

Meaningful Strategies to Address DCFS/POS Worker Safety

Child welfare professionals are responsible for ensuring the safety of children who are alleged to be maltreated and enhancing the well-being of families who are involved in the child welfare system. The nature of this work can at times place child welfare professionals in uncomfortable situations where their physical and emotional safety could be at risk. Every day, these frontline staff are responsible for providing a wide range of prevention and intervention services, in which the comfort and safety of everyone involved should be considered. These professionals are often engaging with people who are strangers to them and in geographic locations potentially unfamiliar to them. Taking into account the circumstances in which these professionals work, proper safety precautions, supports, and/or training must be put in place.

There are many potential situations that could place child welfare professionals' safety at risk:

- 1. Potentially unsafe work environments or circumstances during home visits
- 2. Family members with untreated and/or current substance use disorder or mental health issues
- 3. The challenges related to the dynamics of government-mandated interventions
- 4. Lack of organization and supervisory support to ensure worker safety

As a result of the untimely and tragic deaths of child welfare professionals such as Pamela Knight and Deidre Silas, a group of dedicated child welfare advocates and organizations came together and developed recommendations of how to promote the safety of the child welfare workforce, which includes staff of the Department of Children and Family Services (DCFS) and Purchase of Service (POS) agencies, and the families with whom they interact. Our recommendations are grouped by *Legislative Recommendations* and *Enhanced Training Recommendations*.

Legislative Recommendations

We strongly recommend that the General Assembly **NOT pass laws** that will create a false sense of security that action is being taken while doing nothing to improve worker safety. Such laws have historically involved adopting failed policies such as enhancing penalties that have no deterrence benefit, and seeking to arm more individuals in potentially tense and traumatic situations, only escalating safety risks.

Instead, the General Assembly should consider law changes that:

 require experts trained and with experience in de-escalation and provision of care to accompany child welfare professionals in response to any specific and acute safety risk(s) or need(s) identified;

- mandate that DCFS create and implement a Worker Environmental Risk Assessment Protocol, an objective pre-visit worker environmental safety assessment/decision-making matrix meant to allow a worker and supervisor to assess their own risk and safety and make any precautionary decisions prior to initiating an investigation or home visit, based upon all available information about the current situation the worker may be entering;
- require DCFS to provide specific in-person enhanced training to mitigate risk to child welfare professionals and provide additional and effective tools for the Department, supervisor, and/or workers to ensure their safety (see suggestions below); and
- require DCFS to take concrete, measurable actions to address DCFS/POS workforce challenges – e.g., worker recruitment, retention, and turnover – such as those recommended by the statutorily established Child Welfare Workforce Task Force.¹

Enhanced Training Recommendations

We strongly recommend that DCFS enhance its training materials, methods, and protocols to equip child welfare workers with the necessary tools to identify and respond to needs and/or risks that arise as they engage in their work in the field. Enhanced training should include:

- Adding education and practical components for assessing and de-escalating risk/safety concerns to current simulation (SIM) trainings² for child protection investigators;
- Developing proactive and reflective **supervision techniques** related to safety discussions specifically for supervisors to implement in supervision and providing skill development for line-staff and protocol to determine who should accompany

¹ In December 2020, the Child Welfare Workforce Task Force provided recommendations that DCFS has yet to act on to address workforce shortages and job stress that contribute to unsafe working conditions created by high caseloads, constant staff turnover, worker burnout, worker exposure to secondary trauma, and failure to provide supportive supervision for frontline staff. Task Force recommendations include: effectively implementing post-secondary financial aid stipends for students committing to work in the child welfare system; reducing duplicative, bureaucratic administrative work that detracts from working with families; developing and supporting frontline supervisors; implementing casework teams that include paraprofessionals; increasing collaboration between workers and the courts; addressing frontline pay disparity between DCFS and POS agencies; addressing racial and ethnic disparities in workforce; and, DCFS adopting a trauma-informed agency culture.

² In 2015, the University of Illinois-Springfield (UIS) rehabbed an unused house on their campus to serve as a mock residence to develop SIM training for child protection investigators. This training is provided by the Child Protection Training Academy (CPTA), a program developed at UIS and sponsored by DCFS. The use of the SIM training lab started in February 2016 and was expanded in February 2019 in Chicago. The SIM training creates a realistic home-like setting meant to create a scenario with likely practice implications. The mock residences simulate a family's home with environmental hazards presenting child safety concerns. A review of the SIM lab training curriculum shows that child protection investigators are not trained in de-escalation techniques and are not trained on how to respond to combative or dangerous behavior.

the worker on an investigation/visit (i.e., another seasoned staff, a mental health crisis counselor, or substance use healthcare practitioner);

- Training workers on how to navigate and process **secondary trauma** due to exposure to trauma in the field and training supervisors to identify and supportively address secondary trauma in their staff;
- Cultivating **emotional intelligence** using role play and other techniques to understand and process situations and environmental contexts as they develop;
- Increasing **environmental awareness** through additions to the SIM training on personal safety techniques in various settings and cultural competence as to all parties involved in the anticipated interaction(s).

For more information, or for questions related to the alternatives discussed above, please contact:

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