Transition Tool Kit for infants and toddlers



KEY COMPONENTS OF A TRANSITION:

For infants and toddlers in out-of-home placement, extra time and care must be employed by the team of adults who work with them to facilitate moves that keep the child's best interest in mind.

Any move between primary caregivers, including a reunification with parents, a new foster or relative/kinship caregiver, or placement with an adoptive family, should be done with attention to the child's experience. The main components of a transition plan are presented in this Tool Kit.

Listen to parents and caregivers – they are the experts on the child.

Transition plans are not an all or nothing endeavor. If parts of these best practice guidelines are not possible given the specific case situation, identify the aspects you <u>can control</u> and take action.

Before:

- Center relationships and contacts around shared goals of helping child well-being.
- Develop a written transition plan document developed at Shared Planning Meetings (e.g. FTDMs) where <u>all</u> team members are invited to formulate this plan.
- Ensure that roles, timeframes, services, and plans for follow-up are clear and agreed upon.
- Consider referral to Infant Mental Health services for assessment and strategy support.

During:

- Multiple contacts between current and receiving caregivers <u>prior</u> to the move to a new placement (a minimum of 7-10 contacts).
- Over the course of a minimum of 2 weeks.
- 1-2 overnight stays with the receiving caregiver <u>prior</u> to the move.
- A direct hand-off from the current caregiver to the receiving caregiver at time of the move.

After:

- Planned contacts between the current/previous and receiving caregivers <u>following</u> the move (minimum of 2-3 in person and/or virtual—such as Skype or FaceTime). No "waiting period" after the move for this contact.
- Pictures and books of the previous family available to the child.
- Follow routines and patterns from previous home for 2-3 weeks to offer familiarity of caregiving routines.

Transition Strategies for infants and toddlers

FROM A CHILD'S EYES:

Infants and toddlers do not have the capacity developmentally to put the changes they are experiencing in their daily routine in perspective like an older child or adult. Therefore, it is important to create strategies that meet them at their developmental level, in the table below you will find different ways to support a move between primary caregivers. When using the below strategies use the following 4 phase framework to guide your placement transition:

1) Receiving caregiver enters the child's world (current caregiver

present).

2) Child and current caregiver enter the receiving caregiver's world (current caregiver present).

3) Child enters receiving caregiver's world and then returns to current caregiver.

4) Move occurs between caregivers and soon after previous caregiver visits the child (with receiving caregiver present).

STRATEGIES FOR SUPPORTING A HEALTHY TRANSITION

BUILD RELATIONSHIPS	Build and maintain positive relationships between all caregivers <u>from the beginning</u> to the greatest extent possible.
REFER	Foster children have increased risk for developmental delays, particularly in the area of social-emotional development. Refer children to Birth-to-Three services for assessment and recommendations.
COMMUNICATION	Create a communication plan for both parties (e.g., email, visit journal, phone/video calls).
REPLICATE DAILY EXPERIENCES	Maintain the same routines, experiences, and comfort items for the child in both living environments (e.g., use the same toys, foods/drinks, music, lullabies, soothing techniques, fabric softeners, etc.) – utilize the "All About Me" and "Child Information Form" on the website: www.cherish-kindering.org .
CREATE VISUALS	Create a transition book (with photos and cultural connections) to use with the child before, during, and after the transition process. Use photos of all caregivers and the child to support the transition process.
PREPARE THE CHILD	Identify when the child will be told about the move, who will tell him/her, and what will be said. Encourage sending caregiver to have a hopeful and reassuring approach with child.

A major focus in helping children who are moving is to help them identify and express their emotions. A second strategy is to include them as active participants in the moving process. — Vera Fahlberg

Transition Timeline Tasks

Before the Transition:		
	Schedule an FTDM to create the written transition plan and timeline.	
	Encourage positive contacts between caregivers.	
	Develop a collaborative transition plan.	
	Ask current caregivers to share child's medical needs, services, likes and dislikes, soothing strategies and	
	routines with receiving caregivers.	
	Ask all caregivers to look at transition books and photos with the child to assist with preparing for transition	
	Consider cultural connections and needs of child. Embed these components throughout the transition plan.	
	Consider the experience of all caregivers and discuss appropriate additional supports.	

During the Transition:

Introduce the child slowly to receiving caregivers with current caregivers present whenever possible. Send a soothing object (e.g., blanket, toy) and photo of current caregivers with the child to all visit with receiving caregivers.
Schedule the first meetings in the child's home environment or "home turf" (e.g., familiar playground, library or playgroup, etc.). Current caregivers should be present for the entire visit, but they are not there to supervise. Help build the child's trust of receiving caregivers by encouraging all caregivers to interact with one another during subsequent visits.
Encourage current caregivers (and entire family, when possible) to be involved in <i>literally</i> handing off the child to receiving caregivers when it is time for the child to officially move. Make sure that a concrete "goodbye" takes place between the child and current caregivers.
Encourage new caregivers to use the transition book with photos with the child <u>often</u> to assist with coping with the transition.

After the Transition:

Facilitate the scheduling of a minimum of 2 in-person, phone, and/or virtual post-placement contacts
between previous caregivers and receiving caregivers for after the transition takes place. The first visit is
recommended to occur within the first 3-5 days of the move. The visit can occur in the receiving caregiver's
home or out in the community. The visit should not occur in the previous caregiver's home, as this is
confusing for the child. These visits help decrease stress and will result in a better relationship with the
receiving caregiver. Children process their grief better when allowed contact with previous caregivers.

☐ Instruct caregivers to continue using transition books, items, and photos often to support the child through this transition process. Encourage receiving caregivers to reach out to previous caregivers with questions about the child's care, and for possible respite care after the first months following the transition.

Transition Tool Kit

Created by Infant Mental Health staff from Northwest Center, Kindering, and A Step Ahead Pierce County

Informed by the writings of Vera Fahlberg, M.D. and Deborah Gray, MSW, MPA, LICSW.



For additional information and to learn more about the CHERISH program, please visit our website: www.cherish-kindering.org



children encouraged by relationships in secure homes