

EXPECTED OUTCOME GUIDE 2021

Consider what is preventing the parent from protecting the child from the source of danger?

Step 1: Is the barrier to protect an issue with how they think, feel, or act?	Step 2: Select the most fitting <u>Diminished Capacity</u> in one column below: think, feel or act.	Step 3: <u>Describe</u> the evidence for the selection	Step 4: Write a <u>measurable goal</u> (expected outcome) that will guide the parent to change. Consider reasonable accommodations for any disabilities.
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COGNITIVE (<u>Think</u>)	EMOTIONAL (<u>Feel</u>)	BEHAVIORAL (<u>Act</u>)
<ol style="list-style-type: none"> 1. does not plan and articulate a plan to protect the child 2. is not aligned with the child. 3. does not have adequate knowledge to fulfill care giving responsibilities and tasks 4. is not reality oriented; perceives reality inaccurately 5. does not have accurate perceptions of the child 6. does not understand his/her protective role 7. is not self-aware as a caregiver 	<ol style="list-style-type: none"> 1. cannot meet their own emotional needs 2. is not resilient as a caregiver 3. is not able to emotionally intervene to protect the child 4. is intolerant as a caregiver 5. does not display concern for the child and the child's experience and is not intent on emotionally protecting the child 6. does not have a strong bond, and the parent is not clear that the number one priority is the well-being of the child 7. does not express love, empathy and sensitivity toward the child; does not demonstrate empathy with the child's perspective and feelings 	<ol style="list-style-type: none"> 1. does not have a history of protecting 2. has not taken action 3. does not demonstrate impulse control 4. is not physically able 5. does not have/demonstrate adequate skill to fulfill care giving responsibilities 6. does not possess adequate energy 7. does not set aside her/his needs in favor of a child 8. is not adaptive as a caregiver 9. is not assertive as a caregiver 10. does not use resources necessary to meet the child's basic needs 11. does not support the child

Note: The examples below are not meant to perfectly fit your case but to provide a sample of how you would apply the concepts. Each Parents' challenges (diminished capacity's) and goals (expected outcomes) should be customized with language that fits their unique situation and understanding. Having goals be measurable is critical. Consider adding timeframes to be clear about how long a parent might need to demonstrate a change to have met the goal.

Domestic violence examples are preceded with **DV-S** for **Survivors** and **DV-AP** for **Abusive Partners**. Take care not to engage in blaming of survivors and consider how the wording of some goals may jeopardize their safety. Focus the goals for the Abusive Partner on responsibility for coercion and control while avoiding alternate excuses (substance use, mental health, impulse control) for their cognitive choice to exert control over their family.

Each Parent is connected to each identified safety threat and should have at least one challenge (diminish capacity) to protect. Each diminished capacity should have at least one corresponding goal (expected outcome) to enhance the parent's ability to control for the safety threat.

COGNITIVE (THINK)

Enhanced Capacity	Diminished Example	Expected Outcome Example
<p>1. The parent plans and articulates a plan to protect the child.</p> <p>This refers to the thinking ability that is evidenced in a reasonable, well-thought-out plan.</p> <p><u>This refers to the ability to think through, talk about, and enact a plan.</u></p>	<p>DV-S [Parent Name] did not have a plan to protect despite known risks to the child.</p>	<p>[Parent Name] will establish a clear plan with the child, including a support system for the child, that will protect the child from known threats</p>
	<p>[Parent Name] has not established a pattern of planning ahead to ensure people with unsafe behaviors are not impacting the child's safety.</p>	<p>[Parent Name] will be able to talk about the plan and demonstrate commitment to that plan for a period of (?) months.</p>
	<p>DV-AP [Parent Name] has not established a plan to protect their child from the effects of their own pattern of (substance use, violence, control, and/or mental health issues).</p>	<p>With support [Parent Name] will create (or update) a plan that includes care and safety for each child. The plan will include a support system that is aware of the pattern of controlling behaviors, who are aware of what to look for, and what actions they should take to intervene on behalf of the child.</p>

<p>2. The parent is aligned with the child. This refers to a mental state or an identity with a child. <u>This refers to having a positive understanding of the child and their situation.</u></p>	<p>DV-AP [Parent Name] does not see themselves as responsible for the child's well-being and safety.</p>	<p>[Parent Name] will be able to clearly talk about how their protective role has changed. Examples...</p>
	<p>[Parent Name] does not see their relationship with the child as a priority.</p>	<p>[Parent Name] will demonstrate prioritizing their child's relationship by spending consistent time with them, consistent phone calls and supporting them by partnering with their therapist/counselor/mentor.</p>
	<p>[Parent Name] has not demonstrated thinking of themselves as closely related to or associated with a child, therefore creating a barrier to their protective role.</p>	<p>[Parent Name] will demonstrate improved support of the child's situation by describing how the child was impacted by the threat and a commitment to supporting them.</p>
<p>3. The parent has adequate knowledge to fulfill care giving responsibilities and tasks. This refers to information and personal knowledge that is specific to protective care giving</p>	<p>[Parent Name] doesn't believe someone could present a threat to the child despite a known pattern of (sexual, physical, psychological...) abuse.</p>	<p>[Parent Name] will demonstrate they are fully aware of the offender's behavior and can clearly describe what risks and/or threats present to any child accessible to someone with those behaviors.</p>
	<p>[Parent Name] does not recognize how substance use impacts the child's safety.</p>	<p>[Parent Name] will be able to clearly describe how substance use has impacted the child and what other consequences (physical, emotional, behavioral) are common when parents struggle with substance use.</p>
	<p>[Parent Name] doesn't demonstrate the enhanced parenting skills to meet a specific child's special needs for care and safety.</p>	<p>[Parent Name] will be able to explain their understanding of the child's special needs and demonstrate parenting to those needs.</p>
<p>4. The parent is reality oriented; perceives reality accurately. This refers to mental awareness and accuracy about one's surroundings and what is happening, and the appropriateness of responses to what is real and factual.</p>	<p>[Parent Name] does not recognize when their home has become hazardous to the child's physical safety.</p>	<p>[Parent Name] will clearly describe how the home environment impacted the child's safety and what future impacts the child would face without changes.</p>
	<p>[Parent Name] does not accurately view the child's developmental limitations, which impacts their ability to protect.</p>	<p>[Parent Name] will describe how their perception of their child's developmental abilities has changed to show they understand the child's needs.</p>
	<p>DV-AP [Parent Name] views family members as objects or possessions they should control.</p>	<p>[Parent Name] will describe in detail all the tactics they have used to control the family and what harm it caused and will document how those tactics were a choice, make amends without reward, demonstrate</p>

		accepting the consequences of their choices, and stop using these identified tactics for a period of 90 days.
<p>5. The parent has accurate perceptions of the child.</p> <p>This refers to seeing and understanding a child's capabilities, needs and limitations correctly.</p>	[Parent Name] has adult expectations of the child (supervision, meals, or parenting siblings).	[Parent Name] will be able to talk about appropriate expectations for the child's developmental abilities.
	[Parent Name] has not demonstrated being accepting and understanding of a child's unique situation, limiting their role in providing protection.	[Parent Name] will demonstrate how there is improved acceptance and understanding of the child's unique situation. This can be shown by describing how things are different and improved in this area.
	[Parent Name] leaves parenting responsibility to someone not able to meet the child's needs.	[Parent Name] will identify and demonstrate what has changed in their understanding of their protective role (describe what that protective role would look like).
<p>6. The parent understands his/her protective role.</p> <p>This refers to knowing there are certain responsibilities the parent has that are specific to protecting a child.</p>	[Parent Name] sees all aspects of the child's care as the other parent's responsibility (ex. "spouse's job") and therefore not theirs.	[Parent Name] will clearly talk about how they see their protective role differently by providing examples of previously missed opportunities for support and demonstrate taking on responsibilities they have historically expected the other parent to manage.
	DV-AP [Parent Name] doesn't recognize how to protect the child from the impacts of their own pattern of controlling behavior.	[Parent Name] will accurately describe how their behaviors had an impact on their child and how those behaviors are unacceptable for parents.
<p>7. The parent is self-aware as a caregiver.</p> <p>This refers to understanding one's thinking and actions and their effects on others – on a child.</p>	[Parent Name] blames the child to avoid taking responsibility as a parent.	[Parent Name] will no longer blame the child and demonstrate taking responsibility by talking about how their own actions impacted safety.

EMOTIONAL (FEEL)

Enhanced Capacity	Diminished Capacity Example	Expected Outcome Example
<p>1. The parent is able to meet own emotional needs.</p> <p>This refers to meeting your own needs in reasonable, appropriate ways that are not dependent on or take advantage of others, in particular, children.</p>	<p>DV-S [Parent Name] does not have their own (personal or professional outside of ODHS) support system to meet their emotional needs. This impacts their ability to support the child's safety.</p>	<p>[Parent Name] will establish a sustainable support system that is meeting their own emotional needs.</p>
	<p>[Parent Name] has placed expectations on the child that their actions or inactions are responsible for the parent's emotional health.</p>	<p>[Parent Name] will be able talk about how they have depended on their child to meet their own emotional needs in the past and show how they now have the knowledge, skills, or supports in place to meet those needs independent of the child.</p>
<p>2. The parent is emotionally able to intervene to protect the child.</p> <p>This refers to mental health, emotional energy and emotional stability.</p>	<p>[Parent Name] has not addressed their own mental health needs to a degree that it has interfered with their ability to intervene or sufficiently provide for their child's safety.</p>	<p>[Parent Name] will establish supports to help address their emotional stability to a degree they can intervene on behalf of the child's safety.</p>
	<p>DV-S [Parent Name] has a pattern of using substances to deal with emotions and trauma, limiting their ability to protect.</p>	<p>[Parent Name] will establish healthy alternatives to meeting their emotional needs in place of misusing substances.</p>
	<p>[Parent Name] has been consumed by their own feelings and anxieties preventing them from providing safety for the child.</p>	<p>[Parent Name] will have a plan for managing feelings and/or anxiety so that they are emotionally available to intervene on the child's behalf.</p>
<p>3. The parent is resilient as a caregiver.</p> <p>This refers to responsiveness and being able and ready to act promptly.</p>	<p>[Parent Name] has been unable to recover quickly from setbacks or trauma resulting in not being able to act on behalf of the child's safety.</p>	<p>[Parent Name] will have a plan to engage their support system when difficulties or future trauma is present.</p>
	<p>[Parent Name] has been unable to cope with stressful situations which limits their ability to respond to the child's needs.</p>	<p>[Parent Name] will have a plan to manage stressful situations and demonstrate how they will respond to their child's needs promptly.</p>

<p>4. The parent is tolerant as a caregiver.</p> <p>This refers to acceptance, support, understanding, and respect.</p>	<p>[Parent Name] has been unable to tolerate the child's unique behaviors which limits their ability to provide safety.</p>	<p>[Parent Name] will demonstrate in words and actions that they are understanding of their child's unique behaviors.</p>
	<p>DV-AP [Parent Name] has a pattern of reacting in unsafe ways to the child's mistakes or accidents to establish and/or maintain control.</p>	<p>[Parent Name] will recognize their pattern of reactions and demonstrate multiple strategies for creating more mutual and respectful relationships and parenting practices.</p>
	<p>[Parent Name] does not value how the child feels and what they think, creating a barrier to supporting safety for the child.</p>	<p>[Parent Name] will consistently allow a child to safely express their individual thoughts and feelings separate from their parents regardless of agreement.</p>
<p>5. The parent displays concern for the child and the child's experience and is intent on emotionally protecting the child.</p> <p>This refers to being able to understand and feel some sense of responsibility for a child and what the child is going through and respond with comfort and reassurance.</p>	<p>[Parent Name] has not shown compassion for the child's circumstances which creates a barrier to support their safety.</p>	<p>[Parent Name] will describe how the child was impacted by the safety threat and demonstrate how they are supporting them now and into the future.</p>
	<p>DV-AP [Parent Name] has not been invested in the child's sense of safety and security.</p>	<p>[Parent Name] Will acknowledge how their (specific actions) impacted the child and will be invested in supporting the child's sense of safety and security.</p>
<p>6. The parent and child have a strong bond, and the parent is clear that the number one priority is</p>	<p>[Parent Name] has chosen living situations (unsafe people or environments) that compromise the child's safety.</p>	<p>[Parent Name] will show that their living situation prioritizes the child's safety.</p>
	<p>DV-AP [Parent Name] has not established a reasonable attachment with the child to a degree it impacts their protective role.</p>	<p>[Parent Name] will create a plan to spend significant time with the child to strengthen the relationship and</p>

<p>the well-being of the child.</p> <p>This refers to a strong attachment that places a child's interest above all else.</p>		<p>attachment. They will demonstrate commitment to that plan for (a period of time).</p>
<p>7. The parent expresses love, empathy and sensitivity toward the child; experiences specific empathy with the child's perspective and feelings.</p> <p>This refers to active affection, compassion, warmth and sympathy.</p>	<p>DV-AP [Parent Name] has not been able to relate to the child's trauma responses (acting out, depression, violence, bullying...), creating a barrier to support their emotional safety.</p>	<p>[Parent Name] will learn about the impact of the trauma the child has experienced and show concern, kindness, and support for the child's point of view.</p>
	<p>[Parent Name] does not show sensitivity or care as it relates to the child's trauma or experiences.</p>	<p>[Parent Name] will learn how to support the child's specific experiences. Will demonstrate regular and consistent parenting time where they are observed to show concern, kindness, and support for the child's point of view.</p>

BEHAVIORAL (ACT)

Enhanced Capacity	Diminished Capacity Example	Expected Outcome Example
<p>1. The parent has a history of protecting.</p> <p>This refers to a person with many experiences and events in which they have demonstrated clear and observable evidence of having been protective.</p>	<p>DV-AP [Parent Name] has a long-term pattern of intentionally endangering their children and/or disregarding their safety.</p>	<p>[Parent Name] will develop a sustainable accountability plan identifying thinking errors with an established support network to protect the children. They will demonstrate change and commitment to those protective plans over a period of time.</p>
	<p>[Parent Name] has a pattern of not seeking safe assistance from others and/or separating their children from danger.</p>	<p>[Parent Name] will demonstrate seeking safe assistance from others and/or separating the children from danger over a period of time.</p>
<p>2. The parent takes action.</p> <p>This refers to a person who is proactive as a human being, not just a caregiver.</p>	<p>[Parent Name] has been unable to act when necessary to protect their child from unsafe situations and people.</p>	<p>[Parent Name] will demonstrate a willingness and an ability to take action by protecting their child from unsafe situations and people.</p>
	<p>[Parent Name] has had a plan to protect but did not follow through with those plans and the child was abused.</p>	<p>[Parent Name] will re-assess their plan while demonstrating action that results in the child being safe.</p>
	<p>[Parent Name] knew that the child was in an unsafe situation and did not intervene.</p>	<p>[Parent Name] will recognize unsafe situations and demonstrate skills to intervene to ensure safety.</p>
<p>3. The Parent demonstrates impulse control.</p> <p>This refers to a person who is deliberate and careful; who acts in managed and self-controlled ways.</p>	<p>[Parent Name] demonstrates a pattern of behavior (consider describing parent specific pattern) without considering the potential negative impacts on the child, leaving them in unsafe situations.</p>	<p>[Parent Name] will describe how their patterns of unsafe behavior impacted the child and demonstrate an ability to plan for their safety.</p>
	<p>[Parent Name] has a pattern of acting without considering the consequences to the child.</p>	<p>[Parent Name] will consistently demonstrate responding to their children's needs before responding to their own needs.</p>

<p>4. The parent is physically able.</p> <p>This refers to people who are sufficiently healthy, mobile and strong.</p>	<p>[Parent Name] lacks a plan and/or supports to physically provide safe boundaries for the child's physical safety.</p>	<p>[Parent Name] will demonstrate that they have a plan and/or supports to ensure the child's physical safety.</p>
<p>5. The parent has/demonstrates adequate skill to fulfill care giving responsibilities.</p> <p>This refers to the use of skills related to being a protective parent.</p>	<p>[Parent Name] has been unable to respond to the child's cues for hunger and other basic care needs.</p>	<p>[Parent Name] will demonstrate an ability to meet the child's basic care needs and know what is appropriate for the child's stage of development.</p>
	<p>[Parent Name] has demonstrated a lack in necessary skills to make decisions for the child's safety.</p>	<p>[Parent Name] will demonstrate learned skills to make decisions for the child's safety.</p>
	<p>[Parent Name] has been unable to demonstrate they can feed, clean, maintain, guide, shelter as needed to provide basic safety for the child.</p>	<p>[Parent Name] will demonstrate they can feed, clean, maintain, guide, shelter as needed to provide basic safety for the child.</p>
<p>6. The parent possesses adequate energy.</p> <p>This refers to the motivation necessary to be ready and on the job of being protective.</p>	<p>[Parent Name] has lacked the physical energy to move to protect the child in a timely manner.</p>	<p>[Parent Name] will have enacted a plan to increase their energy to protect the child.</p>
	<p>[Parent Name] has lacked motivation to take action to keep the child safe.</p>	<p>[Parent Name] will demonstrate increased motivation by taking direct actions to protect the child.</p>
<p>7. The parent sets aside their needs in favor of a child.</p>	<p>[Parent Name] has a pattern of making choices that benefit them at the cost of their child's safety.</p>	<p>[Parent Name] will make choices that show they are placing their child's needs above their own.</p>

<p>This refers to people who can delay gratifying their own needs, who accept their children's needs as a priority over their own.</p>	<p>[Parent Name] has unsafe relationships that negatively impacts the child's safety.</p>	<p>[Parent Name] will place their child's safety first by setting healthy boundaries in their relationships.</p>
<p>8. The parent is adaptive as a caregiver.</p> <p>This refers to people who adjust and make the best of whatever caregiving situation occurs.</p>	<p>DV-AP [Parent Name] has demonstrated rigid parenting which limits their ability to meet the child's needs.</p>	<p>[Parent Name] will demonstrate using new parenting skills and approaches that show mutual respect and rapport with the child.</p>
	<p>[Parent Name] does not adapt to new and unfamiliar situations which impact the child's safety.</p>	<p>[Parent Name] will adapt to new and unfamiliar situations to ensure the child's safety.</p>
<p>9. The parent is assertive as a caregiver.</p> <p>This refers to being persistent.</p>	<p>[Parent Name] has known about the need to intervene to keep their child safe and yet has been unable to act.</p>	<p>[Parent Name] will demonstrate intervening to protect the child by [provide details].</p>
	<p>DV-S Impacts from a controlling relationship have diminished [Parent Name] ability to keep their child safe.</p>	<p>[Parent Name] will develop a support system and a plan that can instill confidence in making protective decisions for the child.</p>
	<p>[Parent Name] has been uncertain about their role or ability to intervene in unsafe situations in the custodial parent's home.</p>	<p>[Parent Name] will describe how their previously viewed role impacted the child and will actively engage in ensuring child safety.</p>
<p>10. The parent uses resources necessary to meet the child's basic needs.</p>	<p>DV-S [Parent Name] does not have a support system (people) to help when they are struggling to meet the child's basic needs.</p>	<p>[Parent Name] will establish a support system consisting of natural and/or professional people who understand the situation and are prepared to assist in meeting the child's basic needs.</p>
	<p>[Parent Name] is isolated from community supports (list specifics: family, friends, community, faith based) that can help with concrete needs.</p>	<p>[Parent Name] will demonstrate connection to community supports that improve their ability to address the family's specific needs.</p>

<p>This refers to knowing what is needed, getting it and using it to keep a child safe.</p>	<p>DV-S A controlling and/or violent partner prevents [Parent name] from sharing important information with their established support system (family, friends, sponsor...), which impedes safety.</p>	<p>[Parent Name] will enhance safety by reconnecting with their support system and creating a plan of how they can assist in ensuring safety in the future.</p>
<p>11. The parent supports the child.</p> <p>This refers to consistently being aware and encouraging of a child's psychological, physical and social wellbeing.</p>	<p>[Parent Name] has spent limited time with the child and lacks awareness of their psychological, physical, and social needs.</p> <p>[Parent Name] has not supported the child's disclosure of abuse impacting their psychological, physical and/or social wellbeing.</p> <p>[Parent Name] has not supported the child's expression of their sexual orientation or gender identity which has negatively impacted the child's psychological, physical, and social wellbeing.</p>	<p>[Parent Name] will demonstrate being consistently involved in the child's life and will increase awareness of their psychological, physical, and social needs.</p> <p>[Parent Name] will demonstrate support for the child's disclosure of abuse.</p> <p>[Parent Name] will demonstrate support of the child's expression of their sexual orientation or gender identity.</p>

Process Example (Ideally developed between Preparation and Agreement Meeting (Stage 3 Protective Capacity Assessment))

1. Safety Threat

Impending Danger Safety Threats	Ongoing Safety Plan	Conditions for Return		
Manage Impending Danger Safety Threat(s), including how the plan will be monitored. View				
<p>Mr. Smith's pattern of substance use exposes the children to dangerous paraphernalia and a lack of supervision.</p>				
Safety Service Provider	Safety Service	Frequency	Start Date	Delete
Search			00/00/0000	

2. Diminished Capacity

Department of Social Services		EXPECTED OUTCOME GOALS	
Consider what is preventing the parent from protecting the child.			
What is the most significant barrier to protect the child from an issue with how they think, feel, or act?		Step 2: Select the most fitting Diminished Capacity in one column below: think, feel or act.	Step 3: Describe the event for the selection.
COGNITIVE (Think)		EMOTIONAL (FEEL)	
1. does not plan and articulate a plan to protect the child	1. cannot meet their own emotional needs	2. is not resilient as a caregiver	2. is not able to emotionally intervene to protect the child
2. is not aligned with the child.	3. does not have adequate knowledge to fulfill care giving responsibilities and tasks	3. is intolerant as a caregiver	3. is not able to emotionally intervene to protect the child
3. does not have adequate knowledge to fulfill care giving responsibilities and tasks	4. is not reality oriented, perceives reality inaccurately	4. is intolerant as a caregiver	4. is intolerant as a caregiver
4. is not reality oriented, perceives reality inaccurately	5. does not have accurate perceptions of the child	5. does not display concern for the child and the child's experience and is not engaged in emotionally protecting the child	5. does not display concern for the child and the child's experience and is not engaged in emotionally protecting the child

3. Family Report

Challenge - Diminished Capacity:	Goal - Expected Outcome:	Progress:
<p><i>The parent is not reality oriented.</i> Mr. Smith reports his substance use is not a problem despite multiple episodes of child welfare involvement, a pattern of criminal charges, and multiple impacts to his children.</p>	<p>Mr. Smith will demonstrate he understands how his substance use impacted his children. He will be able to describe those impacts and what other potential harm could occur with continued use.</p>	<p>Mr. Smith has recently engaged in services that support learning about the impacts of parent substance use on children but still denies any harm to his own children.</p>