



Parents and Relatives/Kin Visitation Home Safety Checklist

There are scenarios in which the Child and Family Team may consider implementing visitations between child(ren)/youth and their non-offending parent/relatives/kin. This checklist outlines evaluating the safety of the non-offending parent/relative/kin's home environment. For additional information, please refer to [Policy 16.43, Supervised and Unsupervised Visitation Between Child/Youth, Family and Siblings](#).

Preparer's Name:		Date:		Region:	
PARENT/CAREGIVER INFORMATION:					
Primary Caregiver:	Last Name:		First Name:		Middle Initial:
Secondary Caregiver:	Last Name:		First Name:		Middle Initial:
Relationship to Child(ren):					
HOUSEHOLD MEMBERS INFORMATION (Adults and/or Children):					
Last Name:		First Name:		Middle Initial:	
Date of Birth:		Relationship to Parent /Caregiver:			
Last Name:		First Name:		Middle Initial:	
Date of Birth:		Relationship to Parent/Caregiver:			
Last Name:		First Name:		Middle Initial:	
Date of Birth:		Relationship to Parent/Caregiver:			
Last Name:		First Name:		Middle Initial:	
Date of Birth:		Relationship to Parent/Caregiver:			
ASSESSMENT:					
A. Parent/Caregiver Assessment:					
Does the caregiver have any concerns about meeting the child(ren)'s needs/keeping the child(ren) safe?					
Are there ways DCS can help alleviate concerns or increase safety?					

Outside of household members, are there other family members or anyone else that would be present during the visitations?

Describe a contingency plan for emergency situations. If there was an emergency, what is the plan to ensure the child/children is supervised, etc.?

List all current prescription medications being taken by any members of the home:

B. Home Safety Assessment: The answers provided should not be used to automatically disqualify, but rather provide an opportunity to partner with the parent/caregiver to resolve safety issues that may be a barrier.

Safety Measure	Yes	No	What is needed to support the family?
Water: Does the home have safe water for drinking and bathing?	<input type="checkbox"/>	<input type="checkbox"/>	
Food: Does the home have an adequate supply of food?	<input type="checkbox"/>	<input type="checkbox"/>	
Heating/cooling: Does the home have heating and/or cooling that is appropriate for the geographic region?	<input type="checkbox"/>	<input type="checkbox"/>	
Electricity/lighting: Does the home have access to electricity and/or lighting based on the children's needs?	<input type="checkbox"/>	<input type="checkbox"/>	
Insects and rodents: Is the home free of insect and rodent infestation? This topic intends to reference infestation that creates a safety or health issue.	<input type="checkbox"/>	<input type="checkbox"/>	
Pets: Are pets at the home safe to be around (that is, do not pose a health or safety threat)?	<input type="checkbox"/>	<input type="checkbox"/>	

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution:

CS-4261, 5/24

<p>Outdoor areas: Is the outdoor space that children will have access to safe, based on their age and development?</p> <p>Consider potential hazards: swimming pools and hot tubs, bodies of water like lakes and rivers, street traffic, railroad tracks, farm animals and equipment, trampoline, wells, etc.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Other hazards: Is the home free from any other safety hazards in the home or surrounding area that children have access to?</p> <p>This may include overflowing garbage, uncontained pet waste, mold, peeling lead paint, excessive debris, etc.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Tools and hazardous materials: Are tools and hazardous materials stored out of reach of children?</p> <p>This may include power or yard tools, saws, axes, pesticides, gasoline cleaning supplies, knives, alcohol, tobacco, etc.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Medications: Are prescription and over-the-counter medications (including vitamins, herbal remedies, and pet medications) stored out of reach of children?</p> <p>Exceptions: A child who takes their own medication, or who has emergency medication, like an EpiPen or inhaler.</p> <p>Note: Discussion with parent/caregiver regarding the child(ren)'s medication(s).</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Firearms and weapons: Are firearms, weapons, and ammunition stored locked, unloaded, and inaccessible to children?</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Phone: Does the family (including children) have access to a working phone or way to call for help in an emergency? Includes cell phones, landlines, Wi-Fi calling, and shortwave radios.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Fire hazards: Is the home free from fire hazards such as:</p> <ul style="list-style-type: none"> • Exposed wires or electrical outlets • Flammable materials within 3 feet of a fire source, like a space heater or wood stove • Multiple extension cords connected together 	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Sleeping space, if applicable: Does the home have a safe sleeping space with bedding for each child? Typically, each child should have their own bed.</p> <p>For children under 12 months: Sleep space must be safe for infants, with appropriately sized bedding and free of blankets and other items like pillows and stuffed animals. Bedding options are a bassinet, crib, or a pack and play. A safe crib is a bassinet, play-yard, or crib that has the spindles no wider than 2-3/8 inches apart and sides that do not drop down.</p> <p>For children over 12 months (based on age and development): Options are a bed, bunk bed, sleeper sofa, or futon. An air mattress or couch may be used temporarily until children have a permanent bed. Toddlers may continue to sleep in a crib or pack and play.</p>	<input type="checkbox"/>	<input type="checkbox"/>	

Transportation, if applicable: Does the caregiver have a way to transport the children to appointments and activities? May include: public transportation, access to someone else's car, a plan for others to support, etc. Does the caregiver have proper age-appropriate child vehicle restraints?	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Discussed with caregiver:</p> <p>Tennessee Code Annotated, Section 37-2-414(e)</p> <p>It is an offense for a foster parent from a kinship placement to knowingly allow a child in the foster parent's care to visit with the child's parent if the foster parent had knowledge of a current court order prohibiting the parent from visiting with the child. (B) A first violation of subdivision (e)(2)(A) is a Class C misdemeanor punishable by a fine only. (C) A second or subsequent violation of subdivision (e)(2)(A) is a Class B misdemeanor.</p> <div style="text-align: right; margin-right: 100px;"> Primary Caregiver Secondary Caregiver Caregiver Initials: _____ </div>			
<p>RECOMMENDATION:</p> <p>What is your recommendation for visitation?</p> <p><input type="checkbox"/> Yes, recommend.</p> <p><input type="checkbox"/> Yes, recommend once critical items are addressed.</p> <p><input type="checkbox"/> Not recommended.</p> <p>Provide comments explaining the reason for the recommendation if critical items must be addressed or if not recommended.</p> 			
Family Service Worker Signature:			Date:
Supervisor Signature:			Date: