



Putting SDM® to Work in a Child Protection Case with Serious Substance Abuse



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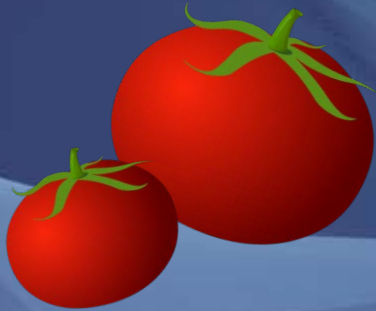
Agenda

Presenters will discuss how SDM® and good family engagement practice achieved positive outcomes for a mother with serious substance abuse and her children.



Video Clip

https://www.ted.com/talks/ernesto_sirolli_want_to_help_someone_shut_up_and_listen?language=en





3 Questions that organize your every-day work about child safety and everything you do

What are we worried about?

What is working well?

What needs to happen?

Safety Mapping Starts With Our Three Questions

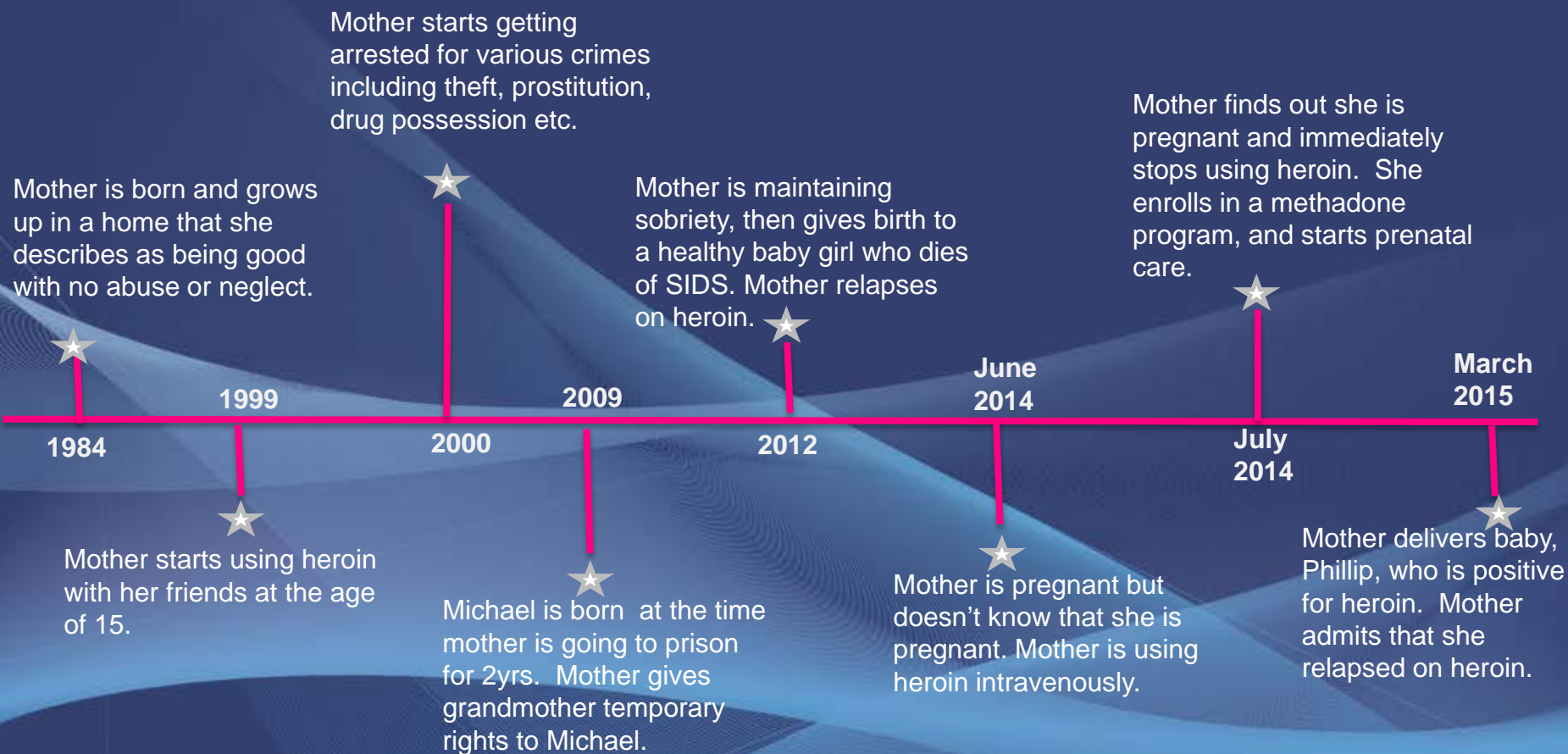
The Referral to CPS

- Baby tests positive for heroin at birth and is experiencing withdrawals from being drug exposed.
- Mother admits to using intravenously before she found out she was pregnant.
- At the time of the referral, family support was limited for mother.

The Family

- Mother – Yvette, 30
 - Son Phillip – infant
- Son Michael, 6
- Deceased infant girl
- Father – currently in prison
- Maternal grandmother to children
- Maternal uncle to children

The History



Solution Focused Questions

Solution focused questions strengthen a person's capacity to achieve their own best judgment about what she/he needs to do in difficult times.

(Insoo Kim Berg and Steve DeShazer)



Sample solution focused questions for mom

Our worries	What's working well	What needs to happen
If your baby was old enough to talk, what might he say about this situation?	Tell me about a time you've coped with stress without using?	If you stop using, what will be different about you as a parent? What will your children say?
What do you think might happen to your children if you keep using drugs?	Have you ever not used drugs because you thought using would hurt the children?	What do your children need to see in order to feel safe in your care?
What have friends and loved ones said about your use?	Who can you count on when things get tough? Who do your children count on?	What are you willing to do to develop a network to help you with your recovery?
How has your use affected you?	Tell me about some good things you are able to experience when you don't use. How is your parenting different then?	What are two things you are willing to work on to help with your sobriety and recovery?

Key Terms

What are we worried about?

Harm

Danger

Risk

What is working well?

Safety

Strengths

SDM® Safety Assessment

Current Danger Indicators:

- ✓ Drug exposed infant
- ✓ Caregiver's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.



SDM® Safety Assessment

	Household Strengths	Protective Actions
Caregiver Problem Solving	<ul style="list-style-type: none">✓ At least one caregiver identifies and acknowledges the problem/danger indicator(s) and suggests possible solutions.	
Caregiver Support Network	<ul style="list-style-type: none">✓ At least one caregiver has at least one supportive relationship with someone who is willing to be a part of his/her support network.✓ At least one protective caregiver exists and is willing and able to protect the child from future harm.✓ At least one caregiver is willing to work with DFPS to alleviate danger indicators, including allowing caseworker(s) access to the child.	<ul style="list-style-type: none">✓ At least one caregiver has a stable support network that is aware of the danger indicator(s), has been responding or is responding to these indicator(s), and is providing protection for the child.



SDM® Risk Assessment

Age of youngest child in home

- ✓ Under two years

Current or historic characteristics of children in household

- ✓ Positive toxicology screen at birth

Primary parent/caregiver has a historic or current alcohol or drug issue

- ✓ Current (within the last 12 months)
- ✓ Historic (prior to the last 12 month)

Primary parent/caregiver provides physical care consistent with child's needs

- ✓ No



SDM®: Decision Support

These children are -

– Safe with plan

– Moderate risk



The Roadmap

What are we worried about?	What's working well?	What are the next steps?
Harm Statement Danger Statement	Strengths Protective Actions	Safety goals How do we achieve them?

Let's get to the core of the matter



Caregiver

Behavior

Impact on
the child

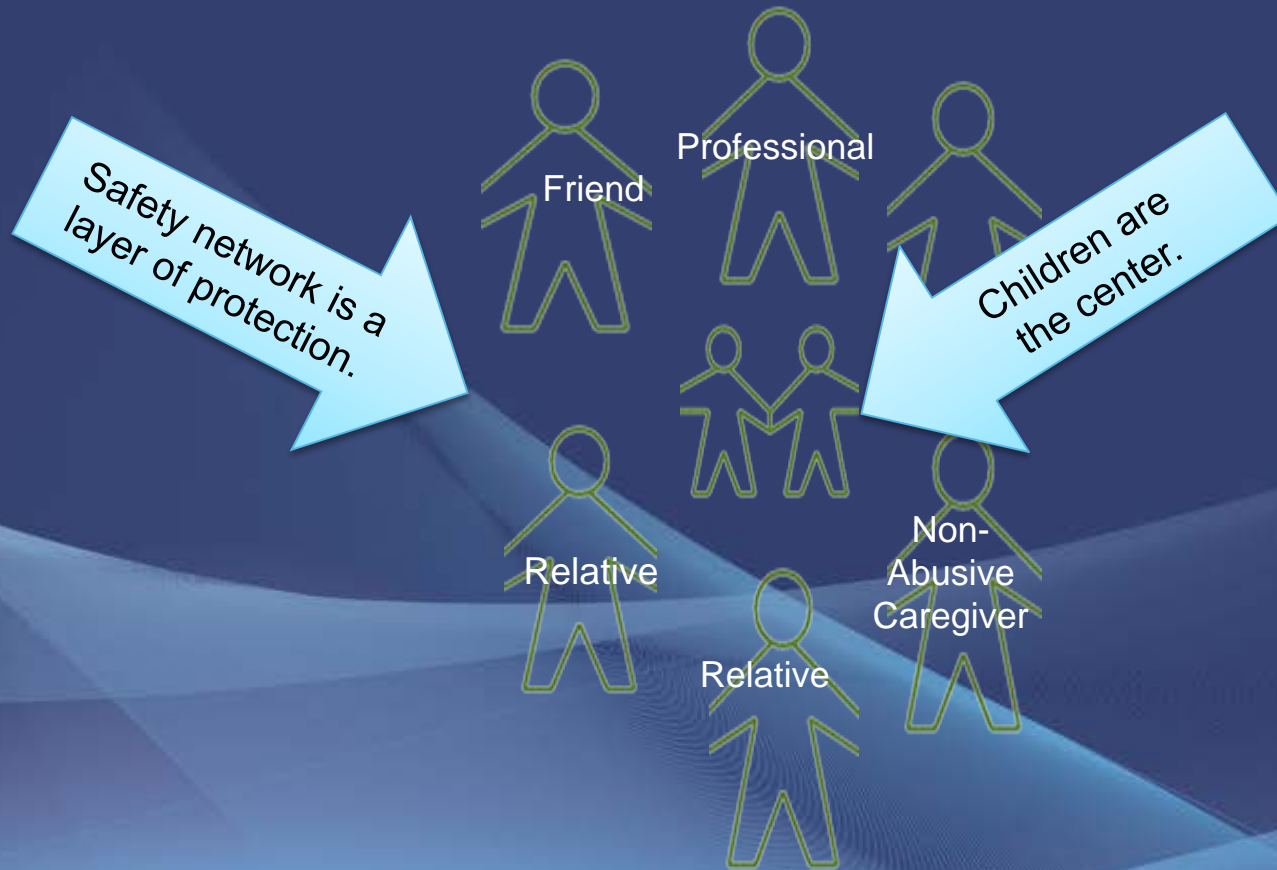
Plans Should be Behaviorally Based

Behaviorally based safety planning provides a clear picture of what safety will look like in the family so everyone knows what needs to happen to close the case.



Services \neq Safety

Effective Safety Plans Must Include a Safety Network



Safety Networks

- Good child protection work builds future safety with families and all their safety network.
- For safety to be sustainable, the network must include people who will have a long-lasting relationship with the family, but it can also include professionals.
- Effective safety planning work mobilizes the family and the safety network to take responsibility for the safety of the child.



Rationale for Building Safety Networks

- Abuse and neglect happens in secrecy.
- CPS involvement is temporary.
- Caseworkers alone cannot ensure child safety.
- A network of PERMANENT support people is needed to enhance safety AND hold the person causing harm accountable.
- We frequently ask people to engage in “services,” even when it does not directly address the danger. We could instead utilize our skillful use of authority to bring more people to the work of enhancing day to day safety for children.





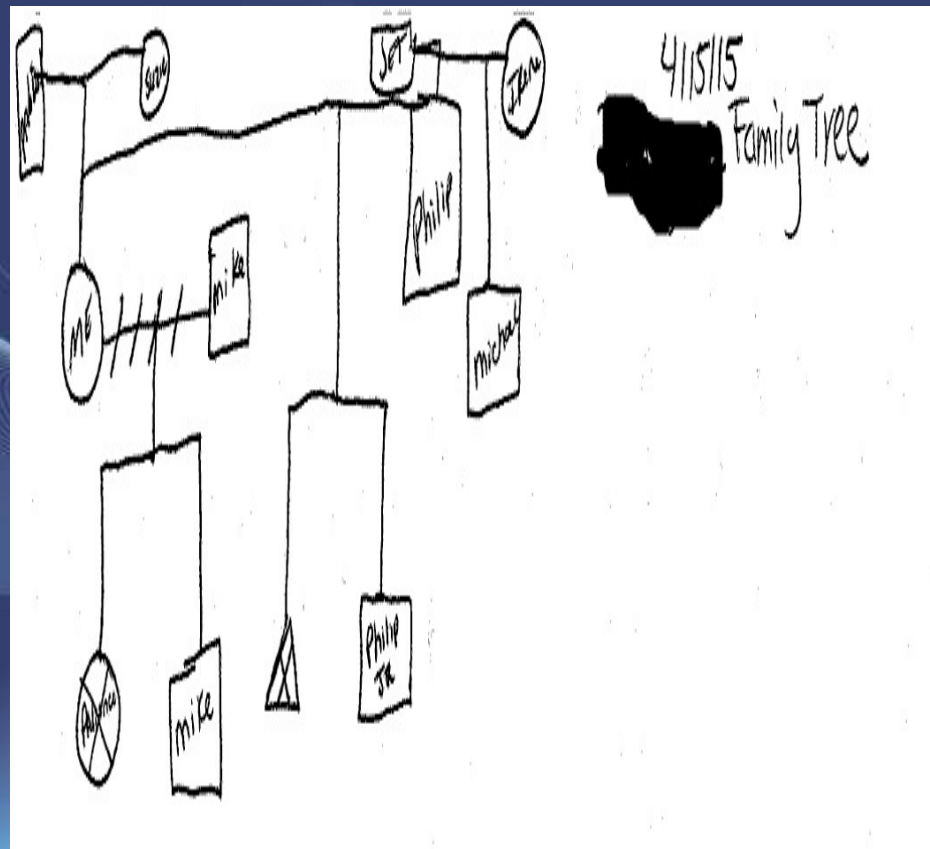
Most People Have Networks Even if They Don't Recognize Them

Families often have more people already involved in caring for their children than we know.

By meticulously asking about formal and informal networks and using our skillful use of authority, the family and community can become members of an expanded safety network that helps keep children safe.

Genogram

A family map or history



Enhancing the Safety Network: Safety Circles



(Susie Essex and Sonja Parker)

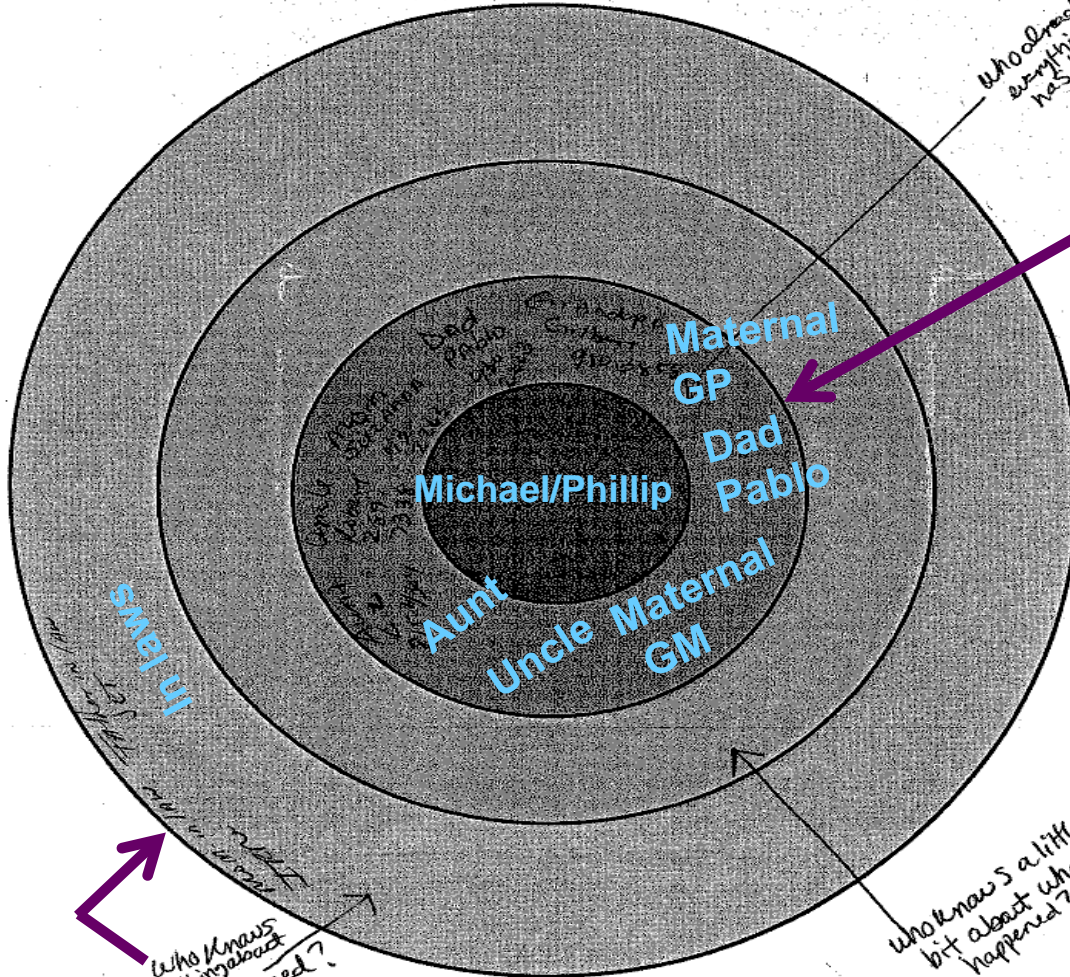
Family Safety Circles:

Child's Name: [REDACTED]

Date: 4/15/15

Case Name: [REDACTED]

Case ID: [REDACTED]



QUESTIONS

- ① Does everyone understand why we're meeting today? What is your understanding?
 - drug use
 - for the baby
 - ensure the safety of the children
 - \$Yvette
 - support
 - give mom some time/break (Babysit)
- ② What brought you here today?
 - get involved w/ Yvette more
 - show support
 - reach out more to family, ask for help
 - build relationships here for Yvette (raised her)
 - understand every word you say
- ③ What is it about this family & children that matters to you?
 - well being of Michael & Phillip
 - help to understand expectations of responsibility & parenting
 - Yvette & kids
- ④ What are you hoping to contribute?
 - help to not feel alone
 - help her get a job
- ⑤ What is the most important thing you want to accomplish today?
 - have understanding w/ Yvette that they are here for her, not alone
 - Show Support!

⑥ How should we treat one another?

⑦ What are your rules?

- w/ respect
- listen to each other

Love

- communication
- honesty
- humility
- willingness
- Patientce
- building on -

- understanding
- open minded
- speak 1 at a time
- no cut offs
- non judgemental
- "I" statements not "you"

Relationship Questions

Don'ts

- get into drugs
- give up
- choose bad friends
- give into peer pressure
(Be follower)

Do

- learn & enjoy
- good communication skills
- Be Smart
- Be own Person/leader
- graduate

What does mom want to change?

- Be a role model
- Spend quality time w/ kids
↳ more hands on
- taking responsibility to raise/care
for Phillip

What would the kids say:

- mom to live w/ him
- mom to play w/ him more

Who to turn to?

- John (Family friend)
- Pablo
- Liz
- Suzanna
- Gilbert
- Robert

Family says:

- she gets diapers, McD's,

Exception Questions

didn't use when:

- bumped into old friends & they offered but she denied b/c was already sober for some time

triggers for use:

- stress
- old friends
- being judged
- lack of support

Patterns

- locking bathroom doors
- "I'll be right back"
- not engaged
 - ↳ no reaction
- being secretive
 - ↳ "don't go in my bag"
- hanging w/ old friends
- mood swings
 - ↳ sensitive, touchy
- KO'ed, passed out

Miracle Questions

5 years from now...

- kids in her own home
- healthy kids
& smart
- ~~Mikie~~ Mikie A & B honor roll
- Mikie to have his own goals
↳ job corp
- potty training Phillip
- ^{anna} has ^{own} house, supports kids on her own
 - Mikie is in college
- Mikie do better in school
- Yvette to be happy
- Phillip to be smart & in kindergarten/pre-K

If I could change today

- using heroin

Happy Family

- respectful & honest
- open, able to share anything & not be scared
- good communication
- always spend time together
↳ family days
- See Yvette doing good / making changes
↳ overall better life

Danger/what are we worried about

- not being able to provide for kids
- not being a good parent
- Yvette's Friends
- Falling back into the cycle
- Drug use
- risk of harm to Yvette & kids if harmful behavior continues
- long term effects of drugs on kids & Evette
- short
- Phillip won't provide & be a father to the kids
↳ won't get a job

What Needs To Happen?

Agency Goals? Next Steps:

- Stabilized ^{protective} parent
- Maintain sobriety
- Reach out to network
- Acknowledge & recognize ^{triggers}

- Family Goals:
- School - medicare
- get a job
- get on own feet
- stay clean
- Maintain sobriety
- all on same page
- get on methadone
- hit list

Strengths/what's working well

- having time to spend w/ family
- communicating w/ mom & dad about situation
- asking for help
- having support she can call to help pitch in w/ supplies
- availability of support network
- having help w/ baby sitting
- Bond w/ children & caring for their needs
- higher levels of understanding
- good communication w/ worker
- motivated & determined
- organized
- good communication w/ service providers

Organizing the Information

What are we worried about?	What's working well?	What are the next steps?
<ul style="list-style-type: none">• Mother's substance abuse. Recovery is still new.• Mother not being able to provide for the children.• Cycle of using drugs.• Long term effects of drug use on mom/children.• Father shows no interest in getting involved.• Mother has friends who use drugs.	<ul style="list-style-type: none">• Lately mother spends time with family/children.• Mother has opened the line of communication with her parents.• Support network is willing to help mother with what she needs for baby.• Mother is bonding with the children.• Mother is communicating with CPS caseworker.• Mother seems motivated, determined and organized.• Mother is on methadone and communicates with counselor.	<ul style="list-style-type: none">• Mother/Safety Network will demonstrate protective actions.• Mother will maintain her sobriety.• Mother will reach out to the network for support.• Network will recognize mom's triggers and know how to respond.• Mom will register for school so she can get on her feet.

Harm Statement

On March 2015, CPS received a referral alleging drug abuse by mother. Mother reported that she was on a Methadone program during her pregnancy, but she relapsed and started using heroin before delivering her baby. Mother's drug use has caused Phillip to have withdrawal symptoms that included physical pain and uncontrollable crying. Mother's drug use has also caused her not to be bonded with her son Michael. He has been raised by his grandmother, but he expresses wanting his mother to be in the home and to have a closer relationship with her.

It was reported

About what caregiver
actions/inactions

With what impact on the
child

Danger Statement

While CPS, grandmother, grandfather, and uncle all acknowledge that mother has taken positive steps to try to protect her children, everyone is also worried that mother will relapse and use heroin. If mother relapses, she will not be able to be in grandmother's home bonding and caring for baby Phillip. If baby Phillip does not bond with mother, this can cause a delay in development as well as attachment issues in the future. If mother continues to use drugs, everyone is also worried that both Michael and Phillip will continue to grow up without their mother, which can lead to problems in the children's social and emotional development.

Who is worried

About what potential caregiver actions/inactions

Potential future impact on child

Strengths and Protective Actions

Mother has been honest and transparent with the CPS caseworker.	Mother has allowed Michael to be raised by grandmother.
Mother and Network members attended and participated in the safety network meeting.	Grandmother allows mother to visit with Michael but she supervises contact.
Yvette is enrolled and participating in a Methadone Program.	Network members reported to CPS when mother didn't follow the safety rules/intervene.
Yvette calls the CPS worker constantly to check in.	Grandmother and Network members hold a meeting with mother when they see mother displaying behavior that may indicate that she might relapse.



Why It Is Important to Listen & Involve Children Step-by-step

- Helps secure the physical and emotional safety of the child both in the present and future
- Empowers the child
- Boosts the resilience of the child and family
- Restoring the parent-child connection and keeping families intact when possible

(Thornton, 2014; Turnell, 1999)



What Happens if We Don't Involve Children Step-by-Step?

- Missed opportunities, warning signs
- Further disempowers the child
- Children may engage in harmful behaviors to experience a sense of control if not given a healthy measure of control

(Gibson, 2014; Kress, et al. 2012; Turnell & Edwards, 1999)



Children are our partners every step of the way



Children's Voices Will Be Heard through You

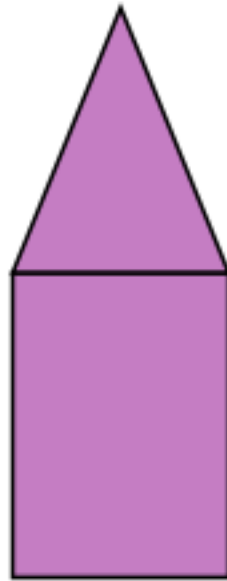
What are we worried about?

What is working well?

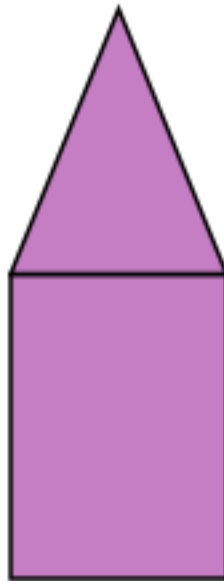
What needs to happen?



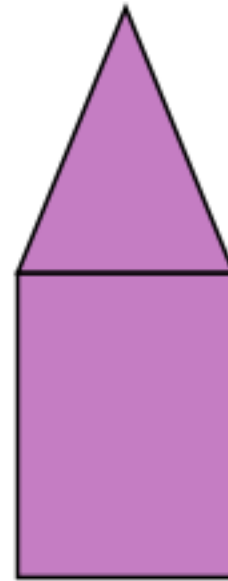
The Three Houses



House of Good Things



House of Worries



House of Hopes/Dreams

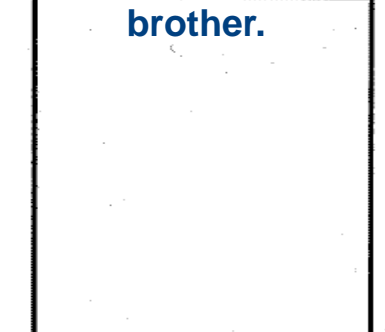
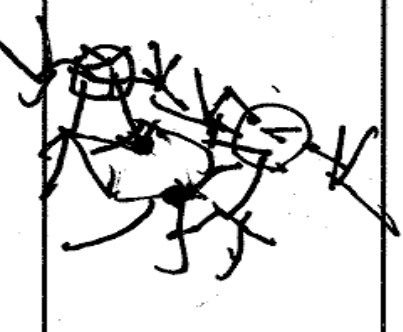
(Weld, 2008)

'THREE HOUSES' Child Assessment Form

Child's Name: _____ Date: 4/15/15

Case Name: _____ Case ID: _____

- Play w/mommy
- Play w/brother
- Play monopoly with grandma and tio Robert.
- Play x-box
- Mommy/GM/GP take care of me
- Living with mommy, grandma, grandpa, Tio Robert and baby brother.
- No secrets
- No fighting with grandma
- No running in the house.
- Grandma/grandpa fight with words and it scares him.



→ no secrets
 → no fighting w/grandma
 → no running in house
 → grandma & grandpa fight w/words + it scares him
 HOUSE OF WORRIES

- play w/mommie
 - Play w/brother
 - play monopoly w/grandma, tio Robert
 - plays X-box
 - mommie, grandma & grandpa take care of me
 HOUSE OF GOOD THINGS

- living w/mommie
 grandma, grandpa, tio Robert, baby brother
 HOUSE OF DREAMS

The Safety House

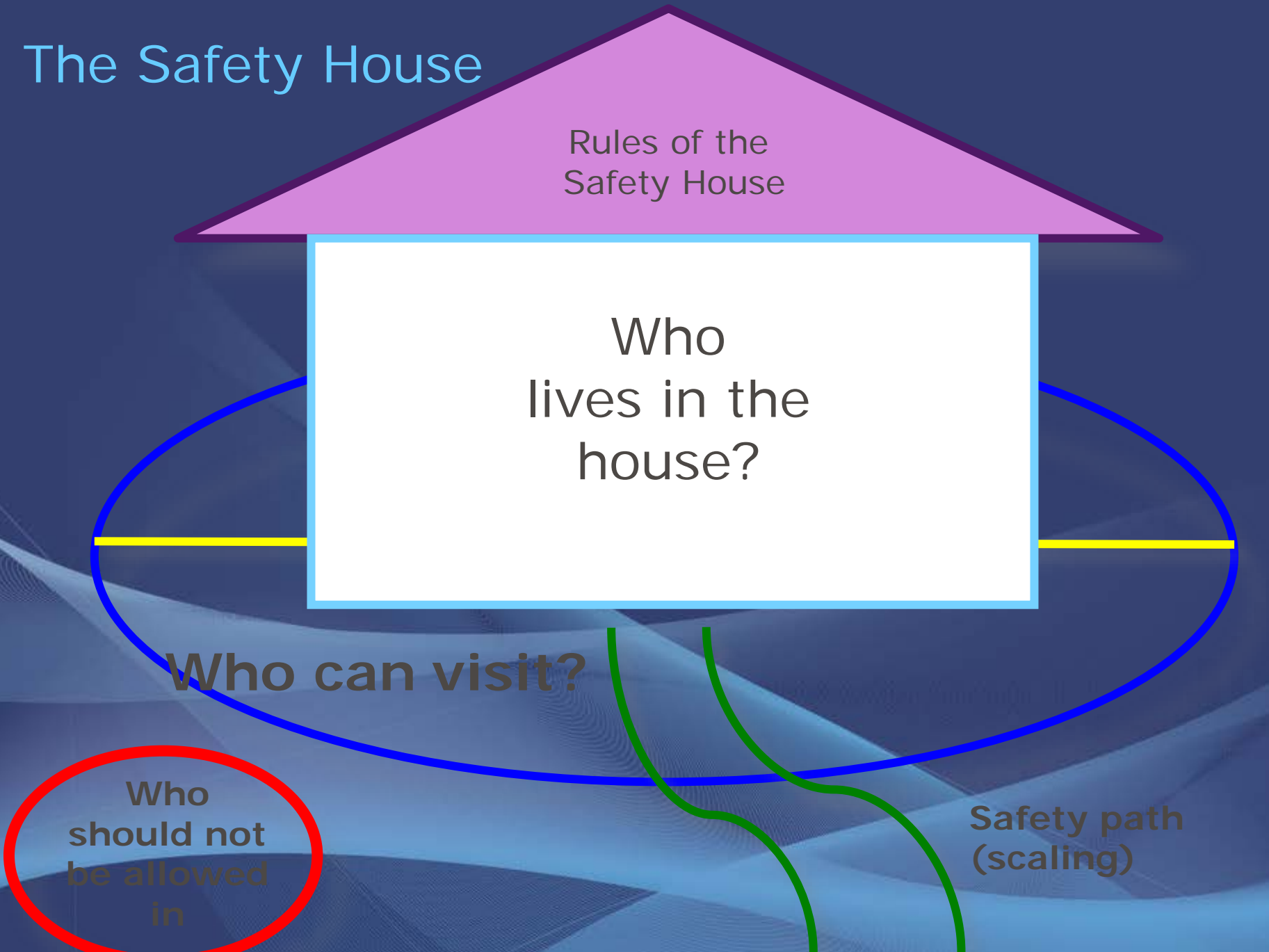
Rules of the
Safety House

Who
lives in the
house?

Who can visit?

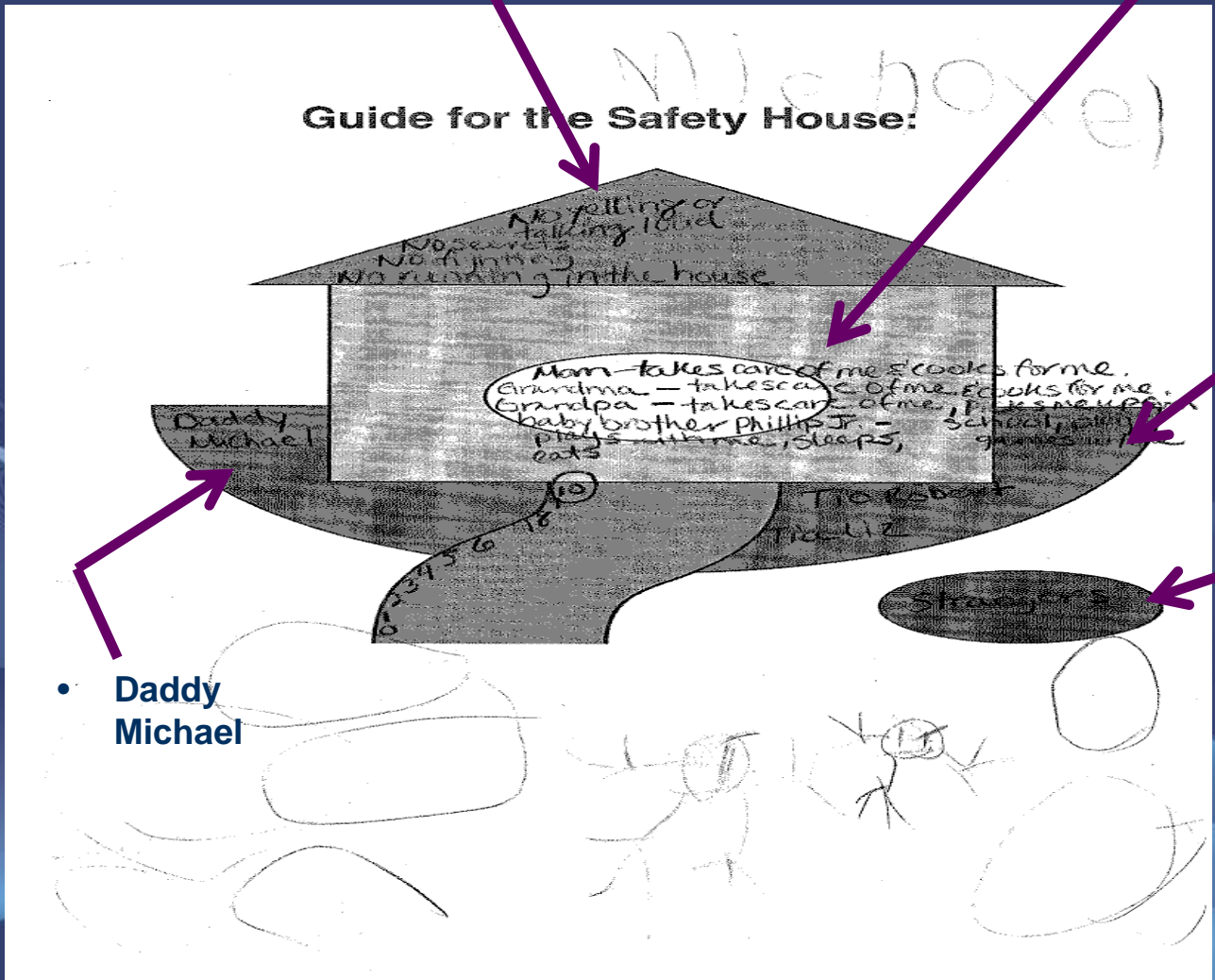
Who
should not
be allowed
in

Safety path
(scaling)



- No yelling or talking loud.
- No secrets
- No fighting in the house.

- Mom takes care of me and cooks for me.
- Grandma takes care of me and cooks for me.
- Grandpa takes care of me, picks me up from school, plays games with me.
- Baby brother Phillip plays with me, sleeps and eats.



- Daddy Michael

- Tio Robert
- Tia Liz

- Strangers

Safety is the Goal

Safe-ty [sāftē] **NOUN:**
*Protective actions
taken by the caregiver
that mitigate the danger
and are demonstrated
over time.*



Safety Goals

- keep eye on Vette → checking in on her
- ↳ holding her accountable

In the absence of drugs

- happy - spending time w/ kids & engaged w/ them
 - sober
 - healthy
 - basic needs met
 - everyone is together
- Forever Safety

stay clean - having a job - having a filled home w/ everything
stay away from old friends
~~stay~~ co-parenting w/ Michael they need & want.

Case Goals

surrounding self
positive influences

1 Maintain sobriety

- keep reaching out to safety network

Hopes & Dreams

- have a career
- happy & healthy
- realistic expectations & dreams
- enjoy childhood

The Next Steps



- Family focused on sustainable safety
- Mother and safety network can identify triggers for mother stopping methadone and relapsing on heroin
- Safety network knows what to do and will do it if mother needs help
- Mother has demonstrated she will ask for help if she needs it
- Everyone knows what to do to make sure the children are safe if mom does relapse

Who is a part of the plan?

What action has to be taken to address the danger?

For how long?

Testing the Plan

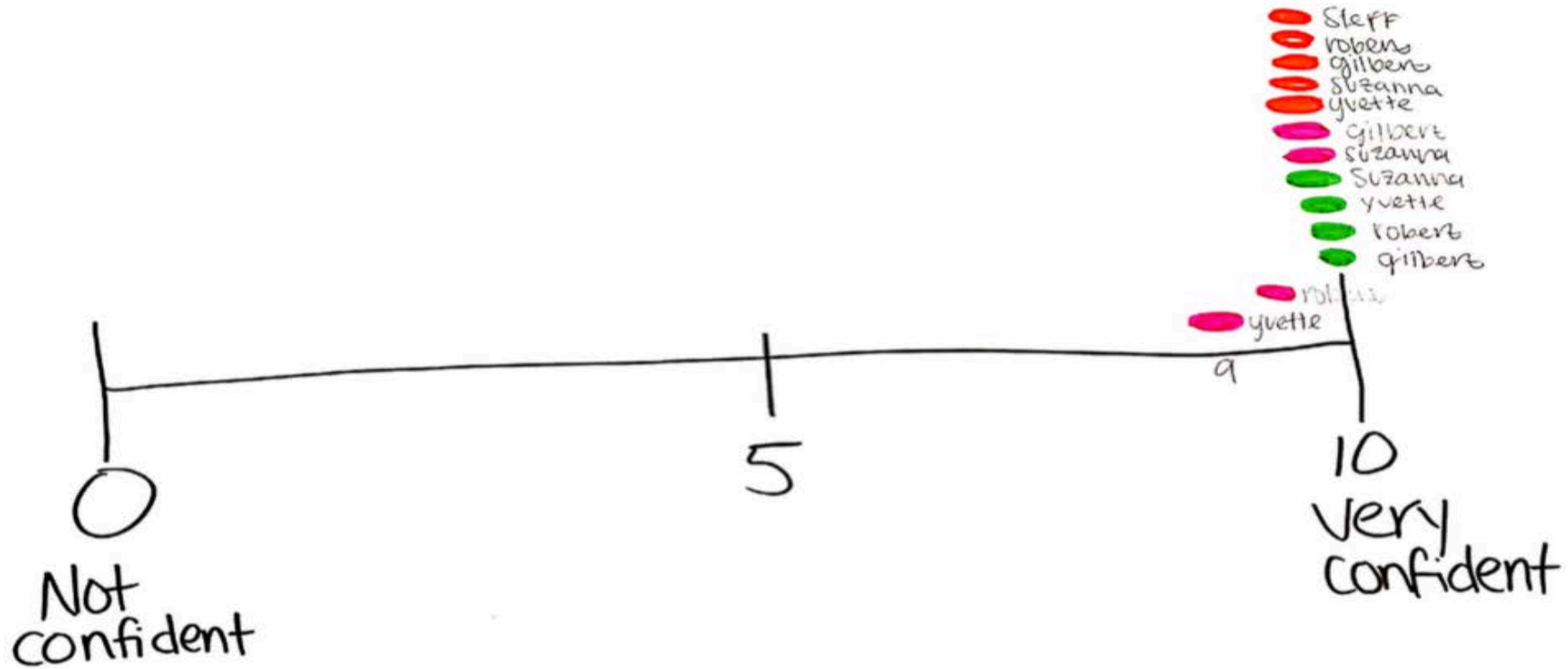
- One day Yvette locks the door when taking a shower.
- Grandmother knocks and starts yelling for mother to open the door.
- Yvette responds by telling grandmother to hold on.
- Grandmother calls CPS caseworker and uncle.
- Grandmother and Uncle use the key to unlock the door.
- Mother was getting dressed as they opened up the door.

last case

will not use again

how confident of a parent

- taking parental responsibilities
- attentive
- engaged - interactive



Post Closure

- Case closed successfully September 2015.
- Mother has not received another CPS Referral.
- Worker is confident that the safety network continues to help in assuring children continue to be safe.

Q&A



References

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The End

