

Parental Protective Capacities and Protective Planning Webinar Transcript



Hello, and thank you for joining us for this webinar on parental protective capacities and protective planning. This is the third webinar in the series of Protective Planning webinars as part of the Statewide Protective Planning Initiative.



As you know, the purpose of the child welfare system is to keep children safe and to support families to provide safe, permanent, and nurturing homes for their children. There are multiple values and principles named in the child welfare model for practice. These values and principles are interconnected and work together as an ever moving, ever evolving framework. The current model designates trust, respect, engagement, accountability, trauma informed practices, culturally responsible, workforce support, and family-centered as the values and principles of the child welfare system. Each principle and value is intertwined and work together to promote a proficient child welfare system.



Today we will discuss Parental Protective Capacities and how it relates to Protective Planning. Before we can discuss how protective capacities are relevant to protective planning, we first need to understand how parental protective capacities are essential to determining if there is an unsafe child.

Understanding Parental Protective Capacities

The definition of unsafe is:

"the presence of present or impending danger to a child and insufficient parent or caregiver protective capacities to assure that a child is protected" (Access & IA Standards, Glossary)

- ✓ Present or Impending Danger Threats
- AND
- ✓ Insufficient Parent or Caregiver Protective Capacities

The Safety Intervention Standards defines unsafe as "the presence of present or impending danger to a child and insufficient parent or caregiver protective capacities to assure that a child is protected".

You will notice that the definition includes two variables:

Present or Impending Danger and Insufficient parent or caregiver protective capacities.

An unsafe child requires the presence of both variables.



Too Early To Tell?

Is it too early to assess a parents protective capacities at the initial contact?

No

- It is never too early to assess for parental protective capacities
- Must assess to determine if a child is unsafe
- Assessment of protective capacities may change over the life of a case
- Protective capacities are assessed at the initial contact with the information you have

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Many of you might be thinking, isn't it too early to assess for parental protective capacities at initial contact? Well the answer to that is no.

It is never too early to assess for parental protective capacities, in fact, as we learned in the previous slide, you cannot assess if a child is unsafe without assessing for protective capacities. Your assessment of protective capacities may change as you gather your initial assessment information throughout the 60 days and learn more about a parent's protective capacities.

At the initial contact most times you will not have as much information as you will later in the life of a case. However at this contact, you must assess for present danger threats and part of the assessment of Present Danger is utilizing the information you have at that moment to assess parent's protective capacities.

In the next few slides we will discuss parental protective capacities as it specifically relates to present danger threats and protective planning at the initial contact with families.

Present Danger at Initial Contact

Assessment of Present Danger

- Immediate
- Significant
- Observable
- Occurring or In Process of Occurring



Standardized List of Threats

- Not a check list (the standardized list can be downloaded from this webinar's documents and can also be found in the Safety Intervention Standards, Safety Appendix 7)
- Common language for describing danger
- Gives a standard for judging danger
- Identification of specific threats drives intervention-Protective Planning is focused on controlling for the specific threats

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At the initial contact with families, you are assessing for present danger by determining if there are behaviors or conditions present that are: Immediate, Significant, Observable and Occurring or in the Process of Occurring.


While considering if there are behaviors or conditions that meet the variables named, you are also determining what, if any, Present Danger Threats exist at this moment in time. The standardized list of Present Danger Threats is not a check list, but is an assessment tool to utilize that will give CPS workers a common language and standard for talking about and judging danger. You can find this list in the Safety Intervention Standards, Safety Appendix 7 and you can download it from the documents section of this webinar.

Similar to Impending Danger Threats and Safety planning, this standardized list of Present Danger Threats drives intervention, such as what threats need to be controlled for in a Protective Plan.

**Parental Protective Capacities
at Initial Contact**

Once you determine that Present Danger Threats exist you must then judge whether a parent/caregiver **can, will and/or is** protecting the child. This is the assessment of parental protective capacities.

- ✓ Not a casual judgement
- ✓ Can the parent/caregiver control the threats?
 - If yes, then you do not have an unsafe child.
 - If no, then you have an unsafe child and a protective plan is needed
- ✓ If you are unsure if the parent/caregiver can protect the child, you must evaluate the extent of which they can be involved when protective planning

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Once you determine that Present Danger Threats exist, you must then judge whether the parents or caregiver can, will and is protecting the child. This is the assessment of parental protective capacities.

This not a casual judgement. There must be significant consideration given to whether the parent or caregiver can protect the child.

If you determine that the parent or caregiver is protective, then you do not need a protective plan as the child is not unsafe. As we discussed earlier, in order for a child to be unsafe you must have present or impending danger and insufficient protective capacities.

If you are unsure if a parent can and will protect the child, then you must evaluate on what level and to what extent the parent can be involved when protective planning.

Parental Protective Capacities

Definition:

Personal and parenting behavioral, cognitive, and emotional characteristics that can specifically and directly be associated with a person being protective of his or her child. A protective capacity is a specific quality that can be observed, understood and demonstrated as a part of the way a parent thinks, feels, and acts that makes her or him protective. (Safety Intervention Standards, 2016, Glossary)

Key Words to Pay attention to:

- Behavioral, cognitive, emotional characteristics
- Directly associated
- Specific quality
- Observed, understood and demonstrated



As mentioned earlier, generally you do not have enough information to conduct a thorough assessment of parental protective capacities at the initial contact, however it must be considered in determining if the child is unsafe. Let's look at the definition of protective capacities found in the Safety Intervention Standards.

It states that parental protective capacities are personal and parenting behavioral, cognitive, and emotional characteristics that can specifically and directly be associated with a person being protective of his or her child. A protective capacity is a specific quality that can be observed, understood and demonstrated as a part of the way a parent thinks, feels, and acts that makes her or him protective.

It is important to pay attention to key words and phrases in the definition that helps you conceptualize how to assess for parental protective capacities. These include:

- Behavioral, cognitive, and emotional characteristics
- Directly associated
- Specific quality
- Observed, understood and demonstrated

Protective capacities are not general strengths a parent or caregiver possesses, they are specific qualities that can be observed, and explains how and why a parent thinks, feels and acts that make him or her protective.

Parental Protective Capacities at Initial Contact

What are we looking for?

- Actions the parents took, specific to the alleged maltreatment
 - Response/Reaction
 - What did they demonstrate?
 - Can/will the parent continue to protect?
- Inactions of the parent

Can you articulate what you observed in order to make an assessment of safety?

- Staffing with Supervisor
- Protective Plan/Safety Plan
- Initial Assessment
- Court

So what should we be looking for at the initial contact to help assess protective capacities? When meeting with the family at the initial contact workers should not only gather information regarding the reported allegations, but must also be looking for:

- The actions the parents took specific to the alleged maltreatment, which includes their response and reaction, what they demonstrated not only in the contact with you but also with their child
- Any inactions on part of the parents in response to the alleged maltreatment

What do the actions or inactions mean? Will you be able to articulate your assessment of the parent's protective capacities in a staffing with your supervisor, in a protective or safety plan, in your initial assessment or in court?

Application One

Case Example:
6 month old infant has unexplained serious injuries. The infant was cared for by the mother, father and daycare provider the day before the injuries were noted. None of the caregivers are able to explain what happened to the infant. The infant is hospitalized as a result of the injuries.

Present Danger Threats? Yes

- ✓ The child is currently being maltreated at the time of the report or contact
- ✓ The child has unexplained injuries

Sufficient Parental Protective Capacities? Unknown

- ✓ The infant was cared for by three caregivers in the period of time the injuries received
- ✓ The injuries remain unexplained

Protective Plan Needed? Yes

Let's discuss some examples to help us conceptualize what we have discussed thus far. A 6 month old infant has unexplained serious injuries. The infant was cared for by the mother, father and daycare provider the day before the injuries were noted. None of the caregivers know what happened. The infant is hospitalized as a result of the injuries.

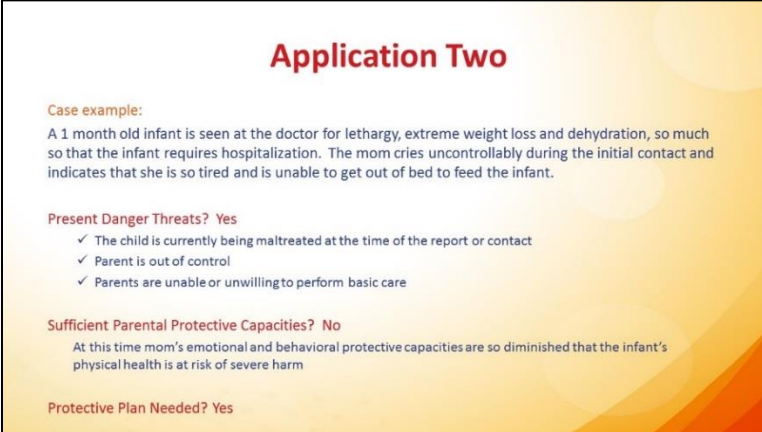
Are there Present Danger Threats? YES.

- The child is currently being maltreated at the time of the report or contact
- The child has unexplained injuries

Are there sufficient Parental Protective Capacities? It's UNKNOWN.

Due to the maltreater being unknown and the injuries continue to be unexplained; the infant remains unsafe as you are not able to determine Parental Protective Capacities. Thus a protective plan must be put in place. Further exploration will continue and includes studying the: child, home situation, the injury event and circumstances, the parenting, and collateral information regarding the parents and caregivers.

As the injuries are unexplained, a protective plan must be put in place at the initial contact; assessing the parent's behavior and reactions and/or inaction surrounding the alleged maltreatment are all factors to consider when assessing protective capacities.



Application Two

Case example:
A 1 month old infant is seen at the doctor for lethargy, extreme weight loss and dehydration, so much so that the infant requires hospitalization. The mom cries uncontrollably during the initial contact and indicates that she is so tired and is unable to get out of bed to feed the infant.

Present Danger Threats? Yes

- ✓ The child is currently being maltreated at the time of the report or contact
- ✓ Parent is out of control
- ✓ Parents are unable or unwilling to perform basic care

Sufficient Parental Protective Capacities? No
At this time mom's emotional and behavioral protective capacities are so diminished that the infant's physical health is at risk of severe harm

Protective Plan Needed? Yes

Let's do another case example.

A 1 month old infant is seen at the doctor for lethargy, extreme weight loss and dehydration, of which requires hospitalization. The mother cries uncontrollably during the initial contact and indicates that she is so tired and is unable to get out of bed to feed the infant.

Are there Present Danger Threats? YES.

- The child is currently being maltreated at the time of the report or contact
- Parent is out of control
- Parents are unable or unwilling to perform basic care

Are there Sufficient Parental Protective Capacities? NO.

At this time mom's emotional and behavioral protective capacities are so diminished that the child's physical health is at risk of severe harm. You know this based on your observation of mom crying uncontrollably and her verbalizing that she is unable to provide the child with his needs. As a result, mom is unable to place her needs above the child's at this time.

Is a protective plan needed? YES.

Protective Capacities on the Protective Plan

Strength's Section

In this section, you would write what you have observed that can be considered a strength of the parent(s)



As we discussed in the first Protective Planning Webinar, the new protective plan form has an area that is meant to briefly discuss areas of strengths that the parents has. Strength can also be seen as parental protective capacities.

Let's use the second case example of the mother who indicated that she is unable to get out of bed to feed her infant. In this circumstance mom saw the infant's physical condition and health deteriorating and took the child to the doctor. This is most certainly considered a strength and is also an emotional and behavioral protective capacity. The strengths are what are built upon throughout the life of a case to enhance parental protective capacities.

As you see, protective capacities are always present. The question you must ask yourself is...are they sufficient to address a specific safety threat or threats?

Protective Capacities on the Protective Plan

Protective Plan			
Case Name / Case # / Case #	Case Number	Date Protective Plan Started	Date of Review
Family Address		Telephone Number	
Children Included in This Protective Plan			
Family / Caregiver AND Other Household Members Included in This Protective Plan			
Family Strengths and Resources			
Mom verbalized being unable to get out of bed, despite this she sought medical care for her child when it became clear something was wrong.			
Description of the Present Danger: Threats identified and how they play out in this family			
How are the identified Present Danger Threats being addressed? (Name each provider, the days per week and hours per day of those providers, the person assigned to care, and any other interventions in this plan)			
Provider Name		Provider's Role	
Address and Telephone Number	When:		
	Where:		

In this example, the strength's and resources section of the protective plan could read:

- ✓ Mom verbalized being unable to get out of bed, despite this she sought medical care for her child when it became clear something was wrong.

You could follow up this strength with any resources the parent may have.

Parental Protective Capacities Throughout CPS Involvement

Relevant documentation of parental protective capacities

- Access
- Initial Assessment
- Safety Analysis
- Ongoing Case Management

We just discussed Parental Protective Capacities in context of protective planning. There are other areas throughout CPS involvement where documentation of a parent's protective capacities is relevant. Those include Access, Initial Assessment, Safety Analysis, and Ongoing Case Management. Let's take a brief look at those areas.

Parental Protective Capacity Documentation in eWiSACWIS

Access

The screenshot displays the eWiSACWIS interface for an 'Access' report. The 'Parental Protective Capacity' section is highlighted with a red arrow. It contains several text entry fields, each with a 'Save' button and a 'Cancel' button. The fields are: 1. 'Cover the presence of domains relevant to the assessment of power and control and entrenchment within the home environment.' 2. 'Consider how the family may respond to intervention by the agency, including the parent's protective capacities.' 3. 'Document the Reporter's motivation and source of information, if possible.' 4. 'Document names and contact information of other people with information regarding the child or family.'

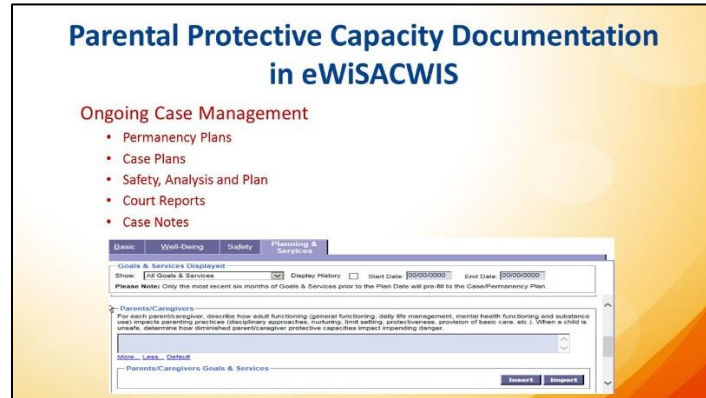
At the point of Access there is a section that prompts the worker to discuss parental protective capacities. This section is found on the first tab of the Access Report and would include information provided by the reporters and any previous history regarding protective capacities of the parent.

Parental Protective Capacity Documentation in eWiSACWIS

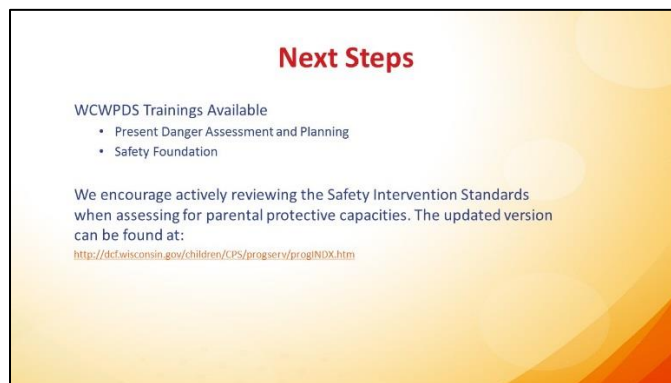
Initial Assessment

The screenshot displays the eWiSACWIS interface for an 'Initial Assessment' report. The 'Parental Protective Capacity' section is highlighted with a red arrow. It contains several text entry fields, each with a 'Save' button and a 'Cancel' button. The fields are: 1. 'Describe the discipline approaches generally used by the parent and the typical context within which they are used.' 2. 'Describe the parent's general parenting practices (including, but not limited to, instilling, protection, provision of basic care, etc.).' 3. 'Describe the family's general functioning, strengths and current stresses. Consider the family's cultural context.'

The Parenting Practices section of an Initial Assessment is where a worker would document a parent's protective capacities. However I would challenge workers to discuss parental protective capacities while documenting safety findings in the initial assessment, as well as when describing the family conditions that support the safety threats identified in the safety analysis and plan, as parental protective capacities directly influences your safety finding.



Throughout ongoing case management, a worker plans around and works to enhance a parent's protective capacity. The Case and Permanency Plan has a safety tab and Planning and Services tab where a parents protective capacities can be documented. In addition, parental protective capacities can be documented in Safety Analysis and Plans, case notes and court reports.



Thank you for joining us today for an overview of parental protective capacities and protective planning. For an in-depth look at parental protective capacities, you can register for trainings through WCWPDS, such as Present Danger Assessment and Planning and Safety Foundation. In addition, we encourage actively reviewing the Safety Intervention Standards when assessing for

Parental Protective Capacities. The updated version can be found at the URL listed on your screen.



Next Steps

As part of the Protective Planning initiative, the Department of Safety and Permanence will be releasing more webinars that relate to protective planning.

Upcoming webinars will be:

- [What We Have Learned \(Review of the first year of protective planning initiative\)](#)

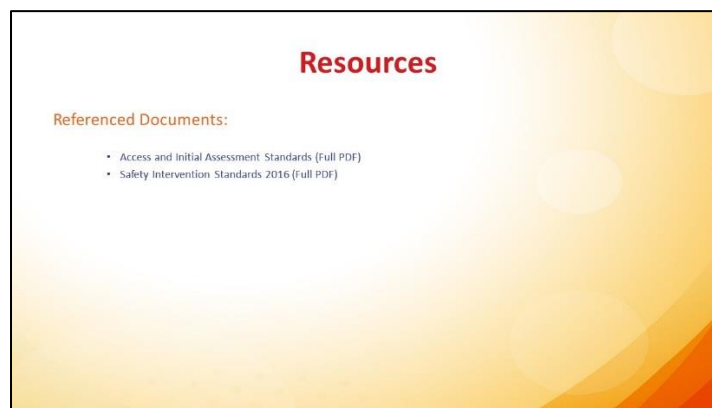
Past webinars:

- [Present Danger Assessments and Plans-Upcoming Release June 2016](#)
- [Child Vulnerability and Protective Planning](#)

You can expect a 4th webinar as part of the Protective Planning Initiative which will review the first year of the protective planning initiative and what we have learned as a result.

The first two webinars are available at the URL's on your screen, and will be added to the DCF website in the future.

As always, thank you for all you do to keep the children of Wisconsin safe.



Resources

Referenced Documents:

- [Access and Initial Assessment Standards \(Full PDF\)](#)
- [Safety Intervention Standards 2016 \(Full PDF\)](#)