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County Name:	Case Name:			Case #:	Date:		
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. Child has diagnosed or suspected medical or mental condition, including medically fragile. Child has diminished physical capacity. Child has limited or no readily accessible support network. The vulnerability of each child needs to be considered throughout the assessment. Younger children and children with dimin physical capacity or repeated victimization should be considered more vulnerable. Complete this assessment based on the most volumerable is is comprised of safety indicators, defined as behaviors or conditions that describe a child being in imminent deharm. Assess the above household for each of the safety indicators. Mark "yes" for any and all safety indicators present in the fisituation and mark "no" for any and all of the safety indicators absent from the family's current situation based on the information Mark all that apply. 1. Yes No Caretaker caused and/or allowed serious physical harm to the child or made a plausible threat to 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. Drug-exposed infant/child Caretaker committed act that placed child at risk of significant/serious pain that could resumpairment or loss of bodily function. Caretaker intended to hurt child and does not show remorse. Death of a child.	inty Name	ie:					
Part A. FACTORS INFLUENCING CHILD VULNERABILITY These are conditions resulting in child's inability to protect self. Mark all that apply to any child. Child is age 0-5.	ial Worke	er Na	me:				
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 □ 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/child □ Caretaker committed act that placed child at risk of significant/serious pain that could resu impairment or loss of bodily function. □ Caretaker intended to hurt child and does not show remorse. □ Death of a child. 	I. Yes N	No			e threat to cause serious		
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2. Yes No Child sexual abuse is suspected to have been committed by:	Yes N	No	Child sexual abuse is suspected to have been com-	nmitted by:			
 □ Parent; □ Other caretaker; OR □ Unknown person AND the parent or other caretaker cannot be ruled out, AND circumstan that the child's safety may be of immediate concern. 			☐ Other caretaker; OR☐ Unknown person AND the parent or other ca		cumstances suggest		
Comments:			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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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 and provisions are inappropriate (i.e. using stove as heat source). 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:
D.C.C	.224 /5	04/5	047)
D22-5	5231 (Re	v. U1/2	017) Initials

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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 manger (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
			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:
			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	a child in his/her care, s	combined with information that the caretaker has or may have previously maltreated suggest that the child's safety may be of immediate concern based on the severity of ent or the caretaker's response to the previous incident.				
			Prior death of a chi Prior serious harm Termination of pare Prior removal of an Prior CPS substant Prior threat of serio Caretaker failed to	to any child. ental rights. ay child. iation or services ne ous harm to child.	eded finding. us professional help.			
			Comments:					
15.	Yes	No	Child is fearful of careta	aker, other family m	embers, or people living	in or having access t	o 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. 					
16	3 7	NT	0.1 (
16.	Yes	NO						
							Initials	
		THE		ONE DO NOT		NEED EOD A CA	Initials	
		<u>1Hr</u>	E ALLEGATIONS AI <u>INT</u>		AFETY AGREEMEN		AFE I Y	
If a	ny In	dicato	ors of Immediate Safety	are marked "Yes".	, skip the bottom of this	page and continue	on the next page.	
					e Safety 1 through 16 ar	*		
SIGNA			his box 🗖 Safe and com	plete the part belo	w (the remaining pages	do not need to be co	ompleted).	
			r Legal Guardian:	Date Signed:	Child's Parent or Leg	gal Guardian:	Date Signed:	
Child'	's Pai	rent o	r Legal Guardian:	Date Signed:	CPS Social Worker:		Date Signed:	
Other Party:				Date Signed:	CPS Supervisor:		Date Signed:	
	CPC	G 1	Wl2. N		n I Contact?	Б	A 11	
	CPS	Social	Worker's Name:	Phone	e Number:	Email A	Address:	
CPS Supervisor's Name:				Phone	hone Number: Email Address:			

Initials ____

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.

	ety Interventions (Safe v. 1. Monitoring and/or us. 2. Use family, neighbors safety agreement. 3. Use community ager 4. The alleged perpetral 5. A protective caretaker restrictions on protect G. Identification of a Term A Temporary Sare The child(ren) v. Explain why response	se of direct services rs, or other individuates, or other individuates or services. For will leave or has ser will move or has stive caretaker's accomporary Safety Provider will reside in the hor	left the homeei moved to a safe e ess to the child(rovider by the pare nove into the fam ne of a Temporar	inity in the desirther voluntaries environment ween). Int with the so hily home.	velopment and i ly or in response rith the child(rer cial worker mor	e to legal action. and there are no
	are Safety Intervention 1. Removal of any chilo xplain why a Family Safety	d in the household; i				child(ren)'s safety.
_		PART D:	SAFETY DEC	ISION		
A. Safe B. Safe v C. Unsafe	with a plan: Ye: Tety indicators in Part B market icators apply to the household	One or more safet Family Safety The alleged p A protective o Use of a Tem One or more	e in immediate da Il marked No, M y indicators are p	y other informanger of serious arked Safe on oresent; Safety 2, and/or 3 we home. to a safe envirous derivation of the safe environment of the safe en	nation known abus harm. (Indicat Page 5). Agreement requill address safet conment with the	out this case. fors of Immediate Safety uired. y indicators. e child(ren).
	No ety Interventions #1, 2, 3,4 ar fety indicators identified in P		Yes		Safe with a Plan Safety Agreemen	*)
	emporary Safety Provider, # 6 fety indicators identified in P		Yes	s	Safe with a Plan afety Agreement (complete an Ini Provider Asso	(page 7). Also tial Safety
•	No dren require removal from the di Welfare Safety Intervention		Yes		Unsafe	
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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. Describe 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 the agreement. 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.

amily 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	Responsible Party's initial

PART F: STATEMENTS OF UNDERSTANDING AND AGREEMENT								
	PAI		INITIALS					
1.	I (the parent or caretaker) agr			ent of and reviewe	ed			
	this safety agreement. I agree		_					
2.	My participation in this agree							
	part and cannot be used as an			C				
3.	I understand that I have the ri			rary Parental Safet	.V			
	Agreement reviewed at any ti							
	Safety Agreement cannot be a				re not			
	followed, the county child we	elfare agency ma	y have the authority t	to request that the	court			
	make a determination on how							
4.	I (the parent or caretaker) con	firm that this ag	reement does not con	flict with any exis	ting			
	court order, or if I am affected	d by a court orde	er, all parties affected	by the court order	:			
agree to this safety agreement on a temporary basis.								
5.	I (the parent or caretaker) und			er services, may res	strict			
	access to my child(ren), or ma							
	child in foster care.		1	1				
6.	If a Temporary Safety Provid	er is utilized, I u	nderstand that CPS w	vill share any				
	information with the Tempora				ld			
	while the child lives in that he			•				
	home.							
7.	7. This safety agreement will cease to be in effect when I am notified by my social worker							
or CPS is no longer providing services to my family.								
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 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 ch	ild in my care is	considered to be in a	n unsafe situation,	, the			
	child will be moved to a diffe		and further CPS invol	vement may be				
	necessary, including court int	ervention.						
SIGNA'	TURES							
Child's	Parent or Legal Guardian:	Date Signed:	Child's Parent or Le	gal Guardian:	Date Signed:			
	-				_			
Child's	Parent or Legal Guardian:	Date Signed:	CPS Social Worker:		Date Signed:			
Other P	Party:	Date Signed:	CPS Supervisor:		Date Signed:			
Tempo	rary Safety Provider:	Date Signed:	Temporary Safety Provider: De		Date Signed:			
Who	Can I Contact? (Who can I contact)	et if circumstances	change, if I have questio	ns about CDS involve	amont or if I have			
WIIO	questions about this safety agr	eement? Who do I	contact to revoke any or	all parts of this agree	ment?)			
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:								
	or b bootar worker britaine.	Thom	o i tumoor.	Dilleri 1	idaress.			
	CPS Supervisor's Name:	Phone	e Number:	Email A	Address:			
	of a supervisor of funite.	1 110110		Linuii 1	. 1001000.			
REVO	CATION: I revoke my conser	nt to the Tempor	arv Parental Safety	Agreement				
KE (O	CITIOIN TICTURE My CONSCI	it to the rempor	ary rareman banety I	151 CHICHE.				
	Sign	ned:		Date:				