

# **Supervising the Safety Intervention Process**

## **Introduction**

Last month the safety intervention article provided a detailed description of the step-by-step process for implementing safety intervention. That feature emphasized what CPS workers should do, when they should act and why they should intervene at certain times in certain ways. This month we begin a two part series to look at what supervisors should be thinking and doing to correspond with worker safety intervention occurring throughout the “front end” of CPS.

There is a legal concept that says (in rough terms) “let the superior respond.” A related common idea is “the buck stops here.” Within these two similar notions is the principle that governs CPS supervision. That principle indicates that the supervisor is ultimately accountable for what workers do. For the purposes of this article, the point of emphasis is that the supervisor is the person who is ultimately responsible for actions and decisions occurring as a part of safety intervention. We state this point of view not to create anxiety among those of you in supervisory roles, but to underscore how crucial it is for supervisors to be highly expert in safety intervention; to be appropriately involved in supervising the safety intervention process and to assure that supervisory oversight and approval presides as the basis for safety intervention decision-making.

As we draw to an end of the 2004 safety articles, we will focus attention on the supervisor’s responsibility for safety intervention concerned with the “front end” of the safety intervention process. This month’s article focuses on intake and the initial contact. In December we will consider the supervisor’s responsibilities for safety intervention during and at the conclusion of the initial assessment or investigation.

So, what should supervisors do about safety intervention and helping workers at the intake referral stage and at the point of initial contact with families during an investigation? Let's examine in more detail each of these CPS functions and the associated safety intervention issues as they apply to the supervisory role...

### **Intake – Receipt of the CPS Referral**

CPS response time is the single safety decision that occurs at intake. The objective of safety assessment during the intake referral stage is to determine whether present or impending danger is identified within the report that would indicate the need for an urgent response. While it may be that the decision regarding the immediacy of client contact varies in different agencies, supervisory approval of this safety decision is typically expected. Such approval should be based on:

- A determination that the information contained within the report is sufficient.

Information is sufficient and relevant to the extent that it is related to the standard the agency requires for what must be collected from the reporter, Supervisors must be concerned that additional information collection has occurred if appropriate such as collateral contacts and various record checks and that the information in the report represents an adequate level of effort to collect necessary data for decision-making. This supervisory judgment is based on a logical and realistic calculation of what a reporter could reasonably know about a reported family given the referent's relationship and exposure to identified caregivers and children.

But what is adequate information when it comes to safety assessment during the intake function? Obviously the sheer amount of information contained in reports can vary significantly based on a reporter's knowledge

of a family. Too often, however, important information that might be useful for informing the urgency decision is not gathered because workers are not prompted to probe into potential broader areas of significance associated with general family functioning.

As stated in previous safety articles, there is a standard of information collection that is necessary in order to assess safety. To promote consistency throughout the safety intervention process, it is suggested that the information standard used for safety assessment during the investigation should actually begin to be applied at the point that an intake referral is being completed. In addition to collecting information regarding specific incidence of child abuse and neglect (maltreatment), inquiries should also be made of reporting parties about child functioning, the adult functioning of caregivers and general parenting practices. While it is unlikely that many referral sources will have in-depth information related to caregiver and specific family functioning dynamics, the application of this standard for information collection during intake establishes the level of rigor necessary for making confident safety decisions. Better information results in better agency decisions related to urgency.

- A conclusion that the identification of present and/or impending danger is adequately supported by the information collected and documented within the report.

As you may recall from previous safety articles, present danger are safety threats that more transparent and vivid and are occurring or are “actively” threatening a child’s safety at the present moment that a report is being made.

Examples of present danger threats that are frequently identified in reports include: serious injuries, multiple injuries, unexplained injuries, children unsupervised at the point the referral is being made, child in need of immediate medical attention, a caregiver that is actively behaving in dangerous and/or bizarre ways, a caregiver who's functioning is currently severely impaired due to substances and cannot assure basic needs, a child that is extremely fearful and there is an indication in the report that the alleged maltreater will have access to the child, etc.

Impending danger is not an easily identified because this threat tends to be more insidious. Impending danger may not be immediately apparent. Impending danger becomes apparent as a result of gathering sufficient family data related to broader family functioning. Here's a quick definitional review: *impending danger represents negative caregiver emotions, behaviors, temperament, perceptions, etc. that are viewed to be out of control and may have severe implications for a vulnerable child.*

Generally, when safety threats are identified during the intake function the threats are more likely to be present danger verses impending danger. Again, the ability to undercover impending danger during the intake is heavily dependent on the information standard for safety assessment being applied and the reporting party's familiarity with the family being referred.

- An application of a priority response criterion that guides judgments about necessary response time associated with reported behavior and circumstances identified as threatening safety.

The supervisor endorses the response decision as correct; assures that the response occurs according to the decision; and assures that the worker is prepared for the initial intervention.

## **The Initial Contact with the Family**

As discussed in the previous section of the article, prompt responses on an initial contact are usually associated with present or impending danger that has been identified in the CPS report.

Supervisors must provide three kinds of consultation and support related to an initial contact: 1) worker preparation; 2) preparation for the intervention; and 3) crisis resolution during an initial contact. When either present or impending danger has been identified in a report, the supervisor should always attempt to meet with the worker who has been assigned an initial assessment requiring a prompt response. Responsive consultative supervision with urgent case assignments, prior to making contact with the family, will help to assure issues associated with child safety are addressed to in an effective manner. Preparing staff for next steps and processing contingency plans in the event that a child is determined to be unsafe at the point of initial contact can increase the chances for a less intrusive response to safety intervention by the agency or at least a smoother and proactive intervention.

Let's consider the supervisory responsibility for worker preparation in more detail.

### *Worker Preparation*

Time should be spent with workers in preparing for initial contact for all initial assessments whether an urgent response is indicated or not; whether safety has been raised as a possible issue or not. However, for our purposes here let's just think about supervision related to initial contacts involving safety issues.

Key issues concerned with worker preparation include:

- Does the worker understand the challenges of the first contact as represented in the reported information?
- Does the worker understand the nature and occurrence of family circumstances that represent a threat to child safety?
- Does the worker have a strategy for approaching the initial contact? Checking out safety threats? Collecting information? Contending with potential intervention hazards?
- Does the worker consider anticipatory action if present or impending danger is confirmed?
- Is the worker prepared emotionally for the contact?

#### *Preparation for Intervention*

Supervisors can assist workers with specific arrangements that support the initial contact when safety is an issue. Certainly supervisors will want to consider whether there are any indications of danger to a worker. That consideration should include looking at options for worker protection, access to others, communication and cues for taking leave of the intervention.

Preparation for intervention that a supervisor can assist a worker in exploring includes the actual or potential involvement of others in the intervention.

- The decisions to involve law enforcement because of worker safety; specific joint agreements; possible criminal behavior; or to assist in child protection should be explored and supported by the supervisor.
- The supervisor should consult with the worker about the wisdom of identifying resources to support the intervention if needed such as transportation; back up staff support; prospective protection resources; and readiness for people to stand by to lend specific help if needed.

### *Crisis Resolution during Initial Contact*

The most important supervisory responsibility occurring during the initial contact is to consult with the worker about what is occurring immediately in the family associated with threats to child safety. The following are some critical questions to consider when consulting with a worker who believes that immediate action needs to be taken to protect a child:

1. What has been the process and nature of CPS intervention thus far? This may include a brief discussion regarding who has been interviewed and/or observed from the family as well as perceptions and reactions from collaterals or other professionals involved with the initial intervention.
2. How does the worker articulate why it is that she/ he believes that there are threats to safety? Here it is important for a supervisor to consider whether the worker's professional judgment that safety threats exist is consistent with how the supervisor conceptually understands what constitutes safety vs. risk.
3. What does the worker believe is the correct course of action to assure child protection; and why? Supervisory consultation should reveal what options the worker, has explored with the family that would allow for a least intrusive immediate protective action.

Taking protective action during an initial assessment occurs in the field in a highly active manner. The objective is to assure that a child is protected immediately following the identification of present danger. A supervisor may often have a fundamental role in assuring that protective action alternatives are considered that would prevent the need to for placement.

Along these same lines, a supervisory can assist staff in helping a family in crisis by stimulating some ideas about what can immediately be done to assure that a child is protected, while allowing for the investigation/assessment to proceed.

The decisions and actions taken in the field become “official” when the worker documents the intervention in the record according to agency requirements. Officially recording the safety intervention taken during an initial assessment should occur as quickly as possible, which typically means the day following the initial contact. It is a supervisory duty to 1) assure that the record is completed and 2) approve of the documentation that justifies decisions and actions taken.

#### *Context for Supervisor Consultation during Initial Contact*

Consultation at the point of initial contact must occur “during the heat” of what’s going on in the home at the time. It occurs some times when workers, pressed by stress and confrontation and the need for an immediate decision, remove themselves from family members or the house and call for supervisory guidance. The supervisor should act with wisdom and expertise to sort out the effectiveness of the intervention, information collection and decisions. The supervisor should skillfully interact and communicate with the worker to produce a supportive yet critical thinking process. Supervisors must accept the challenge to be responsive to the crisis situation but in ways that calm and reassure the worker and slow things enough to make sure that intervention and decisions are correct. Before the worker or other CPS staff act, the supervisor approves of the decisions and approach to intervention and protective action.

Supervisor access and availability is crucial when helping to assure safety intervention effectiveness at the point of initial contact. Workers will often need supervisory backup and support once they are in the field and encountering a child protection crisis. The need to consultant and process information when

there are high stake decisions that affect children, caregivers and CPS should be viewed and accepted as necessary for achieving best practice. When workers are dispatched on initial assessment involving possible threats to child safety, supervisors should regulate their access and availability to accommodate this consultative responsibility. Supervisors should be immediately ready to respond with specific directions, suggested alternatives and generation of resources and responses to enable the worker to carry out his or her protective actions immediately. While most supervisory consultation and assistance under these circumstances can occur successfully by telephone, supervisors should be sufficiently flexible to travel to work directly with the worker or to mobilize other staff to act in support of the intervention. Workers benefit most from tangible help that can be done from the office while they are handling things in the field. Such help might include checking records; beginning verification of the suitability of potential kin placements; initiating the search for a foster home; setting up emergency placement provisions and so on.

### *Policy and Documentation*

Supervisors are the regulators of agency requirements.

During safety intervention that occurs at the point of initial contact, the supervisor must guarantee that policy and procedure are followed. Standards, decision making criteria and expected practice form the source for overseeing what workers are doing and how they are doing it. Supervisors are best when they are routinely considering whether policy and procedure are being followed as the intervention is occurring and once again when they look retrospectively at the application of policy and procedure after the intervention has occurred.

Next Month We Look at Supervision Related to the Investigation (or Initial Assessment)