



CHECK-UP CHECKLIST FOR COURT-INVOLVED INFANTS AND TODDLERS

The children most at risk of interacting with the child welfare and court system are very young children (i.e. under the age of 5). Recent research demonstrates the importance of the early years to healthy development, as well as the particular supports that very young children need to respond to traumatic experiences. Although all children do need safe, permanent homes, very young children have particular needs for attachment, stability, and nurturing caregivers, as well as health needs specific to this vulnerable period of development. With the help of professionals such as yourselves, the legal system can ensure that the full range of very young children’s needs are met. The following document is based on ABA, NCJFCJ, and Zero to Three recommendations from *Healthy Beginnings, Healthy Futures: A Judge’s Guide* (2009), which set out best practices for judges and courts addressing the welfare of very young children.

Medical Needs

Very young children (under age 5) in the child welfare system including infants and toddlers are often at higher risk for medical conditions that require speedy screening and treatment for healthy growth and development.

Questions

- What risks or conditions appear in the child’s medical records? Has child been screened for these conditions?

<input type="checkbox"/> Low birth weight	<input type="checkbox"/> Prematurity	<input type="checkbox"/> Shaken baby syndrome
<input type="checkbox"/> Prenatal toxic exposure	<input type="checkbox"/> Fetal Alcohol Syndrome	<input type="checkbox"/> Developmental disabilities
<input type="checkbox"/> Growth failure	<input type="checkbox"/> Hearing/vision	<input type="checkbox"/> Lead poisoning
<input type="checkbox"/> Respiratory illness (repeated infections, asthma, etc.)	<input type="checkbox"/> Vertically transmitted infections (HIV, hepatitis, syphilis, herpes, HPV)	<input type="checkbox"/> Oral health (caries, abscesses, etc.) screens should start by age 1

- How do the child’s placement, care, ordered services and screenings, and permanency reflect these conditions?
- Has birth parent and caregiver received training to address specific medical issues (e.g. medically fragile child)?
- Does the child have a medical home? Where? Are all records up to date?
- Are the child’s immunizations up to date? If not, what are the obstacles?
- Does the child have health insurance? Does the birth parent or caregiver have health insurance?

Child Development

Trauma such as abuse or neglect increases the risk of developmental delays and requires appropriate services for birth parents, caregivers and children

Questions

- Has the child been screened for mental health or development issues? If not, ensure that full developmental screening including social/emotional development is initiated within 30-60 days of placement.
- Has the child been referred to Early Intervention? Has the child received full evaluation from EI?
- Is the child eligible for services? What services are being received? How often? Who is consenting to services?
- Have service records (e.g. EI or special education evaluations, copies of service plans, medical tests/treatment, provider reports, etc.) been shared with DCP&P, parents, and caregivers?
- If 3 or older, has the child been enrolled in school? Has the child been evaluated for Special Education services?

Attachment and Emotional Development

Very young children need extensive contact with parents, siblings, and relatives to ensure healthy emotional development, which is endangered by trauma and multiple placement

Questions

- Does the caregiver, birth parent, or child care provider have concerns about any of the following conditions?

<input type="checkbox"/> Aggression or tantrums	<input type="checkbox"/> Inconsolable crying	<input type="checkbox"/> Sleeping disturbances
<input type="checkbox"/> Failure to focus	<input type="checkbox"/> Eating/feeding difficulties	<input type="checkbox"/> Apathy/disengagement
<input type="checkbox"/> Specific fears	<input type="checkbox"/> Repetitive movements	<input type="checkbox"/> Toileting issues
<input type="checkbox"/> Response to transitions	<input type="checkbox"/> Apparent sexual behavior	

- If yes to any, how have these concerns been addressed? What services are being received to address them?
- Has the child developed attachment to a caregiver or birth parent? How is that attachment shown?
- Does the child see a parent multiple times a week (daily if child <1 year old) per best practice? If not, why not?
- Are parental visits supervised? Unsupervised? Where are the visits?
- How many times a week does the child contact siblings or relatives?
- Is the family receiving services to support the child's social emotional development? What additional services might be appropriate?

Caregivers and Parents

Caregivers and birth parents may need additional supports to meet the child's medical and developmental needs.

Questions

- What challenges does the birth parent or caregiver face in meeting the health and developmental needs of the child? Has the child made all recommended appointments? If not, what are barriers (e.g. transportation)?
- What training or support does the birth parent/caregiver need to meet the child's health and development needs?
- Would the child and birth parent/caregiver benefit from parent-child therapy to strengthen their relationship?
- Has the parent received a post-partum depression or mental health screening and appropriate follow-up services?

Permanency

Disruptions, instability, and long foster care stays endanger healthy development of young children.

Questions

- Has DCP&P made reasonable efforts to prevent removal, which is especially disruptive for young children?
- Is the child's placement and permanency plan the least disruptive, most family-like setting?
- Are family team meetings or mediation appropriate for the child?
- Has concurrent planning been initiated if child is not returned home within six (6) months?
- Are there ways to expedite resolution of the child's case to ensure minimal disruption to development?



FOR QUESTIONS ABOUT THIS INFANT—TODDLER CHECKLIST, CONTACT PETER CHEN AT ADVOCATES FOR CHILDREN OF NEW JERSEY, (973) 643-3876 OR PCHEN@ACNJ.ORG.