Department of Children & Family Services Building a Stronger Louisiana	**Division/Section**	Child Welfare
	Chapter No./Name	4 – Child Protective Services (CPS)
	Part No./Name	5 – Conducting Investigations of Reports of Child Abuse and/or Neglect in Families
	Section No./Name	Conducting Investigations of Reports of Child Abuse and/or Neglect in Families
	Document No./Name	4-516 Safety Assessment
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I. STATEMENT OF POLICY

It is the policy of the Department of Children and Family Services that safety is assessed in completed investigations.

II. PROCEDURES

A. SAFETY ASSESSMENTS

The Safety Assessment as part of the Child Welfare Assessment and Decision Making Model is a structured process used to determine whether a child is at danger of substantial harm from abuse/neglect. It is initiated during the first contact with the alleged victim and the parent/caretaker and continues throughout the investigation. During the initiation of the investigation the worker shall verify who has legal custody of the minor child(ren). If the caretaker reports having legal custody, the CPS worker shall view the document and ensure that the document is signed by a judge as legal custody is only granted through the court. Provisional Custody by Mandate does not give an individual legal custody as it is not signed by a judge. Provisional Custody by Mandate does not ensure safety of the child(ren). A safety assessment shall be completed on all legal caretakers as the formal, required safety assessment cannot be completed on a temporary caretakerFor instance, a safety assessment cannot be based on a relative who is temporarily providing for a child while the parent still retains legal custody.

A safety assessment is to be completed on each household. All caretakers and children within each household, along with children that the parent may have custody of, must be assessed unless diligent efforts to locate were unsuccessful.

Staff shall assess the safety of all the children residing in the home. Safety is assessed informally at each and every investigation contact, and formally through completion of the Safety Assessment Form 5. The process includes assessing threats of danger, child vulnerability, and the parent/caretaker protective capacities.

The worker is expected to explore the 8 threats of danger listed in the safety assessment to determine whether a child is vulnerable to the threats. The worker shall also determine if the caretakers possess sufficient protective capacities to manage any threat of danger.

A child is SAFE when there are no threats of danger, OR they are not vulnerable to threats of danger, OR the caretaker(s) possess sufficient protective capacity to manage any threat of danger.

A child is **UNSAFE** when there are identified threats of danger, **AND** they are vulnerable to a threat of danger, **AND** any caretaker does not possess sufficient protective capacities to manage any threat of danger.

1. CONDUCTING THE SAFETY ASSESSMENT

Sufficient information gathering shall occur to assess safety for all children in the case. Consider agency history, Assessment of Family Functioning, interviews, observations, collaterals, and supporting documentation to complete a thorough safety assessment.

One Safety Assessment is required on all completed investigations (except Special Closure) and must be approved by the supervisor within 15 calendar days from the date of the report. A safety assessment is also required at any point a threat of danger is identified. The Safety Assessment is completed by the worker with consultation with the supervisor and must be approved by the supervisor in ACESS within 5 days of the assessment.

a. Threats of Danger and Child Vulnerability

Threats of Danger refers to the caretaker's behavior or family situation that indicates serious harm to a child.

- Caretaker's behavior is violent, dangerous and/or impulsive which indicates that child safety is of serious concern.
- Caretaker's perception or behavior towards child is extremely negative and unrealistic resulting in serious emotional and/or physical harm to a child.
- Caretaker has caused significant harm to a child or made a threat, which indicates child safety is of serious concern.
- Caretaker is unable, unwilling, or does not meet a child's basic needs for necessary food, clothing, shelter, medical, or mental health and child safety is of serious concern.
- Caretaker is unable, unwilling, or does not provide necessary supervision, protection, or care and child safety is of serious concern. This may be due to physical or mental health issues, substance abuse, domestic violence, cognitive or developmental deficits, or poor judgment.
- Caretaker refuses access to a child, whereabouts cannot be determined, and/or there is reason to believe family may flee and circumstances indicate child safety is of serious concern.
- Sexual abuse or exploitation is suspected, and circumstances indicate that child safety is of serious concern.
- Current circumstances combined with history of abuse/neglect (child welfare agency and/or law enforcement involvement) indicate that child safety is of serious concern.

Child Vulnerability refers to the extent that a child can protect himself/herself from identified threats of danger or risk of repeat maltreatment. Consider factors such as dependence on others to meet basic needs; physical, medical, behavioral, or mental condition; ability or inability to communicate their needs, and previous exposure to trauma.

b. Caretaker Protective Capacities

Caretaker Protective Capacities refers to the strengths in the way a caretaker thinks, feels, and/or acts that prevents or controls threats of danger.

- History of protecting from harm and unsafe conditions.
- Recognizes threats and has ability to implement plan to protect child(ren).
- Demonstrates impulse control in order to protect and provide for child's overall care.
- Understands, has the skills needed, and takes action to meet parenting responsibilities.
- Sets aside own need where the safety and well-being of child(ren) are the caretaker's priority.
- Demonstrates love, empathy, and tolerance of child(ren), and is positively attached.
- Understands child development and has realistic expectations of child's capabilities, needs, and limitations.
- Is able to meet their **own** needs, including basic daily and emotional needs.
- Has ability to handle every day, unexpected stressors/crises and has an accurate perception of reality.
- Demonstrates ability to obtain concrete supports needed such as food, clothing, housing, social services, transportation.
- Caretaker can and will access family and/or friends who are ready, willing and able to help the family.

See Appendix 3-B for Threats of Danger, Child Vulnerability, and Caretaker Protective Capacities.

c. Safety Plan Analysis

When a child is determined to be unsafe, a Safety Plan Analysis is conducted to determine what type of safety plan is possible. Refer to DCFS CW Policy 4-521 for the types of safety plans. The analysis consists of the following:

- Is an In Home Safety Plan feasible?
  - Do the caretakers have a living situation that is calm/consistent/stable enough where an in-home safety plan and services can be implemented?
  - Are the caretakers willing to accept, be cooperative with, and comply with an in-home safety plan and services?
  - Is there a suitable safety monitor who believes that a safety plan is needed, and is able to place the child's safety and needs above their relationship with the caretaker(s)? Refer to Section 2b of this policy for requirements of a safety monitor/provider.

If the answer is yes to all three above, then an in-home safety plan can be implemented. If the answer is no, then a court-ordered safety plan should be the next option.

- Is a Court Ordered Safety Plan feasible?
  - If there is a suitable alternative caretaker or safety monitor, BUT at least one of the caretakers is not willing or able to cooperate with an in-home safety plan, can a court ordered safety plan be implemented?

- If an in-home safety plan or court ordered safety plan is not possible, is transfer of provisional custody or Foster Care the safety plan?

- If Safety Assessment is conducted on a foster care placement, did the Child Welfare Manager approve use of a safety plan as compared to changing the foster care placement? Refer to CW Policy 4-1216 for Safety Assessment and Management in Foster Home Investigations. It should be the rare occasion that a safety plan is completed in a foster home.

2. CONSIDERATIONS FOR A SAFETY PLAN ANALYSIS

a. Safety Plan Criteria

When a threat of danger is identified that the child is vulnerable to and there are not sufficient caretaker protective capacities to manage the threat, a safety plan shall be developed and implemented immediately. When a safety plan is developed, **CPS staff shall refer and staff with FS within 5 calendar days of implementing the safety plan unless unsafe conditions have been resolved or if the safety plan is Foster Care. Until the staffing occurs and the case is accepted, the CPS worker is responsible for maintaining at least weekly**

contact (by phone or face-to-face) or more frequently based on supervisory consultation.

b. Appropriateness of Safety Monitor/Provider

Safety Monitors/Providers are suitable individuals who provide oversight of the In-Home Safety Plan to assure the provisions of the plan are followed and the safety threats to the child/children are being controlled. A Safety Monitor/Provider may be professionals, paraprofessionals, volunteers or individuals who are part of the family network such as extended family, church members, friends, etc. Judging the suitability of those who can potentially participate in the safety plan must occur with expedience and is a continuing process. An agency clearance should also be conducted on all safety monitors. If the person does have an active CPS case or history with the agency, the worker in consultation with the supervisor shall discuss the appropriateness of the person providing the service.

What Criteria Can Be Used To Judge Safety Monitors/Providers Suitability?

- The person must be a responsible adult who understands what the threats of danger are and accepts them as existing, serious, and concerning.
- The person must be trustworthy, willing to work with the Department in a cooperative/collaborative relationship, and willing to communicate regularly concerning all matters associated with the Safety Plan.
- The person's viewpoint toward the child and attitude toward the child's parents is appropriate and realistic.
- The person's beliefs about what happened that required safety intervention and who is responsible are reasonable and appropriate.

c. Checklist for Developing Sufficient Safety Plans

The worker and supervisor will refer to the process below to develop sufficient Safety Plans.

- Evaluate the parent/caretaker's perceptions about the threat of danger
- Explain the need for a Plan to control the situation;
- Acknowledge the parent/caretakers rights, discuss options, and emphasize choices;
- Seek the parent/caretaker's involvement in creating a Safety Plan utilizing people and resources available to them;
- Identify with the parent/caretaker, people and resources that are suitable and available for implementing a Safety Plan;
- Confirm the parent/caretaker's willingness and capacity to cooperate and participate in identified areas of responsibility given them as part of the Safety Plan;

- Confirming that the identified resources and individuals are in agreement and available at the times needed; and
- An Agency Clearance should be conducted on all safety monitors. If a valid finding is located this information should be assessed as to the suitability of the safety monitor.

The worker in consultation with the supervisor develops the safety plan with the parents/caretakers and the safety monitor providers. See Form 5-SP and Form 5-SP Instructions in regards to DCFS safety plan.

3. DEVELOPING THE SAFETY PLAN

a. Documenting In-Home Safety Plans

Managing safety is crucial with the development and implementation of a safety plan needing to occur with the highest sense of urgency. The safety plan is documented on the paper version of the Safety Plan (Form 5-SP). The parent/caretakers, safety monitors and/or safety providers sign the form to indicate agreement. When the Supervisor is not present and the parent/caretaker refuses to sign the safety plan, the worker will make a notation of the parent/caretaker's response on the plan and consult with a supervisor immediately to consider other alternatives.

The Safety Plan is also signed by the worker and supervisor upon the worker's return to the office. A copy of the plan should be left with the parent/caretakers, safety monitor, and safety provider the day the plan is implemented. If signatures are needed, the unsigned copy shall be provided on the day of implementation, following up with providing a signed copy to the parties no later than 48 hours of the plan development. The completed plan with all signatures is attached to the ACESS record within 3 days. The plan is monitored by the worker and safety monitor/ safety provider.

b. Safety Management

Safety Management is the intervention used to control or manage threats of danger to a child. Safety management includes in-home or out-of-home actions. Safety management must be capable of having an immediate effect, be available immediately and accessible and sufficient to control the danger or threat of danger. Safety management is concerned with controlling danger and threats of danger only and cannot include any promissory commitments or restrict a legal parent/caretaker's access to their child.

Safety management includes five safety management actions that can be applied alone or in combination. They may include behavioral management, crisis management, social connection, separation and resource support/concrete services.

Safety Management Actions

1. Behavioral Management
   - Out-patient or in-patient medical treatment
   - Substance abuse intervention – detoxification
   - Routine/Emergency medical care
   - Routine/Emergency mental health care
   - In-home health care
   - Supervision and monitoring

2. Crisis Management
   - Crisis intervention & counseling

3. Social Connection
   - Friendly visitor
   - Basic parenting assistance and teaching
   - Home Management/Life Skills
   - Supervision and monitoring
   - Social/Emotional Support
   - In-home babysitting

4. Separation
   - Planned absence of caretakers from the home (by protective order/restraining order)
   - Day Care
   - After school care
   - Respite Care

5. Resource Support/Concrete Services
   - Transportation services
   - Employment assistance
   - Housing assistance
   - Food/Clothing assistance

c. Safety Monitors/Providers Compliance with a Safety Plan

After the safety plan is composed, the prospective safety monitor/provider should be informed about the role and responsibility expected of him or her. This must be done in specific terms that review the need for the safety plan, the rationale for how the safety plan is to work, the person's responsibilities and role within the safety plan and expectations related to schedule, time commitments, access and availability and relationship to the Department.

The safety monitor/providers must:

- Understand and be in agreement with the requirements of the safety plan and be willing to fulfill them to the best of their ability;
- Agree to contact the worker/supervisor if any safety concerns arise or if they are unable to perform their responsibilities; and
- Agree to call 911 or local law enforcement for any life threatening emergencies.

As safety monitors/providers are participating in the safety plan, they must demonstrate behavior, attitudes, qualities that can further confirm their suitability or raise questions regarding their participation. The worker should continue to assess the safety monitor/provider's suitability while the plan is implemented.

d. Court-Ordered Safety Plans and Instanter Custody Order

If an in-home safety plan is not feasible based on the safety analysis, the next option to consider is a court-ordered safety plan. If an in-home or court-ordered safety plan is not possible, then the next option is an instanter custody order.

See policy 4-805 Emergency Removal of Children and policy 4-710 Emergency Protection Action.

III. FORMS AND INSTRUCTIONS

Form 5-SP / Instructions Safety Plan
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Form 5-CSP / Instructions Court Ordered Safety Plan

IV. REFERENCES

DCFS CW Policy 4-521 Types of Safety Plans