

Date of Safety Assessment:			Type of Assessment:						
I.	Family Name:			Case number:			Caseworker Name:		
Suf	Child's Name			Age	Suf	Child's Name			Age
Caregiver Name			Rel	Date Seen	Caregiver Name			Rel	Date Seen
II. Identify Safety Threats Below				List each child by name or suffix in the column. Note: only select Yes if the safety threshold was met			Explain how safety threshold was met/ not met (Safety Threshold: vulnerable child, specific, out-of control, imminent, and serious harm likely)		
Date of Face to Face Contact:									
1. Caregiver(s) intended to cause serious physical harm to the child		Y							
		N							
2. Caregiver(s) are threatening to severely harm a child or are fearful that they will maltreat the child		Y							
		N							
3. Caregiver(s) cannot or will not explain the injuries to a child		Y							
		N							
4. Child sexual abuse is suspected, has occurred, and/or circumstances suggest abuse is likely to occur		Y							
		N							
5. Caregiver(s) are violent and/or acting dangerously		Y							
		N							
6. Caregiver(s) cannot or will not control their behavior		Y							
		N							
7. Caregiver(s) reacts dangerously to child's serious emotional symptoms, lack of behavioral control, and/or self destructive behavior		Y							
		N							
8. Caregiver(s) cannot or will not meet the child's special, physical, emotional, medical, and/or behavioral needs		Y							
		N							
9. Caregiver(s) in the home are not performing duties and responsibilities that assure child safety		Y							
		N							
10. Caregiver(s) lack of parenting knowledge, skills, and/or motivation presents an immediate threat of serious harm to a child		Y							
		N							
11. Caregiver(s) do not have or do not use resources necessary to meet the child's immediate basic needs which presents an immediate threat of serious harm to a child		Y							
		N							
12. Caregiver(s) perceive child in extremely negative terms		Y							
		N							
13. Caregiver(s) overtly rejects CPS/GPS intervention; refuses access to a child; and/or there is some indication that the caregivers will flee		Y							
		N							
14. Child is fearful of the home situation, including people living in or having access to the home		Y							
		N							

III. Are Safety Threats Present? Yes? No? If Yes, complete the following:

Discussion Protective Capacities: A protective capacity is a specific quality that can be observed and understood to be part of the way a caregiver thinks, feels, and acts that makes him or her protective. The purpose of determining whether or not a caregiver has protective capacities is to 1) determine if the child can be safe with that caregiver, 2) to determine when a child could be safely returned to the home, and/or 3) to determine if the case can be closed. Protective Capacities can be absent, enhanced or diminished. Consider each identified safety threat. What protective capacity must be enhanced and in operation to mitigate that threat? For enhanced protective capacities, describe specifically how that protective capacity would prevent the safety threat from reoccurring in the near future.

Caregiver Name	Safety Threat By #	Child Suffix/ Name	List the Caregiver Protective Capacities which, when enhanced AND used, would mitigate the safety Threat.	Indicate if the Protective Capacity is enhanced, diminished or absent. For enhanced protective capacities describe how the selected capacity prepares, enables, or empowers the caregiver to be protective. Will the caregiver(s) be able to put the protective capacity into action?

IV. Safety Analysis: As part of your analysis, respond to the following four questions:

How are safety threats manifested in the family?

Can an able, motivated, responsible adult caregiver adequately manage and control for the child's safety without direct assistance from CYS?

Is an in-home CYS managed safety plan an appropriate response for this family?

What safety responses, services, actions, and providers can be deployed in the home that will adequately control and manage safety factors?

V. Children Who Were Not Seen: Every effort should be made to see each child in the family face-to-face to determine if they are safe. If there is a child in the family that was not seen (e.g. child runaway), list their name and provide justification as to why they were not seen, how long it has been since someone has seen the child and the plan identified to locate the child and to assure that child's safety.

Child Name	Age	Justification

VI. Safety Decision -

List each child by name or suffix

Decision Date:

Safe: Either caregiver's existing protective capacities sufficiently control each specific and identified safety threat or no safety threats exist. Child can safely remain in the current living arrangement or with caregiver. Safety plan is not required.

Safe with a Comprehensive Safety Plan: Either caregivers' existing protective capacities can be supplemented by safety interventions to control each specific and identified safety threat; or the child must temporarily reside in an alternate informal living arrangement. No court involvement is necessary; however a safety plan is required.

Unsafe: Caregivers' existing protective capacities cannot be sufficiently supplemented by safety interventions to control specific and identified safety threats. Child cannot remain safely in the current living arrangement or with caregiver; caregivers can no longer retain custody, court involvement is required. Safety plan is also required.

VII. Signatures of Approval (Requires Supervisory Discussion)	Case Worker Name	Signature	Date
	Supervisor Name	Signature	Date