

SAFETY MAPPING

SUMMARY

Safety mapping is the process of examining, as a team, the worries (harm and risk/danger), what's working well, and what needs to happen next to ensure the safety of a child or youth in the care of their parent or caregiver.

PURPOSE

- The purpose of Safety Mapping is to develop shared understanding between CWS, the family, and others regarding worries about child safety, what's working well, and what needs to happen next on a referral or case.
 - Through Safety Mapping, we work with a family and their network to develop Harm and Risk (also known as Danger) Statements, Safety Goals and next steps/plans to work toward achieving those goals.
 - Preliminary Safety Mapping — which is more accurately *case consultation* — can occur with only agency staff to provide clarity about a referral or case, using the Consultation and Information Sharing Framework®.
 - True Safety Mapping takes place with a family and their Safety Network in the context of a Child and Family Team (CFT) meeting with the family and their natural supports.
 - Without the family and their network present, key information will always be missing, and decision-making will be based on assumptions, inferences and incomplete facts.
 - Having the family and their network present is necessary to reduce implicit bias and ensure outcomes for children that best ensure safety, permanency and well-being.
 - Children/youth can participate in CFT meetings for Safety Mapping if appropriate to their age and development.
 - Prior to conducting a Safety Mapping, ideally you will have completed:
 - The Three Houses and/or Safety House with the child to incorporate their voice into the CFT worries, working well and next steps.
 - The Circles of Support/Safety Circles process with the family to identify who should be part of the CFT meeting and become part of the Safety Network.
- Harm** = Actual experiences of past/current harm to a child by a caregiver.
 - Risk/Danger** = Worries that the caregiver's behavior may cause harm to the child in the future.
 - Complicating Factors** = Things that worry us but are not harm to the child by the caregiver.
 - Safety** = Acts of protection by the caregiver demonstrated over time.
 - Supporting Strengths** = Things in a family's life that are positive but do not specifically address the danger or risk.
 - Use the SOP Meeting Dialogue Structure (shown below) to guide the meeting flow:
 - Clearly define the **purpose** of the specific meeting; for example, "We are meeting to determine if a safety plan can be put in place that would allow the children to remain safely at home."
 - Set **group agreements** with the team about how they want to work with each other. This can be a brief process of just 2-3 minutes.
 - Discuss who is not present who should be part of the **Safety Network**, and who will reach out to them after the meeting.
 - Specify the **outcome** you hope to achieve, such as a decision, a safety plan or a case plan.

Worries?	What's Working?	Next Steps?
Harm and Risk/ Danger	Safety (Acts of Protection)	What the family and Agency want to see happen and the network members agree to
Complicating Factors	Supporting Strengths	

SOP MEETING DIALOGUE STRUCTURE

PURPOSE	Overall, why are we meeting today?
CONTEXT	Is there anything that might pull our attention away from our focus today?
GROUP AGREEMENTS	How do we want to work with each other?
NETWORK/STAKEHOLDERS	Is everyone here who should be here? If not, what should we do to get them here?
DESIRED OUTCOME	What do we want to walk away with from this meeting (plan, decision, etc.)?
CONTENT	What are we worried about, and what's working well?
NEXT STEPS	What steps do we need to take? Who does what? By when? Next meeting date?
+/- FEEDBACK	What worked? What should we do differently next time?

MAPPING WITH FAMILIES

- To document the Safety Mapping process, you can use the Consultation and Information Sharing Framework or the 4-quadrant mapping, which addresses harm/danger, complicating factors, acts of protection and supporting strengths (see diagram at upper right).
- Begin the Safety Mapping meeting by defining terms for the family, including:

- Use the Three Questions to focus on worries about why the family is involved with CWS:
 - What are we worried about?
 - Harm
 - Risk/danger
 - Complicating factors
 - What's working well?
 - Safety/acts of protection
 - Supporting strengths
 - What needs to happen next?
 - Safety plan or case plan with action steps
 - Next meeting date
- With the team, sort the “working well” into safety and supporting strengths.
- Sort the worries into harm, risk/danger or complicating factors.
- Create a Harm Statement, a Risk Statement (also known as a Danger Statement), and Safety Goal(s).

HARM STATEMENT

- Use the worries related to the parent(s)' past behavior and impact on the child to craft the Harm Statement with the family and their network.
- The Harm Statement is a clear, specific description of the parent's behavior and the negative impact on the child as a result. It includes *who reported the concern* (unless this violates reporting party confidentiality), *what happened specifically regarding the parent(s)' behavior*, and *impact on the child*.
- When you have come up with a working Harm Statement, scale agreement of the team about it and make any adjustments as needed.

RISK OR DANGER STATEMENT

- Use worries related to possible future behavior that may impact the child to craft the Risk Statement or Danger Statement.
- The Risk/Danger Statement addresses *who is worried* about what *future behavior by the parent* and its possible *impact on the child*.
- Scale with the team for agreement regarding the Risk/Danger Statement and make adjustments as needed.

If you are the assigned social worker and you are not facilitating the meeting, you still have a critical role to play in the Safety Mapping process. It is important that you are:

CLEAR—Use language the family can understand, and check in with them to gauge understanding

DIRECT—Be very transparent with the family about why CWS is involved, what the harm was and what worries you have about future risk and danger

TRAUMA-INFORMED—Use a trauma lens in your interactions with the child, youth and parents during the meeting, and in your assessment of why the parent caused the neglect or abuse

SELF-AWARE—Be mindful of your level of engagement in the meeting and with the family, your nonverbal communication, and the possibility for implicit bias

SHARED AGREEMENT

Safety Mapping is about reaching a place of mutual understanding, not necessarily mutual agreement. Every member of the team may not agree with every piece (Harm Statement, Risk/Danger Statement, etc.). This is OK, because insight and safety are not the same thing.

The goal is to develop shared understanding of the worries, what's working well, and next steps. While acceptance of responsibility is preferable, it is neither necessary nor sufficient to create safety. Even if agreement can't be achieved about the harm/danger and what caused it, families and parents can still work toward providing safety for their children. Additionally, parental acceptance of responsibility does not in and of itself ensure safety.

SAFETY GOAL

- Work with the family and their network in the CFT meeting to develop the Safety Goal, which is what the future will look like with regard to the parent's behavior that will keep the child safe.
- Incorporate the child's voice into the Safety Goal, either by having them present, if appropriate to their age and development, or by using the Three Houses or Safety House, completed before the meeting.
- The Safety Goal should be behaviorally specific and describe what the parent, with the support of their network, will be doing to ensure child safety.
- Scale with the team their level of confidence that the Safety Goal, if achieved, would be sufficient to ensure safety of the child.
 - Make any adjustments to the Safety Goal as needed until all team members feel very confident that it would ensure safety.

SAFETY OR CASE PLANNING

- Depending on the purpose of the specific meeting, work with the team to develop behaviorally-based objectives for either a safety plan (short-term plan to address immediate safety threats) or case plan (longer-term plan to address behavior change over time) to meet the Safety Goal.
- If a decision is made that the child(ren) must be removed, discuss with the team how this can happen in the best way to minimize trauma to the child.

ENDING THE MAPPING

- Do a “plus/delta” process with the team, asking what worked well and what should be different next time.
- Whenever possible, schedule your next CFT meeting with the team when wrapping up the current meeting.

SEE ADDITIONAL SOP QUICK GUIDES FOR MORE INFORMATION:

- BEHAVIORALLY-BASED CASE PLANS
- CONSULTATION & INFORMATION SHARING FRAMEWORK
- HARM & RISK/DANGER STATEMENTS
- SAFETY PLANNING

ROLE OF THE WORKER