

# SAFETY PLANNING

The Governor's Task Force on Child Abuse and Neglect

Eight Module Series


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## Defining a Safety Plan

A safety plan is a plan of specific actions family members and support people are willing and prepared to take in order to prevent or respond to foreseeable safety or risk issues.

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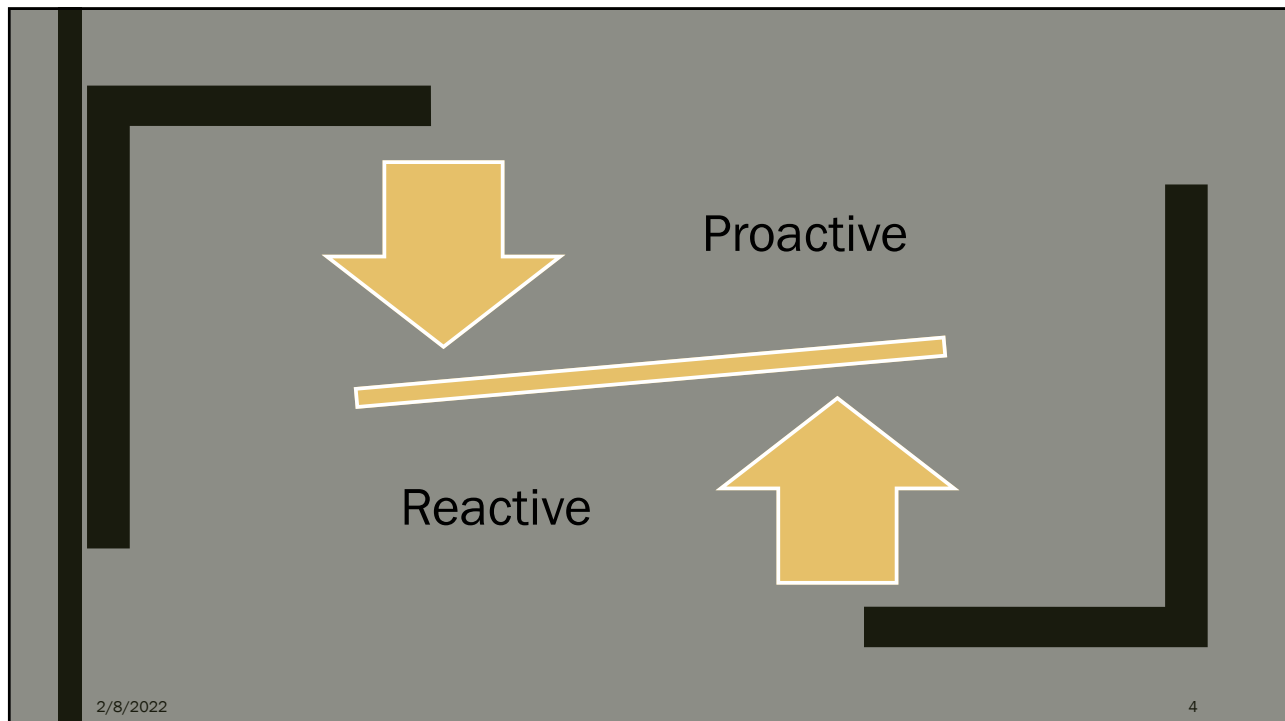


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## MDHHS policy (PSM 713-1) states that safety plans must:

- Include both formal and informal supports and services
- Be developed with input from the family
- Address immediate safety concerns
- Be realistic, achievable, and clearly understood by the family
- Specify roles and expectations of the individuals involved in the plan
- Be modified as situations change and other safety concerns arise
- Build on the strengths of the caregiver

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**Proactive** steps of a safety plan are steps that the family will take to prevent harm from happening.

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**Reactive** steps of a safety plan are steps that the family will do if the problem happens to maintain safety.

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### Examples of safety plans that are not well developed with the family:



- Parents agree not to use physical discipline.
- Parents agree not to fight in front of the children.
- Parents agree not to use substances in front of the children.
- Parents agree to supervise their children 24/7.

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### Common Mistakes:

- Too vague and not specific to the family or situation
- Does not include proactive or reactive steps
- Are not realistic
- Not developed with the family or their input
- They do not address all of the identified safety concerns
- They are not updated as situations change

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For each case, determine what the potential risk factors are. Safety plans should include both proactive and reactive steps to prevent harm from occurring, and describe how to respond if problems that could cause harm do occur.

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## CASE EXAMPLES

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Safety  
Plan

Domestic  
Abuse

Scenario - A domestic violence incident occurred between mom and dad in front of their 7 and 9-year-old children. This is their second DV incident that has occurred between them with dad being identified as the only perpetrator. Dad has a history of DV with previous partners.

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The first step in developing a safety plan is to create proactive steps with mom (without the perpetrator being in the room) due to her being a victim of DV. These are steps mom can take to keep her children safe.

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## Proactive:

Mom agrees to keep a backpack at her mother's house with important documents and items for her and the children in case of an emergency. Mom agrees to keep a whistle in the end table in her bedroom that she can use if her phone cannot be accessed. Mom agrees to call her support system consisting of her mother (555)555-5555 and her best friend (555)555-5555 if support is needed. Mom agrees to avoid all trigger topics with the perpetrator (their arguments revolve around money) when the children present.

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Next, the reactive steps of the safety plan need to be developed with mom. These are steps that mom agrees to take if she does not feel safe and/or a domestic violence incident occurs.

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## Reactive:

Mom agrees to call 911 and/or her support system if she is in danger. Mom agrees that she and the children will stay with her mother if she does not feel they are safe in the home. If mom is not able to access her phone she agrees to utilize the whistle in the end table to call for help. Mom agrees to go to the neighbor's home with the children if her support system is not able to be reached.

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If the perpetrator is willing and cooperative, safety planning can occur with them as well.

Safety planning is also important to do with children (if age appropriate). In this scenario a safety plan can be developed with the children.



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## Proactive steps that could be discussed with the children include:

Review where phones are kept

Quickest point of exit in the home

Discuss people in the neighborhood they know and trust and could ask for assistance from

Discuss who they could call if they needed help

Review what it looks like when mom and dad are upset and about to get into an argument or fight

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## A proactive and reactive safety plan example developed with the children could be:

The children have identified that mom's phone is kept on the kitchen counter or in the living room on the coffee table. The children know that the front door is the quickest point of exit from the home when they are in their bedroom. Their next-door neighbor is someone they know and trust and could walk to if support is needed. The children identified mom and dad yelling and swearing at one another as indicators that an argument is going to escalate to a fight and this causes them to feel unsafe. When mom and dad are arguing or fighting the children agree to leave the room, go to their bedroom, take their siblings with them, and shut the door. The children agree to call grandma (555)555-5555 if they need help or their parents start arguing. The children agree to call 911 if they are scared or someone is being hurt.

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Scenario - Dad has sole custody of his child that is 14 years-old. Dad uses cocaine and keeps it in the family home. The youth reported he saw his dad snort a white substance off the kitchen table a few months ago when he was supposed to be sleeping. The youth denied any concerns with dad's behavior and denied ever seeing something like this before.

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First, proactive steps addressing the safety concerns need to be developed with dad. These steps should include what dad agrees to do to keep him from using substances.

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## Proactive:

Proactive: To prevent substance use dad agrees to utilize alternative coping skills instead of using substances. Dad reported his alternative coping skills consist of calling someone in his support system to talk, playing the drums, and exercise. Dad reported his support system consists of his cousin (555)555-5555 and brother (555)555-5555. If dad would like formal support and services regarding substance use, he is able to utilize service provider (add specific name) for substance abuse treatment (555)555-5555. Dad also reported he will avoid contact with people that trigger him to use.

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Second, reactive steps addressing substance use need to be developed with dad to include what dad agrees to do to keep his child safe if he is going to use substances.

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## Reactive:

Dad agrees to utilize his support system consisting of his brother and cousin to care for his child if he is going to use substances. If dad is going to store any substances inside of the home, he agrees to keep all substances in a locked box away from his child so his child does not have access to any substances.

For this scenario safety planning with the youth regarding his dad's substance use is also appropriate.

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Safety  
Plan

Physical  
Discipline

Scenario - A 16-year-old reported she and her mom got into a fight the night before about her cell phone, and mom slapped her across the face. The youth was observed to have a mark on her face where she reported being slapped by mom. The youth stated this has happened a couple of times before. When mom was asked about the situation she reported she did slap her daughter across the face due to her daughter having an attitude about being grounded from her phone.

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A proactive safety plan should be developed with mom that will describe what she agrees to do to avoid using physical discipline with her daughter.

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## Proactive:

When an argument starts to escalate mom agrees to remain calm and disengage. Mom agrees to create distance between her daughter and herself. Mom agrees to utilize her coping skills she identified as walking away, calling someone in her support system, or going for a drive in her car. Mom identified her mother (555)555-5555 and her best friend (555)555-5555 as her support system. Mom agrees to have a neutral person at the home with her and her daughter if they are going to have a conversation about “hot topics.” Mom agrees to avoid difficult conversations with her daughter until she is calm, “cools down”, and has had time to process the situation. If mom feels like she is going to physically discipline her daughter she agrees to squeeze a stress ball instead. 25

Next, reactive steps of the safety plan should be developed with mom that will describe the steps mom agrees to take to safely and appropriately discipline her daughter if she makes the choice to use physical discipline.

## Reactive:

If the decision to physically discipline is made then objects should not be used and no marks or bruises can be left.

Mom is fully aware that if marks or bruises are left as a result of physical discipline then that is considered physical abuse.

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Safety  
Plan

Sexual  
Abuse

• Scenario - A 10-year-old female child disclosed that mom's boyfriend has been touching her privates after mom goes to sleep at night. There are no other known details regarding the incidents. Mom's boyfriend stays in the home and helps provide care for the child when mom is at work at night.

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The goal of the proactive steps in the safety plan regarding this scenario would be to immediately protect the victim from the alleged perpetrator so an investigation can be conducted.

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## Proactive:

Mom's boyfriend agrees to leave the home and stay at his mother's home during the investigation. Mom agrees to not have her boyfriend in the home and around her child.

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The reactive steps should include what mom agrees to do to keep her child safe if her boyfriend does come to the home.

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## Reactive:

If mom's boyfriend does come to the home while the child is there, mom agrees to ask her boyfriend to leave the home and not facilitate contact of any kind between her boyfriend and her daughter. Mom agrees to contact her best friend (555)555-5555 and her sister (555)555-5555 if she needs any additional support or assistance.

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Safety  
Plan

Sexual  
Abuse (Pt.  
II)

Scenario - A 15-year-old male youth disclosed that mom has been performing oral sex on him for the last couple of years. The youth disclosed to dad that mom was performing oral sex on him, and dad did not do anything. Mom and dad reside in the same home with their child.

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Since this scenario alleges that both mom and dad are perpetrators, one way to immediately ensure the child is safe would be to safety plan the child out of the home while the investigation is being conducted.

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## Proactive:

Mom and dad both agree to allow their child to stay with grandma during the investigation. If grandma needs any assistance caring for the child, then she will reach out to the aunt (555)555-5555 and adult sister (555)555-5555 to ask for assistance.

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The reactive steps regarding this safety plan should describe how contact with the parents can safely occur if it must occur.

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# Reactive:

If there is going to be contact between mom, dad, and the child then grandma, mom, and dad agree that all contact must be supervised. They agree that there cannot be unsupervised contact for any reason or any length of time.

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**TEMPORARY VOLUNTARY ARRANGEMENT**  
Michigan Department of Health and Human Services

MDHHS believes that parents and families have the right and ability to make decisions that are best for their children and families, even during crisis. It is the role of child welfare services to support families in whatever way helpful to promote safety and prevent family separation. Caseworkers may not restrict a parent's physical custody of their child without a court order. Parents always retain full legal responsibility, including decision-making, physical care, and access to their child during this arrangement. Caseworkers must not direct the parent as to what the arrangement should be, and may not limit or direct the physical access of the parent to their child or the child to their parent(s).

Parent's/Parents' Name(s) has arranged for Child's/Children's Name(s)

to stay with Caregiver's/Caregivers' Name(s) at Caregiver's address

until [Date] Or until the parent decides to discontinue this arrangement.

This is a voluntary, not legal, safety arrangement initiated by the parent(s) and the parent(s) may discontinue or change it any time. The parent should contact the caseworker prior to discontinuing or changing the arrangement. The caseworker will help parents keep their children safe by providing the family with help accessing and locating any needed goods and services and providing referrals to prevention and support services.

Parent(s) Signature	Date
CPS Worker Name and Contact Information	

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.

MDHHS-5433 (Rev. 6-21) Previous edition obsolete.

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