

Enhancing Safety: Current Safety Plan



STEPS
SUPERVISION TO ENHANCE
PRACTICE STUDY | WASHINGTON

BEHAVIORAL REHEARSAL GUIDELINES

Shannon Dorsey, PhD | University of Washington | dorsey2@uw.edu

Remember approximately 5-10 minutes. Do not review the goals of the behavioral rehearsal task. This is meant to provide an estimate of clinician fidelity for this component. Do not interrupt the therapists rehearsing to provide feedback. After the rehearsal, provide feedback on strengths and needed improvements.

PROMPT FOR THERAPIST

Please show me how you would develop a safety plan for a current real or perceived safety concern with this case. You can meet with child and/or parent, separately or together, to gather needed information and develop the plan.

SUPERVISOR INSTRUCTIONS

You play the child and/or parent, as needed.

EXPECTATIONS

- * **Identifies**/clearly states a current/ongoing safety concern
 - Could be from child/caregiver report or therapist observation/perspective
- * Clarifies **specifically what situations/settings** might warrant a plan
 - E.g., School, neighborhood, home, if step father becomes violent or threatening
- If relevant, **identifies protective factors** already in place
 - E.g., restraining order; parole; school security policies; things parent is doing
- * **Identifies/brainstorms new child behaviors**/other steps that could support safety. E.g., involving safe adults/authorities; IDing/avoiding known dangerous situations; taking steps to improve safety (not walking after dark); telling trusted adults about events afterward if not preventable
- Identifies **coping strategies**, if relevant, to support safety/better decision making/steps to improve safety
- * Has child **practice** some safety plan behaviors in session, as appropriate
- * **Includes caregiver or others**, as appropriate, to evaluate concerns and support the plan
- Talks about plan without implying that child should have prevented past events.
 - E.g., starts by acknowledging and praising child's responses to previous trauma(s)

FEEDBACK

Strengths
(Adherence & Skill)

Areas to Improve
(Adherence & Skill)

Enhancing Safety: Current Safety Plan



BEHAVIORAL REHEARSAL GUIDELINES

Shannon Dorsey, PhD | University of Washington | dorsey2@uw.edu

OTHER TOPICS OR COMMON CHALLENGES YOU MIGHT WANT TO DISCUSS WITH THE CLINICIAN...

- Are there other relevant safety risks/safety skills not addressed by the clinician?
- Does the child have safety fears that may NOT be current/ongoing, but safety planning would be a good emotion regulation strategy?
- What is developmentally and clinically appropriate to share with the child? (E.g., uncontrollable or exaggerated safety concerns of parent may not need to be shared with the child)
- Are there unrealistic fears or avoidance of safe situations that would lend themselves to In Vivo exposure? Is there an exaggerated/unreasonable sense of danger that could respond to cognitive intervention?
- Are there adults, authorities, systems, or services (e.g., parents, police, CPS, DV shelter) that could be involved/helpful?
- How can we better involve the caregiver, if not already involved, to help with safety?