The Process for Assessing Safety in Out-of-Home Care

Objective: It is the purpose of this document to provide guidance of the step-by-step process concerned with assessing child safety in out-of-home care. This begins at the point consideration is given to placing a child and proceeds throughout the placement. It identifies steps, activities, and tasks associated with effectively assessing and overseeing safety while children are in placement. The documentation requirements for the Out-of-Home Safety Process will vary from agency to agency.

The process builds upon the requirements set forth by the Adoption and Safe Families Act; specifically:

- During the initial assessment or any time placement of a child is being considered, judge the safety of a chosen placement; and
- The safety of the child in placement and the likely date of a safe return home must be considered at case review and at a six-month review.

The Pennsylvania specific process to assess safety of children in out-of-home care is as follows:

Step 1: Knowing the Child to be Placed

Whether this is an initial placement or current placement setting, it is critical to gain as full of an understanding of the child(ren) involved as possible. The principle at play that concerns safety in out-of-home care is that the placed child influences the environment and this influence must be taken into account as a positive or negative attribute of the home. A number of assessment concerns are relevant:

	Does the child contribute in some way to the threat of harm that is present in his or her own home? Here we are concerned with questions of behavior, emotion, temperament, self-presentation, identity within the family, special needs, and so forth.
	Does the child possess any medical or other special needs? As a separate issue from the above question, children with more intense or immediate needs create unique kinds of demands on a home: a) they require more care, energy, and time; b) they require additional acceptance; c) they may require special knowledge and understanding; d) their need may require additional resources.
	Is the child particularly vulnerable? Obviously, age and fragility represent higher vulnerability. However, this question causes the need for examining individual characteristics that make the child particularly vulnerable. Examples include: difficulty with physical mobility, inability to make needs known or to effectively communicate, physical appearance, being identified with certain people, alienation from the family network, disruptive or obnoxious behavior or manner.
]	Does the child exhibit sexualized behavior? A child who exhibits sexualized behaviors is more vulnerable. Since this is a similar question to those above, we can understand its difference with respect to action and involvement within a family

The Process for Assessing Safety in Out-of-Home Care (continued)

	that is perpetrated by the child (consciously or unconsciously) on purpose. This question prompts us to consider the sexualized behavior in the context of intent and what it stimulates in others. Think of this child as the one who tests others, presumably for a purpose.			
	Does the child exhibit aggressive behavior? The concern is for children who victimize other children. It is critical to know if there is any reason to believe that a child to be placed might be a specific threat to other children in a home.			
	Is the child fearful? The determination in this question must be related beyond the child's own home situation to that of others who might care for him or her. Understandably, children may be anxious about foster care placements, but that is not the focus of this question. It is more relevant to the potential kinship placement. The assessment issue is whether the child's fear can be associated in any way to the potential kinship situation. Moreover, if it can be, sorting out the source and nature of the fear is necessary.			
	What is the child's perception of the placement? Again, this question has more relevance to kinship placements. We must give credit to a child's point of view about the suitability of a placement with kin if the child has some familiarity with them.			
Step 2: Provider Selection				

Placement selection predisposition is always toward kinship homes when they are available and can be judged to provide safety and refuge. The question of availability is usually answered at the point that placement appears to be imminent. Therefore, as an assessment concern, provider selection with respect to choices between kin or foster care occurs naturally as a part of the encounter with the maltreating family. Given the two choices, activities are rather straightforward:

☐ Formal Living Arrangements

- Review the total database available concerning a prospective foster home: home studies, case records, current and previous workers.
- Evaluate evidence of minimum care, maltreatment or risk of maltreatment, threats of harm, successful care, and current and past placements.

Informal Living Arrangements

- Complete background checks and other clearances as required.
- Check agency information sources: central registry and agency records.

Step 3: Present Danger Assessment and initial safety determination (First **Encounter - Provider Interview)**

It is important to acknowledge that steps 1, 2, and 3 occur quickly in sequence, or they may even appear to occur simultaneously. It can be stressful for you as you attempt to slow things down to assure a thorough, competent approach that promptly

The Process for Assessing Safety in Out-of-Home Care (continued)

accommodates the child's safety needs while avoiding multiple moves between emergency care situations. The provider interview should occur within a designated timeframe according to each case situation. The best scenario is for the interview to occur at least 24 hours prior to the placement. However, often you have limited control over the timing as children are placed by others or under emergency circumstances. In the event of a child being in placement prior to the provider interview, you should conduct initial information collection during the placement process (while it is occurring) or as soon thereafter as possible post-placement. There are a number of procedural standards that govern this first encounter:

Apply criteria for evaluating safety.

Is there anything within the providers or their home that causes concern for the child's safety at the point of placement or that is impending? Evaluate safety concerns in the *here and now* through an assessment of Present Danger.

Protocol

- Head of household assists with logistics
- Face-to-face interviews
- All residents of the household
- In home

☐ Additional Input

- Consult with other workers who have knowledge of kin or foster homes.
 We acknowledge that time and availability can influence who you can include.
- Use collaterals to fill in gaps, as needed, for greater expertise and to confirm areas of concern.

□ Foster Parents

When conducting the first interview with foster parents: a) attempt to fill in the gaps from what may not be known from the agency's records; b) focus information collection related only to the placement you are making; c) consider present/current status issues the home is experiencing that could affect the placed child and that may not yet be in the record.

- ☐ It is recommended that you document within a standardized format.
- Document *Present Danger* safety concerns based on first encounter interviews within a day of completion of those interviews.
- ☐ The first encounter judgment about safety and the decision to place the child or allow the child to stay in the placement must be approved by your supervisor.

Form Immediate Conclusion Based on the First Encounter

- Safe no immediate concern Place or allow placement to continue.
- Unsafe immediate concern Do not place or place somewhere else.

The Process for Assessing Safety in Out-of-Home Care (continued)

At this point, it is recommended that you avoid intensive efforts directed at making the placement more suitable. If there are immediate quick fixes, like environmental changes, or getting some needed resource that is one thing. If the "fixes" need to go beyond that point it is best to immediately look for another placement.

Step 4: Confirm a safe placement setting (Within 60 days or two months, from the date of placement)

For the first 60 days (two months) following the placement of the child, you should attempt to have as much face-to-face contact with the child and the placement caregiver(s) as time permits. The purpose of this contact is twofold: 1) to oversee the safety of the child and the implementation of the care/safety plan that has been discussed with the caregivers: 2) to collect information in order to inform the safety of the placement. In your comprehensive assessment, make certain to evaluate any significant changes that have happened with the child, the out-of-home caregivers and others in the home. What changes are there and what do they mean for child safety? Is this a safe placement? You may use collaterals as you see the need. Certainly, it is expected that information gathered during face-to-face visits can be enhanced through phone calls. If you find there are concerning circumstances for any indicator, assess their intensity, frequency, duration, and impact on the child. If needed, put supports in place to support the child and the caregivers in meeting the needs of the child. THIS IS NOT A SAFETY PLAN. IF YOU DETERMINE THAT YOU NEED A SAFETY PLAN IN THE OUT-OF-HOME CARE HOME THEN THE CHILD IS UNSAFE AND MUST BE **MOVED**. The only exception to this is if the child is court ordered to remain in a home that you have deemed to be unsafe. If issues that reduce or erode safety are not amenable to swift resolution, then place the child elsewhere and begin the process again. If you assess that the indicators are predominately within the negative range or any one negative indicator is so prevalent that it affects child safety then the child is unsafe and must be moved immediately.

Your agency may have specific documentation requirements at prescribed intervals. However, it is important to remember that you are always assessing for safety and documenting at every contact- whether for Present Danger or characteristics that are positive, concerning, or negative.

Step 5: Monitor for stability (and any changes that could pose a threat to child safety) (within 180 days or six months from the previously confirmation of a safe placement setting)

Because things can change, it is necessary to be concerned about safety on a continuing basis. Once you have confirmed a safe placement setting (Step 4), then you should observe the home sufficiently over time to assure that the same acceptable conditions remain and that changes occurring do not pose a threat to child safety. A number of oversight issues are relevant:

☐ What is the source and nature of information that supp	บบบร	oversignt?
--	------	------------

The Process for Assessing Safety in Out-of-Home Care (continued)

Is the Safety Plan for the placed child's family working?
What changes are occurring in the home (stress/people) that could affect safety?
How is the child adjusting? Changes in behavior or emotions?
What is the climate and atmosphere within the home?
Has there been any evidence of child maltreatment?
What needs have been expressed concerning supporting the placement?
Are any plan or placement adjustments needed?
Are the child's medications being taken as prescribed, are the child's levels appropriate, are the medications inaccessible to children, and are they being logged as required?

Keeping the placement or re-placing the child is a decision that should always be considered given the continuing exposure to the home. When threats appear to be emerging or the family is experiencing a temporary setback of some sort, an evaluation should occur. There are three evaluation questions that are relevant to emerging threats or eroding effectiveness in providing protection:

- 1. Is there a responsible adult in the home who can and will continue to provide protection?
- 2. Is the family experiencing difficulties that can be quickly resolved?
- 3. Can the emerging (not present yet) threats be managed while the family recovers?

A principle involved in oversight is that no continual CCYA safety management plan is expected in kinship or foster care placements. If a longer-term strategy to assure safety seems required, then removal and placement elsewhere should occur.

Your agency may have specific documentation requirements at prescribed intervals. However, it is important to remember that you are always assessing for safety and documenting at every contact- whether for Present Danger or characteristics that are positive, concerning, or negative.

Adapted from Action for Child Protection, Inc.