

AN INTRODUCTION TO SAFETY ORGANIZED PRACTICE

AN ORIENTATION FOR PARENTS AND CAREGIVERS

An Introduction to Safety Organized Practice

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An Introduction to Safety Organized Practice

Two of the most important things a parent can do to successfully work with Child Welfare and achieve his/her family goals are to 1) understand the Child Welfare process, and 2) become fully involved in that process.. Having an understanding of the processes used and why they are used will help parents and other caregivers become full participants and partners throughout their collaboration with Child Welfare.

This guide has been designed to provide the information you will need to understand the Child Welfare process in the child welfare agency you will be working with. In this particular agency, Safety Organized Practice (SOP) is used as a framework for how to work with families, and others involved in a families life. This booklet and orientation is designed specifically to help parents and other caregivers understand the SOP approach to child welfare practice.

The primary goals or objectives of Safety Organized Practice include¹

- **Development of good working relationships:** Families are the most important part of the team. As such, it is important that families who are working with Child Welfare are able to participate fully in the process. To do this, they must first be treated with dignity and respect. Further, they will need to understand the language, tools, and reasoning for decisions made by Child Welfare.
- **Use of critical thinking:** Sometimes it is hard to think through the difficult situations that families experience when involved in the Child Welfare system. SOP is intended to help everyone think through these difficult things together so that a plan can be created that helps everyone know that children are or can be safe with their families.
- **Creation of detailed plans for enhancing the daily safety of children:** Child Welfare is mandated to keep children safe and to find permanence for children. Research shows that children do best with their natural families.

¹ The term Safety Organized Practice was first used by Andre Turnell 2004 for more information visit www.signsofsafety.net

With this in mind, SOP agencies work toward creating plans with families that keep kids safe at home whenever possible. When children do need to be removed from their families plans are created to return those children home as soon as possible or, when necessary, find the next best permanent home

What parents/caregivers can expect from Safety Organized Practice:

- To be treated as an equal member of a team (a team built primarily by you, the parent)
- To be included in the planning on how to keep your child home or have your child returned home
- To be asked for your opinion
- To be respected and valued
- To be told the truth
- To be asked to provide detail around things that have worked well in your family, as well as things that have been worrisome
- To be asked to work as a team with Child Welfare, service providers, your friends, family and your children to create future safety

Safety Organized Practice takes several things into consideration that it will be important for you to understand. These key elements include:

- Culture
- Trauma
- The use of assessment tools
- Signs of Safety
 - Safety Mapping
 - Three Houses
 - Safety Circles
 - Safety Planning

Culture and Family Values²

Culture plays an important role in how caregivers work with Child Welfare and how Child Welfare works with caregivers. Culture includes those things that are important to one's family and that have shaped how someone might see the world. Several factors contributing to one's culture include:

- Spiritually and/or religion
- Race
- Ethnicity
- Celebrations
- Holidays
- Traditions
- Foods
- Ways of spending time together

Culture leads to what we value in life.....

Defining Your Values

Defining your personal values will help you discover what's most important to you.

What are my values? (Let's read some of the values on the handout sheet)

A good way to figure out your own values (what's important to you) is to look back on your life and ask "when was a time I felt really good, and really confident?"

Step 1: Identify the times when you were happiest

- What were you doing?
- Were you with other people? Who?
- What other factors contributed to your happiness?

Step 2: Identify the times when you were most proud

- Why were you proud?

² Information regarding values was adapted using the website mindtools.com

- Did other people share your pride? Who?
- What other factors contributed to your feelings of pride?

Step 3: Identify the times when you were most fulfilled and satisfied

- What need or desire was fulfilled?
- How and why did the experience give your life meaning?
- What other factors contributed to your feelings of fulfillment?

Step 4: Determine your top values, based on your experiences of happiness, pride, and fulfillment

Why is each experience truly important and memorable? Use the following list of common personal values to help you get started – and aim for about 10 top values. (As you work through, you may find that some of these naturally combine. For instance, if you value philanthropy, community, and generosity, you might say that service to others is one of your top values.)

Thinking about your culture and your values can help you identify what is most important for you moving forward....

What is important for you to pass on to your child or children?

How can you do this?

What would child welfare need to know about your culture and/or values so you can best work together?

Trauma³

What is trauma?

Trauma is an intense event that threatens a person's life or safety in a way that is too much for the mind to handle and leaves the person powerless. Trauma is the result of a stressful event or on-going events in life that make someone feel nervous, scared, helpless, and out of control.

Traumatic experiences often involve a threat to life or safety, but *any* situation that leaves someone feeling overwhelmed and alone can be traumatic, even if it doesn't involve physical harm. It is not what happened that decides whether an event is traumatic for you; it's how you *experience* that event. The more frightened and helpless you feel, the more likely you are to be traumatized.

Causes of trauma:

- It happened unexpectedly.
- You were unprepared for it.
- You felt powerless to prevent it.
- It happened repeatedly.
- Someone was intentionally cruel.
- It happened in childhood.

Trauma can be caused by a onetime event such as a horrible accident, a natural disaster, or a violent attack. Trauma can also come from ongoing, relentless stress, such as living in unpredictable situations, or experiencing violence in the home or in neighborhoods. People who experience childhood trauma are more likely to struggle with trauma in the future. The very intervention you are experiencing through Children's Services may trigger a trauma response in you and your children.

People react in different ways to trauma. Some withdraw, some act out verbally or physically, and some shut down. These responses are *normal* reactions to *abnormal*

³ Information presented about Trauma was adapted from <http://www.nctsnet.org/resources/topics/child-welfare-system> and http://www.helpguide.org/mental/emotional_psychological_trauma.htm

events. The important thing to figure out is how to recognize trauma reactions and how to respond in a way that is not harmful to one's self, one's children, or others.

Emotional symptoms of trauma:

- Shock, denial, or disbelief
- Anger, irritability, mood swings
- Guilt, shame, self-blame
- Feeling sad or hopeless
- Confusion, difficulty concentrating
- Anxiety and fear
- Withdrawing from others
- Feeling disconnected or numb

Physical symptoms of trauma:

- Trouble sleeping and nightmares
- Being startled easily
- Racing heartbeat
- Aches and pains
- Fatigue
- Difficulty concentrating
- Edginess and agitation
- Muscle tension

A History of Trauma can affect parenting

Exposure to trauma can make it difficult to:

- Recognize what's safe and unsafe to keep you and your children from harm
- Stay in control of your emotions especially in stressful situations like interviews with child welfare, court hearings, visits with your children
- Trust others to help you
- Deal with stress in healthy ways

Reminders of traumatic events can happen without warning and can be caused by smells, sounds, places, and people. Reactions to reminders include:

- Physical feelings: rapid heartbeat, shallow breathing, tense muscles
- Emotional Reactions: anger, fear, feeling irritated with others
- Avoiding: staying away from other or putting off daily tasks to avoid reminders

- Using alcohol or drugs to feel better

Trauma can affect your relationship with your child:

- Your children may not trust that you can keep them safe
- You and your child might expect “bad things” to happen again
- You may not recognizing when your children’s behaviors are reactions to trauma reminders and think they are misbehaving on purpose to make you

What can you do?

- Remember that your symptoms are normal reactions to trauma
- Talk about your thoughts, feelings, and reactions with people you trust
- Become aware of reminders of the traumatic event(s)
- Learning healthy ways to feel safe and relaxed
- Talk with others that have experienced what you are going through. There may be support groups with others going through the child welfare system
- Be patient with yourself, healing takes times.
- Be patient with your children and recognized some of their behaviors may be related to trauma
- Seek therapy, this can often help with learning to recognize reminders of the trauma and learn healthy ways to deal with that

Thinking about trauma...

What are your thoughts about the impact of trauma on your life /your child’s life?

If you have experienced trauma, what are some things you can do for yourself and your child to work through the trauma?

Assessment Tools⁴

Child Welfare uses computerized assessment tools to help guide decisions. Assessments tools offer evidence- and research-based tools that help social workers make decisions at key points during the time a case is open. Decision making tools can help social workers make fair and accurate decisions. Your social worker will be using assessments tools, along with the Safety Organized Practice framework. Some of the tools used include the following:

Hotline Tool:

This tool is used when someone calls Child Welfare regarding worries about a child. It helps Child Welfare determine if the call includes information that would require by law a response by Child Welfare, and also how quickly Child Welfare needs to meet with the family to assess the safety of the child or children involved.

Safety Assessment

If the Hotline tool indicates that Child Welfare should respond, then the social worker would use the safety assessment tool to help determine 1) if a “safety threat” is present in the family, 2) if there are factors in the family that could protect the child from harm, and/or 3) if and how the safety threat can be resolved. The safety assessment assesses the child’s present danger and the interventions currently needed to protect the child.

Risk Assessment

The risk assessment tells Child Welfare and the family “how worried they should be.” This is accomplished by looking for factors that can contribute abuse or neglect happening in the future. The risk assessment identifies families with low, moderate, high, or very high probabilities of future abuse or neglect. By completing the risk assessment, the worker obtains an objective appraisal as to how likely it will be for the child or children to suffer from maltreatment or neglect within the next 18 to 24 months.

⁴ Information adapted from the National Crime and Delinquency website at <http://nccdglobel.org/assessment/structured-decision-making-sdm-model>

Family Strengths and Needs Assessment:

The family strengths and needs assessment is used to take a look at a family's current strengths and needs. It used to help identify the areas that are most important to work on so the child can remain or return home. It also looks at those things that the family is doing well so that those strengths can be utilized to help with some of the more worrisome areas. This is an important part of making sure the case or safety plan addresses the right areas.

The strengths and needs assessment serves several purposes:

- It ensures that all social workers consistently consider each family's strengths and needs in an objective format when assessing need for services.
- It provides guidance for case planning for families, social workers and supervisors.
- The initial strengths and needs assessment, when followed by periodic reassessments, helps families, social workers and their supervisors to easily see what changes are happening in a family and to see how services are working.

Reunification Reassessment

If your child is placed outside your home in a plan of family reunification, a reunification will be completed prior to your court review hearing. The purpose of the reunification reassessment is to help you know what you will have to do to have your child returned to your care. It helps assess how well you have done on your case plan goals and also how visitation is going.

Re-assessment for in home cases

If you are in a court ordered plan of Family Maintenance, at least every six months, before your court review hearings, your social worker may use the re-assessment tool to assess your progress toward objectives and long-term goals in your case plan, including reduction of risk and needs. A re-assessment may be done earlier if there have been significant changes that affect risk and needs.

The risk re-assessment determines whether you should continue to get services from your Child Welfare agency or if your case should be closed. For cases that will remain open, the re-assessment includes updating the treatment plan based on current needs and strengths.

Each re-assessment includes:

- Family risk re-assessment for in-home cases
- If the case will remain open, the reassessment also includes family strengths and needs re-assessment and a case plan update.

Safety Mapping or Family Team Meetings⁵

Safety mapping meetings (also known as family team meetings) help everyone understand each other better, understand what each person is worried about in terms of a child's safety, what each person sees as going well in the family, and what needs to happen to move forward in the child welfare case. If your social worker or the agency you are working with has invited you to have a safety mapping meeting or a family team meeting, this is what you can expect:

- Either your social worker or another person will guide or facilitate the meeting.
- You and others, including the people you invite, will be asked *three questions* focused around the safety of your child or children. The three questions are:

What are we worried about?



What's working well?



What's next?

Important terms to know for the safety mapping or family team meeting:

Harm – Things parents or caretakers have done or failed to do in the *past* that have hurt that child either physically, emotionally or developmentally.

⁵ This information is based on work by Insoo Kim Berg, Steve De Shazer, Sonja Parker, Andrew Turnell, Adriana Urken, Michael White, and members of the Massachusetts Child Welfare Institute.

Danger – Credible concerns child welfare, the family or members of the child's community have about actions the parent/caregiver may take in the *future* that will or could harm the child.

Complicating Factors – Literally anything that *complicates* efforts to make the child safe that does not involve direct harm to the child by the caregiver.

Safety – Things parents or caretakers have done and are doing that keep the child safe from the harm and/or danger now and in the future. The parents/caretakers must show that they can continue these things over time for child welfare to close their case.

Strengths/Protective capacities – Coping skills, things about an individual or in a family that contribute in positive ways to family life but do not, in and of themselves, directly keep the child safe from danger over time.

How to get ready for the safety mapping or family team meeting:

- Invite the people in your life that care about you and, most importantly, the safety of your child.
- Think about what will keep your child safe, and help others, like your social worker, know that your child will be safe in your care over time.
- Think about the things that are important for Child Welfare to understand when working with you, such as your family, your culture, etc.
- Be prepared to talk about your family history and your family tree (the people in your family).
- Prepare to make goals with those at the meeting that will keep your child safe over time.
- Commit being open and honest, and ask your support people to do the same.

Possible outcomes of the safety mapping or family team meeting:

- For everyone involved, especially you as the parent or caregiver, to have a clear understanding of why Child Welfare is working with your family.
- The creation of an easy-to-understand statement(s) called harm and danger statements that can help everyone understand why your family is involved in Child Welfare and what they are worried about happening in the future if nothing changes.
- The creation of an easy-to-understand statement called a *safety goal*, which helps everyone understand what you will be doing over time to show everyone that the child will be safe remaining in or returning to your home.
- The creation of a case plan or safety plan in collaboration with the people in you and your child's life that will lead to on-going and lasting safety for your child.
- An agreement to continue to meet as a team to see how your plan is working and what needs to happen for Child Welfare to return your child or children home and/or close your case.

Note: The safety mapping/family team meeting is *your* meeting, so you have say in what the goals should be. These outcomes and goals will take more than one meeting to accomplish, and you should ask that another meeting be scheduled if you have not met your goals at the current one.

What to expect after your meeting:

- Often you will have follow up meetings with the team you develop to continue discussing safety, check in about goals, and celebrate your progress.
- You will get written summaries of your meetings so you can look back at what was talked about and decided.

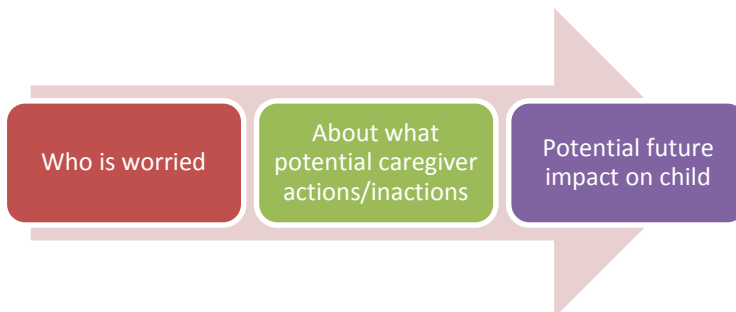
Harm Statements: What happened in the *past* to hurt the child physically, emotionally and/or developmentally.



Example:

It was reported [or law enforcement reported] that Adam's dad, Matt, hit Adam last night on the face and back, leaving multiple bruises on both parts of his body and requiring Adam to get medical care at the local emergency room.

Danger/Risk Statements: What people are worried may happen in the *future* because of the *harm* in the past.



Example:

CPS, the police, and Adam's mom, Tonya, are worried that Adam's dad, Matt, may hit Adam again, leaving him with [more] bruises and even more serious injuries.

Safety Goal: The vision for where you *want/need to get* to so everyone (including you, your family, child welfare and the judge) can know that your child will be *safe in the future*.



Example:

Matt will work with CWS and his safety network (family, friends, and professionals) to show everyone he will always discipline Adam in ways that do not injure him (such as using time-outs, taking away Adam's Gameboy, and giving incentives like earning a toy). CWS will need to see this safety plan in place and working continuously for a period of six months so that everyone is confident that the safety plan will keep working once CWS withdraws.

The Three Houses tool⁶

A social worker may talk to your child using a tool called three houses. Just like safety mapping, three houses uses the three question to learn from children what they are worried about, what they think is working well and what they hope for in their homes and in their families.

Process

The social worker will explain the three houses to the child as follows

- **House of worries:** *“This is the house where you can draw, write, or talk to me about those things in your home that worry you, that make you feel scared, upset, or sad.”*
- **House of Good things:** *“This is the house where you can draw, write, or tell me about those things in your home that make you happy, feel safe, and are fun.”*
- **House of Hopes and Dreams:** *“This is the house where you can draw, write, or talk to me about what would be different in your house if your house of worries could go away.”*

Sharing the three houses:

After completing the three houses, the social worker will explain to the child what will happen next and ask the child if it is okay to share the three houses, and, if so, with whom.

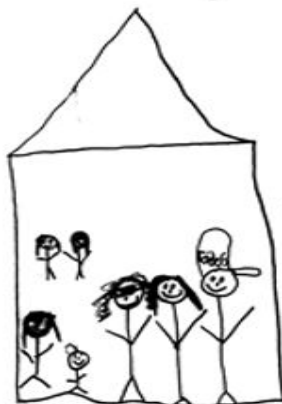
If it seems safe for the child, the three houses will be shared with the parents. This is important, as parents and others should understand how the child is seeing their situation; this is often referred to as “the voice of the child.”

The next page demonstrates sample illustration of what a child’s three houses may look like.

⁶ The Three Houses was created by Nicki Weld and Maggie Greening, New Zealand

Example of a child's three houses⁷

House of Good Things



I like being with Aunt Shelly. I like it when Dad is not in jail. I like when Mom doesn't do drugs and is happy. I like my bed at Aunt Shelly's.

House of Hopes and Dreams



Me, Joseph, Mom, Dad, Aunt Shelly, and a couple would all live in a big house together. We would all love each other and never be mad. Mom and Dad won't use drugs and they won't leave us anymore.

House of Worries

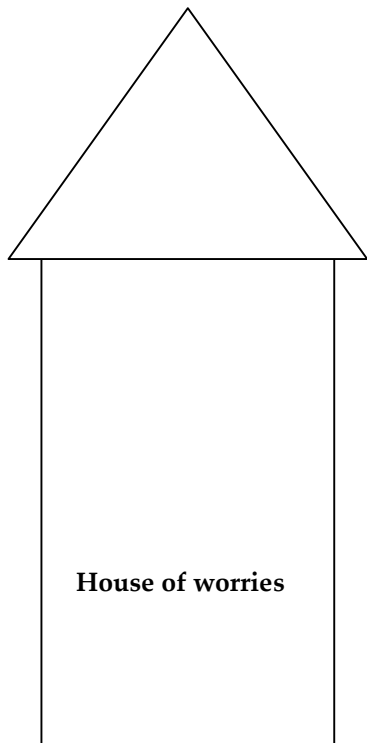
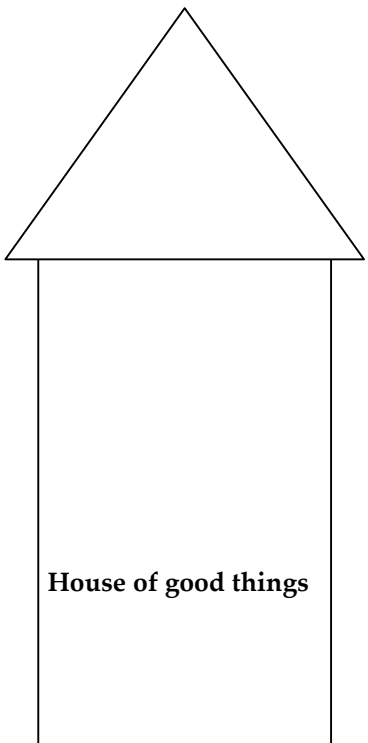
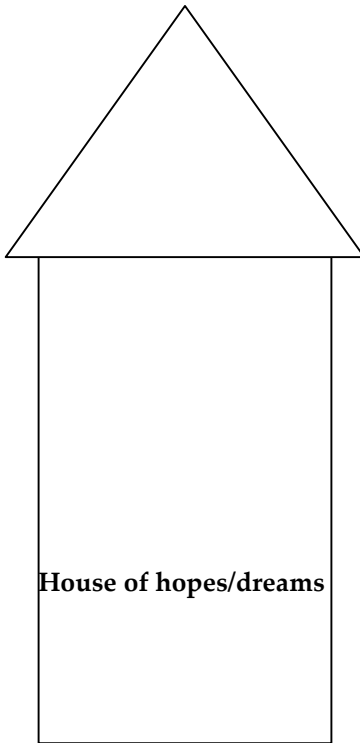


Mom yells at me and Joseph. She does drugs and leaves us. I miss her and Joseph cries for her. I don't like going to Heidi's house. I can't sleep and I'm scared. Dad is in jail and we miss him.

⁷ Provided by Ella Kane, MSW

Practice...

(Fill out your own three houses)

 <p>A diagram of a house with a triangular roof and a rectangular body. The text "House of worries" is centered in the body.</p> <p>House of worries</p>	 <p>A diagram of a house with a triangular roof and a rectangular body. The text "House of good things" is centered in the body.</p> <p>House of good things</p>	 <p>A diagram of a house with a triangular roof and a rectangular body. The text "House of hopes/dreams" is centered in the body.</p> <p>House of hopes/dreams</p>
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The Family Safety Circle tool⁸

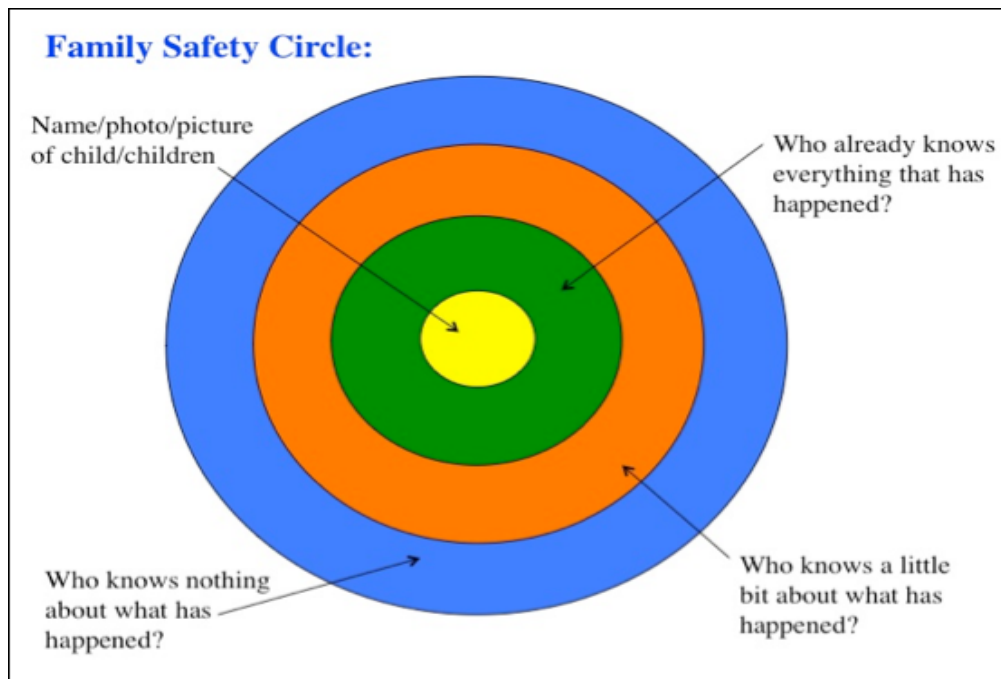
The Family Safety Circle tool is a tool to help you identify the people in your life that may be able to help you reach your safety goal. Sometimes it can be very difficult to ask for help or to tell others that Child Welfare is involved in your life. These are normal feelings that many families experience.

Evidence shows that families need a circle of support in order to have safe and healthy children. When it comes to creating a family safety circle, it is useful to ask yourself, “Who are the people in my life (family, friends, professionals, co-workers, babysitters ect.) that care about my child and my family?”

One tool that your social worker may use to help you identify your Safety Network is the Family Safety Circle. With the right safety network in place, Child Welfare can eventually close your referral or case and not have to be involved with your family in the future.

⁸ Further information about the Safety Circle Tool is available at www.aspirationsconsultancy.com

Example of a Family Safety Circle



How to build your safety circle

Center: your child

Inner circle: People in you and your child's life who already know what happened (that led to child welfare services being involved). Some questions that may help you determine who is a part of your inner circle include:

- Who do you call when you are really proud of something?
- Who do you call when you need help with something?
- If you were to write a will who would you name as the person who would raise your child(ren)?

Middle circle: People in you and your child's life who know a little bit about what has happened, or know something happened but have very little information. Some questions that may help you determine who is a part of your middle circle include:

- Are there people in your life you could call but don't?
- Would you be willing to let them in to help?

Outer circle: People in you and your child's life who don't know anything about what has happened. Some questions that may help you determine who is a part of your outer circle include:

- Who are the people who may be important to you child but that you would not have thought to call?
- Who are the people who you have not seen for a long time but you know care about you and your child?

Once you have filled out all the rings of the safety circle, think about the following questions. If you are unsure on some questions, discuss them with others who can support you or ask your social worker:

- Who can you move from the outer circles to the inner circle?
- Who else from these outer circles do you think needs to be part of this inner circle?
- Is there anyone in these two outer circles who you have thought about telling or come close to telling, but you haven't quite gotten there yet?
- Who would others who are close to you and your children say needs to be in this inner circle?
- Who would your child want to have in this inner circle?
- Who do you think your social worker would want in the inner circle?
- Who of all of these people do you feel most comfortable with/most understood by and think would be important to have as part of the safety network?

Let's try it –Draw your Safety Circle

Safety – Case Planning

Once you have completed safety mapping and created danger statement(s) and safety goal(s), your next step is to develop your case or *safety plan*. Remember this plan is intended to help you know and understand what to do to show that you will be able to keep your child or children safe over time. It is also what your social worker, the child welfare agency, attorneys, and the judge will use to see if you have demonstrated that you can keep your child safe in your care.

After completing the safety plan, it is important for you to discuss your strengths and struggles related to the safety plan with your child welfare worker on a regular basis. It is their job to help you meet the objectives of your case/safety plans so your child or children can stay or go home. If they don't know what you need, they cannot be helpful.

Steps for developing an ongoing safety/case plan

Developing a safety plan can take more than one meeting, but it starts by sitting down (often this starts in your safety mapping) with your social worker, your network - and when appropriate, the child - and together thinking through the important question:

What needs to change in the care of these children so we all will know they will be safe?

*Your plan includes the action steps that take you **from your danger statement to your safety goal***



Below are some stages that you, your network of support, your child and your social worker should be considering in creating this plan:

- **Building relationships, assessing danger and safety**
Start by figuring out how you can work with your social worker in a way that gets you what you want/need. This may be challenging and is an important step in

reaching your goal of keeping your child home or having your child come home. If you are unable to develop trusting relationship with your social worker, the work will be harder. Your social worker as well as the team you develop is critical to your success. Stay focused on the task: What are the actions that happened and the impact on your child that began the Child Welfare involvement; and what can you do to make sure those things don't happen again and that everyone involved feels confident that those things won't happen again?

- **Get clear on the danger statements and safety goals**

Make sure you understand and helped develop your danger statement and safety goal(s). If you don't understand, say so. The bottom line is to determine how you can create future safety. You might not always agree with the statements, but you need to be sure you understand what they mean and what is expected of you.

- **Understand your safety plan and how it relates to the danger statements and safety goal**

Your safety plan contains the steps you will need to take to show that you are moving to your safety goal (what everyone needs to see to feel the child will always be safe in your care). In other words, it is the directions or recipe for how you are going to go from danger to safety. This may require some time, changes, and hard work and may take more than one meeting to create. Make sure you understand what is being asked of you and how you will meet your safety plan objectives.

- **Identify and involve the network**

You must have people in your life that will help you make it to your safety goal. You may want to consider people who:

- have helped you make good choices in the past
- you trust with your children
- will be honest with you even when it's hard.

Remember that these are the people who you will involve and depend on to help you keep or get your kids home (the people you identified in your safety circles). Families that have the most success reaching their goals have a good safety network.

- **Reach agreement on the plan**

Once you have the outline of a plan, your social worker may ask you how you are feeling about the plan, how willing you are to do the plan, how confident you are that you can do it, and how you will do it. Be honest when you answer these questions. If you need help with parts of the plan, speak up. It is your plan and you must understand it. Your support/safety network should be a part of the plan and be able to help you reach your goals and objectives.

- **Bring it back to the children**

Take the plan back to your children. Make sure your children know that you are working hard to complete the plan. With your social worker, ask your kids for their ideas so they can feel that they are a part of the plan. If your kids are old enough, they can write or draw parts of the plan and hang it in the home.

- **Monitor, build on it, and continue to assess**

Ask, “How will we know?” Make sure you know how to tell if the plan is working. Further, how will your social worker know it is working? How will your safety network know it's working and let your social worker know it's working? Make sure you meet to talk about whether the plan is working. Your social worker will ask you at least once a month how you are doing on your plan. These plans are a process, not an event, and will need to be adjusted over time. Make changes when needed.

- **Celebrate successes as they come!**

Change can be difficult and small steps should be celebrated. Talk about those things that you are doing well. Compliment yourself, your children, your friends and family for work well done. Be patient with yourself and continue to do the best you can each day. Ask for support when you need it and celebrate the courage you have to be willing to ask.

Resources

Birth Parents with Trauma Histories and the Child Welfare System . (2012). Retrieved September 15, 2014, from The National Child Traumatic Stress Network:
<http://www.nctsnet.org/resources/topics/child-welfare-system>

Children's Research Center Structured Decision Making. (n.d.). Retrieved September 9, 2014, from NCCD:
<http://nccdglobal.org/assessment/structured-decision-making-sdm-model>

Emotional and Psychological Trauma. (n.d.). Retrieved October 6, 2014, from Helpguide.org:
http://www.helpguide.org/mental/emotional_psychological_trauma.htm

Introducing an Integrated Safety-Organized Practice. March, 2013, from the NCCD and Northern California Training Academy. Accessible at www.humanservice.ucdavis.edu/academy

What are your Values . (n.d.). Retrieved November 22, 2014, from Mindtools.com:
http://www.mindtools.com/pages/article/newTED_85.htm

