Introduction to Child Safety Framework

Child Welfare, DCYF

Revised Date: December 19, 2022 Child Welfare Programs Division | Approved for distribution by Jasmine Hodges, Safety Program Manager

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Learning Objectives for this presentation

- Understand **your role** within assessing child safety.
- Become familiar with **terminology** and definitions used throughout the safety framework.
- Understand the **importance of gathering information** to move away from incident focused responses.
- Increase research based **best practice to assess for safety** to reduce bias and subjectivity.
- Increase understanding of how to **think critically** about safety



Mandatory Reporting



<u>RECOGNIZE</u>: Being aware of the signs that may indicate that abuse or neglect has happened.

<u>RECORD</u>: Making sure you have the information necessary before you make a report.

<u>REPORT</u>: Contact DCYF Intake and file the report.



Reporting Timeframe

Law requires that a report of suspected child abuse or neglect be made **at the first possible opportunity**, and *no longer* than <u>48 hours</u> after the mandated reporter **has reasonable cause to believe** the child had suffered abuse or neglect.





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New Allegations of CA/N

Practice thinking critically

- In-home provider attends a session with the family and during the session the mother slaps the 2-yearold child across the face after the 2-year-old would not stop interrupting the conversation. A small mark was left on the child's face and the child was visibly upset.
- > How should the provider respond to this situation?
- > Who should be notified?



Resources for Mandatory Reporters



24 Hours a Day, 7 Days A Week, All Year: 1-866-EndHarm (1-866-363-4276)

Link to New Mandatory Reporter Presentation:

https://prezi.com/piml7bn_b0au/mandatory-reporter-presentation/



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Child Safety Framework



- Informs and guides child safety decisions throughout the life of a case
- Provides precise language and clear definitions
- Strengthens child safety assessment and planning
- Will guide appropriate placement decisions using critical thinking and standardized tools to reduce bias.



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Child Safety Framework is continuous & fluid

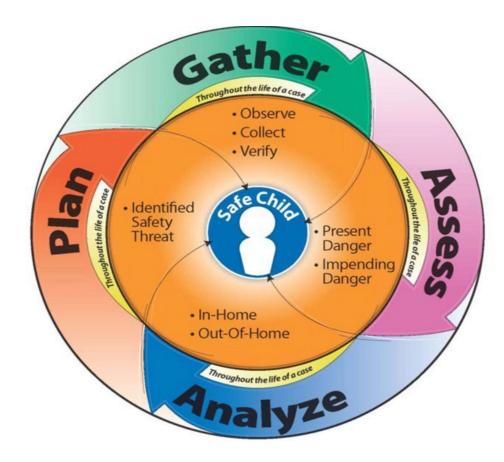
This graphic provides a high level overview of how professionals in all program area continually assess safety throughout the life of a case.

Gather

Assess

Analyze

Plan





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Strengthening Child Safety Practice



Child safety is DCYF's first priority and must be assessed continuously throughout the life of a case

Discussions about safety can be hard. DCYF is committed to a standardized framework to reduce bias and increase critical thinking while honoring agency values.

Inclusion

Respect

Transparency

Integrity



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Definitions within safety framework

- Safe and Unsafe
- Risk of Maltreatment
- Present Danger
- Impending Danger
- Protective Capacities



Child Safety

Children are **SAFE** when there are no present danger or impending danger threats *OR* the caregiver's protective capacities control all known safety threats

Children are **UNSAFE** when they are vulnerable to present or impending danger *AND* caregivers are unable or unwilling to provide protection





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The <u>likelihood (chance, potential, prospect)</u> for parenting behavior that is harmful and destructive to a child's cognitive, social, emotional and/or physical development and those with parenting responsibility are unwilling or unable to behave differently.



Present Danger

Present danger is *immediate*, *significant*, and clearly observable severe harm or threat of severe harm occurring in the present

Present Danger is assessed at every contact DCYF has with a child.





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Present Danger

/Immediate and significant
/Clearly observable
/Occurring in the present
/Child MUST be protected from the
present danger
/Child may or may not need ongoing protection –
Assess for Impending Danger







Impending Danger

Parenting **behavior** that is harmful and destructive to a child's cognitive, social, emotional or physical development *that is likely to occur in the immediate or near future* that **could result in** one or more of the following outcomes:

- ★ Serious or severe harm
- ★ Injury requiring medical attention
- ★ Life endangering illness
- ★ Death



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Protective Capacities

Behavioral, cognitive and emotional characteristics that can *specifically* and *directly* be associated with a person's ability and willingness to care and keep a child safe.



Risk Factors and Safety Issues

•**Risk Factor:** A situation that can be linked with a harmful result over time.

•<u>Safety Issue</u>: A situation that is linked with a major harmful result in the near future.





Common DCYF Risk Factors

Caretaker Substance Abuse

•Caretaker Mental Illness

Domestic Violence

•Caretaker Anger Issues

History of Child Maltreatment

Poor Attachment/Parent-Child Bond

Homelessness



•Caretaker Cognitive Delays



When can these factors move from Risk to Safety Issues?





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Threats to Child Safety are very different than Risk of Maltreatment

Having a real and practical understanding of the differences will have a profound effect on the safety decisions you make daily.



Unsafe or Risk?

- **Risk** to a child's safety *is not immediate* or *obvious*. You likely do not know at the onset of CPS intervention whether it is risk or safety, or both.
- Safety and Risk are not interchangeable terms.
- **Safety** is *identified* and *understood* upon a *full evaluation* and understanding of individual and family conditions and functioning.
- **Risk** is the **likelihood** of **future maltreatment** based on the individual and family conditions and functioning.
- If a child does not meet the safety threshold criteria a risk assessment can still indicate high risk for future maltreatment and a case plan may be appropriate to help mitigate the **potential** of harm.
- An **UNSAFE** child results in establishing a *safety plan* or *requesting out of home placement* to ensure child safety.



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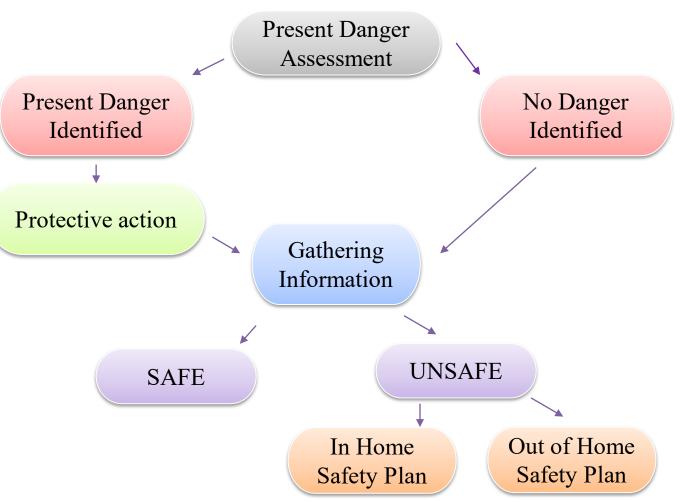
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Safety Framework





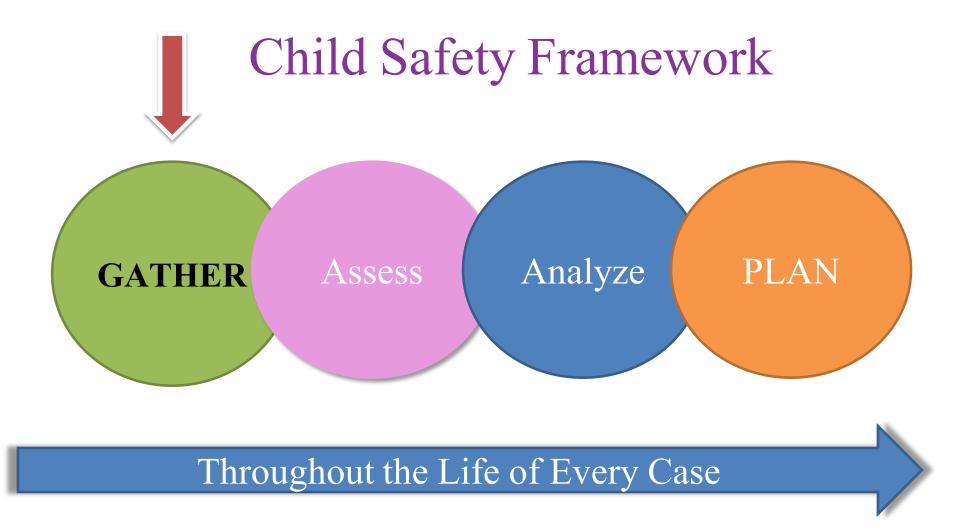


Responding to Present Danger *vs.* Responding to Impending Danger

- 1. Present danger threats are controlled by immediate protective actions
- 2. Impending danger threats are controlled by safety plans:
 - Impending danger threats are identified through a comprehensive safety assessment
 - Safety plans are developed with families and other child safety supports



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Gathering Information

The Child Safety Framework uses six areas of focus when gathering information.

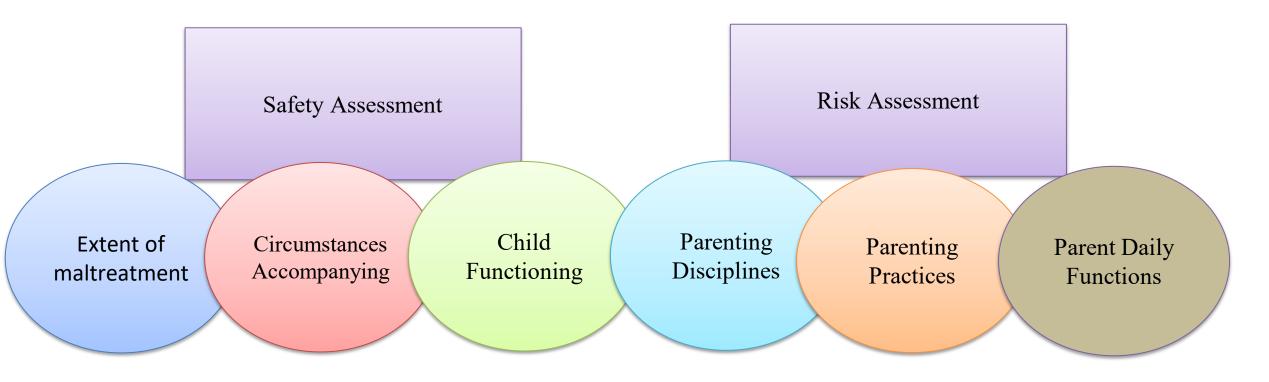
- 1. Extent of maltreatment
- 2. Circumstances accompanying the maltreatment
- 3. Child functioning
- 4. Parenting disciplines
- 5. Parenting practices
- 6. Parent daily functions (outside of the role of parental unit)





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Gathering Information

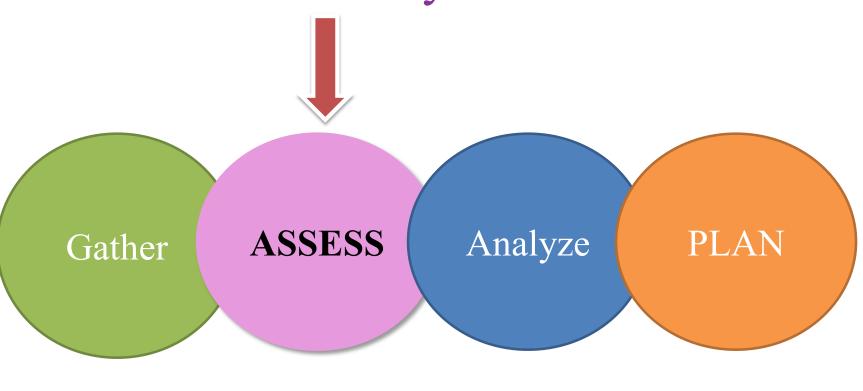


The same information is used to capture a global assessment around safety, risk and case planning needs.



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Child Safety Framework



Throughout the Life of Every Case



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Assess

Weigh all gathered information to:

- Identify if a safety threat(s) exists
- Identify if the threshold criteria has been met.



Safety Threat

DCYF currently has 17 safety threats defining different categories related to...

Family *behavior*, *conditions* or *circumstances* that create **present** or **immediate danger** resulting in *severe impacts* on the child.



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Safety Threshold

In order to determine that a threat exists, the following five criteria must be met:

- 1. Severe impacts on the child
- 2. Occurring immediate or in the near future
- 3. Out of control
- 4. Vulnerable child
- 5. Observable and specific





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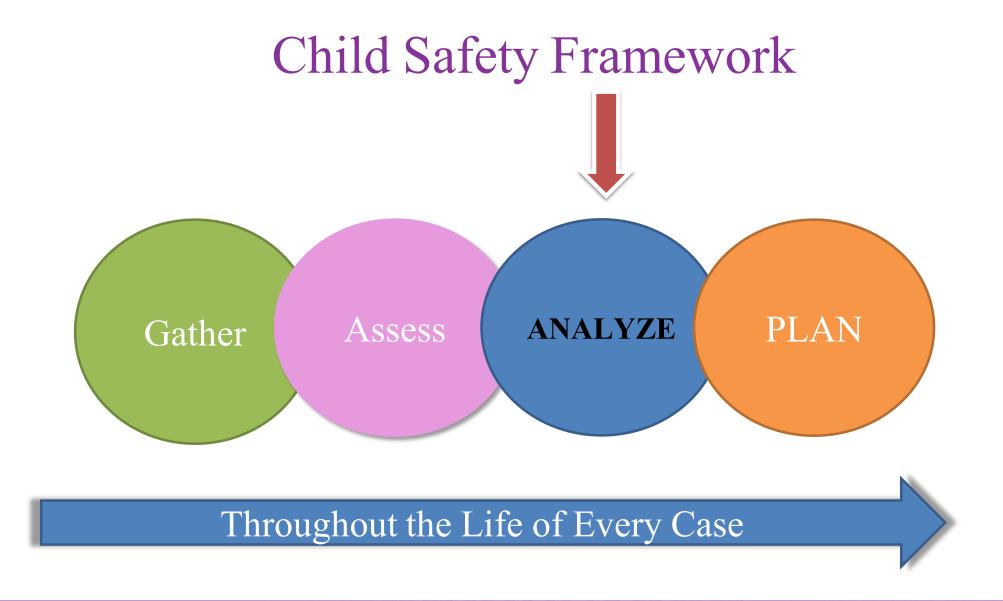


Safety Threat Example

In-home provider is meeting with a family in their home and notices that there is drug paraphernalia sitting out on the living room table. The family has a 3 year old and 7 year old in the home.

- How do you address this concern with the family?
- How is this communicated to DCYF caseworker?
- Are their circumstances that would change your response?
- What if it was a gun, not drug paraphernalia?







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Analyze

- *Evaluate* the identified safety threat
- Understand *how* safety threat(s) are occurring and how they can be managed and controlled
- *Break down* the safety threat to gain greater understanding of how it is occurring

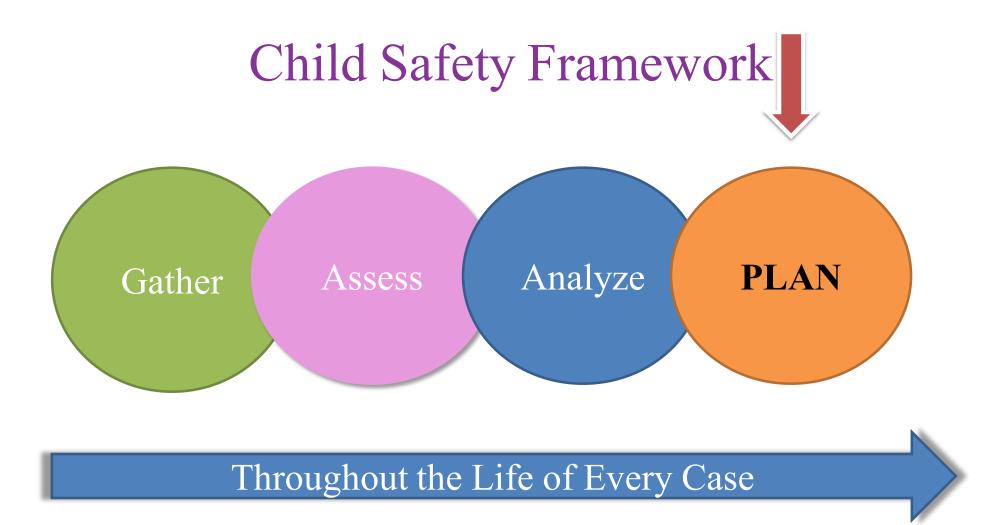




Analyze









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Plan

All Children identified as unsafe will be assessed for a safety plan that controls and manages the identified safety threats.





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Safety Plans

- > Have an immediate effect, are accessible, and contain safety services and actions only.
- > Will not be based on promissory commitment.
- Are developed with the family and are objective, clear, and understood by everyone.
- > Control or manage impending danger threats to the child.
- > Can be in-home or result in removal (out-of-home).

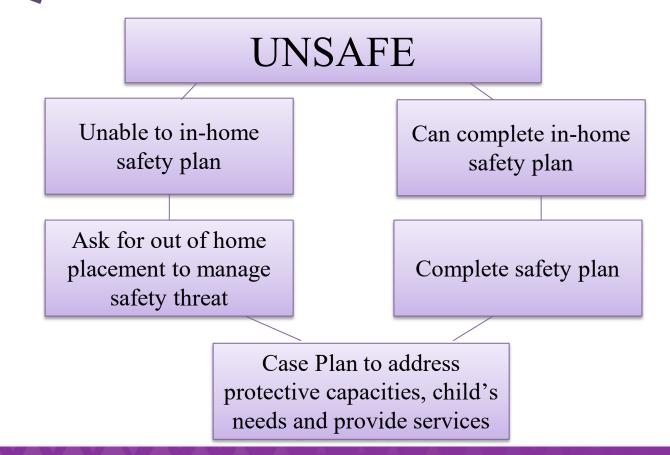
Responsibility for Child Safety rests with DCYF.



Unsafe children

child removal

Once a child is determined UNSAFE case worker will complete a safety plan analysis in order to determine if the unsafe threat can be managed with a safety plan in the home





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Safety Plan Analysis

The Safety Plan Analysis is based on a guide that delves into four different domains:

- > There is a parent/caregiver or adult in the home.
- The home is calm enough to allow safety providers to function in the home.
- The adults in the home agree to cooperate with and allow an In-Home Safety Plan
- Sufficient, appropriate, reliable resources are available and willing to provide safety services and tasks.



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Safety Plan Analysis: There is a parent/caregiver or adult in the home.

- A home exists and can be expected to be occupied for as long as the safety plan is needed.
- Parent, caregiver/adult lives in the home full time.



Safety Plan Analysis:

The home is calm enough to allow safety providers to function in the home.

- *How long have conditions in the family posed a threat?*
- *How frequent* or often does the family condition pose a safety threat?
- *How predictable* is the safety threat?
- Are there occasions when the safety threat is more likely to be an active influence in the home?
- Are there **specific times** during the day, evening, night, etc. that might require increased attention due to the way that the safety threat is manifested?



Safety Plan Analysis:

The adults in the home agree to cooperate with and allow an In-Home Safety Plan.

"Agree to cooperate" refers to the most basic level of agreement to allow a safety plan to be implemented in the home and to participate according to agreed assignments. Anger, irritation, frustration or impatience should not be confused with an unwillingness to cooperate.

- What is the *adult's response* to the identification of the safety threat?
- Do the adults **place blame** for the incident on the child?
- Does the parent/caregiver scapegoat the child? Do the adults demonstrate the capacity to understand the plan?
- Do they understand what is being asked of them?
- Do the adults demonstrate the **ability to follow** the plan?
- If more than one adult lives in the home, is there **dissension about cooperating** with an in-home safety plan?
- If other safety plan participants are included in the plan, do the adults agree to cooperate with them?
- Do the adults **appear to be "promising"** to cooperate **without any evident curiosity** or **questions** about the plan?
- Does the information gathered for the safety assessment provide any indication that the adults are participating in activities that require cooperation?



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Safety Plan Analysis:

Sufficient, appropriate, reliable resources are available and willing to provide safety services and tasks.

This criteria acknowledges certain realities about the limited resources in some communities. If a community is deficient in resources, an in-home safety plan is unrealistic. If the answer is "No" to this question it must clear that safety threats cannot be managed.

- What resources are necessary to control and manage specific safety threats?
- *How can in-home resource, supports, actions control the safety threats?*
- *How will the resource, support action work in the home?*
- What amount of effort is needed from safety plan participants to adequately control and manage threats?
- *How often* during the week will the family need assistance and supervision in order to maintain safety?
- How many hours a day, a night? Are there certain times of day or night that additional support is needed? What is the frequency of needed support and assistance?
- Who is going to assist with monitoring of the safety plan? Are they suitable and reliable? Do they have the child's safety as their priority? Will they contact the department or law enforcement if the child is in danger? Are they trustworthy, committed, aligned with DCYF, supportive, flexible, available?
- *Can* resources, supports, activities and tasks *be implemented immediately* and how long can they be maintained?



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Safety Plan

- Have an immediate effect, are accessible, and contains safety related tasks by natural and professional safety plan participants including service providers.
- Will not be based on promissory commitment.
- Are developed with the family and are objective, clear, and understood by everyone.
- Control or managed active safety threats to the child.
- Is time limited and monitored appropriately by all.



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Provider Monitoring of DCYF Concerns

- Weekly case updates regarding family progress and immediate notification regarding safety concerns are essential to DCYF case and safety planning.
- > How would you as a provider monitor progress in the following areas:
 - > Discipline
 - > Home Conditions
 - Attending necessary appointments for child (Mental Health, Medical, etc.)
 - > Attachment and Bonding
 - > Meeting child's physical, cognitive, social and emotional needs



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Thank you!

Contact: Child Welfare Programs Division Jasmine Hodges, MA, Safety Program Manager www.dcyf.wa.gov



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