



Safety planning

See, understand and respond
to child sexual abuse.

Issued by FACS for use by Child Protection Practitioners.

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Resources

The kit contains a number of practical resources for you to use in your work with children and families. Below are the resources for the safety planning section.



Bears cards: Cards to help you explore emotions with parents and children.



The Three Houses: Supports you to explore 'what's working well', 'what are we worried about', and 'what needs to happen' with children and young people.



Family Safety Circles: A tool to help children and parents to discuss 'who should know what' about the child protection concerns.



My Place My Story: (the feeling safe & tree of support tools)
An illustrated book for Aboriginal children which contains activities designed to open up a conversation about child sexual abuse (can be used with non-Aboriginal children also).



The Safe / Unsafe cards: A group of cards that help children to identify and discuss safe and unsafe feelings and circumstances.



Some Secrets Should Never Be Kept: A children's story book about a young knight's experience of child sexual abuse. It explores grooming, sexual abuse and common worries children have about disclosing.



Helping to Make It Better: Factsheets in clear, plain English that respond to common concerns for parents, address myths about child sexual abuse and provide parents with advice.

Safety planning

About this chapter

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This chapter will support your work where:

- the suspected offender is an **adult household member**
- you have determined through the Safety and Risk Assessment (SARA)¹ that **sexual abuse is suspected and circumstances suggest the child's safety is of immediate concern.**²

This chapter is:

- grounded in the reality of casework
- focused on circumstances where FACS is unable to determine that the suspected offender has sexually abused the child.³

This chapter will help you to:

- develop safety plans that can effectively and immediately reduce the danger to a child.

This chapter is intended for:

- practitioners who have previously completed SDM SARA training.

18+

The term **suspected offender** applies only to **adult household members over the age of 18 years.**

Go to

the **'Working with children who display sexually harmful behaviour'** chapter for guidance about working with children and young people who display sexually harmful behaviour.

¹ The SARA is a registered Structured Decision Making (SDM) tool developed by the Children's Research Centre. The tool is used by NSW statutory child protection practitioners with the goal of reducing subsequent abuse and neglect and expediting permanency for children and young people.

² This is the definition for a household danger of child sexual abuse using SARA.

³ In the NSW child protection system the 'balance of probabilities' test applies to child protection investigations. This means that to substantiate an allegation of child abuse and identify a person as a PCH FACS must be satisfied that it is 'more likely than not' that the allegation is true. For further reading consult the casework practice triage, assessment and field response procedure.

IMPORTANT

In Practice



It is possible to safety plan with the suspected offender in the home. However, a safety plan is not recommended when:

The child is:

- telling FACS or other people that they have been sexually abused by the suspected offender
- fearful of the suspected offender
- fearful of the parent and unable to identify any other protective adults in the home
- exhibiting overtly sexual behaviour towards the suspected offender.

The parent is:

- unable or unwilling to supervise the suspected offender
- fearful of the suspected offender.

The suspected offender is:

- charged with creating child pornography (including videoing children, eliciting pornographic images / videos from children or altering images of children to make them pornographic)
- charged with child sexual abuse offences
- convicted of child sexual abuse offences
- on the Child Protection Register
- unable or unwilling to adhere to the safety plan.

These circumstances significantly impact the likelihood that the suspected offender can remain safely in the home. It is important to review these points each time you consider safety planning in the context of sexual abuse. If you are in doubt we recommend you consult with the **OSP's Clinical Issues Team** or your casework specialist.



1 Part one: Seeing and understanding

Part one will help you:

- determine factors for the child, parent and suspected offender that influence safety
- answer the key question: **'Can the suspected offender remain in the home with the children?'**



2 Part two: Responding

Part two:

- focuses on the safe family rules as an approach that can provide the basis of your safety plan. The safe family rules provide clear limits for the suspected offender and articulate how the parent will take charge of the household
- will help you answer the key question: **'How can I make sure the safety plan will be effective when the suspected offender or parents are denying or minimising the sexual abuse allegations?'**



In Practice

While the term ‘suspected offender’ is used in these conversation ideas, the child will not know them by that name. Use the child’s words when talking about the suspected offender and acknowledge the role they have in the child’s life.

For example parent, family member, friend.



Go to



the responding section of the **Risk assessment and casework** chapter provides ideas for how to build a connection to potential safe people and help them to respond protectively to the child.



In Practice

Many parents who are confronted with allegations of child sexual abuse move between denial and belief.

Acknowledging this experience may help them to listen, even when they are wavering in their belief.



In Practice

There may be times where a child cannot identify anyone they feel safe with.

This information is a clear indication that the child is feeling isolated. You will need to continue to be curious about people in their life and explore possible connections.

Keep this exploration broad and consider people who might have helped the child in the past as well as people who are currently in the child’s life.

For example, ‘are there any adults that you used to like or trust? Where are they now?’



1 Part one: Seeing and understanding



Talking with parents to assess safety and develop the safety plan

It is important to be realistic about the impact of serious and persistent mental health issues or substance misuse on a parent's relationship with their child, their ability to supervise the suspected offender, and their ability to respond protectively if the suspected offender does not follow the safety plan. The parent's capacity to respond to their child and supervise the suspected offender can be further complicated by domestic violence. If a parent is intimidated by or frightened of the suspected offender it is not reasonable to expect that they can supervise them.

PRACTICE CONSIDERATIONS:	CONVERSATION IDEAS:
<p>Is the parent worried that their child has been sexually abused?</p> <p>Is the parent able to understand why FACS is worried about child sexual abuse?</p> <p>Can the parent describe how the sexual abuse concerns could be impacting on their child?</p>	<p>'What do you know about child sexual abuse? Can you tell me your ideas for how to keep the kids safe?'</p> <p>'On a scale of 1 -10 with 1 being not at all important that [suspected offender] is not alone with the kids and 10 being it is extremely important for [suspected offender] not to be alone with the kids, where are you sitting today? Why are you sitting there? What is stopping you being a [lower number]? What would need to happen for you to be a [higher number]?'</p> <p>'What have you noticed about your child since the worries about [suspected offender] have been spoken about?'</p>
<p>Is the parent able to describe their child's cues of distress or discomfort that may indicate they are feeling threatened, intimidated or coerced by the suspected offender?</p>	<p>'What do you see that makes you think the kids are feeling upset or worried?'</p> <p>'Have you ever felt scared of [suspected offender] ? What do you do when you feel scared of [suspected offender] ? What do the kids do?'</p>
<p>Is the parent able to monitor the suspected offender's interaction with the child and respond protectively if the suspected offender does not adhere to the safety plan?</p>	<p>'What happens when you and [suspected offender] disagree on something to do with the kids? What do you say? What do you do?'</p> <p>'How would you respond if you found [suspected offender] alone with the kids? What would you say? What would you do?'</p>
<p>Is the parent able to identify and plan for times when they are not able to supervise the suspected offender (work commitments, social commitments, times of day / certain days in the week)?</p>	<p>'Tell me about the times when you are not with [child]. Where are they? Who is looking after them?'</p> <p>'Is it hard to always keep your eye on the kids? Is there anyone who helps?'</p>



In Practice

Violence and control (historic or current) perpetrated by the suspected offender will significantly impact on the parent’s ability to respond protectively to their children.



In Practice

When talking to parents it is important to take the time to understand the impact of the sexual abuse concerns on them.

A supportive, empathetic approach that normalises their responses may help them to support their child. *‘I wonder what it is like for you - trying to keep your kids safe while you are still working out what has happened’.*



Go to



the **Working with Aboriginal children, families and communities** chapter to develop consultation questions to help you work sensitively with an Aboriginal family.

PRACTICE CONSIDERATIONS:

CONVERSATION IDEAS:

Is the parent able to demonstrate that they have managed mental health or substance misuse issues previously so that these issues did not affect the children’s safety (e.g. becoming unwell, unwell or using substances or taking medication that makes them less aware of their surroundings)?

‘We all have tough times and times when we feel it is hard to cope. I imagine that its really hard to hear about my worries for the kids. What do you notice about yourself when you are having a tough time? What do you do?’
 ‘Can you tell me about your alcohol / drug use / medications? **How much do you** [drink / use drugs or medication] **on a** [weekday / weekend / at a party] ? **Where are the kids when you are** [drinking / using] ?’

How does the parent believe their extended family or community will respond to the child protection concerns? Are they fearful of retribution from family / community members?
 Is the parent able to nominate one or more people in their formal or informal support network who can help to supervise the suspected offender and support the parent?

‘How do you think your family will respond to our worries? What might they do? What might they say?’
 ‘We have spoken about our worries about the kids today. Are there other people you know who might share our concerns? What have they said to make you think that? What have they done?’
 ‘Looking at the **Family Safety Circle**, who do you think you could tell about the concerns we have raised today? How would they respond to the concerns? What would they do to support you? What would they do to support [suspected offender]? What would they do to support the kids?’

1 Part one: Seeing and understanding



Talking with a suspected offender to assess safety and develop the safety plan



Evidence

The vast majority of suspected offenders (and convicted offenders) will continue to deny and minimise their sexual abuse. This does not mean the abuse did not occur.⁵

Past behaviour is an important predictor of future behaviour. **Always search for and understand the suspected offender's history of violent offences against children and adults before deciding to safety plan.** The suspected offender's mental health and substance use may impact significantly on their capacity to agree to and follow the steps in the safety plan. Their use of violence or power and control will affect their ability to accept any boundaries and limits that are put in place by the parent and FACS.



Go to



the **Working with the suspected offender'** chapter for ideas for responding to denial and minimisation.



In Practice

It is important to be realistic about the capacity of the suspected offender to adhere to the safety plan.

A safety plan will not be able to mitigate the risk in all circumstances.

PRACTICE CONSIDERATIONS:

CONVERSATION IDEAS:

Is the suspected offender able to understand why FACS is worried about them having unsupervised contact with the child? Do they understand why FACS want the parent to supervise them?

'Why do you think I am here today? What do you think I need to see for the kids to be able to stay at home?'

'Things like this don't happen in most families. Why do you think these concerns have been raised about you?'

Is the suspected offender able to nominate occasions where they have previously accepted the supervision of the parent?

'Has there been a time when you have followed rules that [parent] has put in place even if you didn't agree with them?'



In Practice

The historic behaviour of the suspected offender is critical in determining their future risk.

When asking Police for information via chapter 16A it is important that you request both the COPS events and criminal history related to that person.



Go to



the **Working with the criminal justice system'** chapter to find out more information on the criminal process.

⁵ Marshall, W.L (1994) Treatment effects on denial and minimization in incarcerated sex offenders. *Behavior research and therapy*, 32(5) pp 559-564 Salter, A.C (1992) *Predators, paedophiles, rapists, and other sex offenders, Who they are, how they operate, and how we can protect ourselves and our children.*

PRACTICE CONSIDERATIONS:	CONVERSATION IDEAS:
<p>Is the suspected offender able to plan for times when their ability to follow the safety plan and accept the supervision of this parent may be compromised? For example: If they are intoxicated, sedated, aggressive, agitated, experiencing hallucinations?</p>	<p>‘What impact do you think [drinking / using drugs or medication] might have on following the safety plan?’</p>
<p>Is the parent or suspected offender able to identify coping strategies?</p>	<p>‘Having FACS involved in your life is stressful for lots of people, especially when I am talking about concerns that you have hurt a child. What might help you cope?’</p> <p>‘Have there been any other allegations like this before? How did you respond? What helped you to cope?’</p>
<p>Is the suspected offender able to nominate one or more people in their formal or informal support networks who understand FACS concerns and are able to help supervise them and support the parent (the parent and child should agree that this person is appropriate)?</p>	<p>‘When concerns like this get raised it is very important to involve other adults who can help to supervise the kids. These adults will need to be told about our concerns for the kids. Do you have anyone who could help supervise the kids? What do you think they would say about our concerns? How do you think they would help?’</p>
<p>Have there been past allegations? Who knew about the allegations and what did they do?</p>	<p>‘Did anyone know about the concerns that you had sexually abused [child]? What did they say? What did they do? What helped? What didn’t help?’</p>



Go to



the **‘Risk assessment and casework’** chapter for further information on assessing the risk posed by the suspected offender.

2 Part two: Responding



Developing specific safe family rules (a safety planning approach) continued...



In Practice

Remember that lots of questions one after the other can be overwhelming for children. Try to break them up, chat freely in between, be natural and warm and use your judgement about whether they need a break or a change of subject.

Other important rules to consider

Nudity / sexualised environment

There is to be no adult nakedness / near nakedness around the children - this includes wearing underwear only. The children will only be naked / nearly naked around the parent where it is necessary and developmentally appropriate.

Exploring rules about nudity in practice

Talking with the children:

- When are you naked? Who is there when you are naked?
- How do you go to the toilet? Do you need help wiping your bottom?
- What do you know about sex? (This question will need to be altered to suit the developmental age of the child.)

Talking with parents / suspected offender:

- Can you tell me how nakedness / near nakedness is managed in your family?
- When are the kids naked / nearly naked?
- Do you have rules about children entering rooms where adults are naked / nearly naked or toileting?
- When is [suspected offender] naked / nearly naked?
- Do the kids see any other adults naked / nearly naked?
- What do you think your kids know about sex? How do they know that?
- Can you think of times that your kids might have seen anyone having sex?



In Practice

Talking about child sexual abuse, nakedness and intimacy can be very confronting for most parents.

It may make them feel nervous and they might have trouble talking openly. It can be helpful to warn the parent that the questions you are about to ask will probably be uncomfortable. Try to slow the conversation down and notice and acknowledge the parent's discomfort. It can be helpful to intersperse your questions with chatter about other topics.



2 Part two: Responding



Developing specific safe family rules (a safety planning approach) continued...

Physical contact

Physical contact with a child and the suspected offender should always be supervised very closely. The type of contact allowed will depend on the relationship the child has with the suspected offender, the nature of the allegations and the specific circumstances of the child and family. As a general rule any physical contact should always be instigated by the child and should be developmentally appropriate. For example: it is not appropriate for an older child to sit on the suspected offender's knee but it may be appropriate for a much younger child.

Exploring rules about physical contact in practice

Talking with the children:

- How does [parent] let you know they love you? Are there things you like about that? Are there things you don't like about that?
- How does [suspected offender] let you know they love you / care about you? What things do you like about that? Are there things you don't you like about that?
- How do you let [parent / suspected offender / other safe person] know when you want a cuddle / to be touched? What do you do? What do they do?
- How do you let [parent / suspected offender / other safe person] know when you do not want a cuddle / to be touched? What do you do? What do they do?

Talking with parent / suspected offender:

- How do you show affection to your kids?
- How do you show affection to each other when the kids are around?

Go to

the [safe object concept factsheet](#) on the Casework Practice site to help the child alert the parent or other safe people to feelings of discomfort or fear.

In Practice



The safe family rules include references to physical contact with children. The suspected offender is also able to intimidate, control and coerce children without any physical contact.

Talking to the parent about how they think the suspected offender may respond to the child protection concerns and the safe family rules may help them to be alert to their behaviour and the child's responses. For example: 'We have spoken about the fact that [suspected offender] might be quite angry with [the child]. How do you think that anger might make [the child] feel tonight? How will you know if [the child] is upset or worried? What rules do you think we should put in place to prevent [suspected offender] from frightening [the child] ?'



2 Part two: Responding



Talking with children, parents and the suspected offender to set up the safety plan (using the safe family rules approach)

Beginning to safety plan using the safe family rules

As you begin to explore safe family rules, start by asking about the general rules the family has in place to keep their children safe. By doing this you are able to create safe family rules built on the child and parents' strengths and an extension of family practices. This is also a good time to find common ground with the parent and the suspected offender so that the safe family rules are firmly embedded in a shared desire to keep the child safe. This shared focus on the child's safety also makes it easier for the parent and suspected offender to discuss the child protection concerns with their formal and informal support networks.



In Practice

The meaning of 'family' and what it means to be a 'safe family' may be influenced by the child's cultural background.

Consultation with an Aboriginal and / or multicultural practitioner is vitally important to help you identify culturally competent and sensitive ways to discuss the safe family rules and work with the family.

PRACTICE CONSIDERATIONS:	CONVERSATION IDEAS:
<p>Talk to children about:</p> <ul style="list-style-type: none"> ■ general rules they have in their family ■ who makes the rules and who enforces the rules ■ how they have responded to unsafe situations in the past ■ how other people have helped them respond to unsafe situations. 	<p>‘ Lots of kids have rules they follow in their family like who cleans up after dinner, what time kids need to be home or what time kids go to bed. What are some of your rules? Who made those rules? Who tells you to follow those rules? What happens if you don't follow the rules?’</p> <p>‘ Have you ever felt unsafe or unsure in the past? What made you feel unsafe? Who did you speak to about feeling unsafe? What was that like?’</p> <p>Use the Safe / Unsafe cards:</p> <p>‘ Have a look at these cards. Have you ever felt like this? What did you do? What helped you to do that? Did you tell anyone else that you felt this way?’</p>
<p>Talk to the parent and suspected offender SEPARATELY about:</p> <ul style="list-style-type: none"> ■ general rules they have in their family, who makes the rules and who enforces the rules ■ their willingness to supervise the suspected offender / be supervised by the parent ■ goals that are shared with child protection. 	<p>‘ The kids told me that one of your family rules is that they have to be home before it gets dark. Who decided that rule? What happens if [the child] doesn't follow the rule? What happens if [sibling] doesn't follow the rule?’</p> <p>‘ How willing are you to put in place some extra rules to keep the children safe while we work together to understand what is happening for [sibling] ? On a scale of 1- 10 1 = not at all willing 10 = very willing. What is stopping you being at a lower number today? What would help you get to a higher number?’</p> <p>‘ I'm aware that you have said you have been wrongly accused of sexual abuse. We don't have to agree on that today. Today we all need to be sure the kids are safe. I am aware that you want to keep living at home but the priority for all of us is to be sure that the children remain safe. By following these rules you will be able to live at home with the kids while we continue to work out what is happening for them.’</p>

In Practice



While establishing the safety plan be aware of common techniques that the suspected offender may use to prevent the child from telling others about the abuse and minimise discovery of the abuse:

Common techniques that are used to silence children

Making threats:

'Do you want me to go to jail?'

Discrediting the parent:

'You know your mum doesn't think I have done anything to you - she even told the caseworker that.'

Making the child less credible to others:

'He always lies and exaggerates to get attention.'

Providing rational explanations:

'He is highly sexed - his disability makes him sexually inappropriate.'

In Practice



Use supervision to remain focused on your goal of the child's safety when finding the common ground with the parent or suspected offender.



2 Part two: Responding



Talking with parents and the suspected offender to explain and agree on the safety plan

Explaining and agreeing on the safety plan (using the safe family rules approach)

Safe family rules can be explored and used where the suspected offender is denying the allegations. They can also be used where the parent does not believe fully, or is unsure about whether their child has been abused. Grounding the safe family rules in the family's daily life and their wish to keep the children safe and avoid any further allegations will help you to work in partnership with the family while you assess risk and build safety. **Safe family rules** can be explained to the family as being useful to protect everyone.

PRACTICE CONSIDERATIONS:	CONVERSATION IDEAS:
<p>Talk about why the safe family rules are important...</p> <ul style="list-style-type: none"> ■ to make sure everyone understands what the worries are ■ to keep the kids safe. 	<p>'I understand that you are feeling confused and there is a lot of information to think about today. I also know that these kinds of worries are not normal for most families and they sometimes mean that something is going on for the kids. The safe family rules will help us to keep the kids safe while we work out what is happening. Following the safe family rules might also help to stop more allegations about [suspected offender] sexually harming the kids.'</p>
<p>Explain:</p> <ul style="list-style-type: none"> ■ the safe family rules to the children (see Jayden and Matilda's safety plan on pages 32-33) ■ the safe family rules to informal / formal support networks. 	<p>'How do you think we can explain the rules to the children so that they understand?'</p> <p>'How do you think we can explain the rules to [safe person] so that they are able to make sure everyone in the home is following them?'</p>



Reviewing the safety plan (using the safe family rules approach)

As with any safety plan, the **safe family rules** are only effective if they are closely monitored.

Because the safe family rules are created around the details of daily life it would be very difficult for you to monitor the specific circumstances of the child and family. Your role is to work with the parent and their formal and informal support networks to make them partners with a shared goal of keeping children safe. Together you can monitor and review the safe family rules.

PRACTICE CONSIDERATIONS:	CONVERSATION IDEAS:
<p>When you are reviewing the safe family rules, talk to the child, parent and informal / formal support networks about:</p> <ul style="list-style-type: none"> ■ any changes they have noticed in the child / suspected offender / parent ■ any times they have noticed the child was distressed and how they responded ■ other people who could be involved in supporting the family and monitoring the safe family rules. 	<p>‘What changes have you noticed in [the kids / suspected offender / yourself] since the safe family rules have been in place? Why do you think those changes have happened?’</p> <p>‘Most children feel upset or worried at times like these and they might blame themselves. What have you noticed about [child] lately? Do you think he is more sad / happy / relaxed / angry than usual? What do you do when your child is behaving that way?’</p> <p>‘What do you notice about [child] when [suspected offender] is around?’</p> <p>‘What has been the hardest thing about following the safe family rules?’</p> <p>‘What do you think the hardest thing will be about following the safe family rules for another [seven days]?’</p> <p>‘Looking at the Family Safety Circles is there anyone else you could invite into the ‘people who know everything’ circle?’</p>
<p>Before you finalise the safe family rules talk to the child / parent and suspected offender about:</p> <ul style="list-style-type: none"> ■ what they hope to achieve by implementing the safe family rules ■ indicators that the safe family rules are being followed. 	<p>‘I can see you how much you love and care about your kids and want to keep them safe. What do you think you will need to see to be confident that [child] isn’t feeling scared of [suspected offender]?’</p> <p>‘How will you know that [suspected offender] is following the safe family rules’</p> <p>‘When I come back to visit you [next week] how will I know that the safe family rules are being followed? What might you and I notice about the kids? What will [safe person] tell me?’</p>
<p>Before you finalise the safety plan, talk to the parent about indicators that the safe family rules are not being followed.</p>	<p>‘What things might you notice in [child] that would make you worried that he is feeling scared again? What might you notice in [sibling]?’</p>

Case Study



**Jayden (8) and
Matilda's (6) story**

Jayden and Matilda's story

Kerry is a caseworker at Littleton CSC. She is responding to information that Jayden (eight) has drawn a picture of Robert on top of him and told his maternal Grandma, Margaret he doesn't like Robert's touching game and he 'doesn't like Robert'. Jayden lives with his sister Matilda (six), Mum, (Sarah) and Matilda's dad, Robert. Jayden has no contact with his father and calls Robert 'Dad'. Margaret also reported that Jayden has been touching his 'willy' a lot lately and that when she has told him to stop he says that he is playing a 'touching game'. When Margaret asked Jayden what the touching game means, Jayden tells her that it's a secret and he doesn't want to say anything else. Margaret said that Jayden also told her that if he was not good, he is worried Robert will stop buying him expensive games on the internet and mobile. Margaret did not ask him any direct questions but was worried.

There are five reports on the FACS system about Sarah's severe episodic depression and the impact of this on the children. The reports describe episodes of the children being left alone that are interspersed with long periods of stability and safety for the children. The reports were all closed by the triage team after Robert and Margaret were identified as protective factors for the children. The family has also accepted a referral to a local family support service. FACS has never visited the family.

Case Reflection

This information raises concerns for Jayden and Matilda. Jayden's picture and his statement that he doesn't like Robert could be his way of letting his grandma know that Robert is sexually abusing him. His worry that Robert will stop paying for his games could indicate that Robert is using bribes to prevent Jayden from seeking help.

There are also alternative explanations for Jayden's statement that would need to be explored.

For example: exposure to pornography, having seen explicit sexual behaviour or sexual abuse by another person. There are also several potential protective factors that could be built on to keep Jayden and Matilda safe, including Jayden's relationship with Margaret and the involvement of the family support service.



Further information

When Kerry talks with Jayden and asks him directly about the touching game, Jayden begins to kick the chair in front of him and looks upset.

He tells Kerry that he was being stupid and he wants everyone to stop asking him questions about the touching game. Kerry acknowledges Jayden's distress and that it can be hard to talk about this kind of thing. She also says that she is still worried about him. She says she will need to come back and talk some more with him this week. Jayden agrees.



Before identifying if there is sufficient safety for Robert to remain in the home Kerry will need to understand the following:

- Jayden’s willingness or ability to provide more information about the touching game and his feelings about Robert when asked directly.
- Jayden and Matilda’s experience of being parented by Robert and Sarah.
- Jayden and Matilda’s relationship with Margaret.
- The relationship between Sarah and Robert (including any domestic violence perpetrated by Robert) and how this may impact on Sarah’s ability to supervise Robert.
- Sarah’s current mental health and her ability to recognise and respond to signs that she is becoming unwell.
- How parenting responsibilities are managed in the home.
- Pornography in the home and the children’s access to pornography either on the television, the internet or in magazines.
- Robert’s capacity to understand and follow the safe family rules.
- Sarah’s ability to supervise Robert, his daily interaction with the children and any other safe family rules.
- Margaret’s ability to supervise Robert, monitor his daily interaction with the children and any other safe family rules.
- Jayden and Matilda’s ability to tell Sarah or Margaret if they are feeling distressed.
- Sarah’s understanding of Jayden and Matilda’s emotional cues and her ability to respond protectively to any signs of distress.
- Margaret’s understanding of Jayden and Matilda’s emotional cues and her ability to respond protectively to any signs of distress.
- Robert’s willingness to accept the supervision of Sarah and Margaret.



Go to



the **Working with children’** chapter to recognise when a child may be disclosing sexual abuse. Some children tell us about sexual abuse by using drawings or statements that indicate general worry or distress. It is important that adults recognise these cues and ask children about them. Margaret’s response to Jayden indicates that she is sensitive to his cues, and cares about his safety. This is a significant strength to build on during safety planning and casework.



Go to



the **safety planning example on page 32** of this chapter to develop appropriate safety planning interventions for Jayden and Matilda.

The My Place My Story book includes the tree of support and the feeling safe tools. These tools could be used to explore the children’s relationship with adults in their life. The **Safe / Unsafe cards** could be used to explore situations when the children feel safe and unsafe and understand how they respond to unsafe situations.



Further information

During her safety assessment Kerry establishes that Sarah and Margaret (and Sarah’s sister, Sally) are willing and have the capacity to supervise the children using the safe family rules approach. Robert is also willing and able to accept their supervision. Her assessment finds that the children are safe with a plan.

Jayden and Matilda's safety plan

Danger #2

WHAT IS THE DANGER?	WHAT WILL BE DONE? (SAFE FAMILY RULES)
<p>Kerry and Family and Community Services are worried because Jayden said that his dad plays the touching game with him and when Kerry asked Jayden about the touching game he was upset and did not want to talk about it.</p>	<p>Dad will not be alone with Matilda, Jayden or any other children. Another adult will always be there.</p> <p>Dad will not play the tickling game or the touching game with Jayden or Matilda. If Jayden or Matilda want to be tickled they will ask Mummy.</p> <p>No-one will play the touching game with Jayden or Matilda.</p> <p>Granny will look after Matilda and Jayden on Tuesday and Wednesday after school until Mummy gets home.</p> <p>Mummy is in charge of taking care of Matilda and Jayden. If they need help with private things like washing or dressing Mummy will help them.</p> <p>The only people who can touch or look at Matilda's front bottom or chest [use the child's words] are Mummy or the doctor. Dad cannot look at or touch Matilda's front bottom.</p> <p>The only people who can touch or look at Jayden's willy are Mummy or the doctor. Dad cannot look at or touch Jayden's willy.</p> <p>Matilda and Jayden will always sleep in their own room. Dad will not go into Matilda and Jayden's room.</p> <p>If Matilda or Jayden wakes up at night. Mummy will come and see them. Dad will not go into Matilda and Jayden's room.</p> <p>Dad will not buy Jayden or Matilda any presents unless it's their birthday or Christmas.</p> <p>Dad will not buy Jayden any more games on his mobile phone. Mummy and Jayden will talk about when she will buy Jayden mobile games.</p>

WHO WILL DO IT AND BY WHEN?

Kerry will call Belinda (family support worker) to make sure she understands FACS worries today.

Dad and Mummy will write down the safe family rules and stick them up on the fridge today.

Dad will follow all the safe family rules from today.

Kerry will visit Mummy, Jayden and Matilda on Thursday to see how everyone is feeling about the safe family rules and make sure everyone is following the safe family rules.

Kerry will call Granny and Aunty Sally and make sure they looked after Jayden and Matilda on Tuesday and Wednesday. Kerry will make sure they still understand FACS worries. This will happen on Thursday.

WHO WILL CHECK?

Kerry will talk to Matilda and Jayden and make sure everyone is following the safe family rules.

Granny will talk to Matilda and Jayden about their feelings. Granny will let Kerry know if she is worried about Matilda and Jayden.

Mummy will talk to Jayden and Matilda about their feelings every day. Mummy will let Kerry and Belinda know if she is worried about Matilda and Jayden.

Kerry will talk to Jayden and Matilda when she visits on Monday. Kerry will let Mummy know if she is worried about Jayden or Matilda.

Sarah and Robert's safety plan

Danger #2

WHAT IS THE DANGER?	WHAT WILL BE DONE? (SAFE FAMILY RULES)
<p>FACS is worried that Robert might be sexually abusing Jayden. FACS is worried because Jayden has said he doesn't like the touching game. Jayden has also started touching his penis in public. These behaviours can be indicators of sexual abuse.</p> <p>FACS is worried for Matilda and Jayden because when Kerry tried to talk about the touching game with Jayden he was upset and didn't want to talk about it. FACS is also worried because Sarah does not believe Jayden has been sexually abused.</p>	<p>Robert will not be left alone with Matilda, Jayden or any other children. Another adult will always be in the same room as Robert when he is with the children.</p> <p>Robert will not play the tickling game with Jayden or Matilda. Sarah is able to tickle Jayden or Matilda if they want to be tickled.</p> <p>No-one will play the touching game with Jayden or Matilda. (Robert has told Kerry that the touching game is where he touches the children on the parts of their body that are not covered by swimmers. He starts with softer touches and then uses harder and harder touches until they 'give in' and tell him to 'stop').</p> <p>Granny will look after Matilda and Jayden on Tuesday and Wednesday after school until Sarah gets home.</p> <p>Sarah is in charge of taking care of Matilda and Jayden. Sarah will help with private tasks like washing or dressing the children. Robert will not help.</p> <p>The only people who can touch or look at Matilda's vagina or chest are Sarah or the doctor. Robert will not look at or touch Matilda's vagina.</p> <p>The only people who can touch or look at Jayden's penis are Sarah or the doctor. Robert will not look at or touch Jayden's penis.</p> <p>Matilda and Jayden will always sleep in their own room. Robert will not go into Matilda and Jayden's room.</p> <p>If Matilda or Jayden wake up at night, Sarah will come and see them. Robert will not comfort Matilda or Jayden at night time.</p> <p>If Sarah is sick Margaret or Aunty Sally will come and do Sarah's jobs until she is well.</p> <p>Sarah is the only person allowed to buy the children gifts outside of birthdays and Christmas.</p> <p>Sarah and Jayden will come to an agreement on how often he can have a new mobile game.</p>

WHO WILL DO IT AND BY WHEN?

Robert and Sarah will write down the safe family rules and stick them up on the fridge today.

Robert will follow all the safe family rules from today.

Kerry will call Belinda (family support worker) at Safe Families Support Service to make sure she understands FACS worries today.

Sarah will call Belinda to talk about her feelings and discuss any other support she might need to get through this difficult time.

Kerry will visit Sarah, Jayden and Matilda on Thursday to see how everyone is feeling about the safe family rules and make sure everyone is following the safe family rules.

Kerry will call Margaret (maternal grandmother) and Sally and make sure they looked after Jayden and Matilda on Tuesday and Wednesday. Kerry will make sure they still understand FACS worries. This will happen on Thursday.

WHO WILL CHECK?

Kerry will talk to Matilda and Jayden about how they are feeling and make sure that Robert is following the safe family rules.

Belinda will talk to Sarah about her feelings and will provide support to her when talking to the children about FACS concerns. Belinda will let Kerry know if she has any concerns for the children.

Margaret will talk to the children about their feelings. Margaret will let FACS know if she has any concerns for the children.

Sarah will talk to the children about their feelings and will let Belinda or FACS know if she has any worries or concerns for the children.

Key messages from the Safety planning Chapter

Take the time to understand protective factors for the child, the parent and the suspected offender before you consider if safety planning is appropriate.

Take the time to have conversations with children, parents and the suspected offender. Do not overload them with too many questions - imagine how hard it would be to be in their shoes.

The safe family rules (a safety planning approach) must address the details of daily life for the child and family and known grooming tactics used by the suspected offender.

It is not sufficient to say that the suspected offender must not be unsupervised with the children.

Involve other people who are worried about the child, capable of supporting the parent and child and of supervising the suspected offender.

Make sure there is a plan in place to monitor and review the safety plan, because the safe family rules are unlikely to remain in place without monitoring and review.

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