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COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF
PUBLIC WELFARE

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SUBJECT: Safety Assessment and Management Process

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SCOPE:
COUNTY CHILDREN AND YOUTH SOCIAL SERVICE AGENCIES
COUNTY CHILDREN AND YOUTH ADVISORY COMMITTEES
PRIVATE CHILDREN AND YOUTH SOCIAL SERVICE AGENCIES
HUMAN SERVICES DIRECTORS
COUNTY COMMISSIONERS
JUVENILE COURT JUDGES’ COMMISSION
DISTRICT ATTORNEYS
CHIEF JUVENILE PROBATION OFFICERS

PURPOSE:
This bulletin rescinds and replaces Bulletin 3490-06-01 entitled “Safety Assessment and Planning Process.” The original bulletin provided a protocol and format for the implementation of safety assessments and safety planning to conform to the requirements of the Adoption and Safe Families Act (ASFA). The information provided in this bulletin identifies a safety assessment process to be completed for each child within the child’s current living situation. Use of this safety assessment process will allow for a more systematic and consistent statewide process of conducting safety assessments and safety planning. To facilitate implementation of the new safety assessment process, a manual which includes safety assessment worksheets has been incorporated into this bulletin as an attachment.

BACKGROUND:

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:
Office of Children, Youth and Families Regional Offices

ORIGIN OF BULLETIN: Bryle Zickler (717) 705-5420
The Adoption and Safe Families Act (ASFA) was signed and became federal law on November 19, 1997. The law is tied to federal Title IV-B and Title IV-E funding, building on and amending the Adoption Assistance and Child Welfare Act of 1980. ASFA refocuses requirements to the issues of child safety, well-being, permanence and timeliness. In the interim time period since ASFA went into effect, the Commonwealth of Pennsylvania has worked toward achieving the outcomes set forth by ASFA with safety maintaining its paramount status.

During this time, counties were required to develop their own policies and procedures to assess for and assure child safety. When Pennsylvania participated in the Federal Child and Family Services Review in 2002, safety was determined to be an area that would benefit from further study and improvement. As a result, the Risk Assessment Task Force reconvened and formed a sub-committee dedicated to conducting a local and national review of safety assessment instruments. This work resulted in the development of a standardized safety process to assess and assure child safety.

More recently, the Department of Public Welfare (DPW) requested technical assistance from the National Resource Center on Child Protective Services (NRCCPS) in further refining Pennsylvania’s safety assessment process. As a result of this technical assistance, the NRCCPS provided DPW with recommendations to enhance the safety assessment and management process. Additional literature, which was developed by Action for Child Protection, Inc. was reviewed, incorporated and led to the development of the safety assessment and management process and safety assessment worksheets.

DEFINITIONS:

The definitions of the words and phrases below should be used within the context of Safety Assessment and Management Process.

**Safety Assessment and Management Process:** The on-going method of assuring the immediate safety of the child. There are four phases to this process: Safety Assessment, Safety Analysis, Safety Decision, and Safety Plan Management. This process can be applied to children who are in their own home, a substitute placement setting, and a congregate care setting.

- **In-home Safety Assessment:** The continuous process of collecting information related to child safety in six domains to identify threats to safety and protective capacities. These domains include the extent of maltreatment, circumstances surrounding the maltreatment, child functioning, adult functioning, parenting, and discipline.
  - **Safety Threats:** The conditions or actions within the child’s current living situation that represent the likelihood of imminent serious harm to the child. There are two types of safety threats:
• **Present danger** is an immediate, significant, and clearly observable threat to a child occurring in the present.

• **Impending danger** 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.

  o **Safety Threshold**: The point when a caregiver’s behaviors, attitudes, emotions, intent, or situations are manifested in such a way that they are beyond being risk influences and have become an imminent threat to child safety.

    In order to reach the safety threshold a condition must meet all of the following criteria:
    
    ▪ Affect a vulnerable child;
    ▪ Be specific and observable;
    ▪ Be out-of control;
    ▪ Be imminent; and
    ▪ Have potential to cause **serious** harm to a child.

  o **Protective Capacity**: A specific quality that can be observed and understood to be part of the way a caregiver thinks (cognitive), feels (emotional), and acts (behavioral) that makes him or her protective.

• **Safe Home Assessment**: The process of gathering and analyzing information to confirm the presence of a safe environment. When sufficient indicators of a safe home are confirmed a child can remain safely in that placement setting. The Safe Home Assessment includes a comparative analysis of change over time in an effort encourage positive development to prevent maltreatment.

  o **Indicators of a Safe Home**: The conditions, behaviors, or beliefs that contribute to a safe environment for a placed child.

• **Safety Analysis**: The process by which a county agency staff person systematically evaluates the information gathered. The purpose of the safety analysis is to identify and explain what is associated with or influences a safety threat or protective capacity (for in-home safety assessments) and indicators of a safe home (for substitute care assessments). The results of the analysis lead to a safety decision.

• **Safety Decision**: A determination related to the safety of a child in their current living arrangement, which is based on the conclusions of the safety analysis. There are two different sets of safety decisions. One set consists of three in-
home decisions. The second set consists of three decisions related to the safety of the placement home.

o **Preliminary Safety Decision**: A determination made that present danger and/or impending danger exists based on information gathered prior to the completion of the safety analysis.

o **In-Home Safety Decisions**:
  - **Safe**: Either caregiver’s existing protective capacities sufficiently control each specific and identified safety threat or no safety threats exist. Child can safely remain in the current living arrangement or with caregiver. Safety plan is not required.
  - **Safe with a Comprehensive Safety Plan**: Either caregivers’ existing protective capacities can be supplemented by safety interventions to control each specific and identified safety threat; or the child must temporarily reside in an alternate informal living arrangement. No court involvement is necessary; however a safety plan is required.
  - **Unsafe**: Caregivers’ existing protective capacities cannot be sufficiently supplemented by safety interventions to control specific and identified safety threats. Child cannot remain safely in the current living arrangement or with caregiver; agency must petition for custody of the child. Safety plan is required.

- **Safe Home Decisions**:
  - **Home is Safe**: Observable and specific information exists that causes a reasonable person to conclude that sufficient indicators are present which confirm that the home remains safe for this child.
  - **Home is Safe with Additional Supports**: Observable and specific information exists that causes a reasonable person to conclude that, with additional services and supports in place, sufficient indicators are present which confirm that the home remains safe for this child. When this decision is made the following additional steps must occur within the designated timeframe:
    - Contact the private provider or county agency staff person within twenty-four (24) hours to identify needed services.
    - Contact the Regional Office within forty-eight (48) hours to notify them of the need for additional services, or Contact ChildLine if this decision is made during non-business hours.
    - Document any additional services on the child’s existing Safety Plan.
- **Home is Unsafe**: Observable and specific information exists that causes a reasonable person to conclude that sufficient indicators are present which suggest that the home does not remain safe for this child. Take immediate steps to find an alternate living arrangement for this child. When this decision is made the following additional steps must occur within the designated timeframe:
  
  - Immediately notify the Regional Office, private provider agency or county agency staff, that the placement home has been determined to be unsafe.
  - Review the child’s current Safety Plan to determine if modifications need to be made and document any and all necessary changes.

- **Safety Plan**: A written arrangement between caregivers, responsible persons and the county agency that delineates the interventions or actions implemented to control safety threats. A safety plan can also include services/supports provided to children and resource families in a placement setting.

  - **Immediate, Preliminary Safety Plan**: A written arrangement between caregivers, responsible persons and the county agency designed to control present danger and/or impending danger in order to allow the Child Protective Services investigation, General Protective Services assessment, and/or safety assessment to occur. A preliminary safety plan is only used when present danger and/or impending danger has been identified prior to the completion of the safety analysis.

- **Responsible Persons**: Any individual(s) who has a role and responsibility to assure the child’s safety for compliance with the plan; types of responsible persons could include family, caregivers, kin, household members, service providers, resource families, agency staff, and/or any other identified resources. Action steps identified in the safety plan must be specific and measurable and agreed upon by all of the identified responsible persons prior to the plan going into effect.

**Other Applicable Definitions:**

- **Accept for Service**: A decision made on the basis of the needs and problems of an individual to admit or receive the individual as a client of the agency or as required by a court order transferring custody of a child to the county agency under 42 Pa C.S., Sections 6301-6305 (relating to the Juvenile Act).

- **Risk Assessment**: The process by which the caseworker assesses the current level of risk to a child to determine the likelihood of future harm, abuse, or neglect as prescribed by the Pennsylvania Risk Assessment Model.
• **Placement:** Twenty-four hour out-of-home care and supervision of a child.

**DISCUSSION:**

**The Difference Between Safety and Risk**

Historically, Safety Assessment and Risk Assessment have been tied together in casework practice. As with most processes, Safety Assessment and Risk Assessment are intertwined and dependent upon each other. To minimize one, the value and importance of both is diminished. Both are key elements in protecting children from harm.

Safety Assessment and Risk Assessment are processes that often ask the same questions to make different decisions. A **Safety Assessment** evaluates the issues impacting a child that suggest that there is an *immediate* threat of harm to the child. It asks the worker to devise a plan that will address the immediate threat by identifying and mobilizing the protective factors already existing within the child’s current living situation that can protect the child from that threat, identify strengths that could evolve into protective factors, or by removing the child. A **Risk Assessment** evaluates *future* threats of harm to a child. It helps identify the individuals who need to be served and the factors that must be addressed to reduce future risk levels. In addition, safety assessments are to be done where the child is currently living and risk assessments are to be done as if the child is in the home. Both safety assessment and risk assessment are *continuous, ongoing processes* that a worker must undertake. Effective Safety Assessment neither can nor should be limited to those points in time during which a formal Risk Assessment Matrix is completed.

**Safety Process: Assessment, Analysis, Decision and Plan Management**

Safety has always been a paramount concern in the child welfare system. Where child maltreatment or family conditions create an immediate threat of significant harm to the child, the system must act swiftly and decisively to assure the child’s safety. Safety interventions must work to control the level of safety threat and/or to prevent the safety threat from having a significant impact on the child. Safety interventions must also be in place to assure safety throughout the case process, both for children who remain at home receiving services and for children who are in placement.

To help assure that ALL children residing in the home are safe i.e. free from immediate physical and/or emotional harm, it is necessary to consider safety at every contact and assess safety at every face-to-face contact.

- Assessment of Safety Threats and Protective Capacities
- Safety Analysis
- Safety Decision
- Safety Plan Management
Safety assessment is not simply a “front end” determination. It is a dynamic process that is ongoing and whenever evidence or circumstances suggest that a child’s safety may be in jeopardy, it is the responsibility of the worker to assess and analyze that information and plan for the child’s safety. A discussion of child safety should also be part of every caseworker’s weekly supervisory conference.

In addition, child welfare professionals need to understand the differences between a safety plan and a service plan. A safety plan is comprised of action steps or interventions that are intended to address the immediate safety threats to the child. It requires immediate implementation and therefore all safety interventions identified in the safety plan must be able to be implemented within a 24 hour time frame with supervisory approval of a safety plan that was implemented.

Service Planning, on the other hand, is directly connected to the risk assessment and is intended to address the underlying conditions and contributing factors in a family to help prevent future abuse and/or neglect to the child. A Service Plan is the agreement, plan or contract that one makes collaboratively with a family that is designed to meet the goals and objectives determined to address the central issues, which caused the case to be opened. A Service Plan is designed to meet the needs of the children and family as they relate to the program/service area.

An example of these types of services might include mental health or substance abuse counseling, etc. These treatment services would not be appropriate to include in the safety plan as they do not exert an external control to mitigate the immediate safety threat. However, the parent’s participation in such services may result in the parent internalizing changes that would mitigate future risks of harm. Ultimately, these services will have a greater long term impact on the safety and well-being of the child, but would not assure the child’s immediate safety.

**Safety Assessment Worksheets**

In the attached manual are the safety assessment worksheets for in-home cases and substitute care cases. Consistent with DPW regulations at Title 55 Pa. Code, Sections 3130.43 (b) (5), 3490.55 (e) and 3490.236 (a), county agencies are required to document their contacts with families in the family case record. For the purposes of Safety Assessment and Management, this documentation of contacts is referred to as structured case notes. As part of this structured case note, information should be included which documents and supports the safety assessment and management process, including the analysis and decision. Information should clearly show that the safety decision is consistent with the analysis, identification of safety threats and caregiver protective capacities. The Safety Assessment Worksheet and Plan need only be completed as per the interval policy and/or if changes arise to the safety analysis, decision, and plan. If any changes arise, the caseworkers must complete and/or update the Safety Assessment Worksheet and Plan and incorporate any supplemental information related to that change in the structured case note.
All of the identified elements from the safety assessment worksheet should be considered and documented, as necessary, in the structured case note. Elements to consider are:

1. Any or all of the fourteen (or 12 for substitute care) safety threats present within the child’s living situation that threaten a child’s safety;
2. Any or all protective capacities which operate to control the identified safety threat;
3. The safety decision and analysis for that decision; and
4. The safety plan to include which person is responsible for each action step/safety intervention.

All changes to a child’s safety analysis, safety decision, and safety plan must also be documented by using both the structured case note and the worksheet. Also documented within the structured case notes should be:

1. the type and frequency of the caseworker’s management efforts including dates, the nature of the management activity and who was involved;
2. judgments about changes within the family that reflect on safety;
3. the status of present or impending danger; and
4. changes related to caregiver protective capacities.

As part of ongoing safety management, structured case notes should continue to reflect not only that the child is safe or unsafe, but the criteria used to determine this including all information obtained during the continuing assessment process. Further, a structured case note should provide enough information to respond to the following questions:

✓ Are safety interventions controlling the safety threats?  
  o More than needed  
  o Less than needed  
  o As needed

✓ Is there new information relative to safety?  
  o Have safety threats increased?  
  o Are there new safety threats?  
  o Is there a change in the caregivers protective capacity?

**POLICY:**

When the initial referral is received regarding a family, the person taking the referral must make a judgment on whether or not present danger exists. This judgment should be based on the fourteen assessment factors and the available information received from the referral source. Knowing what questions to ask in order to obtain the most detailed and accurate information is explained in the section entitled Safety Assessment, under Information Gathering.
Assessing and managing a child's safety as part of the casework process is done throughout the life of the case, including at each and every contact. Formal safety assessment documentation need only be written or amended during specific intervals. After assuring the child’s safety as prescribed at Sections 3490.55 and 3490.232 of the Protective Services Regulations, periodic documentation of safety assessment shall be completed using the safety assessment worksheet by the county agency as follows:

During the Investigation:

- Within 24 hours of the first face-to-face contact by the newly assigned caseworker in order to confirm that the safety decision made by the prior caseworker is still accurate; this should occur every time the case is transferred;
- At the conclusion of the intake investigation/assessment, when a decision was made whether or not to accept the case for ongoing services. This may not exceed 60 calendar days from the date the referral was received;
- Whenever evidence, circumstances or new information suggests a change in the child’s safety;

Once the case has been accepted for ongoing services:

- Within 24 hours of the first face-to-face contact by the newly assigned caseworker in order to confirm that the safety decision made by the prior caseworker is still accurate; this should occur every time the case is transferred;
- Every 6 months from the date the case was accepted for ongoing service;
- Whenever evidence, circumstances or new information suggests a change in the child’s safety;
- Within 24 hrs after unplanned return;
- Within 30 days following any return home (planned or unplanned); or
- Within 30 days prior to case closure, along with risk assessment in accordance with 3490.321(h)(4);

When court jurisdiction is terminated and the agency simultaneously closes the family’s case, there is no expectation that the agency must return to the home within 30 days following the child’s return home in order to complete a safety assessment as prescribed by the interval policy.

The reference to the formal safety assessment documentation needing to be completed by the newly assigned caseworker within 24 hours after the first face-to-face contact in the above bullets means that if the caregiver and child have not been seen at the same time, the formal documentation would be completed after both of these individuals have been seen. A preliminary safety assessment/decision must be made at the initial contact. There may be instances when a caseworker must make the preliminary assessment/decision without seeing both the child and the caregiver in order to assure child safety. The caseworker must then continue the formal assessment process during which both the child and caregiver would be seen.
Developing and maintaining a safety plan is the primary responsibility of the county children and youth agency which is informed by any and all private providers and collaterals involved with the child.

Safety management must continue to occur as long as threats to a child’s safety exist in a family and caregiver protective capacities are insufficient to assure child protection. At the point during safety management when it can be determined that the caregiver’s protective capacities are sufficient to assure the safety of the child, there is no need to continue with a safety plan.

To be effective, safety management must be responsive to how safety issues change throughout the course of agency intervention. Safety management must be able to respond to new or changing threats of present or impending danger, as well as the protective capacities of the caregivers. Safety decisions can be modified as a result of those changes. When changes occur in the family situation, safety interventions should be reviewed to determine whether or not they are still appropriate based on the present or impending threats to the child’s safety. At this time, additional safety interventions may need to be implemented if the present or impending threats to a child’s safety have increased and protective capacities within the family are insufficient to control the threats. If the threats to a child’s safety have decreased, safety interventions may be able to be decreased. The process by which safety interventions and caregiver’s protective capacities are assessed should directly relate back to the safety analysis and resulting decision.