

Initial Safety Provider Assessment

Temporary Parental Safety Provider

Kinship (Relative or Fictive Kin) Care Provider

Case Name:	County Case Number:	Date:
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Children to be placed

	Child's Name	SIS Number	DOB	Gender	Race/Ethnicity	Needs/Behavioral Considerations
1						
2						
3						
4						

Safety Provider (Caretaker) Information

	Safety provider(s) Name	SS#	DOB	Gender	Race/Ethnicity	Relationship to Children	Place of Employment/Source of Income
1							
2							
3							

Placement Address: _____

Placement Phone(s): _____

Other Members of the Household

	Name	SS#	DOB	Gender	Race/Ethnicity	Relationship to Safety provider	To participate in care of children? Y/N
1							
2							
3							
4							
5							

Background Checks Completed for all household members over age of 16, including Safety providers

	Name	Criminal History Found Y/N	Criminal Activity identified	RIL/County CPS History Found Y/N	RIL/County CPS history
1					
2					
3					
4					
5					

Be sure to obtain any other names that may have been used by any household member (maiden name, AKA, etc.) for background checks.

911 calls for placement provider's address have been reviewed. Date/Reason for 911 calls: _____
 (Enter NA if no 911 calls)

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A/F/U	Requirements	Indicators	Comments
	1. The safety provider has/had a relationship with the child(ren) and/or family and understands the child(ren)'s needs.	Discuss and document safety provider's relationship with the children and the safety provider's understanding of all the child(ren)'s needs and/or behaviors (see child(ren)'s needs on page 1). Discuss and document the relationship between the children and other members of the safety provider's household. Discuss and document the relationship between the safety provider(s) and the child(ren)'s parents.	
	2. The safety provider is willing to provide age-appropriate supervision for the child(ren).	Discuss and document the family's plan for supervising the child(ren), including any needs for additional services (day care, for example) to provide supervision.	
	3. The family will use fair, reasonable discipline which emphasizes positive reinforcement.	Discuss family's discipline practices. Does the family agree to not use physical punishment, isolation, deprivation of food, threats of harm, or humiliation? Discuss and document appropriate disciplinary measures for the above listed child(ren) based on age and maturity and needs and the agency's expectations about use of positive reinforcement.	
	4. The family is willing and	Discuss with the safety provider any upcoming	

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A/F/U	Requirements	Indicators	Comments
	<p>able to ensure that the child(ren)'s well-being needs will be met.</p>	<p>needs for the child(ren).</p> <p>a. Does the safety provider have the means to transport the child(ren) to upcoming medical, dental or mental health appointments? Do they have ability to respond to an emergency need (medical or other)? Do they have first aid supplies? Does the child have any allergies that need to be addressed?</p> <p>b. How will the child be maintained in current educational setting? If not, how will the child(ren) be supported through the transition?</p> <p>Document how provider will meet child's needs.</p>	
	<p>5. The safety provider is willing and able to protect the child(ren) from continued maltreatment. The family will report any indicators/circumstances indicating the child has been abused or neglected.</p>	<p>a. The safety provider agrees to not take sides regarding the allegations; will not blame the child.</p> <p>b. Discuss reporting requirements with the family; obtain and document safety provider's commitment to report any concerns to the agency. Discuss behavioral indicators of abuse and neglect.</p> <p>Document what is discussed.</p>	
	<p>6. The safety provider is willing and able to provide appropriate boundaries to protect the child. The safety provider will enable the child(ren) to maintain connections with other family members.</p>	<p>Discuss and document with the safety providers any requirements around contact between the child(ren) and parents (including phone calls). Determine that the safety provider is able and willing to support appropriate contact with the birth parents. <u>Include additional documentation if needed that defines visitation and supervision requirements.</u> Determine if there are any issues regarding visits by friends or extended family members.</p> <p>Discuss how contact can be maintained with friends, siblings and extended family members.</p>	

A – Acceptable, F – Follow up Needed, U- Unacceptable (child(ren) cannot be placed in this home)

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A/F/U	Requirements	Indicators	Comments
	7. The safety provider's home is free of safety hazards.	<p>Assessment requires all rooms of the home are seen and assessed for safety, including:</p> <ul style="list-style-type: none"> a. There are working smoke detector(s). b. The family has approved car seats based on age and weight. Children up to age 8 and 80 pounds must have a car seat. c. All dangerous cleaning supplies, medicines, and any other dangerous chemicals are inaccessible to children. d. All weapons are locked and inaccessible to children. e. All entrances/exits to and from the home are unobstructed. f. There are no observable safety hazards (uncovered electrical outlets or exposed wires, broken windows, doors or steps, or rodent/insect infestation). <p>Document findings, including plan for any issues that must be addressed.</p>	
	8. The safety provider's home has adequate and sanitary utilities.	<p>Toilet (outhouse), and kitchen facilities and utilities (refrigerator, stove, oven) viewed by assessor, determined to be in reasonably sanitary and working condition. The home has all basic utilities (water, electricity, and heat) and in full operating condition. The safety provider has a working telephone (or cell phone).</p> <p>Document findings, including plan for any issues that must be addressed.</p>	
	9. The safety provider's home will have adequate sleeping space with reasonable privacy and comfort for each child.	<p>The bedroom for all children must be seen. The safety provider has a reasonable plan for each child that considers the child(ren)'s age, gender, needs and history.</p> <p>Document the plan, and include any issues that must be addressed.</p>	

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A/F/U	Requirements	Indicators	Comments
	<p>10. The safety provider has sufficient financial resources to meet the child(ren)'s basic needs, immediate needs, and/or has access to resources.</p>	<p>a. The safety provider has sufficient resources to provide for child(ren)'s basic needs (shelter, food, clothing, basic health care, etc.).</p> <p>b. The safety provider has sufficient resources to be able to take on the extra responsibility of the child(ren) in addition to covering the needs of the current household members (consider possibility of higher utility bills, medical needs, transportation expenses, etc.).</p> <p>Discuss and document all safety provider's sources of income, all current expenses, and additional anticipated expenses for the child(ren).</p> <p>Discuss eligibility requirements for IV-E assistance or other agency assistance available.</p>	
	<p>11. The safety provider(s) have a clear background (NO history of involvement with child protective services and NO criminal history that precludes them from caring for the child(ren)).</p>	<p>a. Responsible Individuals List and county CPS records check has been completed within 3 days. The safety provider(s) provides a self-report with no CPS history of concern.</p> <p>b. Safety provider(s) and safety provider household members agree to criminal checks with must be obtained within 3 days. There must be NO findings of convictions or pending charges for violence, sexual offenses, crime against minors, or other criminal acts that would place the child(ren) at risk.</p> <p>Any exceptions require supervisory approval with documentation and signature.</p>	
	<p>12. The safety provider(s) (and no other household member) use of alcohol</p>	<p>Safety provider(s) understands and acknowledges risks associated with use of substances, including alcohol, while providing care to children. Any</p>	

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A/F/U	Requirements	Indicators	Comments
	or any other substance use does not present risk of harm to the child(ren).	criminal history related to alcohol use or possession was discussed. Assessment of this indicators should include: The safety provider(s) provided a self-statement regarding use of alcohol or other drugs, observations of the safety provider(s) and the home, and other possible indicators. Document what is discussed.	
	13. Safety provider(s) do not have a history of domestic violence.	Assess the safety provider(s) knowledge and understanding of domestic violence and impact on children. Obtain and document a self-statement regarding control and fear in any intimate relationship in safety provider(s) personal history. Discuss and document any 911 responses to the home related to domestic violence resulting with or without arrest. Discuss and document any past or current 50B orders regarding household members or prior partners of household members.	
	14. Safety provider(s) are physically and mentally capable of providing care for the child(ren).	Document self-statement, observation, and indicators. Document any medication that any safety providers in the home are prescribed or use on a regular basis. Document chronic illness for any member of the household (this may not have any impact on ability to provide care but may eliminate issues and/or future questions). Example: infant child can be lifted by safety provider even with safety provider history of back issues.	
	15. Other: Safety provider(s) are able to meet any other special needs for the child(ren).	a. Discuss and document any identified special needs (not addressed in Indicator 1) of the child(ren), for example, child’s fear of pets, smoke allergies, and confirm and document	

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A/F/U	Requirements	Indicators	Comments
		how the needs will be met. b. Discuss and document any case specific considerations that could impact the Safety Plan and assess and document the safety provider(s) ability to handle (threats by a parent, past relationship between safety provider and parent, etc.).	
	16. Safety provider(s) are willing to provide care for the child(ren) and for how long.	Discuss and document safety provider's willingness to care for the child(ren) with CPS involvement and following CPS requirements and the length of time they are willing to provide care. Discuss and document the agency's requirement to monitor the children and the anticipated frequency of home visits.	

Other Notes (visitation plan, follow up needed, other comments, etc.). Attach additional documentation if needed.

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Agreement regarding care of the child(ren):

- The Safety Provider understands that the following cannot happen without the county child welfare agency knowledge:
 - The child(ren) shall not return to the parents care (as defined by Temporary Parental Safety Agreement or non-secure order).
 - Any change to the make-up of the Safety Provider’s household or a household move by the Safety Provider shall be immediately communicated to the agency.
 - All contact between the child(ren) and parents shall be according to the supervision/visitation plan developed with the parents
- The Safety Provider is able to maintain contact with the parents to communicate about the child(ren)’s needs and well-being.
- The Safety Provider agrees to ensure that the child(ren) get to needed medical, dental, mental health and educational services.
- The Safety Provider understands that if for any reason the county child welfare agency determines that the needs of the child(ren) are not being met, the child(ren) may be removed from the home.
- The Safety Provider agrees to notify the Social Worker immediately if there are any changes related to the care of the child(ren).
- The Safety Provider understands that the county child welfare agency has the responsibility of assessing the safety and well-being of the child(ren) and will need to have access to the child(ren) and the Safety Provider’s home whenever requested.
- If the need for a Safety Provider(s) continues beyond 45 days (or beyond the completion of the CPS assessment), another more comprehensive assessment will be completed and the children may be removed from the home at or around that time.

Agreement for Temporary Parental Safety Providers (NOT Kinship Providers):

- **The Parental Safety Provider understands that this is a voluntary arrangement made by the parents and the county agency does not have custody of the child(ren). If a parent indicates to the Temporary Parental Safety Provider that they desire to end this voluntary arrangement, the Temporary Parental Safety Provider must contact the county agency immediately.**

The purpose of the Safety Provider Assessment is to determine that the child(ren) can safely live in another household, one that the parent(s) have identified and agree with, without their parents OR as defined by a Temporary Parental Safety Agreement that a Safety Provider can reside in the family home. The Safety Provider Assessment should determine: a) if all individuals in the Safety Provider’s home are appropriate (or that the

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Safety Providers is appropriate to reside in family home), b) that the Safety Provider’s household and physical environment is safe (except for when Safety Provider will reside in family home), and c) that the child(ren)’s needs can be met. While using a Safety Provider the parent(s) should continue to be involved in the care of and in meeting the needs of their child(ren). A plan to meet the child(ren)’s safety and well-being has/will be developed and there is common understanding about that plan (which also addresses visitation and contact between the parent(s) and child(ren)).

Start Date for Child(ren):		End Date:	
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We, the undersigned, have reviewed the above assessment and agree to work together to provide a safe and nurturing environment for the above-named children.

Safety Provider’s Signature		Date		Social Worker’s Signature		Date	
Safety Provider’s	Date	Social Work	Dat	Date	Safety Provider’s Signature	Date	

NOTE: During the process of identifying and approving a Safety Provider during a CPS assessment, make sure plans developed are congruent with the Safety Assessment.

To be completed by county child welfare agency:

Recommendation. Approve Not Approve

If the recommendation is to approve and there are any findings of F (Follow up Needed), justification should be provided below. The recommendation should to be to Not Approve with a U (Unacceptable) Finding for any Indicator.

Social Worker’s Signature		Date		Supervisor’s Signature		Date	

Initial Safety Provider Assessment Instructions

When placement of a child in the home of an identified safety provider, including a relative or other kin, is being explored, the agency is required to assess the suitability of that home. **The Initial Safety Provider Assessment Form must be completed prior to placement of any child with a safety provider. It must also be used when a Temporary Parental Safety Provider is identified to move into the family home to meet the need for a parent’s access to their child(ren) to be restricted/supervised during an assessment.** The Initial Safety Provider Assessment is intended for use in situations such as:

Point in Case Decision Making	Assessment Forms To Be Completed
CPS Assessment; child cannot be safely maintained in own home or a Temporary Parental Safety Provider will move into the family home. Parent identifies the safety provider.	Initial Safety Provider Assessment (check Parental Child Safety Provider box), Safety Assessment that reflects use of Safety Provider
CPS In-Home Services	Placement of a child out of the parents’ care for safety threats and/or risks must involve court intervention during In-Home Services.
Foster Care Services; relative/kinship homes are explored as resources when a child(ren) is in foster care, prior to a court review.	Initial Safety Provider Assessment (check Kinship Provider box), Comprehensive Kinship Care Assessment when continues beyond 45 days

Definitions

Temporary Parental Safety Provider: Any safety provider identified during a CPS assessment. A parent should identify the Safety Provider and a parent must voluntarily agree with the decision to use a Safety Provider. A Temporary Parental Safety Agreement is intended to be short term (from several days up to 45 days or for the duration of the CPS assessment only) and to address an immediate or impending safety threat.

Kinship Provider: Any provider (relative or fictive kin) identified or in place during Foster Care Services. Identification of a Kinship Provider by a parent is desired; however a parent may not always agree with the decision to evaluate or place a child with a specific kinship provider. Placement with a Kinship Provider often lasts for months or years, has court oversight, and addresses safety and/or risk factors.

Ratings for the Indicators (A/F/U)

Acceptable: Based on the information obtained, the safety provider(s) and/or safety provider(s) home is found to be safe and appropriate for consideration for the child(ren) regarding this indicator.

Follow Up Needed: Based on the information obtained, services and/or modifications are required for the safety provider(s) and/or safety provider(s) home to be found safe and/or appropriate for the child(ren) regarding this indicator. Any identified services or modifications must be clearly identified with a plan for resolution with a required completion date. Use page 7-8 to document additional details if needed. If a safety provider is unable to provide care immediately, but could do so within a short time frame, assess if this is the best placement resource for the child and, if so, arrange for another placement (preferably with a relative) and assess this resource as a backup placement.

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Consider whether or not the Temporary Parental Safety Agreement needs to be modified based on information obtained during this assessment.

Unacceptable: Based on the information obtained, the safety provider(s) and/or safety provider(s) home is found to be unsafe and/or inappropriate for the child(ren) regarding this indicator.

Completing the Initial Safety Provider Assessment

It is important that all information requested on Page 1 be completed and updated as additional information is received. This information will follow the case from initial placement through case closure. Note: Development of a diagram of the kinship network is a helpful tool in working with the family to help them identify their support system, the nature of their interrelationships and recurring patterns in issues such as abuse, substance use, suicide, etc.

The assessment tool has four sections: 1). rating for the Indicators (Acceptable, Follow Up Needed or Unacceptable regarding the safety provider's meeting the requirement); 2). the requirements that assure a reasonably safe, stable, and nurturing environment; 3). indicators to guide the interview/assessment process; and 4). space for comments and service needs. The comment section should document the specific discussion with the Safety Provider in regards to each indicator. For example, regarding discipline, the comments section should document what forms of discipline the Safety Provider agrees to use and not use. The comment section should also address any reservations the social worker may have, as well as plans to address any needs that preclude or interfere with compliance with the requirement. If more room is needed for any indicator, comments can be continued on page 7-8 of the form or with use of attachments.

The Initial Safety Provider Assessment is designed to address critical factors of safety and stability. Some questions, for example school placement, may require more time to fully assess, but must be addressed with the prospective safety provider before placement.

Upon completion of the assessment the form must be reviewed with the Safety Provider(s), signed and dated by the Safety Provider(s), signed and dated by the social worker, and reviewed and signed and dated by the social work supervisor. The social work supervisor may sign the assessment the next working day but must have verbally discussed the findings with the social worker and approved the provider before placement is made. The discussion/review with the social work supervisor must be documented in case documentation.

When completing the Initial Safety Provider Assessment for a Temporary Parental Safety Provider who will reside in the family home, it is only necessary to complete the following indicators: 1 through 6 and 11 through 16. Indicators 7 through 10 should be marked out for the assessment of a Safety Provider that will reside in the family home and provide safety interventions in the family home as defined in the Temporary Parental Safety Agreement.

Initial Safety Provider Assessment Instructions

Guidance on Initial Safety Provider Assessment indicators

1. Ask the safety provider about their history with the family and knowledge of the child(ren)'s needs that may be associated with separation from their parents. Do safety providers know the child(ren)'s daily routine and are they willing to make changes to accommodate child(ren)'s daily and emotional needs? Is the safety provider familiar with any child behavioral issues and how to best deal with those behaviors.
2. Supervision needs vary with the age and maturity of the child. The family should be referred to appropriate resources, both within and outside the agency that can help them meet the needs. For a preschool child, this would include day care; for a young school-aged child, the need might be an afterschool arrangement; for teenagers, referrals might be to community recreation, work, or volunteer opportunities.
3. Be prepared to offer a variety of alternative disciplinary methods that are appropriate to the age and maturity of the child. The material from TIPS-MAPP on "Teaching Children Healthy Behaviors" is a useful guide.
4. Discuss the medical and educational needs of each child to be placed and how these needs will be met. Are there any scheduled appointments for the child(ren) and to ensure the child(ren) gets to those appointments. Is there a need to schedule treatment for any condition or to assess for any medical, dental, developmental, or educational needs? Who will be responsible to making these appointments and how with the parent(s) be involved? What information needs to be provided to the safety provider regarding any medical, dental, developmental or educational needs? If the child(ren) is school aged, what does the safety provider know about the child(ren)'s behavior and academic performance in school. Are there issues that need to be discussed with school personnel? Who will notify the school of the temporary changes required by the Temporary Parental Safety Agreement?
5. Discuss the safety provider's relationship with the family. Discuss the allegations or findings of fact with the safety provider in an objective manner, and the immediate plans that are being developed with the parent(s). Listen for the safety provider's attitude about the allegations or findings. Discuss any concerns you may have about the safety provider's expressed or observed attitudes. Discuss what constitutes abuse and neglect with the safety provider(s). Make sure the safety provider understands their requirement to report to the social worker any concerns or observations they have that could indicate additional instances of abuse or neglect while in the parent's care. Be prepared to educate the safety provider regarding reporting requirements and behavioral indicators. Prepare any written material that may be helpful for the safety provider to use for review.
6. Listen for the safety provider's attitude about the birth family and about family contact. Discuss any concerns you may have about the safety provider's expressed or observed attitudes. Discuss the way that they would be expected to interrelate with the child. Discuss parental visitation rights and the next planned contact; ask for and incorporate to the extent possible safety provider's wishes regarding their involvement with visitation arrangements. Discuss contact with other extended family members.
7. Observe the condition of the home. Tour the house looking for the listed items. If a small repair would allow the family to meet the requirement, ask about their resources within the kinship network. If needed, discuss voluntary resources within the community or agency funds to accomplish the repair(s) quickly.

Initial Safety Provider Assessment Instructions

8. Personally observe and evaluate the functioning of the bathroom fixtures and kitchen appliances; determine if the outhouse is far enough away from water source to present no health hazard; evaluate condition of outhouse regarding cleanliness, presence of dangerous insects, rodents, snakes, ask about the frequency of cleaning the outhouse.
9. Observe the area designated for the child; address any concerns. If resources are needed such as a bed, ask the safety provider if someone in the family might have the needed items. If not, see if your agency has resources to help purchase such items, or ask about donations. Some second hand stores may be willing to provide furniture free or at reduced prices. Your agency may want to recruit donations from the community to have available in emergencies. Will the child(ren) have adequate privacy?
10. Discuss signs of financial security. Discuss the immediate financial needs of the child, health problems, or other issues that will impact the family's finances. Ask them if their financial resources will be sufficient to provide for the child as well as for the other members of the household. Discuss the family's sources of income and current expenses.
11. If a person has a criminal record of convictions, discuss with the supervisor whether or not the criminal behavior would preclude placement. Factors to be considered on convictions include: the length of time since the conviction; the number of convictions that might indicate a pattern of criminal behavior; the types of crimes; criminal behavior that suggests alcohol or substance abuse. Exceptions to this requirement MUST have immediate supervisory approval, with the rationale for exceptions documented and initialed by the supervisor in the case record. CPS substantiations usually preclude use of the home as a placement. If the safety provider's explanation of the incident suggests the possibility of granting an exception, review the CPS findings in the case to determine if an exception could be appropriate. For example, if a person was substantiated for neglect several years ago, completed parenting classes, and has demonstrated adequate and appropriate parenting skills since, they might be considered for a placement. As above, exceptions to this requirement MUST have immediate supervisory approval, with the rationale for exceptions documented and initialed by the supervisor in the case record.
12. An accurate assessment of the potential safety providers' use of alcohol and/or other substances that could interfere with their ability to provide care is required. Introduction of this discussion should, therefore, be non-judgmental. If there is a history of substance-related criminal convictions, this should be addressed after the self-report of use. For example, if a person had several convictions for driving under the influence, it will be important to determine whether or not they are still drinking or using other intoxicants.
13. If domestic violence is suspected or confirmed, utilize the domestic violence resources/assessment tools for enhanced practice. Assess the safety provider's relationship(s) to determine if there is/has been an established pattern of domestic violence, and if there are current safety issues that could put the child at risk of future emotional and or physical harm. If the safety provider has been a perpetrator of domestic violence, discuss if they have completed a batterer intervention program. If the safety provider has been victim of domestic violence, discuss if they have sought support services such as a protective order, domestic violence education, counseling, etc. Assess the safety provider's view of domestic violence, its effect on the child, and their capability and willingness to protect the child. Discuss any concerns with the supervisor regarding the appropriateness of the kinship placement.

Initial Safety Provider Assessment Instructions

14. Social worker judgment is a key tool to assessing this requirement. The social worker should note comments that the safety provider makes about their physical and mental state during the interview process. Observations of affect, responses to other household members, and outlook on life are good clues to a person's status. During the assessment of this factor, explore any issues of concern that you may have. If needed, ask for release of information to get a physician's report of health and the likely physical and mental impact of caring for the child.
15. This indicator is intended to identify case specific issues that may impact the success of the child in the care of this provider.
16. Ask the safety provider if they are willing and able to provide a home for the child on a temporary basis, and how long they can provide it. If they cannot provide care for a minimum of 45 days, determine whether or not their involvement as a safety provider will meet the needs of the situation.

Child and Family Team Meetings and Use of Initial Safety Provider Assessment

As stated in policy, a CFT should be held regarding any separation of child(ren) from their parents or when a placement change/disruption for a child may occur. A CFT will support open communication between all involved, can help address issues around safety planning, decisions regarding initial agreements and about services, and identify ways to help child(ren) transition successfully, and could reduce issues regarding use of a Safety Provider. If a CFT cannot be held prior to use of a new Safety Provider and the child(ren) being placed with the Safety Provider, then a CFT must be scheduled as soon as possible.

The times that an Initial Safety Provider Assessment will be of value during a CFT are:

During an assessment:

- If a Temporary Parental Safety Agreement requiring separation or restriction is being proposed
- If nonsecure custody is considered the only means necessary to ensure safety of the child.

During this CFT meeting, other safety interventions, as well as all possible Safety Providers must be discussed.

During foster care services:

- When a child's placement is at risk of disruption
- When a relative/fictive kin have been identified for possible placement

(Provide LINK to CFT in current policy.)