**PM ATTACHMENT 3.3.1**

**Urgent Behavioral Health Response for CPS Removal Process**

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CPS removes child from home and determines the likelihood that the child will not return home within 48-72 hours (removals will include voluntary foster care)

When does this removal take place?

**Business Hours:**
- CPS contacts the SAA and asks for the crisis worker on-call
- SAA on-call crisis worker documents information related to the call (date/time) and follows local protocol for 24 Hour Urgent Response

**After-hours:**
- CPS contacts ProtoCall via the telephone number for the local SAA
- ProtoCall documents information related to the call (date/time)
- ProtoCall pages the SAA on-call crisis worker
- ProtoCall provides the SAA crisis worker with information on how to reach the CPS worker
- SAA on-call crisis worker contacts CPS worker immediately and makes note of response time to call

CPS provides the SAA Crisis Worker with info on:
- Behavioral/Emotional state of the child and other relevant information to begin assessment process
- Location of the child where the intervention is to take place (child should be taken to the ER only in acute crisis, i.e., imminent risk of harm to self/others)

- CPS and the SAA staff person reach a collaboratively based decision on face-to-face response time based on the emotional needs of the child – **not to exceed 24 hours from the time of referral**
- CPS and SAA staff may negotiate the need for CPS attendance at response based on individual situation and CPS availability

**SAA Removal Intervention and Assessment:**
**Purpose and Process**

1. To identify immediate safety needs and presenting problems of children entering foster care, to stabilize crises and be able to offer immediate services and supports each given child may need

2. Provide direct (therapeutic) support to each child making the transition into foster care, intending to reduce stress or anxiety the child may be experiencing, offering a coherent explanation to the child about what is happening and what can be expected in the near future

3. Provide direct support to each child’s new caregiver, including guidance about how to respond to the child’s immediate needs in adjusting to foster care, “symptoms” to watch for and report; assistance in responding to any significant behavioral symptoms the child may exhibit, and identification of a reliable contact within the behavioral health system

4. Initiate the development of a Child and Family Team process for each child

5. Provide DES/CPS Case Manager with findings and recommendations for the initial (within 5-7 days of removal) Preliminary Protective Hearing, related to placement, services, and visitation for each child

**Next Steps (5 to 7 days) - CPS/SAA Collaboration:**
- CPS files petition within 72 hrs.
- Within 5-7 days of removal, SAA Crisis Staff/Clinical Liaison provide clinical opinion/recommendations via a narrative summary which addresses suggestions related to: visitation, initial goals for behavioral health intervention and safety issues for the Preliminary Protective Hearing
- CPS case manager begins eligibility process via CHILDS if the child is not eligible at the time of placement
- CPS/SAA identify members of the Child and Family Team
- SAA insures that a CFT is developed within 7 days of the child’s removal
- Point people and channels for communication are identified and developed
- CPS informs SAA Crisis Staff/Clinical Liaison of any changes in the child’s placement

CPS/SAA continue to work together via the child’s CFT, which will identify and secure all resources available through the SAA, CPS or through non-categorical supports. These resources will be available to provide services to the family of origin as well as the child’s current placement (IE; foster family, shelter, etc.)

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*Remember that the removal of a child from his/her parents is difficult on the CPS case manager so please offer support to them as well.*

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