

# Case Planning Resources

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## Building Resiliency with Case Planning<sup>1</sup>

Trauma-informed case planning recognizes what has happened to the person (child and/or parent), how this continues to affect development, and how those experiences affect their beliefs about themselves and their world. As the family's team develops case-planning activities consider:

### Promoting the person's ability to develop and build relationships

- ♦ Ask about important people in their lives; include important people in the plan
- ♦ Provide opportunities for parents and caregivers to participate in trauma-informed parenting classes (recommended use of "Caring for Traumatized Children: A Resource Parent Curriculum" – presently offered by GHS)
- ♦ Communicate new information as honestly and truthfully as possible (building of relational safety)
- ♦ Educate the child's placement in knowing how making a child feel safe is a precursor for developing relationship
- ♦ Treat birth parents with respect
  - Recognize the likelihood of parent's own history of trauma and how this may affect relationships with the children
  - Engage parents' participation in decision making during periods of change, crises; but also in common child caring responsibilities such as medical and academic planning
    - ✓ Find at least one way to build caseworker relationship with child
    - ✓ Reframe the need for "attention" for caregivers as seeking relational connections

### Promoting the person's mastery/competency

- ♦ Identify areas of strengths; include the strengths in the case plan
- ♦ Create opportunities to use their strengths to experience success
- ♦ Teach that frustration and/or failure is a component of developing competency
- ♦ Reframe victimization as an outcome of being traumatized and not necessarily how the world has to be defined
  - Support the child and/or adult in accessing opportunities to develop and utilize strengths
  - Support the person's participation in activities that build efficacy even when the person is struggling with emotional and/or behavioral control
  - Recognize and validate successes
    - Consider efficacy building as a component of self empowerment and self-esteem that extend beyond therapy

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<sup>1</sup> Southwest Michigan Children's Trauma Assessment Center (CTAC); 2013.

### **Improving the person's ability to regulate emotion and behavior**

- ♦ Develop calming strategies through the acknowledgement and attention to a person's vulnerability to traumatic stress reactions (emotional state)
- ♦ Identify and model emotional identification and expression by caregivers and adults
- ♦ Recognize a person's emotional and behavioral responses as survival driven and "doing the best they can"
- ♦ Teach caregivers/birth parents to help child identify/label emotions they are feeling
- ♦ Encourage practice of calming strategies for child to learn to manage emotions
- ♦ Do not react to the child's behavior/emotion, but rather be an emotional container for the child's emotions
- ♦ Make a plan for safety that recognizes how traumatic experiences have affected a child's triggered reactions to people, places, and experiences. Pay particular attention to times that the child struggles to self-regulate based on the environment and context they are in.
- ♦ Use caution when interpreting a child's reaction before, during, and after parenting time. Develop a safety plan that engages parents and caregivers, which provides structure and safety during transitions and periods of separation.

### **Foster development of self-esteem**

- ♦ Practice giving specific praise and encourage/model caregivers/parents practicing it as well
- ♦ Catch the person doing something good
- ♦ Remind the person of her or his positive qualities
- ♦ Utilize a non-judgmental focus – remind self and caregivers that bad behavior may reflect survival strategies and does not define the person's character
- ♦ Honor the child's relationships with biological family, discuss their parents' need for help in an age-appropriate, non-judgmental and honest manner

## Sample Safety Plan with Ms. Lewis

### Background on Lewis family:

Claudia Lewis (mother) and son Cade (12 years old) have lived with Quincy Williams for the past year. CPS became involved after a report alleging that Cade had to run from the house due to a domestic altercation between Quincy and Ms. Lewis. Reportedly, his mother had told him to get out. The reporter stated that Cade came to her home and said he was afraid Quincy was about to hurt his mom. The report stated that Cade shared with a friend that he was afraid Quincy was going to physically hurt his mom and that he was frightened for himself too. The Department did not find evidence of immediate danger as Quincy has never physically harmed Ms. Lewis and has never harmed or threatened to harm Cade. The Department did find that significant risk was evident to warrant a safety plan and an open prevention case. Through Ms. Lewis's work with the Department, she realizes that Cade is at risk when he hears the arguments and pushing of Claudia by Quincy. Ms. Lewis wants to put a safety plan in place because things are escalating, but not to the point she has left. She believes she has resources she can access. They live in Quincy's home, so she can't ask him to move out and is not able to leave herself yet. She has plans for her and Cade to live on their own, but can't move out yet.

Action Step	Person(s) Responsible	Time Frame
<b>Proactive: (steps to reduce the risk, increase the safety of your family)</b>		
Cade and I will use the phrase "The school called" when tension is building. This tells him to stay where he is or go to his friend, Russell's house.	Claudia	Immediately
Call Russell's family to share Cade's plan	Claudia	
Tell Allison, my co-worker our code; she will call 911 if needed	Allison	
Cade will practice calling 911 and providing the specific information (name, address)	Cade with Russell's mother	
Make copies of license, bank account, social security, birth certificates, and leave at work	Claudia	
During my lunch hour, I will speak to Sheila on my work phone (DV advocate)	Sheila	
Pack an emergency bag for Cade and I take it to work, give it to Allison	Claudia	
<b>Reactive: (steps to restore safety following/during an incident)</b>		
When I expect an argument, I will move next to the TV (really next to the door); I will give Quincy what he wants to protect me and Cade.	Claudia	

I will ask Quincy to leave. Ask him to talk at the diner so I can get something to eat.	Claudia	
If I can leave, I will go to Allison's (she has some personal belongings of mine and Cade's)	Claudia	
Cade will stay where he is if he is away from the house or head to Russell's house. If he is in the house, he will not come out of the room he is in when he hears Quincy arguing. He will call 911 if he can. Or call Russell's mom with our code phrase "the school called..."	Cade	

## Sample Case Plan with Julia Jones' Initial FTM

### Background from Engagement:

“Would you please give me eye contact? I am not invisible. I am Julia, the 24 year old mother of three; yes, three. I know what you think of that. The whole world has let me know what they think of my “choice” to have three children at such a young age. No one asks if I actually made a choice. Now I am accused of not being responsible. Where was the responsible adult in my life, when I was growing up?

You haul me into your office, giving the impression that you want to hear my side of the story.

Does cooperation mean never challenging, or sharing what I think will help my family? Seems so.”

### Update:

Julia, your three children (Cheyenne age 12, Marcus age 6, and Mariyah age 2) came into care last week. They were brought into care because you weren't home when CPS came to visit. Cheyenne tried to cover for you but eventually she said you hadn't been home since the night before. CPS has been involved with your family for almost two months. During this time, you have shared that Cheyenne's father (Darius) is now out of prison and wants to visit with her. Darius has a lengthy arrest record primarily for possession and sale of prescription narcotics. Marcus and Mariyah's father, Michael, who does not live with you, but has been in the home every time the caseworker visits, does not want him around. There have been arguments, the police have been called and you currently have a restraining order out on Michael. You reluctantly share that he did hit you and the kids were home. The school reports that Cheyenne missed 23 days this school year; academically she is behind and struggles socially.

Family/Youth Needs	Action Steps	Time Frame	Person(s) Responsible
Strengthen Ms. Jones/Cheyenne's parent/child roles and relationship	1. Interview 2 therapists to determine who Ms. Jones wants to work with; someone who will connect well with both her and Cheyenne.	11/15	Ms. Jones+ caseworker
	2. Select therapist and attend sessions (probably every two weeks)	11/25	Ms. Jones
	3. Get ideas from three mothers who are comfortable being in the “mother” role and have older children.	12/30	Sheila (working with Ms. Jones and Mrs. Malinda Anderson – Julia's previous foster parent))
Co-parent the three children to help them	1. Attend the “Caring for Traumatized Children” classes together	1/6	Mr. and Mrs. Turner (foster parents)

experience physical and psychological safety – recognize and treat the impact of trauma on relationship building (separation, and exposure to domestic violence)	2. Ms. Jones and Mr. and Mrs. Turner will meet to: a) share information about each child, b) talk about parenting strategies that work, and c) determine ways to complement each other’s parenting styles.	11/16 and weekly	Ms. Jones
	3. Prepare with one another messages to say that are positive and give permission to build relationships	11/30	
Ms. Jones needs to have safe boundaries in her relationship with her children’s fathers.	1. Gather information from YouTube, friends, neighbors about the impact of domestic violence on women and children	11/15	Mrs. Malinda Anderson will take the lead
	2. Build supports around Ms. Jones who help her feel good about herself PLUS build interests	12/8	Ms. Jones with support by the caseworker

**Update one month later:**

At her new school Cheyenne continues to have difficulty with explosive and defiant behaviors. The foster parents are being called two to three times a week by the school to intervene. The foster parents were frustrated with Cheyenne and did not know what to do with her. They increased the consequences, grounding her for longer periods of time, but this did not work. Cheyenne often cried for long periods of time in her room.

Family/Youth Needs	Action Steps	Time Frame	Person(s) Responsible
Cheyenne’s needs to have greater success with managing her behaviors in school.	1. Caseworker will meet and talk to Cheyenne about the relationship of trauma and behaviors. Videos will be explored if needed	1/5	Caseworker
	2. Cheyenne will select a person and make a list of her strengths (what she likes to do, what others like about her, her dreams, etc)	1/7	Cheyenne
	3. Cheyenne and the worker will make a collage of her current level of safety and ideas to increase her safety (physical and psychological)	1/13	Caseworker with Cheyenne

	4. Conversations of safety will be incorporated into her therapy setting with her mother	1/20	Caseworker and Ms. Jones
	5. Mr. and Mrs. Turner (foster parent) will stop with the grounding and put in place one-on-one time (strengthen the relationship) with Cheyenne for 15 minutes prior to leaving for school to recognize Cheyenne's strengths and hopes for the day.	1/5	Mr. and Mrs. Turner



## Tips for Strengthening Planning<sup>2</sup>

**Build Resiliency** – *How effective is the plan in addressing the underlying conditions or causes of the maltreatment? Trauma is recoverable when the parents and children focus on building resiliencies to promote the child's well-being.* Building resiliencies focus on these four areas:

<b>1. Promote the person's ability to develop and build relationships – empower the family's team to identify actions steps that:</b>
<ul style="list-style-type: none"><li>• Connect important people to the child and adult.</li></ul>
<ul style="list-style-type: none"><li>• Share information as honestly and truthfully (build emotional safety).</li></ul>
<ul style="list-style-type: none"><li>• Treat birth parents with respect.</li></ul>
<ul style="list-style-type: none"><li>• Reframe for others the child's (or adult's) "attention-seeking" behaviors as a way of seeking connection.</li></ul>

<b>2. Promote the person's mastery and competency – empower the family's team to identify actions steps that:</b>
<ul style="list-style-type: none"><li>• Look for, find and appreciate the person's areas of strengths and successes.</li></ul>
<ul style="list-style-type: none"><li>• Teach that frustration and/or failure is a part of getting good at something (develop competency).</li></ul>
<ul style="list-style-type: none"><li>• Help others see the person's strengths and create opportunities to use their strengths and experience success.</li></ul>
<ul style="list-style-type: none"><li>• Support the person in engaging in activities and pursuing interests.</li></ul>

<b>3. Improve the child's ability to regulate emotion and behavior – empower the family's team to identify actions steps that:</b>
<ul style="list-style-type: none"><li>• Recognize the person's emotional and behavioral responses as often survival driven and "doing the best they can."</li></ul>
<ul style="list-style-type: none"><li>• Teach and practice calming techniques for the person to learn to manage emotions.</li></ul>
<ul style="list-style-type: none"><li>• Educate self and others about the impact of traumatic stress and help to identify the potential traumatic stress reactions as they are demonstrated in dysregulated behavior and emotion.</li></ul>

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<sup>2</sup> Black-Pond, Henry, Richardson, Fehrenbach; 2014.

<b>4. Build the child’s self-esteem – empower the family’s team to identify actions steps that:</b>
<ul style="list-style-type: none"> <li>• Practice using specific praise and encouragement with the person – pointing out the person’s strengths.</li> </ul>
<ul style="list-style-type: none"> <li>• Honor the person’s relationships with “family.”</li> </ul>
<ul style="list-style-type: none"> <li>• Use a non-judgmental focus remembering that behavior may reflect survival strategies and does not define the person.</li> </ul>
<ul style="list-style-type: none"> <li>• Find models who demonstrate using praise and encouragement as a way of reinforcing positive behaviors.</li> </ul>

**Give Voice** – *How can we increase the active role and voice of the family and its team in “shaping decisions about their strengths, and needs, vision and goals for life change, and about their supports and services”;* (Michigan’s QSR -Status Review 9: Voice and Choice); *“match effective strategies to measurable life outcomes and near-term goals that are fully consistent with long-term view”* (Michigan’s QSR - Practice Review 6: Planning Interventions)?

<i>Preparation for the Family Team Meeting</i>	<i>At the Family Team Meeting</i>
Ask the family to identify the team members who are best able to help them with their top needs.	Brainstorm lots of options.
With the family, prepare team members for their role.	Access the family’s strengths and past successes.
	Family determines the first action step that can be implemented this week.

**Give Choice** – *How successful are we in modeling “services should be youth-guided and family-centered in their planning and provisions”* (Michigan’s QSR -Status Review 9: Voice and Choice); *the family should have a sense of personal ownership in the plan and decision process; how well do the planned strategies fit the focus child/youth and family situation with respect to culture, preference and convenience* (Michigan’s QSR - Practice Review 6: Planning Interventions)?

<i>Preparation for the Family Team Meeting</i>	<i>At the Family Team Meeting</i>
Family has the choice to select informal supports to attend their planning meeting.	Give family and its team options for service providers so they can interview and select the best match.
Family and team members are prepared to consider multiple options prior to coming to the meeting.	