

Common Core 3.0

Engagement and Interviewing

Trainee's Guide



December 31, 2018

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Introduction to Common Core

Common Core curriculum and training for new child welfare workers in California is designed to be generalizable across the state, cover basic child welfare knowledge and skills, and is important for all CWS positions with in an agency.

California's Common Core Curricula for Child Welfare Workers is the result of the invaluable work and guidance of a great many people throughout the child welfare system in California and across the country. It would be impossible to list all of the individuals who contributed, but some groups of people will be acknowledged here.

The Content Development Oversight Group (CDOG) a subcommittee of the Statewide Training and Education Committee (STEC) provided overall guidance for the development of the curricula. Convened by the California Social Work Education Center (CalSWEC) and the California Department of Social Services (CDSS), CDOG membership includes representatives from the Regional Training Academies (RTAs), the University Consortium for Children and families in Los Angeles (UCCF), and Los Angeles County Department of Children and Family Services.

In addition to CDOG, a Common Core 3.0 subcommittee comprised of representatives from the RTAs, the Resource Center for Family Focused Practice, and counties provided oversight and approval for the curriculum development process.

Along the way, many other people provided their insight and hard work, attending pilots of the trainings, reviewing sections of curricula, or providing other assistance.

California's child welfare system greatly benefits from this collaborative endeavor, which helps our workforce meet the needs of the state's children and families.

The Children's Research Center provided technical support as well as The Structured Decision Making System that includes the SDM 3.0 Policy and Procedure Manual and Decision Making Tools. These resources are used in compliance with CRC copyright agreements with California. Additionally, content in this curriculum has been adapted from CRC's SDM 3.0 classroom curriculum to meet the training needs in California.

In compliance with the Indian Child Welfare Act (1978) and the California Practice Model, social workers must identify American Indian/Alaska Native children in the system. For an overview of *Implementing the Indian Child Welfare Act* view: <https://www.youtube.com/watch?v=BIQG65KFKGs>

The curriculum is developed with public funds and is intended for public use. For information on use and citation of the curriculum, please refer to: https://calswec.berkeley.edu/sites/default/files/citation_guideline_6-2018.pdf.



FOR MORE INFORMATION on California's Core Curricula, as well as the latest version of this curriculum, please visit the California Social Work Education Center (CalSWEC) website: <http://calswec.berkeley.edu>

Curriculum Introduction

This full day curriculum focuses on engagement and interviewing strategies. The bulk of the strategies come from solution focused practice. Other interviewing strategies are focused on gathering information for the purposes of documentation either for the case record or for court documents. This is a skill based class in which trainees will be practicing interviewing skills with a mother, stepfather and an adolescent. Trainees will practice solution focused questions and receive feedback from their peers and or trainer, with suggestions for future practice considerations.

Agenda

Segment 1:	Welcome and Review of Agenda	9:00-9:20
Segment 2:	Stages of the Interview—Phase 1: Preparation for the Interview	9:20-10:15
Break		10:15-10:30
Segment 3:	Stages of the Interview—Phase 2: Rapport Building	10:30- 12:00
Lunch		12:00-1:00
Segment 4:	Stages of the Interview—Phase 3: Information Gathering and Sharing	1:00-2:30
Break		2:30-2:45
Segment 5:	Stages of the Interview—Phase 4: Closure	2:45-3:00
Segment 6:	Re-Engagement	3:00-3:45
Segment 7:	Close/End of Day	3:45-4:00

Learning Objectives

Knowledge

- K1.** The trainee will be able to identify effective strength-based interviewing strategies (including appreciative inquiry and ‘keys to engagement’) to engage with the family and identify strengths and underlying needs.

Skill

- S1.** Using a vignette, the trainee will be able to formulate three interview questions to learn more about the family’s values, beliefs, or practices that relate to childrearing and parenting.
- S2.** Using a vignette, the trainee will be able to demonstrate interviewing techniques for defusing conflict, engaging family members who are reluctant to deal with critical issues, and assisting family members to openly discuss their opinions and feelings.
- S3.** Using a vignette, the trainee will be able to demonstrate the phases of an interview (preparation, rapport building, information gathering, and closure), and steps, and goals of the interview process.
- S4.** Using a vignette, the trainee will be able to demonstrate the ability to formulate questions based on assessment of a child’s or adult’s level of cognitive, emotional, and linguistic development.

Values

- V1.** The trainee will value a respectful, empathic, strength-based, and trauma-informed approach to listening and responding to events and life experiences described by interviewees.
- V2.** The trainee will value awareness of his/her responses to interviewees, with particular attention to biases that may arise.
- V3.** The trainee will value building trust and rapport by providing clear explanations to families about child welfare responsibilities, procedures, and services that relate to interview questions and responses.
- V4.** The trainee will value learning about the interviewees’ values, beliefs, and behaviors and eliciting underlying needs, family strengths, protective capacities, and resources.

Setting Group Agreements

It is important during skill building activities to feel safe to try out new skills, experience successes and challenges, and learn from these experiences. Adult learning theory and neuroscience have proposed that personal and emotional safety in the classroom is critical to learning. The following activities require risk taking. As such, we all participate in creating a safe learning environment. One way of creating this environment is through setting group agreements. The trainer will begin the discussion on what you need to feel safe to try out new skills among your peers. Do not hesitate to state what you need to feel safe to try new things. The list will be compiled by the trainer and posted for this training day.

Below, fill in one or more agreements you want to be sure are part of the larger group agreements for the day.

Being uncomfortable is normal as we try new things. If, however, you feel more than uncomfortable, do not hesitate to talk with the trainer about your concerns.

Phases of the Interview

Phase 1: Preparing for an Interview¹

Investigation/Assessment and Case Management

- What is my role and purpose?
- Conscious [social] worker decisions: where to conduct, who to interview first?
- Should the visit be announced or unannounced?
- Should I bring another worker? Should I go with Law Enforcement?
- Assess for my safety plan.
- Anticipate problems (what could happen?); formulate strategies.
- Have I filled out an itinerary?
- Do I need to consult with my supervisor?
- Write a short list of reminders.
- Do I have material to take notes during or immediately after?
- Should I bring a car seat?
- Do I have a map or book of maps, cell phone, gas, etc.?
- Plan: Where will I park? What time of day to conduct? Will I have to do other follow-up immediately?
- Am I feeling anxious?
- What potential biases might I have?
- Do I have resources/referrals?
- Remember to ask about Native American Ancestry
- Do I have the tools I need to conduct the interview?
- Which SDM Assessment should I consult to prepare questions/content areas for this interview?

Investigation and Assessment

- Review the record or referral. What do I “know?” As a [social worker], is my mind open to new information; am I equally interested in information that may disconfirm my hypothesis?
- Jurisdiction: Has there been a cross report to Law Enforcement? Do they need to know I am going there now? What will be the plan if I can’t get in?
- Identify the households in which the child resides
- Ask yourself which households need to be assessed for safety and risk?
- What does my referral and past case records tell me about possible safety threats in the household?
- What do I know already about risk factors in the household related to past history?

Case Management

- Did I do my homework from the last home call?
 - What is the key upcoming decision to be made with this family?
 - Am I prepared to explain the factors of reassessment to the family members?
- Bring the case plan, how will we know if progress has been made?
- How do I organize my interview to gather information that will support a strong reassessment?

¹ Adapted from California Social Work Education Center (2006) Interviewing adults and children in public child welfare; beyond the basics. Participant manual http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=6&ved=0CD0QFjAF&url=http%3A%2F%2Fcalswec.berkeley.edu%2Ffiles%2Fuploads%2Fdoc%2FCalSWEC%2FInterview_AdultsChild_PCW_BeyondBasics_Trainee.doc&ei=JhduVan1JYixyATZ6IOQAQ&usg=AFQjCNHucP4qH0AV04_Z7m65mWsE33a2iA&bvm=bv.94911696,d.aWw

Child Maltreatment Interview Outline²

I. Preparation

- Review interview's purpose
 - How do we incorporate evaluation of household safety (SDM Assessment) and household risk level (SDM Risk Assessment)?
- What is my role?
- Self-awareness: What do I represent to the child? Potential dynamics?
- Review Child Development Training
- Able to gather and/or access list of body part
- Who has access to the child? Where will I conduct this interview?
- Depending on county policy and procedure
 - Prior history on the family—CMS/CWS
 - Prior legal or policy history
 - Medical history
 - School history
 - Working knowledge of IPV resources for the family
 - Working knowledge of counseling referrals
 - Previous hard copy case files
- People to access prior to the interview:
 - Police officer
 - Prior social worker (if family has had previous reports)
 - Supervisor
 - School personnel
 - Referring party
- Potential places to see:
 - Family home
 - School
 - Location as to where the child is at
 - Location as to where the parent(s) is at
 - Location of biological father
 - At a hospital setting

II. Rapport Building

- Introduction of self; familiarize child with tasks, expectations
 - Explain the purpose and process of each assessment, including safety and risk
- Awareness of multicultural issues
- Note child's ability to separate from caretaker and relate to you
- Address fears / concerns (if any)
- Enter the child's world through inquiry and art

III. Developmental Assessment

- Listen to and observe the child's response to establish baseline skills.
 - Language (number of words, syllables, sparse, rich descriptors, etc.)
 - Concepts (response to "wh" questions, quantity, prepositions, time)
 - Representative play (how are objects used; can doll/drawing represent child's own body?)

² *ibid.*

- Differentiation (between fact and fantasy / truth and lie) [*Note: Important to “qualify” the child in a potential court case, integrate into all interviews.*]
- Self-regulation (mood, affect, attention span, suggestibility)
- Memory (past vs. current events)
- Family composition (use specific names)
- Interviewer adapts to child’s developmental level
- Introduction of tools (see below)
- Body part identification: use baby doll drawings or free style drawing
- Screening tools (per policy and procedure)

IV. Information Gathering: Approaching Abuse-Related Material and Information Sharing

- Consider prioritizing and structuring the interview based upon information in the referral that would, if it were true:
 1. Constitute a safety threat
 2. Past history in case or information contained in the referral that would indicate a risk or complicating factor
- Organize your questioning based on Hot, Warm or Cool information³:
 - Hot: urgent, need more information
 - Warm: not emergency, but worry
 - Cool: general inquiry
 - Use the SDM Safety Assessment for this purpose. Is there anything I know going into the interview that is “hot”, “warm” or “cool” ?
- Promote narration regarding what, if anything, happened, child to share their experience
- Questioning moves from the general to the specific
- Follow-up with “wh” questions
- Use focused questions to elicit any further details
 - Critical events focus (place, thing)
 - Person focused
 - Direct general inquiry
- Follow-up on other acts, sources of information, i.e., others present, pictures taken, etc.
- Clarification and exploration of alternative hypothesis
- Observe and listen for other disclosures not mentioned in the referral
- Be sure to observe and listen for all safety related domains during the interview.
- Explain what will happen next; allow opportunity for questions
- Provide contact information
- If available, use county approved tools to elicit information

IV. Closure

- Address fears, concerns (if any)
- Explain the process, next steps and results of assessments with the family
- Summarize conversation
- Comment on the process, not the content

³ Shared with permission from NCCD, 2016

Vignette: Price/Smith Family

Crystal Smith—age 13

Marti Price—mother of Crystal and Craig

Randy Price—stepfather to Crystal, father of Craig

Craig Price—age 7

A phone call was received from the Child Abuse Hotline on the Price/Smith Family. Crystal Smith is a 13-year-old Caucasian female who is currently at the Evergreen Hospital Emergency Room. She had run away following an altercation with her stepfather Randy Price. Crystal had run to her friend's home, Sally Brown. Sally Brown's mother Tonya called the police. The police arrived and took Crystal to the emergency room.

The social worker arrived at the hospital and interviewed Crystal. Crystal has a large bruise on the side of her cheek and what looks to be a knot on her forehead. She stated that her stepfather Randy Price hit her in the face after Crystal had gotten into a fight with her mother Marti. After she was hit, Crystal fell and hit her head on the wall. Crystal reported that Randy has hit and shoved her in the past, but this was the first time she had bruises on her face. Crystal stated that Randy has never hit Craig, her brother. Crystal says that sometime her mother Marti will hit her, but it is "not a big deal" because she is smaller than Crystal.

The doctor that has examined Crystal states that the injuries are consistent with the explanation of how it has occurred, and they are considered non-accidental injuries. Crystal has no known blood disorders or allergies that would cause this type of bruising.

The police officer states that they have not gone out to the home, but have received a report from the stepfather that Crystal has run away and is filing a missing persons report. Contact was made with mother and stepfather. Both agreed to be interviewed and are awaiting the social worker to come to their home.

Phase 2: Rapport Building

Appreciative Inquiry

Appreciative Inquiry is an asset- or strength-based collaborative and reflective inquiry method that is designed to uncover or surface the best of what a worker is doing that allows the information to be used to construct solutions to new challenges. David L. Cooperrider and Diana Whitney originated the concepts and philosophy of Appreciative Inquiry as a means of discovering and applying new knowledge and ideas to key aspects of future behavior.

Much inquiry in education, counseling and supervision is focused upon deficits, needs, knowledge gaps and problems. Appreciative Inquiry turns the reflective inquiry toward what is working and what strengths lie in the worker's behaviors and practices in order to recognize elements that can be used for future practice change.

Appreciative Inquiry is described as both a process of inquiry as well as a philosophy/value about people and organizations and change

As a practical value system, Appreciative Inquiry involves applying learning of what works into future behaviors. The value system is asset based and assumes that every person and organization have valuable contributions to make to overall practice. The philosophy assumes the importance of collaboration, and inclusion of all voices within a system, sees change as a process rather than an event, focuses on system change rather than individual change, values emergent and innovative management that move a system toward optimal functioning.

Appreciative inquiry is a simple format that provides for strength-based engagement and allows you and the family to incorporate the family's perspective while addressing safety and protective capacity. Using simple questions from Signs of Safety, "the Three Questions," being used around the world to get back to basics in child welfare can help guide interview:

- What is working well?
- What are the worries?
- What needs to happen?

Rapport Building Strategies

Showing Empathy

Partializing

Past Success Questions

Three Questions

Reframing

Recognizing Strengths

Focus on Skills

Solution Focused Questions

- Scaling Questions: On a scale of 1-10 with 10 being totally out of control, how would you rate yourself in handling your anger? What would it take to lower the scale by one number?
- Open ended Questions: What happened?
- "When" rather than "if" questions: When Tammy comes home from her aunt, how will you know it's the right time for her to be at home with you?
- "How" Questions: How did you succeed the last time from not stopping at the bar on the way home from work?
- Exception Finding Questions: "How have you managed to prevent things from becoming worse?"
- Coping Questions: What helped you cope through the tough time with your daughter last evening?
- Miracle or Preferred Future Questions: If you can see your family in a year from now, what would that look like?
- Perspective Change or Position Questions: What might your sister say about your current care of your son?"

Activity: Interview with Randy Price

1. Watch the Randy Price video.
2. Note the strategies used to engage Randy.
3. Get into groups of 3. Each person will play the social worker and Randy and observer. The role play will last 7 minutes. The observer will give feedback and facilitate discussion for three minutes. Roles will switch at the 10-minute mark. Rounds 2 and 3 will each be 10 minutes for a total of 30 minutes for this exercise.
 - What is 'hot', 'warm' or 'cool' information?
 - Suggestions for further inquiry during the role play:
 - Asking "Randy" about his relationship with his son?
 - Asking "Randy" about his relationship with Marti?
 - Asking "Randy" what he does when there are difficulties in his life?
 - Exploring with "Randy" additional supports—relatives, friends, community connections
4. The social worker asks questions that brings up worries with the hope of gaining more behavioral information. Develop a least one question related to the safety issues the agency is worried about.
 - As a group think about questions you might ask
 - Attempt to formulate a scaling question and an open-ended question during the role play. The observer will listen for all questions and statements, and chart examples of what he/she hears during the role play.
5. After the first round and debrief, the second team of the social worker role and "Randy" role will continue the theme and content from the first interview—it builds from what was already covered in the previous interview. The third round will build on the first two rounds of interviews.
6. After three rounds, wait for the trainer's instructions.

Directions for observer: Check the type of question used and write it in the box. Be prepared to share during the debrief:

Social Worker Interviewing Skills Checklist

Type of Question/Statement	Check (if used)	
Empathy		
Partializing		
Past Success Questions		
Reframing		
Recognizing Strength		
Focus on Skills		
Scaling Questions		
Open Ended Question		
When rather than If question		
How Question		
Exception Finding Question		
Coping Question		
Miracle (Preferred Future) Question		
Perspective Change (Position) Question		

Phase 3: Information Gathering and Sharing

Investigation and Assessment

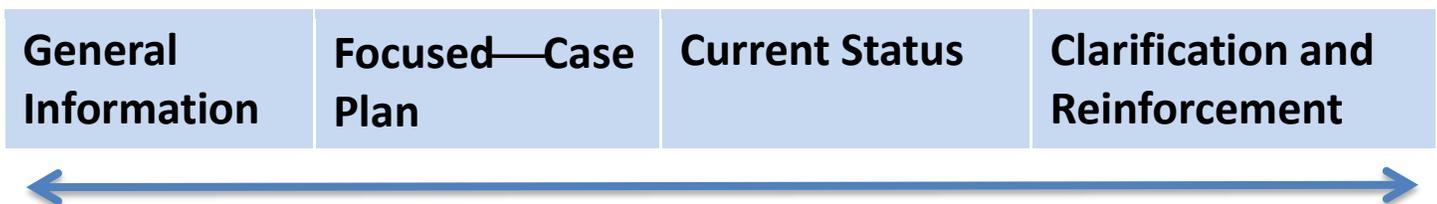
Interviews typically have ebbs and flows of how information is gathered and shared. One model suggests looking at how to move from very general information to finding out about the event and then details of the event. Below is a continuum in which an interviewer may move back and forth to obtain information. As the interviewee becomes more comfortable and safe, the interviewer moves to disclosure clarification (if there is anything to disclose). If the questions provoke feelings of anxiety or feeling unsafe, the interviewer may want to move back to a general information question to re-engage for safety.



- **General Information:** This can be about gathering information about names, who is in the family, history of the family, etc. It usually does not encompass information about maltreatment.
- **Focused:** Information about a specific content area regarding the purpose of the interview. In the case of assessing for maltreatment, the focus area may be about disciplining, or about neglect, how often the family has meals.
- **Event focus:** Information about a particular event. You may want to have clarity on when a specific event occurred. Example: The last time a child was disciplined with a belt. When did it take place? What led up to the child being hit?
- **Disclosure clarification:** Maltreatment has been disclosed, but more details are being sought. Example: A 4-year-old discloses, “I touched daddy’s wee wee.” Upon further questioning the child further states, “Daddy’s wee wee is how he goes pee.”

Case Management

Case Management interviews may have a focus of gathering information on how the family is working on the case plan. This interview also will have its ebbs and flow. A social worker may move easily into current status and reinforcement, but may need to move back to gathering general information if there is a change in circumstances, or the family has not completed parts or any of the case plan. Feelings of embarrassment and anger may require the social worker to focus on what is happening now (general information) and reworking the case plan to better meet the needs of the family, framed in the structure of the SDM Reassessment.



- Gathering **general information** may focus on day to day activities, personal interests, and positive events in the family’s life.

- **Focused** information gathering is concentrated **on the case plan** successes, and barriers to achieving the case plan.
- Gathering information on the **current status** may focus more specifically on what has been accomplished in the case plan and activities or behavioral signs of progress that need to be accomplished.
- **Clarification and reinforcement** may focus on specific behavioral details of the case plan to ensure a mutual understanding, as well as reinforcement on what the family has done well and what needs to be done.

Question Style and Content

Asking the right questions to gather information is important. The questioning techniques that allow for an interviewee's experience to unfold naturally and in his/her words are recommended (open ended questions). There will be times in which you will need to ask questions that offer the interviewee a choice, or a closed ended question, in order to get clarification, but these questioning styles should be used more sparingly. Leading and coercive questions are never appropriate when attempting to gather information. These styles of questions often have embedded answers in them and do not accurately reflect the interviewee's experience. See the following table below for examples of question style and content.

	<i>General</i>	<i>Focused</i>	<i>Event Focused</i>	<i>Disclosure Clarification</i>
<i>General Open Invitation to Talk</i>	How are you feeling today?	Tell me about your spouse.	When did you find out about the injury?	Tell me about the first time you hit him.
<i>Multiple Choice</i>	Would you rather talk about A,B or something else?	Does he like A, B, or something else?	Did you touch her breast, bottom, or somewhere else?	Did this happen once, a few times, or lots of times?
<i>Yes-No</i>	Do you have a job?	Has your son been in trouble?	Did you have an erection?	Did it cause bleeding?
<i>Leading</i>	You work for Acme, don't you?	Your son has been in trouble, yes?	You rubbed your penis on her, right?	It caused bleeding, didn't it?
<i>Coercive</i>	Sit down! We need to talk.	You can't go until you tell me...	I'll remove your child if you don't talk	Admit it or you'll lose the kids!

Information Sharing

- Recognize that the information you are sharing may have a traumatic impact on the family. Allow the family some time to process the information.
- Bring written materials so that families can go over them after the interview, ask the family to contact you about questions and concerns.
- Check back by phone call after a challenging meeting to offer clarification and further support.
- Be clear about next steps: What needs to happen, and what you will follow up on.
- Share information about the Structured Decision Making tools and how they will be used and shared.
- It is important that you take the initiative to follow through and follow up. Be sure to discuss with the family what you plan to do and how and when you will follow up, including any unannounced visits per county policy and/or case practice.

Crisis Intervention and Defusing Conflict^{4, 5}

- I. **Anxiety Phase:** The person struggles with strong feelings but remains in control of his/her behavior. The worker must focus on helping the person to talk about the person's feelings so that he/she will not have to turn those feelings into behavior.
 - a. **Verbal cues**—soft voice, loud voice, pressured speech
 - b. **Nonverbal cues**—quiet, fidgeting, may show anger, fear, helplessness
 - c. **Cultural Considerations**—not everyone demonstrates anxiety in the same manner; be aware that culture plays a part in how one is raised to handle feelings and anxiety
 - d. **Questions or statements that focus on feelings and empathy**—
 - Tell me how you're feeling.
 - What can I do to help?
 - I want to understand.
 - People in similar situations have told me it's very hard and I can imagine.
 - I want to make sure that I am understanding exactly what you are saying to me.
 - You seem really upset right now.
 - Sounds like you feel pretty alone right now.
 - You don't think I'll be able to help just like other people in the past haven't helped.
 - You must have been annoyed/frustrated/upset by that.
 - You're not sure you can deal with this- it's a lot to deal with.

- II. **Defensive Phase:** At this point, the person begins to exhibit challenging or offensive behavior. The worker must become more active and attend to both feelings *and* behavior. Non-verbal communication from the worker is most successful for reducing the person's feeling of threat. During this phase it is critical that the worker understand the difference between responding to feelings or to behavior.
 - a. **Managing Anger**
 - i. **Non-verbal communication.**
 - Provide sufficient personal space
 - Control hand and body gestures
 - If seated, stay seated unless concern for safety and ready to leave
 - Be aware of height differential
 - Stand off to the side, rather than directly facing the person
 - Eye contact, too long or fixed or not meeting eye contact (be aware of cultural considerations regarding eye contact)
 - Facial expressions, keep relaxed, neutral, show interest

 - ii. **Verbal defusing methods.** Invite the expression of angry feelings.
 - Reflect—It's very understandable about being angry.
 - Reframe— Sometimes when people are angry it's because they might be frustrated or afraid of what is happening.
 - Validate anger—It's normal to be angry about things we don't feel we have control over.

⁴ Material Adapted from Introduction to Social Worker Safety in a Child Welfare Environment Trainer Guide (2013) , Fresno State University , Central California Social Welfare, Evaluation, Research and Training Center.

⁵ Crisis Prevention Institute. (2016). Nonviolent Crisis Intervention. Retrieved on May 18, 2016, from: <http://www.crisisprevention.com/Specialties/Nonviolent-Crisis-Intervention>

Reach for the feelings underlying the anger—Sometimes when people are angry, it may be because they might be feeling afraid, or frustrated or not heard.
Selectively ignore that which is better not addressed.

- b. **Setting limits:** For persons at risk of losing control, the worker’s responsibility is to set clear limits on those behaviors that may become destructive or dangerous. Setting limits is an art because no one likes to be told what to do. People are more likely to become violent and aggressive when workers fail to set effective limits or when they use poor verbal skills when setting the limits. The following are important to bear in mind:
 - i. Set the limit in an objective and calm manner as possible.
 - ii. Set the limit by presenting it as a choice. Try to avoid a power struggle over the situation.
 - iii. If you tell a person not to do something, give a reason for the request.
 - iv. Do not wait until the behavior is so bad that you cannot handle it. At that point it would be too late to set limits effectively

III. Acting-Out Phase: Now, the worker must focus primarily on the person’s behavior, particularly being aware of the need to set limits, manage anger, and possibly terminate the interview. Workers need to leave the situation if they fear for their personal safety. The worker will need sharp observation skills; be willing to seek help from the agency, a co-worker, or the police; and be able to terminate the interview without damaging the casework relationship. If the worker has set limits in an earlier phase, terminating the interview will be the natural consequence of the person’s inability to control their behavior.

- a. **Observation:** Recognize the signs of imminent danger. The person may exhibit the following:
 - Dramatic change in behavior;
 - Hyperactivity;
 - Pressured speech, shortness of breath, stammering, threats;
 - Posture: clenching jaws or fists, holding on to furniture for control;
 - Fixed stare or eyes darting all around;
 - Rapidly changing emotion; strong emotion.

If you have safety concerns, you may consider talking openly with the family about them. Make it clear that you are interested in resolving these concerns so that you can focus on helping the family.

Each worker will develop a safety approach based on their own style and experience but whatever the specific strategies employed, fully incorporating personal safety planning into one’s own practice approach is critical. More information can be found in the Worker Safety eLearning module.

IV. Tension-Reduction Phase: In the post-crisis period, the person may be more open to accepting help and learning something from the crisis situation. It is important to be aware of the opportunity for change at this time and the need to re-establish rapport with the person to decrease the likelihood that the person will act out during a future crisis.

- a. Recognize that for many people a second opportunity provides for re-engagement and working through the crisis. Review the previous interview and what might have been done differently. If needed, provide structure to enhance safety. Should the next interview occur with a co-worker? In the office, etc.? Consider the logistics and ask the person what they can commit to for everyone’s safety and communicate your willingness to continue to work with the family to help them. Consult with your supervisor on next steps during the tension reduction phase.

Activity: Interview with Marti Price

1. Watch the Marti Price Video.
2. Note the strategies used to engage Marti.
3. Get into groups of 3. Each person will play the social worker and Marti and observer. The role play will last 7 minutes. The observer will give feedback and facilitate discussion for three minutes. Roles will switch at the 10-minute mark. Rounds 2 and 3 will be each 10 minutes for a total of 30 minutes for this exercise.
4. The social worker will be focusing in on the question: What needs to happen? The social worker should make a statement conveying empathy. The social worker should attempt to defuse potential conflict using the Crisis Intervention 4 Phase Model when explaining to the parents. You will be focusing on the skills of the first two stages of crisis—that of recognizing and managing anxiety and defensiveness
 - a. (For Round 1) Language of the petition to be filed (W and I Code 300(b)
WIC 300(b): The child has suffered, or there is a substantial risk that the child will suffer, serious physical harm or illness, as a result of the failure or inability of his or her parent or guardian to adequately supervise or protect the child, or the willful or negligent failure of the child's parent or guardian to adequately supervise or protect the child from the conduct of the custodian with whom the child has been left, or by the willful or negligent failure of the parent or guardian to provide the child with adequate food, clothing, shelter, or medical treatment, or by the inability of the parent or guardian to provide regular care for the child due to the parent's or guardian's mental illness, developmental disability, or substance abuse.
(For Round 2) Crystal will not be coming home right away.
 - b. (For Round 3) The court has order parents into counseling.
5. As a group, be thinking about the safety threats that would be identified during the SDM Safety Assessment to help inform the interview:
 - #1 Caregiver caused serious physical harm to the child
 - #6 Caregiver is unable to protect the child from serious harm by othersComplicating factor: Intimate Partner Violence
6. As a group think about how can defusing conflict include sharing decision making with the family.
7. The social worker should use defusing conflict strategies of the Crisis Intervention 4 Phase model. The observer will listen for and observe behaviors, nonverbal cues, questions and statements, and chart examples on the following checklist of what he/she hears and sees during the role play.
8. After the first round and debrief, the second and third teams will follow when time is called by the trainer.
9. After 3 rounds, wait for the trainer's instructions.

Directions for observer: Check the type of behavior, nonverbal or statements used and write it in the box. Be prepared to share during the debrief:

Social Worker Defusing Conflict Checklist

Behaviors of Anxiety Phase	Check (if applies)	Description or Statement
Verbal cues -relaxed, rate of speech, tone of voice		
Nonverbal cues – posture, facial expression, eye contact		
Questions or statements focusing on feelings and empathy		
Defensiveness Phase		
Managing Anger		
Nonverbal cues – personal space, standing, sitting height differential, eye contact, facial expressions		
Verbal defusing – Invite verbal expression of feelings, reflect, reframe, validate, get to underlying feelings, ignore that which isn't important		
Setting Limits		
Set limit as calm as possible		
Present choice		
If limit is set, provide rationale		
Time to leave and re-engage?		

Phase 4: Closure

- Share with family members a summary of the findings, impressions and SDM Assessments
- Seek individual responses concerning perceptions and feelings;
- Indicate interest in the shared understanding of safety and danger children and family;
- Provide information about next steps, which could include; further assessment, ongoing services to be offered, whether court intervention will occur, and/or progress on the case plan;
- Any additional steps you will take on behalf of the children and family; and
- Demonstrate appreciation for their participation in the process.

Phase 5: Re-Engagement

We are continually engaging families, youth, children, Tribes, etc., even when the families may be challenging to engage. Except for safety reasons, you will always be making the effort to make the connections with the family and support their efforts. Seek additional support on how to engage the families you are challenged by. Talk to your supervisor, a mentor, or a colleague, and/or attend training for more techniques and strategies in engaging families.

Activity: Interview with Crystal Smith

1. Watch the Crystal Smith Video.
2. Note the strategies used to re-engage Crystal.
3. Get into groups of 3. Each person will play the social worker and Crystal and observer. The role play will last 5 minutes. The observer will give feedback and facilitate discussion for 3 minutes. Roles will switch at the 8-minute mark. Rounds 2 and 3 will be each 8 minutes for a total of 25 minutes for this exercise.
4. The social worker will be focusing in on the last of the Three Questions: *What needs to happen?* When you are in the social worker role, try and make a statement conveying empathy and recognizing a strength each. Choose two solution-focused questions and be prepared to provide a rationale for using these questions in response to “Crystal.” The observer will listen for all questions and statements and chart examples of what he/she hears during the role play.
5. After the first round and debrief, the second team of the social worker role and “Crystal” role will continue the theme and content from the first interview—it builds from what was already covered in the previous interview. The third round will build on the first 2 rounds of interviews. After 3 rounds, wait for the trainer’s instructions.

Directions for observer: Check the type of question used and write it in the box. Be prepared to share during the debrief:

Social Worker Interviewing Skills Checklist

Type of Question/Statement	Check (if used)	
Empathy		
Partializing		
Past Success Questions		
Reframing		
Recognizing Strength		
Focus on Skills		
Scaling Questions		
Open Ended Question		
When rather than If question		
How Question		
Exception Finding Question		
Coping Question		
Miracle (Preferred Future) Question		
Perspective Change (Position) Question		

Resources

Academy for Professional Excellence, Public Child Welfare Training Academy

<http://theacademy.sdsu.edu/academy-resources-categories/mobile-applications/>

There are two Apps for Basic Interviewing: One is for use with the iPhone or Blackberry (it is web based and either an internet connection or data plan will allow access to information.) The other link is designed for an Android phone and can be downloaded directly to the phone.

American Professional Society on the Abuse of Children (APSAC)

<https://www.apsac.org/guidelines-form>

Child Welfare Information Gateway

<https://www.childwelfare.gov/topics/responding/ia/investigation/interviewing/>

Cooperrider, David. *Appreciative Inquiry: A Positive Revolution in Change*. Berrett-Koehler Publishers, Inc. 10/10/2005.

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Some of the content referenced in this curriculum was developed by NCCD and the Northern California Training Academy as part of the Safety Organized Practice Curriculum. Safety Organized Practice (SOP) is a collaborative practice approach that emphasizes the importance of teamwork in child welfare. SOP aims to build and strengthen partnerships with the child welfare agency and within a family by involving their informal support networks of friends and family members. A central belief in SOP is that all families have strengths. SOP uses strategies and techniques that align with the belief that a child and his or her family are the central focus, and that the partnership exists in an effort to find solutions that ensure safety, permanency, and well-being for children. Safety Organized Practice is informed by an integration of practices and approaches including:

- Solution-focused practice⁶
- Signs of Safety⁷
- Structured Decision making⁸
- Child and family engagement⁹
- Risk and safety assessment research

⁶ Berg, I.K., & De Jong, P. (1996). Solution-building conversations: co-constructing a sense of competence with clients. *Families in Society*, pp. 376-391; de Shazer, S. (1985). *Keys to solution in brief therapy*. NY: Norton; Saleebey, D. (Ed.). (1992). *The strengths perspective in social work practice*. NY: Longman.

⁷ Turnell, A. (2004). Relationship grounded, safety organized child protection practice: dreamtime or real time option for child welfare? *Protecting Children*, 19(2): 14-25; Turnell, A., & Edwards, S. (1999). *Signs of Safety: A safety and solution oriented approach to child protection casework*. NY: WW Norton; Parker, S. (2010). *Family Safety Circles: Identifying people for their safety network*. Perth, Australia: Aspirations Consultancy.

⁸ Children's Research Center. (2008). *Structured Decision Making: An evidence-based practice approach to human services*. Madison: Author.

⁹ Weld, N. (2008). The three houses tool: building safety and positive change. In M. Calder (Ed.) *Contemporary risk assessment in safeguarding children*. Lyme Regis: Russell House Publishing.

- Group Supervision and Interactional Supervision¹⁰
- Appreciative Inquiry¹¹
- Motivational Interviewing¹²
- Consultation and Information Sharing Framework¹³
- Cultural Humility
- Trauma-informed practice

¹⁰ Lohrbach, S. (2008). Group supervision in child protection practice. *Social Work Now*, 40, pp. 19-24.

¹¹ Cooperrider, D.L. (1990). Positive image, positive action: The affirmative basis of organizing. In S. Srivasta, D.L. Cooperrider and Associates (Eds.). *Appreciative management and leadership: The power of positive thought and action in organization*. San Francisco: Jossey-Bass.

¹² Miller, W.R., & Rollnick, S. (2012). *Motivational Interviewing*, (3rd Ed.). NY: Guilford Press.

¹³ Lohrbach, S. (1999). *Child Protection Practice Framework - Consultation and Information Sharing*. Unpublished manuscript; Lohrbach, S., & Sawyer, R. (2003). Family Group Decision Making: a process reflecting partnership based practice. *Protecting Children*. 19(2):12-15.