

Handouts for the Webinar

Safety Plans Are Changing: What You Need to Know

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DRAFT North Carolina Policy on Safety Planning
REVISED North Carolina Safety Assessment (DSS-5231)
Webinar Slides

Safety Planning

The primary concern of child welfare is protecting children. At no time should a social worker leave a child in unsafe circumstances. The intent of safety planning is to reach an agreed upon plan with the family that imposes the lowest level of intrusiveness possible while assuring a child's safety.

A safety agreement must be all of the following:

- 1) Sufficient to manage safety;
- 2) Reasonably tailored to the allegations provided in the CPS report and the child safety issues that exist within the family;
- 3) Immediately available so that it is capable of being in operation the same day it is created; and
- 4) A plan that includes actions and goals that are specific and measurable.

Safety agreements must be individualized. While this is not an exhaustive list, there are four main categories of safety interventions that may be incorporated into a safety agreement:

- 1) Resource support refers to safety actions that address a shortage of family resources and resource utilization (such as obtaining heat, water, electricity, food, child care, etc.), the absence of which directly threatens the safety of the child.
- 2) Social support includes actions that reduce social isolation. Social support may be used alone or in combination with other actions in order to reinforce and support the capacity of the parents or other caregivers.
- 3) Crisis management is specifically concerned with intervening to bring a halt to a crisis and to facilitate problem solving to bring a state of calm to a family. The purpose of crisis management is to quickly control the threat to the child's safety. Crisis management will often be employed along with other safety actions.
- 4) Separation or restriction refers to the removal of any household member from the home for a period of time or otherwise interfering with a parent's custodial rights. Separation is viewed as a temporary action. Separation may involve, among other things, the child temporarily moving to a safe environment, a friend or relative moving into the home, the protective parent moving with the child to a safe environment, a parent agreeing not to have unsupervised contact with the child, a parent agreeing to forfeit decision-making authority over the child, or the alleged perpetrator agreeing to leave the home.

A safety agreement is made between a parent and a county child welfare agency during the assessment phase of a case if a child is in immediate danger in his or her own home because of a safety threat (defined below). In some circumstances during an assessment, a safety agreement may be used when a part of the environment must be controlled in order to determine whether there is sufficient evidence to support a case decision finding that the reported allegations of abuse, neglect, or dependency occurred. In some cases, it may involve one or more family members leaving the home or an agreement that certain family members will not have unsupervised contact with other family members.

Safety Threat Defined

A safety threat exists when there are conditions or actions within the child's home that represent the likelihood of imminent serious harm to the child. There are two types of safety threats: present and impending.

- 1) Present safety threat refers to an immediate, significant, and clearly observable family condition (severe harm or threat of severe harm) occurring to a child in the present. Present danger is

easier to detect because it is transparent and is occurring now. If present danger is observed, the child is not safe.

- 2) Impending safety threat refers to threatening conditions that are not immediately obvious or currently active but are out of control and likely to cause serious harm to a child in the near future. Impending danger is covert. Impending danger is a threat that can be reasonably expected to result in serious harm if safety action is not taken and/or sustained. These threats may or may not be identified at the onset of involvement by a county child welfare agency, but are understood upon a more complete evaluation and understanding of the individual and family conditions and functioning.

In order to be classified as a safety threat, a situation, condition, or behavior must meet the safety threshold. The safety threshold is the point when a parent's behaviors, attitudes, emotions, intent, or circumstances create conditions that fall beyond mere risk of future maltreatment and have become an actual imminent threat to the child's safety. These conditions could reasonably result in the serious and unacceptable pain and suffering of a vulnerable child.

When a safety threat (present or impending) is alleged (i.e.—an accepted CPS report) or identified (i.e.—evidence uncovered during the assessment), the Safety Assessment ([DSS-5231](#)) must be completed and documented. If a safety agreement is needed to address identified safety indicators, a Temporary Parental Safety Agreement must be developed.

Temporary Parental Safety Agreements

A Temporary Parental Safety Agreement is a voluntary, temporary agreement made between a parent and a county child welfare agency during the assessment phase of a case if a child is in immediate danger in his or her own home because of a safety threat (defined above). A Temporary Parental Safety Agreement may incorporate safety interventions from any of the categories outlined above.

Temporary Parental Safety Agreements are only available when the parent voluntarily agrees to the terms outlined. Temporary Parental Safety Agreements involving separation or restriction should only be used when less intrusive safety interventions are not sufficient. The social worker must work with parents to identify less intrusive safety interventions before separation or restriction is considered.

When making a Temporary Parental Safety Agreement that involves separation or restriction, the assessment social worker must complete an Initial Safety Provider Assessment and have it approved by the agency child welfare supervisor, prior to the child being in the care of the identified Temporary Safety Provider.

While the mere existence of an allegation without further information does not meet the safety threshold, sometimes the allegations are serious and cannot be adequately assessed without separating or restricting access of one family member from another. The most common example of this situation would be responding to allegations of sexual abuse when there is not sufficient evidence to determine whether the allegations occurred. As described below, a county child welfare agency may need to consider the use of a petition under N.C.G.S. § 7B-303(b) when the assessment of serious allegations requires separation. The petition may be appropriate when there are serious allegations; there is not enough evidence to file a petition to adjudicate the child abused, neglected, and/or dependent; and the parent will not agree to an element of separation or restriction.

A parent (someone with legal authority) is expected to sign the Safety Assessment and any resulting Temporary Parental Safety Agreement. The agency child welfare social worker and supervisor must sign the Safety Assessment and any resulting Temporary Parental Safety Agreement. If applicable, a

guardian, custodian, or caretaker, and/or approved Temporary Safety Provider(s) should sign the agreement.

The county child welfare agency must file a petition under G.S. 7B-302(c) when protective services are refused, regardless of whether the agency requests custody of the child. If the court adjudicates the child abused, neglected, and/or dependent, the court may order any of the dispositions included in G.S. 7B-903, including requiring the agency to supervise the child in the child's own home or place the child in the custody of a parent, relative, private agency, or other suitable person. If the county child welfare agency files a petition without asking for custody, and the situation deteriorates prior to the adjudication, the agency may file a motion for nonsecure custody without filing an additional petition.

Due Process Considerations

Under the United States Constitution, parents have a fundamental right to the care, custody, and control of their children. Safety actions falling under the separation or restriction category described above affect a parent's custodial rights. When a county child welfare agency interferes with this right, reasonable procedural protections must be in place. This procedural protection often takes the form of a hearing in Juvenile Court. In certain situations, in order to protect a child, a social worker conducting an assessment may be required to perform actions that affect a parent's custodial rights without first providing procedural due process. These instances should be used only to the extent necessary to protect the child and should not continue longer than necessary to assure safety. Procedural protection must be provided within a reasonable period of time, even when a parent agrees to the infringement on the parent's own custodial right.

Guardians, custodians, caretakers, and other relatives, do not have these same constitutional rights; this due process consideration only applies to birth and adoptive parents.

Although it may seem that filing a petition in Juvenile Court could be detrimental to the family, allowing the parent to have a hearing or another form of due process when his/her protected custodial rights are implicated is consistent with family centered social work practice.

Ensuring Voluntariness

Temporary Parental Safety Agreements are only available when the parent voluntarily agrees to the terms outlined. A social worker should never attempt to coerce a parent into agreeing to a Temporary Parental Safety Agreement with threats or promises that would affect the voluntary nature of the Temporary Parental Safety Agreement. An offer of a Temporary Parental Safety Agreement, even when the parent does not agree, may be included as an effort to prevent removal when asking the court to find that the agency made reasonable efforts.

Only the court may require supervised visitation between a parent and that parent's child. If a Temporary Parental Safety Agreement includes a provision that a parent will not have unsupervised contact with the child, the county child welfare agency must file a petition in Juvenile Court, unless it is absolutely clear that the arrangement remains voluntary on the parent's part.

Revocation

Because a Temporary Parental Safety Agreement exists only when it is voluntary; it may be revoked at any time.

- Parent: A parent may revoke when he/she communicates the withdrawal of his or her agreement. This revocation may occur verbally or in writing. Revocation must include notification of the county child welfare agency.
- Safety Provider: A safety provider may communicate his/her inability or unwillingness to continue to care for the child(ren). The safety provider must communicate this directly to the county child welfare agency.
- County child welfare agency: A county child welfare agency may modify or dissolve the Temporary Parental Safety Agreement at any time. When a Temporary Parental Safety Agreement is modified or dissolved, the county child welfare agency must ensure that everyone included in the Temporary Parental Safety Agreement has been notified as soon as reasonably possible.

When a Temporary Parental Safety Agreement requires modification (i.e. new concerns arise, some safety issues identified by the assessment have been addressed and others remain) the Temporary Parental Safety Agreement must reflect the changes.

If the county child welfare agency has obtained sufficient evidence that the alleged actions did not occur or that the safety threats no longer exist, the agency must dissolve the Temporary Parental Safety Agreement.

Any time that a Temporary Parental Safety Agreement is revoked or dissolved, the county child welfare agency must inform all individuals involved with the agreement and take action to ensure that the child is safe.

Monitoring Safety and Progress

The assessment social worker must meet with the parents and the child at regular intervals sufficient to ensure the safety and protection of the child, as well as monitor progress towards goals. At each contact, it is important that the social worker assess safety and any other concerns that have arisen. When assessing parents, the assessment social worker should assess whether, and to what extent, progress has been made. If the Temporary Parental Safety Agreement includes separation or restriction, the assessment social worker must assess whether the child can safely return home. The county child welfare agency must monitor all aspects of the Temporary Parental Safety Agreement to ensure that the child continues to be safe and the agreement continues to be necessary and voluntary. The county child welfare agency must return the child home as soon as it is safe to do so.

When separation or restriction is being utilized, the social worker must meet with the Temporary Safety Provider regularly to ensure the safety and protection of the child. It is important to ask the Temporary Safety Provider about any needs or issues regarding the Temporary Parental Safety Agreement or care of the child. Observations by the child welfare social worker are a part of the ongoing assessment of the continued need for the separation or restrictions.

Court Involvement

Only the court may require supervised visitation between a parent and that parent's child. If a Temporary Parental Safety Agreement includes a provision that a parent will not have unsupervised contact with the child, the agency must file a petition in Juvenile Court, unless it is absolutely clear that the arrangement remains voluntary on the parent's part. In no circumstances should the expectation that the supervision of contact continue without a court order after a case decision has been made.

At any time while a Temporary Parental Safety Agreement is in place, the county child welfare agency may consider involving the court. Under N.C.G.S. § 7B-302(c), a county child welfare agency is required to file a petition for the protection of the child when the parent, guardian, custodian, or caretaker refuses to accept the protective services provided or arranged by the child welfare agency. This petition may be filed with or without requesting nonsecure custody, depending on the circumstances that exist in the family at the time.

There are some circumstances where a Temporary Parental Safety Agreement is not sufficient, and Juvenile Court involvement must occur as soon as reasonably possible. Although this is not an exhaustive list, examples include:

- The alleged victim child has serious physical injuries that are not accidental such as abusive head trauma, internal injuries, or numerous broken bones;
- A safety threat exists, and a prior (Temporary Parental) Safety Agreement was executed, but the parent did not adhere to the agreement;
- A safety threat exists and the parent's ability to make changes is limited because of limited intellectual ability or a mental health diagnosis;
- A safety threat exists and there is no identified alternative caregiver that is willing to protect the child;
- A safety threat exists and there is no identified alternative caregiver whose home environment is appropriate; or
- A safety threat exists and at least one parent has communicated that he or she will not agree to a Temporary Parental Safety Agreement.

Additionally, filing a petition during the assessment is necessary when:

- A Temporary Parental Safety Agreement is not sufficient to ensure the safety of the child(ren); or
- There is reason to suspect the parent, guardian, or custodian will not abide by the Temporary Parental Safety Agreement.

In certain circumstances when there are serious allegations affecting the child's safety, a county child welfare agency will not have enough evidence to file a petition, but will not be able to conduct an adequate assessment while the alleged perpetrator is having contact with the child. In those circumstances, if the alleged perpetrator is a parent and refuses to voluntarily agree to a Temporary Parental Safety Agreement that includes an element of separation, the agency should consider filing an interference petition under N.C.G.S. § 7B-303(b). When the agency has obtained sufficient evidence that the alleged actions did not occur, the county child welfare agency should dissolve the agreement and ensure that everyone involved is aware that it is no longer in place as soon as reasonably possible. If the agency obtains sufficient evidence that the alleged actions occurred and the safety threat to the child still exists, the agency must file a Juvenile Petition, as soon as reasonably possible.

If, under a Temporary Parental Safety Agreement, a member of the household has been separated from the family or contact between any household members continues to be restricted at the time of case decision and the safety threat continues, the county child welfare agency must file a petition in Juvenile Court before the provision of in-home services or child placement services begins.

The filing of a Juvenile Petition and a request for custody are required in lieu of entering into a Temporary Parental Safety Agreement that involves a child moving to a home in another state, unless specifically

allowed by a border agreement with the other state. The Interstate Compact on the Placement of Children (ICPC) must be followed whenever required by N.C.G.S. § 3800 et. seq. or the ICPC regulations.

Filing a petition does not have to involve asking the court for nonsecure custody or placing the child in a foster home. An individualized decision should be made in each instance about the need for nonsecure custody, custody at disposition, or court involvement without custody. Nonsecure custody will only be granted when one or more criteria exist as specified in N.C.G.S. § 7B-503. Under N.C.G.S. § 7B-505, the court may place the child in a foster home or facility, with a relative, or with nonrelative kin. A county child welfare agency may file a petition, and an adjudication hearing may be scheduled without the agency requesting nonsecure custody. The county child welfare agency may request custody under N.C.G.S. § 7B-903 at the dispositional hearing following adjudication, regardless of whether the child remains in the home of the safety provider or is placed in a foster home or facility.

Notification

The county child welfare agency must notify all parties when a Juvenile Petition is filed.

Although the child may be in the physical custody of a relative or nonrelative kin at the time the court gives custody to a county child welfare agency, the agency remains obligated, within 30 days, to notify other close adult relatives (grandparents, great-grandparents, siblings, nieces, nephews, aunts and uncles) of the child welfare proceedings, as well. Please refer to Relative Notification information found within [Chapter IV; Section 1201; IV - Placement Decision Making](#) for the required notification elements.

Use of Child and Family Teams

As per the Child Welfare Services Manual ([Chapter VII: Child and Family Team Meetings](#)) a Child and Family Team (CFT) meeting may be held during an assessment to address issues of safety planning, as well as, to make initial agreements and decisions about services. However, it is not intended to be used for investigatory purposes.

During an assessment a CFT meeting must be held:

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

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

In the event that a CFT cannot be held prior to making a Temporary Parental Safety Agreement that involves separation or restrictions or filing for nonsecure custody, a CFT must be held as soon as possible.

NORTH CAROLINA
SAFETY ASSESSMENT

Page 1 of 8

Case Name: _____

Case #: _____ Date: _____

County Name: _____

Date Report Received: _____

Social Worker Name: _____

Children: _____

Caretakers: _____

Part A. FACTORS INFLUENCING CHILD VULNERABILITY

These are conditions resulting in child's inability to protect self. Mark all that apply to any child.

- | | |
|---|--|
| <input type="checkbox"/> Child is age 0-5. | <input type="checkbox"/> Child has diminished mental capacity. |
| <input type="checkbox"/> Child has diagnosed or suspected medical or mental condition, including medically fragile. | <input type="checkbox"/> Child has diminished physical capacity. |
| <input type="checkbox"/> Child has limited or no readily accessible support network. | <input type="checkbox"/> None apply |

The vulnerability of each child needs to be considered throughout the assessment. Younger children and children with diminished mental or physical capacity or repeated victimization should be considered more vulnerable. Complete this assessment based on the most vulnerable child.

Part B. CURRENT INDICATORS OF IMMEDIATE SAFETY

The following list is comprised of safety indicators, defined as behaviors or conditions that describe a child being in imminent danger of serious harm. Assess the above household for each of the safety indicators. Mark "yes" for any and all safety indicators present in the family's current situation and mark "no" for any and all of the safety indicators absent from the family's current situation based on the information at the time. Mark all that apply.

1. Yes No Caretaker caused serious physical harm to the child or made a plausible threat to cause serious physical harm in the current assessment as indicated by:

- Serious injury or abuse to the child other than accidental.
- Caretaker fears he/she will maltreat the child.
- Threat to cause harm or retaliate against the child.
- Substantial or unreasonable use of physical force.
- Drug-exposed infant
- Caretaker committed act that placed child at risk of significant/serious pain that could result in impairment or loss of bodily function.
- Caretaker intended to hurt child and does not show remorse.
- Death of a child.

Comments: _____

2. Yes No Child sexual abuse is suspected to have been committed by:

- Parent;
- Other caretaker; OR
- Unknown person AND the parent or other caretaker cannot be ruled out, AND circumstances suggest that the child's safety may be of immediate concern.

Comments: _____

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3. Yes No Caretaker is aware of the potential harm AND unwilling, OR unable to protect the child from serious harm or threatened harm by others. This may include physical abuse, emotional abuse, sexual abuse, or neglect. (Domestic violence behaviors should be captured under Indicator 10.)

- Caretaker fails to protect child from serious harm or threatened harm by other family members, other household members, or other having regular access to the child.
- An individual(s) with recent, chronic, or severe violent behavior resides in the home or caretaker allows access to the child.

Comments: _____

4. Yes No Caretaker's explanation or lack of explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.

- Medical exam shows injury is the result of abuse; caretaker offers no explanation, denies, or attributes to an accident.
- Caretaker's explanation for the observed injury is inconsistent with the type of injury.
- Caretaker's description of the cause of the injury minimizes the extent of harm to the child.
- Caretaker's and/or collateral contacts' explanation for the injury has significant discrepancies or contradictions.

Comments: _____

5. Yes No Caretaker fails to provide supervision to protect child from potentially serious harm.

- Caretaker present but child wanders outdoors alone, plays with dangerous objects, or on window ledges, etc.
- Caretaker leaves child alone (period of time varies with age and developmental status).
- Caretaker makes inadequate/inappropriate child care arrangements or plans very poorly for child's care.
- Caretaker's whereabouts are unknown.

Comments: _____

6. Yes No Caretaker does not meet the child's immediate needs for food or clothing.

- No food provided or available to the child, or child is starved/deprived of food/drink for long periods.
- Child appears malnourished.
- Child is without minimally warm clothing in cold months.

Comments: _____

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SAFETY ASSESSMENT**

7. Yes No Caretaker does not meet the child's immediate needs for medical or critical mental health care (suicidal/homicidal).
- Caretaker does not seek treatment for child's immediate medical condition(s) or does not follow prescribed treatments.
 - Child has exceptional needs that parents cannot/will not meet.
 - Child is suicidal and parents will not take protective action.
 - Child is homicidal and parents will not take protective action.
 - Child shows effects of maltreatment (i.e. emotional symptoms, lack of behavior control, or physical symptoms).

Comments: _____

8. Yes No Physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.
- Leaking gas from a stove or heating unit.
 - Dangerous substances or objects stored in unlocked lower shelves or cabinets, under sink, or in the open.
 - Lack of water, heat, plumbing, or electricity, or provisions are inappropriate (i.e. stove/space heaters).
 - Open/broken/ missing windows.
 - Exposed electrical wires.
 - Excessive garbage or rotted or spoiled food that threatens health.
 - Serious illness/significant injury due to current living conditions (i.e. lead poisoning, rat bites, etc.)
 - Evidence of human or animal waste throughout the living quarters.
 - Guns and other weapons are not stored in a locked or inaccessible area.
 - Dangerous drugs are being manufactured on premises with child present.

Comments: _____

9. Yes No Caretaker's current substance abuse seriously impacts his/her ability to supervise, protect, or care for the child.
- The caretaker is currently high on drugs or alcohol.
 - There is a current, ongoing pattern of substance abuse that leads directly to neglect and/or abuse of the child.

Comments: _____

10. Yes No Domestic violence exists in the household and poses an imminent danger of serious physical harm and/or emotional harm to the child.
- Child was in immediate danger of serious physical harm by being in close proximity to an incident(s) of assaultive behavior/domestic violence between adults in the household. This includes the child(ren) being in visual or hearing proximity of domestic violence events in the home.

Comments: _____

**NORTH CAROLINA
SAFETY ASSESSMENT**

11. Yes No Caretaker persistently describes the child in predominantly negative terms or acts toward the child in negative ways, AND these actions make the child a danger to self or others, suicidal, act out aggressively, or severely withdrawn.

- Caretaker repeatedly describes the child in a demeaning or degrading manner (i.e. as evil, possessed, stupid, ugly, etc.)
- Caretaker repeatedly curses and/or puts child down.
- Caretaker repeatedly scapegoats a particular child in the family.
- Caretaker blames child for a particular incident, or distorts child's behavior as a reason to abuse.
- Caretaker repeatedly expects unrealistic behavior(s) for the child's age/developmental stage.
- Caretaker views child as responsible for the caretaker's or family's problems.

Comments: _____

12. Yes No Caretaker's physical ability, emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.

- Caretaker has a physical condition that seriously impairs his/her ability to parent the child.
- Emotional instability, acting out, or distorted perception is seriously impeding ability to parent.
- Depression or feelings of hopelessness/helplessness immobilize the caretaker, who then fails to maintain child/home.
- Caretaker is overwhelmed by child's dysfunctional emotional, physical, or mental characteristics.
- Caretaker's cognitive delays result in lack of knowledge about basic parenting skills.

Comments: _____

13. Yes No Family currently refuses access to or hides the child and/or seeks to hinder an assessment.

- Family currently refuses access to the child and cannot or will not provide the child's location.
- Family removed the child from a hospital against medical advice.
- Family has previously fled in response to a CPS assessment.
- Family has a history of keeping the child away from peers, school, or other outsiders for extended periods to avoid CPS assessment.
- Family is otherwise attempting to block or avoid CPS assessment.

Comments: _____

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14. Yes No Current circumstances, combined with information that the caretaker has or may have previously maltreated a child in his/her care, suggest that the child's safety may be of immediate concern based on the severity of the previous maltreatment or the caretaker's response to the previous incident.

- Prior death of a child.
- Prior serious harm to any child.
- Termination of parental rights.
- Prior removal of any child.
- Prior CPS substantiation or services needed finding.
- Prior threat of serious harm to child.
- Caretaker failed to benefit from previous professional help.

Comments: _____

15. Yes No Child is fearful of caretaker, other family members, or people living in or having access to the home.

- Child cries, cowers, cringes, trembles, or exhibits or verbalizes fear in relation to certain individuals.
- Child exhibits anxiety, nightmares, or insomnia related to a situation associated with a person in the home.
- Child fears unreasonable retribution/retaliation from caretaker, others in the home, or others having access to the child.

Comments: _____

16. Yes No Other (specify): _____

**THE ALLEGATIONS ALONE DO NOT CONSTITUTE THE NEED FOR A SAFETY
INTERVENTION/SAFETY AGREEMENT.**

If any Indicators of Immediate Safety are marked "Yes", skip the bottom of this page and continue on the next page.

**If all Indicators of Immediate Safety 1 through 16 are "No",
check this box Safe and complete the part below (the remaining pages do not need to be completed).**

SIGNATURES			
Child's Parent or Legal Guardian: X	Date Signed:	Child's Parent or Legal Guardian: X	Date Signed:
Child's Parent or Legal Guardian: X	Date Signed:	CPS Social Worker: X	Date Signed:
Other Party: X	Date Signed:	CPS Supervisor: X	Date Signed:

Who Can I Contact?		
CPS Social Worker's Name:	Phone Number:	Email Address:
CPS Supervisor's Name:	Phone Number:	Email Address:

PART C: SAFETY INTERVENTIONS

Directions: For each factor identified in Section B, consider the resources available in the family and the community that might help to keep the child(ren) safe. Check each response necessary to protect the child(ren) and explain below.

Family Safety Interventions (Safe with a plan)

- 1. Monitoring and/or use of direct services by county child welfare agency.
 - 2. Use family, neighbors, or other individuals in the community in the development and implementation of a safety plan.
 - 3. Use community agencies or services.
 - 4. The alleged perpetrator will leave or has left the home--either voluntarily or in response to legal action.
 - 5. A protective caretaker will move or has moved to a safe environment with the child(ren) and there are no restrictions on protective caretaker's access to the child(ren)
 - 6. Identification of a Temporary Safety Provider by the parent with the social worker monitoring
 - A Temporary Safety Provider will move into the family home.
 - The child(ren) will reside in the home of a Temporary Safety Provider.
- Explain why responses 1-5 were insufficient.
-
-

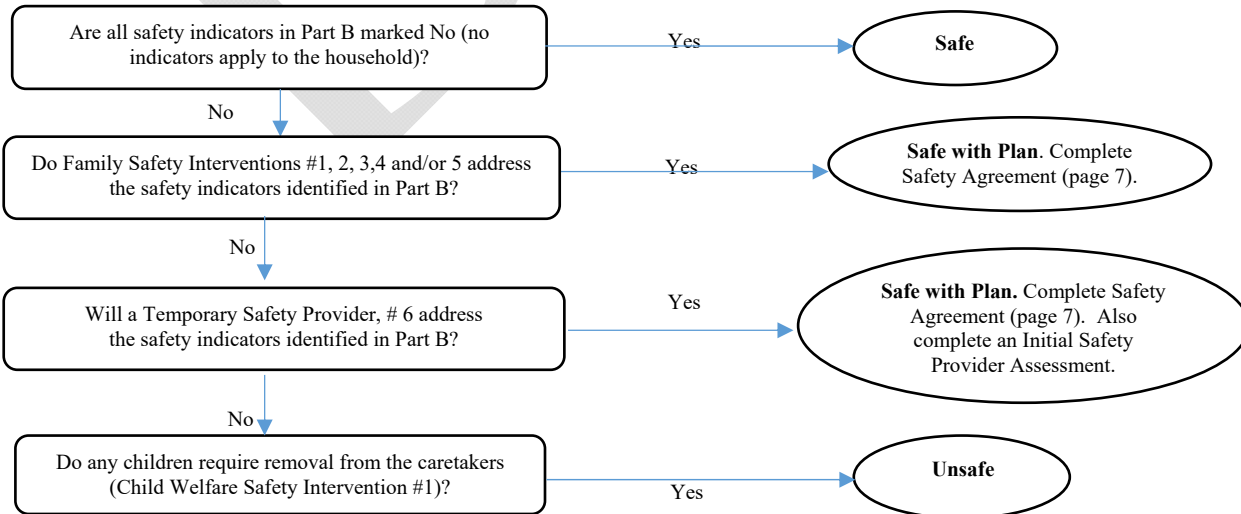
Child Welfare Safety Intervention (Unsafe)

- 1. Removal of any child in the household; interventions 1-6 do not adequately ensure the child(ren)'s safety. Explain why a Family Safety Intervention (1-6) could not be used to protect the child.
-
-

PART D: SAFETY DECISION

Directions: Identify your safety decision by checking the appropriate line below. Check one line only. This decision should be based on the assessment of all safety indicators, child vulnerability, and any other information known about this case. If "B" or "C" is checked, Section 2 must be completed.

- A. Safe:** _____ There are no children likely to be in immediate danger of serious harm. (Indicators of Immediate Safety all marked No, Marked Safe on Page 5).
- B. Safe with plan:** _____ One or more safety indicators are present; Safety Plan required.
 - Family Safety Interventions 1, 2, and/or 3 will address safety indicators
 - The alleged perpetrator left the home.
 - A protective caretaker moved to a safe environment with the child(ren).
 - Use of a Temporary Safety Provider.
- C. Unsafe:** _____ One or more children were removed in response to legal action.



PART E: SAFETY AGREEMENT

Purpose: A safety agreement is used only when there is a specific threat to a child in the immediate or foreseeable future. The plan must be created with the family and must be written in practical, action-oriented language.

Instructions: The social worker and the family complete this document; describing what tasks will be done to assure safety, by whom, how often, and duration. The tasks identified should include actions that need to be taken to keep child(ren) safe now, address risks to safety, and/or are necessary for the child(ren) to be able to return to the home (if the child(ren) leaves the home). Indicate how the social worker will be monitoring the plan. The social worker then reviews it with each parent, guardian, custodian and caretaker who will sign it. The social worker ensures that the parent or caretaker has read and/or understands the document and has initialed each applicable field. The social worker will work with the family to arrange for a review of the plan. The social worker then provides a copy to each person who signs the form. All persons involved with the safety agreement should sign the form.

Family Name:		Date:		
What is the specific situation or action that causes the child to be unsafe? What is the safety threat?	What actions need to be taken right now to keep the child safe?	Who is responsible for ensuring that these actions are taken?	Timeframe for completing the actions (no longer than 45 days)	Parent's or caretaker's initials

PART F: STATEMENTS OF UNDERSTANDING AND AGREEMENT

PARENT OR CARETAKER	INITIALS
1. I (the parent or caretaker) agree that I participated in the development of and reviewed this safety agreement. I agree to work with the providers and services as described above.	
2. My participation in this agreement is not an admission of child abuse or neglect on my part and cannot be used as an admission of child abuse or neglect.	
3. I understand that I have the right to revoke and/or have the Temporary Parental Safety Agreement reviewed at any time . (See bottom of page.) I also understand that if a Safety Agreement cannot be agreed upon or if the actions in the Safety Agreement are not followed, the county child welfare agency may have the authority to request that the court make a determination on how the child(ren)'s safety will be assured.	
4. I (the parent or caretaker) confirm that this agreement does not conflict with any existing court order, or if I am affected by a court order, all parties affected by the court order agree to this safety agreement on a temporary basis.	
5. I (the parent or caretaker) understand that CPS may refer for further services, may restrict access to my child(ren), or may ask the court to order that I complete services or place the child in foster care.	
6. If a Temporary Safety Provider is utilized, I understand that CPS will share any information with the Temporary Safety Provider for the safety and welfare of my child while the child lives in that home or the Temporary Safety Provider resides in the family home.	
7. This safety plan will cease to be in effect when I am notified such by my social worker, or CPS is no longer assessing or providing services to me or my family. This agreement will be reviewed by this date: (45 days or less).	

TEMPORARY SAFETY PROVIDER

1. If the parent is unable to provide a safe environment for the child and the court names the county child welfare agency as the child's legal custodian, I will be given priority consideration as a placement for the child if I agree and continued placement is determined to be safe.	
2. If I (the person providing care as Temporary Safety Provider) am unable to carry out this plan successfully, or if the child in my care is considered to be in an unsafe situation, the child will be moved to a different placement and further CPS involvement may be necessary, including court intervention.	

SIGNATURES

Child's Parent or Legal Guardian: X	Date Signed:	Child's Parent or Legal Guardian: X	Date Signed:
Child's Parent or Legal Guardian: X	Date Signed:	CPS Social Worker: X	Date Signed:
Other Party: X	Date Signed:	CPS Supervisor: X	Date Signed:
Temporary Safety Provider: X	Date Signed:	Temporary Safety Provider: X	Date Signed:

Who Can I Contact? (Who can I contact if circumstances change, if I have questions about CPS involvement, or if I have questions about this safety agreement? Who do I contact to revoke any or all parts of this agreement?)

CPS Social Worker's Name:	Phone Number:	Email Address:
CPS Supervisor's Name:	Phone Number:	Email Address:

REVOCAATION: I revoke my consent to the Temporary Parental Safety Agreement.

Signed: _____ Date: _____

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The purpose of the safety assessment is to help assess whether a child(ren) is likely to be in immediate danger of serious harm which may require a protective intervention and to determine what safety interventions should be maintained or initiated to provide appropriate protection.

It is important to keep in mind the difference between safety and risk when completing this form. Assessment of safety differs from assessment of risk in that safety assesses the child's present danger and determines the interventions immediately needed to protect the child. In contrast, the family risk assessment looks at the likelihood of future maltreatment.

Which cases: All CPS maltreatment reports assigned for an assessment that involve a parent, guardian, custodian or caretaker. **This does not apply** to reports involving residential facilities such as group homes or DHHS facilities. This tool shall be used when a Child Protective Service report has been made on a non-licensed living arrangement, the non-custodial parent's home, or licensed family foster homes.

The caretaker is the adult (typically one or both parents) living in the household who is responsible for the care of the child(ren). In situations where an adult relative is entrusted with the care of the child and is the alleged perpetrator, the Safety Assessment is conducted in the home where the child resides. Although a CPS report may be made for actions taken by a caretaker, only a person with legal authority has the ability to enter into a Temporary Parental Safety Agreement.

If the allegation involves only one parent, guardian, or custodian, a separate Safety Assessment is not required for the other parent, guardian or custodian's household. If the allegation involves two households, a separate Safety Assessment shall be conducted on both households. An example would be allegations of inappropriate discipline with both parents living in separate households listed as alleged perpetrators.

Who completes: The social worker assigned to complete the assessment. In conflict of interest cases, the county child welfare agency who responds first shall conduct the Safety Assessment and will provide the document to other county child welfare agencies if needed. If a child is found in one county and resides in another, the county where the child is found conducts the Safety Assessment and forwards the Safety Assessment to the county of residence.

When: The Safety Assessment shall be completed and documented:

- At the time of the first face-to-face contact with the family and prior to allowing the child to remain in the household;
- Prior to the removal of a child from the home;
- Prior to the return home in cases where the caretaker temporarily places the child outside the home as a part of a safety agreement;
- At any point a new report is received;
- At any other point that safety issues are revealed. (This may mean completing more than one Safety Assessment if needed). However, if the initial Safety Assessment reveals that the home is safe and no changes occur, one document is sufficient for the whole CPS assessment phase;
- In the event a child is placed with a Temporary Safety Provider, the Initial Safety Provider Assessment needs to be completed prior to placement to determine the child's safety in that placement. A Safety Assessment would not be required on the home of the Temporary Safety Provider in this situation;
- In the event a Temporary Safety Provider moves in the family home to supervise or otherwise restrict parent access, the Initial Safety Provider Assessment needs to be completed prior to approval of the Temporary Safety Provider. A Safety Assessment would not be required on the home of the Temporary Safety Provider in this situation;
- The Safety Assessment should be completed on the home where the child resides. In situations where the parents/caretakers are not living together, the Safety Assessment needs only to be completed for the home where the alleged maltreatment occurred.
- Whenever there is a CPS Assessment case decision recommending closure (findings of "unsubstantiated," "services recommended," or "services not recommended"), there must be a Safety Assessment documenting a finding of "Safe".

Decision: The Safety Assessment is used to guide decision-making in the removal and return of children to families. It also guides decision-making on factors that, if not addressed, threaten immediate harm to children. A safety intervention (Part D, Safety Interventions) is required for all children assessed unsafe on any safety factor (Part B, Current Indicators). For any child with an identified Family Safety Intervention, a Temporary

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Parental Safety Agreement (Part E, Safety Agreement and Part F, Statements of Understanding and Agreement) must be developed.

Appropriate The Safety Assessment has six parts: Factors Influencing Child Vulnerability, Current Indicators of Immediate Safety, Safety Interventions, Safety Decision, and the Temporary Parental Safety Agreement, which has two parts a Safety Agreement and Statements of Understanding and Agreement.

Definitions **Part A: Factors Influencing Child Vulnerability**
Child vulnerability must be considered when assessing safety and during decision making regarding the appropriate safety intervention. The safety intervention selected must provide protection for the most vulnerable child in the home.

- **Child is age 0-5.**
Children ages 0-5 are presumed to be vulnerable in protecting themselves. Evaluate whether any child is able to avoid an abusive or neglectful situation; flee; or seek outside protective resources, such as telling a relative, teacher, etc.
- **Child has diagnosed or suspected medical or mental condition, including medically fragile.**
Any child in the household has a diagnosed medical condition or mental disorder that impairs his/her ability to protect him/herself from harm OR an unconfirmed diagnosis where preliminary indicators are present. Examples may include but are not limited to severe asthma, severe depression, untreated diabetes, medically fragile (i.e. requires assistive devices to sustain life, etc.)
- **Child has limited or no readily accessible support network.**
Any child in the household is isolated or less visible within the community; or the child does not have adult family or friends who understand the danger indicators; or the child does not have adult family or friends who are willing to take an active role in keeping the child safe.
- **Child has diminished mental capacity.**
Any child in the household has diminished developmental/cognitive capacity, which impacts the child's ability to communicate verbally or to care for him/herself.
- **Child has diminished physical capacity.**
Any child in the household has a physical condition/disability that impacts his/her ability to protect him/herself from harm (i.e. cannot run away or defend self, cannot get out of the house in an emergency situation if left unattended, cannot care for self, etc.).
- **None apply.**

Part B: Current Indicators of Immediate Safety

The list of indicators under Part B are behaviors or conditions that may be associated with a child being in immediate danger of serious harm. Identify the presence or absence of each factor by circling either "yes" or "no."

The Current Indicators of Immediate Safety examples should not be considered complete descriptions of all possible circumstances related to the indicators. Other behaviors or conditions may be associated with each listed indicator and may also be indicative of the **possibility of immediate danger of serious harm**. How recently the behavior or condition occurred should also be considered; that is, the situation currently present is likely to occur in the immediate future, or occurred in the recent past. The examples should not be construed as necessarily equating with an "unsafe" decision but rather as "red flag alerts" to the possibility that the child may be unsafe.

1. Caretaker caused serious physical harm to the child or made a plausible threat to cause serious physical harm in the current assessment.

- Serious injury or abuse to the child other than accidental. The caretaker caused severe injury, including brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocations, sprains, internal injuries, poisoning, burns, scalds, or severe cuts, **and** the child requires treatment, regardless of whether the caretaker sought medical treatment.
- Caretaker fears he/she will maltreat the child. The caretaker expresses overwhelming fear that he/she poses a plausible threat of harm to the child or has asked someone to take his/her child so the child will be safe. For example, a mother with postpartum depression fears that she will lose control and harm her child. This does not include normal anxieties, such as fear of accidentally dropping a newborn baby.

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- Threat to cause harm or retaliate against the child. The caretaker has made a threat of action that would result in serious harm, or a household member plans to retaliate against the child.
- Substantial or unreasonable use of physical force. The caretaker has used physical force in a way that bears no resemblance to reasonable discipline. Unreasonable discipline includes discipline practices that cause injuries, last for lengthy periods of time, are not age or developmentally appropriate, place the child at serious risk of injury/death, are humiliating or degrading, etc. Use this subcategory for caretaker actions that are likely to result in serious harm but have not yet done so.
- Drug-exposed infant. There is evidence that the mother abused alcohol or prescription drugs or used illegal substances during pregnancy, AND this has created imminent danger to the infant. Imminent danger includes:
 - Infant tests positive for alcohol or drugs in his/her system;
 - Infant exhibits withdrawal symptoms; or
 - Infant displays physical characteristics (i.e. low birth weight, slow reflexes, etc.) of substance abuse by the mother.
- Caretaker committed act that placed child at risk of significant/serious pain that could result in impairment or loss of bodily function.
- Caretaker intended to hurt child and does not show remorse. The caretaker's intention in the current incident was to inflict pain/injury on the child and the caretaker does not express remorse for this action.
- Death of a child. This incident resulted in the death of one or more children.

2. **Child sexual abuse is suspected to have been committed by:**

- **Parent;**
- **Other caretaker; OR**
- **Unknown person AND the parent or other caretaker cannot be ruled out, AND circumstances suggest that the child's safety may be of immediate concern.**

Suspicion of sexual abuse may be based on indicators such as:

- The child discloses sexual abuse;
- The child demonstrates sexualized behavior inappropriate for his/her age and developmental level;
- Medical findings are consistent with sexual abuse;
- The caretaker or others in the household have been convicted of, investigated for, or accused of sexual misconduct or have had sexual contact with a child and/or;
- The caretaker or others in the household have forced or encouraged the child to engage in sexual performances or activities, or forced the child to view pornography.

AND

The child's safety may be of immediate concern if:

- There is no protective caretaker;
- A caretaker is influencing or coercing the child victim regarding disclosure; and/or
- Access to a child by a caretaker or other household member reasonably suspected of sexually abusing the child OR a registered sexual offender, especially with known restrictions regarding any child under age 18, exists.

3. **Caretaker is aware of the potential harm AND unwilling, OR unable to protect the child from serious harm or threatened harm by others. This may include physical abuse, emotional abuse, sexual abuse, or neglect. (Domestic violence behaviors should be captured under Danger 10.)**

- The caretaker fails to protect child from serious harm or threatened harm, such as physical abuse, emotional abuse, sexual abuse (including child-on-child sexual contact), or neglect by others, including other family members, other household members, or others having regular access to the child.
- An individual(s) with known violent criminal behavior/history resides in the home AND is posing a threat to the child, and the caretaker allows access to the child.

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4. Caretaker's explanation or lack of explanation for the injury to the child is questionable or inconsistent with the type of injury, and the nature of the injury suggests that the child's safety may be of immediate concern.

Assess this item based on the caretaker's statements by the end of the contact. It may be typical for the caretaker to initially minimize, deny, or give an inconsistent explanation but, through discussion, admit to the true cause of the injury.

Mark this danger indicator if the caretaker's statements have not changed (i.e. the caretaker has not admitted or accepted the more likely explanation) by the end of the contact. Examples include but are not limited to the following.

- Medical evaluation indicates, or medical professionals suspect, the injury is the result of abuse; the caretaker denies this or attributes the injury to accidental causes.
- The caretaker's description of the injury or cause of the injury minimizes the extent and impact of harm to the child.

Additional factors to consider include the child's age, location of injury, child's special needs (cognitive, emotional, or physical) or history of injuries.

5. Caretaker fails to provide supervision to protect child from potentially serious harm.

- The caretaker does not provide age or developmentally appropriate supervision to ensure the safety and well-being of the child to the extent that the need for care goes unnoticed or unmet (i.e. the caretaker is present but the child can wander outdoors alone, play with dangerous objects, play on an unprotected window ledge, or be exposed to other serious hazards).
- The caretaker makes inadequate and/or inappropriate babysitting or child care arrangements or demonstrates poor planning for the child's care OR the caretaker leaves the child alone (time period varies with age and developmental stage). In general, consider emotional and developmental maturity, length of time, provisions for emergencies (i.e. able to call 911, neighbors able to provide assistance), and any child needs or vulnerabilities.
- The caretaker is unavailable (i.e. incarceration, hospitalization, abandonment, and whereabouts unknown).

6. Caretaker does not meet the child's immediate needs for food or clothing.

- The child's minimal nutritional needs are not met, resulting in danger to the child's health, such as malnourishment.
- The child is without clothing appropriate for the weather. Consider the age of the child and whether clothing is the choice of the child or the provision of the parent.

7. Caretaker does not meet the child's immediate needs for medical or critical mental health care (suicidal/homicidal).

- The caretaker does not seek treatment for the child's immediate, chronic, and/or dangerous physical medical condition(s) or does not follow prescribed treatment for such conditions.
- The child has exceptional needs, such as being medically fragile, which the caretaker does not or cannot meet.
- The child shows significant symptoms of prolonged lack of emotional support and/or socialization with the caretaker, including lack of behavioral control, severe withdrawal, and missed developmental milestones that can be attributed to caretaker behavior.

8. Physical living conditions are hazardous and immediately threatening to the health and/or safety of the child.

Based on the child's age and developmental status, the child's physical living conditions are hazardous and immediately threatening, including but not limited to the following:

- Leaking gas from a stove or heating unit.

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- Substances or objects accessible to the child that may endanger his/her health and/or safety.
- Lack of water or utilities (i.e. heat, plumbing, or electricity), or provisions are inappropriate (i.e. using a stove as a heat source).
- Open/broken/ missing windows in areas accessible to the child and/or unsafe structural issues in the home (i.e., walls falling down, floor missing)
- Exposed electrical wires.
- Excessive garbage or rotted or spoiled food that threatens health.
- Serious illness/significant injury has occurred or is likely to occur due to current living conditions (i.e. lead poisoning, rat bites, etc.)
- Evidence of human or animal waste throughout the living quarters.
- Guns/ammunition and other weapons are not safely secured in a locked and are accessible to the child.
- Methamphetamine production in the home.
- The family has no shelter for the night or is likely to be without shelter in the near future (i.e., the family is facing imminent eviction from the home and has no alternative arrangements, or the family is without a permanent home and does not know whether they will take shelter in the next few days or weeks).

AND

This lack of shelter is likely to present a threat of serious harm to the child (i.e., the child is likely to be exposed to extreme cold without shelter, the child is likely to sleep in a dangerous setting).

9. Caretaker's current substance abuse seriously impairs his/her ability to supervise, protect, or care for the child.

The caretaker has abused legal or illegal substances or alcoholic beverages to the extent that the caretaker is unable or likely will be unable to care for the child, has harmed the child, or is likely to harm the child.

10. Domestic violence exists in the household and poses an imminent danger of serious physical and/or emotional harm to the child.

There is evidence of domestic violence in the household, AND the alleged perpetrator's behavior creates a safety concern for the child.

Domestic violence perpetrators, in the context of the child welfare system, are parents and/or caretakers who engage in a pattern of coercive control over one or more intimate partners. This pattern of behavior may continue after the end of a relationship or when the couple no longer lives together. The alleged perpetrator's actions often directly involve, target, and impact any children in the family.

Incidents may be identified by self-report, credible report by a family or other household member, other credible sources, and/or police reports.

Examples that support the existence of domestic violence may include the following:

- The child was previously injured in a domestic violence incident.
- The child exhibits severe anxiety (i.e., nightmares, insomnia) related to situations associated with domestic violence.
- The child cries, cowers, cringes, trembles, or otherwise exhibits fear as a result of domestic violence in the household.
- The child is at potential risk of physical injury based upon his/her vulnerability and/or proximity to the incident (i.e., caretaker holding child while alleged perpetrator attacks caretaker, incident occurs in a vehicle while a child is in the back seat).
- The child's behavior increases risk of injury (i.e., attempting to intervene during a violent dispute, participating in a violent dispute).
- Use of guns, knives, or other instruments in a violent, threatening, and/or intimidating manner.
- Evidence of property damage resulting from domestic violence that could have a harmful impact on the child (i.e., broken glass and child could cut him/herself, broken cell phone and child cannot call for help).

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Do not include violence between any adult household member and a minor child (this would be classified as physical abuse and marked as safety indicator 1 and/or 3 as appropriate).

Do not include situations that do not escalate beyond verbal encounters and are not otherwise characterized by threatening or controlling behaviors.

11. Caretaker persistently describes the child in predominantly negative terms or acts toward the child in negative ways, AND these actions make the child a danger to self or others, suicidal, act out aggressively, or severely withdrawn.

This threat is related to a persistent pattern of caretaker behaviors. Examples of caretaker actions include the following:

- The caretaker describes the child in a demeaning or degrading manner (i.e., as evil, stupid, ugly).
- The caretaker curses at and/or repeatedly puts the child down.
- The caretaker scapegoats a particular child in the family.
- The caretaker blames the child for a particular incident or family problems.
- The caretaker places the child in the middle of a custody battle (i.e., parent persistently makes negative comments about other parent or ask the child to report back what goes on at the other parent's home).

12. Caretaker's physical ability, emotional stability, developmental status, or cognitive deficiency seriously impairs his/her current ability to supervise, protect, or care for the child.

Caretaker appears to be physically disabled, mentally ill, developmentally delayed, or cognitively impaired, AND as a result, one or more of the following are observed:

- The caretaker's refusal to follow prescribed medications impedes his/her ability to care for the child.
- The caretaker's inability to control his/her emotions impedes his/her ability to care for the child.
- The caretaker's mental health status impedes his/her ability to care for the child.
- The caretaker expects the child to perform or act in ways that are impossible or improbable for the child's age or developmental stage (i.e., babies and young children expected not to cry, or expected to be still for extended periods, be toilet trained, eat neatly, care for younger siblings, or stay alone
 - Not knowing that infants need regular feedings;
 - How to access and obtain basic/emergency medical care;
 - Proper diet; or
 - Adequate supervision.

13. Family currently refuses access to or hides the child and/or seeks to hinder an assessment.

- The child(ren)'s location is unknown to CPS, and the family will not provide the child's current location.
- The family has removed or threatened to remove the child from whereabouts known to CPS to avoid assessment.
- The family is threatening to flee or has fled in response to a CPS Assessment.
- The family is keeping the child(ren) at home and away from friends, school, and other outsiders for extended periods of time for the purpose of avoiding assessment.
- There is evidence that the caretaker coaches or coerces the child(ren), or allows others to coach or coerce the child(ren), in an effort to hinder the assessment.

14. Current circumstances, combined with information that the caretaker has or may have previously maltreated a child(ren) in his/her care, suggest that the child(ren)'s safety may be of immediate concern based on the severity of the previous maltreatment or the caretaker's response to the previous incident.

- There must be both current immediate threats to child safety that do not meet any other safety indicator criteria;

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AND

- There is related previous child maltreatment that was severe and/or represents an unresolved pattern of maltreatment. Previous maltreatment includes any of the following:
 - Prior child death, possibly as a result of abuse or neglect.
 - Prior serious injury or abuse or near death of the child(ren), other than accidental. The caretaker caused serious injury, defined as brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocations, sprains, internal injuries, poisoning, burns, scalds, severe cuts, or any other physical injury that seriously impaired the health or well-being of the child and required medical treatment, regardless of whether the caretaker sought medical treatment.
 - Failed reunification—The caretaker had reunification efforts terminated in connection with a prior child welfare case.
 - Prior child removal—Removal/placement of a child(ren) by CPS or other responsible agency or concerned party was necessary for the safety of the child(ren).
 - Prior CPS finding—A prior CPS assessment found maltreatment; either “substantiated” or “services needed”.
 - Prior inconclusive CPS assessment—Factors to be considered include seriousness, chronicity, and/or patterns of abuse/neglect allegations.
 - Prior threat of serious harm to a child(ren)—Previous maltreatment that could have caused severe injury; retaliation or threatened retaliation against a child(ren) for previous incidents; or prior domestic violence that resulted in serious harm or threatened harm to a child(ren).
 - Prior service failure—Failure to successfully complete court-ordered services or involuntary services.

15. Child is fearful of caretaker, other family members, or people living in or having access to the home.

- Child(ren) cries, cowers, cringes, trembles, or exhibits or verbalizes fear in relation to certain individuals.
- Child(ren) exhibits anxiety, nightmares, or insomnia related to a situation associated with a person in the home.
- Child(ren) fears unreasonable retribution/retaliation from caretaker, others in the home, or others having access to the child(ren).

16. Other (specify).

Circumstances or conditions pose an immediate threat of serious harm to a child(ren) and are not already described in safety indicators 1-15.

Parent(s) and/or caretaker(s) should be provided the opportunity to initial the bottom of each page in Section B to indicate the county child welfare agency social worker reviewed the indicators on that page.

If no Indicators of Immediate Safety are marked “Yes”, then complete page 5 of the Safety Assessment, and a Temporary Parental Safety Agreement is not necessary. Pages 6-8 do not need to be completed.

A parent (someone with legal authority) is expected to sign the Safety Assessment. The agency child welfare social worker must sign the Safety Assessment at the time it is completed and the supervisor must sign it by the end of the next business day.

If any Indicators of Immediate Safety are marked “Yes”, then a Temporary Parental Safety Agreement is necessary to address the safety threat. Do not complete the bottom of page 5. Complete pages 6, 7, and 8.

PART C: SAFETY INTERVENTIONS

For each factor identified in Section B, consider the resources available in the family and the community that might help to keep the child safe. Check each response necessary to protect the child, taking into consideration the most vulnerable child. **Identification of an appropriate safety intervention to address the safety threats in partnership**

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with the parent is key to a parent's understanding of how an intervention may or may not be effective and how the safety decision in Part D is selected. This discussion will provide a transition to the development of the Temporary Parental Safety Agreement, Parts E and F.

FAMILY SAFETY INTERVENTIONS

1. **Monitoring and/or use of direct services by county child welfare agency. (DO NOT include the assessment itself as an intervention.)**

Actions taken or planned by the assessment social worker or other CPS staff that specifically address one or more of the safety indicators. Examples include: providing information on obtaining restraining orders; organizing emergency family team meeting; transportation to shelter; providing emergency material aid, such as food; planning return visits to the home to check on progress; or role modeling nonviolent disciplinary methods, child development needs, or parenting practices.

2. **Use of family, neighbors, or other individuals in the community in the development and implementation of a safety agreement.**

Engaging the family's natural safety network to mitigate safety concerns. Examples include: engaging a grandparent to assist with child care, agreement by a neighbor to serve as support for a child, commitment by a person to enforce and support the caretaker's relapse plan, or the caretaker chooses to have another protective adult spend a night or a few days with the family.

3. **Use community agencies or services.**

Involving a community- or faith-based organization or other agency in activities to address safety indicators (i.e., local food pantry, medical appointments, domestic violence shelters, homeless shelters, emergency utilities, home visiting nurse). This **DOES NOT INCLUDE** long-term therapy or treatment or being put on a waiting list for services.

4. **The alleged perpetrator will leave or has left the home—either voluntarily or in response to legal action.**

Temporary or permanent removal of the alleged perpetrator. Examples include: incarceration of alleged perpetrator, domestic violence protective order, or the alleged perpetrator agrees to leave.

5. **A protective caretaker will move or has moved to a safety environment with the child(ren).**

A caretaker not suspected of harming the child has taken or plans to take the child to an alternative location to which the alleged perpetrator will not have access. Examples include: domestic violence shelter, home of a friend or relative, or hotel.

6. **Use of Temporary Safety Provider**

- **The child will temporarily reside with a Temporary Safety Provider identified by the family with the social worker monitoring the Temporary Parental Safety Agreement OR**
- **A Temporary Safety Provider identified by the family with the social worker monitoring the Temporary Parental Safety Agreement will reside in the family home to supervise or otherwise restrict the parent's access to the child(ren).**
- **The Temporary Safety Provider MUST be 18 years of age or older.**

If the children will reside in the home of the Temporary Safety Provider, the social worker must document:

- The address of the temporary residence of the child;
- The person(s) in that household who will be responsible for the child;
- Background checks on all persons in the residence 16 years of age or older and 911 call logs on the provider's address;
- Completion of the Initial Safety Provider Assessment on the relative/nonrelative home prior to placement
- Inclusion of the person responsible for the child in a safety plan to contain threats to the child's safety; and
- Specify a timeframe to reassess the Temporary Parental Safety Agreement.

If the Temporary Safety Provider will reside in the family home, the social worker must document:

- The person(s) who will be responsible for the child;
- Background checks on all person(s) who will be responsible;

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- Completion of the Initial Safety Provider Assessment on the relative/nonrelative (all appropriate sections)
- Inclusion of the person responsible for the child in a safety plan to control threats to the child's safety; and
- Specify a timeframe to reassess the Temporary Parental Safety Agreement.

CHILD WELFARE SAFETY INTERVENTION

- 1. Removal of any child in the household; interventions 1-6 do not adequately ensure the child(ren)'s safety.**

PART D: SAFETY DECISION

- **Safe.** No safety indicators were identified and no safety agreement is needed at this time. Based on currently available information, no children are likely in immediate danger of serious harm and no safety interventions are needed at this time. This was indicated on the bottom of page 5.

Identify the safety decision by marking the appropriate box. This decision should be based on the assessment of all safety indicators, safety interventions, and any other information known about the case. Check only one response.

- **Safe with plan.** One or more safety indicators are present; a safety plan is required. Safety interventions have been initiated to mitigate the danger. A TEMPORARY PARENTAL SAFETY AGREEMENT (Part E & PART F) IS REQUIRED.
 - Safety interventions involving county child welfare agency monitoring, use of county child welfare agency services, community service providers, use of community members or family members, have been identified to support parent to provide safety. TEMPORARY PARENTAL SAFETY AGREEMENT required to describe actions required.
 - The alleged perpetrator left the home. TEMPORARY PARENTAL SAFETY AGREEMENT required to describe actions required to provide safety.
 - Protective parent and child(ren) leave the home. TEMPORARY PARENTAL SAFETY AGREEMENT required to describe actions required to provide safety.
 - A Temporary Safety Provider will be utilized to provide safety. TEMPORARY PARENTAL SAFETY AGREEMENT required to define plan for children with Temporary Safety Provider and those not with Temporary Safety provider. Initial Safety Provider Assessment must be completed and approved.

A Temporary Safety Provider must be identified, assessed and approved for any TEMPORARY PARENTAL SAFETY AGREEMENT that requires restriction of access, supervision, or separation of a child from parental care.

- **Unsafe.** One or more safety indicators are present, and removal of a child(ren) through legal action is the only protecting intervention possible for one or more children. Without this level of intervention, one or more children will likely be in danger of immediate or serious harm. Requiring any of the following interventions to maintain safety indicates an Unsafe Decision.
 - All children were removed with legal action. Temporary Parental Safety Agreement is not needed or appropriate.
 - One or more children were removed with legal action and other children remain in the home. TEMPORARY PARENTAL SAFETY AGREEMENT required for any child(ren) remaining in the home.

PART E: SAFETY AGREEMENT

Identify the activities/actions to implement the Family Safety Interventions from Part C. These activities should provide specifics on how the Family Safety Interventions selected from Part C will be implemented and monitored. **Activities identified in the Temporary Parental Safety Agreement should address all Indicators of Immediate Safety identified in Part B.**

- 1. What is the specific situation or action that causes the child to be unsafe? What is the safety threat?** For each Indicator of Immediate Safety marked "Yes", identify the specific situation(s) or action(s) that created the safety threat. The social worker should include safety threats that related to evidence supporting the initial report

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allegations and any other safety threats discovered. Items identified should relate to the immediate needs in order to keep the children safe, not needs that may be met through a prevention case opening or referral.

2. **What actions need to be taken right now to keep the child safe?** Identify the steps or actions needed to keep the child(ren) safe. This is not a full-blown Family Services Agreement that may address a multitude of needs and services. The actions identified must directly address the safety threat. Action(s) by the parent(s), Temporary Safety Provider, and the county child welfare agency are to be included. This is also the place to note any consequences the agency must take if the parent does not follow through on agreed upon steps.

When a Temporary Safety Provider is identified, an Initial Safety Provider Assessment must be completed and approved before the Temporary Parental Safety Agreement can be put in place. Any action items identified as needed to ensure child safety during completion of the Initial Safety Provider Assessment must be incorporated into this Temporary Parental Safety Agreement.

3. **Who is responsible for ensuring that these actions are taken?** Identify who is responsible for each action listed in 2 above.
4. **Timeframe for completing the actions (no longer than 45 days).** Specify the date or timeframe in which all actions identified in 2 above must be initiated or completed. Be clear about when what specifically must be completed for any identified date or timeframe.
5. **Parent's or caretaker's initials.** Initials by the parent indicate participation in developing actions to address each safety threat.

PART F: STATEMENT OF UNDERSTANDING AND AGREEMENT

Part F is important to ensure that all parties participated and understand all of the safety threats identified, the plans to address those safety threats, and their ability to revoke or request a review of the developed safety agreement.

A parent (someone with legal authority) is expected to sign the Safety Assessment and any resulting Temporary Parental Safety Agreement. The agency child welfare social worker must sign the Safety Assessment and the agreement at the time it is developed and the supervisor must sign it by the end of the next business day. If applicable, a guardian, custodian, or caretaker, and/or approved Temporary Safety Provider(s) should sign the agreement. It is important to remember that in the practice of family-centered social work, asking a parent if he or she desires to sign the Safety Assessment and any resulting Temporary Parental Safety Agreement is an appropriate method of documenting the parent's engagement in the process.

If a parent refuses to sign the Temporary Parental Safety Agreement, the social worker should try to address the parent's concerns and stress the need for working together to prevent the removal of the child from the home. The parent may verbally agree even if he or she refuses to sign the agreement. The social worker must note on the Temporary Parental Safety Agreement that the parent has agreed to each safety activity if he or she refuses to sign the agreement. If the parent refuses to sign the agreement **and** verbally refuses to agree to its provisions, the agency must ensure that the child is safe whether the child is in his or her own home or in another type of arrangement.

If the parent is unable to understand the written document because of illiteracy, a language barrier, or any other reason, the social worker must determine if the parent understands every provision in the Temporary Parental Safety Agreement. Only then, the social worker must note on the Temporary Parental Safety Agreement that the parent has agreed to each safety activity. If a parent is unable to understand the agreement **and** verbally refuses to agree to its provisions, the agency must ensure that the child is safe whether the child is in his or her own home or in another type of arrangement.

The county child welfare agency must file a petition under G.S. 7B-302(c) when protective services are refused, regardless of whether the agency requests custody of the child. If the court adjudicates the child abused, neglected, and/or dependent, the court may order any of the dispositions included in G.S. 7B-903, including requiring the agency to supervise the child in the child's own home or place the child in the custody of a parent, relative, private agency, or other suitable person. If the county child welfare agency files a petition without asking for custody, and the situation deteriorates prior to the adjudication, the agency may file a motion for nonsecure custody without filing an additional petition.



About this webinar

This webinar was developed through funding from the North Carolina Division of Social Services by the Family and Children's Resource Program, part of the Jordan Institute for Families at the UNC-Chapel Hill School of Social Work.



In the future a recording of this webinar will be available on ncswLearn.org.

Goals for this Webinar


By the end of this webinar, we hope you will:

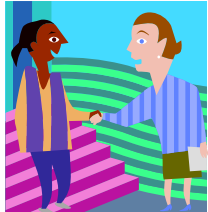
- Understand the definition of temporary parental safety agreement
- Know the practice requirements for using temporary parental safety agreements
- Know when to seek court intervention



A Special Note About Questions

- We will monitor questions via the chat box and answer them as possible throughout the webinar.
- There will also be a **follow-up document** that answers questions asked during this webinar; this document will be e-mailed to all registered participants and posted with the webinar recording.
- The webinar recording will be on ncswLearn.org and on the Family and Children's Resource Program webpage (<http://fcrp.unc.edu/webinars.asp>).



<p>Panelists</p> <p>Arlette Lambert Dee Hunt Kevin Marino Jamie Hamlett</p>	
<p>Moderator</p> <p>Laura Phipps</p>	<p>Tech Support</p> <p>Phillip Armfield John McMahon</p>


Agenda

- Background/Rationale
- Temporary Parental Safety Agreements
 - ✓ Definition
 - ✓ Basic Goals
 - ✓ Practice Requirements
- When Court Intervention Is Indicated
- County Child Welfare Experiences
- Questions and Answers




Why?


Why is NC revisiting policy and practice around use of safety plans?




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Over the past few years, safety resource placements have frequently been used by CPS to help ensure safety, permanence, and well-being for children and their families.




In response to growing concerns regarding the overuse of safety resource placements and especially the length of time children are remaining in them, NC has reviewed and revised its policy around this practice.



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**Child Welfare Services in NC:
Core Elements**

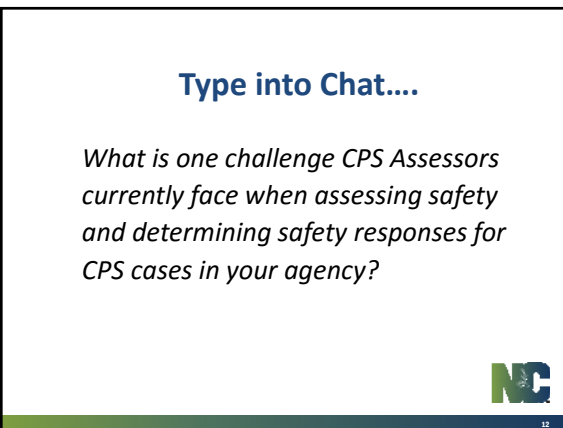
- Balancing child safety and parent rights
- Family-centered practice
- Comprehensive assessments
- Structured decision-making (process and tools)



9








Temporary Parental Safety Agreements

*What are they?
How should we use them with families?*




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Definition

A Temporary Parental Safety Agreement is a voluntary and short-term plan between a parent and a county child welfare agency during the assessment phase of a case if a child is in immediate danger in his or her own home because of a safety threat.

voluntary short-term during assessment immediate danger



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Two Types of Safety Threat


 *Present*  *Impending*



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Safety Threshold Defined

The point when a parent's behaviors, attitudes, emotions, intent, or circumstances create conditions that fall beyond mere risk of future maltreatment and have become an actual imminent threat to the child's safety.



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Types of Safety Actions


Resource Support	Social Support
Crisis Management	Separation or Restriction



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Temporary Parental Safety Agreements: *Basic Goals*

- **Sufficient** to manage safety;
- **Reasonably tailored** to the allegations provided in the CPS report and the child safety issues that exist within the family;
- **Immediately available** so that it is capable of being in operation the same day it is created; and
- A plan that includes actions and goals that are **specific** and **measurable**.



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Practice Requirements



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Temporary Parental Safety Agreements:
Practice Requirements


Must be:

- **Unquestionably VOLUNTARY**
- **REVOCABLE**




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Voluntary: Done, made, brought about, undertaken, etc., of one's own accord or by free choice




Coercive: Using force or threats to make someone do something; the practice of forcing another party to act in an involuntary manner by use of intimidation or threats or some other form of pressure or force



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Questions Modeling “Voluntary” Identification of Safety Interventions

- What safety concerns do you see for your children at this time?
- What types of resources (family, friends, programs) have you used in the past to make sure your children are safe?
- What plan do you think will allow you to respond most quickly to the safety concerns we have discussed?




A Parent’s Right to Revoke a Safety Agreement

- Options for revoking:
 - ✓ In writing and/or
 - ✓ Verbally
- County child welfare agency must be notified by the parent of the revocation
- County child welfare agency should identify notification process



Temporary Parental Safety Agreements are NOT appropriate if...

- Insufficient to ensure the safety of the child
- Reason to suspect the parent, guardian, or custodian will not abide by the agreement



Practice Requirements:
Visitation

Only the court may require supervised visitation between a parent and that parent's child




Exception: when arrangement for supervised visits or "no contact" is totally **voluntary** on the part of the parent



Practice Requirements:
Duration of Safety Agreements

Temporary Parental Safety Agreements that include separation or restriction are allowed **only** during the **assessment phase**.

A case *cannot be transferred* to In-Home Services if a Temporary Parental Safety Agreement involving separation is in effect and needs to remain in effect at the time of the case decision.




Practice Requirements
CFTs Are Required...

- When a Safety Agreement requiring separation or restriction is being proposed
- If non-secure custody is considered the only means of ensuring safety of the child




When should court intervention be sought?



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Court involvement
***must* be pursued when...**


- An agreement that ensures safety of the child(ren) cannot be made between the parent(s) and the county child welfare agency
- The Temporary Safety Provider recommended by the family lives in another state (unless there is a border agreement)
- A Temporary Parental Safety Agreement involving separation is in effect and needs to remain in effect at the time the case decision is made



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“The most family-centered thing you can do is first try less intrusive strategies to keep the child safe, and if those aren’t possible, then allow the parents the opportunity to be represented and have their case heard in court. Court is not all bad. Respecting the parent’s right to tell their side in court is family-centered.”

—Holly McNeill, MRS Consultant/Trainer



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County Child Welfare Agency Experiences



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**Implementation Strategies:
Steps Taken in
County Child Welfare Agencies**

- Examination of DSS agency values and beliefs around safety placements
- Increased attention to terminology
- Examination of county specific data





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continued...

Implementation Strategies

- Development of forms and protocols to support transition to new policies
- Focus on supervision and case staffings
 - ✓ Structured supervision tool
 - ✓ Field supervision tool
- In-house training for all staff
- Communication with Court partners



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Summary



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This New Approach ...

Helps Counties:	Benefits for Families
<ul style="list-style-type: none">• Resolve safety issues ASAP• Make separation a last resort• Provide supportive services to resolve safety/risk factors OR find other permanent solutions quickly	<ul style="list-style-type: none">• Safeguards children and parents' rights• Avoids lengthy placements with temporary parental safety resources (aka pseudo-foster care)• Ensures children unfairly aren't deprived of needed services (e.g., NC REACH, health insurance, etc.)• Is more "trauma-informed"


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Questions

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Upcoming Learning Opportunities

- *Safety Planning:
Prepare Now for the 2017 Changes*
- Discussion of revised safety planning policies in courses in 2017



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Final Steps for DSS Staff

1. Please take a brief survey
 - We will provide link for those logged on
 - Can also access thru ncswlearn.org
2. To receive training credit, you must "Complete Course" WITHIN ONE WEEK
 - ✓ Log in to www.ncswlearn.org
 - ✓ Select "PLP"
 - ✓ Select "Webinars"
 - ✓ Click "Enter"
 - ✓ Click "Complete Course" button



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Follow-Up Document for the Webinar

Safety Plans Are Changing: What You Need to Know

Webinar date: Sept. 8, 2016

Presenters

Arlette Lambert

Child Welfare Services Section, NC Division of Social Services

Dee Hunt

Child Welfare Services Section, NC Division of Social Services

Jamie Hamlett, Attorney

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UNC-Chapel Hill School of Social Work

Sponsored by

NC Division of Social Services

Webinar handouts: https://ncswlearn.org/ncsts/webinar/handouts/42_Wedinar_Handouts_9-8-16.pdf

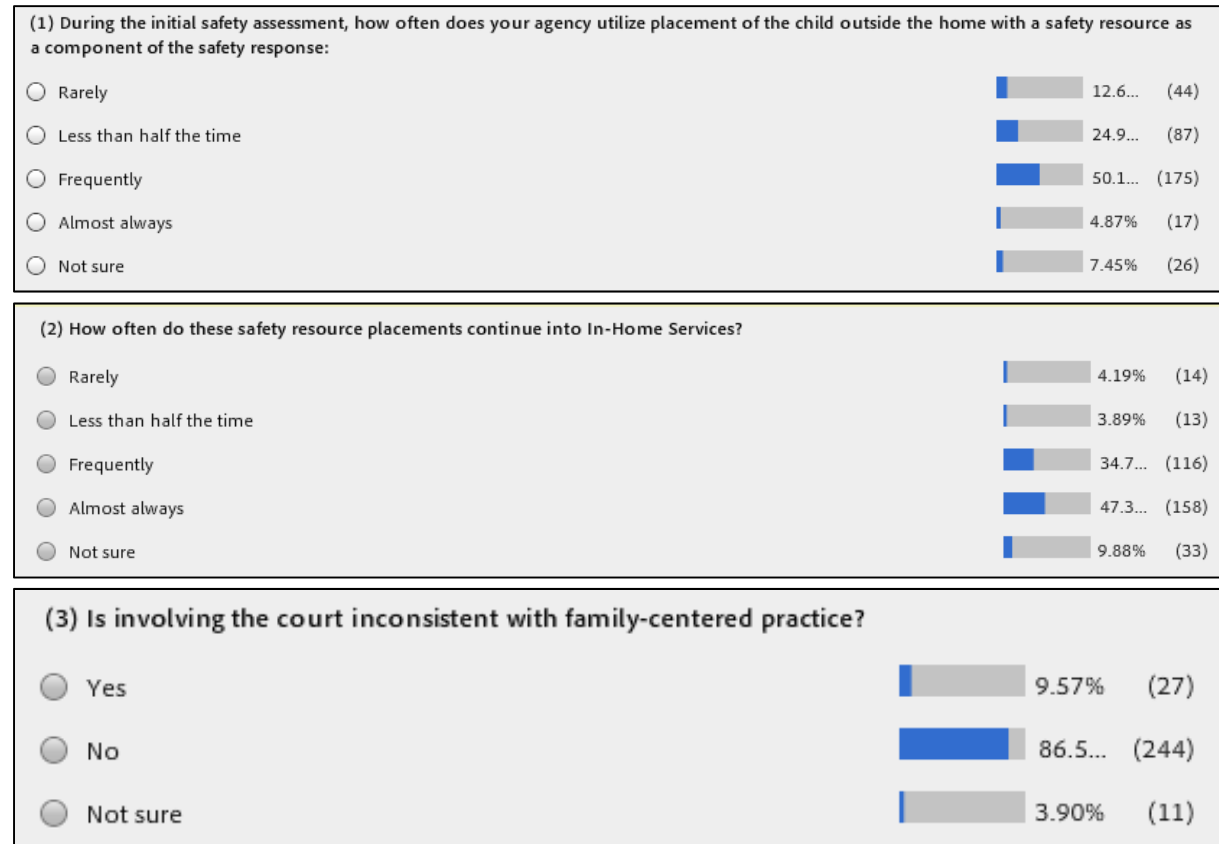
Recording: if you missed the webinar or want to view it again, go to: <http://fcrp.unc.edu/webinars.asp>

Topics Covered

- Responses to Webinar Polls
- Effective Date of New Policy
- CPS Assessment Questions
- Temporary Parental Safety Agreements
- TPSAs and 215 (CPS In-Home) Services
- TPSAs and CFTs
- TPSAs, Petitions, and the Court
- Communication and Training about this Policy Change
- Impact / Background
- Webinar Participant Responses to Questions Posed by Presenters

Responses in this document are from the NC Division of Social Services Child Welfare Services Section.

Responses to Webinar Polls



Effective Date

Question: Is this effective January 1, 2017, for new referrals/cases, or do we have to become in compliance with these changes on all existing cases, “Kinship assessment”, etc.?

Answer: Effective January 1, 2017, the new safety planning policy will apply to new referrals/cases and to existing open (Assessment or In-Home) cases that are utilizing any out of the home placement, including kinship care providers.

CPS Assessment Questions

Question: Could you please provide examples of present and imminent threats?

Answer: Some examples of present threats include, but are not limited to:

- Hitting, beating, severely depriving now
- Injuries to the face and head
- Premeditated abuse or neglect
- Life-threatening living arrangements
- Bizarre/extreme viewpoint of a child
- Vulnerable children who are unsupervised or alone now
- Child extremely afraid of home situation

- Child needing immediate medical care
- Caregiver unable to provide basic care

Examples of impending threats are the same as those described as present safety threats; it's just that they haven't happened yet. They are expected to happen in the near future.

Question: Is it correct that for all safety actions the parent has to agree?

Answer: The parent must agree to all actions developed in the Temporary Parental Safety Agreement necessary to provide safety for the child(ren). Any action in the Temporary Parental Safety Agreement should be designed to provide immediate safety for the child(ren). The parent does not have to agree with the Current Indicators of Immediate Safety or the Safety Decision to be willing to agree to the actions in the Temporary Parental Safety Agreement.

Question: Will the standard timeframe for investigations be 45 days? All assessments will be 45 days effective January 1, 2017? Even sex abuse cases? Forensic case will have 45 days as well?

Answer: Yes, all CPS assessments will have up to 45 days to complete. As with current policy if the case goes beyond 45 days, there must be documentation to reflect the rationale to extend the CPS Assessment beyond this timeframe.

Question: What about children already in a safety resource when a referral is called in?

Answer: A CPS Assessment should be initiated as it is now. If it is determined that the child(ren) must remain in the care of a Temporary Safety Provider due to a safety threat with a birth parent, a Temporary Parental Safety Agreement must be completed with this intervention identified in the agreement. If use of the Temporary Safety Provider is not necessary for safety, it should not be a part of the agreement. However if the child(ren) will remain in the home of the Temporary Safety Provider, an assessment of that home will be necessary.

Question: If it is case decision time and the child is still with a Safety Provider so you file a petition, does the case stay in 210 until court? Can the child remain with the Safety Provider until court?

Answer: Once the case decision is made the case must transfer into either CPS In-Home Services or Child Placement Services depending on whether or not the agency requested nonsecure custody. Services, including development of a service agreement, must begin. For cases when the agency did not request nonsecure custody, the agency will determine who will deliver the provision of In-Home Services (typically either a CPS Assessment worker or a CPS In-Home worker) and this may depend on the circumstances of the case. The child should remain with the Temporary Safety Provider if the safety threat in the home has not been resolved. If the child(ren) cannot return home by the time of the adjudication, it may be appropriate for the agency to consider requesting that the child be placed in its custody at disposition.

Question: We were told by the state not to file “non-compliance”/”protective supervision” petitions.

Answer: Per statute the only types of petitions in North Carolina are abuse/neglect/dependency (A/N/D) petitions and interference petitions. However, an A/N/D petition can be filed with or without the request for nonsecure custody. The county child welfare agency must file a petition under G.S. 7B-302(c) when protective services are refused, regardless of whether the agency requests custody of the child. If the court adjudicates the child abused, neglected, and/or dependent, the court may order any of the dispositions included in G.S. 7B-903, including requiring the agency to supervise the child in the child’s own home or place the child in the custody of a parent, relative, private agency, or other suitable person. If the county child welfare agency files a petition without asking for custody, and the situation deteriorates prior to the adjudication, the agency may file a motion for nonsecure custody without filing an additional petition. Per G.S. 7B-904 (c) the court may require the parent to comply with a plan of treatment directed toward remediating or remedying behaviors or conditions that led to or contributed to the juvenile’s adjudication.

Question: What do you do if a parent is intoxicated or high at the time or have mental health issues, and aren’t in a condition to understand or enter into a truly voluntary agreement?

Answer: The social worker must use good assessment skills when talking with that parent. If you have reason to believe the parent may not understand for any reason (language, illiteracy, substance abuse, mental health, etc.) use your assessment skills to determine if the parent can in good faith enter into a Temporary Parental Safety Agreement. Document your observations to support your decision. Consult with your supervisor and/or legal team to determine the appropriate next step whenever you have doubts about a parent’s competency.

Temporary Parental Safety Agreements

Question: Can you make a Temporary Parental Safety Agreement in another county of NC?

Answer: The county child welfare agency completing the assessment retains jurisdiction for the assessment. If a parent is in another county or the Temporary Safety Provider is in another county, a request for assist or permission to cross into that county should be made, just as with current practice.

Question: What do we do when the parents firmly believe that their children are safe and don’t think we should be there?

Answer: If the child(ren) are not safe, the county child welfare agency must determine what intervention is necessary to provide for safety. If the parent(s) will not agree with a Family Intervention, then a Child Welfare Intervention is necessary. This is not a change from current practice.

Question: How long is a safety agreement good for?

Answer: A Temporary Parental Safety Agreement lasts for the length of the CPS Assessment. The Temporary Parental Safety Agreement is a living document and should be modified as needed during the assessment.

Question: If the parent(s) chooses to change the plan; is the original plan revoked, and a new one developed, or is the original plan amended?

Answer: The original Temporary Parental Safety Agreement should be modified as needed during the CPS Assessment. Modifications may be requested by the parent(s), Temporary Safety Provider, or the county child welfare agency. All parties must participate and agree to modifications. There may be times when it is more appropriate to create a new Temporary Parental Safety Agreement due to new safety threats; the agency can make this decision based on the case circumstances.

Question: Can either parent revoke the agreement? What if there are two different parents who are in disagreement about revoking the Temporary Parental Safety Agreement?

Answer: Either parent can revoke an agreement. If either parent will not agree to the Temporary Parental Safety Agreement, the agency should attempt to find a solution that both parents will agree to, or the agency must intervene when a safety threat for a child exists.

Question: If the parent(s) decide to violate the safety plan, is that to be considered a revocation?

Answer: Yes, violation of the Temporary Parental Safety Agreement by the parent is a revocation.

Question: When there is a two parent family and one parent agrees to leave the home during that CPS Assessment as a part of the safety response, does this meet the definition of being Temporary Parental Agreement, since the child is not leaving the home and is with one of the two parents?

Answer: Yes, this circumstance would be considered a separation and/or restriction of a parent's rights/access to his or her child. Any safety intervention with or without separation or restriction needed to protect a child meets the definition and need for a Temporary Parental Safety Agreement.

TPSAs and 215 (CPS In-Home) Services

Question: Do kids have to return home before going to 215?

Answer: In North Carolina we are placing a huge emphasis on the fact that separation/restriction should be a last resort. Use it only when it is the only means to keep children safe. In the event you do have a child who is residing out of the home, to transfer to 215 the child would need to live with his or her parent; hence the term "in-home" services. If the child needs to remain separated for safety reasons, court intervention must be pursued. Agencies must determine whether or not nonsecure custody will be requested at the time of the petition.

Question: What is expected for CURRENT In-home cases with children placed in longer-term safety resources?

Answer: By January 1, 2017, it is expected that agencies will review all CPS In-Home Services cases that have a child placed out of the home. If the county child welfare agencies determines that the child needs to remain out of the home to ensure the child's safety, then court intervention must be pursued.

Question: Can you file a petition at case decision and get the court involved but not take custody and transfer the case to In-home if the parents are working on a plan but just not quite ready to have the child return home in 45 days?

Answer: Yes. At the dispositional hearing, the county child welfare agency should determine if the child should be placed in its custody at that time or if sufficient progress has been made and the child can safely return to the home.

Question: If a safety concern comes up during In-Home Services does a new referral have to be made to do a temporary safety placement?

Answer: During CPS In-Home Services, the county child welfare agency continues to be responsible for monitoring and ensuring child safety. Use of separation or restriction is not an option during CPS In-Home services. The only exception would be if a new referral is made and accepted for CPS Assessment. Then the safety planning policy for use during a CPS Assessment applies. Otherwise, the agency must consider court intervention if separation or restriction is needed to ensure safety of the child(ren).

TPSAs and CFTs

Question: How soon does a CFT have to happen when separation is part of the Temporary Parental Safety Agreement? What about timing of a CFT for calls coming in after hours or on a weekend?

Answer: As per the Child Welfare Services Manual ([Chapter VII: Child and Family Team Meetings](#)), a Child and Family Team (CFT) meeting may be held during a CPS Assessment to address issues of safety planning, as well as, to make initial agreements and decisions about services. During a CPS Assessment a CFT meeting must be held:

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

In the event that a CFT cannot be held prior to making a Temporary Parental Safety Agreement that involves separation or restrictions or filing for nonsecure custody, a CFT must be held as soon as possible. Each agency must determine based on the case circumstances how soon a CFT can be scheduled and/or document why holding a CFT is not appropriate for safety reasons.

TPSAs, Petitions, and the Court

Question: Will safety assessments supersede custody orders?

Answer: No, a safety assessment cannot supersede a custody order. A parent can voluntarily, temporarily agree to not exercise his or her visitation rights, as part of a Temporary Parental Safety Agreement, but a Temporary Parental Safety Agreement cannot supersede any aspect of any court order.

Question: Should all safety agreements wherein a parent has been removed from the home, or contact with the juvenile is restricted be immediately staffed with a Department's legal unit for potential filing?

Answer: This will be determined by each county child welfare agency but does represent good practice.

Question: A major concern is that if a petition is filed due to the parent's refusal to sign the safety agreement, that there will be a gap in time where there is no safety agreement in place but DSS is responsible for ensuring that child's safety!

Answer: This policy does not change your agency's practice when there is not yet a nonsecure petition. You have to evaluate whether or not you meet the requirements for a nonsecure custody order. If you are in this situation, you go through the same process as you do now.

Question: Is it true that agencies must file petitions and nonsecure at case decision if the child cannot go home yet?

Answer: If, at the time of case decision, the safety threat requires that the child(ren) remain separated/access restricted from a parent, then the agency must pursue court intervention. Whether or not the agency requests nonsecure custody when filing a petition will be determined by the county child welfare agency depending on the case scenario. This policy does not require the agency to request nonsecure custody when a petition is filed.

Communication and Training about this Policy Change

Question: How will AOC be brought into this conversation? Judges need to be educated on this new policy and it cannot be the responsibility of the local DSS to do this! What is the plan to involve AOC in getting this info out to courts?

Answer: Many court partners are already participating today. Court partners have been invited to attend the statewide live events held in the counties in Sept. and Oct. At the state level, communication with AOC started in April 2016. At that time their response was, "We will partner with you in any way that is helpful to support these changes." Ongoing TA will be available to counties beyond January 1, 2017 when this policy becomes effective, and should be requested through your CPRs.

Question: Focus on more effective ways to write safety crisis plans should be implemented into the training of all workers.

Answer: The current curricula is being modified to support this new policy. In addition the Division is looking to develop new courses specifically around safety and safety planning.

Question: What is a state border agreement? Are there border agreements with SC?

Answer: Currently, the only state that has a border agreement with North Carolina is Georgia. The purpose of this border state agreement is to improve the ability of the party states to place a child within the other party state under the Interstate Compact on the Placement of Children (ICPC) by reducing the amount of time necessary to effectuate the placement of the child, and by sustaining the placement of the child. This agreement also allows for the placement of a child who is not in state custody, but who is subject to an ongoing child protective services investigation, family assessment, or family preservation under the terms and conditions noted in the agreement. The counties in North Carolina that participate in the border agreement are Cherokee, Clay, Haywood, Jackson, and Macon. The counties in GA that participate are Fannin, Habersham, Rabun, Towns, and Union. There are border agreements currently in development with both South Carolina and Virginia.

Impact / Background

Question: Can county foster care budgets handle all these children who have previously resided with relatives and other safety resources?

Answer: When a Temporary Safety Provider is being utilized to ensure the child's safety, this individual(s) should be given consideration as a continued placement, even after the county child welfare agency has requested custody of the child. Counties lose opportunity for IV-E funding when a child has been out of the home more than 6 months prior to filing for custody. This policy change is seen as a positive, as it will actually increase the county child welfare agency's ability to claim IV-E reimbursement.

Question: I would love to see research that supports the change. How is this beneficial?

Answer: The research across the country has shown that there have been numerous lawsuits filed due to delays in court involvement and the associated lack of due process available to parents when children are placed out of the home for extended periods of time. Current practice in NORTH CAROLINA is overstepping the legal authority provided to DSS. This policy change is being made to ensure children are safe, parent's legal rights are protected, and to ensure North Carolina practice is in compliance with the law.

Webinar Participant Responses to Questions Posed by Presenters

What questions or statements model a voluntary approach to identifying safety interventions when safety threats have been identified?

- Identify strengths, ask about what they think works and what they would like to see for their children
- What can we do to make your child safer?
- What are you presently doing to address this?
- Ask parents what they want the plan to be.
- Do you have any friends or family that have helped before?
- This is for the benefit of your child/family.
- Our agency is worried about.... What things can your family do to help us not worry about this in the future?
- How do you feel you can make your family safer?
- Can you identify a person you trust where you would feel comfortable placing your child?
- DV...how can you protect your children and yourself?
- Complete the assessment with the parent
- What would it look like if you were to change (x behavior)? How would you start? What would the steps be?
- Do you think there is anything that you can change with your situation?
- What has worked in the past for you?
- Let's work together to find a safe place for your child.
- elicit, amplify, reflect, start over

- What can we do to prevent this situation from happening again?
- How can you help to make your children safer than they are right now?
- Involve absent parents
- What concerns you about your parenting?
- Using perspective questions to have parents think through safety concerns from others perspectives
- Asking how they think their child can be safer.
- What are you worried about?
- If you could change or have wish for your family what would it be?
- Who do you consider family supports?
- You can ask the child who their favorite adult/relative is. Ask the family about the person they named.
- What is working well for your family?
- Do you have someone that you trust that is willing to care for your child temporarily?
- Utilizing kinships/families and friends
- What do you think needs to happen next?
- What are you going to do about changing your current situation/issues and will you fully accept the assistance of the agency, family and or friends. Once you place your children with others-it can be life altering. So what are you going to do?
- How can we help you to keep your child safe while we work on the issues that brought us into your life?
- What do you say when a parent does not think there is a safety issue?
- What would you like to happen?
- What can you and I do right now to make sure your children are safe?
- How does your family solve problems and what interventions are use?
- You can inform the family that the safety plan is a collaborative agreement between the agency and the family
- Do you have any family support or anyone you deem to be family?

What is one thing you learned today/one thing you will do after this webinar?

- Importance short duration for safety plans
- Speak to our attorney and judges to make them aware
- Discuss this with our supervisor, director, and attorney. Additionally we will review current cases and how this new form would impact them.
- In house training and on-going discussion of the changes
- Ensure that all plans are voluntary.
- have CFT before voluntary placements are done
- Since I serve as GAL in several counties, I intend to ask about present and future plans for safety in the counties where I have cases
- We feel good about where our county is in terms of implementing these changes. We will discuss the issue about CFTs in our next leadership meeting.

- Start the discussion with DSS
- Do more research on the background, current trends, and understanding North Carolina's reasons for moving towards this approach.
- We are looking forward to face to face training to get clarity on all this
- Attempt to have our court partners to receive training
- If no non-secure is in place and you file compliance you would have to hold the assessment in place to keep a safety plan in place until case is heard in court? How would you plan for safety prior to in-home agreement if safety plan ends with assessment?
- Review all cases currently in In-Home Services to make plan if in Kinship placement
- How will CFT's be handled during imminent danger and after hours cases.
- Discuss with team members.
- Share with Agency Atty. and Judges
- Begin this process as soon as possible
- Discuss this with my supervisor and discuss the changes that will go on within our agency
- Watch the recorded webinar, we had sound problems.
- Make room in my computer for all the extra cases I will be receiving on my foster care case load.
- That our caseloads will increase in Permanency Planning. That parents can chose to have their children come into care and be heard in court. That there will be several trainings available before the new safety plans are implemented.
- discuss further with team members
- I will discuss the changes with my supervisor
- I am looking forward to the changes!
- Review all cases in IH and those with safety resources or with relatives going through process to obtain custody outside of AND Court. Review resources and where they are needed to support the changes.
- Thanks to you guys for the training and your proactive approach to this issue
- Share with my attorney and suggest the training to him and the judge!
- Talk with our attorney and inform DSS Board about new policy.
- Speak with management to enact solid guidelines for staffing cases for filing prior to transfer from assessments.
- Attend more trainings
- discuss how to best implement these practices
- Discuss this with our team many, many times and obtain as much info as possible during the next few months.
- I'll be arranging time to discuss with my local DHHS leadership.
- Talk with GAL staff, attorney advocates, and judges ASAP
- review policy on out of home placements
- discuss with the cps team
- Review
- Talk with my leadership team and the team that I supervise to start these discussions

- Ensure workers are very familiar with this policy
- Begin talking with supervisor and how to make the change
- Encourage workers to utilize their supervisor when making key decisions on a case
- Review policy and Ask questions at the on site
- Prepare for more petitions to come in
- Possibly more petitions
- Make sure staff are aware of the new changes
- Implement the policy and request further training
- Share information with my judges handling juvenile AND court.
- Discuss with our county attorneys whether Wake County will now finally be able to file compliance petitions without taking non secure custody since we have not done them in the past
- Share the information with coworkers
- A team meeting so we can start processing and preparing.
- Work on ensuring that our agency is in full compliance.
- Review in home cases
- Prepare to be in court more often as an IIH service provider
- We loved the guidance and will do anything we can to start implementation of the idea of the policy now so that we are prepared when the policy rolls out in 2017!
- Go to more trainings regarding this training and learning all I can to learn about the change.
- Attend additional trainings. Encourage others to attend as well.
- Discuss in management team how to get prepared for January 2017.
- Discuss this policy with other team members
- I would like to review this information so that I can make sure that I have a clear understanding and can be effective.
- Get ready to be in court OFTEN!
- Looking forward to getting copies and answers to the many questions
- We will review any 215 cases where children are out of the home with safety resources, either return those children home or file petitions.
- Continue the discussion with my team
- Review the policy to make sure that I have a complete understanding.
- Having discussions with management and workers to prepare for the upcoming changes
- Go to more training to better understand, and talk to my local DSS because it seems to be for the parents more so than the child.
- Trainings, continue the discussion with unit.
- Attend more trainings on the new policy.