Workshop Introduction

- Context for the Training
- Training Related to Implementation of Safety Decision Making Methodology
- Fidelity of the Ongoing Family Functioning Assessment
  - Philosophy of practice
  - Intervention purpose and framework
  - Conceptual and criteria basis for practice and decision-making
  - Process, practice and outcomes
Workshop Training Objectives

As a result of this training, participants will be able to:

› Identify the ongoing family functioning intervention stages;
› Define caregiver protective capacities;
› Recall the purpose of caregiver protective capacity scaling;
› Identify and demonstrate assessment skills utilized in assessing caregiver protective capacities;
› Demonstrate critical thinking through case application.
Assessing and Scaling Caregiver Protective Capacities: Case Management

Office of Child Welfare In-Service Training

**Agenda**

**Day 1: 9:00-4:30**

Introduction
- Objectives
- Agenda
- Pre-Test

**Session 1**
- Review of Methodology Case Flow
  - Review Case Flow and Objectives of Flow

**Session 2**
- Intervention Stages
  - Preparation
  - Introduction
  - Exploration
  - Case Planning

**Session 3**
- Caregiver Protective Capacities
  - What Are Caregiver Protective Capacities?
  - Relationship of Caregiver Protective Capacities to Danger
  - Scaling of Caregiver Protective Capacities

**Lunch 12:00-1:00**

**Session 4**
- How Do We Assess Caregiver Protective Capacities?
  - Worker Skills and Competencies
  - Practice Worker Skills and Competencies

**Day 2: 9:00-4:00**

**Session 5**
- Assessing and Scaling Caregiver Protective Capacities
  - Adult Functioning
  - Parenting General

**Lunch 11:45-1:00**

**Session 5 Continued**
- Parenting Discipline

**Session 6**
- Case Application Practice
- Wrap Up and Review
  - Post-Test
  - Training Evaluation
Session 1

Foundational Knowledge: Review of Methodology
From Great Wall of China to the Panama Canal

Child Protection Investigator
- Safety
- Danger Threats
- Caregiver Protective Capacities
- Present and Impending Danger Safety Plans

Case Management
- Safety
- Danger Threats
- Caregiver Protective Capacities
- Present and Impending Danger Safety Plans
- Safety Management
- Case Plan/Treatment--Change

Notes
Ongoing Family Functioning Assessment Process

- Preparation
- Introduction
- Exploration
- Case Planning
- Developing Strategy for Engagement
- Engagement
- Caregiver Protective Capacity Assessment
- Child Needs
- Danger Statement
- Family Goal
- Motivation for Change
- Complete Ongoing FFA
- Case Plan

Developing Strategy for Engagement
Determine What Must Change Through Information Collection
Develop Strategies for Change Case Plan Outcomes
Complete Ongoing FFA
Family Functioning Assessment-Ongoing Decisions

- Are danger threats being managed with a sufficient safety plan?
- How can existing protective capacities – STRENGTHS – be built upon to make changes?
- What is the relationship between danger threats and the diminished caregiver protective capacities—What must change?
- What is the parent’s perspective or awareness of his/her caregiver protective capacities?
- What are the child’s needs and how are the parents meeting or not meeting those needs?
Family Functioning Assessment-Ongoing Decisions

- What are the parent(s) ready and willing to work on in the case plan to change their behavior?
- What are the areas of disagreement with the parent(s) as to what needs to change?
- What change strategy will be used to address the diminished protective capacities?
Philosophy: Family Functioning Assessment-Ongoing

- Safety is paramount and the basis for intervention!
- Case planning process and interventions can be more clearly defined around the use of safety concepts and behavior change
- Case planning process can be structured in a way to encourage and direct parents’ involvement and establish consistent intervention decisions and objectives
Essential Skills for Case Management

- Engagement
- Teaming
- **Assessment/Understanding**
- Planning
  - Safety Plan
  - Case Plan
- Tracking and Adapting
  - Safety Plan Sufficiency Evaluation & Update
  - Case Plan Progress Evaluation & Update
Session 2

Intervention Stages: Getting to Case Plan Outcomes
Intervention Standards

- Preparation
- Introduction
- Exploration
- Case Planning

Notes
Preparation

- Preparation is the act of getting ready, being prepared. In ongoing case management and services, this entails key actions and tasks:
  - Review of the Family Functioning Assessment-Investigation
  - Review and analysis of the Impending Danger Safety Plan
  - Review of case information and content
  - Contact with collaterals
  - Response to any immediate safety management needs
  - Consultation with the Supervisor to reconcile information and prepare for family contact

Preparation is the act of getting ready, being prepared. When reviewing information, the ongoing case manager and supervisor are working towards reconciling information and identifying strategies for involvement with the family.
Introduction

Introduction is the act of introducing you as the change agent and agency representative, the agency’s role, what case management is and is not, and providing clarification as to the role of the ongoing case manager.

Objectives of Introduction for Case Manager

- Begin to establish rapport with family; get to know them
- Establish a working relationship with the family
- Provide clarification and process with family for ongoing case management
Exploration

Exploration is the act of exploring with the family how they are functioning in relationship to the protective capacities, understanding how danger threats or negative family conditions have manifested, exploring motivation for change, resistance, or ambivalence, identifying family strengths, creating danger statements, and finding mutuality for continued work.

Achieve agreement with parent(s) as to:
- What must change for children to be safe
- How to achieve change
- Parent’s role in achieving change
- Role of others in helping parent(s) achieve change
- How progress will be measured
Case planning with the family is the act of establishing outcomes and motivation for change.
Session 3

Caregiver Protective Capacities
Why Do We Assess Caregiver Protective Capacities?

Notes
Danger Threats and Caregiver Protective Capacities

Danger threats $\pm$ Caregiver protective capacity = Safe or Unsafe
Definition: Caregiver Protective Capacities

Caregiver protective capacities are personal and caregiving behavioral, cognitive and emotional characteristics that can be specifically and directly associated with being protective of one’s young. Caregiver protective capacities are personal qualities or characteristics that contribute to vigilant child protection.
Behavioral Protective Capacity

- Specific action, activity, or performance that is consistent with, and results in, protective parenting and protective vigilance.
Cognitive Protective Capacity

- Specific intellect, knowledge, understanding and perception that results in protective parenting and protective vigilance.
Emotional Protective Capacity

Specific feelings, attitudes, identification with child and motivation that results in protective parenting and protective vigilance.
Assessing: Caregiver Protective Capacities

- CPI-Family Functioning Assessment
  - Based on six domains of information;
  - Limited information known at the time in relation to what can be known;
  - Determination of Yes or No;
  - Indicators of being “enhanced” or “diminished”.

- CM-Ongoing Family Functioning Assessment and Evaluation
  - Based on four domains of information;
  - Extensive information to be known;
  - Determination of degree of functioning from a limited to extensive perspective.

Notes
Scaling Caregiver Protective Capacities

- **A**: CPC is functioning and not affecting child safety;
- **B**: CPC is functioning and at times may have affected conditions in the home, but no child safety;
- **C**: CPC is diminished and at times has affected child safety;
- **D**: CPC is diminished and at a level that it pervasively is affecting child safety.
Session 4

The Caregiver Protective Capacity Assessment:
Focus and Skills
An Assessment:

- Is NOT:
  - A one time occurrence;
  - Myopic;
  - Deficit driven;
  - Legally driven;
  - One dimensional.

- Is:
  - Process, not a destination;
  - Multi-dimensional;
  - Strength and child focused;
  - Drives decision-making for child safety and change.
Information Collection: Drives Decision-Making

Observations
Review of Information
Family: Parents and Children
Family and Friends

Information Collection

Notes
Case Manager Strategies and Skills

- The strategies and skills we use during exploration directly influence information collection and the family partnership that began with our initial contacts.
Skills and Competencies: Case Manager

- Engagement
- Observation
- Critical Thinking

Notes
Engagement: Utilization of Skills

- Probing;
- Seeking clarification;
- Reflecting content;
- Reflecting feeling and meaning;
- Active Listening;
- Self-Aware;
- Going beyond what is said.
Practice: Engagement Skills

- Large Group Activity;
- Trainer on the Spot:
  - What do you know about me?
  - How will you find out?
  - Round the room interview utilizing your engagement skills.
Observation: Utilization of Skills

- Observation is getting information about objects, events, moves, attitudes and phenomena using one or more senses.
Practice: Observational Skills

- Large Group Activity;
- Video of parents and children reunited after a tornado;
- Record your observations:
  - What do you hear going on?
  - What are the parents doing?
Observation:

Advantages
- Most direct measure of behavior;
- Provides direct information;
- Can be used in natural or experimental settings (such as family time).

Disadvantages
- Observer’s presence may create artificial situation;
- Potential for bias;
- Potential to overlook meaningful aspects;
- Potential for misinterpretation.
Critical thinking is the intellectually disciplined process of actively and skillfully conceptualizing, applying, analyzing, synthesizing, and/or evaluating information gathered from, or generated by, observation, experience, reflection, reasoning, or communication.

Critical Thinking: Components

- Occurs when we use our knowledge of one thing, process to determine if another thing, process is true

- Taking into account relevant evidence or argument to revise a current understanding. Critically open to alternatives, willing to think about other possibilities.

- Discriminating and/or separating information

- Rules for deriving valid conclusions; when reasoning does not follow the rules=illogical.
Practice: Critical Thinking

- The Definition Game
  - Group One
    - Identify an object in the room (e.g. chair, mobile phone)
    - Ask Group Two to provide a definition
  - Group One is responsible for criticizing the definition
  - Group Two continues to modify the definition to address objections from Group One
Practice: Critical Thinking, Engagement and Observation

- Small Groups of 4;
- Croft Family:
  - Review FFA;
  - Identify areas for further exploration;
  - Engage family in conversations;
  - Observation by others.
Day 1: Take Away from the Day

- Take Away from today:
  - What did you find helpful?
  - Questions still needing to be answered?
  - More time on....

Notes

My Take Away from Today is:
Day 2: Assessing and Scaling Caregiver Protective Capacities
Case Management
Day 2: Welcome Back

- Overnight Thoughts?
  - Questions from yesterday?
  - Feedback from yesterday?
  - Reflections from yesterday?

Notes
Agenda: Day 2

- Practice Case Application:
  - Assessing for information collection
  - Utilizing information for scaling CPC’s
- Small Group Exercise:
  - Own Case Practice
    - Analysis and Critical Thinking Practice
    - Scaling Practice
Session 5

Assessing and Scaling Caregiver Protective Capacities: Case Application

Notes
Information Collection: Drives Decision-Making

Observations

Review of Information

Family: Parents and Children

Family and Friends

Information Collection

Notes
Russell Case Summary for Video Observation:
Angela Russell was recently transferred to case management after it was determined that Angel (8 yrs.) was not safe in the home with Angela without safety services. An in-home safety plan was attempted with the family, but due to the degree that Angela was not functioning, an out-of-home safety plan was put in place that has Angela residing with her paternal grandmother. Angel’s father is deceased.

Angela and her ex-boyfriend, Brian, have been separated for the past six months. Angela and Brian’s separation was hard on Angela and Angel, and since that time things in Angela’s life have slowly started to decline, both at home and in her work life. Angela began “partying” more frequently, often leaving Angel to care for herself, or at times bringing her with her to the “parties.” The last incident, brought the family to the attention of the agency. Angela did not come home the next morning, and when Angel woke up she was scared and called her grandmother, who subsequently call the agency for assistance and out of concern for Angel.
Adult Functioning and Caregiver Protective Capacities

Adult Functioning Domain:
Overall life management, prior abuse/neglect, criminal behavior, substance use/abuse, DV, mental health, intellectual functioning.

Parent/LG/CG is violent, impulsive, acting dangerously in ways that seriously harmed the child or will likely seriously harm the child.

Caregiver Protective Capacities:
Impulse Control; Takes Action; Sets Aside Needs; Recognizes and Understands Threats to the Child; Understands Protective Role.
Practice: Assessment and Scaling of CPC’s

- Small Groups of 4;
- Case Scenario:
  - Practice engaging “parent” in assessment regarding adult functioning;
  - Analyze information to determine CPC’s and Scaling of CPC.
Instructions for Identifying CPC’s

Purpose:

The purpose of this exercise is to provide a practice opportunity that allows participants to practice assessing and scaling caregiver protective capacities in relation to information collection.

Materials Needed:
- Caregiver Protective Capacity Reference Guide
- Danger Threat Reference Guide
- Adult Functioning Domain: Croft Case Study

Instructions:
1. Working within your groups, you will review the maltreatment and adult functioning domains of the ongoing family functioning assessment.
2. Following the group review of the adult functioning domains for the Croft Family, the group will conduct two interviews-(1) with Amy Croft and (2) with Blake Thomas.
3. The focus of the interview will be to gather information regarding their adult functioning in relation to their caregiver protective capacities utilizing our engagement and observation skills.
4. Each interviewee is able to take creative liberties in the practice exercise; however, those liberties should be within reason and based upon the information that was provided in the adult functioning domains.
5. Following each interview, the group will record the information obtained through the interview, using the worksheet.
6. Following the conclusion of both interviews, groups will review their information and determine the scaling of the identified caregiver protective capacities.

NOTE: These are practice interviews in a controlled setting. It should not and is not the expectation that you will obtain all the necessary information to complete all the caregiver protective capacities for either parent.
Assessing Caregiver Protective Capacities: Adult Functioning
Group Worksheet

Adult Functioning Interview with Amy Croft

Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Adult Functioning Interview with Blake Thomas

Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Parenting General and Caregiver Protective Capacities

Parenting General:
Overall typical parenting practices used by the parents.

Impending Danger Threats:
Not meeting basic and essential needs;
Threatening to seriously harm the child or fearful they will cause serious harm;
Views child and/or acts toward child in extremely negative ways and such behavior has or will result in serious harm.

Caregiver Protective Capacities:
Adaptive, history of protecting, recognizes child’s basic needs, resilient; plan and articulates plan; tolerant, love/empathy, attached; supportive;

Notes
Practice: Assessment and Scaling of CPC’s

- Small Groups of 4;
- Case Scenario:
  - Practice engaging “parent” in assessment regarding parenting general;
  - Analyze information to determine CPC’s and Scaling of CPC.
**Instructions for Identifying CPC’s**

**Purpose:**

The purpose of this exercise is to provide a practice opportunity that allows participants to practice assessing and scaling caregiver protective capacities in relation to information collection.

**Materials Needed:**
- Caregiver Protective Capacity Reference Guide
- Danger Threat Reference Guide
- Parenting General: Croft Case Study

**Instructions:**

1. Working within your groups, you will review the maltreatment, child functioning, and parenting general domains of the ongoing family functioning assessment.
2. Following the group review of the parenting general domain for the Croft Family, the group will conduct two interviews-(1) with Amy Croft and (2) with Blake Thomas.
3. The focus of the interview will be to gather information regarding their parenting in relation to their caregiver protective capacities utilizing our engagement and observation skills.
4. Each interviewee is able to take creative liberties in the practice exercise; however, those liberties should be within reason and based upon the information that was provided in the adult and parenting general domains.
5. Following each interview, the group will record the information obtained through the interview using the worksheet.
6. Following the conclusion of both interviews, groups will review their information and determine the scaling of the identified caregiver protective capacities.

**NOTE:** These are practice interviews in a controlled setting. It should not and is not the expectation that you will obtain all the necessary information to complete all the caregiver protective capacities for either parent. However, as you learn more information regarding the family, you may find that some of your previous CPC scales may change.
Assessing Caregiver Protective Capacities: Parenting General
Group Worksheet

Parenting General Interview with Amy Croft

Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Parenting General Interview with Blake Thomas

Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Parenting Discipline and Caregiver Protective Capacities

Parenting Discipline/Behavior Management
Approaches used by the parent and under what circumstances.

Impending Danger Threats:
- Not meeting basic and essential needs;
- Threatening to seriously harm the child or fearful they will cause serious harm;
- Views child and/or acts toward child in extremely negative ways and such behavior has or will result in serious harm.

Caregiver Protective Capacities:
- Adaptive, history of protecting, recognizes child’s basic needs, resilient; plan and articulates plan; tolerant, love/empathy, attached; supportive.
Practice: Assessment and Scaling of CPC’s

- Small Groups of 4;
- Case Scenario:
  - Practice engaging “parent” in assessment regarding parenting: discipline/behavior management;
  - Analyze information to determine CPC’s and Scaling of CPC.

Notes
Instructions for Identifying CPC’s

Purpose:

The purpose of this exercise is to provide a practice opportunity that allows participants to practice assessing and scaling caregiver protective capacities in relation to information collection.

Materials Needed:
- Caregiver Protective Capacity Reference Guide
- Danger Threat Reference Guide
- Parenting Discipline: Croft Case Study

Instructions:

1. Working within your groups, you will review the maltreatment, child functioning, and parenting discipline domains of the ongoing family functioning assessment.
2. Following the group review of the parenting general domain for the Croft Family, the group will conduct two interviews—(1) with Amy Croft and (2) with Blake Thomas.
3. The focus of the interview will be to gather information regarding their parenting in relation to their caregiver protective capacities utilizing our engagement and observation skills.
4. Each interviewee is able to take creative liberties in the practice exercise; however, those liberties should be within reason and based upon the information that was provided in the adult and parenting general domains.
5. Following each interview, the group will record the information obtained through the interview using the worksheet.
6. Following the conclusion of both interviews, groups will review their information and determine the scaling of the identified caregiver protective capacities.

NOTE: These are practice interviews in a controlled setting. It should not and is not the expectation that you will obtain all the necessary information to complete all the caregiver protective capacities for either parent. However, as you learn more information regarding the family, you may find that some of your previous CPC scales may change.
Assessing Caregiver Protective Capacities: Parenting Discipline/Behavior Management
Group Worksheet

Parenting Discipline/Behavior Management Interview with Amy Croft
Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Parenting Discipline/Behavior Management Interview with Blake Thomas

Information Gathered

Identified Caregiver Protective Capacity Based Upon Information Collection and Scaling
Session 6

Case Application Practice
Practice: Applying Concepts to Our Practice

- Using the OFFA brought to training:
  - Identify danger threats and related CPC’s;
  - Consider information known about the Family;
  - Review and revise if necessary and/or complete the CPC scaling based upon information known;
  - Identify what information is missing and strategies for obtaining the information (interview with collateral, observation, etc.)
Instructions for Assessing and Scaling Caregiver Protective Capacities

Purpose:

The purpose of this exercise is to provide a practice opportunity that allows participants to practice assessing and scaling caregiver protective capacities based upon information collection.

Materials Needed:
- Caregiver Protective Capacity Reference Guide
- Danger Threat Reference Guide
- Ongoing Family Functioning Assessment: Assigned Family
- Exercise Worksheet-Located in the PG.

Instructions:
1. Working within your pairs, you will review both of the Ongoing Family Functioning Assessments brought to training.
2. The worksheet aims to capture both CPC’s that are supported and those that you feel you still need information to make a scaling determination.
3. During the exercise you should identify a minimum of one CPC that is supported and one CPC that is not supported and the focus of information collection to complete the scaling.
   a. Consider both parents and/or caregivers in the household if applicable.
4. Begin with reviewing one and when the pair has concluded the exercise worksheet for the first case, proceed to complete the second case.
   a. The group will need to identify a reporter for the large group report out.
Caregiver Protective Capacity Assessment and Scaling Worksheet

When reviewing the Ongoing Family Functioning Assessment, each participant should be considering:
- Information that supports the identified impending danger threats;
- Information that supports the identified caregiver protective capacities;
- Relationship between the CPC’s and the danger threats and relationship between CPC’s.

**Example:**

<table>
<thead>
<tr>
<th>Caregiver Protective Capacity</th>
<th>Information to Support Scaling OR Information needed to Complete CPC Scaling</th>
<th>Scaling of CPC</th>
<th>New Scaling Decision</th>
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<tr>
<td>Not taking action.</td>
<td>Mom has been leaving the children with various caregivers, not returning for days, and sometimes has been gone for a week. Mom lacks the energy in the morning to get out of bed and has been avoiding the interaction with her child. Mom feels disconnected from the child, which increases her feeling of isolating from the child.</td>
<td>C</td>
<td>Yes- previous rating was a D rating</td>
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<td>Aligned with child</td>
<td>Mom struggled to talk about her relationship with the child, and whenever it was raised, she appeared to avoid the relationship. Need to identify with mom how she feels in regards to being aligned with the child. Could also ask the child about if she feels supported by mom.</td>
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<td>Parent:</td>
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<td>Caregiver Protective Capacity</td>
<td>Information to Support Scaling or Information Needed (Include Plan)</td>
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<td>New Scaling Decision</td>
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Post Training Knowledge Assessment

- Inform training and development;
- Provide feedback to trainer;
- Measure change.