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MEMORANDUM

To: Jenny Gordon, Ramsey County
From: Lorrie L. Lutz, L³ P Associates, LLC
Date: February 22, 2010
Re: Signs of Safety

Hi Jenny—

Below please find my analysis of Signs of Safety and our enhanced SDM Safety Assessment Practice Model. In order to create this document I reviewed four articles on Signs of Safety, two presentations made by Andrew Turnell and five case examples. I have also heard Turnell speak several times. This helped me to understand the focus and goals of the Signs of Safety approach.

As you will be able to tell from the table below—I found the similarities quite remarkable. Turnell may use different language but the practice expectations are exactly the same. What I especially liked is that the Signs of Safety model is designed to work as a companion to a risk assessment tool –just as our Model work is designed to augment and support a more effective use of the SDM.

If you have any questions, please do not hesitate to contact me!

Signs of Safety	Enhanced SDM Practice Model
Emphasizes moving from paternalism to partnership that promotes collaboration and cooperation between the worker and the family.	Emphasizes family engagement – making it clear that family engagement has a direct correlation to child safety.
Suggests that a risk assessment is too narrow a construct and that we must	Focuses on a broad assessment of family functioning, exploring family

Signs of Safety	Enhanced SDM Practice Model
move to a more comprehensive assessment that looks at family strengths, capacities and ways that the family is currently keeping the children safe as well as current signs of danger in the family system.	strengths, protective capacities as well as behaviors that are currently resulting in children being/in danger of being harmed.
Demands some level of “professional judgment”.	Demands critical thinking and analysis as part of the decision making process.
Asks that workers make a clear eyed assessment of child danger without dehumanizing or demonizing the parents.	Asks that workers make an informed assessment of child safety in a way that fully engages the family in understanding why their children are unsafe and what needs to happen in order for their children to be safe. Emphasizes that engaging families and building on what they are already doing right promotes long term behavioral change.
Looks at patterns and severity of maltreatment and at the same time looks at ways that the family is functioning well—in a manner that is protective.	Looks at patterns and severity of maltreatment—also looks at ways that the family is functioning well, specifically seeking to identify protective capacities that can be mobilized immediately to keep children safe.
Seeks to understand the underlying causes of behavior so that interventions are focused and clear to families.	Seeks to link the information “the golden thread” between the safety assessment and the family functional assessment so that the interventions are focused on changing the behaviors or conditions that resulted in children being unsafe or at high risk of future harm.
Uses scaling questions to understand safety threats to children.	Uses an array of solution focused, strength focused questions to assess if the child is at risk of being harmed, or if the child is unsafe. Model emphasizes a continuum from at risk to unsafe—using the presence of the Danger Threshold criteria to clearly differentiate between being at risk and being unsafe.
Designed to be used alongside a traditional risk assessment instrument.	Designed to augment and support a more effective use of the SDM.
Generates action/ideas from family on	Builds in focused and specific safety

Signs of Safety	Enhanced SDM Practice Model
how to keep children safe.	planning, requiring intensive family/kin voice and involvement in order to design a safety plan that controls and manages the safety threats identified.
Seeks to align goals of family and goals of the child protection agency.	Seeks to engage family in the process of keeping their own children safe. Seeks to create alignment between family members and kin about what is needed for children to be safe.