

BEHAVIORALLY-BASED CASE PLANS

SUMMARY

Behaviorally-based case plans focus on specific, concrete strategies and actions to effectively and permanently change the parent's behavior with regard to its impact on the child, rather than mere completion of or compliance with services.

BASIC PRINCIPLES

- A foundational principle of behaviorally-based case plans in Safety Organized Practice is that services and safety are not the same thing.
 - Service completion does not guarantee child safety. Behavior change, demonstrated and sustained over time, is the key to safety.
- In some circumstances, child safety can be attained without use of formal services.
- Services that are individualized and specific can be a useful tool to help a parent achieve behavior change; however, any services should be regarded as the last piece of the case plan puzzle.
- *Compliance* is not the same thing as *engagement*, and compliance is much less successful in achieving behavior change.
- A Safety Network is a necessary component of a Family Maintenance or Family Reunification case plan.

ENGAGING THE FAMILY

- Behaviorally-based case plans *cannot* be created without the guidance, active participation and willingness of the family and their Safety Network.
- Engagement skills are critical to the case planning process and to the family's willing participation in the plan. Engagement is about seeing and focusing on what people do right and what is important to families. Engagement takes work, but the plan will not succeed without it.
 - The more a family perceives the case plan as their idea, the more they will buy in to it.
 - A parent talking about "jumping through hoops" on their case plan is a sign to the social worker to work on engagement in case planning.
- Case plan development should occur after you have:
 - Completed a Safety Mapping with the family, creating a Harm Statement and/or Risk/Danger Statement and Safety Goal(s).
 - Completed the SDM Safety and Risk Assessment and Child/Adolescent Needs & Strengths (CANS) tool.
- Having a Child and Family Team (CFT) meeting is best practice for creation of the case plan with the family and their network.

- The family's network is critical to help define and describe what the parent's behavior will look like when the worrisome behavior is not happening.
- Involve children/youth in case planning as developmentally appropriate.
 - For younger children, you can utilize the Three Houses and/or the Safety House to incorporate the child's vision of their parent's future positive behavior into the plan.
 - Older children usually can explain their perspective on what their mom or dad is like when parenting at their best, and they can be part of a CFT to develop the family's case plan.
- Always involve the Tribe in case planning for ICWA cases. This is legally required and also very important to help build a culturally relevant plan for the family.

BUILDING THE CASE PLAN

- Keep a laser focus on what will alleviate the harm and risk/danger that led to the family's CWS involvement.
 - Avoid cookie cutter case plans that prescribe "the trifecta" of generic services — (1) parenting, (2) mental health, and (3) substance abuse — for all parents regardless of reason for CWS involvement.
 - Avoid case drift; make sure the plan actually addresses the harm/danger and why CWS is involved, rather than focusing on complicating factors.
 - Including too many different objectives can overwhelm a family and result in paralysis in moving forward. Pick the top three that are genuinely necessary to ensure child safety.
- The plan should focus on action steps that will help with the primary safety concern first.
 - If a parent does not have a network, building one should always be a first case plan objective.
 - Generally, substance abuse and/or mental health concerns should be addressed before worries about parenting skills, housing or employment, since success in these areas typically relies on the parent's sobriety and stabilized mental health.

HELPFUL TIPS

Services are useful on case plans only insofar as they support the parent to make and sustain actual behavior change. When including a service, specify expectations for the parent's behavior beyond mere attendance.

Use a trauma-informed lens when assessing reasons for the parent's behavior, and make sure the case plan objectives help get to the underlying trauma.

- Mental health and substance abuse often need to be addressed simultaneously, as substance abuse is often self-medication of mental health challenges. However, for some individuals, it makes sense to treat one issue or the other first. If the parent has service providers for substance abuse or mental health, coordinate with them about how to best address and sequence treatment for both issues.
- Unless parenting was the primary safety issue, parent education, if needed, should typically follow other case plan objectives. Also, consider whether parenting classes are genuinely necessary to resolve the safety concerns. Parenting ability is rarely the actual cause of a safety threat.

USING A SOLUTION-FOCUSED APPROACH

- Building a behaviorally-based case plan requires skilled engagement, a willingness to participate in creatively identifying strategies with the family and their network, and understanding that the family and their network are best equipped to describe what the parent's behavior will look like when the problem is not happening.
- Use Solution-Focused Questions to guide the case plan conversation during the CFT meeting, including:
 - Exception questions to help the family identify when the concerning behavior wasn't happening, i.e., "Has there ever been a time when you were able to stay clean and sober? How did you manage to do that? How was your parenting different when you were clean—what did it look like?"
 - Relationship questions to identify behavior from other perspectives, i.e., "What would your son say is his favorite thing about you as a mom when you're clean?" "What new actions or behaviors might your children want to see you take to feel confident that the violence will not happen again?"
 - Preferred future questions to identify the family's vision for what could be, i.e., "When this is all behind your family, what will you be doing differently to parent your children?" "What do you think needs to happen to get us from 'here,' where everyone is worried, to 'here,' where your children are always safe? If we had to identify two or three needed steps to get there, what would they be?"
 - Scaling to identify the family's willingness to participate in the plan, agreement to the plan, and confidence that the plan will ensure safety.

Make sure case plan goals are clear, specific, understood and agreed to by the parent and their network, and realistically achievable in the timeframe of the case plan (i.e., six months).

When including services, avoid specifying the provider in case the parent is not able to enroll in their services due to waiting lists or they aren't a good fit.

HELPFUL TIPS

VISITATION/FAMILY TIME

- Visitation, or "family time," is one of the most important pieces of the case plan. Family time should happen in the least restrictive way that is safely possible; for example, with a member of the network supervising, and in a location such as the home of a family member or friend. In the CFT, be sure to address what visitation could look like with the support of the network, and at what milestones visitation may be re-addressed or made less restrictive.

SPECIAL CASE ISSUES

- In cases where there is domestic violence, which is a pattern of perpetrator behavior characterized by coercion and control, separate networks must be developed for each parent, and separate meetings should occur to develop the case plan for each parent. Visitation should also occur at a different time and location for the perpetrator than for the victim of the violence.
- In cases where a youth has dual status (involvement with Child Welfare and Juvenile Probation), Probation needs to be part of the case planning process with the social worker, youth, family and their network.

WRITING THE CASE PLAN

- Use language the family can understand. Write for a sixth-grade reading level.
- Do not use acronyms or jargon.
- Only select three to five service objectives in CWS/CMS. Rewrite them as needed to be family-friendly and address the family's specific needs.
- Work around the Word case plan template as needed to develop a family-friendly plan that reflects the work you did with the family and their network.
- Add the Harm Statement, Risk/Danger Statement, and Safety Goals to the case plan document.

CASE PLAN ACCOUNTABILITY

- Creating a behaviorally-based case plan with the family and their network is just the beginning of the case plan process.
- Be sure to add to the plan the frequency of CFT meetings, at which time the network will check in on the progress of the plan, as well as how the parents, network and social worker will hold the mother, father and each other accountable for following through.
- At each CFT meeting, review the case plan with the team to assess progress and make any updates as needed. Be sure to address visitation/family time and whether it can become less restrictive.

CASE PLAN OBJECTIVE EXAMPLES

Here are just some examples of what behaviorally-based case plan objectives with family-friendly language might look like. Use the parent's actual name, not "mom" or "dad."

Safety Network

- Mom will go to church once per week and introduce herself to someone new each Sunday for 8 weeks. She will volunteer for a committee at the church. She will ask one person to ask to be part of her network. If that person cannot do so, she will ask someone else.
- Eve (*child*) can talk to the people in her safety network if she is feeling upset or worried about something at home. When safety people come visit, they will ask Eve how she is doing and ask mom how she is doing. If anyone is worried, the safety person will help with the problem.
- Jason (*child*) can call any of the safety people at any time, and they will come visit him. He will practice calling one person each week.
- Mom will keep meeting with the Safety Network to talk about how things are going once Mia moves home. The first meeting will happen a week after Mia is home.

Domestic Violence

- When dad feels stressed or upset, he will call his brother John, his friend Mike, or his sponsor, to talk to them about how he is feeling and make a plan for how he will manage his feelings. He will follow through with the plan and John, Mike or his sponsor will check to see if he followed through.
- Dad will go to all of his scheduled batterers' intervention meetings each week. After every meeting, he will call Joe and talk to him about what he learned. After he talks to Joe, he will write a note for himself about what he learned and how he will practice it. He will practice, then talk to Joe about how he practiced what he learned, what he thought he did well and what he wants to do differently next time.
- Dad will go to counseling every week for at least 16 weeks to talk to the counselor about growing up with a dad who hit his mom, the feelings and actions of anger and sadness he has because of that, and his awareness of how violence is a parenting choice. He will practice using tools he learns in counseling and discuss how he has practiced with the counselor and social worker.
- Mom's friend Maria will check in with her every day on the phone to talk about how mom is feeling about dad and about being on her own, and if there is any help she needs to take care of the children or other practical issues. Maria will pick up mom and the kids once a week to take them to the park, library or another place they want to go.

Substance Use

- Mom will go to 90 NA meetings in the next 90 days to help her get and stay clean from methamphetamine. She will find a sponsor within the first 14 days. She will talk to any possible sponsor about her plan with CWS and ask the sponsor to be part of her Safety Network.
- Dad will go to residential treatment for 30 days so he can learn tools to stay clean from cocaine. He will work with the program on a plan to transition to intensive outpatient when he graduates. He will talk to the social worker about what he is learning, the strategies he thinks will help him stay clean long-term, and how he is practicing them.
- Mom will attend at least 5 AA meetings per week and will work her current step as guided by her sponsor. CWS will help mom pay for the AA books and workbooks.
- If dad feels like going drinking with friends, he will arrange for Kim to sleep over at Audrey's house or grandma's house.

Mental Health

- Mom will walk with her headphones on, with happy music playing, for 30 minutes every morning to help manage her feelings of sadness. Grandma will get her a stroller she can walk the baby with.

- Mom will take her lithium every day as prescribed by her doctor. If she feels like stopping her medication, she will call the doctor and have an appointment first, and tell Aunt Jane she wants to stop it. Mom will use her phone to set a reminder to take her medication and track that she took it in her app. Jane will check in with mom every day at noon to see if she took her medication and how she is feeling.
- Dad will continue to meet with his counselor, Luke, every week until he meets the goals for counseling that he, Luke and the social worker decided on. Dad agrees Luke will call the social worker if he misses his appointment.
- If mom starts to feel really sad and like she doesn't want to get out of bed, she will call grandma, who will come over to help. If grandma can't come over right away, she will call Sara, who will come help. When grandma or Sara come to help mom, they will make sure Jose is OK and then take mom to see her doctor. If mom feels like she needs some extra help, mom and Jose will go say at grandma and grandpa's for a few days.

Visitation

- If mom feels anxious about visits, she will call her friend Judy and talk to her about how she is feeling. Judy will give her a ride to the visit if needed. After visiting, mom will talk to Judy about how the visit went, what went well, what her worries are and what she thinks should happen next time.
- Dad will begin supervised visits with Billy at grandma Claire's house with grandma there. Dad agrees that Claire will cancel the visit and call the social worker if she has reason to believe he is on drugs.
- Mom will work with Ben's foster mom, Amy, on transitions for Ben by using the same sticker chart at her house that shows which days he will be visiting mom and which days he will be with Amy. Mom and Amy will spend at least five minutes of friendly talking in front of Ben when transitioning Ben between them.

Parenting

- The family will eat dinner together at least four nights per week with no phones or TV on. Mom and dad will ask the kids about their days at school and give specific praise for something they are proud of the kids for. Mom and dad will have the kids help with making dinner, setting the table and cleaning up so the whole family is involved.
- When Susie hits, bites, or calls names, mom will have her go to the "quiet spot" and use the time-out rule of one minute per year of age, setting a timer. Mom will say, "No hitting, Susie. Go to time-out." If Susie leaves the spot, mom will calmly take her back and restart the timer. Once the timer goes off, mom will ask if Susie understands why she gave her a time-out. Mom will allow Susie to say her feelings then briefly remind her that time-outs occur only when she breaks a rule or needs help to tone things down. Mom will praise Susie for completing the time-out, then go back to normal activities. Grandma will check in with mom every day about how Susie did that day, whether any time-outs were needed, and how they went.
- Mom will go to bed 30 minutes earlier and wake up 30 minutes earlier to get Joanie to school on time every day. Neighbor Sharon will make sure mom and Joanie leave their driveway by 7:45 a.m.
- Mom will call grandma once per week in a place where Andrew can hear and tell her all the good things he has done this week.

Housing

- Mom's sister Jennifer will help her look for apartments with a goal of finding one to rent by May 1st. Jennifer will drive mom to look at places to rent and help her fill out the applications.
- Mom and dad will make sure the house is always safe for Laura and Adam to crawl and walk in. Uncle Rob will come over twice a week to make sure the house is baby-proofed and safe.