

**Structured Decision Making (SDM)
Assessment Skills Lab**

California Common Core
June 30, 2018



A small version of the diagram from the first slide is located in the bottom right corner of this slide.

Overview of the Day

- Welcome and overview of the plan for the day:
 - Review content from e-learning module
 - Practice completing SDM tools
 - Evaluation

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Group Agreements



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SDM Policy Manual Organization

- Each section is a tool
- Within each section:
 - Tool
 - Definitions
 - Policy and procedure



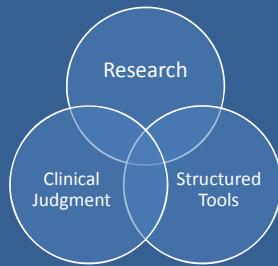
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Structured Decision Making Model Process Goals are to:

- Identify and structure **critical decision points**.
- Increase **consistency** in decision making.
- Increase **accuracy** of decision making.
- **Target resources** to families most at risk.
- Use case-level data to **inform decisions throughout the agency**.

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Structure, Research, and Clinical Judgment:



Partners in the workplace

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What Do You Remember?

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General Definition Tips

- Read to the period.
- Examples are examples.
- Beware of AND and OR.
- Use common sense.
- The definitions are guides and are not a substitute for knowledge or good judgment.
- Live within the definitions, and use overrides if you disagree with where the definition is taking you.

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Basic Definitions

- **Caregiver:** an adult, parent, or guardian in the household who provides care and supervision for the child
- **Household:** all persons who have significant in-home contact with the child, including those who have a familial or intimate relationship with any person in the home

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Caregiver and/or Household Member

- Mother's live-in boyfriend who never provides care for child
- Mother's boyfriend who doesn't live there, but spends lots of time there and sometimes babysits
- Mother's ex-boyfriend who no longer has contact with her
- Uncle who visits occasionally and babysat once in the past 12 months

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Caregiver Identification Impacts Results

- Follow the logic and ask yourself each question:
 1. Is the caregiver the *legal* parent?
 2. Does the caregiver have more than 50% of the *parenting responsibilities*?
 3. Is the caregiver the *alleged perpetrator*?
 4. Which caregiver has the most *severe allegation*?

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Allegations on Mom:
Mom and Dad live together



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Allegations on Mom:
Mom and Dad live apart, child
lives with Mom



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Allegations on Dad:
Mom and Dad live apart, child
lives with Mom and visits
regularly in Dad's household



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Allegations on Mom and Dad:

Mom and Dad live apart, child
lives with Mom and visits
regularly in Dad's household



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Purpose of Hotline Tools

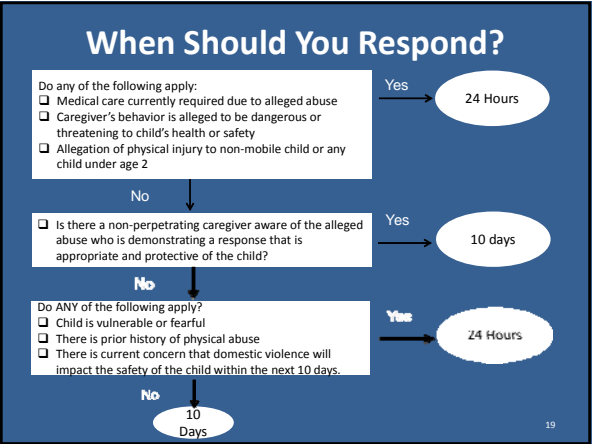
- Determine whether a referral meets the statutory threshold for an in-person child welfare services (CWS) response (and if not, whether a referral to an alternative community response is appropriate).
- Determine how quickly to respond.

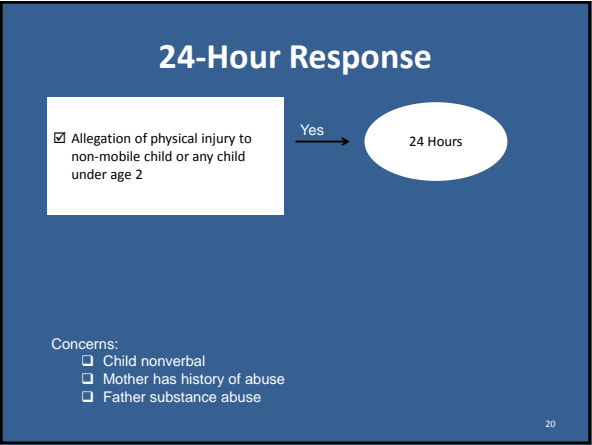
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Let's Practice

- Read Case Example
- Complete Hotline Tool together
- What did you determine?

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Safety Assessment Tool

- Once a referral is screened in for an in-person response, the question becomes "Can the child remain safely at home?"
- In most counties, the Emergency Response social worker responds to the referral and completes the Safety Assessment Tool.

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Safety Assessment Components

- Child vulnerabilities
- Safety Threats & Caregiver Complicating Behaviors
- Household Strengths and Protective Action
- In-home Protective Interventions
- Placement Interventions

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Let's Practice

- Read page 4–6 of the Jefferson/Baxter case example.
- Stop and complete at your table group:
 1. Identify the households to be assessed and the primary and secondary caregivers in each household.
 2. For each household, complete only Child Vulnerabilities, Safety Threats, and Caregiver Complicating Behaviors.

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Safety Plans Include:

- A family-friendly description of the identified safety threat
- A safety intervention to address and mitigate each threat
- Considerations should be made in ICWA cases
- A plan for monitoring
- Signatures

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Effective Safety Plans

are detailed plans of ACTION made in response to SPECIFICALLY identified dangers

(behavioral and action driven)

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Effective Safety Plans

Create clear and observable guidelines about:

- Contact between the children
- The potential danger
- How they are to be protected from the danger

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Safety Plans Are ...

- Collaboratively made with the family, child, and network;
- A process, not an event;
- A roadmap to achieve our hopes, not a guarantee;
- A method for keeping children safe; AND
- A intervention and change strategy.

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The Difference a Support Network Can Make

- Caregiver has the ability to access resources to provide necessary safety interventions.
- Caregiver has supportive relationships with one or more persons who may be willing to participate in safety planning, AND caregiver is willing and able to accept their assistance.
- At least one caregiver in the home is willing and able to take action to protect the child, including asking offending caregiver to leave.
- Caregiver is willing to accept temporary interventions offered by worker and/or other community agencies, including cooperation with continuing investigation/assessment.

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Substitute Care Provider Safety Assessment Policy

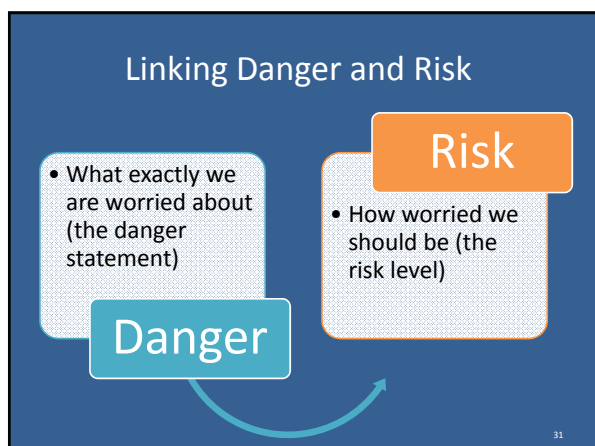
- *All investigations of alleged abuse/neglect by a substitute care provider (SCP), including:*
 - » Licensed foster homes
 - » NREFMs
 - » Approved relative homes
 - » Certified FFAs
 - » Small family homes
 - » Adoptive parents if the adoption has not yet been finalized
 - » Legal guardians where a dependency case is still open (i.e., the department has protective responsibility for the child)
- *Do not use with allegations involving:*
 - » Group homes
 - » Institutions
 - » Residential treatment centers

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Do We Open a Case?

- Utilizing the Risk Assessment Tool—*Agency resources are targeted to higher risk families because of the greater potential to reduce subsequent maltreatment.*
- Risk assessment identifies families with low, moderate, high, or very high probabilities of future abuse or neglect.
- The risk assessment is based on research on cases with substantiated abuse or neglect that examined the relationships between family characteristics and the outcomes of subsequent substantiated abuse and neglect.

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Work Individually

- Review the continued case example and complete the Risk Assessment Tool.
- What is your Risk level
 - For Mom?
 - For Dad?
- Do you promote the case? Why? Are there any policy overrides? Any discretionary overrides?

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Required Contacts

Contact with	Contact Requirement
Child or Non-Minor Dependent (NMD) residing in out-of-home placement with relative, foster family or legal guardian.	At least one face-to-face contact each calendar month.
Non-Minor Dependent (NMD) residing in a Supervised Independent Living Placement (SILP).	(1) Face to Face each Calendar Month
Child or NMD residing in group home or Community Treatment Center.	(1) Face to Face each Calendar Month with a 2 week time frame between the visits.

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Your case is open; now what?

- Assessing Family Strengths and Needs using the FSNA
- Purpose of FSNA—This tool is used to systematically identify critical family needs and help plan for effective interventions.

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Valuing the SDM Approach

- Ensures Consistency among social workers
- Ensures strengths and needs are looked at objectively
- Assesses change over time
- Identifies and prioritizes highest needs

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Things to Consider

- Requires gathering information from all family members, collaterals, and a review of records.
 - It may be completed or modified during the course of family team meetings.
 - Engage family in culturally appropriate ways to make an accurate assessment.

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Shared Definition of Safety



Safety is:

Actions of protection taken by the caregiver that address the danger, demonstrated over time.

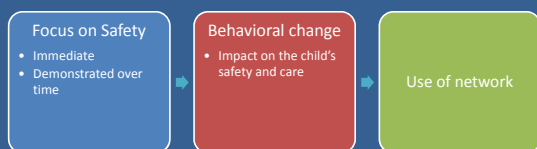
Adapted from Boffa, J., & Podesta, H. (2004). Partnership and risk assessment in child protection practice, *Protecting Children*, 19(2), 36–48; Turnell, A., & Essex, S. (2006). *Working with Denied Child Abuse*. Berkshire, UK: Open University Press. 38

Work Individually

- Read case example
- Complete FSNA
- Discuss with your table

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After the Plan Is Working



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Reunification Begins on Day 1!

Working with families during reunification:

- Keep a sense of urgency: Be clear about timelines for decision making.
- Orient the parents to shared understanding of safety threats, risk, and the process for evaluating change.
- Expand the family's support network.
- Create planned, purposeful, progressive contacts and visits that take family wishes and culture into account.
- Create opportunities for parents to demonstrate "acts of protection" during visits.
- Expect challenges and the "uneven path."

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Reunification Assessment

- Routinely monitoring critical case factors that affect goal achievement;
- Helping to structure the case review process; *and*
- Expediting permanency for children in substitute care.

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Guides Decision Making to:

1. Return a child to the removal household* or to another household with a legal right to placement (non-removal household);
2. Maintain out-of-home placement; and/or
3. Terminate reunification services and implement a permanency alternative.

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Let's Practice

- Read the case example up to the reunification point.
- Stop and complete as a group: the Reunification Assessment tool.

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Preparing the Family for Reunification

- Shouldn't be a surprise!
- Share the reunification reassessment form with family so that the household understands exactly what will be used to evaluate reunification potential and the threshold they must reach.
- Inform them of their original risk level, and explain that this will serve as the baseline for the reunification reassessment.

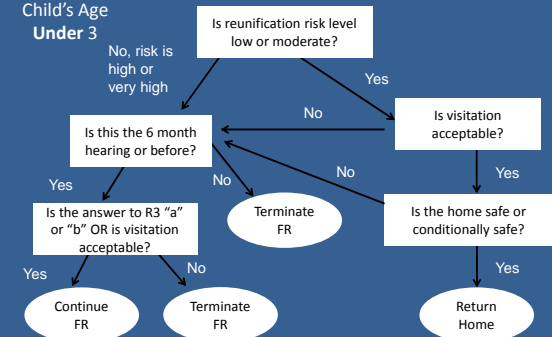
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What Else?

- Explain that a new substantiation or failure to progress toward case plan goals would increase their risk level.
- Discuss visits—how many and the quality.
- Discuss Safety.

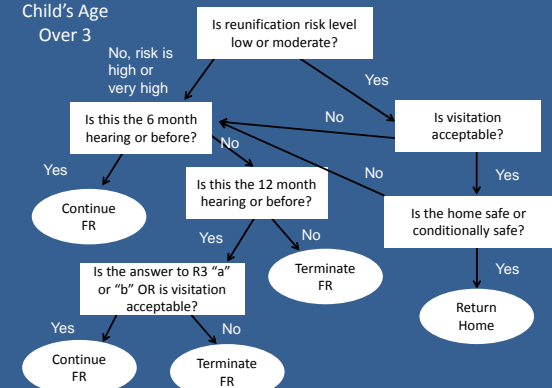
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Risk Based on Child's Age Under 3



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Risk Based on Child's Age Over 3



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Risk/Safety Assessment

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

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Risk Reassessment

- Completed for In-Home Cases NOT Reunification cases
- The risk reassessment determines whether the case should remain open or be closed
- Completed at minimum every 6 months
- Updated FSNA and case plan completed

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Can the Case Be Closed Safely?

- Voluntary—30 days prior to case plan completion or case closure recommendation
- Involuntary—65 days prior to case plan completion or case closure recommendation
- All in home cases where new circumstances/new risk

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Let's Practice

- Read page 21 of the case example.
- In dyads, complete the Family Risk Reassessment for In-home Cases Tool.

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Wrap Up



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Welcome Back

- Review content from day 1 activity
- Embedded Evaluation



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Review:
What have we learned about SDM



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Review of Key Points

SDM are a set of tools, not forms...	SDM guides decisions; workers make decisions.
Read the definitions, to the period.	SDM is part of a larger practice framework of decision making.

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Evaluation



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Preliminary Evaluation Materials

- Informed Consent
- ID code assignment instruction sheet
- Demographics Survey

ID codes:

- First 3 letters of MOTHER'S MAIDEN NAME
- The first 3 letters of MOTHER'S FIRST NAME
- The NUMERAL FOR THE DAY YOU WERE BORN

Example: November 9, 1970 or 11/09/1970

- The NUMERAL FOR THE YEAR YOU WERE BORN

Example: November 9, 1970 or 11/09/1970

Trainee ID Code

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Embedded Evaluation

Answer a set of questions based on the Hernandez family vignette:

Section 1: *Safety Threats*

Section 2: *Household Strengths and Protective Actions*

Section 3: *In-Home Protective Interventions*

Section 4: *Placement Interventions*

Section 5: *Family Risk Assessment Factors*

Closing

- What did you learn?
- Any questions?
- Next Steps