more children are still in the home.

7. Immediately prior to closing a service case.

1) Appendix N- Rick Assisming

CFS 1441 IL 418-0601 Rev. 9/95

## State of Illinois Department of Children and Family Services CHILD ENDANGERMENT RISK ASSESSMENT PROTOCOL Safety Determination Form

Case Name		Report Date		Agency Name	
RTO/RSF		Worker Name	D		SCR/CYCIS#
When To Complete The Form:	For child protection purposes, the safety assessment must be conducted, at a minimum, at the following case milestones (check the appropriate box):  1. Within 24 hours after the investigator first SEES the alleged child victim.  2. Whenever circumstances suggest that the child's safety may be in jeopardy.  For child welfare services (follow-up), the safety assessment must be conducted, at a minimum, at the following case milestones (check the appropriate box):  1. Within 5 working days after case assignment. (The child must be seen in order for the safety assessment to be conducted.)  2. Whenever circumstances suggest that the child's safety may be in jeopardy.  3. Every 6 months on intact family cases.  4. Immediately prior to returning a child home. (Assess safety in the child's return home environment.)  5. When considering the commencement of unsupervised visits.  6. Before an administrative case review where one or more children are still in placement and one or				

## **SECTION 1. SAFETY ASSESSMENT** Part A. Safety Factor Indentification Directions: The following list of factors are behaviors or conditions that may be associated with a child(ren) being in immediate danger of moderate to severe harm. All children in the home are to be assessed whether or not they were the alleged victims. When assessing their safety, consider the effects that adults who have access to them could have on their safety. Identify the presence of each factor by checking "Yes," which is defined as "clear evidence or other cause for concern." 1. Yes No Caretaker's behavior is violent and out of control. 2. Yes D No D Caretaker describes or acts toward child in predominantly negative terms or has extremely unrealistic expectations. 3. Yes 🗆 No 🗅 Caretaker caused moderate to severe harm or has made a plausible threat of moderate to severe harm to the child. 4. Yes 🗆 No 🗅 Child's whereabouts cannot be ascertained and/or there is reason to believe that the family is about to flee or refuses access to the child. 5. Yes 🗆 No 🗅 Caretaker has not, will not, or is unable to provide sufficient supervision to protect child from potentially moderate to severe 6. Yes 🗆 No 🗈 Caretaker has not, or is unable to meet the child's medical care needs that may result in moderate to severe health care problems if left untreated. 7. Yes D No D Caretaker has previously or may have previously abused or neglected a child, and the severity of the maltreatment, or the caretaker's response to the prior incident, suggests that child safety may be an urgent and immediate concern. 8. Yes \( \text{No} \( \text{No} \) Child is fearful of people living in or frequenting the home. Caretaker has not, or is unable to meet the child's immediate needs for food, clothing, and/or shelter; the child's physical living conditions are hazardous and may cause moderate to severe harm. 10. Yes 🗇 No 🗇 Child sexual abuse is suspected and circumstances suggest that child safety may be an immediate concern. 11. Yes 🗆 No 🗅 Caretaker's alleged or observed drug or alcohol use may seriously affect his/her ability to supervise, protect, or care for the child. 12. Yes 🗆 No 🗀 Caretaker's alleged or observed mental illness or developmental disability may seriously affect his/her ability to supervise. protect, or care for the child. 13. Yes 🗆 No 🗈 Caretaker may be a victim of domestic violence which affects caretaker's ability to care for and/or protect child from imminent, moderate to severe harm. 14. Yes I No I Other (specify).

Directions:	<ul> <li>Part B. Safety Factor Description and Mitigating Circumstances/Family Strengths</li> <li>IF SAFETY FACTOR(S) ARE CHECKED "YES":</li> <li>Note the applicable safety factor number and then briefly describe the specific individuals, behaviors, conditions and circumstances associated with that particular factor.</li> <li>Identify and describe family strengths and any mitigating circumstances.</li> <li>IF NO SAFETY FACTORS ARE CHECKED "YES":</li> <li>Summarize the information you have available that leads you to believe that no children are likely to be in immediate danger of moderate to severe harm.</li> </ul>						





	.a. lala	SECTION 2: SAFETY DECISION			
Direction	dec	dentify your safety decision by checking the appropriate box below. (Check one box only.) This decision should be based on the assessment of all safety factors and any other information known about this case.			
A. UNSA	FE: O	A safety protection plan must be developed and implemented or one or more children will likely be in immediate danger of moderate to severe harm.			
B. SAFE	: 0	There are no children likely to be in immediate danger of moderate to severe harm at this time.			
		SECTION 3: SAFETY PROTECTION PLAN			
		ety protection plan as follows: nat actions have or will be taken to protect each child in relation to current safety concerns; and			
2	2) who is responsible for implementing each plan component; and				
3	) по	w will the plan be monitored and by whom.			
<del></del>					
<del></del>		SECTION 4: SIGNATURES/DATES			
The safety assessment and decision were based on the information known at the time and were made in good faith.					
Worker		Date			
Supervisor		Date			

DIRECTIONS: Use this space to continue any additional documentation from pages 2 or 3.				
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