

Safety vs. Risk in HPSO Family Situations: Part II

**Your
presenters:
Who are we?**

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Part I Recap: Core Takeaways

Iceberg

Grid

Safety is immediate/imminent

Risk is medium-long term

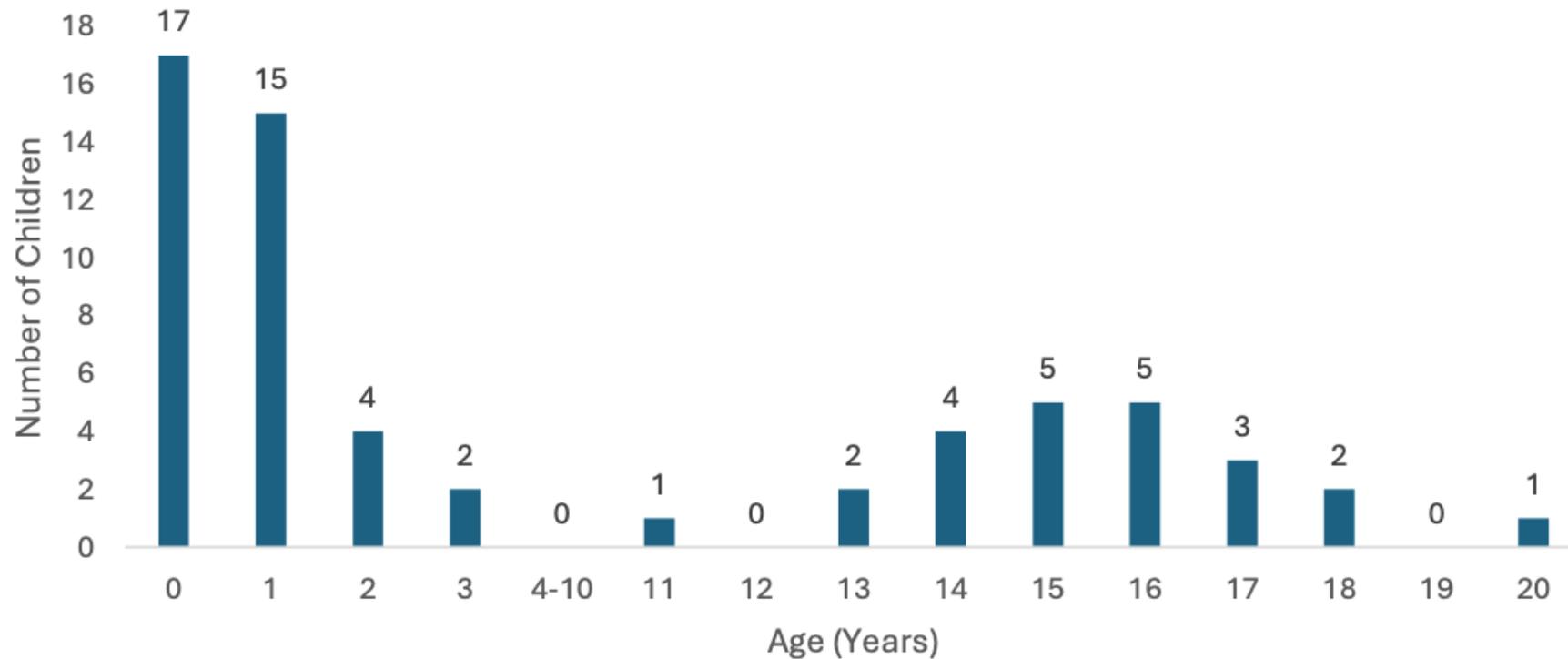
Fish vs. Fishing

Safety Plans vs Case Plan

Safety Analysis vs Risk Assessment

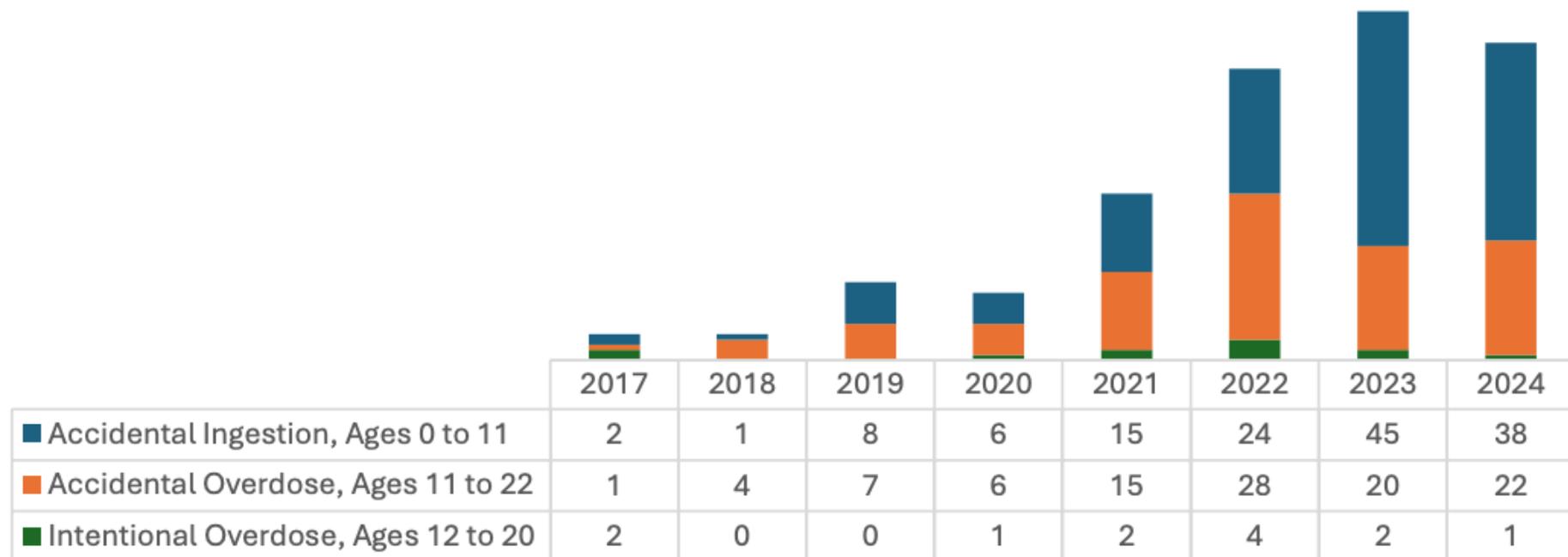
Why are we focusing on HSPOs?

Figure 16: Age of Children Involved in Accidental Ingestions and Overdoses, 2024

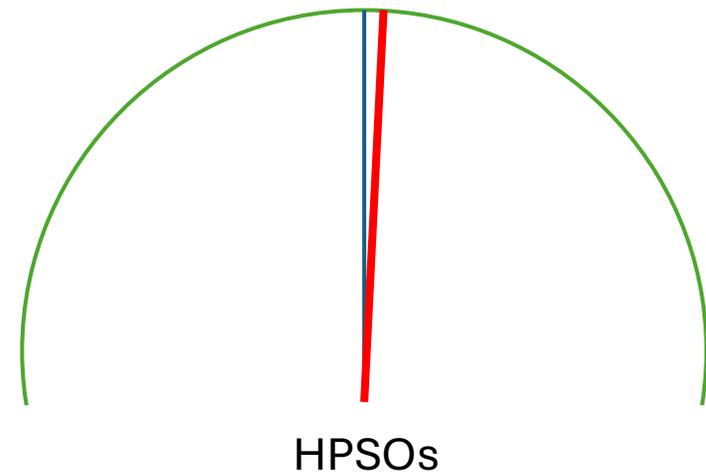
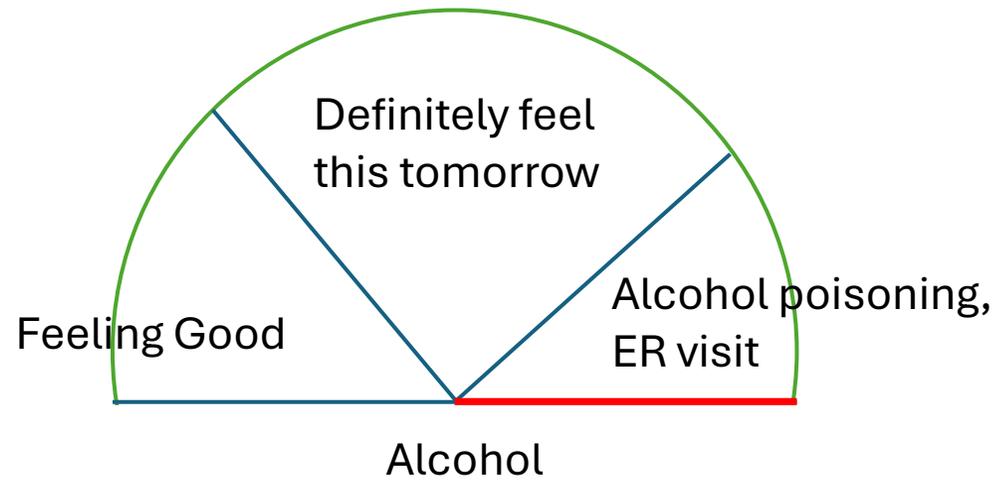


Why are we focusing on HSPOs?

Figure 15: Accidental Ingestion and Overdoses, 2017-2024



Why are we focusing on HSPOs?



How long does fentanyl take to kick in, and how long does it last?

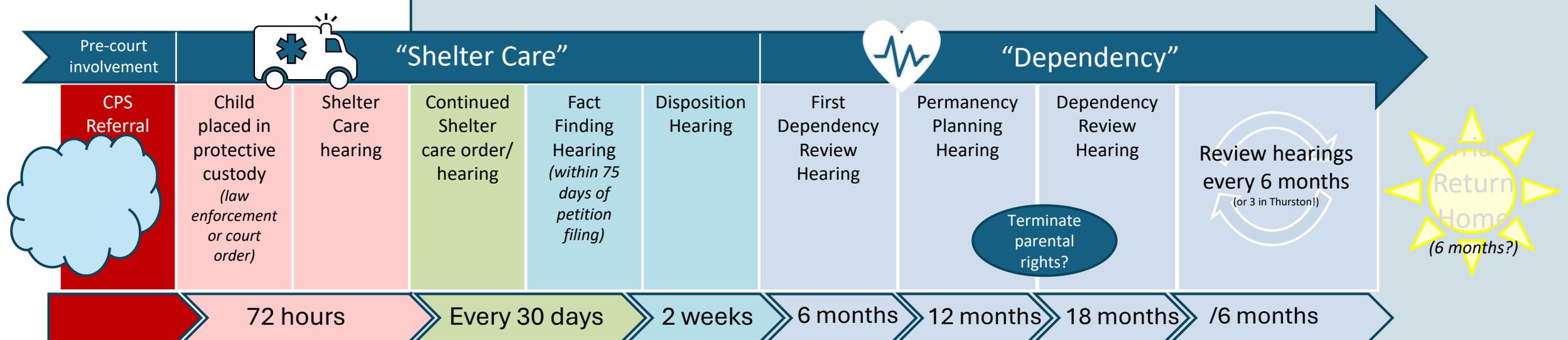
Fentanyl Onset, Peak, and Duration (by route of use)

Route of Use	Onset	Peak Effects	Duration
Injection (IV)	Seconds – 2 min	2 – 5 min	30 min – 2 hrs
Smoking / Inhalation	Seconds – few min	5 – 10 min	30 min – 2 hrs
Snorting (Insufflation)	5 – 10 min	15 – 20 min	1 – 2 hrs
Oral (Pills/Lozenges)	15 – 30 min	30 – 60 min	2 – 4 hrs
Transdermal Patch	12 – 24 hrs	24 – 72 hrs	72 hrs (steady release)

Court Timeline

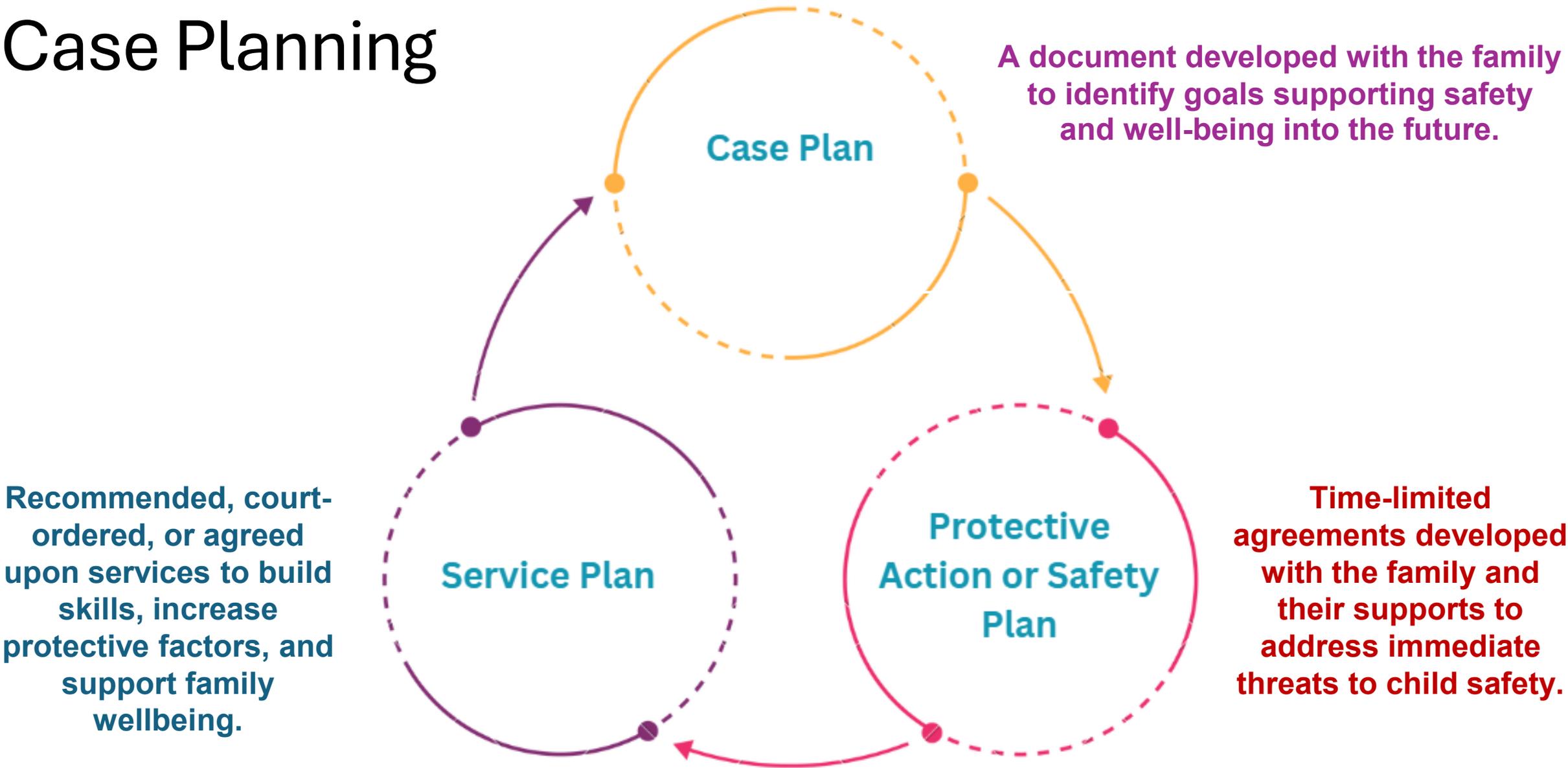
IS IT SAFE RETURN HOME?

Safety Planning: What can be put in place to return child to parent while parent works on case plan?



Case Planning: what change in parent behavior or circumstances need to occur in order to **return to parents' care** – and what services, supports will help parent get there?

Case Planning



A document developed with the family to identify goals supporting safety and well-being into the future.

Recommended, court-ordered, or agreed upon services to build skills, increase protective factors, and support family wellbeing.

Time-limited agreements developed with the family and their supports to address immediate threats to child safety.

Safety Plans vs. Case Plans

Safety Plans	Case Plans
Create safety in the present	Create safety in the future
Prevent removal (despite threat)	Prevent future placement and/or re-referral
Actions to immediately manage threats to child safety, does not rely on parental behavioral change	Services to build parental protective capacities to manage threats to child safety, behavioral change
Short-term (<30 days)	Short-term to long-term (30 days – 6 months)
Informed by safety assessment	Informed by family assessment and developed with the family
Narrow, only addresses identified threats to child safety	Broad, addresses long-term safety, permanency, and wellbeing

Safety vs. Risk

Examples of safety factors

Drug paraphernalia in reach of small children

Co-sleeping with an infant while under the influence

Ingestion of drugs or alcohol by a child

Failure to meet a child's basic needs

Parent driving under the influence

Examples of risk factors

Child tested positive for substances at birth

Age of child

Parental substance use disorder

Co-occurring mental health problem

Parent was victim of child/abuse neglect

Safety Plan

Case Plan

Why do we do Case Plans?

- Identify a family's short and long-term goals.
- Incorporate family voice by developing mutually agreed upon expectations.
- Preserve families by increasing protective capacities and decreasing the risk of child abuse and neglect.
- Support the health, safety and well-being of children, youth, and families.



When is a Case Plan Required?

DCYF: Policy 1150 Case Plan

- Initiate within 15 days.
- Identify immediate service needs and parental agreement.
- Complete within 45 days.
- Review during monthly contacts with the family.
- Update the Case Plan whenever a new service or resource need is identified.



Case Planning is Fluid

Initiate Case Plan ~ 15 days

Specific services may have been identified already, initiate the case plan by indicating any initial service referrals, document in case plan, and obtain parent signature.



Initial Contact

Follow program-specific requirements for initial contact and scheduling your first meeting or visit with the family.



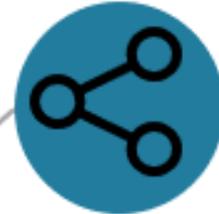
Engagement and Assessment

As you complete your assessment, continue to engage the family in case planning discussions.



Shared Process

Case planning is a shared process with families incorporating elements driven by the family voice as well as services identified through assessment or by court order.



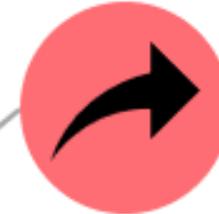
Complete Case Plan ~ 45 days

Finalize the case plan to include all services and resources identified throughout engagement, assessment, and shared development of the case plan.



Additional Resources Identified

Case planning with families is fluid, additional services or resources may be identified. Case plans should be reviewed monthly and updated as needed throughout the life of a case.



Elements of a Good Case Plan

Is it reasonable?

Make sure the case plan is setting up parents to succeed

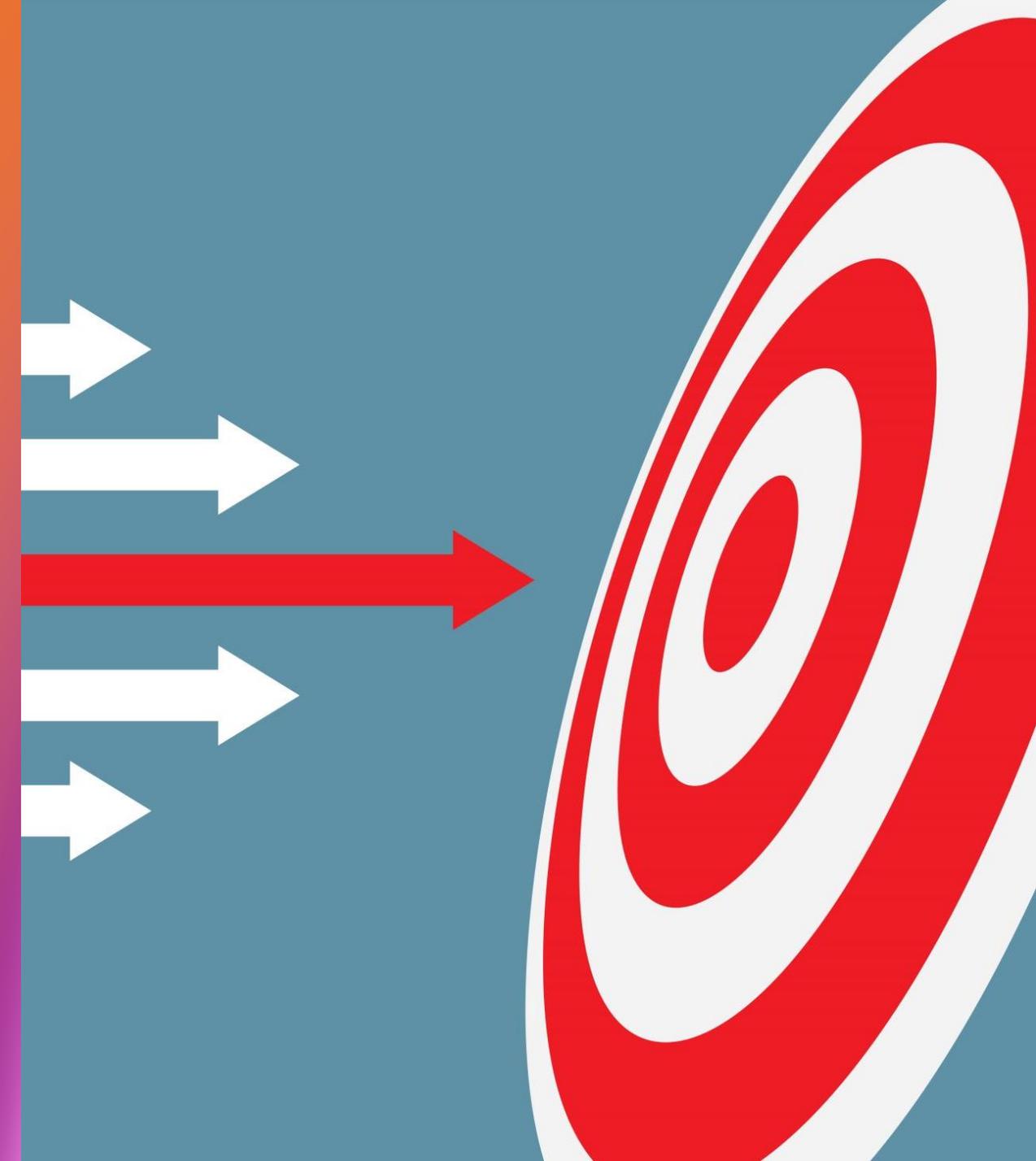
Avoid moving the goal posts!

Focus on what needs to change, not services

"How will we know if this service is successful?"

OR

"What are the indicators that the behavior is no longer a problem?"



SMART Goals

- **S**pecific – What is the behavioral change that needs to occur?
- **M**easurable – How is the behavioral change measured?
- **A**ttainable – Is the plan realistic given resources available?
- **R**elevant – How to the objectives, tasks, and services relate to safety threat and risk?
- **T**imely and Understandable – Are services available within the required timeframe?

Is the family able to explain the goal of the plan? Is it written in plain talk?

- Clear and concise language.
- Easy to read.
- Does not contain jargon, acronyms, or legal language.

Case Plan Template

CASE PLAN

Parent's Name: _____

Date: _____



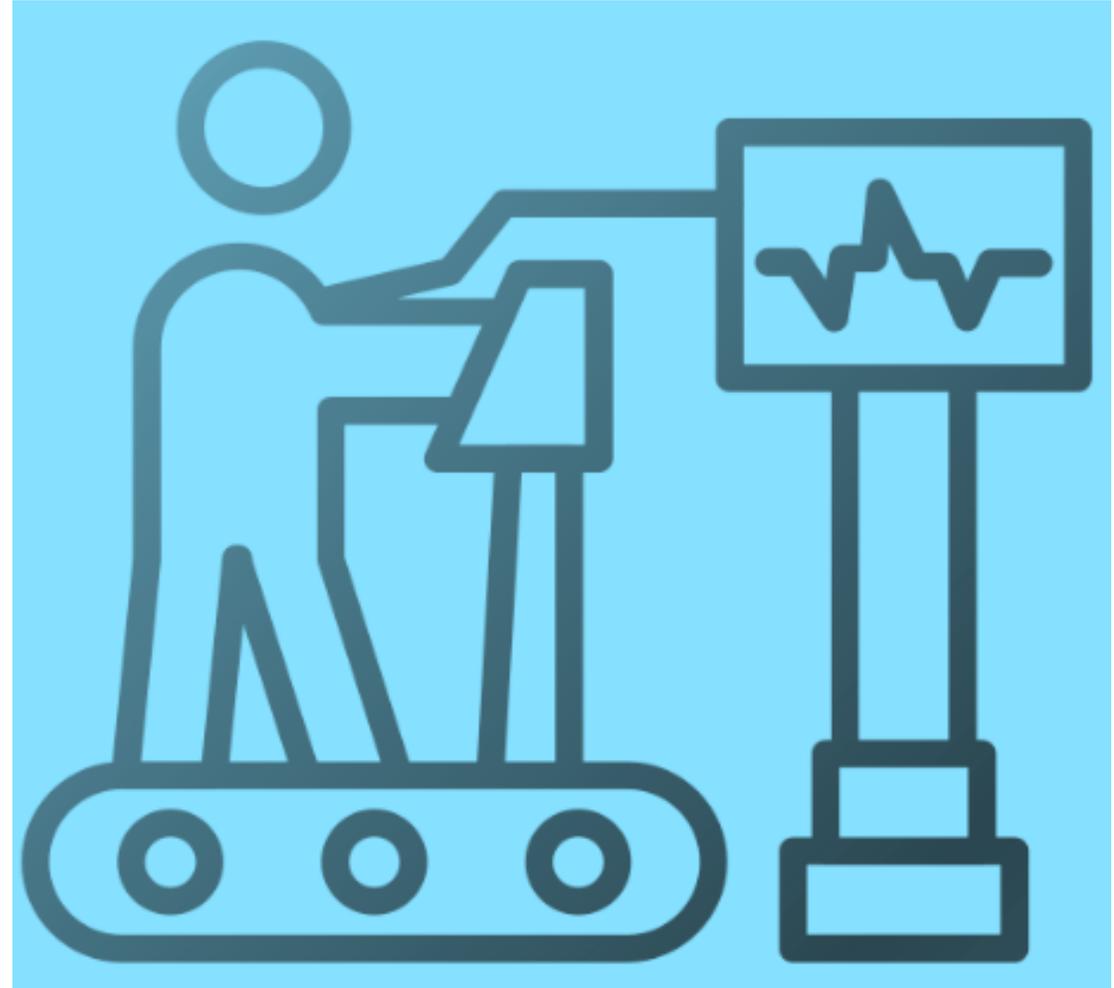
Behavior that needs to change:	How will we get there? (services or how will we know the behavior has changed)	What's the first step?	How long do we have to get this 1 st step done and who needs to do what?
	How will we measure steps towards improvement/success?	Who can help you stay on track?	How will we know when the behavior has changed? (what's the goal?)

Visitation and case planning

- Visitation parameters (supervision level, location and duration) should focus on safety first, then risk

The question we need to ask is:

“How long can you parent without slipping into problematic behaviors?”



Visitation and Case Planning

Visits are where we get to see if our case planning efforts are working.



Visitation and Case Planning

We should be constantly cranking up (liberalizing) visits as safety threats are eliminated and risk factors decrease.

SAFETY = VISITS

RISK = PLACEMENT

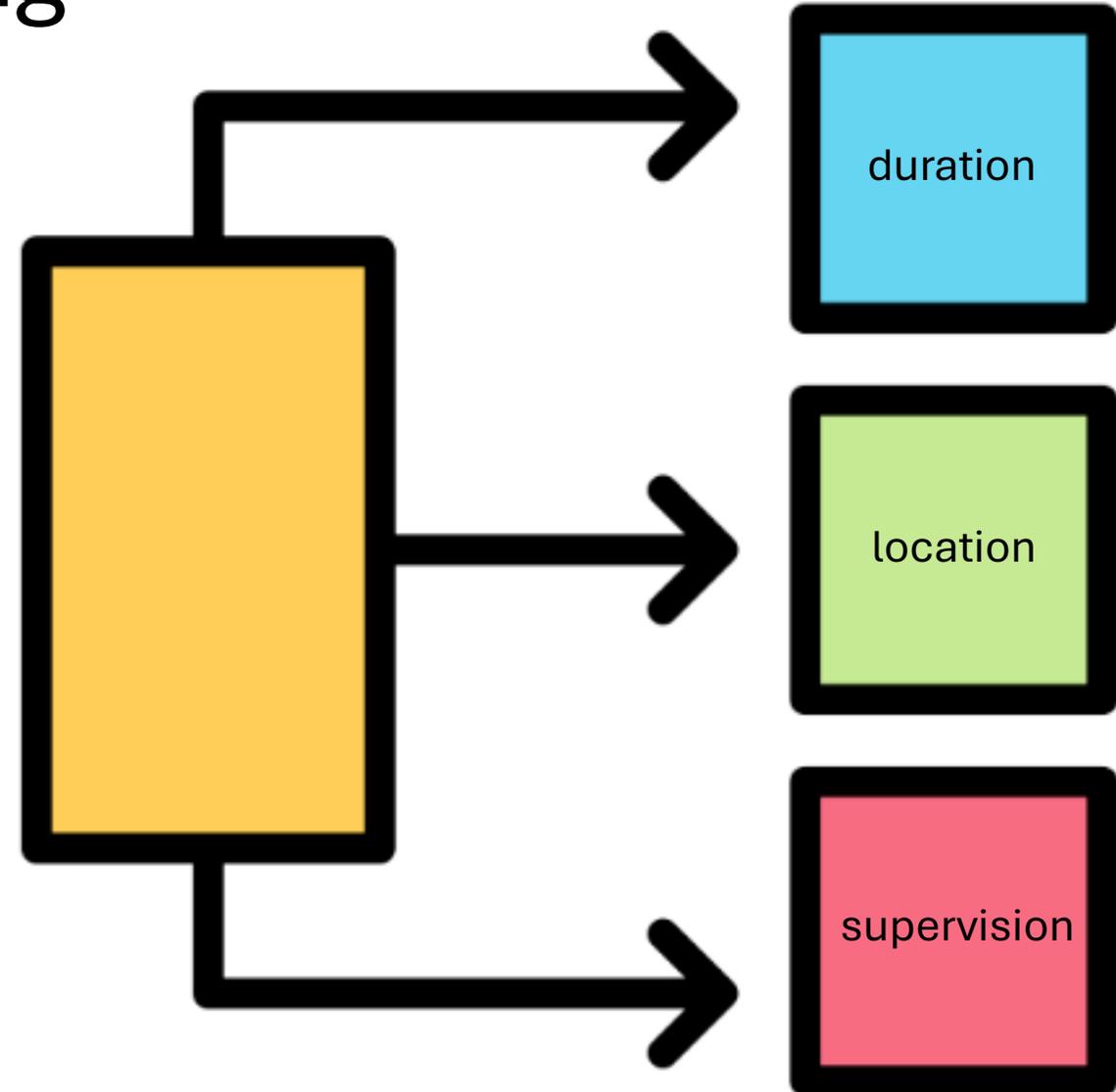


Visitation and Case Planning

- If we're at 2 hours, why not 4? If we're at 4, why not all day?
- Do not leave well enough alone!
- Keep in mind that a visitation plan does not have to progress linearly

For example: Doing great with 2 hours unsupervised

- Maybe we could extend to all-day, but have the first few be monitored.
- Or an overnight with a trusted adult/relative in the house.



Benefits of having a good case plan

- **Substantially eliminates “Progress vs. Compliance” arguments**
- **“Conditions for return home” becomes moot**
- **Parents know what they need to achieve, not what they need to do**
- **Decisions are made by the group, not the individual**