The Cornerstones of Safety Intervention

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Introduction

The noun cornerstone has 3 definitions. (AudioEnglish.net and Answer.com)

1. A cornerstone is a fundamental assumption from which something is begun or developed or calculated or explained.

2. A cornerstone is a stone in the exterior of a large and important building, usually carved with a date and laid with appropriate ceremonies.

3. A cornerstone is a stone at the outer corner of two intersecting masonry walls which provides support to a building.

Curiously these definitions seem to have application to safety intervention in different ways. If we think of a building as being a metaphor for a safety intervention system, then it is easy to see the application of cornerstones. In this sense, we’d be referring to what provides the foundation for safety intervention; what safety intervention depends on in order to be stable, well grounded and purposeful. If we think of that which emphasizes the importance and significance of safety intervention, we can consider the definition related to ceremonial representations. And when we think of fundamental assumptions, we realize that the concept of the cornerstone serves to identify the essential beliefs and values that form and guide safety intervention.

This article identifies four essential cornerstones that provide the foundation for safety intervention, that emphasize its importance, and that explain its rationale. These cornerstones connect the two dimensions of safety intervention:
safety management (control) and enhancing caregiver protective capacities (change).

**Cornerstones of Safety Intervention**

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**Least Intrusive**

*Least intrusive* refers to intervening to protect a child in ways that produce the least interference with family unity and privacy, yet assure child safety. This is an elemental principle in safety intervention. Its importance is associated with the reality that CPS is a government, non voluntary intervention. Even in the best of circumstances, CPS intervention represents an interruption in a family’s life, to its autonomy, and to caregiver empowerment.

The defining reasons that CPS intrudes into family life are: (1) to determine if children reported to CPS are in danger and (2) to protect children in impending danger while attempting to restore caregivers to their protective role and responsibility. Anything beyond those interests can be considered to be intruding beyond what is legally and ethically acceptable and should only occur with the consent of the caregivers.

Least intrusive refers to, defines, and limits safety intervention strictly with respect to what is absolutely necessary and essential to (1) assess a child’s safety
and (2) implement actions, services and controls that assure a child’s safety. The belief is expressed in casework and supervision that recognizes that intervention will only go as far as is necessary to assure protection during safety management and only as far as necessary to enhance caregiver protective capacities.

Beyond the “interference” dynamic, this cornerstone demonstrates respect for families in general and specifically for caregiver and children’s rights. It honors the idea of family. It is influenced by acknowledging that families possess strengths and resources that can be mobilized to produce safety management options. The least intrusive concept is influenced by the knowledge that children want to be with their families. The least intrusive approach to assuring child safety is considerate of diversity and culture as crucial aspects of family life and solutions.

This cornerstone also is compelling with respect to the responsibility of those involved in implementing safety intervention. Safety intervention is best when it is always alive and vibrant in taking into account shifts and changes in family life and circumstances which can have a bearing on how best to protect a child during the life of a case (see Diligence).

Our emphasis in discussing this cornerstone has been safety management. This value also can be understood as fundamental to planned change. In safety intervention, the concern for what must change ought to be related only to diminished caregiver protective capacities. The “intrusion” into the life of the caregiver is focused. While worker – caregiver deliberations can include a larger scope of concerns, the intention is to avoid intervening into all that may be stressful or problematic within the family or with the caregiver. The value and principle of least intrusive is actually most closely adhered to within this

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1 A positive spirit for effectively working toward change with caregivers is better expressed as “what can change.” The notion of possibilities is consistent with other cornerstones such as mutuality and self-determination.
approach to identifying the target of ongoing CPS treatment (i.e., diminished caregiver protective capacities).

**Mutuality**

Safety intervention, as we’ve promoted, has the potential of “leveling the playing field.” This means you reducing your authority while empowering caregivers. *Mutuality* is the cornerstone that reinforces an orientation of collaboration and shared responsibility for what happens with a family and what happens during intervention. The idea is an expression of thinking, feeling and action that you and the caregiver are in this challenge together. There is no hierarchy. While roles and responsibilities are unique, the commitment to the work to be done and the results to be realized are common. Mutuality encourages reciprocity: How can I help you? How can you help me?

Remember that a cornerstone intersects two walls? When attempting to engage, you behave interpersonally in ways that encourage caregivers to participate with you, to consider their circumstances, to consider their options, and to think about change. Engagement is one wall in the foundation – considering what is and what can be. The other wall is collaboration – how to proceed as partners. Mutuality intersects these two walls.

Mutuality is a cardinal value that is integral to the change process occurring as part of safety intervention. The concept of mutuality undergirds your intention to understand the family in so far as you can. Furthermore, this cornerstone underlines that caregivers and family members are the best source of information to gain that understanding. Mutuality contributes to you and caregivers arriving at similar insight about what can change in order to enhance caregiver protective capacity.
Self-Determination

Self-determination is really a basic human right, don’t you agree? Acceptance of this cornerstone is of monumental importance to the safety intervention process. Safety intervention is concerned with families with unsafe, unprotected children. Safety intervention begins by managing child safety and continues by seeking opportunities to return caregivers to their protective responsibilities. Ultimately and ideally, safety intervention is about change.

To change, a person must decide to change. The process of change depends on a person moving through stages that leads to a decision to change. Safety intervention leads to choice making. Caregivers have a right to determine the course of their lives. This value should not be misunderstood to include that caregivers can determine that they will not protect their children or participate with you in a process of change without contending with resulting consequences. So, this value includes the realization that it is a responsibility for you to (1) honor caregiver self-determination and (2) fully explain potential consequences of choices made by the caregiver – both good and bad.

In practical ways, this cornerstone becomes obvious or not with respect to how case plans emerge. If caregivers are told what they must do, then, self-determination is not in operation. When a caregiver recognizes what can change and determines for him or herself both to change and how to change, then, self-determination exists as a cornerstone set in place providing foundation for desirable results. In practical terms, if a case plan (i.e., how it is formed and who is involved in it) is the product of a caregiver’s choosing, then, this value has been embraced and is working.

This cornerstone exists because of other values and beliefs: acceptance of caregivers and their culture, respect for rights, individualizing caregivers, motivation and readiness to change, recognition that solutions exist within families, and the realization that caregivers have strengths.
Diligence

We refer to diligence here in the plainest manner (Webster’s: *the degree of attention and care expected of a person in a given situation*).

Normally you might think of this as primarily associated with efforts related to conducting safety assessment and managing safety plans. In safety intervention, diligence is an issue throughout the case process and is influenced by the “given situation” that exists during the case process. Diligence includes intellectual and physical energy and application, emotional and social self-management, frequency and duration of timing, and creativity. Diligence is characterized by how you prepare yourself to be a professional and how you perform as a professional.

This value is concerned with expectations and a mental orientation that you consciously and actively demonstrate the other “cornerstones” considered in this article. In practical terms, it embraces proficient and effective performance based on values and methodology consistent with “it’s the right thing to do.” Diligence should be apparent in all aspects of intervention with respect to thoroughness, timeliness, availability and responsiveness.

To be diligent is to be dynamic. We have written, trained and consulted extensively about provisional safety intervention. Provisional safety intervention is diligent and dynamic. Provisional safety intervention is dynamic as you continually assess and consider the best approach to safety management and enhancing caregiver protective capacities. Provisional safety intervention refers to specific plans, arrangements and actions you take at a particular time based on (1) the presence and nature of impending danger and (2) the sufficiency of caregiver protective capacities. Provisional safety management stays in place pending a more permanent arrangement, namely returning protective responsibilities to caregivers or other permanency options beyond the child’s own home or family. The importance of provisional, diligent, dynamic safety intervention is that it assures that the question of child safety and caregiver
protective capacity always remains alive. It promotes the point of view that child safety and caregiver protective capacity possess potential for being different, thus requiring different CPS safety management and treatment responses. But, perhaps most important, this idea values the family unit and the role of caregivers both in terms of being the executors of the family system in general and, specifically, as responsible for protecting their children. Provisional safety management emphasizes constant attention to family unity and the least intrusive concepts.

To be diligent is to be accountable. The idea of accountability is not often included in a list of values or principles that support an aspect of intervention. However, this value and your related behavior are crucial to an effective, responsible safety intervention process. The accountability emphasis with respect to this cornerstone is related to the caregiver who is involved with you. This means that you take as much responsibility for encouraging meaningful involvement and successful change as the caregiver takes in participating and attempting to make significant life changes. Reliance and dependability are dimensions of accountability and diligence. Diligence and accountability are best characterized by keeping in touch with caregivers, by keeping them informed to the greatest extent possible of all case issues and activities that affect them, by seeking ways to empower them, and by constantly demonstrating respect for them.

Diligence has to do with opportunity in different ways.

- Safety intervention requires sufficient opportunity. This has to do with time to get things done in a timely way, time for personal contact with caregivers and others in the case that is reasonable and supportive of what is required. It really doesn’t matter how well an intervention approach is designed if there is not enough opportunity to perform the intervention
according to its standards. This is not a worker’s responsibility; this is a management responsibility.

- Diligence produces opportunities. This is not to suggest that being diligent produces more time. This has to do more with being at the right place at the right time, taking advantage of occurrences, and timing in what you do which maximizes payoff.

**Closing**

**Cornerstones of Safety Intervention**

![Diagram showing the relationship between Least Intrusive, Mutuality, Self-Determination, and Diligence]

The four cornerstones provide the foundation for safety intervention. The foundation that they form is reinforced by the interdependence that exists between them. Do you agree that each is important alone but even of greater importance in relationship to the others? Notice the arrows on this chart. Think of examples of interdependence and influence. For instance, to seek the least intrusive approach to safety intervention you must be diligent. Respecting self-determination is fundamental to forming effective relationships and having a mutual experience during the safety intervention process. And so it goes.