in safety assessment and court report

Medical Care Checklist

- [] Medical home is established/maintained for child [] Include information on medical home in court report [] Within 15 days of entering care, child has received comprehensive health examination (Well-child check/EPSDT) [] Provide pediatrician with collateral information regarding worker, parent, foster parent concerns of development [] Child has been enrolled in daycare, and health of the child if needed [] Child receives regular well-child check/EPSDT examination [] Payment has been arranged (chang by pediatrician at: from private pay to Title XX)? [] Birth []1 month [] 2 months [] Does the current childcare accept [] 4 months [] 6 months [] 9 months Title XX? [] 15 months [] 18 months []1 year [] Visit the childcare within 7 days to [] 2 years [] 3 years [] 4 years assess quality [] 5 years Date Visited: [] Encourage parent(s) to attend well-child check [] Ensure parent has transportation Are the following items present? [] EPSDT examination includes screening for: [] Positive relationships (Does the chil [] Cognitive and language developmental delays seem happy-excited-engaged?) [] Gross-motor developmental delays] Plan for support if behavior change [] Social-emotional developmental delays] Safe environment [] Vision [] Best practice or developmentally [] Hearing appropriate activities [] Dental [] Substantial amount for children to [] Provide results of well-child check to court/parties experience free playtime [] Include information in safety assessment/court report [] Does the staff have training on supporting children in out-of-home ca [] Ensure pediatrician referrals for further evaluation and/or [] Discipline policy that matches services have been implemented developmentally appropriate [] Include information in safety assessment/court report expectations [] Child receives all required immunizations at: [] Birth-2 weeks [] 2 months [] 4 months []6 months [] 12 months [] 15 months [] 18 months [] 4 years [] Child receives lead testing at 12 months and 24 months [] Child receives eye exam by age 3 and every year thereafter [] Obtain results of eye exam [] Submit copies of eye exam to court/parties [] Includes results from eye exam in safety assessment/court report Questions? Contact: [] Child receives dental exam by age 1 and every 6 months thereafter [] Obtain results of dental exam [] Submit copies of dental exam to court/parties Nebraska Department of Health and Human Services
 - [] Include results from dental exam in safety assessment/court report

Child Care Checklist

[] 2 Weeks Notes:	
[] 6 Weeks Notes:	
[]] () (
[] 4 Months Notes:	

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