Hurricanes Katrina and Rita have made us all more aware that unexpected disasters can have a huge impact on our agencies. From flooding in the Midwest to wildfires in California to tropical storms in Florida, every area of our country faces the possibility of natural disasters. Agencies also may be affected by receiving and/or helping families from nearby states after a disaster or other unexpected crises. We have designed this issue to help child welfare agencies prepare to manage during these crises.

Our main article highlights some major areas agencies should consider—starting with the need to recognize that disasters and crises can happen. We feature an interview with a county director whose experience illustrates many of these points. We then highlight two critical aspects of preparing for a crisis—the importance of communicating with broader emergency management efforts and the need to support staff. We also include resources we think you might find helpful.

We hope you find this issue useful, and welcome your feedback.

Peter Watson, Director

Coping with Disasters: Tips for Child Welfare Agencies

Experts agree the key to disaster preparedness is to have a disaster plan that is a continually revised, living document. However, the opposite is often the case—disaster plans, if they have been developed at all, sit untouched on shelves. To help ensure ongoing preparedness, we have compiled a list of “tips” child welfare administrators can review regularly to keep their plans alive. To develop this list, we reviewed a guide to disaster planning for child welfare agencies and other recent literature and we included insights from recent disaster experiences (see Resources, p. 5).

From the Field: A Colorado County Director’s Perspective

Linda Fairbairn is currently the County Administrator for Prowers County and Director of Social Services for Prowers and Baca Counties in Colorado. In 2004 the Prowers County offices were destroyed by a fire, and Fairbairn now gives presentations to other counties on what she wishes someone had told her prior to this disaster. She also was Director of Lincoln County when it was hit by a tornado many years ago. We asked her to share some lessons learned from these experiences.

Can you talk about the fire and what lessons you’d like to convey to other child welfare administrators?

When the fire happened we had never had a fire drill or any kind of evacuation drill for the building. We had no way to do a building wide alert—each Department within the building had its own phone system. Our workers tried to put the fire out and then opened doors and windows which made the fire spread faster, when they should have closed doors. So make sure you do fire drills, and learn basic fire safety rules.
Handling Disasters: A Colorado County Director’s Perspective

The critical message I want to convey is that child welfare administrators need to think about the disasters that could happen in advance—and talk about it, plan and practice. I realized afterwards I had overestimated the safety of our building. I never had thought there might be a fire.

It is so important to have off-site backup of your data. We have that now, but we did not have it when the fire struck. Luckily we also administer Baca County so our accounting software was on their server as well. But my guys had to go back into the building after the fire was out and remove the hard drive with all of our payroll data on it. But we had no files as we couldn’t remove any of our paper files.

What were some of the important things you did after the fire?

We worked to support staff and to communicate. All 40 of us moved into a house that was part of our complex, and then we searched for a larger place. We had just about given up when we found a former Baptist elementary school we could use. All the child welfare workers were in one large classroom. Everyone basically had a desk, no files for a couple of months and were sitting on top of each other. Workers had the dual role of being victims but also working to fix it and keep the system going. It was just incredibly difficult and stressful for staff.

We have a psychologist on staff, and David Conrad came in to work with child welfare caseworkers. The debriefings they did were absolutely essential to recovery. We also worked hard to communicate to staff—we had frequent staff meetings to be sure that not just administrative staff but all the staff knew what was going on.

We also had to make sure our clients could contact us. A lot of them don’t get the newspaper and can’t afford cable so it was important for them to be able to call us. Communication was really important.

The worst thing about a disaster is the loss of control—so where we could we gave people opportunities to exercise some control. For example, we picked out five desk models and some colors and let people select for their offices. We also let people schedule their work day so that, if they couldn’t work in the same room with seven people they could work from noon until eight. We also did some fun things—ice cream socials, and pizza parties where I gave out awards.

Can you tell us about the tornado and lessons you learned from that experience?

The tornado hit the area around Limon, and as it turned out my staff and the children we had in placement were OK. But the local disaster plan charged Social Services with providing clothing, shelter, food and registration of victims. The plan had been written ten years prior to the tornado—after the big Thompson flood—and it had sat on a shelf for a long time. Some of our staff were surprised that Social Services had a role. My entire staff worked 14–16 hours a day to set up and operate a food and clothing warehouse in the gymnasium of an elementary school. Our agency had to continue to function—courts went on, child welfare issues went on, and people still needed benefits. This was a very difficult challenge for the staff. We were also surprised by the length of time—we operated the warehouse for approximately a year after the tornado so people could get clothing and household supplies as they moved back into new homes.

The sheriff set things up and then the Red Cross and Salvation Army came in. Even among us we had a lot of conflicts over who was responsible for what. But then the State came in and set up a center separate from the gymnasium. It wasn’t clear who was supposed to do what and where our turf ended and theirs began, and that was incredibly frustrating.

During the tornado the Chairman of our Board of Commissioners was a victim of the tornado, so we needed to know who was in charge since he wasn’t available. I think it is so critical to have somebody in charge, and then probably three or four people as backup to that person.
Coordinating With Emergency Management

Disaster Planning in New Hampshire

New Hampshire’s child welfare agency has taken the critical step of reaching out to work with broader emergency response planning efforts in their state, making the links that have helped them manage their agency well during disasters. Nancy Rollins, Director of the Division for Children, Youth and Families within the Department of Health and Human Services, is a member of the state’s disaster planning team. She encourages child welfare agencies to think about the natural disasters that could happen, find out what the current state emergency management plan is for responding, and consider how child welfare would fit into that. It is very valuable to participate in staged drills of responses to emergencies, and then to debrief and act on lessons learned. These drills help child welfare agencies be clear about their roles, and about responsibilities others have in the response. New Hampshire has done staged drills of ice storms, flu pandemics, nuclear reactor meltdowns and the impact of disasters in urban areas of nearby states. Recently, floods hit one corner of the state, and both DCYF offices and foster families were flooded out. Systems worked well in response—staff from other counties filled in; a phone system was used to locate missing children, and communication systems were maintained.

RESOURCE:
This brief highlights how collaboration is imperative in emergency situations, and discusses six strategies agencies can use to enhance collaboration, including engaging in collaborative disaster planning and preparation. The strategies are illustrated with examples. Available from the Finance Project at: http://www.financeproject.org/publications/feskatrina1.pdf

...think about the natural disasters that could happen, find out what the current State emergency management plan is for responding, and consider how child welfare would fit into that.
Coping with Disasters: Tips

**Recognize what could happen.**
Assess the types of disasters your agency might face, take steps to be prepared, and update your assumptions regularly.
- Assign a person to be responsible for developing, updating and communicating key elements of a disaster plan.
- Regularly review the elements on this list.
- Conduct or participate in drills—on the office, regional and statewide level.
- Update the plan based on these drills.

**Communicate with staff, clients and providers.**
Your ability to communicate to your staff, clients and providers is critical.
- Ensure that you can contact staff in all of your locations in an emergency.
- Collect and record information on where staff would go in an evacuation. Keep it updated and accessible.
- Gather and record similar information for foster parents, relative caregivers and residential facilities. Keep it updated and accessible.
- Gather identifying information from birth parents to assist in locating them.
- Ensure that critical staff have alternatives to land line phones such as cell phones or, optimally, satellite phones.

Your staff, clients and providers also need to be able to contact you.
- Establish toll-free numbers prior to disasters and/or ensure they are available during a crisis for staff, clients and providers to reach the agency. Ensure phone lines are accessible to people with disabilities (TTY) and available 24 hours a day.
- Have a plan for informing clients of how to contact the agency and access services.
- Inform staff of alternative locations to report to work in the event of an emergency; require staff to check in after a disaster.

**Communicate with others.**
Coordinate with critical players outside the agency.
- **Emergency management personnel:** Make contact with whoever is in charge of responding to disasters in your area and/or state. Work together to clarify roles in emergency response, discuss communication methods, and have contacts to coordinate services during a disaster. *(See p. 3 Coordinating with Emergency Management: New Hampshire)*
- **The media:** Prepare draft outlines of news releases prior to disasters. During disasters, put someone in charge of handling press and work on communicating a consistent message.
- **Other states:** Designate agency liaisons to other states where clients and providers might go during disasters. Identify contacts in those states.
- **Federal partners:** During disasters, initiate contact with federal agencies that oversee your agency.

**Records and information systems.**
Protect your records and use information systems you can access during a disaster.
- Keep any paper files in filing cabinets to better protect them from smoke or water damage.
- Use off-site backup for critical information systems with case and client records (such as SACWIS systems) and with human resource data (employee information, payroll systems).
- Consider using direct deposit to pay workers and providers so checks will automatically go to their bank accounts during disasters.

**Service delivery.**
Ensuring that services continue and will address needs during disasters is a critical responsibility.
- Consider alternative locations for staff and services prior to disasters.
- During disasters, ease client access by locating in neighborhoods or at disaster assistance centers, by using mobile units, or by conducting coordinated outreach.
- Expect to provide additional services—new benefit programs, child care for families seeking help, immediate trauma services for children and families, more time for service visits.
**Manage staff.**
Agency administrators need to take steps to ensure an adequate workforce and support staff during disasters.
- Identify people with multiple skills who could assist with jobs when necessary.
- Develop mutual aid agreements with other counties or states.
- Decide what work requirements are essential, and which can be waived in a crisis.
- Advocate for agency staff delivering services to receive priority in emergency housing.
- Have managers log situations they address so short “how to” guides can be produced and shared.
- Recognize the stress staff experience in handling child welfare responsibilities and disaster response work, especially when they are disaster victims themselves.
- Offer staff support and opportunities to process emotions (See p. 6 – Supporting Child Welfare Workers).
- Rotate staff during disasters; allow scheduling flexibility.

**Manage volunteers.**
Many offers of help come during a disaster but these resources need to be managed.
- Identify people and organizations (for example, the faith community) who might be able to assist during a disaster.
- Prior to a disaster, identify potential tasks for volunteers.
- Develop brief manuals or one page “tip sheets” giving instructions for tasks.
- Assign someone to contact and assign volunteers and to organize logistics (e.g., housing and food).

**RESOURCES**


*Disaster’s Wake,* by C. Swope and Z. Patton in *Governing Magazine,* October 2005, at http://governing.com. Presents nine questions that government leaders should be asking based on interviews with experts and on the experience of people in areas that have seen life-threatening crises.

**Websites:**
- http://nccanch.acf.hhs.gov/—The National Clearinghouse on Child Abuse and Neglect Information: Hurricane Relief Resources

**Agencies that consider these key elements are more likely to be prepared for disasters, and be flexible and responsive during a crisis.**
Supporting Child Welfare Workers:

An Interview with David Conrad, LCSW

Natural disasters create significant stress for child welfare workers – as does daily work with abused and neglected children and their families. Mr. Conrad has worked for ten years with child welfare agencies to assist caseworkers impacted by secondary trauma, defined by psychologist Charles Figley as “the stress that results from helping or wanting to help a traumatized or suffering person.” After working as a child welfare caseworker and supervisor in Maryland and North Dakota, Mr. Conrad developed programs in Texas and in Colorado focused on secondary trauma prevention. He has also done secondary trauma training with child welfare agencies in Arizona, California, Wyoming, Kansas and North Dakota.

How serious is the risk of secondary trauma for child welfare workers?

Child welfare workers are at significant risk for secondary trauma for a number of reasons. These include: empathy (particularly when it involves “over-identification” with their clients); exposure to reminders of their own trauma; insufficient recovery time between exposures to trauma, and working with children who are the most vulnerable members of society. In addition, relentless criticism by the public and press can be very painful for workers.

In areas that have been struck by natural disasters, the impact is two-fold. When natural disasters occur, workers experience the ongoing stress of their work coupled with the stress of having their own homes and families adversely affected. Caseworkers often refer to their homes as their “sanctuary,” a safe place to heal, recover and rejuvenate themselves. This may be lost when they live in the disaster zone.

Why should responding to caseworkers’ trauma be a priority for child welfare agencies?

Annual turnover rates among child welfare staff often exceed 30%, and are sometimes much higher. The costs of recruiting, hiring and training new workers are significant. Turnover brings down morale, increases the workload for remaining staff, results in poor continuity of care for children, and prevents the agency from forming a cohesive, high functioning workforce. In addition, if workers continue in their jobs after they have been traumatized, the quality and quantity of their work may suffer. Research supports my belief that validation and support from their peers and superiors and a forum to discharge their emotions is essential if caseworkers are to be protected from secondary trauma. I believe that offering this protection helps agencies retain their caseworkers.

How can agencies support workers?

Child welfare work can be very lonely, isolating and disturbing for front-line staff. To quote traumatologist Dr. Judith Herman, we all need someone to “bear witness” to what we’ve been through. In keeping with what Herman said, caseworkers need to be encouraged to process their trauma with their colleagues on an as needed basis. Agencies need to find funding for these support services, adopt policies encouraging staff to use them and implore supervisors to be supportive.

There are other critical steps managers must take to support workers. Workers need to be reminded that they may not see the “fruits of their labor” and that the work is often about planting seeds. Supervisors and administrators must provide opportunities for caseworkers to celebrate their successes. And finally, workers must be encouraged to embrace their own physical, psychological, and spiritual wellness to achieve the emotional balance they need to do this difficult work.

I began my work in the field of secondary trauma in Texas in 1995 after the number of child deaths rose dramatically in one year. Initially, I conducted stress debriefings to help caseworkers suffering from acute traumatic stress. I soon realized that workers were not only acutely traumatized by child deaths but also by serious injury cases, natural disasters (eg. hurricanes and floods) or...
by the loss of a favorite supervisor. I learned that acutely traumatized caseworkers value individual and group opportunities to discharge their emotions. They also often need brief periods of time away from work to regain their emotional equilibrium.

After conducting the debriefings for about a year, several workers approached me and said, “We appreciate your coming when there is a crisis, but we have trauma daily and sometimes hourly. How can you help us with that?” I knew then that I must expand my focus to include an emphasis on prevention and ongoing protection. In response, I developed a six-hour Secondary Trauma Training Seminar to educate caseworkers about what secondary trauma is, how it impacts them and what they can do to protect themselves. In 2002, in keeping with my belief that secondary trauma is an ongoing problem, I began conducting Educational Support Groups with groups of Colorado caseworkers. These groups allow me to visit with teams regularly—at least bimonthly—to both provide them with an opportunity to debrief and to offer them new insights and tools they can use to protect themselves.

One thing I have found helpful is that I work outside the state system. Consequently, caseworkers feel safer sharing confidential information with me and know that what they share will not negatively impact their annual performance review.

Do you think child welfare agencies are beginning to recognize the importance of this issue?

I think more child welfare agencies around the country are realizing the value of providing secondary trauma training for their staff, particularly by independent clinicians with experience in child welfare. Wyoming recently contracted with me to offer my Secondary Trauma Training Seminar as part of their CORE training for new workers. I hope more agencies will begin to provide preventative training for their workers.

I also hope agencies will realize the value of having support services in place following a natural disaster or other acutely traumatizing event. For example, I traveled to Prowers

QI CORNER: Communicating QI Results

In February, the NRCOI convened a new QI Peer Network composed of QI staff from child welfare agencies across the nation. The topic for our first call was “Effective Communication of QI Results and Findings,” and participants discussed a number of innovative QI communication strategies and approaches. While not related directly to disasters, the communication theme resonates with many of the other articles in this issue of Child Welfare Matters.

One issue highlighted is the need to prioritize information. Managers and staff often feel overwhelmed with too much data and too many reports. QI units must help staff identify and use data relating to their jobs specifically as well as to critical agency initiatives. Some communication techniques that may be helpful include:

- **Present information in a variety of formats.** QI staff may present key findings through written reports and publications, online postings, and presentations to internal and external staff.
- **Tailor information and reports to specific audiences.** QI staff can produce on-line reports with filters that can break down data by geographic and functional areas. Staff will see the comprehensive picture, access specific information related to their jobs and understand the links between the two.
- **Provide clear descriptions of information sources and uses.** Some agencies produce data guides that explain clearly where data and information come from, how they relate to key outcomes and how local offices can use them to make improvements.
- **Train and support staff.** Given staff turnover, QI units should provide ongoing technical assistance to all staff as they use data and reports and develop targeted improvement plans.
- **Use peer-to-peer models.** Increasingly, agencies are relying on peer-to-peer models in which staff from different offices may conduct case reviews, debrief with individual workers and/or help QI staff present findings to local offices. Staff often trust information coming from peers more than QI staff.
- **Present themes and stories that illustrate QI findings.** Themes and illustrative stories can highlight key issues emerging from qualitative case reviews. QI staff should guard against relying on anecdotal information, but stories can be powerful reminders of strong practice or areas that need attention.
- **Create mechanisms to encourage and support practice changes.** Some states convene groups of internal and external stakeholders to review QI reports and develop improvement plans. Others include planned improvement strategies within QI reports themselves rather than requiring local offices to develop an entirely new plan in response to the report.

If you would like more information about these approaches, I have materials from many agencies and I would be glad to share them.

Peter
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Continued on page 8.
UPCOMING TELECONFERENCES...

April 13 • Keeping Children Safe: Strategies to Reduce Recurrence of Maltreatment
Presenters: Theresa Costello, Director, National Resource Center for Child Protective Services, Albuquerque, NM; John Fluke, Vice President for Research, Walter R. McDonald & Associates, Inc., Aurora, CO; Jim Grace, CFIR/PIP Coordinator, Kentucky Department for Community-Based Services, Frankfort, KY; Other agency representatives TBA

April 25 • May 4 • May 25 • Solution Focused Practice (in 3 parts)
Presenters: Becky F. Antle, Kent School of Social Work, University of Louisville, KY; Insoo Kim Berg, Brief Family Therapy Center, Milwaukee, WI; Susan Kelly, Center for the Study of Social Policy, Washington, DC; Other agency representatives TBA

June 6 • Performance Based Contracts: Making Deals with Providers
Presenter: Michael Shaver, Former Deputy Director for Budget, Research and Planning, Illinois Department of Children and Family Services, Chicago, IL

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David Conrad Interview (from page 7)
County, Colorado (mentioned on p. 1 of this newsletter) shortly after the fire destroyed their building. Because I had been conducting ongoing support groups with their staff, they were very receptive to my conducting a stress debriefing and to assisting staff with their ongoing trauma (ie, loss, anger, frustration). The availability of crisis intervention services and ongoing secondary trauma training and support are critical if staff are to move through and past their own trauma.