Creating an Immediate Protective Plan

Introduction

Strategies for managing threats to child safety exist in two forms: an immediate protective plan and the formal continuing safety plan. This article considers the immediate protective plan. An immediate protective plan is established when present danger exists. Typically, present danger is recognized at the initial contact with a family. When present danger is identified, other CPS intervention activities, such as continuing the initial assessment, should be put on hold so that the immediate protective plan can be established. Once present danger is identified, it is CPS’ responsibility to assure that children are safe while intervention continues.

An Immediate Protective Plan is Different than THE Safety Plan

An immediate protective plan is an instantaneous (same day), short term, sufficient strategy that provides a child responsible adult supervision and care to allow for the completion of the initial assessment or investigation. Usually immediate protective plans are formed as a part of the initial contact with a family. Immediate protective plans may also become necessary as an initial assessment or investigation proceeds. Upon occasion, an immediate protective plan may be created in ongoing CPS as a result of some present danger suddenly occurring. We refer to this focused, controlling intervention as the immediate protective plan because of 1) its particular purpose is to put on hold what is going on long enough to support continuing CPS intervention and 2) in order not to confuse it with the formal, continuing safety plan which is established once a fuller understanding of the family exists. More reasonably, the formal safety plan occurs during or at the conclusion of the initial assessment after sufficient family information is gathered and analyzed. The formal safety plan, normally documented on a form that identifies impending danger threats, safety services
and providers, is established to manage threats while remedial CPS is implemented. The most significant difference between these two plans is that a safety plan is based on full information about the family while an immediate protective plan is based on limited first encounter information. The protective plan is tied to the demonstration of threats to child safety that demand immediate action to control them while more information is being gathered.

(Note: Why are these two types of plans needed? You may remember that threats to a child’s safety are manifested in two ways: 1) obvious – as in present danger and 2) insidious – as in impending danger. We need to have a strategy for managing present danger, which is obvious while we learn more about a family. The additional information helps us judge whether impending danger is also an issue. Once we are fully informed about a family through the initial assessment/investigation we are much better prepared to place into effect a formal, continuing safety plan that includes all that is available and needed from the family and the community to assure safety while remedial CPS intervention occurs. Another way to think about this is that immediate protective plans enable the completion of the initial assessment and safety plans enable treatment intervention occurring.)

**Definition of Immediate Protective Plan**

The definition for immediate protective plans provides the criteria for what such plans must do:

- **Immediate**
  - The plan must be capable of being in operation the same day it is created. Before the CPS worker leaves the home, the immediate protective plan must be in motion and confirmed.

- **Short Term**
  - The plan is very specific, tied to particular present danger threats and must control those threats from
the present until sufficient information can be gathered and analyzed to determine the need for a formal continuing safety plan. Immediate protective plans should be sufficient to manage safety until the initial assessment – investigation is complete. There is not an intention for these plans to last beyond the initial assessment. The time frame for the immediate protective plan is tied to the amount of time it will take CPS to gather all the information necessary to understand the issues/conditions that affect safety.

Sufficient

The immediate protective plan must manage present danger threats. You must confirm that it will do so. CPS must verify that selected people are responsible, will be available, are trustworthy and are capable. Additionally, it must be confirmed that parents are willing to cooperate with the protective plan. Although legal action may be necessary to carry out an immediate protective plan, the parents’ ability/willingness to cooperate must still be assessed and confirmed. If the plan includes the child residing outside his or her household, an evaluation of the safety of the environment where the child is to stay must be determined.

Establishing and Implementing Immediate Protective Plans

The following questions provide a guide for considering the establishment of immediate protective plans:

Specifically, what are the threats that you are concerned with? What danger must be controlled?
Is the family network interested in and capable of carrying out a temporary immediate protection plan?

Is there any source within the family network that can serve to reduce the safety concern? (e.g., non-abusing spouse, extended family, etc.) How do you know if they’re willing/able?

What natural resources seem to exist within the family network?

What do you know about these resources (people)? How can you find out?

Do resources and supports seem sufficient and available to address the threats to safety during the next few hours and days?

What are the caregivers’ and family’s likely responses to my concerns?

How do you deal with the caregivers and the situation?

Does a crisis exist? Are the threats associated with a crisis?

How is the family responding to the crisis? What meaning does that have for action you must take?

Will an immediate protective plan stimulate a crisis? What are the implications of that?

Is classic crisis intervention needed? What does that involve?

Does the family have immediate needs that must be addressed? (e.g., housing, food, some sort of care). How does that affect your decisions? What can you offer? What actions are necessary by you? By them?
Can an in-home immediate protection plan be established? How will you involve the caregivers/family network? What roles and responsibilities will they have? What roles and responsibilities will be given to others? How independent are others from the family in respect to exerting their protection role?

How do you know the plan will work?

Who else is involved?

What is your role?

- Does the child need a medical evaluation or immediate medical care? Why? How do you communicate this to the parents? How will you carry this out?

- What are the immediate next steps? How will you explain the next steps to the family? How will you know and believe their responses, commitments etc. re the next steps?

- Is legal action necessary to help assure the sufficiency of the protective plan? What steps are necessary to carry this out?

**Immediate Protective Plans**

An immediate protective plan should contain certain elements and documentation in the record should reflect these elements.

The threat to a child safety should be identified and described. This should include the circumstances in which the assessment occurred. Remember, we’ve emphasized that usually the need for immediate protective plans occurs during the initial encounter with a family and usually involve present danger. Therefore,
it is necessary to describe what you observed that resulted in the conclusion for immediate protective action.

We have mentioned that immediate protective plans require caregiver willingness to cooperate. The caregivers’ attitudes and intent should be justified as supportive of the immediate protective plan. This does not mean the caregivers agree there is a need for an immediate protective plan only that they agree for one to be established and not to interfere with its implementation.

Often little is known about the caregivers at the initial family encounter. Therefore, it is common for immediate protective plans to involve some one other than the caregivers as the responsible person for protection. Identify the name(s) of the responsible/protective adult(s); their address; phone; and how they can be reached. Consider and explain the person(s) relationship to family. Provide a full description of how you’ve determined their suitability of the person to assure protection (e.g. trustworthiness, reliability, commitment, availability). It is important to explain how you confirmed the person’s suitability.

It is critical that the immediate protective plan be described in detail (e.g., how it will work; specific provisions; time frames; activities; child location; caregiver access.)

Your immediate protection plan must have a communication plan and oversight. This includes who is to be called/informed; who initiated contact; when contact will be made; circumstances for communication; form of communication; etc.

It is important for you to have clear in your own mind why your immediate protective plan is needed, how it works and why it will work to assure children are safe while you or others proceed with the initial assessment. That rationale that confirms the feasibility of the plan working should be written in the record.
Immediate protective plans have been referred to as *instantaneous plans*, meaning they are plans that are set up and are in operation within the same day that present danger is observed. The work that occurs during that same day involves:

- considering options for an immediate protective plan;
- assessing caregivers’ willingness to agree to an immediate protective plan;
- contacting and arranging for family network members or others to take responsibility;
- assessing the suitability of prospective protective adults;
- confirming of the plan;
- figuring out logistics (e.g., timing; transportation; child’s belongings; school next day; and so forth);
- consulting with your supervisor throughout; and
- enacting the plan.

Documenting the immediate protective plan cannot be a priority during the day that it is being put in place. Documenting the plan can occur the next day or very soon thereafter.