#### **ADMINISTRATIVE PROCEDURE #25**

## HOME SAFETY CHECKLIST July 26, 2022 – P.T. 2022.06

# Section

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#### **Section 25.1 Purpose**

While it may be impossible to eliminate all the dangers children encounter in their homes, one of the most important factors in reducing those dangers is parent education. The Home Safety Checklist, when properly used with parents and caregivers, provides an effective home safety assessment and educational tool that will assist in promoting the safety of children.

#### **Section 25.2 Primary Users**

Primary users of the Home Safety Checklists are Child Protection Specialists, Intact Family Worker and Permanency Workers.

#### Section 25.3 When to Complete the Checklist

- a) Intact Cases
  - 1) Intact Family Workers shall complete the Home Safety Checklist:
    - A) Within 30 days of the case opening regardless of whether a CFS 2027 was completed by a Child Protection Specialist;
    - B) Prior to a major change of life circumstance (e.g., move to a new home, child birth);
    - C) Every 90 days during the life of the case;
    - D) When a family with an open service case is the subject of a subsequent child abuse or neglect investigation; and
    - E) Within five calendar days of a supervisory approved case closure in conjunction with the final CERAP.

- 2) Subsequent CA/N Investigations of Families with Open Cases
  - A) The Child Protection Specialist or the Child Protection Supervisor shall notify the Intact Family or Permanency Worker assigned to the family or the worker's supervisor of the subsequent oral report (SOR) of alleged abuse or neglect within 48 hours after assignment of the investigation. The notification shall include the reminder that the worker must complete a new checklist or re-certify the family's previous checklist within 14 days of the SOR.
  - B) The Intact Family or Permanency Worker must also complete a case note that documents the worker's current assessment of home safety issues and forward the documentation to the Child Protection Specialist. The Child Protection Specialist cannot complete the investigation without receipt of documentation that a checklist has been completed.
- 3) Home Safety Checklist Waiver
  - A) A Home Safety Checklist Waiver may be granted by the Intact Family or Permanency Supervisor if the allegation or allegations of the SOR do not involve inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food or inadequate clothing.
  - B) The Intact Family supervisor must complete a supervisory note documenting the waiver and rationale for the approval.
- 4) Home Safety Checklist Recertification
  - A) A Home Safety Checklist Recertification may be granted by the Intact Family or Permanency Supervisor if
    - i) The checklist was completed within six months of the SOR;
    - ii) The SOR does not involve an allegation of inadequate supervision, inadequate food, inadequate clothing, inadequate shelter environmental neglect or substance misuse; and
    - iii) The Intact Family or Permanency Worker has completed a walkthrough of the family's home to confirm that the conditions of the home have not changed.
  - B) The supervisor must complete a supervisory note documenting the approval and rationale for the approval.

5) When there is an allegation of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food or inadequate clothing the checklist should be completed at the time the Safety Determination Form, CFS 1441, is completed.

#### b) Placement Cases

- 1) Permanency Workers shall complete the Home Safety Checklist:
  - A) When a child is placed with an unlicensed relative. The assessment must be completed on the home of the relative;
  - B) When there is a child abuse or neglect investigation of an unlicensed home in which a child is placed;
  - C) Prior to a scheduled, unsupervised visit in the home of the parents;
  - D) When there is a child abuse or neglect investigation involving an alleged incident that occurs during an unsupervised home visit;
  - E) Prior to placement of a pregnant or parenting teen in an independent living arrangement;
  - F) When a parenting teen is identified as the alleged perpetrator of abuse or neglect involving his or her child or any child residing in the household:
  - G) Prior to implementation of child care arrangements involving a child for whom the Department is legally responsible when a parent or caregiver plans to use an unlicensed day care home. The assessment must be completed on the day care home;
  - H) Prior to a major change of life circumstance (e.g., move to a new home, child birth):
  - I) Within 24 hours prior to returning a child home; and
  - J) Within 5 working days after a child is returned home and every month thereafter until the family case is closed.

- 2) Home Safety Checklist Waiver
  - A) A Home Safety Checklist Waiver may be granted by the Permanency Supervisor if
    - i) There is an SOR;
    - ii) A checklist was completed for the family within 30 days; and
    - iii) The allegation or allegations of the SOR do not involve inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, or inadequate clothing.
  - B) The Permanency Supervisor must complete a supervisory note documenting the waiver and rationale for the approval.
- 3) Home Safety Checklist Recertification

A Home Safety Checklist Recertification may be granted by the Permanency Supervisor if the checklist was completed within six months of the SOR; the SOR does not involve an allegation or allegations of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, inadequate clothing; and the Permanency Worker has completed a walkthrough of the family's home to confirm that the conditions of the home have not changed. The Permanency Supervisor must complete a supervisory note documenting the approval for recertification and the rationale for approval.

- 4) When there is an allegation of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food or inadequate clothing the checklist should be completed at the time the Safety Determination Form, CFS 1441, is completed.
- c) Investigations
  - 1) Child Protection Specialists shall complete the Home Safety Checklist:
    - A) At the time of an initial investigation when there is an allegation of inadequate shelter, inadequate supervision, substance misuse, inadequate food or environmental neglect;
    - B) Prior to the completion of any formal child abuse or neglect investigation unless there is an open service case;

- C) When the parent places his or her child with a relative or nonrelated family as part of a safety plan. The Home Safety Checklist is completed in the child's placement environment;
- D) Prior to the Department's placement of a child or youth with an unlicensed relative. The Home Safety Checklist is completed in the child's placement environment; and
- E) At the conclusion of the formal investigation in conjunction with the final CERAP, unless temporary custody is granted or there is an open intact case or assigned caseworker.
- 2) Child Protection Specialists are *not required* to complete the Home Safety Checklist:
  - A) When the investigation involves child abuse and neglect in schools.
  - B) When the investigation involves child abuse and neglect in childcare facilities.
  - C) When the report involves multiple perpetrators and children (e.g., mass molestation investigations).
  - D) When the alleged perpetrator does not reside in the home of the involved children. However, a Home Safety Checklist must be completed on the alleged perpetrator's home if minor children reside in the home.
  - E) In situations when protective custody is taken as the result of a court order, reasons of child safety or any situation where a worker feels threatened.
  - F) When the investigation involves a family with an open service case with the Department. In these situations, the Child Protection Specialist or the Child Protection Supervisor shall notify the family's assigned Intact Family or Permanency Worker or the workers supervisor of the subsequent oral report (SOR) within 48 hours after assignment of the investigation. The notification shall include the reminder that the Intact Family or Permanency Worker must complete a new checklist or re-certify the family's previous checklist within 14 days of the SOR date and provide the documentation to the Child Protection Specialist.

3) Home Safety Checklist Waiver

A Home Safety Checklist Waiver may be granted by the Child Protection Supervisor if there is an SOR and the family does not have an open service case with the Department; a checklist was completed for the family within 30 days; and the allegation or allegations of the SOR do not involve inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, or inadequate clothing. The Child Protection Supervisor must complete a supervisory note documenting the waiver and rationale for the approval.

4) Home Safety Checklist Recertification

A Home Safety Checklist Recertification may be granted by the Child Protection Supervisor if the checklist was completed within six months of the SOR; the SOR does not involve an allegation or allegations of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, inadequate clothing; and the Child Protection Specialist has completed a walkthrough of the family's home to confirm that the conditions of the home have not changed. The Child Protection Supervisor must complete a supervisory note documenting the approval for recertification and the rationale for approval.

5) When there is an allegation of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food or inadequate clothing the checklist should be completed at the time the Safety Determination Form, CFS 1441, is completed.

#### **Section 25.4 How to Complete the Checklist**

- a) Intact Family and Permanency Workers
  - The Home Safety Checklist addresses fifteen categories of home safety. Each category is supported by safety standards, literature, and straightforward factual information that should be shared with the parent/caregiver. Use the factual information and literature associated with each category to establish an instructive dialogue to educate the family on safety issues.
  - 2) There are three activities required for each standard:
    - A) Discuss the safety standard with the parent/caregiver;
    - B) Indicate the presence or absence of the safety standard; and

C) Provide the parent/caregiver with seven pieces of literature: PARENTS' GUIDE to Fire Safety for Babies and Toddlers, A Helpful Guide for Parents and Caregivers, Back to Sleep, Get water wise...SUPERVISE, Never Shake a Baby!, Practice Methadone Safety (only if applicable) and Violence Prevention. This literature can be ordered from Central Stores.

#### 3) Example

- A) Once you have discussed the importance of having a working smoke detector and observed that the family has a smoke detector located near their sleeping areas and the smoke detector works, circle "Yes" after the standard: *The home has a working smoke detector located near the family's sleeping areas*. If the family does not have a working smoke detector nor has a smoke detector that does not work, circle "No". A "No" response requires a brief explanation in the Comments section.
- B) When the parent/caregiver is provided fire safety literature, circle "Yes" to indicate that the required fire prevention literature was provided. The Sleeping standard also requires a comment when a worker does not observe a crib or bassinette for infants age 1 or younger. Some standards are age specific. For example, the standards that discuss burns may not be applicable to older children. When the standard does not apply circle "N/A".

#### 4) Methadone

- A) If someone in the home is involved in a methadone treatment program, the worker must ensure that the methadone is kept in a safe place-preferably in a locked box or a cabinet, **out of the reach of children and clearly marked to prevent anyone from taking it accidentally.** Workers must remind clients that methadone is a very strong drug. A small amount can kill a child or an adult who does not have a tolerance to it. If anyone should accidentally drink the methadone, 911 must be called immediately.
- B) Workers shall verify the safe and proper storage of methadone, and other substances such as prescription and over the counter drugs, vitamins and dietary supplements, which may be fatal if taken in excess, during every regularly scheduled visit. The worker shall give a copy of the CFS 1050-66-3, the Practice Methadone Safety brochure (or 1050-66-3/S) to the client and document verification of the proper storage of methadone and the above substances in a case note.

- When a standard requires the observation of a specific item or items (e.g., smoke detectors, window coverings, small electrical appliances), you are required to complete the task if the item is readily observable. Do not open cabinets or drawers, move furniture or handle dangerous items. On the last page of the checklist there is a section to make additional comments or identify other hazards.
- 6) The home safety assessment is a service provided to the children and families served by the Department. In order for the Home Safety Checklist to be effective, the responsibility for its completion must be shared with the parent/caregiver. Use the information provided at the top of page one of the instructions to explain the purpose of the assessment, provide the parent/caregiver a copy of the CFS 2026 or 2026-S (Spanish adaptation), Home Safety Checklist for Parents and Caregivers, to use during the assessment, and to take notes on and retain for future reference. The formats of the CFS 2027 and CFS2026/ 2026-S differ; use the prompts provided on the CFS 2027 to locate the corresponding CFS 2026/2026-S sections. Sign, date and have the parent/caregiver sign the completed assessment. If the parent/caregiver declines the opportunity to complete the checklist, check the declined box and request that the parent/caregiver verify his or her decision by signing the form. If the parent/caregiver refuses to sign the form, document the negative response on the parent's signature line. Place the completed assessment in the case file.
- 7) The CFS 2027 does not supersede any of the requirements for the completion of the CFS 1441 or CFS 454, HMR Placement Safety Checklist.
- 8) Suggest that the family visit the following resources if they have Internet access:

American College of Emergency Physicians, <a href="www.acep.org">www.acep.org</a>
American Association of Poison Control Centers, <a href="http://www.aapcc.org">http://www.aapcc.org</a>
American Red Cross Health and Safety Services, <a href="http://www.redcross.org">http://www.redcross.org</a>
National Safe Kids Campaign, <a href="http://www.safekids.org">http://www.redcross.org</a>
American Human Society, <a href="www.americanhumanesociety.org">www.americanhumanesociety.org</a>
American Veterinary Medical Association, <a href="www.avma.org">www.avma.org</a>
Centers for Disease Control and Prevention, <a href="www.avma.org">www.avma.org</a>
Centers for Injury Prevention and Control,
<a href="www.cdc.gov/injury/index">www.cdc.gov/injury/index</a>
United States Consumer Product Safety Commission, <a href="www/cpsc.gov">www//cpsc.gov</a>

## b) Child Protection Specialists

- The Home Safety Checklist addresses seven categories of home safety. Each category is supported by safety standards, literature, and straightforward factual information that should be shared with the parent/caregiver. Use the factual information and literature associated with each category to establish an instructive dialogue to educate the family on safety issues.
- 2) There are three activities required for each standard:
  - A) Discuss the safety standard with the parent/caregiver;
  - B) Indicate the presence or absence of the safety standard; and
  - C) Provide the parent/caregiver with seven pieces of literature: PARENTS' GUIDE to Fire Safety for Babies and Toddlers, A Helpful Guide for Parents and Caregivers, Back to Sleep, Get water wise...SUPERVISE, Never Shake a Baby!, Practice Methadone Safety (only if applicable) and Violence Prevention. This literature can be ordered from Central Stores.

#### 3) Example

- A) Once you have discussed the importance of having a working smoke detector and observed that the family has a smoke detector located near their sleeping areas and the smoke detector works, circle "Yes" after the standard: *The home has a working smoke detector located near the family's sleeping areas*. If the family does not have a working smoke detector nor has a smoke detector that does not work, circle "No". A "No" response requires a brief explanation in the Comments section.
- B) When the parent/caregiver is provided the fire safety literature, circle "Yes" to indicate that the required fire prevention literature was provided. The Sleeping standard also requires a comment when a worker does not observe a crib or bassinette for infants age 1 or younger. Some standards are age specific. For example, the standards that discuss burns may not be applicable to older children. When the standard does not apply circle "N/A".

#### 4) Methadone

- A) If someone in the home is involved in a methadone treatment program, the worker must ensure that the methadone is kept in a safe place-preferably in a locked box or a cabinet, **out of the reach of children and clearly marked to prevent anyone from taking it accidentally.** Workers must remind clients that methadone is a very strong drug. A small amount can kill a child or an adult who does not have a tolerance to it. If anyone should accidentally drink the methadone, 911 must be called immediately.
- B) Workers shall verify the safe and proper storage of methadone, and other substances such as prescription and over the counter drugs, vitamins and dietary supplements, which may be fatal if taken in excess, during every regularly scheduled visit. The worker shall give a copy of the CFS 1050-66-3, the Practice Methadone Safety brochure (or 1050-66-3/S) to the client and document verification of the proper storage of methadone and the above substances in a case note.
- When a standard requires the observation of a specific item or items (e.g., smoke detectors, small electrical appliances), you are required to complete the task if the item is readily observable. Do not open cabinets or drawers, move furniture or handle dangerous items. On the last page of the checklist there is a section to make additional comments or identify other hazards.
- The home safety assessment is a service provided to the children and 6) families served by the Department. In order for the Home Safety Checklist to be effective, the responsibility for its completion must be shared with the parent/caregiver. Use the information provided at the top of page one of the instructions to explain the purpose of the assessment, provide the parent/caregiver a copy of the CFS 2026 or 2026-S (Spanish adaptation), Home Safety Checklist for Parents and Caregivers, to use during the assessment, and to take notes on and retain for future reference. The formats of the CFS 2027 and CFS2026/ 2026-S differ; use the prompts provided on the CFS 2027 to locate the corresponding CFS 2026/2026-S sections. Sign, date and have the parent/caregiver sign the completed assessment. If the parent/caregiver declines the opportunity to complete the checklist, check the declined box and request that the parent/caregiver verify his or her decision by signing the form. If the parent/caregiver refuses to sign the form, document the negative response on the parent's signature line. Place the completed assessment in the investigative local index file.

- 7) The CFS 2027 does not supersede any of the requirements for the completion of the CFS 1441 or CFS 454, HMR Placement Safety Checklist.
- 8) Suggest that the family visit the following resources if they have Internet access:

American College of Emergency Physicians, <a href="www.acep.org">www.acep.org</a>
American Association of Poison Control Centers, <a href="http://www.aapcc.org">http://www.aapcc.org</a>
American Red Cross Health and Safety Services, <a href="http://www.redcross.org">http://www.redcross.org</a>
National Safe Kids Campaign, <a href="http://www.safekids.org">http://www.redcross.org</a>
American Human Society, <a href="www.americanhumanesociety.org">www.americanhumanesociety.org</a>
American Veterinary Medical Association, <a href="www.avma.org">www.avma.org</a>
Centers for Disease Control and Prevention, <a href="www.cdc.gov">www.cdc.gov</a>
National Center for Injury Prevention and Control, <a href="www.cdc.gov/injury/index">www.cdc.gov/injury/index</a>

United States Consumer Product Safety Commission, www//cpsc.gov

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