
BE 'SMART' WHEN DRAFTING CONDITIONS FOR RETURN

Kristen Wetzel
Legal Advisor
Children's Court Improvement Program

Where did the Tailored Dispositional Orders Project come from?

CFSR

The 2018 Child and Family Services Review (CFSR) involved a full review of the state child welfare system by the Children's Bureau looking at 65 cases in Barron, Brown, and Milwaukee counties.

CFSR Report

The Children's Bureau sent Wisconsin a final report in September 2018 detailing areas that need improvement.

PIP

The Program Improvement Plan (PIP) is a two-year plan in response to the CFSR findings.

Tailored Dispositional Orders Project

DCF and CCIP jointly decided to include the Tailored Dispositional Orders Project as a strategy within the PIP by piloting the project in three counties (innovation zones).

GOALS OF THE PROJECT

1

Tailor the Conditions for Return to meet the needs of the individual parents

3

Improve the percentage of cases resulting in reunification

2

Improve the timeliness of achieving permanency, namely reunification

4

Increase parent/family participation and engagement

Considerations for Selecting 3 Counties



Number of CHIPS cases opened in 2018 & 2019



Number of WICWA cases in 2018 & 2019



Legal, Judicial, and County Agency leadership/interest



Other initiatives or pilots in place



Whether the county received the Child Safety Decision-Making training



Permanency outcomes



Percentage of cases resulting in reunification compared to the statewide average



Percentage of reunifications within 12 months of removal compared to the statewide average

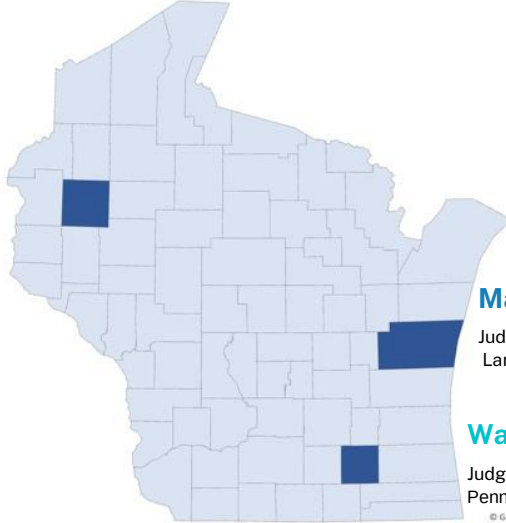


Number of days to reunification compared to statewide average

Pilot Counties / Innovation Zones

Barron

Judge James Babler
Karla Broten - Youth and Families
Program Manager



Manitowoc

Judge Jerilyn Dietz
Lane Kinzel - CFS Unit Supervisor

Waukesha

Judge Maria S. Lazar
Penny Nevicosi - Child & Family Division Manager

Tailored Dispositional Orders Pilot Project Timeline

CHILD SAFETY
DECISION-
MAKING AND
TAILORED
DISPOSITIONAL
ORDERS
TRAINING

FACILITATED
DISCUSSION
WITH LEAD
TEAM

ENGAGING
FAMILIES
TRAINING

WEBINAR:
PARENT WITH
LIVED
EXPERIENCE

CCIP and DCF reviewed
Conditions for Return from over
25 counties to understand Wisconsin's
current landscape and found:

1

Most counties have a standardized list of conditions that are boilerplate.

2

Most conditions are service-orientated and not behaviorally focused.

3

Conditions are written in a checklist format.

4

Conditions were either a lengthy paragraph or split up into many bullet points under each condition.

LINKING SAFETY TO CONDITIONS FOR RETURN

IMPENDING DANGER THREAT

Impending danger threats identified within the 60 day Initial Assessment should be written into a Condition for Return



CONDITIONS FOR RETURN

Conditions for Return should be behavioral changes that must occur for the child to be safely returned to the home

ASSESSING CHILD SAFETY TO DETERMINE IF THERE IS AN UNSAFE CHILD

PRESENT / IMPENDING DANGER

Danger that is either occurring or will occur in the near future.

VULNERABLE CHILD

A child is vulnerable when they lack the capacity to self-protect.

INSUFFICIENT PARENTAL PROTECTIVE CAPACITIES

How does the parent think, act, and feel towards the child?

BENCHMARK B1

Present Danger Threats

An immediate, significant and clearly observable family condition that is actively occurring or "in process" of occurring at the point of contact with a family and will likely result in severe harm to a child.

Present Danger Threats – Maltreatment

The child is currently being maltreated at the time of the report or contact
The child is being maltreated at the time the report is being made, maltreatment has occurred the same day as the contact, or maltreatment is in process at the time of contact.

Severe to extreme maltreatment of the child is suspected, observed, or confirmed
This includes severe or extreme forms of maltreatment and can include severe injuries, serious unmet health needs, cruel treatment, and psychological torture.

The child has multiple or different kinds of injuries
This generally refers to different kinds of injuries, such as bruising and burns, but it is acceptable to consider one type of injury on different parts of the body.

The child has injuries to the face or head
This includes physical injury to the face or head of the child alleged to be the result of maltreatment.

The child has unexplained injuries
This refers to a serious injury which parents/caregivers and others cannot or will not explain. It includes circumstances where the injury is known to be non-accidental and maltreatment is unknown.

The maltreatment demonstrates bizarre cruelty
This includes such things as locking up children, torture, extreme emotional abuse, etc.

The maltreatment of several victims is suspected, observed, or confirmed
This refers to the identification of more than one child currently being maltreated by the same caregiver.

The maltreatment appears premeditated
The maltreatment appears to be the result of a deliberate, preconceived plan or intent.

Dangerous (life threatening) living arrangements are present
This is based on specific information indicating that a child's living situation is an immediate threat to his/her safety. This includes serious health and safety circumstances such as unsafe buildings, serious fire hazards, accessible weapons, unsafe heating or wiring, etc.

Present Danger Threats – Child

Parent's viewpoint of child is bizarre
This refers to an extreme viewpoint that could be dangerous for the child, not just a negative attitude toward the child. The parent's perception or viewpoint toward the child is so skewed and distorted that it poses an immediate danger to that child.

Child is unsupervised and unable to care for self
This applies if the child is without care. This includes circumstances where an older child is left to supervise younger children and is incapable of doing so.

Child needs medical attention
This applies to a child of any age. To be a present danger threat of harm, the medical care required must be significant enough that its absence could seriously affect the child's health and well-being. Lack of routine medical care is not a present danger threat.

The child is profoundly fearful of the home situation or people within the home

"Home situation" includes specific family members and/or other conditions in the living arrangement. "People within the home" refers to those who either live in the home or frequent the home so often that a child routinely and reasonably expects that the person may be there or show up.

The child's fear must be obvious, extreme, and related to some perceived danger that the child feels or experiences. This threat can also be present for a child who does not verbally express fear but their behavior and emotion clearly and vividly demonstrate fear.

The American Bar Association created Child Safety Decision-Making benchmark cards to educate our judicial and legal partners about safety.

BENCHMARK B2

Impending Danger Threats

A foreseeable state of danger in which a family behavior, attitude, motive, emotion or situation that can be anticipated to have severe effects on a child at any time in the near future and requires safety intervention.

- Specific and Observable
 - Imminent
 - Out-of-control
 - Severe consequences
- No adult in the home will perform parental duties and responsibilities.
 - One or both parents/caregivers are violent.
 - One or both parents/caregivers' behavior is dangerously impulsive or they will not/cannot control their behavior.
 - One or both parents/caregivers have extremely negative perceptions of the child.
 - Family does not have or use resources necessary to assure the child's basic needs.
 - One or both parents/caregivers fear they will maltreat the child and/or request placement.
 - One or both parents/caregivers lack parenting knowledge, skills or motivation necessary to assure the child's basic needs are met.
 - One or both parents/caregivers intend(ed) to seriously hurt the child.
 - The child has exceptional needs, which the parents/caregivers cannot or will not meet.
 - Living arrangements seriously endanger the child's health.
 - The child is profoundly fearful of the home situation or people within the home.

PRESENT DANGER

An immediate, significant, and clearly observable family condition that is occurring or in process of occurring at the point of contact with a family and will likely result in severe harm to a child.

IMMEDIATE

REQUIRES PROTECTIVE PLAN

IF PROTECTIVE PLAN FAILS OR CANNOT BE PLANNED COLLABORATIVELY WITH THE FAMILY, A TPC USUALLY OCCURS

IMPENDING DANGER

Foreseeable state of danger in which family behaviors, attitudes, motives, emotions and/or situations pose a threat which may not be currently active, but can be anticipated to have severe effects on a child at any time in the near future.

FIRST ASSESSED AFTER THE INITIAL ASSESSMENT

ASSESSED THROUGHOUT THE LIFE OF THE CASE

DRIVES CASE DECISIONS

INFORMS COURT DECISIONS

IMPENDING DANGER - OVOIS

OBSERVABLE
CONDITION

VULNERABLE
CHILD

OUT OF CONTROL /
INSUFFICIENT PARENTAL
PROTECTIVE CAPACITIES

IMMINENT

SEVERE HARM

UNSAFE CHILD

IMPENDING DANGER ASSESSMENT

CPS will identify what the impending danger threats are so that everyone involved in the case knows what is dangerous to the child, what to shield the child from, the specific diminished parental protective capacities that need to be increased so that the children can be safely returned home.

FEEDS THE PLAN TO WORK
WITH THE FAMILY

CONDITIONS FOR RETURN
SHOULD NOT REQUIRE PARENTS
TO COMPLETE SERVICES THAT
DO NOT DIRECTLY RELATE TO A
THREAT TO THE CHILD'S SAFETY

INFORMS DRAFTING THE
CONDITIONS FOR RETURN

What are Tailored Dispositional Orders?

- * Not a standardized list / boilerplate language
- * Address impending danger threats
- * Parents know what to do to have their child(ren) returned to the home
- * Conditions are prioritized so parents know where to begin / what is the most important safety concern
- * Related to behavioral changes
- * Do not contain legal or CPS language
- * Address specific needs of the family
- * Have productive permanency plan and review hearing discussions regarding parent's progress
- * If necessary, can be proven at TPR

What are SMART Goals?

SMART goals are strategically designed to give any project structure, support, and to set out more clearly what you want to achieve and by when. With SMART goals, you get to track your progress and stay motivated.



Be SMART!

SPECIFIC

The condition is specifically related to an identified Impending Danger Threat.

MEASURABLE

The condition is clear about what behavior needs to change.

ACHIEVABLE

It is clear how progress will be made and how it is evaluated and success is determined.

REALISTIC

The condition is understood by the parent/caregiver, it is least intrusive and culturally competent.

TIMELY

The condition is workable, there are no barriers, and the parent/caregiver can begin to work on the condition promptly.

DCF Desk Guide

Tailored Dispositional Conditions for Return Desk Guide



A tailored dispositional condition for return is intended to address identified safety threats and should identify parental/caregiver behaviors that must change in order for safety to be managed. The condition should be measurable, easily understood by the parent/caregiver and focus on protective capacities to ensure sustainable change.

Key Elements of Conditions

Culturally Competent: Does the condition take into consideration the culture, race and/or ethnicity of the family?
Least Intrusive: Is the level of disruption to the family necessary to control for safety of the child(ren)?

SMART Goal Writing Model for Conditions

Specific: What impending danger threat is the condition addressing?
Measurable: Does the condition make it clear what behavior needs to change?
Achievable: Is it possible for the parent/caregiver to successfully meet the condition?
How will it be known when progress is made?
Realistic: Is the condition written in a way that the parent/caregiver understands?
Timely: Is the condition related to a behavior change that can begin or occur promptly?

Preparation Questions for Drafting Conditions

- 1) What are the identified Impending Danger Threat(s)?
- 2) What protective capacities does the parent/caregiver need to enhance?
- 3) What needs to change so the child(ren) is safe?
- 4) What behavioral changes does the parent/caregiver need to make?

Resource

The WI DCF Child Protective Services Safety Intervention Standards provides guidance to help determine if a condition is related to a safety threat.
 See *Safety Appendix on Impending Danger and Safety Appendix on Parent/Caregiver Protective Capacities*

The Department of Children and Families is an equal opportunity employer and service provider. If you have a disability and need to access services, receive information in an alternate format, or need information translated to another language, please call the Division of Safety and Permanence at (608) 422-6923. Individuals who are deaf, hard of hearing, deaf-blind or speech-disabled can use the free Wisconsin Relay Service (WRS) - 711 to contact the department.

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Critical Thinking

Below are examples of some common categories of dispositional conditions, along with a series of questions to think critically about how to determine if the condition is necessary. Please note this list is not exhaustive.

Substance Use Disorder (SUD)	Parenting	Mental Health
<p>Is the condition necessary because the parent's/caregiver's SUD is the reason for the removal and/or CHPS order?</p> <p>Is the SUD resulting in an unsafe condition in the home based on the safety assessment?</p> <p>Does the parent/caregiver have a demonstrated history of safely managing their use to ensure the safety of the child(ren)?</p>	<p>What unsafe parenting behaviors, related to the identified safety threats, need to be managed or changed in order for the child(ren) to be safe in the home?</p> <p>When reading the conditions, is it clear to the parent/caregiver what they need to change about their parenting behaviors?</p> <p>AND Are the conditions addressing an underlying behavior related to the safety threats?</p>	<p>What unsafe behavior(s) is the parent/caregiver exhibiting related to their mental health that is resulting in an unsafe condition in the home?</p> <p>How will you know when the parent/caregiver has made sufficient progress towards managing their mental health?</p> <p>What does the parent/caregiver need to address in mental health treatment related to the safety of their child(ren)?</p>

Questions to Consider when Finalizing Recommendations for the Dispositional Report

- Are the conditions written in a way that support reunification with an in-home safety plan as soon as safety threats can be controlled in the home?
- Is it clear what the parent/caregiver is expected to do in order to have their child returned and are those expectations related to the safety threats identified?
- Is the intent of each condition to change a behavior as opposed to expecting compliance with a service?
- Are the conditions written so that it is clear what each parent/caregiver is expected to change?

* If the answer to these four questions is "no," it is important to consider if/why the condition is needed.

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When recommending and setting conditions, keep in mind...

Clarity

Be clear and write what we want to see change to ensure safety. There shouldn't be hidden meanings - that isn't fair to families.

Revisions

Don't forget that conditions can be adjusted through revisions.

Services

Services should support the condition but should not be the condition itself. A service completion should not be the evaluation of success.

Safe Return Home \neq Case Closure

Safe return home means child safety can be maintained in the home. In-home safety plans can be sustained while services continue.

Visitation

Most commonly used visitation condition:

Parent will attend all scheduled visitations with their child. Parent will follow visitation guidelines.

Keep in contact with your child.

Have a commitment to your child.

Have quality contact with your child through age appropriate letters, calls, and/or visits.

Engage with your child.

Follow the family interaction plan to increase visitation and/or decrease supervision.

Parenting

Most commonly used parenting condition:

Parent shall participate in and successfully complete parent education/training as recommended by the Department. Parent will stay in program until successfully discharged.

Provide a safe environment for your child without unsafe items within the child's reach [list safety concerns - knives, guns, drugs, etc.].

Use skills learned from providers to safely parent your child.

Show that you can meet your child's needs [specifically list needs].

Use positive and safe discipline to parent your child.

AODA

Most counties AODA conditions are written as:

Parent shall complete an AODA assessment with a qualified provider/agency approved by the assigned social worker and follow through with all recommendations until they are successfully discharged from the program.

Parent shall maintain absolute sobriety.

Identify situations and people who trigger you to use drugs or alcohol. Create a recovery/replapse plan with the support of professionals, community supports, friends and family.

Work with professionals to review recommendations from AODA assessment and make a plan about what needs to be done for sobriety.

Show that you are using treatment providers, community drug or alcohol support groups, and friends and family to stay sober (reach recovery/sobriety).

Mental Health

Most commonly used mental health condition:

Parent will complete a mental health assessment and follow through with recommendations.

Show that you are using treatment providers, community support groups, and friends and family to manage impulsivity/emotions/anxiety/mental health symptoms.

Show that you can manage your mental health and emotions so that you can safely parent your child.

*If possible, define mental health.

Work with professionals to review recommendations from mental health assessment/psychological evaluation and make a plan about what needs to be done to manage your mental health/emotions.

Incarcerated Parent

Most incarcerated parent conditions were about what the social worker will do and not focused on the parent's behavior.

The Worker shall inform the parent what services are available at the institution that will be approved by the Department.

Maintain at least monthly written contact with your child by sending letters to the caseworker to send to your child.

Manage your behaviors so you are available to participate in services within the institution.

Sign up and participate in programming that would support your ability to be a safe parent.

Show attempts to get involved in programming, if waitlists exist.

General Conditions For Every Parent / Conditions of Supervision



Sign releases so social worker can determine if safety can be managed in the home.



Keep in contact with social worker and tell the social worker the truth so safety can be assessed.



Update your address and phone number with social worker so s/he can communicate with you.



Take advantage of all opportunities to be a part of child's daily activities (visits, appointments, etc.).

Services

DCF Standards require services and activities that are acceptable, accessible and appropriately matched with what must change.

Services are intended to promote change. Once the change process has started, there should be an enhancement in the identified diminished protective capacities, thus working to eliminate the impending danger threat.

Consider listing services separately

The county agency must make reasonable efforts to provide the following services to the mother to help her meet conditions for return:

- Case Management
- Visitation
- Family therapy
- Psychiatric Assessment
- Basic Home Management
- Parenting classes
- AODA Assessment
- Mental Health Assessment

QUESTIONS?

Kristen Wetzel
Kristen.Wetzel@wicourts.gov
