Handouts for the Webinar

Distinguishing Safety and Risk in the Real World
A Key Skill at Every Stage in Child Welfare Work

Dec. 1, 2016

Presenters

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Produced by
Family and Children’s Resource Program, part of the
Jordan Institute for Families
UNC-Chapel Hill School of Social Work

Sponsored by
NC Division of Social Services

Contents

Definitions
Case Scenarios
Distinguishing Safety and Risk
Safety and Risk Table
Key Questions Based on Risk and Safety Assessment Findings
Webinar Slides
DEFINITIONS

Maltreatment: Parenting behavior that is harmful and destructive to a child’s cognitive, social, emotional, physical development and those with parenting responsibility are unwilling or unable to behave differently.

Risk of Maltreatment: The likelihood (chance, potential, prospect) for parenting behavior that is harmful and destructive to a child’s cognitive, social emotional, physical development and those with parenting responsibility are unwilling or unable to behave differently.

Risk Factors: Risk Factors are family behaviors and conditions that suggest a caregiver is likely to maltreat a child:
- Are of various degrees and seriousness (low, moderate, and high)
- Some are better than others in indicating the likelihood of maltreatment

Child Safety: A child is unsafe when:
- Threats of danger exist within the family;
- Children are vulnerable to such threats; and
- Parents have insufficient protective capacities to manage or control threats.

Safety Threats: A threat of danger, of serious harm exists when a specific family situation or behavior, emotion, motive, perception or capacity of a family member that is out-of-control, imminent and likely to have severe effects on a vulnerable child.

Safety Threshold: The point when a parent’s behaviors, attitudes, emotions, intent, or circumstances create conditions that fall beyond mere risk of future maltreatment and have become an actual imminent threat to the child’s safety. The safety threshold criteria is:
1. A family condition is out of control.
2. A family condition is likely to result in a severe effect.
3. The severe effect is imminent—reasonably could happen soon.
4. The family condition is observable and can clearly be described and articulated.
5. There is a vulnerable child.
Case Scenarios

1. Parental Drunk Driving. Bob is picked up by police for drunk driving and has his children in the car.

2. Parental Mental Illness. Sandy is bipolar with suicidal ideations. She has never acted on her suicidal ideations but she yells, screams, and is combative with others. She specifically yells and screams at her children, Allison (age 7) and Mary (age 14). Sandy’s way of communicating with the children is to yell at them. She yells at them to get up, do their homework, wash the dishes, and clean their rooms. Sandy is combative with the neighbors and yells and screams at them. Neighbors are fearful of her because of her behavior, but she has never attacked them. The children are embarrassed by their mom’s behavior and wish she would stop. The children do well in school but do not participate in any school activities, nor do they invite friends to their home. Allison was crying at school last month because she was being picked on by her peers who were saying her mother was “crazy.”

3. Domestic Violence. Carol and Karl got into an argument that lead to Karl pushing Carol against a table. Carol had four stitches above her eye because she hit the table corner. The two children, David (age 8) and Kerry (age 10), were present when this occurred. Karl left the home when he saw Carol bleeding but came back later that night and attempted to break into the house. Carol called the police; Karl ran off before they arrived. The police asked Carol to press charges but she refused, saying her injury was an accident. The boys say there are fearful of their Dad when he gets angry and he has hit their Mom before. They say their Mom tries to make Dad calm down or leave. Carol says everything was a misunderstanding and Karl would never hurt her or the children. Karl admits he and Carol were arguing but says Carol walked away and tripped over something on the floor and fell against the table. He says he has never pushed or hit Carol and the children are not telling the truth.

4. Parental Substance Use. Jan has one child, Edgar (age 3). Jan has been using prescription pain pills for 6 years but it is unknown if Edgar was positive at birth because he was not tested. Jan works part time and her mother, Alice, watches Edgar while she works. When she is not working Edgar is with Jan. Jan has multiple people in and out of her home; all are known substance abusers. Jan has been known to go from doctor to doctor looking for pain medication. She is known by law enforcement as someone who tries to buy pills from the street but law enforcement cannot say if Edgar is with her. Alice admits her daughter has a problem with prescription pain pills and says she has seen Jan “nodding off” before when she is visiting her house. Alice denies ever seeing Jan being under the influence when she drops off or picks up Edgar. When asked to take a drug test Jan refuses, saying she does not have a problem. Jan says she works and maintains her own residence so any substance she may or may not use does not have an impact on her or on the care she provides for her child.
Distinguishing Safety and Risk

When determining if there is a safety threat in a family, it is helpful to understand the two different types of safety threats:

Present safety threat refers to an immediate, significant, and clearly observable family condition (severe harm or threat of severe harm) occurring to a child in the present. Present danger is easier to detect because it is transparent and is occurring now. If present safety threat is observed, the child is not safe. Some examples of this are:

- Hitting, beating, severely depriving now
- Injuries to the face and head
- Premeditated abuse or neglect
- Life-threatening living arrangements
- Bizarre/extreme viewpoint of a child
- Vulnerable children who are unsupervised or alone now
- Child extremely afraid of home situation
- Child needing immediate medical care
- Caregiver unable to provide basic care

Impending safety threat refers to threatening conditions that are not immediately obvious or currently active but are out of control and likely to cause serious harm to a child in the near future. Impending danger is covert. Impending danger is a threat that can be reasonably expected to result in serious harm if safety action is not taken and/or sustained. These threats may or may not be identified at the onset of involvement by a county child welfare agency, but are understood upon a more complete valuation and understanding of the individual and family conditions and functioning. Examples of this are the same as those described as present safety threats; it’s just that they haven’t happened yet. The social worker suspects that they will happen soon.
# Safety and Risk Table

<table>
<thead>
<tr>
<th>Present Danger</th>
<th>Safety</th>
<th>Impending Danger</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concludes potential for serious effects now.</td>
<td>Assess for potential for serious effects within days to a couple of weeks.</td>
<td>Assess for potential for maltreatment within weeks or months or even longer.</td>
<td></td>
</tr>
<tr>
<td>Concerned with serious forms of dangerous family conditions and serious maltreatment occurring now.</td>
<td>Concerned with serious forms of dangerous family conditions and serious maltreatment likely to occur in the near future.</td>
<td>Concerned about maltreatment on a continuum from low to very high any time in the future.</td>
<td></td>
</tr>
<tr>
<td>Considers specific, observable, active dangerous behavior or situations.</td>
<td>Considers specific, observable, imminent dangerous behavior or situations that are not currently active but become active in the near future.</td>
<td>Considers family functioning that supports or diminishes the caregiver’s capacity to protect their children.</td>
<td></td>
</tr>
<tr>
<td>Concerned with controlling threats of danger that are actively present.</td>
<td>Concerned with managing impending danger threats specific to how they operate in the family (triggers, conditions when the threat is or could become active).</td>
<td>Concerned with general child well-being and the enhancement of caregiver protective capacity.</td>
<td></td>
</tr>
<tr>
<td>Decision making based on the present.</td>
<td>Decision making based on the near future (next several days).</td>
<td>Decision making based on an unlimited time frame (any time in the future).</td>
<td></td>
</tr>
<tr>
<td>A judgment about what is happening right now and the certainty of the serious effects.</td>
<td>A judgment about the certainty of serious effects within a limited time.</td>
<td>A judgment about any low, moderate, or high risk of future maltreatment.</td>
<td></td>
</tr>
<tr>
<td>Family situations and behaviors are out of control.</td>
<td>Family situations and behaviors are out of control; imminent; likely to have a serious effect; in the presence of a vulnerable child; are observable; specific, describable.</td>
<td>All family situations and behaviors from onset and progressing into seriously troubled.</td>
<td></td>
</tr>
<tr>
<td>Observing family situations and behaviors that are actively endangering the safety of the child.</td>
<td>Evaluating family situations and behaviors that must be managed and controlled.</td>
<td>Evaluating the family situations and behaviors that may need to be treated or changed.</td>
<td></td>
</tr>
<tr>
<td>Concerned with family situations and behaviors that represent an immediate present danger.</td>
<td>Concerned with a limited number of threats of danger that represent an impending and continuing state of danger.</td>
<td>Concerned with all aspects of family life relevant to understanding the likelihood of maltreatment.</td>
<td></td>
</tr>
<tr>
<td>Response results in temporary protective action to immediately control the present danger.</td>
<td>Response results in a continuing safety plan until there is no longer a threat of danger or the caregiver’s protective capacity is sufficient to control the threat of danger.</td>
<td>Written Service Agreements are used to address family functioning issues.</td>
<td></td>
</tr>
</tbody>
</table>

# Risk vs. Safety

<table>
<thead>
<tr>
<th>Risk is concerned with . . .</th>
<th>Safety is concerned with . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>The likelihood of future maltreatment</td>
<td>Current dangerous family conditions</td>
</tr>
<tr>
<td>On a continuum from mild to severe</td>
<td>Severe harm or severe maltreatment</td>
</tr>
<tr>
<td>Overall family functioning</td>
<td>Family conditions that rise to the safety threshold</td>
</tr>
<tr>
<td>General child well-being and that needs are met</td>
<td>Specific threats to a child’s safety</td>
</tr>
<tr>
<td>All negative effects from onset to future maltreatment</td>
<td>Severe harm and/or injury</td>
</tr>
<tr>
<td>All family situations and behaviors from onset to progressing into seriously troubled</td>
<td>Family situations and behaviors that are currently out of control</td>
</tr>
<tr>
<td>Involves an ongoing plan for treatment to address behaviors and needs over time</td>
<td>Requires a plan to immediately control the current safety threat</td>
</tr>
</tbody>
</table>

# Risk vs. Safety Examples

<table>
<thead>
<tr>
<th></th>
<th>When is it a safety issue?</th>
<th>When is it a risk issue?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Improper discipline</strong></td>
<td>There are injuries to the face, significant bruising or lacerations, parent is out of control when administering the discipline</td>
<td>There is a history of a parent using physical discipline when angry OR after drinking alcohol</td>
</tr>
<tr>
<td><strong>Child expresses fear</strong></td>
<td>Child cowers, wets self, trembles, stutters, in response to particular trigger</td>
<td>Child discloses pattern of concerning behavior by caretaker (regular beating due to bad report card, for example)</td>
</tr>
<tr>
<td><strong>Child(ren) left home alone</strong></td>
<td>Young or vulnerable child, or parentified child</td>
<td>Inadequate arrangement for childcare (no knowledge regarding selected caretaker), lack of control or limits for teen</td>
</tr>
</tbody>
</table>
### Key Questions Based on Risk and Safety Assessment Findings

<table>
<thead>
<tr>
<th>Safety Assessment Finding</th>
<th>Risk Assessment Finding</th>
<th>Low/Moderate Risk</th>
<th>Moderate/High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safe</strong></td>
<td></td>
<td>Should CPS be involved at all?</td>
<td>What preventive measures can be taken/put in place?</td>
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<td><strong>Safe with a Plan</strong></td>
<td></td>
<td>Is the current plan effective/still needed?</td>
<td>Is the current plan effective? &amp; What preventive measures are also needed?</td>
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<tr>
<td><strong>Unsafe</strong></td>
<td></td>
<td>Is a quick return home possible?</td>
<td>A sustainable plan must be in place.</td>
</tr>
</tbody>
</table>
Digging Deeper: Considerations for Different Types of Cases

Substance Use Cases

- Chronic neglect can have a greater impact than incidents of abuse.
- Assess the child’s behavior, emotional state, social skills and school performance when determining the potential impact.
- Consider the relationship between ongoing neglect and other symptoms such as physical illness or mental health issues.

Cases with Mental Illness

- What is the mother’s bond with the kids?
- Can the mother act in a protective role with her children?
- Can you see an observable impact on the children?
- What do the children want to see happen?

Domestic Violence Cases

- Separate assessments required.
- Assessing child safety:
  - threats of danger
  - vulnerability
  - victim parent capable/willing to protect
- What will each parent do?
- Status of battering parent
  - If in jail
  - If offers to leave the home
  - Interference with victim parent’s ability to keep child safe
  - Impact of DV on the child
About this webinar
This webinar was developed through funding from the North Carolina Division of Social Services by the Family and Children’s Resource Program, part of the Jordan Institute for Families at the UNC-Chapel Hill School of Social Work.

In the future a recording of this webinar will be available on ncsLearn.org.

Why this Webinar?
• Assessing and distinguishing safety and risk is tough
• Recent policy changes

Want to acknowledge the challenges and give you tools and tips to help you
Goals for this Webinar

By the end, we hope you will be able to:

• Comfortably use some specific terms to help you discuss and think about safety and risk
• Explain how the following can be used in safety planning and case planning:
  ✓ safety assessments
  ✓ risk assessments
  ✓ “safety threshold” concept

A Special Note About Questions

• We will monitor questions via the chat box and answer them as possible throughout the webinar
• There will also be a follow-up document developed that will include answers to questions asked during this webinar (which will be e-mailed to all registered participants and posted with the webinar recording)
• The recorded webinar will reside on the Family and Children’s Resource Program webpage (http://fcrp.unc.edu/webinars.asp)

Panelists
Linda Clements
Crystalle Williams
Jamie Blevins

Moderator
Laura Phipps

Tech Support
Phillip Armfield
John McMahon
Getting Our Terms Straight

- Maltreatment
- Risk of maltreatment
- Risk factors
- Child safety
- Safety threats
- Safety threshold

Safety Threshold

The point when a parent’s behaviors, attitudes, emotions, intent, or circumstances create conditions that fall beyond mere risk of future maltreatment and have become an actual imminent threat to the child’s safety.


Using Safety Thresholds
**4 Safety Threshold Questions**

1. Is the condition specific, observable?  
2. Is the condition out of control?  
3. Could the condition have a serious effect on a child?  
4. Is it imminent?


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**Example 1**

**Parental Drunk Driving**

Bob is picked up by police for drunk driving and has his children in the car.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the condition specific, observable?</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Is the condition out of control?</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Could the condition have a serious effect on a child?</td>
<td>Yes</td>
</tr>
<tr>
<td>4. Is it imminent?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

This is an example of a present safety threat.


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**Example 2**

**Parental Mental Illness**

**SANDY (MOM)**  
• Bipolar  
• Suicidal ideations, but never acted on them  
• Yells, screams, combative  
• No physical conflict with neighbors, but they’re fearful

**THE CHILDREN**  
• Two girls, ages 7 & 14  
• Embarrassed by mom  
• Do well in school  
• No extracurricular activities  
• Never invite friends over  
• Peers tease, saying their mother is “crazy”
Example 2: Parental Mental Illness

**Other Things to Consider**

- What is the mother’s bond with the kids?
- Can the mother act in a protective role with her children?
- Can you see an observable impact on the children?
- What do the children want to see happen?

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Example 3

**Domestic Violence**

**The Parents**

**Karl**
- Pushed Carol into table, denies doing so (says she fell)
- Tried to break in
- Has hit Carol in past
- Says the kids are lying

**Carol**
- Stitches on face
- Won’t press charges, says was accident

**The Children**

- Two boys, ages 8 & 10
- Saw violence
- Fear Karl

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Example 3: Domestic Violence

**Other Things to Consider**

- Separate assessments required
- Assessing child safety:
  - threats of danger
  - vulnerability
  - victim parent capable/willing to protect
- What will each parent do?

Agreements must be behaviorally specific!
Example 3: Domestic Violence

Other Things to Consider continued

Status of battering parent:
- If in jail
- If offers to leave the home
- Interference with victim parent’s ability to keep child safe
- Impact of DV on the child

If no impact, child may be safe.

Safety Monitoring

Objectives of Temporary Parental Safety Agreements

- Eliminate or reduce safety threats;
- Enhance caretaker protective capacity;
- Tailored to the child and family;
- Immediately available; and
- Includes actions and goals that are specific and measurable.
Modifying or Ending TPSAs

- Has the safety threat been reduced or eliminated?
- Have the caretaker’s behaviors changed?

If threat’s been addressed, we must modify and/or end the agreement.

Each family is different, each safety threat is different depending on the children.

Example

Modifying a Safety Agreement

**INITIAL SAFETY THREAT**
- Mom often goes out to “party”
- Her 6-year-old is often left alone at home for long periods (sometimes all day)
- Safety agreement restricts parental access

**CONDITIONS FOR RETURN**
- A plan for supervision by suitable babysitter whenever Mom is not home.
- Mom is willing and able to arrange for a babysitter.

There is still risk, but safety threat has been addressed.
Distinguishing Safety and Risk:
A Key Skill at Every Stage of Child Welfare

Thinking about RISK vs. SAFETY

- Often challenging/confusing
- Helpful differences:
  - Severity
  - Timing
  - Family Functioning
  - Planning

Assessing Risk

- The probability of future maltreatment
- Concerned with the long-term likelihood of harm to a child.
  - Not when
  - Not how serious
- A continual process
### Assessing Risk: Scratching vs. Digging

<table>
<thead>
<tr>
<th>Nature and Extent</th>
<th>Accompanying Circumstances</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Type &amp; severity of maltreatment</td>
<td>✓ How long has it been occurring?</td>
</tr>
<tr>
<td>✓ Maltreatment history, similar incidents</td>
<td>✓ What is the parental intent concerning the maltreatment?</td>
</tr>
<tr>
<td>✓ Emotional and physical symptoms</td>
<td>✓ Was the parent impaired when maltreatment occurred?</td>
</tr>
<tr>
<td></td>
<td>✓ How does the parent explain the maltreatment/family condition?</td>
</tr>
<tr>
<td></td>
<td>What is parent’s attitude?</td>
</tr>
</tbody>
</table>

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### Example 4

**Substance Use**

**The Adults**

- **Jan (Edgar’s mom)**
  - On pills for 6 years; doctor shops
  - Works part time
  - Has own apartment
  - People in and out of apartment
  - Refuses drug test
  - Denies impact on Edgar

- **Grandma Alice (Jan’s mom)**
  - Watches Edgar
  - Says Jan has a problem
  - Hasn’t seen her high when driving with Edgar

**The Child**

- Age 3
- Unknown if tox positive at birth
- May/may not go with mom on drug seeking errands

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### Using Scaling to Assess Risk

- Scaling is a great way to assess perspective
- Anchor the scale with descriptors for high and low options
- Use follow up questions to seek solutions

**Example:** On a scale from 1-10, how would you rate the overall risk level for this case?

- 1 = High Risk/ File Petition, 10 = Low Risk/ Close Case
- What makes it that number?
- What one thing that can happen that would move it up one number higher?
Example 4: Substance Use

Other Things to Consider

- Chronic neglect can have a greater impact than incidents of abuse.
- Assess the child’s behavior, emotional state, social skills, and school performance when determining the potential impact.
- Consider the relationship between ongoing neglect and other symptoms such as physical illness or mental health issues.

Scratching vs. Digging: DV Example

Scratching
- Main focus is on:
  - relationship status
  - what victim won’t do
  - anger, substance abuse, mental illness as reason for behavior

Digging
- Focus should be on:
  - How power and control affects the child
  - Child safety and child impact
  - Past efforts to protect
  - Finding motivation to change behavior

The SDM Tools

Safety Assessment
Risk Assessment
Strengths and Needs Assessment
Risk Reassessment
Family Reunification Assessment
**SDM Tools**

<table>
<thead>
<tr>
<th>Safety Assessment</th>
<th>Can the child remain safely in the home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Assessment</td>
<td>Should we open a case for ongoing services due to risk for maltreatment?</td>
</tr>
<tr>
<td>Strengths and Needs Assessment</td>
<td>What should be addressed in Family Services Agreement?</td>
</tr>
<tr>
<td>Reunification Assessment</td>
<td>Can we safely reunify a child?</td>
</tr>
<tr>
<td>Risk Reassessment</td>
<td>Can we safely close a case?</td>
</tr>
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</table>

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**Summary**
The Fundamentals Matter

- Families are complex and unique
- Take time to build trust
- Say no to “cookie cutter” plans
- Be open to the family’s input
- Change = a learning process

Risk of Maltreatment & Safety

- Safety and risk must be assessed throughout involvement with a family.
- Maltreatment, including safety threats, can be detrimental to a child, and the impact on the child must be assessed throughout a case.
- The SDM tools support ongoing assessment.

Where from here?

Next steps...

- Safety planning, risk evaluation, and decision making in your daily work
- Look for Director letter on Dec. 1
- All forms already on the NC DSS forms page
Additional Learning Opportunities

- Recorded Webinar: *Safety Plans Are Changing: What You Need to Know*
- Discussion of revised safety planning policies in courses in 2017

Questions

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