



## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

Case Name: Morgan, Sara

Worker Name: Wilson, Mitchell

FSFN Case ID: 123456

Initial Intake Received Date: 4/14/xx

Date Completed: 5/16/xx

Intake/Investigation ID: 456789

#### I. MALTREATMENT AND NATURE OF MALTREATMENT

What is the extent of the maltreatment? What surrounding circumstances accompany the alleged maltreatment?

Hotline Report: There is a concern for environmental hazards in the home. On 4/14/xx law enforcement made an arrest on the home due to possession of methamphetamine and possession of drug paraphernalia. The child resides in the home with the mother and her significant other.

Maltreatment: Sara Morgan has a long history of substance use, to include injection of methamphetamine and abuse of prescription medications. Sara Morgan has been abusing methamphetamine off and on for the past three years, including when her son, Marcus Morgan, was born. Sara Morgan has been involved with the Department three times in the past three years. Two reports have been received in the last year with concerns regarding substance misuse and neglect of Marcus. Both reports were closed with being unable to locate the family, due to their transience and lack of contact with supports. The first report on the family was received when Marcus was born. Marcus was born drug exposed, positive for methamphetamine. The case was eventually closed, with Sara completing substance abuse treatment and successfully engaging in case management services. Marcus has had residual complications from his drug exposure, including suffering from severe asthma. Marcus Morgan, upon contact, was found to be residing in a the home with Sara Morgan and her significant other, Sam Smith, who were both using methamphetamine and where there were concerns that methamphetamine was being manufactured. Marcus Morgan was medically seen upon initial contact and was medically cleared for exposure to substances, in particular methamphetamine. However it was noted that his asthma was not being treated and he did require a nebulizer treatment before being medically cleared. Sara Morgan, upon initial contact, was observed with fresh needle tracks in her arms and openly admitted to injecting methamphetamine while caring for Marcus. The home owners, unrelated to the case, were arrested for drug possession and probation violation. Neither Sara or Sam were arrested at the time of contact.

Verified maltreatment for substance misuse with Sara Morgan as the maltreating caregiver.

Nature of Maltreatment: Sara Morgan began using methamphetamine approximately three years ago. Sara has had periods of time where she has been sober, with the last time being when Marcus was 2 years old. Sara began using methamphetamine approximately one year ago, after having started using prescription medications following a car accident the year prior. Sara met her significant other, Sam Smith, via some friends and when Sara was not able to obtain more prescription medications, she and Sam transitioned to methamphetamine. Sara's drug use has been pervasive throughout her life and she has had approximately three treatment attempts, with only one where she successfully completed treatment. Sara does not provide an reason for her use, other than it makes her feel better about herself and that she has fun with friends when she is using. Sara's family believes that her use is related to a childhood trauma, as she was raped when she was in high school and it was shortly after that time that she started using drugs.



# FLORIDA SAFETY DECISION MAKING METHODOLOGY

## Information Collection and Family Functioning Assessment

Marcus has been witness to Sara's drug usage, and when she is heavily into her use, Marcus is often left to caretake himself or Sara will leave him with various friends, also known to abuse substances. Sara does not believe that her use has affected her relationship or caretaking of Marcus, despite Marcus having a speech delay due to little to no interaction with others and also his asthma being unmanaged. Marcus had not received a nebulizer treatment in over a month, and there were no inhalers located in the home for Marcus. Sara and Marcus have primarily been homeless the past year; spending time at various houses throughout the area and having infrequent contact with Sara's family.

Analysis: Sara Morgan's pervasive substance abuse has resulted in her inability to properly and safely care for Marcus. Due to Sara's substance use, Marcus's medical needs have gone unmet, as well as his developmental needs. Sara lacks insight into the affects of her substance towards Marcus, as well as her own functioning. Sara has isolated herself and Marcus from her family, who are aware of her substance use, and has been living a life of frequent moves and instability for Marcus that has resulted in Marcus being unsafe while being cared for by Sara.

| Related Impending Danger Threats   | Impending Danger Threat? |                                     |
|--|--------------------------|-------------------------------------|
|  | Yes                      | No                                  |
| Based on case information specific to the Extent of Maltreatment and Circumstances Surrounding Maltreatment Assessment domains, indicate Yes, Impending Danger exists or No, Impending Danger does not exist.  |                          |                                     |
| Parent's/Legal Guardian's or Caregiver's intentional and willful act caused serious physical injury to the child, or the parent/legal guardian or caregiver intended to seriously injure the child.  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Child has a serious illness or injury (indicative of child abuse) that is unexplained, or the Parent's/Legal Guardian's or Caregiver's explanations are inconsistent with the illness or injury.   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| The child's physical living conditions are hazardous and a child has already been seriously injured or will likely be seriously injured. The living conditions seriously endanger the child's physical health.   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| There are reports of serious harm and the child's whereabouts cannot be determined and/or there is a reason to believe that the family is about to flee to avoid agency intervention and/or the family refuses access to the child to assess for serious harm. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Parent/Legal Guardian or Caregiver is not meeting the child's essential medical needs AND the child is has already been seriously harmed or will likely be serious harmed.   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other.<br>Explain:   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

## II. CHILD FUNCTIONING

How does the child function on a daily basis? Include physical health, development; emotion and temperament; intellectual functioning; behavior; ability to communicate; self-control; educational performance; peer relations; behaviors that seem to provoke parent/caregiver reaction/behavior; activities with family and others. Include a description of each child's vulnerability based on threats identified.

Marcus is a three year old caucasian male, who was diagnosed with asthma when he was approximately 8 months old. His diagnosis was made following a severe asthma attack that required him to be hospitalized. Marcus requires an inhaler and nebulizer treatments daily to manage his asthma. Marcus has never attended day care or pre-school. He has had limited interaction with children his own age, and his speech is indicitve of a child closer to 18 months to 2 years than that of a soon to be four year old. Marcus also is still not fully potty trained and often has accidents in the night and late afternoons.

## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

Marcus has had little routine in his life the past three years. There is no set bedtime or nap time and meals are often when either Marcus finds food in the house or Sara is coherent enough to feed Marcus. Despite the irregular routine, Marcus is of average height and weight.

Marcus is eager to please those around him and appears comfortable with adults, even strangers.

Sara believes that Marcus's ease with others is a positive and describes Marcus as a good child who does not give her any problems. Sara views Marcus's independent nature as a way to instill good values. Sara is unconcerned regarding Marcus's speech delays and does not feel that his asthma has been unmanaged.

Analysis: Marcus is a very pleasant 3 year old child who has developmental delays that appear to be inorganic in nature and related to neglect by his mother. Marcus, while developmentally delayed in speech, is advanced in other areas, such as his ability to feed himself and entertain himself. Marcus's lack of structure, in particular his parenting, has had a negative affect on his development.

#### Related Child Functioning Impending Danger Threats:

Based on case information specific to the Child Functioning Assessment domain, indicate Yes, Impending Danger exists or No, Impending Danger does not exist.

| Impending Danger Threat? |    |
|--------------------------|----|
| Yes                      | No |

Child shows serious emotional symptoms requiring intervention and/or lacks behavioral control and/or exhibits self-destructive behavior that the Parent/Legal Guardian or Caregiver are unwilling or unable to manage to keep the child safe

|                          |                                     |
|--------------------------|-------------------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|--------------------------|-------------------------------------|

### III. ADULT FUNCTIONING

How does the adult function on a daily basis? Overall life management. Include assessment and analysis of prior child abuse/neglect history, criminal behavior, impulse control, substance use/abuse, violence and domestic violence, mental health; include an assessment of the adult's physical health, emotion and temperament, cognitive ability; intellectual functioning; behavior; ability to communicate; self-control; education; peer and family relations, employment, etc.

Sara Morgan, age 25, was born in Miami and grew up in Melbourne Beach. Sara's parent were married for 18 years, and divorced when she was in high school. The divorce was hard on Sara, as she felt that her mother had betrayed her father when she left him. Sara resided with her mother following the divorce and has had little contact with her father since after graduation. Sara is her parents only child together, although Sara has two half siblings from her mother's second marriage.

Sara completed high school, although she did attend an alternative school for her senior year. The decision to attend the alternative school was made after Sara was raped by a fellow classmate at her high school. The classmate was charged and arrested, however the charges were later dropped. This event is significant in Sara's life, as she felt that she was let down by the school as well as the cops. Sara's mother was very supportive of Sara, however Sara felt that part of her mother blamed her for the rape. Sara was raped at a party where she was drinking and where Sara did not have permission to attend. Sara was in counseling for a brief period of time, however stopped going once the charges were dropped.

During her senior year Sara was introduced to marijuana by some friends that attended the alternative high school. Sara felt that the marijuana helped her to deal with everything that was going on in her life and



## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

made her less angry at her mother. Following high school Sara moved in with some friends in Orlando to attend school. Sara was working part time and going to a trade school in Orlano, it was there that she was introduced to methamphetamine. Sara reports being instantly hooked on the meth. She loved the way it made her feel, and the energy it gave her. Sara soon dropped out of school and lost her housing in Orlando. It was during this time that she met Marcus's dad at a party through some friends and she became pregnant after a one night stand. Sara had little to no prenatal care and no one in her family knew that she was pregnant.

Marcus was born and immediately placed with the maternal grandmother, Lisa Wells. This was done through an investigation with DCF. Sara initially was very angry with her mother and the agency, however did work hard to get Marcus back. She attempted treatment two times in the first six months and left both times and relapsed. It was her third attempt at treatment that she was successful and was able to get Marcus back.

Sara felt that her mom was a great support during this time and she moved in with her mom and Marcus following treatment. Sara felt that things were going well with her and Marcus. She was working part time and Marcus was doing well. Living with her mom was stressful at times, but she felt that it was the best place for her. Lisa Wells identifies this time as one of growth for Sara and felt that Sara had finally "conquered" her demons.

When Marcus was two, Sara was involved in a severe car accident where she was prescribed pain medication. Sara reports that she thinks that was the beginning to her use, as she felt that she relied upon the pain medication to get by everyday. It was during this time that she met Sam Smith and he introduced her back to methamphetamine. She and Marcus left her mother's home before her mother could tell that she was using again and before things got "out of hand". She did not want her mother to take Marcus from her, so she left. Since that time, Sara's life has been out of control. She has not held a job in over an year, she has been caught shoplifting and stealing from family to support her addiction. She has had little to no contact with her family, other than breaking into their homes when they are at work. Marcus and Sara have been residing in various houses throughout the Melbourne and Orlando area. Sara increased her substance use from smoking methamphetamine to injecting, as she felt that she had built up a tolerance to smoking. Her relationship with Sam Smith is one of convenience, as he often supplies her with drugs and a place to stay.

Analysis: Sara Morgan's life is out of control due to substance use. While Sara has had periods of time where she was able to manage her addiction, currently her and her son's life is one that is chaotic in nature and where Sara has isolated herself from her supports. Sara does not have a home, income, or stable lifestyle due to her substance use.

Related Adult Functioning Impending Danger Threats:

Impending  
Danger Threat?



## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

| Based on case information specific to the Adult Functioning Assessment domain, indicate Yes, Impending Danger exists or No, Impending Danger does not exist.  | Yes                                 | No                       |
|---|-------------------------------------|--------------------------|
| Parent/Legal Guardian or Caregiver is violent, impulsive, cannot or will not control behavior or is acting dangerously in ways that have seriously harmed the child or will likely seriously harm to the child. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### IV. PARENTING

General – What are the overall, typical, parenting practices used by the parents/legal guardians? Discipline/Behavior Management – What are the disciplinary approaches used by the parents/legal guardians, and under what circumstances?

Sara Morgan has had little periods of time in her parenting of Marcus where she has been sober, therefore her parenting is inconsistent in nature. Sara had not ever considered having children, but is happy to have Marcus. She at times feels frustrated with her situation, as a single parent, but knows that that is not Marcus's fault.

Sara acknowledges that she handles things differently with Marcus now, as compared to when she was living with her mom. When Sara was sober, she felt that she was a good mom. She provided Marcus with structure, they had a routine, they went to the park and had play dates with some of her friends children. Marcus's needs she felt were being met with the help of her mom, including keeping up with Marcus's asthma treatments.

Sara's parenting now, she describes as just trying to get through the day. She views Marcus as being able to handle more now, so she thinks that he is fine spending time by himself. She avoids interaction with her friends and family, which as decreased Marcus's interaction with other children.

Analysis: When sober, Sara's parenting style and focus were on Marcus's and his needs, however when Sara is using her parenting is absent and non-engaged. Sara is not able to place her needs above Marcus's and while does acknowledge that her use has impacted her parenting, does not take any action to place Marcus in a safe environment, despite having the resources to do so.

| Related Parenting Impending Danger Threats:   | Impending Danger Threat?            |                                     |
|---|-------------------------------------|-------------------------------------|
| Based on case information specific to the Parenting General and Parent Discipline Assessment domains, indicate Yes, Impending Danger exists or No, Impending Danger does not exist.                               | Yes                                 | No                                  |
| Parent/Legal Guardian or Caregiver is not meeting child's basic and essential needs for food, clothing, and/or supervision AND the child is/has already been seriously harmed or will likely be seriously harmed. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Parent/Legal Guardian or Caregiver is threatening to seriously harm the child and/or parent/legal guardian or caregiver is fearful he/she will seriously harm the child.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Parent/Legal Guardian or Caregiver views child and/or acts toward the child in extremely negative ways AND such behavior has or will result in serious harm to the child.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

#### V. PARENT/LEGAL GUARDIAN PROTECTIVE CAPACITIES ANALYSIS

*If there are more than five Parent/Legal Guardians to assess, complete Appendix A – Parent/Legal Guardian Protective Capacities Analysis*

| Adults | Capacity Categories and Types |           |           |
|--------|-------------------------------|-----------|-----------|
|        | Behavioral                    | Cognitive | Emotional |

## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

|             | Controls Impulses | Takes Action | Sets aside own needs for child | Demonstrates adequate skills | Adaptive as a Parent/Legal Guardian | Is self aware | Is intellectually able | Recognizes threats | Recognizes child's needs | Understands protective role | Plans and articulates plans for protection | Meets own emotional needs | Is resilient | Is tolerant | Is stable | Expresses love, empathy, sensitivity to the child | Is positively attached with child | Is aligned and supports the child |
|-------------|-------------------|--------------|--------------------------------|------------------------------|-------------------------------------|---------------|------------------------|--------------------|--------------------------|-----------------------------|--|---------------------------|--------------|-------------|-----------|---|-----------------------------------|-----------------------------------|
| Sara Morgan | No                | No           | No                             | Yes                          | No                                  | Yes           | Yes                    | No                 | Yes                      | No                          | No   | No                        | Yes          | Yes         | No        | Yes   | Yes                               | Yes                               |
|             | Yes               | Yes          | Yes                            | Yes                          | Yes                                 | Yes           | Yes                    | Yes                | Yes                      | Yes                         | Yes  | Yes                       | Yes          | Yes         | Yes       | Yes   | Yes                               | Yes                               |
|             | Yes               | Yes          | Yes                            | Yes                          | Yes                                 | Yes           | Yes                    | Yes                | Yes                      | Yes                         | Yes  | Yes                       | Yes          | Yes         | Yes       | Yes   | Yes                               | Yes                               |
|             | Yes               | Yes          | Yes                            | Yes                          | Yes                                 | Yes           | Yes                    | Yes                | Yes                      | Yes                         | Yes  | Yes                       | Yes          | Yes         | Yes       | Yes   | Yes                               | Yes                               |
|             | Yes               | Yes          | Yes                            | Yes                          | Yes                                 | Yes           | Yes                    | Yes                | Yes                      | Yes                         | Yes  | Yes                       | Yes          | Yes         | Yes       | Yes   | Yes                               | Yes                               |

#### Parent/Legal Guardian Protective Capacity Determination Summary:

**Yes      No**

Protective capacities are sufficient to manage identified threats of danger in relation to child's vulnerability?

☐      ☒

## VI. CHILD SAFETY DETERMINATION AND SUMMARY

*If there are more than five children to assess, complete Appendix B – Child Safety Determination and Summary*

| Child         | Safety Determination  |
|---------------|---|
| Marcus Morgan | <input type="checkbox"/> Safe – No impending danger safety threats that meet the safety threshold.<br><input type="checkbox"/> Safe – Impending danger threats are being effectively controlled and managed by a parent/legal guardian in the home.<br><input checked="" type="checkbox"/> Unsafe |
|               | <input type="checkbox"/> Safe – No impending danger safety threats that meet the safety threshold.<br><input type="checkbox"/> Safe – Impending danger threats are being effectively controlled and managed by a parent/legal guardian in the home.<br><input type="checkbox"/> Unsafe            |
|               | <input type="checkbox"/> Safe – No impending danger safety threats that meet the safety threshold.<br><input type="checkbox"/> Safe – Impending danger threats are being effectively controlled and managed by a parent/legal guardian in the home.<br><input type="checkbox"/> Unsafe            |
|               | <input type="checkbox"/> Safe – No impending danger safety threats that meet the safety threshold.<br><input type="checkbox"/> Safe – Impending danger threats are being effectively controlled and managed by a parent/legal guardian in the home.<br><input type="checkbox"/> Unsafe            |
|               | <input type="checkbox"/> Safe – No impending danger safety threats that meet the safety threshold.<br><input type="checkbox"/> Safe – Impending danger threats are being effectively controlled and managed by a parent/legal guardian in the home.<br><input type="checkbox"/> Unsafe            |





# FLORIDA SAFETY DECISION MAKING METHODOLOGY

## Information Collection and Family Functioning Assessment

### Child Safety Analysis Summary:

Marcus Morgan has spent the last year of his life moving from home to home with his mother who is addicted to methamphetamine. During this time his medical needs and daily needs are often unmet and his mother is frequently unavailable to take care of him. Marcus has adapted to his life with his mother through feeding himself and entertaining himself while his mother is abusing methamphetamine. The environments that he has resided in are often frequented by other addicts and household environments that present a danger to Marcus due to his asthma. Sara's use is daily, often times frequently injecting methamphetamine multiple times a day. When under the influence her actions are erratic and are focused on her needs rather than those of Marcus. The lack of supervision and her erratic behavior have left Marcus in danger frequently throughout the past year. Sara has a strong support network, with her mother and siblings, that are able and willing to assist in the care of Marcus and Sara.

### VII. IN-HOME SAFETY ANALYSIS AND PLANNING

|  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| The Parent/Legal Guardians are willing for an in-home safety plan to be developed and implemented and have demonstrated that they will cooperate with all identified safety service providers. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| The home environment is calm and consistent enough for an in-home safety plan to be implemented and for safety service providers to be in the home safely.                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Safety services are available at a sufficient level and to the degree necessary in order to manage the way in which impending danger is manifested in the home.                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| An in-home safety plan and the use of in-home safety services can sufficiently manage impending danger without the results of scheduled professional evaluations.                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| The Parent/Legal Guardians have a physical location in which to implement an in-home safety plan.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

If "Yes" to all of SECTION VII. above – Child(ren) will remain in the home with an In-Home Safety Plan

#### ☐ In-Home Safety Plan

The child(ren) is/are determined "unsafe," but through in-home safety analysis above, an in-home Impending Danger Safety Plan is executed which allows a child to remain in the home with the use of in-home safety management and services in order to manage the way in which impending danger is manifested in the home while treatment and safety management services can be determined and initiated.

- ❖ A safety plan must be implemented, monitored, and actively managed by the Agency.
- ❖ The case will be opened for safety management and case management services

If "No" to any of SECTION VII. above – Out of Home Safety Plan is the only protective intervention possible for one or more children. Out of Home Safety options should be evaluated from least intrusive (e.g. family-designated arrangements as a task or condition of the Out of Home Safety Plan) to most intrusive (e.g. agency removal and placement).

Given family dynamics and circumstances, also evaluate and determine if In-Home Safety Plan needs judicial oversight to facilitate court accountability. Refer to administrative code and operating manual for guidance.

#### ☒ Out-of-Home Safety Plan



## FLORIDA SAFETY DECISION MAKING METHODOLOGY

### Information Collection and Family Functioning Assessment

- ❖ An impending danger safety plan must be implemented, monitored, and actively managed by the Agency.
- ❖ The case will be open for safety management, case management, and reunification services

**If an Out-of-home Safety Plan is necessary, summarize reason for out of home safety actions and conditions for return. Conditions for return should be related to reasons for removal and behaviorally based. These are parent/legal guardian actions and behaviors that must be demonstrated to sufficiently address the impending danger and allow for the child to safely return home with an In Home Safety Plan and continued safety and case plan services and management.**

Currently Sara Morgan is homeless. She has been offered the assistance of her mother in providing her and her son Marcus a place to reside. This would allow for the family to remain together and for an in home safety plan to be developed with the family, however Sara Morgan has refused to engage in the development of an in home safety plan through the use of her mother's residence. Without a residence, an in home safety plan cannot be developed for Marcus.

The conditions for return are as follows:

Sara Morgan has demonstrated a willingness for an in home safety plan to be developed through obtaining reliable, sustainable, consistent residence in which to put an in-home safety plan in place. In addition there is enough of an understanding regarding the home environment, dynamics of potential other household members and caregiver functioning that in-home safety services can sufficiently supervise and monitor the situation and/or manage behavior and/or manage stress and/or provide basic parenting assistance.