



# First, Do No Harm: Model Practices for Law Enforcement Agencies When Arresting Parents in the Presence of Children

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# Executive Summary

## Introduction

One of the most traumatic events a child can experience is the arrest of a parent. In the short-term, children whose parents are arrested experience the trauma of the arrest itself and often the stress of changes to their living situation. In the long-term, they grapple with a range of trauma-induced physical and mental health issues, which can lead to negative academic, behavioral and justice system outcomes. These outcomes harm not only the children involved but also society as a whole, which misses out on potential productivity and must devote more resources to schools, social services, law enforcement and courts.

Law enforcement agencies are in a unique position to limit this harm in three key ways. First, they can modify their procedures to make arrests less traumatic for children. Second, they can adopt protocols to ensure children are accounted for, left with competent caregivers and otherwise protected from harm in the aftermath of a parental arrest. Third, they can collaborate with social workers and child advocates to connect children of arrested parents with the services they need. This report outlines several model practices that law enforcement agencies can use to translate these three broad possibilities into effective policies and practices.

## Model Practices in Brief

### Calls for Service

This report recommends that law enforcement agencies incorporate the model practices outlined

below into their policies and protocols for responding to calls for service. In many cases, a checklist that requires officers to actively affirm they have followed these practices is an effective way to promote and track compliance.

Before officers arrive at the scene of a call for service, dispatchers should attempt to obtain information regarding the presence of children at the scene. Likewise, officers should consider where children may be located at the scene. When planning to conduct a raid or execute a warrant, officers should attempt to determine how many children will be at the scene, their likely location during the planned action and whether the planned action can be scheduled for a time when no children are present.

Upon arrival at the scene of a call for service, officers should look for clues that children may be present or likely to return soon. Officers should then locate all the children, anticipating that some children may hide, and check them for signs of harm or trauma. While securing the scene, officers should avoid pointing weapons at children. When parents are compliant, officers should also avoid escalating the situation or handcuffing parents in view of children.

After securing the scene, officers should allow parents to comfort their children and explain the situation. Officers should also ask parents whether other children will return home later and whether another caregiver is available. If another caregiver is available, officers should inform alternate caregivers that children are often traumatized by parental arrest and, where possible, provide

referrals to social service agencies equipped to address trauma in children. If another caregiver is not available, officers should follow local protocol for transferring custody to the state.

After the resolution of an incident, law enforcement agencies should, where possible and appropriate, enable officers to visit the children involved to demonstrate concern for their well-being. Law enforcement agencies should also follow up with any other organizations involved in the case to ensure children's needs are being addressed.

## Interagency Teams

This report recommends that law enforcement agencies, social service agencies and child advocacy groups adopt several model practices for creating interagency teams to support children of arrested parents. Interagency teams should include representatives of any agencies that operate locally and are legally obligated to serve children. Representatives of child advocacy groups should also be invited to participate and provide feedback. Effective interagency teams are characterized by information-sharing, mutual trust and a commitment to the best interests of children. Both regular team meetings and internal documentation of policies, procedures and shared goals can help achieve these ends.

## Training

While much law enforcement work takes place in traumatic situations, many officers are not trained to recognize signs and symptoms of trauma. Law enforcement agencies should provide officers with appropriate training. Specifically, officers should understand the ways trauma manifests in children, the impact of trauma on brain development and behavior and the importance of de-escalation in limiting trauma. Where possible, police officers should be cross-trained with other members of interagency teams.

## Data Collection

This report recommends that law enforcement agencies and interagency teams develop data collection systems and practices to demonstrate the impact of parental arrest, explain the need for resources to local authorities and evaluate the effectiveness of strategies for responding to children of arrested parents. The specific data fields to capture will vary with programs and approaches; however, both law enforcement and social service agencies should generally collect detailed information about services rendered, referrals made and the parents and children involved in each incident.

## Conclusion

The remainder of this report provides a detailed treatment of topics related to parental arrest, including the effects and extent of exposure to trauma and violence in children; current efforts at the national, state and local levels to improve the treatment of children during parental arrest; and detailed model practices for improving the treatment of children during parental arrest.

## Introduction

With the recent release of *Safeguarding Children of Arrested Parents*, the White House, in conjunction with the International Association of Chiefs of Police (IACP), developed national standards for the treatment of children at the time of parental arrest.<sup>1</sup> The report charges law enforcement agencies with developing and implementing policies and procedures that meet those standards. While a focus on parental arrest may seem narrow, the number of children, adults and systems affected by the issue is sizeable. It is in the best interest of both law enforcement agencies and children to tackle the problems caused by parental arrest early and often.

There are at least three reasons why law enforcement agencies should address this issue and consider how children observe and experience interactions between law enforcement and their families when the arrest of a parent is involved.

First, when a child observes the arrest of a parent, the child often displaces feelings of anger and shame onto the arresting officers instead of the parent who acted in a manner that warranted arrest. This displacement can lead to enduring hostility toward law enforcement. By training officers to support children better at the time of parental arrest, law enforcement agencies can turn such situations into an opportunity for officers to connect with children and be seen as rescuers and “the good guys.” This dynamic is especially powerful when a parent is arrested on charges of domestic violence.

Second, observing a parent’s arrest is a traumatic event for children. According to current understanding, exposure to trauma can have both physical and psychological impacts and create long-term academic and behavioral issues. Officers are front line social responders. As policymakers move to reduce children’s exposure to trauma and adopt trauma-informed responses to their needs, officers are in a unique and powerful position to identify those needs, provide referrals to social services and

persuade adults of the importance of tending to children’s needs after arrests or acts of violence.<sup>2</sup>

Third, officers’ role as “first social responders”<sup>3</sup> means they represent authority in all its facets, from enforcing the law to ensuring safety to protecting the welfare of society’s most vulnerable citizens, who all too often are children. While police are not social workers, they benefit from collaborating with service providers to address and mitigate the trauma children experience when a parent is arrested. Data show that some officers do not consider how their interactions affect the children who observe them. Officers must represent a voice of reason and actively model caring and responsive adult behavior. When possible, they must also collaborate with social workers and child advocates to connect traumatized children with the services they need.

## Importance of Limiting Exposure to Trauma and Violence in Children

There is evidence that adverse childhood experiences (ACE) are connected to poor health, educational problems and justice system run-ins in American children.<sup>5</sup> When Congress enacted the Children’s Health Act in 2000, it created the National Child Traumatic Stress Network (NCTSN) to address increasing exposure to trauma among children and the need for trauma-informed services.

SAMHSA describes individual trauma as resulting “from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”<sup>6</sup>

In its 2012 report, the Attorney General’s National Task Force on Children Exposed to Violence describes exposure to violence as a “national crisis that affects approximately two out of every three of our

children.”<sup>7</sup> The level of trauma youth experience burdens the United States with “astronomical costs” and places a major “financial burden on other public systems, including child welfare, social services, law enforcement, juvenile justice, and, in particular, education” that is “staggering when combined with the loss of productivity over children’s lifetimes.”<sup>8</sup>

Witnessing violence is not the only source of trauma. Losing a parent, losing a home or witnessing the arrest of a parent are other major sources of trauma. In a 2012 report, Jason Lang and Christopher Bory describe the situation as follows:

The process of a caregiver’s arrest and the subsequent hours and days are fraught with potential dangers for children, yet children’s needs may be overlooked during this time...Children may suffer from traumatic stress associated with witnessing the arrest, may mourn the immediate loss of the caregiver from the home, may experience the stress of changes to their living situation, financial resources, caregivers, and school, and may have to cope with the longer-term incarceration of their caregiver.<sup>9</sup>

Today, there are more parents in prison than at any prior time in American history.<sup>10</sup> The primary reasons for parental arrest are, in order of prevalence, domestic violence, drug-related incidents and property crimes.<sup>11</sup> This means that officers involved in the arrest of a parent are sometimes dealing with

children whose families have already exposed them to domestic violence and criminal conduct.

Efforts to estimate the number of children affected by parental arrest have encountered difficulties. By extrapolation from the number of incarcerated parents with children, Lang and Bory estimate that over a million children have witnessed the arrest of a parent.

When the National Conference of State Legislatures (NCSL) analyzed parental arrest and incarceration statistics to identify which children were most likely to feel the impact of parental arrest and incarceration, they found the following:

In 2007, the population of minor children of incarcerated parents consisted of approximately 484,100 white, non-Hispanic children (one in 110 white children), 767,400 black, non-Hispanic children (one in 15 black children), and 362,800 Hispanic children (one in 41 Hispanic children). Black (54 percent) and Hispanic (57 percent) men in state prison were more likely than white men (45 percent) to be parents. The likelihood that women in state prison were parents did not vary by race. About half of these children were age 9 or younger. Thirty-two percent were between the ages of 10 and 14, and 16 percent were between the ages of 15 and 17.<sup>12</sup>

**Table 1: Annual Incidence of a Child Experiencing a Parental Arrest**

	Number of adult arrests in 2010	Estimated number of time a child experienced a parental arrest	Estimated number of times a child was present for a parental arrest <sup>b</sup>
United States	13,120,947 <sup>a</sup>	6,368,709	1,273,741 - 5,286,028
Connecticut	128,670 <sup>a</sup>	62,454	12,491 - 51,836

Note: these estimates are unique incidents of arrest, and do not represent numbers of arrestees or children

<sup>a</sup>Uniform Crime Reports, 2010

<sup>b</sup>Based on estimates from 20-83% in Dallaire & Wilson, 2010; Johnston, 1991; Ham & Phillips, 1998

*Source: Lang and Bory, “Collaborative Model,” 12*



## Extent of Exposure to Trauma and Violence in Children

Determining the extent of children's exposure to trauma and violence remains an inexact science. Defining what constitutes violence or a traumatic event is problematic. Even with those constraints, however, data from the 2008 and 2011 National Surveys of Children's Exposure to Violence indicate a high rate of family-based violence.<sup>13</sup> Data from the 2011 survey indicate that over a lifetime:

- 39.2 percent of youth witness violence directly,
- 20.8 percent of youth witness a family assault,
- 9.5 percent of youth experience sexual victimization, and
- 25.6 percent of youth experience maltreatment.

Data for children living in poverty, with teen parents and in areas with few community resources show significantly higher rates of exposure to, and experience of, violence.<sup>14</sup> In addition, when firearms are present in a home, they are more likely to play a role in domestic violence and children in such homes are more likely to witness or experience gun violence.<sup>15</sup> As the National Task Force on Children Exposed to Violence notes, "poverty increases [both] the risk and adverse impact of exposure to violence."<sup>16</sup>

## Effects of Exposure to Trauma and Violence in Children

In comparison to determining the extent of children's exposure to violence, enumerating its effects is a relatively exact science. In fact, the science of trauma has burgeoned over the last 20 years, documenting both the immediate impact of exposure and how exposure among youth affects future conduct.

Scientists have documented that exposure to traumatic events, such as observing a beating or a parent being arrested, disrupts a young brain's normal course of development.<sup>17,18</sup> The body's adrenal response during and after traumatic events literally changes the way the brain works. The most heavily affected areas of

the brain are parts of the amygdala, hippocampus and frontal cortex that govern emotional regulation, memory and executive function.

While a single traumatic event may not significantly affect a child's development, the likelihood increases with repeated exposure. For children observing the arrest of a parent, the "convergence between real life events and their worst fears"<sup>19</sup> about injury and the loss of protection, combined with the connection to their parents, provokes a level of overwhelming anxiety about their sense of powerlessness and fear of abandonment. The loss of trust and security makes basic interactions with adults an exercise in risk-taking that triggers anxious responses.

In view of how many children suffer from polyvictimization,<sup>20,21</sup> the implications are significant. As Lang and Bory put it, "many children of arrested caregivers also experience other potentially traumatic and stressful events and are at risk for 'toxic stress.'"<sup>22</sup> A key finding of the National Surveys of Children's Exposure to Violence is that youth exposed to one type of violence "had a far greater risk of experiencing other types of violence."<sup>23</sup> For older youth, the rate of exposure was twice as high as for children and significantly more severe.<sup>24</sup> For male youth—who continue to represent the majority of youth in the juvenile justice system, accounting for 70 to 90 percent of arrested, detained and incarcerated youth—exposure to violence was higher, as was the likelihood of being a victim of assault.<sup>25</sup>

Typical effects of children's exposure to violence include attachment problems, regressive behavior, anxiety, depression, suicidality, aggression, conduct problems and cognitive problems, which can lead to academic problems. Intrusive thoughts about the violence to which they were exposed manifests as disruptive conduct or an inability to concentrate. When exhibited in school, these behaviors often lead to suspension or involvement with school resource officers (SRO). In all cases, situational factors influence how trauma affects a child, including the child's age,<sup>26</sup>



the support available to the child, the cause of the trauma and the likelihood of its recurrence.

The most dramatic consequence of repeated exposure to trauma in children is that they exhibit a survivor response and become “stuck” in a state of hyper vigilance. In this state, they typically respond to threats by fighting, fleeing or freezing. In addition, they typically fear and distrust adult authority figures and feel the need to control the outcome of interactions with them. The Report of the National Task Force on Children Exposed to Violence describes this response as follows:

...children adopt the attitude of ‘survivors’ who can rely only upon themselves for safety and to cope with feelings of despair and helplessness...their emotions, thinking and behavior become organized around learning how to anticipate, cope with, and—for the sake of preparedness—never forget the danger and pain...These children’s brains are not faulty or broken; they are stuck in a perpetual state of readiness to react without thinking to even the smallest threat. The children live in a near-constant state of high alert, a survival mode in which they never trust anyone—even people who really are trustworthy—can never relax, and never stop bracing for the next assault or betrayal.<sup>27</sup>

In view of the behavioral problems this survivor mentality can cause, it is not surprising that the “vast majority of children involved in the juvenile justice system have survived exposure to violence and...liv[e] with the trauma of that experience.”<sup>28</sup> Moreover, children raised in homes with domestic violence often learn that “violence is an effective way to resolve conflicts and problems.”<sup>29</sup> In combination with untreated trauma, this lesson can fuel a vicious cycle in which victimized youth behave disruptively, provocatively or violently and thereby increase their likelihood of being victimized again. Even youth who avoid this particular vicious cycle may put themselves at risk by using drugs or alcohol to numb their pain.

Current research indicates that exposure to violence is a strong predictor of involvement in the juvenile

justice system. Estimates of the extent of incarcerated youths’ exposure range from 48 to 90 percent.<sup>30</sup> One study found that “witnessing domestic violence is the single best predictor of juvenile delinquency and adult criminality.”<sup>31</sup>

Failure to identify and support victimized youth is a key factor in this destructive cycle. It serves law enforcement’s mission to interrupt the cycle by ensuring children receive services that mitigate the impact of exposure to violence and by modeling the responsible exercise of authority and power.

## Domestic Violence Incidents and Arrests of Parental Abusers

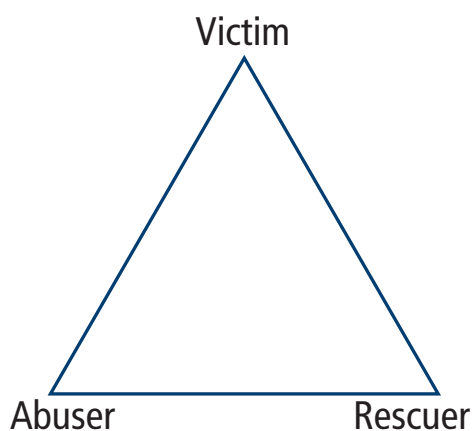
Typically, by the time a police officer responds to a call for service for domestic violence, a child has already witnessed some level of violence and often the presence of weapons. The child has seen the domestic violence cycle play out, including the tension build-up, the explosion and the remorse/honeymoon phase. This cycle leads both adult and child victims to experience chronic apprehension, agitation and anxiety as well as feelings of paralysis and powerlessness. As a result, many agree that “domestic violence poses a serious threat to children’s emotional, psychological and physical wellbeing, particularly if the violence is chronic.”<sup>32</sup>

Children often “feel helpless, blame themselves for not preventing the violence, or for causing it, and also may be abused or neglected.”<sup>33</sup> The Report of the National Task Force on Children Exposed to Violence describes the situation as follows:

Witnessing or living with domestic or intimate partner violence often burdens children with a sense of loss or profound guilt and shame because of their mistaken assumption that they should have intervened or prevented the violence or, tragically, that they caused the violence... They also fear losing their relationship with the offending parent, who may be removed from the home, incarcerated, or even executed.<sup>34</sup>

In addition, children who witness domestic violence sometimes “learn that it is acceptable to exert control or relieve stress by using violence, or that violence is in some way linked to expressions of intimacy and affection.”<sup>35</sup> Not surprisingly, exposure to domestic violence is a significant predictor of teen relationship abuse.<sup>36</sup>

Since children can experience this complex array of emotions, police face special challenges when arresting parents for domestic violence. Viewed in terms of a “trauma triangle”<sup>37</sup>—which includes a victim, an abuser and a rescuer—police officers may assume children view them as rescuers. In most cases, this assumption is correct. In some cases, however, children view police officers as abusers, despite any actions their parents may have taken to warrant arrest on domestic violence charges.



## Arrests of Parents on Charges Other than Domestic Violence

While children who witness the arrest of a parent are often traumatized, the trauma increases when they see the parent hurt, cuffed or denigrated. As stated earlier, parental arrest represents the “convergence between real life events and worst childhood fears”<sup>38</sup> and is worsened when the child also faces placement in state custody and removal from all that is familiar.

A national study in 1998 estimated that 67 percent of arrested parents were handcuffed in front of their children at the time of arrest. In the same study, 27 percent of arrested parents reported that police had

drawn their weapons and 4.3 percent said they had engaged in a physical struggle.<sup>39</sup> Incarcerated parents reported that police neither explained to the child why the parent was being arrested nor had any other interaction with the child.<sup>40</sup> While little research exists on the impact of arrest on children, one study found that children who witness the arrest of a parent or someone in their household are 57 percent more likely to display post-traumatic stress symptoms than children whose parents were not arrested.<sup>41</sup>

Two factors can further exacerbate traumatic responses in children. First and foremost is the use of surprise in raiding a home. During surprise raids, officers wear military-style equipment and force entry into the home, often destroying the front door and some furniture in the process. These tactics escalate children’s fear and experience of trauma, and, for children who must continue to live in a raided home, there remains a continual reminder of the trauma until any damage to the residence is repaired. The second factor is a lack of community trust in the exercise of authority by the police. In communities where citizens fear or mistrust law enforcement, children may view parental arrest as further proof or confirmation of biased treatment by police officers. When either or both of these factors—the use of surprise raids and a lack of community trust of police—is present, children are more likely to view police officers as the abusers in the trauma triangle than as the rescuers.

## Opportunities to Connect with Children and Interrupt Cycles of Violence

*“We have an obligation to understand what it’s like for a child to go through that kind of a situation. We have an obligation to understand what it might have been like to live in that home and what kind of problems they have even before the arrest. We have an obligation to be a source of security for them and not another source of fear.”*

**—Former Sheriff Bob Brooks, Ventura County, CA, Sheriff’s Office**

In its 2014 report, the IACP found that most departments do not have protocols to help officers interact effectively with children. In addition, few departments have policies or practices that require officers to ensure all children are accounted for, left with competent caregivers and otherwise protected from harm after the arrest and removal of a parent. In several cases, children have suffered serious physical harm and then been forgotten by officers after the arrest of a parent<sup>42</sup> or have been physically harmed during a raid on a home.<sup>43</sup> Incidents like these underscore the need for officers to balance their pursuit of public safety with diligent efforts to protect children.

In his letter introducing the IACP report, former IACP President Yousry Zakhary described the benefits of such an approach:

There are numerous benefits associated with safeguarding the children of arrested parents. First and foremost, it supports the immediate, as well as future, physical, emotional, and psychological well-being of the child...Also, while often overlooked, the image of police, developed by children during these encounters, can have long-lasting effects on their overall views of law enforcement, and their future willingness to cooperate with police and to abide with the law.<sup>44</sup>

The report acknowledges that “the presence of a child is inadequately addressed in a large number of arrest situations throughout the United States given that a majority of departments still do not have policies and procedures for responding to children of arrested parents.”<sup>45</sup> Many law enforcement agencies have no protocol for these incidents, some are just now considering adopting one and others have implemented protocols that actively expand the police role.

The report sets forth national standards for the treatment of children at the time of a parental arrest, including incidents in which a child observes an arrest or is likely to return home to find a parent missing due to an arrest. The report acknowledges that parental incarceration is an ACE and recognizes that a child who witnesses the arrest of a parent is similarly

traumatized. The report notes, “Time taken with a child under these trauma-producing circumstances is time well spent.”<sup>46</sup>

In this vision of the police role, law enforcement focuses on limiting the trauma caused by the incident by consoling and connecting to children, ensuring their safety in the short- and long-term and assuming the obligation of helping a family member or caregiver obtain services to address the trauma of the incident.

The nation’s criminal justice systems are currently questioning historic practices and moving toward a greater focus on treatment, rehabilitation and community-based responses. A key focus is the ripple effects of current policies and practices—especially their impact on children, families and communities—and a current insistence that policies consider these “side” effects.

The San Francisco Children of Incarcerated Parents Project (SFCIPP) considers this shift in a brochure entitled “Children of Incarcerated Parents: A Bill of Rights:”

A criminal justice model that took as its constituency not just individuals charged with breaking the law, but also the families and communities within which their lives are embedded—one that respected the rights and needs of children—might become one that inspired the confidence and respect of those families and communities, and so played a part in stemming, rather than perpetuating, the cycle of crime and incarceration.<sup>47</sup>

## State-Level Adoption of Trauma-Informed Policies and Practices

Policymakers are finally beginning to understand that children’s exposure to traumatic events and the toxic stress those events produce increases long-term demand for law enforcement. Accordingly, many states have attempted to implement statewide education programs and adopt trauma-informed policies and practices in public service agencies, including law enforcement agencies.

In 2007, the California Research Bureau released a groundbreaking, comprehensive analysis of the impact of parental arrest entitled *Keeping Children Safe When Their Parents Are Arrested: Local Approaches That Work*. The document provides a comprehensive set of legislative, policy and practice recommendations and technical assistance to law enforcement agencies.<sup>48,49</sup>

In 2014, the California State Senate unanimously approved a resolution that recognizes the damage chronic exposure to trauma and the resulting toxic stress wreak on children’s capacity to thrive.<sup>50</sup> The resolution also recognizes the extensive human toll and the cost to state health and human service systems. Of all states, California has advanced the furthest in establishing statutory requirements, including the obligation of law enforcement officers to try to ascertain the well-being of a child when arresting a custodial parent.<sup>51,52</sup>

Connecticut has passed less legislation than California but has implemented more practices designed to protect children from traumatic events related to families interacting with law enforcement and the juvenile and criminal justice systems. Starting in the 1990s, Connecticut pioneered the Child Development-Community Policing (CD-CP) model, developed by Dr. Steven Marans from the Yale Child Study Center, in collaboration with the New Haven Department of Police Service. Designed to reduce children’s exposure to traumatic events such as violence and abuse, the model involves social workers from child-serving agencies accompanying police officers to incidents and later collaborating with mental health service providers. It has now been replicated in 15 cities. While CD-CP did not initially focus on the trauma of children observing the arrest of a parent, it has adapted to that focus.

In 2013, The Substance Abuse and Mental Health Services Administration (SAMSHA) awarded the State of Connecticut a grant to develop the Connecticut Network of Care Transformation (CONNECT), a “local, regional and statewide infrastructure for

an integrated network of care expansion and implementation.”<sup>53</sup> The state embarked upon interagency adoption of trauma-informed policies and practices and has pioneered multiple programs that integrate social workers and psychologists into the responses of law enforcement.

An increasing number of advocacy organizations supporting children of incarcerated parents have complemented front line responders’ efforts. Advocacy groups in several states are pushing legislatures to enact a variety of protections for children at the time of parental arrest. In addition to California and Connecticut, states where advocacy and programming have been strongest include Arkansas, New Mexico and New York. New Mexico has gone the furthest, creating detailed obligations and protocols that were in effect until a change of administration.

## Elements of Effective Models for Responding to Children of Arrested Parents

*“If our aim is to nurture healthy children within safe communities, we need to change our approach and the values that drive our responses to violence. The reliance on highly punitive approaches [is] not working—they make people feel more alienated and angry, they feed cycles of revenge, and, as if that is not enough, they are costly.”*

—Dr. Lauren Abramson, Executive Director, Community Conferencing Center, Baltimore, MD

## Law Enforcement Protocols

This section of the report identifies key policies and practices for reducing and mitigating the trauma of children observing parental arrest. While specific tactics and approaches are necessary for an effective response, they are not sufficient.

To be truly effective, agency leadership must articulate a philosophy of policing that makes protecting children from harm and trauma a priority. A trauma-informed approach “reflects adherence to six key principles rather than a prescribed set of practices or procedures.”<sup>54</sup> The six principles are as follows:

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice and Choice
6. Cultural, Historical and Gender Issues<sup>55</sup>

A combination of these principles is key to helping focus policies and procedures, structuring interagency collaboration and identifying core components of officer and cross-training curriculums. In addition to articulating a trauma-informed policing philosophy, agency leadership must support officers taking time to build relationships with youth and families, collaborate with state and private youth-serving agencies and encourage officers to develop innovative approaches to address trauma in children.

### **Policy, Practice and Protocol Changes for Officers**

Law enforcement agencies need written protocols to guide officer conduct at the time of arrest. The protocols should clarify officers’ obligations to children at the scene of an arrest by:

- clearly identifying sources of trauma,
- providing guidelines to ensure children’s needs are addressed proactively,
- developing interagency connections to community resources, and
- providing immediate, onsite referrals to resources for children and families.

The common wisdom about protocols and changing police practice is that, when possible, the advice should be short and the practices streamlined into existing approaches. There are several excellent

protocols available today, including those outlined in the IACP report (Appendix A contains protocols from law enforcement agencies).

A key lesson learned from implementation of these protocols is that officers need a streamlined call-in system for obtaining referral services. The best systems:

- provide officers with a single phone number,
- are answered 24 hours a day, seven days a week,
- employ staff trained in trauma-informed care and service delivery systems, and
- employ staff who can deal directly with adults who seek services for children at the scene.

### **Philosophy of Policies and Practices for Officers**

The preamble to an agency’s policy should reiterate the value of reducing children’s exposure to trauma and violence in promoting safety of the people involved in the incident and ensuring positive interactions with police in the short- and long-term.

### **Prior to Arrival at Scene**

When officers respond to a call for service for domestic violence, they should:

- request that dispatchers obtain information regarding the presence of children at the scene<sup>56</sup> and
- consider where children may be located in the home before entering.

When officers are planning to conduct a raid or execute an arrest or search warrant, they should:

- conduct pre-deployment checklists to ascertain whether children are present and, if so, how many children are in the home, their likely location at the time of the planned action and their proximity to officers who may use force to enter the home;<sup>57</sup>
- determine whether the planned action can be scheduled to avoid observation by children; and
- vigilantly avoid aiming weapons at children.



## On Arrival at Scene

When officers arrive on the scene in response to a call for service, they should:

- scan for clues to ascertain whether children are on the premises or likely to return;
- account for and locate all children, anticipating that some children may hide;
- check all children for signs of harm, especially at incidents involving domestic violence or exposure to drug offenses;<sup>58</sup>
- observe children for signs of trauma (see Appendix B);
- avoid escalating the situation in the presence of children;
- if the parent is calm and compliant, avoid handcuffing or arresting the parent in the presence of children;
- allow arrested parents to comfort their children, explain what will happen next and describe how the child will be cared for; and
- ask whether other children may return later to the home and arrange for their care in the absence of the parent.

## Interaction with Adults on Behalf of Children

While the studies are not yet complete, it appears that an appropriately timed recommendation makes parents more likely to provide care to traumatized children. Since police-assisted referrals have a higher compliance rate than other types of referrals, police are in a unique position to connect traumatized children with the resources they need. Accordingly, officers should:

- respond to incidents with service providers who can immediately work with children and help distract and comfort them;
- connect parents immediately to resources that can help mitigate harm to their children, whether by facilitating “warm transfers,” in which an officer places a parent on the phone with a provider, or by standing by with the parent to call existing or new providers on behalf of the

children; and

- educate parents succinctly about the negative short- and long-term effects that police incidents can have on children’s psyches, helping rebut the widely held view that children are “too young to understand” (see Appendix C for example information that can be left with parents), while providing information on local resources.

## Interaction with Children

If two officers are on the scene, the parent is compliant and officer safety is not in question, one officer should:

- converse with children present in a separate area;
- consider ramifications of questioning children in the presence of the arrested parent;
- speak to any children present using developmentally informed and age-appropriate language and conversation styles (Appendix C contains materials to assist officers in using language and conduct for children at different stages of development);
- avoid negative interactions with the arrested parent in the presence of children whenever possible;
- involve the parent in explaining the incident and allaying children’s anxiety by focusing on what will happen next; and
- help children present calm themselves by providing distractions and, when appropriate, an item to hold (e.g., a teddy bear).

## When Arrestee is Sole Caregiver

If an arrestee is the sole caregiver of one or more children, officers should:

- follow local protocol for transferring custody of children to a state agency and
- ensure the transfer of custody occurred as required.

## When an Alternate Caregiver Is Available

If a parent is arrested and another caregiver is available, officers should:

- inform the remaining caregiver that children are often traumatized by observing or hearing about<sup>59</sup> a parent's arrest;
- where possible, provide referrals to child, family and youth services to address the trauma of the experience and help mitigate its effects; and
- help physically transfer the child to another location, if necessary, while giving the child the opportunity to bring comforting objects from home.

### After Resolution of an Incident

After a parental arrest is resolved, departments should:

- where possible and appropriate, enable an officer to return to the home and visit children affected to demonstrate concern for their safety and well-being;
- follow up with service providers; and
- confer with the interagency team about outcomes.

### Policy, Practice and Protocol Changes for Non-Officers

Changing officers' policies and practices will require changes in the policies and practices of other members and operations within the agency:

- Dispatch
  - Protocols should be reformulated to require dispatchers to request information about the presence and age of children.
- Record Keeping
  - Agencies should develop a checklist for officers to complete when arresting a parent in the presence of a child.
  - Rather than consisting of a passive list, the checklist should require officers to affirmatively indicate (e.g., by checking a box) that they have completed specific tasks. This approach allows supervisors to verify that officers are adhering to the protocol and that children are safe in the wake of incidents.

- See Appendix D for an example of a checklist.
- Data Collection
  - Agencies should revise existing data collection systems to reflect officers' referrals and collaboration with youth-serving agencies.

## Interagency Teams

Perhaps more than with any other group of people, the lives of children and the adults responsible for them are subject to a wide array of laws and regulations. Interactions with families, child protective services, family crisis agencies and schools are unavoidable. Although these facts have the potential to cause problems for law enforcement agencies, they can also contribute to solutions. When law enforcement agencies welcome the development of strong partnerships with youth-serving agencies, the likelihood of successful and effective intervention increases and calls for service to law enforcement decrease.<sup>60</sup>

Interagency teams should include representatives of agencies legally obligated to serve children and community-based service agencies that understand the community. Child advocates should be invited to participate and provide feedback on the effects of the approach adopted by law enforcement. In addition to representatives of law enforcement agencies, these partnerships should include representatives of:

- child protective services,
- community-based domestic violence programs, and
- public and private child mental health and family crisis services.

The California Research Bureau's 2007 report provides a useful model memorandum of understanding (MOU) that helps define the roles and responsibilities of members of interagency teams (see Appendix F). The authors note that while the MOU can be customized to local circumstances, "ideally this Model [interagency] Protocol would supersede the more limited joint response protocols



adopted by jurisdictions for specific kinds of arrest situations (such as domestic violence and suspected child abuse and/or neglect).”<sup>61</sup>

Effective interagency partnerships are characterized by information-sharing, mutual trust and a commitment to the best interests of children.

Approaches for maintaining such partnerships include:

- co-housing (e.g., placing child protective service workers and domestic violence victim advocates in the same space as law enforcement),
- regular team meetings, and
- confidential internal documentation that describes cases and outcomes and enables team members to discuss challenges and concerns.

Interagency teams should have several goals and functions:

- Identify what information may legally be shared within and across agencies by consulting state law and federal guidelines.
- Ensure regular and consistent communication within and across agencies, including among team members about individual cases, interventions and their effects.
  - For example, an officer at the scene of a domestic violence incident involving children should send an email to the SRO the night of the arrest to explain that the child may be agitated at school the next day; subsequently, the SRO should email the school’s mental health services personnel to proactively intervene and support children experiencing “day after” emotions.
  - As a second example, when an officer refers a parent to mental health services after a child has observed an arrest or domestic violence incident, mental health personnel should, where permitted, report back to officers on the status of the referral.
- Document interactions and collect data to identify trends and keep team members

apprised of team activities.

- Create a shared case file system to enable each member of the team to update case information based on their interaction with the family.
  - Seek the support of local universities in developing a shared case file system that also permits statistical aggregation of data.
- Create innovative new approaches to meeting the needs of families and children.

Interagency teams should view themselves as works in progress. They should routinely review and revise team policies and practices, including data collection and sharing practices, to adjust to circumstances not anticipated when the team was formed. Finally, teams should designate a member to follow emerging research on responding to children of arrested parents and share that research with the team.

## Trauma-Informed Training

Remarkably, while much law enforcement work takes place in traumatic situations, officers are not trained to recognize traumatized responses or understand how trauma manifests in children and youth. They are primarily taught to recognize shock, the physical manifestation of trauma. Indeed, some officers believe that only veterans of war can be diagnosed with post-traumatic stress disorder (PTSD) and do not recognize their own vulnerability resulting from chronic exposure to traumatic events.

As public understanding of the short- and long-term impact of trauma has improved, law enforcement standard-setting agencies have taken steps to reduce or mitigate any trauma the actions of law enforcement officers may cause. These steps come in conjunction with pressure from states to adopt trauma-informed approaches.

SAMSHA has defined a trauma-informed approach as a “program, organization, or system that...

- realizes the widespread impact of trauma and understands potential paths for recovery;

- recognizes the signs and symptoms of trauma in clients, families, staff and others involved with the system;
- responds by fully integrating knowledge about trauma into policies, procedures and practices; and
- seeks to actively resist re-traumatization.”<sup>62</sup>

From SAMHSA's perspective, it is critical to promote the linkage to recovery and resilience for those individuals and families affected by trauma. Consistent with SAMHSA's definition of recovery, services and supports that are trauma-informed build on the best available evidence and consumer and family engagement, empowerment and collaboration.

Education on implementing trauma-informed approaches includes recognizing trauma symptoms and acknowledging the role trauma plays in individuals' lives. When an agency adopts a trauma-informed approach it must promote the six key trauma-informed principles of safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice and choice; and cultural, historical and gender issues. In addition, evidence-based, trauma-specific services and treatments must be available to meet these needs.

Training should include members of interagency teams. Cross-training is essential because all members of interagency teams must understand the:

- impact of trauma on brain development and behavior;
- need to recognize traumatized behaviors;
- importance of de-escalation skills in avoiding re-traumatization of children, youth and family members;
- way that history, race and gender affect community perceptions of government authorities;
- trauma triangle theory, which describes how victims view people in their world as rescuers, abusers and victims and the ways in which

officers' conduct can keep them squarely in the role of rescuer;

- roles, resources and constraints of each team member in responding to trauma and sharing effective approaches for doing so; and
- legal obligations of mandated reporters.

The most comprehensive training created by a law enforcement organization is that of the California Peace Officers Standards and Training (POST). The California POST, in conjunction with advocates from SFCIPP, developed a training video entitled *Responsibility for Children When the Parent Is Arrested*. The video makes the case for law enforcement to take a trauma-informed, trauma-mitigating approach and showcases best practices for such situations. The California POST approach also emphasizes the value of cross-training and the value of interagency learning approaches.

## Data Collection Systems and Practices

It is important to develop a data collection plan when implementing the policies and procedures recommended above. In addition to providing an invaluable feedback loop on various practices, it helps agencies demonstrate the extent of the impact of these issues, make the case for services, explain the need for resources to local authorities and identify the most effective approaches.

The most important data fields to capture will vary according to the program and approach. In most cases, however, officers should be equipped to collect data on incidents, including:

- people present during incidents, including the number of children and adults;
- times of referrals, both on-scene and after the fact, to child-serving agencies;
- responses of parents to referrals, including acceptance, rejection and reasons for rejection;

- where applicable, reasons parents decided not to involve child protective services;
- materials provided to educate parents on the impact of exposure to trauma on children's mental and physical health; and
- disclosure of information to SROs.

Law enforcement agencies should be equipped to collect data on officers' and civilian staff members' interactions during incidents, including:

- completion of checklists;
- follow-up visits to families;
- actions taken during follow-up visits;
- materials provided to educate parents on the impacts of trauma on children; and
- disclosure of information to SROs.

Law enforcement agencies should also be equipped to collect more general data on incidents and calls for service, including:

- the date, time, location and nature of calls for service;
- the date, time, location and nature of crime incidents;
- what charges, if any, calls for service and crime incidents result in;
- whether calls for service and crime incidents involve parental arrest;
- whether a parent has been arrested at locations of calls for service and crime incidents;
- the referrer name, referee name, time and method of any referrals, whether on-scene or after-the-fact, to child-serving agencies;
- the date, time, location and nature of warrants and raids; and
- whether children reside in homes where warrants and raids are conducted.

Interagency partners should collect data on:

- provision of services;
- clients' acceptance of services as a function

of referral time and involvement of law enforcement;

- services provided to children on-scene; and
- reasons parents decline services.

## Examples of Effective Models for Responding to Children of Arrested Parents

### Connecticut: Manchester and Waterbury

#### Components

The model adopted in Manchester and Waterbury, Connecticut, takes the original model of the Yale Child Development-Community Policing model one step further. Known as Responding to Children of Arrested Caregivers Together (REACT), the model resulted from separate statewide initiatives to improve services for children of incarcerated parents and ensure all service providers adopt trauma-informed approaches. The REACT model seeks to integrate services to children earlier in the process and at the most critical time for children's recovery.

REACT's goals are to:

- minimize traumatic stress in children,
- provide training and resources for law enforcement,
- improve collaboration between law enforcement, mental health and child welfare systems to more effectively deliver services to children, and
- identify high-risk children early and prevent the need for more significant and costly interventions.

#### Staffing

The departments designate officers to conduct follow-up visits.

#### Protocol

In addition to agency policy and procedures being revised, all officers are given a REACT field card (see

Appendix E) directing them to consider whether the child's environment is safe and secure and whether the arrestee is the sole caregiver of the child. The card also provides officers with a single point of contact to obtain assistance from Emergency Mobile Psychological Services (EMPS), a mobile crisis intervention service funded by the State of Connecticut.

### Interagency Team Members on Scene

Two full-time child protective workers are housed in the department. Psychological support providers are a call away and can be on scene if the officer requests their presence. The REACT model ensures that all calls are answered immediately to encourage "warm transfers" of victims, whether parents or children, to clinicians. The state assigns each child a single case number used by all agencies, which facilitates interagency data sharing. Finally, the interagency team members working on REACT also collaborate with the departments' Crisis Intervention Teams.

### Unique Characteristics

- Police protocol encourages officers to refer the remaining parent or caregiver of a child who observed a parental arrest to EMPS; EMPS then provides a trauma-informed response to the needs of the child and family at the time of the incident and through assignment to counselors near the family's residence.
- EMPS can also assist officers in de-escalating situations by phone.
- REACT places a heavy emphasis on frequent training and cross-training.
- REACT incorporates ongoing technical assistance from experts in child exposure to trauma and trauma-informed approaches.

### Technology

A single phone number links officers directly to mental health services for children.

### Training

Cross-training law enforcement officers, child protective service workers and members of EMPS is a key element of the model. This training emphasizes

the value of collaborating, outlining team members' functions and resources and routinely checking back on the progress of families. A key aspect of the training is ongoing technical assistance to the team and assistance in modifying policies and practices based on feedback from team members.

### Data Collection

The REACT program requires all team members to collect data on various aspects of their participation in interventions. This data is reviewed regularly at team meetings. In addition to determining the impact of REACT, the data collected is helpful in both dispelling and raising concerns, which can lead to discussions about changes in practice.

## California: Fresno

### Components

With a grant authorized by the federal Children's Justice Act,<sup>63</sup> the Fresno Police Department (FPD) developed an interagency approach to reducing children's exposure to domestic violence and, secondarily, mitigating the trauma of exposure to parental arrest. FPD created a Children Exposed to Domestic Violence (CEDV) team. This team was designed to provide services that go beyond those typically provided by patrol, such as developing a connection to the family, identifying needs and providing referrals to services. As part of this effort, FPD also created a single point of contact for officers responding to after-hours domestic violence (DV) calls and assigned a single sergeant to oversee all DV calls.

### Staffing

The team included a detective, a DV advocate and a child protective services (CPS) worker:

- Detectives support patrol officers, connect to victims and children to build rapport and ensure cases are properly investigated and documented for prosecution.
- DV advocates provide immediate services to victims, including children, help victims understand how DV affects children and conduct safety planning.

- CPS workers focus on children and conduct safety assessments to determine whether children should be removed from the home.

### Protocol

Protocols and procedures developed for the CEDV team were circulated and integrated into the protocols for the response team, safety patrols, call outs, the Domestic Violence Apprehension Team, the Domestic Violence Repeat Offender Team and the service log.

### Interagency Team Members on Scene

- Patrol
- Detectives
- Major Crimes Unit (for the most serious cases)
- DV Advocate
- CPS Social Worker

### Unique Characteristics

- Fresno’s program emphasizes a team approach.
- Adult victims and children have immediate access to services from staff who can ensure provision of services in a timely manner.
- Detectives provide technical assistance to patrol officers.
- “Safety patrols” follow up after incidents to ensure no new crimes are committed, maintain rapport with the victim and ensure the victim participates in the court process.
- DV advocates and CPS social workers continuously monitor the safety of victims and children and oversee use of services.
- Fresno’s program has a special focus on teens who are victims or suspects in cases involving violence where the teen had grown up in a home with DV.
  - In line with this program, the team also made presentations at local high schools about DV.

### Technology

A single phone number links responding officers with a designated agency coordinator.

## California: San Francisco

### Overview

On May 7, 2014, the San Francisco Police Department (SFPD) adopted Department General Order (DGO) 7.04, one of the first law enforcement policies in the United States to provide specific guidelines for the treatment of children during the arrest of a parent. Entitled “Children of Arrested Parents,” the policy aims to “minimize the disruption to the children of an arrested parent by:

- providing the most supportive environment possible after an arrest,
- minimizing unnecessary trauma to the children of an arrestee, and
- determining the best alternative care for the children that is safe.”<sup>64</sup>

### Background

The adoption of DGO 7.04 represented the culmination of more than a decade of efforts by SFCIPP to change the treatment of children at the time of parental arrest and incarceration. Starting from the belief that “a children’s [sic] perspective was the logical framework from which all future work should evolve,” SFCIPP interviewed children, parents, defense attorneys and child welfare workers to develop a “bill of rights” that reflected the emotional needs of children.<sup>65</sup> The eventual result was a pamphlet entitled “Children of Incarcerated Parents: A Bill of Rights.”

Released in 2003, the pamphlet frames rights in terms of children’s best interests. It also challenges the pervasive myth that arrest automatically terminates an arrestee’s parental rights. Under the banner of turning “rights [in]to realities,” the pamphlet also outlines several recommendations for law enforcement:

- Develop arrest protocols.
- Avoid using police equipment, including sirens, to limit fear and shame.
- Give children a chance to speak with arrested parents.
- Where possible, handcuff parents out of the view of children.
- Offer children an age-appropriate explanation of what is happening to the parent.

## Policy

DGO 7.04 enumerates several procedures for SFPD officers to follow in assisting personnel from the Family and Children’s Services (FCS) division of San Francisco’s Human Services Agency. Specifically, the policy charges officers with:

- asking arrestees whether children for whom they are responsible are present;
- checking for signs that children may be present;
- attempting, when safe, to make arrests out of view of children;
- allowing, when safe, arrested parents to reassure children;
- considering the potential presence and ages of any children when planning arrests or search warrants;
- attempting to identify alternative caregivers for children of arrested parents;
- informing FCS of the situation promptly after arresting a parent;
- contacting SROs when parents are arrested while their children are at school; and
- providing contact information in the incident report for any alternative caregivers identified and SROs or FCS personnel contacted.

## Training

Initially, SFCIPP and staff from child welfare agencies provided short training sessions related to trauma and parental arrest during SFPD roll calls in areas of the city where parental arrest was most prevalent.

Later, under the leadership of Chief Greg Suhr, whose administration adopted DGO 7.04, training was extended to all of SFPD.

SFPD has also developed its own training videos and materials, which are provided to officers both in the academy and in-service. The videos begin with Chief Suhr and other members of the command staff making the case for child-sensitive approaches. Then, the videos show typical arrest scenarios where children are and are not present and demonstrate the right and wrong way of handling an arrest. Unlike other training videos, SFPD’s videos also demonstrate the need to ask adults being taken into custody whether they have children and need assistance in making arrangements to meet their needs.

## Interagency Teams

The development of interagency teams to address the needs of children of arrested parents came after many meetings in which SFPD and FCS worked to overcome agency boundaries and ensure that the roles and responsibilities of officers and case workers were configured to meet children’s needs. This process required the agencies to collect data on children of arrested and incarcerated parents and reconsider the role of child welfare workers. Specifically, the role of child welfare workers was expanded to include a focus on placing children with family members to proactively reduce the trauma of placement in state custody.

## Unique Characteristics

SFPD’s policies and practices were directly affected by a 10-year process involving community advocates, child advocates, defense attorneys, children of incarcerated parents and the service providers who support them. Through their collaboration, these advocates produced research documenting the harm that results when officers lack the training or understanding to mitigate trauma and interact proactively with children at the time of arrest. While the research reflected what many saw, SFCIPP differed by using the information to develop a bill of rights



and push for institutional change. This advocacy has transformed practices at SFPD and resulted in a national model of proactive, child-focused policing.

## Conclusion

As outlined in this report, the evidence is now clear that failing to provide traumatized children with the support they need has substantial human and financial costs in the short- and long-term. It is also clear that experiencing the arrest of a parent is an all-too-common cause of trauma in children. Accordingly, law enforcement officers have a unique opportunity to limit trauma's heavy toll by connecting children with the support they need in the immediate aftermath of traumatic events.

Policymakers and law enforcement agencies can capitalize on this opportunity by implementing policy, practice and protocol changes that increase awareness of trauma in children and support collaboration between law enforcement and human service agencies. Successful models typically include new policies, interagency teams, trauma-informed training and enhanced data collection. Communities in several states, including California and Connecticut, have already implemented effective models and continue to collect data to inform this important and evolving aspect of public policy.



# Endnotes

<sup>1</sup> International Association of Chiefs of Police and U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance, "Safeguarding Children of Arrested Parents," August 2014, <https://www.bja.gov/Publications/IACP-SafeguardingChildren.pdf>.

<sup>2</sup> Bartholomew, Jenni M.B., Mark I. Singer, Andres Gonzalez, and Michael Walker, "Police Assisted Referrals: Empowering Law Enforcement to Be First Social Responders," Law Enforcement Executive Forum 13, no. 4 (2013).

<sup>3</sup> Ibid.

<sup>4</sup> Children are more likely than adults to be exposed to or victims of violence. Child Trends, "Children's Exposure to Violence: Indicators on Children and Youth," (Bethesda, MD: Child Trends, July 2013), available online at [http://www.childtrends.org/wp-content/uploads/2012/07/118\\_Exposure\\_to\\_Violence.pdf](http://www.childtrends.org/wp-content/uploads/2012/07/118_Exposure_to_Violence.pdf), 2, citing Finkelhor, David, Heather Turner, Richard Ormrod, Sherry Hamby, and Kristen Kracke, "Children's Exposure to Violence: A Comprehensive National Survey," (Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention, October 2009), available online at <https://www.ncjrs.gov/pdffiles1/ojdp/227744.pdf>.

<sup>5</sup> Felitti, Vincent J., Robert F. Anda, Dale Nordenberg, David F. Williamson, Alison M. Spitz, Valerie Edwards, Mary P. Koss, and James S. Marks, "Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study," American Journal of Preventive Medicine 14, no. 4 (1998): 245-258.

<sup>6</sup> Substance Abuse and Mental Health Services Administration, "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach," (Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014), available online at <http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>, 7.

<sup>7</sup> U.S. Attorney General's National Task Force on Children Exposed to Violence, "Report of the Attorney General's National Task Force on Children Exposed to Violence," (Washington, DC: U.S. Department of Justice, 2012), available online at <http://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>, 3.

<sup>8</sup> Ibid., 5.

<sup>9</sup> Lang, Jason M., and Christopher T. Bory, "A Collaborative Model to Support Children Following a Caregiver's Arrest: Responding to Children of Arrested Caregivers Together (REACT)," (New Britain, CT: Central Connecticut State University, Institute for Municipal and Regional Policy, September 2012), available online at [http://www.chdi.org/files/7914/1200/4697/children\\_of\\_incarcerated\\_parents.pdf](http://www.chdi.org/files/7914/1200/4697/children_of_incarcerated_parents.pdf), 8.

<sup>10</sup> A Bureau of Justice Statistics study found that in 2007 slightly more than 1.7 million children under age 18 had a parent in state or federal prison, representing 2.3 percent of the total U.S. youth population. The number of children with a father in prison increased from 881,500 in 1991 to more than 1.5 million in 2007, a 77 percent increase. Glaze, Lauren and Laura Maruschak, "Parents in Prison and Their Minor Children," (Washington, DC: Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, 2008), available online at <http://www.bjs.gov/content/pub/pdf/pptmc.pdf>.

<sup>11</sup> The best data available on reasons for arrests of female parents comes from California, which has the largest female prison

population in the United States. According to an article published by the California Research Bureau (CRB), "The number of adult women incarcerated in California prisons increased nearly nine times between 1980 and 1998, from 1,316 to 11,694. In 1998, 43 percent of California's women felons were incarcerated for drug crimes, 30 percent for property crimes and 24 percent for crimes against other people. The number imprisoned for drug crimes more than tripled between 1983 and 1998, while the number of imprisoned for violent crimes declined..." Research on a national scale has found an even larger proportional increase in women's imprisonment due to drug crimes. The same CRB report notes: "The number of women incarcerated in state prisons for a drug offense rose by 888% from 1986 to 1996." Simmons, Charlene Wear. "Children of Incarcerated Parents." California Research Bureau Note 7, no. 2 (2000), 7.

<sup>12</sup> Christian, Steve, "Children of Incarcerated Parents," (Washington, DC: National Conference of State Legislatures, March 2009), available online at <http://www.f2f.ca.gov/res/pdf/ChildrenOfIncarceratedParents2.pdf>, 2.

<sup>13</sup> "The survey's sponsors believe the data likely understate children's actual exposure to violence because they rely on family members to report incidents, some of which may be undisclosed, minimized, or not recalled." Child Trends, "Children's Exposure to Violence," 3, citing Finkelhor et al., "Children's Exposure to Violence."

<sup>14</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 6.

<sup>15</sup> This assertion is supported by several facts cited in a report from the Violence Policy Center. First, access to firearms increases the risk of intimate partner homicide by a factor of five. Second, women are five times as likely to be killed by an abuser if the abuser owns a firearm. Third, the presence of guns in a home is associated with a threefold increase in homicide risk in that home. Violence Policy Center, "When Men Murder Women: An Analysis of 2012 Homicide Data," (Washington, DC: Violence Policy Center, 2014), available online at <http://www.vpc.org/studies/wmmw2013.pdf>. See also Jacquelyn C. Campbell et al., "Risk Factors for Femicide in Abusive Relationships: Results from a Multi-Site Case Control Study," American Journal of Public Health 93, no. 7 (July 2003).

<sup>16</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 34.

<sup>17</sup> Carrion, Victor G., Carl F. Weems, Christa Watson, Stephan Eliez, Vinod Menon, and Allan L. Reiss, "Converging evidence for abnormalities of the prefrontal cortex and evaluation of midsagittal structures in pediatric posttraumatic stress disorder: an MRI study," Psychiatry Research: Neuroimaging 172, no. 3 (2009): 226-234.

<sup>18</sup> McCrory, Eamon J., Stéphane A. De Brito, Catherine L. Sebastian, Andrea Mechelli, Geoffrey Bird, Phillip A. Kelly, and Essi Viding, "Heightened neural reactivity to threat in child victims of family violence," Current Biology 21, no. 23 (2011): R947-R948.

<sup>19</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 29.

<sup>20</sup> Ibid., v.

<sup>21</sup> Child Trends, "Children's Exposure to Violence," 8.

<sup>22</sup> Lang and Bory, "Collaborative Model," 13.

<sup>23</sup> Child Trends, "Children's Exposure to Violence," 4.

<sup>24</sup> Ibid., 5.

<sup>25</sup> Ibid., 6.

<sup>26</sup> National Child Traumatic Stress Network, "Children and Domestic Violence Fact Sheet Series," (Los Angeles, CA, and Durham, NC: National Child Traumatic Stress Network, April 2013), available online at [http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv\\_factsheetseries\\_complete.pdf](http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheetseries_complete.pdf).

<sup>27</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 30.

<sup>28</sup> Ibid., 110.

<sup>29</sup> Sudbury-Wayland-Lincoln Domestic Violence Round Table, "The Effects of Domestic Violence on Children," <http://www.domesticviolenceroundtable.org/effect-on-children.html>.

<sup>30</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 171.

<sup>31</sup> Domestic Violence Round Table, "Effects of Domestic Violence."

<sup>32</sup> National Child Traumatic Stress Network, "Children and Domestic Violence," <http://www.nctsn.org/content/children-and-domestic-violence>.

<sup>33</sup> Superior Court of California, County of Fresno, "Domestic Violence Issues," [http://www.fresno.courts.ca.gov/family/domestic-violence\\_issues.php](http://www.fresno.courts.ca.gov/family/domestic-violence_issues.php).

<sup>34</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 4.

<sup>35</sup> National Child Traumatic Stress Network, "Children and Domestic Violence."

<sup>36</sup> "There were also significant correlations in the expected direction between childhood variables and early adolescent problem behaviors for both girls and boys. For girls, social skills and child-parent bonding were negatively correlated with each type of early adolescent problem behavior, while parental IPV was significantly and positively correlated with internalizing and externalizing behaviors..." Maas, Carl D., Charles B. Fleming, Todd I. Herrenkohl, and Richard F. Catalano. "Childhood predictors of teen dating violence victimization." *Violence and Victims* 25, no. 2 (2010): 131-149.

<sup>37</sup> Karpman, Stephen. "Fairy tales and script drama analysis." *Transactional Analysis Bulletin* 7, no. 26 (1968): 39-43.

<sup>38</sup> Attorney General's National Task Force on Children Exposed to Violence, "Report," 29.

<sup>39</sup> Harm, Nancy J. and Susan Phillips, "Helping Children Cope with the Trauma of Parental Arrest," *Interdisciplinary Report on At-Risk Children and Families* 1 (1998), 35-37.

<sup>40</sup> Ibid.

<sup>41</sup> The National Survey of Child and Adolescent Well-Being (NSCA) used a sample of 1,869 children age 8 through 18. Members of this sample who witnessed the arrest of a family member and had a recently arrested parent had a 73 percent greater likelihood of having elevated post-traumatic stress symptoms.

<sup>42</sup> *White v. Rochford*, 592 F.2d 381 (7th Cir. 1979).

<sup>43</sup> A cursory review of news articles on the Internet finds several

examples of law enforcement officers using force against children during raids. One of the two best documented examples occurred on May 16, 2010, when the Detroit Police Department's Special Response Team, led by the Chief of Police, shot and killed a 7-year-old girl as she slept in her bed. The police later learned that they had gone to the wrong address. The other best documented example occurred on May 28, 2014, when the Habersham County, GA, Sheriff Department SWAT team threw a flash grenade that landed in a baby's crib, seriously wounding and disfiguring him. The person the officers were searching for was not in the home. Other stories describe the use of force on children, including punching, hitting with guns and pointing firearms at them.

<sup>44</sup> IACP, "Safeguarding Children," ix.

<sup>45</sup> Ibid., 14.

<sup>46</sup> Ibid., 1.

<sup>47</sup> San Francisco Children of Incarcerated Parents Project (SFCIPP), "Children of Incarcerated Parents: A Bill of Rights," Summer 2005, <http://www.sfcipp.org/images/brochure.pdf>, 3.

<sup>48</sup> Puddefoot, Ginny and Lisa K. Foster, *Keeping Children Safe When Their Parents Are Arrested: Local Approaches That Work*, (Sacramento, CA: California Research Bureau, July 2007), available online at <http://www.library.ca.gov/crb/07/07-006.pdf>

<sup>49</sup> "Adverse Childhood Experiences (ACE) Study," Centers for Disease Control and Prevention, <http://www.cdc.gov/ace/findings.html>.

<sup>50</sup> In 2014, both houses of the California State Legislature unanimously voted to adopt Assembly Concurrent Resolution No. 155, Relative to Childhood Brain Development. This Resolution identifies the extent of trauma in children's lives (based on the Adverse Childhood Experiences study of 17,000 Californians) and urges the Governor to "reduce children's exposure to adverse childhood experiences, address the impacts of those experiences, and invest in preventive health care and mental health and wellness interventions."

<sup>51</sup> California Welfare Institutions Code, Chapter 635, Statutes of 2005 (AB 760) provides that when, during booking, an arrested person is determined to be a custodial parent of a minor child or children, the person is entitled to make two telephone calls at no expense for the purpose of arranging for the care of the minor child or children. Available online at [http://www.leginfo.ca.gov/pub/05-06/bill/asm/ab\\_0751-0800/ab\\_760\\_bill\\_20051007\\_chaptered.pdf](http://www.leginfo.ca.gov/pub/05-06/bill/asm/ab_0751-0800/ab_760_bill_20051007_chaptered.pdf).

<sup>52</sup> California Welfare Institutions Code Chapter 729, Statutes of 2006 (AB 1942) expresses the intent of the Legislature to encourage law enforcement and the state Commission of Peace Officers Standards and Training (POST) to develop guidelines and training for use by state and local law enforcement officers that address issues concerning child safety when a parent or guardian is arrested. Available online at [http://www.leginfo.ca.gov/pub/05-06/bill/asm/ab\\_1901-1950/ab\\_1942\\_bill\\_20060929\\_chaptered.pdf](http://www.leginfo.ca.gov/pub/05-06/bill/asm/ab_1901-1950/ab_1942_bill_20060929_chaptered.pdf).

<sup>53</sup> "CONNECT (The Connecticut Network of Care Transformation)," Child Health and Development Institute of Connecticut, Inc., <http://www.chdi.org/our-work/mental-health/systems-development/connect/>.

<sup>54</sup> SAMHSA, "Concept of Trauma," 10.

<sup>55</sup> Ibid.

<sup>56</sup> The IACP report recommends that agencies "require emergency communications operators to ask whether a child is present as a standard part of their protocol." IACP, "Safeguarding Children," 13.

<sup>57</sup> Ibid., 12.

<sup>58</sup> In its recently issued report on child abuse, the Office of Juvenile Justice and Delinquency Prevention recommends that officers arriving at domestic violence situations should “speak with the children separately and privately to gather information about the situation directly from them and assess their need for protection. In addition, officers should look for any physical signs that a child may have been abused. They should keep in mind that a child in this situation is likely to be afraid and withdrawn and that nervousness or a reluctance to talk may be an indicator that physical or emotional abuse has taken place. The officer should also remember that despite an occurrence of domestic abuse, a child may be reluctant to leave the residence.” U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention, “Law Enforcement Response to Child Abuse: Portable Guide to Investigating Child Abuse,” (Washington, DC: U.S. Department of Justice, Office of Justice Programs, July 2014), available online at <http://www.ojjdp.gov/pubs/243907.pdf>, 7.

<sup>59</sup> It is important to remember that incidents can be traumatic for children even if they have not observed the arrest.

<sup>60</sup> Bartholomew et al, “Police Assisted Referrals.”

<sup>61</sup> Puddefoot and Foster, *Keeping Children Safe*, 39-44.

<sup>62</sup> SAMHSA, “Concept of Trauma,” 9.

<sup>63</sup> “The CEDV Specialized Response Program is supported by federal Children’s Justice Act (CJA) funds. The CJA is supported by the Federal Crime Victim’s Fund, an amalgamation of fines and fees collected from defendants convicted of federal crimes. The Crime Victim’s Fund is administered by the United States Department of Justice, Office of Victims of Crime (OVC). CJA grants are awarded by the Administration on Children, Youth, and Families, United States Department of Health and Human Services, as authorized by Section 107 of the Child Abuse Prevention and Treatment Act (CAPTA), as amended, October 3, 1996.” California Emergency Management Agency, “Children Exposed to Domestic Violence (CEDV) Specialized Response Program, Request for Application (RFA) for Fiscal Year 2011/2012,” <http://www.calema.ca.gov/GrantsProcessing/Documents/EV11%20RFA.pdf>, 5.

<sup>64</sup> San Francisco Police Department, “Children of Arrested Parents,” General Order DGO 7.04, available online at <http://sf-police.org/modules/showdocument.aspx?documentid=27381>.

<sup>65</sup> SFCIPP, “Bill of Rights,” 2.

# Appendices

## Appendix A: Examples of Protocols from Law Enforcement Agencies



### Manchester Police Department Policy

Chapter 9 Disabled	Policing Protocol	Section 12	Mentally Ill or Gravely Disabled
	Intervention Model		Individuals, Crisis Team (CIT), and REACT
Effective	December 18, 2013	Rescinds	April 8, 2011
Issuing Authority	Chief Marc Montminy	SOP:	9-12
CALEA Standard(s):	41.2.7a - e, 72.5.4, 72.6.1		
Risk:	High		

#### PURPOSE

To establish the policies and procedures which govern the handling of mentally ill or gravely disabled individuals by personnel of the Manchester Police Department.

To establish the policies and procedures under which the Crisis Intervention Team (CIT) may operate to ensure a coordinated response in providing services to individuals who are mentally ill or involved in a crisis.

To establish the policies and procedures under which personnel of the Manchester Police Department will implement the REACT model.

#### DEFINITIONS

- A. Crisis Incident: Any call in which an individual would benefit from the specialized training and knowledge of the CIT member. Crisis incidents include but are not limited to calls involving: persons known to have mental illness who are experiencing a crisis, persons displaying behavior indicative of mental illness, attempts or threatened suicides, calls involving gravely disabled individuals or calls in which individuals may be experiencing an emotional trauma.
- B. Mentally Ill: A person who has a mental or emotional condition, which has substantial adverse effects on their ability to function and who requires care and treatment. Persons who are alcohol and/or drug dependent are specifically excluded from this category.
- C. Gravely disabled: A condition in which a person, as a result of mental or physical impairment, is in danger of serious harm as a result of an inability or failure to provide their basic human needs (e.g. food, clothing, shelter) and as such the person is mentally incapacitated of determining whether or not to accept such treatment, including the ability to seek hospitalization or treatment, and/or purposely disregarding treatment through non-compliance and failure or refusal to take prescribed medications.

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- D. Risk of serious physical harm: A risk that a reasonable person would have that harm could be inflicted upon another as evidenced by recent overt acts, behavior or threats.
- E. Incapacitated Person: A condition in which a person, as a result of alcohol and/or drug abuse, has their judgment impaired, so that they are incapable of realizing and making a rational decision regarding the need for medical treatment.
- F. CIT Officer: A police officer who has successfully completed required training in crisis intervention techniques and is certified in first response crisis intervention. The CIT officer often works in partnership with a CIT clinician to respond to incidents of persons in crisis.
- G. CIT Clinician: When available and called upon a mental health professional who is trained in mobile outreach crisis intervention works in partnership with the CIT officers to effectively respond to incidents of persons in crisis.
- H. Reasonable Cause: Facts that would lead a person of ordinary care and prudence to believe and conscientiously entertain an honest and strong suspicion that the person in question is suffering from a mental illness or disorder.
- I. REACT Model: Responding to Children of Arrested Caregivers Together (REACT) - designed to provide tools and resources to law enforcement when an arrestee cares for a minor and to provide support to children and remaining family members when a caregiver is arrested.

#### POLICY

- A. Personnel of the Manchester Police Department shall adhere to the policies set forth below and the procedures in SOP 9-12 when dealing with mentally ill or gravely disabled individuals, serving warrants issued by the Probate Court, or making a Police Emergency Examination Request (PEER).
- B. Reporting Procedures.
  - 1. Contacts with mentally ill or gravely disabled individuals resulting in their being taken into protective custody must be documented in an incident report.
  - 2. The incident report shall include, but not be limited to, method of contact, method of transportation and place where transported, if applicable.
  - 3. Copies of the probate court warrant or the Police Emergency Examination Request (PEER) shall be attached to the incident report.
- C. Training.
  - 1. It shall be the responsibility of the Training Unit to provide and document entry-level training on mental illness and persons suspected of suffering from mental illness to agency personnel who may have contact with the public.
  - 2. It shall be the responsibility of the Training Unit to provide and document refresher training on mental illness and persons suspected of suffering from mental illness at least once every three years to agency personnel who may have contact with the public. **TS Activity.**

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1. It is the policy of the Manchester Police Department to respond to individuals with mental or behavioral health problems with professionalism, compassion and concern for the safety of all involved. During these incidents officers may use the Crisis Intervention Team (CIT) as a resource when available for identifying and providing services for the individuals in crisis.
  2. The Manchester Police Department has developed a proactive approach by using trained officers in the Field Services Division to respond to calls for service and initiate contact with citizens who are dealing with mental illness. By working actively with the mental health community, the program can promote favorable long-range alternatives when dealing with citizens who suffer from mental health problems. Citizens with on-going mental health problems can be identified and measures taken to reduce the frequency of police contacts.
- E. Seizure of Firearms of Person Posing Risk of Imminent Personal Injury to Self or Others. In the event that Manchester Police Department officers have probable cause to believe that a person who possesses a firearm or firearms poses a risk of imminent personal injury to self or others, those officers shall file a complaint and affidavit for a warrant to a judge of the Superior Court for seizure of such firearm or firearms.
- F. REACT (Responding to Children of Arrested Caregivers Together) Model. In the event that a full-custody arrest is made, a child is present at the time of the arrest, and the arrestee is the caregiver of said child, the arresting officer may determine that a referral to 211/EMPS is necessary. In the event an arrestee is taken into custody and it is determined that the arrestee care for a child or dependent who is NOT at the scene, the officer will ensure that the child or dependent is safe, utilizing all available resources which may include contacting the Department of Children and Families and/or other appropriate social service agencies.

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Chapter 9 Disabled Crisis Intervention	Policing Protocol	Section 12	Mentally Ill or Gravely Individuals,  Team (CIT), and REACT Model
Effective	December 18, 2013	Rescinds	April 8, 2011
Issuing Authority	Chief Marc Montminy	Policy:	9-12
CALEA Standard(s):	41.2.7a - e, 72.5.4, 72.6.1		
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## PURPOSE

To establish the policies and procedures which govern the handling of mentally ill or gravely disabled individuals by personnel of the Manchester Police Department.

To establish the policies and procedures under which the Crisis Intervention Team (CIT) may operate to ensure a coordinated response in providing services to individuals who are mentally ill or involved in a crisis.

To establish the policies and procedures under which personnel of the Manchester Police Department will implement the REACT model.

## PROCEDURES

### A. Guidelines for Recognition of Persons Suffering From Mental Illness.

1. Others saying the person is not him/herself,
2. Persons exhibiting behavior that is dangerous to themselves or others,
3. Persons exhibiting withdrawn behavior, talking only to themselves,
4. Persons experiencing sensations not based on reality such as visions, odors, tastes, voices,
5. Persons with unrealistic ideas or grand thoughts,
6. Persons that believe they are worthless,
7. Persons exaggerating events, and/or
8. Persons experience loss of memory and/or time.

### B. Accessing Available Community Mental Health Resources. Personnel shall be aware of available resources and shall refer to the Human Services Directory kept on the Shift Supervisor's desk. Additional resources include:

1. Community Child Guidance Clinic 860-643-2101

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2. Community Prevention & Addiction Services 860-645-0487
  3. CT Clearinghouse 800-232-4424 or 860-793-9791
  4. Genesis Center 877-884-3571
  5. Gero-Psychiatric PPH 860-647-6828
  6. Manchester Memorial Hospital 860-646-1222
  7. Senior Substance Abuse 860-647-3096
- C. Contact and Interviews and Interrogation. Personnel who interact with subjects who may be mentally ill should consider safety issues since a person with mental illness may react differently. This includes persons who are victims, witnesses and suspects.
1. Evaluate the situation,
  2. Do not abuse or threaten the person,
  3. Avoid unnecessary excitement, and
  4. Sworn personnel who find it necessary to interview or interrogate a person with a mental illness shall follow all laws and procedures that would apply to any other interview or interrogation.
- D. Police Emergency Examination Request.
1. Any officer who comes in contact with a person who he/she has reasonable cause to believe is mentally ill and dangerous to himself or others, or gravely disabled and in need of immediate care and treatment:
    - a. Shall take such person into custody and have the person taken to a hospital for an emergency examination.
      - i. The person may be restrained but only to the extent necessary to protect the person, officer and/or the public, using only that amount of force necessary to affect the restraint.
      - ii. The person shall normally be transported by ambulance but may be transported by the officer if circumstances warrant and with the shift supervisor's approval.
      - iii. Conduct a search of the individual and possessions for weapons and/or items that would constitute an obvious threat to the safety of the individual, the officer or the public.
    - b. Shall complete a written Police Emergency Examination Request (PEER) using the designated form, detailing the circumstances under which the person was taken into custody:
      - i. The request shall be left with the facility.

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- ii. A copy of the request shall be attached to the incident report.
- c. Sworn personnel shall be required to stand by at the hospital with the person in distress until the officer:
  - i. Completes and provides the Police Emergency Examination Request (PEER) to Emergency Department (ED) staff,
  - ii. Provides the staff member with a basic overview of the person's behavior (e.g., any known hazards such as threats and/or violent behavior),
  - iii. Remains on site at the ED while the person is registered and changed over into hospital clothing. (It is this time period where the greatest risk of violent behavior is likely to occur), and
  - iv. Notifies the ED Primary Nurse (the patient's assigned nurse) or Charge Nurse (ED Supervisory Nurse overseeing the staff of ED nurses) when the officer(s) are clearing the ED.
- 2. Probate Court Warrants. Probate Court can issue warrants directing the police department named to apprehend the person (respondent) named and have that person taken to the hospital named for:
  - a. An examination by a psychiatrist and a physician, or
  - b. A hearing before the Judge of Probate.
  - c. The warrant shall remain active until the person (respondent) named is apprehended.
- E. Duties of the Officers Serving the Warrant.
  - 1. Ensure that the DOB of the person for whom the warrant is issued appears on the warrant,
  - 2. Apprehend the person,
  - 3. Advise the hospital named in the warrant that the person (respondent) shall be transported to their facility,
  - 4. If necessary to protect the person, the officer or the general public, the officer may restrain the person ***using only that amount of force necessary to affect the restraint.***
  - 5. Determine the appropriate mode of transportation (ambulance or cruiser),
  - 6. Ensure the person is taken to the hospital named,
  - 7. Upon arrival at the hospital, turn the person over to the custody of a duly authorized representative of the hospital and have that representative sign the "received by" section at the bottom of the warrant form,

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8. Sworn personnel shall not be required to standby at the hospital. The Emergency Department staff may request a standby based upon the person's behavior (e.g. violent tendencies),
  9. Sign the "delivering officer" section, as well as complete the date, time, and delivering officer's department sections of the warrant,
  10. Ensure that the signed original copy of the warrant is returned to the appropriate Probate Court, and
  11. Attach a copy of the warrant to the incident report.
- F. Crisis Intervention Team (CIT).
1. Identifying CIT Calls for Service.
    - a. Communications/Dispatch is the primary source for identifying CIT calls; however, officers investigating an incident may classify it as a CIT situation.
    - b. Types of calls that may require CIT officers include, but are not limited to:
      - i. Attempted Suicides
      - ii. Mental Health Disorders
      - iii. Medical assists
      - iv. Traumatic Incidents
      - v. Sudden Deaths
  2. Communications Responsibilities.
    - a. When a crisis incident as described above is reported to Dispatch, the dispatcher may include a CIT officer if available to the assignment.
    - b. Communications shall attempt to compile the necessary information and record the information in the comments section of the CAD screen.
    - c. Dispatch can flag in PRIORS the CIT calls for service location when deemed appropriate.
  3. Police Officer Responsibilities.
    - a. CIT Officers will ensure that Communications knows that they are a CIT Officer when going in service.
    - b. Officers, upon arriving at the incident and identifying it as a CIT call, can request the assistance of a CIT Officer. Officers can also request to have Mobile Crisis Services respond to the scene, when available or they can utilize the Mobile Crisis Hotline for follow-up. The final decision as to the outcome or arrest of the subject is the responsibility of the primary officer, CIT Officer, or Supervisor on scene.
    - c. Officers shall complete the incident report and necessary documentation using the PRIORS incident report writing system.
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- d. In the event an emergency examination is deemed appropriate pursuant to CGS 17-183a an officer may elect to transport by police cruiser or ambulance.
  - e. In any incident that a subject is injured or physically ill, a police vehicle cannot be used and an ambulance will be requested.
  - f. After completion, a copy of all CIT reports and/or PEER forms shall be placed in the CIT coordinators mail box.
  - g. When possible, CIT officers shall volunteer for CIT calls as the primary or secondary responders if they are available.
  - h. CIT Officer can ask dispatch to flag in PRIORS the CIT calls for service location when deemed appropriate.
4. Supervisory Responsibilities.
- a. Supervisors may monitor the dispatching of CIT officers to the appropriate calls and ensure that appropriate resources are available to assist the officer. This includes calls at Community Health Resources (CHR).
  - b. They shall ensure that the Incident Report is properly filled out and that a report is left for the CIT coordinator.
  - c. In the event that a Sergeant or Lieutenant has completed CIT training, that supervisor will serve as a CIT field supervisor on shift and, if needed, at the scene of CIT calls.
5. CIT Program Coordinator.
- a. The Chief of Police will assign an officer to serve as the CIT Coordinator. The CIT Coordinator will serve as a liaison between the Police Department and the Department of Mental Health or its subcontracted agency providing Mobile Crisis Services and any other mental health provider in the Town of Manchester.
  - b. The CIT Coordinator will review reports, PEER forms, evaluate outcomes, prepare and forward a monthly report to the Chief of Police or his designee, outlining the status of the team, response to calls for CIT service statistics and attend Compstat meetings to make recommendations and resolve issues related to repeat calls for service.
  - c. The CIT Coordinator will ensure there are regular meetings held with the Mobile Crisis Unit Coordinator and will provide that unit coordinator with necessary reports to ensure proactive service is provided to those individuals identified by CIT officers as in crisis.
  - d. The Chief of Police or designee shall select the officers for CIT certification. Candidates shall attend a 40 hour certification program and receive in-service training as needed.
6. The CIT Coordinator will provide crime analysis for the Chief's monthly Compstat Meetings. A timely and accurate CIT analysis report on number and location of mental health calls for service will be available for the Compstat meetings.
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### G. Seizure of Firearms of Person Posing Risk of Imminent Personal Injury to Self or Others (Legal Authority CGS 29-38c).

1. In the event that any two police officers have probable cause to believe that a person who possesses a firearm or firearms poses a risk of imminent personal injury to self or others, those officers shall file a complaint and affidavit for a warrant to a judge of the Superior Court for seizure of such firearm or firearms. Probable cause must exist to believe that:
  - a. Such person poses a risk of imminent personal injury to self or other individuals.
  - b. Such person possesses one or more firearms.
  - c. Such firearm or firearms are within or upon anyplace, thing, or person.
2. Probable cause may be based on:
  - a. Recent threats or acts of violence directed towards self or others.
  - b. Recent acts of cruelty to animals.
  - c. Reckless use of brandishing of a firearm.
  - d. A history of use or threatened use of physical force against others.
  - e. Illegal use of controlled substances and/or abuse of alcohol.
  - f. Involuntary confinement to a mental hospital.
3. Police officers must have conducted an independent investigation and after such independent investigation, have determined that such probable cause exists and that there is no reasonable alternative to prevent such person from causing imminent personal injury to self or to others.
4. A copy of the warrant shall be given to the person named therein together with a notice informing the person that such person has the right to a hearing and the right to be represented by counsel.

### H. REACT Model.

1. Officers shall determine whether an arrestee is caring for children or other dependents.
  - a. Arresting officers shall make reasonable attempts to directly ask the arrestee if he/she is caring for minor children or other dependents, even if they are not present at the scene.
  - b. The officer shall observe for signs that suggest the presence of children or other dependents even if they are not present at the time of arrest (e.g. toys, diapers, strollers).

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2. Officers shall make reasonable efforts to provide persons taken into custody with an opportunity to arrange care for children dependent upon the arrestee for care. The existence of dependence; however, should not be the determining factor as to whether the arrestee is held in custody or released.
3. Whenever an arrestee is taken into custody, and is accompanied by a child or other dependent, the following procedures are to be followed:
  - a. When possible, the arrest shall be made out of the dependent's view
  - b. The officer will ask the arrestee about his/her preferences for the child or dependent's care and will attempt to place the child or dependent in the care of a suitable adult when possible. If another responsible and suitable adult is present with the arrestee, the arrestee may place the dependent in the care of that adult.
  - c. If it is determined by the responding officer that there are child(ren) and family needs that would be better served by an EMPS clinician, the officer will call 211/EMPS mobile crisis and request to have an EMPS clinician respond to assist with the child(ren) and family's needs. If a caregiver refuses 211/EMPS mobile crisis or the officer is unable to call 211/EMPS, the officer will leave information describing how to contact 211/EMPS mobile crisis in case the caregiver would like services in the future.
  - d. If the officer has concerns for the dependent's safety or cannot identify a suitable alternate caregiver, the officer will call the Department of Children and Families to ensure the alternative caregiver is appropriate.
  - e. An attempt will be made to ensure the children are informed in age-appropriate language about their caregiver's arrest, next steps, and who will care for the child while the arrestee is in custody. This could be done by the arrestee (if cooperative), alternate caregivers or family members, an officer, an EMPS clinician, or other responsible adult. The arrestee will be given the opportunity to speak with and reassure the child when feasible, safe, and in the child's best interest,
  - f. If another responsible adult is not present or refuses custody of dependent, the dependent will be transported to police headquarters in accordance with department guidelines. A reasonable effort will then be made to arrange for alternate care, taking into consideration the arrestee's wishes for alternate caregivers. If alternate arrangements are unable to be made in a reasonable time period, the investigating officer will contact the Department of Children and Families or other appropriate social service agency to make temporary custody arrangements,
  - g. Attempts will be made to provide remaining caregivers with basic information about the booking process and detention as well as how to follow-up on an arrestee's placement.

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4. When making a full custody arrest, a child is present at the time of arrest, the arrestee is the caregiver of said child, and a decision has been made by a responding Officer or Supervisor to contact 211/EMPS, the following protocol will be followed:
  - a. The Manchester Police Department will make a REACT referral when a caregiver is arrested and a child is present at the time of arrest.
  - b. In order to make a REACT referral, the officer will call 211/EMPS, then press 1.
  - c. The officer may call 211/EMPS from the scene.
  - d. The officer will provide the 211/EMPS hotline worker with the following information: location, names of persons involved, age of the child(ren).
  - e. The officer will remain on scene, if necessary, until EMPS personnel arrives; however, if the scene is safe to clear, the officer will do so.
  - f. The officer will explain to the caregiver that EMPS will be contacting them.
  - g. The officer will document that a REACT referral was made in their report. The officer will also check the REACT box on the general tab in the PRIORS Incident report.
  
5. When an arrestee is taken into custody and it is determined that the arrestee cares for a child or dependent who is NOT at the scene, the officer will ensure that the child or dependent is safe.
  - a. The officer will ask the arrestee about his/her preferences for the child or dependent's care and who should be notified about the arrest.
  - b. The officer will notify appropriate adults in order to confirm the child or dependent will be cared for (e.g. not sent home from school when nobody is home following the arrest)
  - c. If another appropriate adult is not available, the Department of Children and Families or other appropriate social service agency will be notified.
  - d. If an arrestee indicates that he/she is the caregiver of a dependent and the dependent was not at the scene of the arrest (e.g., at school), if appropriate and necessary, an arrestee may be granted additional phone calls to ensure an alternate caregiver is available to care for his/her dependent.

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## CHILDREN OF ARRESTED PARENTS

### I. POLICY

- A. The goal of responding officers and Family and Children's Services (FCS) workers is to minimize the disruption to the children of an arrested parent by providing the most supportive environment possible after an arrest, minimizing unnecessary trauma to the children of an arrestee, and determining the best alternative care for the children that is safe. The purpose of this policy is to establish the best methods for working with FCS and first responding officers.
- B. Nothing in this policy negates parental rights to choose *appropriate* placement for their children consistent with the procedures outlined below. Unless there is compelling evidence to the contrary (obvious drug use, weapons or other indicators of an unsafe environment) parental discretion shall be respected. However, FCS maintains the ultimate responsibility for determining placement in the event the parent does not designate placement.

### II. DEFINITION

CHILD. Any person under the age of 18.

### III. PROCEDURES

Responding officers shall assist FCS by adhering to the following procedures:

- A. When making an arrest, officers shall inquire about the presence of children for whom the arrested adult has responsibility. If the arrest is made in a home environment, officers should be aware of items which suggest the presence of children such as toys, clothing, formula, bunk bed, diapers, etc.
- B. If it is safe to do so, officers should attempt to make the arrest away from the children or at a time when the children are not present.
- C. If it is safe to do so, officers should allow the arrested parent to assure the children that they will be safe and provided for. If it is not safe or if the demeanor of the in-custody parent suggests this conversation would be non-productive, an officer at the scene should explain the reason for the arrest in age-appropriate language and offer reassurances to the children that both parent and children will be cared for.
- D. When planning an arrest or search warrant, officers shall consider the ages and likely location of the children when determining the time, place and logistics of executing the arrest and/or search warrant.

- E. If children are present, officers shall determine whether the non-arrested parent, an adult relative, or other responsible adult (i.e. godparent, adult neighbor) is willing to take responsibility for the children. Members shall conduct a preliminary criminal background check and contact FCS to determine if the person willing to take responsibility for the children has a history of child abuse. Any history of sexual crimes, 290 PC registration status or violence against children makes the adult ineligible to assume responsibility for the children. However, this does not apply to the non-arrested parent unless there is a court order limiting contact with the children. In any event, officers shall notify the FCS worker of the intended placement. ***(Refer to DGO 7.01 III A. 1 through 6 for 300 W&I criteria)***
- F. To contact FCS, officers shall call 558-2650, identify themselves and the nature of their call, and ask for an expedited response or call back from FCS. FCS workers have been advised to expedite these calls to officers and/or supervisors in the field.
- G. If the arrested parent's children are at school at the time of the parent's arrest, in addition to contacting FCS, the responding officer shall contact the School Resource Officer (SRO) of that school. If the SRO is not available, the responding officer shall advise the school principal or the principal's designee of the parent's arrest and provide placement information if it is available.
- H. The reporting officer shall include the following in the incident report:
- the name and contact information of the adult with whom the children were left,
  - any contact information of other family members the officers identified to assist FCS in case future placement is necessary, and
  - the name and contact information of the FCS worker and school personnel contacted.

**Reference:**

DGO 7.01, Policies and Procedures for Juvenile Detention, Arrest and Custody

## Appendix B: Recognizing Signs of Trauma in Children

The National Center for Children Exposed to Violence at the Yale Child Study Center describes additional common reactions of children to traumatic experiences, including parental arrest.<sup>14</sup> These reactions are summarized in Figure 2 below.

**Figure 2**

### COMMON REACTIONS OF CHILDREN TO TRAUMA

- ✓ ***Sleep disturbances***—frequent nightmares, waking in the night, bedwetting
- ✓ ***Separation anxiety***—refusing to go to school, upset when left with babysitter or childcare provider
- ✓ ***Hyper-vigilance***—worried, fearful, easily startled
- ✓ ***Physical complaints***—headaches, stomach-aches, other aches and pains with no clear medical cause
- ✓ ***Irritability***—increased aggressive behavior, angry outbursts, difficult to soothe
- ✓ ***Emotional upset***—tearfulness, sadness, talking about scared feelings or scary ideas
- ✓ ***Regression***—loss of skills learned at an earlier age, “babyish” behavior
- ✓ ***Withdrawal***—loss of interest in friends, school or activities child used to enjoy
- ✓ ***Blunted emotions***—shows no feelings at all, not bothered by anything, dissociation
- ✓ ***Distractibility***—trouble concentrating at school or home, daydreaming
- ✓ ***Changes in play***—repeatedly acting out violent events in play, less able to play spontaneously and creatively

Source: National Center for Children Exposed to Violence.

# How To Explain A Parent’s Arrest To A Child

## TODDLER—AGES 1 TO 4

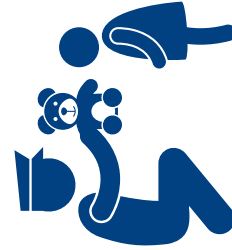
<p><b>CHILD’S PERCEPTION OF ARREST</b></p> <ul style="list-style-type: none"> <li>• Anxiety that parent will be hurt.</li> <li>• Fear of separation and loss of parent’s protection.</li> <li>• Unable to psychologically separate harm to parent from harm to self.</li> <li>• Want to cling to parent to avoid separation.</li> </ul> 	<p><b>WHAT TO SAY</b></p> <ul style="list-style-type: none"> <li>• Acknowledge the importance of the parent to the child: <i>“I know you love your Mom/Dad.”</i></li> <li>• Speak slowly, in a low, comforting tone: <i>“I know you are scared, but no one is going to hurt you or your Mommy/Daddy.”</i></li> </ul>
<p><b>HOW CHILDREN MIGHT REACT &amp; HOW YOU SHOULD RESPOND</b></p> <ul style="list-style-type: none"> <li>• Where possible, avoid use of force on parents in presence of child.</li> <li>• Anticipate that you may have to remove the child from the parent’s arms.</li> </ul> 	<p><b>WHEN ARREST IS RAID OR DV</b></p> <p><b>RAID</b></p> <ul style="list-style-type: none"> <li>• Element of surprise may be necessary for effective law enforcement, but will escalate children’s reactions.</li> <li>• Try to ascertain ahead of time if children are present. If possible have them removed to a safe place.</li> </ul>



# How To Explain A Parent's Arrest To A Child

## PRESCHOOL—AGES 4 TO 5

CHILD'S PERCEPTION OF ARREST	WHAT TO SAY
<p>Fear of separation and loss of parent protection:</p> <ul style="list-style-type: none"> <li>• Unable to psychologically separate harm to parent from harm to self.</li> <li>• May cling to parent to avoid separation.</li> </ul> <p>Very anxious that parent will be hurt:</p> <ul style="list-style-type: none"> <li>• May view a police officer as an action figure who can help, hurt, or take them away.</li> <li>• May believe his/her behavior or wishes caused a parent's arrest.</li> </ul>	<p>Speak to the child so that your eyes are level with the child's.</p> <p>Clarify basic facts in simple language:</p> <ul style="list-style-type: none"> <li>• Why the police are there.</li> <li>• What the police are going to do:</li> </ul> <p><i>"I have to take your parent to the police station to talk about some things."</i></p> <p><i>"I've called your grandmother and she's on the way over to be with you."</i></p> <ul style="list-style-type: none"> <li>• Reassure children it is not their fault.</li> <li>• Do not make promises you cannot keep (i.e. "I will come back to check on you" unless you know you will).</li> </ul>
HOW CHILDREN MIGHT REACT & HOW YOU SHOULD RESPOND	WHEN ARREST IS RAID OR DV
<ul style="list-style-type: none"> <li>• Where possible, avoid use of force on parents in presence of child and avoid cuffing the parents in the presence of child.</li> <li>• Avoid pointing guns at child.</li> <li>• Try to distract the child.             <ul style="list-style-type: none"> <li>— Offer a stuffed animal or a sweater/scarf of the parent to comfort the child.</li> </ul> </li> <li>• Anticipate that if you do use force, the child's reaction will be extreme:             <ul style="list-style-type: none"> <li>— Try to protect parent or hit officer.</li> <li>— Zone out or be non-reactive.</li> </ul> </li> </ul>	<p><b>RAID</b></p> <ul style="list-style-type: none"> <li>• Element of surprise may be necessary for effective law enforcement, but will escalate children's reactions.</li> <li>• Try to ascertain ahead of time if children are present. If possible, have them removed to a safe place prior to raid.</li> </ul> <p><b>DV</b></p> <ul style="list-style-type: none"> <li>• While you may perceive yourself as the rescuer of the abused parent, the child may only perceive you as someone using force as the abuser did and not see the difference.</li> <li>• If the child had any positive connection to the batterer parent, the child may view you as harming their batterer parent.</li> </ul>



# How To Explain A Parent's Arrest To A Child

SCHOOL AGE—AGES 6 TO 12

CHILD'S PERCEPTION OF ARREST	WHAT TO SAY
<ul style="list-style-type: none"> <li>• Fear of separation and loss of parent protection.</li> <li>• Concerned with issues of right and wrong, fairness and justice.</li> </ul> 	<ul style="list-style-type: none"> <li>• Deal with child honestly, fairly, and calmly: <i>"I have to take your parent to the police station to talk about some things. We'll let you know when you can see your parent. In the meantime, I've called your grandmother and she is on her way here to be with you."</i></li> <li>• Emphasize that the child did nothing wrong: <i>"You did nothing wrong. I know you love your parent. This is not your fault."</i></li> <li>• If you don't know the answer to the child's question, tell them you don't know but will find out.</li> </ul>
HOW CHILDREN MIGHT REACT & HOW YOU SHOULD RESPOND	WHEN ARREST IS RAID OR DV
<ul style="list-style-type: none"> <li>• Where possible, avoid use of force on parents in presence of child and avoid cuffing the parents in the presence of child.</li> <li>• Avoid pointing guns at child.</li> <li>• Anticipate that if you do use force, the child's reaction will be extreme:             <ul style="list-style-type: none"> <li>— Attack officer to protect parent, run, scream, cry.</li> <li>— Zone out: be unresponsive, hide, "self-soothe" by doing something repetitively (rocking back and forth).</li> </ul> </li> <li>• Offer a stuffed animal or a sweater/scarf of the parent to comfort the child.</li> </ul> 	<ul style="list-style-type: none"> <li><b>RAID</b> <ul style="list-style-type: none"> <li>• Element of surprise may be necessary for effective law enforcement, but will escalate children's reactions.</li> <li>• Try to ascertain ahead of time if children are present. If possible, have them removed to a safe place.</li> </ul> </li> <li><b>DV</b> <ul style="list-style-type: none"> <li>• The child may run and/or attack the officer/s making arrest to protect parent.</li> <li>• Child may agree with decision to arrest batterer but feel worried about repercussions of siding with officer in the presence of the batterer.</li> </ul> </li> </ul>





# How To Explain A Parent's Arrest To A Child

## ADOLESCENCE—AGES 13 TO 18

### CHILD'S PERCEPTION OF ARREST

- Fear of separation and loss of parent's protection.
- Especially fearful of parent being hurt.
- May express anger toward parent and/or officer.
- May try to stand up to officer to protect parent.



### WHAT TO SAY

- Do not respond to statements of teens expressing distaste for your presence.
- De-escalate the situation by letting youth vent fear, feelings: *"Hey, this is a tough situation. We're going to take your parent to the police station to talk about this situation."*
- Maintain rules and structure to ensure teen feels secure: *"This is the way we have to do it by law. What happens next is \_\_\_ and then we will let you know in \_\_\_ minutes what's going to happen to dad/mom."*
- Ask teens to assist you with younger children: *"What's the best way to get her to come out of the corner? Could you help me?"*  
*"Is there anyone you'd like us to call now?"*

### HOW CHILDREN MIGHT REACT & HOW YOU SHOULD RESPOND

- Don't take teens' rude or obnoxious behavior personally.
- Avoid handcuffing parent in front of youth; attempt to block teens' vision of the arrest.
- Anticipate youth may ignore or evade officers out of shame, rage.
- Anticipate youth will:
  - Attack officer to protect parent, vent anger on you instead of parent, run, scream/cry/express rage, be hypersensitive to touch.
  - Zone out: be unresponsive verbally, hide, appear to be paralyzed and unable to move, "self-soothe" by doing something repetitively (rocking back and forth).
- Engage teens in dealing with the arrangements for care; offer the opportunity to help them feel in control of their situation, to whatever degree is possible.

### WHEN ARREST IS RAID OR DV

#### RAID

- Element of surprise may be necessary for effective law enforcement, but escalates the reactions of teens.
- Anticipate that some teens will try to protect themselves.
- Try to ascertain ahead of time if children/teens are present. If possible, have them removed to a safe place.
- Be aware, that teens may run or strike back at officer/s making the arrest.

#### DV

- Anticipate that some teens will want to help assaulted parent and need guidance as to how.
- Teen may agree with decision to arrest batterer but feel worried about repercussions of siding with officer.

# Keeping CHILDREN SAFE at the Time of Parental Arrest



- Ask** whether children are present? Look for toys, clothing, diapers. Make sure all children are accounted for.
- Explain** to children what is happening to arrestee.
- Out of sight:** try not to handcuff/question parents in front of children.
- Work with arrestee to make arrangements** for children-if possible.
- Ask children** for input about where they want to go.
- Give time** for parent to reassure children—if appropriate.
- Conduct a background check** for sex offender registration or violence against children before releasing the child.
- If necessary**, make arrangements to transfer children to state custody.
- Explain** to children and caregiver what happens next.
- Document** children’s names, gender, age; names and contact information for guardians/caregivers and others involved in placement or custody, name of schools attended.

# REACT Field Card

## Considering a child when making a criminal arrest

### *When the environment is safe and secure:*

- Look for signs of a child (e.g., toys, stroller, diapers, crib)
- Ask the arrestee if they care for a minor (<18 years old)

### *If the arrestee is in care of a child:*

- Call EMPS mobile crisis (**Dial 211, press 1, then 1 again**) for a clinician
- Make the arrest out of the child's sight, when possible
- Ask the arrestee about suitable alternative caregivers
- Ask the child if they have any questions about the incident
- If there is evidence of suspected abuse and neglect, or no caretaker is available, call DCF (law enforcement priority)

Careline # [REDACTED]

# REACT Field Card

**Dial 211, press 1, then 1 again, for EMPS mobile crisis when:**

- A child was present for a caregiver's arrest
- Incident or arrest involved violence or use of force
- Child appeared distressed or out of control
- Frequent law enforcement involvement with the family
- Planned arrests if a child may be present (warrants or raids)
- Any other concerns about a child's behavior / mental health

***REACT: Responding to Children of Arrested Caregivers Together***

A model developed by the Child Health and Development Institute of CT

Connecticut  
Center for  
Effective  
Practice



Child Health and  
Development Institute  
of Connecticut, Inc.



## Appendix F: Model Interagency Memorandum of Understanding

### A MEMORANDUM OF UNDERSTANDING CONCERNING CHILDREN'S SAFETY AND WELL-BEING WHEN A PARENT IS ARRESTED

#### PURPOSE

This protocol documents the agreement between the [*local jurisdiction name*] [*list Child Welfare Services Agency, local Law Enforcement Agencies, mental health and other local agencies, and other community partners as appropriate*] to develop and implement a coordinated response to all arrests where children are present and/or are living in the household of the arrestee. It establishes a consistent approach to keeping children safe and well cared for whenever they are present at an arrest and/or live in the household of the arrestee.

Nothing in this protocol shall be construed as negating or minimizing the right of the parent or responsible adult to designate the caregiver for their children, unless there is compelling evidence to the contrary (such as obvious drug use, weapons or other indicators of an unsafe environment).

#### GOALS

The goals of this protocol are to:

1. Allow child welfare services, law enforcement, and partnering agencies to work together to make timely and appropriate decisions on behalf of children present at an arrest and/or living in the household of the arrestee.
2. Relieve law enforcement of the burden of making placement decisions and arrangements for children present at arrests and/or living in the household of the arrestee.
3. Improve the safety and well-being of children affected by arrest by establishing clear procedures for their care and placement, if needed.
4. Recognize that witnessing an arrest can traumatize children, and that it is the responsibility of all participating partners to minimize the negative impacts of arrest on children.

#### SCOPE

This protocol is binding on all employees and representatives who may be involved in an arrest affecting children, including but not limited to police officers, sheriff's department personnel, parole officers, social workers, mental health professionals, and other law enforcement and child welfare services personnel.

## **TRAINING**

All employees and representatives who may be involved in an arrest affecting children (including but not limited to police officers, sheriff's department personnel, parole officers, social workers, mental health professionals, and other law enforcement and child welfare services personnel) shall receive appropriate training on effective approaches to keeping children safe and well cared for when they are present at an arrest and/or live in the household of the arrestee.

## **PROCEDURES FOR LAW ENFORCEMENT REPRESENTATIVES**

### **Prior to the arrest warrant being issued**

Law enforcement personnel from the agency initiating the arrest process will take steps to determine if children may be present in the household, including but not limited to:

1. Contacting child welfare services and inquiring if they have had any contact with the household.
2. Recording any visible evidence of children if observations of the household are done prior to the request for an arrest warrant.

### **At the time of arrest**

All arrestees are to be asked if there are children presently living in the household. Arresting officers will also observe all rooms and exterior yard areas for signs that children may be living in the household.

Whenever possible, if children are known to be present in the household, the timing of the arrest will be when these children are not physically present.

When children are physically present during the arrest, the arrest is to be made away from of the children, if possible. One officer will be designated to provide a consistent presence to these children, offering reassurance and an explanation of what will happen to them, as appropriate.

Arrangements will be made at the time of arrest for the most appropriate way to care for the children. These arrangements may include:

1. Allowing the arrestee to contact a family member, friend or trusted neighbor to make arrangements for the children.
2. Contacting child welfare services or an agency participating in this partnership and requesting their assistance in finding an appropriate temporary caregiver.

3. Contacting child welfare services or an agency participating in this partnership and requesting their presence at the arrest scene, so that the children may be taken into protective custody.

Under no circumstances will the arresting officer designated to stay with the children leave the household until appropriate temporary care arrangements have been made for them, and the physical transfer to their temporary caregiver (including child welfare services, when appropriate) has been completed.

If children are at school or at a known location outside the household at the time of arrest, the arresting officers will contact the school or other known location and advise the principal or appropriate responsible adult of the parent's arrest and arrangements being made for the care of the arrestee's children.

Only when all other options have been exhausted are children to be transported to the police station, transported in a patrol car, taken into formal child protective custody, or otherwise subjected to situations that may cause fear, confusion or additional trauma.

#### **After an arrest**

The police report will include information about whether children were present at the arrest and/or are currently living in the household. For all arrests where children were present and/or are living in the household, the report will include pertinent information about these children, including their names, gender and ages, and how they were placed. This information is to be kept confidential and only released to authorized representatives of the arrestee or agencies partnering on this protocol. The contact information of the person and agency designated to follow up with the temporary caregiver as appropriate will also be listed.

Police reports of all arrests where children were present and/or are currently living in the household will be regularly reviewed by designated members of this partnership to evaluate how the safety and well-being of these children was ensured at the time of arrest, and to discuss any challenges or changes needed to improve the treatment of children affected by arrest. This will require consistent inclusion of appropriate information on the arrest report.



## **PROCEDURES FOR CHILD WELFARE SERVICES REPRESENTATIVES (AND OTHER PARTNERING AGENCIES)**

### **Prior to the arrest warrant being issued**

If contacted by law enforcement representatives prior to their initiating an arrest, child welfare services personnel will respond by:

1. Promptly providing as much relevant information as possible about any contact they have had with the household.
2. Making arrangements for a designated person from child welfare services or another agency participating in this partnership to be available or on call at the time of an arrest in which children are likely to be present, in order to provide assistance to the officer designated to stay with these children until arrangements are made for their care.

### **At the time of arrest**

If contacted by law enforcement at the time of arrest, the designated person from child welfare services or the partnering agency will assist the officer designated to stay with children present at the arrest to make arrangements for their care. This assistance will include any or all of the following:

1. Consulting by phone with the designated officer as she/he determines whether to allow the arrestee to contact a family member, friend or trusted neighbor to make arrangements for the children.
2. Contacting appropriate temporary caregivers on behalf of the children and making arrangements for their transfer and care from the arrest scene, school, or other known location.
3. Going to the arrest scene, staying with the children, transporting them directly to their temporary caregiver, or taking the children into temporary protective custody if necessary.
4. Going to the school or other known location and transporting the children to their temporary caregiver or taking them into protective custody if necessary.

Under no circumstances will the child welfare services representative or alternative partnering agency, contacted by an officer at an arrest scene, refuse to provide assistance.

Assistance is to be provided in a timely and cooperative manner, and unless there are mitigating circumstances, it is to be provided within one hour of contact by the designated officer.

Only when all other options have been exhausted are children to be transported to the police station, transported in a patrol car, taken into formal child protective custody, or otherwise subjected to situations that may cause fear, confusion or other trauma.

### **After an arrest**

The designated person from child welfare services or another agency participating in this partnership is responsible for assessing the need for following up with the temporary caregiver and coordinating any needed care with the appropriate agencies. The person who responded to the request for assistance from law enforcement officers will prepare a report, which is to be reviewed periodically by the designated representative within the agency. This report will include, at a minimum, pertinent information about the children, including their names, gender and ages, and how they were placed. This information is to be kept confidential and only released to authorized representatives of the arrestee or agencies participating in this partnership.

### **AUTHORIZATION**

The department and agency heads listed below have authorized this protocol. It will remain in place until further notice.

*[List all participating agencies and departments, with signatories of each, and date signed.]*

