

Section I: Complete immediately upon placement

DPP-1277 (sample)

Safety Check and Review

Case Name: Mother's Childs

TWIST # 123456

Caregiver Address: 123 Lookout Lane, Outlook, KY 12345

Caregiver Phone: (555) 987-1234

Caregiver Email: Bettychilds@gmail.com

Child(ren):

Name	Gender	Date of Birth	SSN
Boy Childs	M	01/01/2013	777-77-7777
Girl Childs	F	12/12/2012	666-66-6666

Relative and all household members:

Name	Gender	Date of Birth	SSN	Relationship to child(ren)
*Primary: Betty Childs	F	06/06/1964	555-55-5555	Paternal Grandmother
Bob Childs	M	09/09/1964	444-44-4444	Paternal Grandfather
Barry Childs	M	09/19/1989	333-33-3333	Paternal Uncle

Home Environment:	Comments
Describe any environmental hazards inside or outside the home.	There are no environmental hazards noted inside the home. There is an above ground pool in the backyard. It is secured within a fence. However, the gates are not locked. Locks will be installed within 3 days and SSC will check to ensure this task has been completed. In the meantime, the children will not be in the backyard.
Describe the children's sleeping arrangements.	The family lives in a 3 bedroom home. The grandparents share 1 bedroom, and their adult son occupies the 2 nd bedroom. The 3 rd bedroom is an office which will be converted into a room for the children. This home also has an additional TV room in the rear of the house that could eventually be utilized as a 4 th bedroom once the children get older. For now, the children will sleep on separate portable twin mattress until the room is completely set up. The relatives plan to purchase bunk beds that can be separated into two twin beds for the children.
Describe the home's utilities, including heating and cooling.	The home has central heat and air. All utilities are on and working properly.
Document locations of all smoke alarms and carbon monoxide detectors (if gas heating or appliances) inside the home and if they were observed to be in working order.	There is only 1 smoke alarm in the home, a 2 nd one will be placed in the hallway outside of the children's bedroom.

Home Environment:	Comments
Discuss the immediate needs of the child. Is there any reason that the caregiver cannot meet the immediate needs of the child? What resources are needed to secure this placement?	Both children are physically healthy with no special needs. Betty and Bob love the children and are willing to take whatever steps are necessary to ensure they provide for their needs.
Describe how the family secures medications (including the child's and all household member's), alcoholic beverages, guns/weapons/ammunition, and poisonous or cleaning materials. (Guns and ammunition must be stored separately and in a locked location).	Medications are locked in the grandparents' bedroom, there is no alcohol in the home, guns are locked in a gun cabinet in the grandparents' bedroom, ammunition is locked in a safe in the grandparents' bedroom, and all poisonous/cleaning materials are locked in a cabinet in the kitchen.
Describe any dangerous animals or pets in the home.	The family does not have any pets.
Can the family provide for the basic needs of the child (food, clothing, school supplies, basic furniture, etc.)? Discuss programs available (KTAP, SNAP (food stamps), KCHIP, and RPSB). Discuss service array and placement options with relative/fictive kin.	Both grandparents are employed full time with a combined yearly net income of \$90,000. Their adult son receives disability in the amount of \$530 monthly. They will apply for KCHIP, KTAP and Relative Placement Support Benefit to purchase a baby bed, toddler bed, and two dressers.

Complete TWIST, CA/N, Benefind, Sex Offender Registry, and AOC records checks. Discuss all reports received (substantiated, unsubstantiated, resource links, patterns of high risk behaviors, etc. (see question #10)) .

SSW will ensure the relative/fictive kin caregiver has signed the DPP-159 at the time of placement.

SSW will attach AOC and DPP-159 results and discuss further in Section II.

Discuss the short-term and long-term implications of accepting placement of the child(ren).

Date Section I Completed: 00/00/0000

Section II: Complete within 30 working days and prior to submission.

1. Interview all household members living in the home. Specify who will provide direct care for the child. Describe the relationship between these individuals and the child.

Betty will be the primary caregiver for the children. She works Monday-Friday 8:00am-4:30pm. Bob works out of town; he leaves Monday morning and does not return until Friday night. Betty's mother, Wanda Urp (68), comes to the home daily to supervise Barry when he is not attending adult daycare. Barry will start attending adult daycare Monday – Friday, and Wanda will care for the children after school. The children are very bonded to Betty. She has kept them nearly every weekend. The six year old displayed a strong attachment to Betty. Betty states she is willing to do whatever it takes to ensure her grandchildren's needs are met and keep them with family members. Bob is equally attached to the children. He is the typical grandfather doting on the children. Wanda is attached to the children as well. She visited the home any time the children have been there in the past. Barry does not display a lot of emotion towards the children as is typical with his diagnosis. Barry has always had appropriate interactions with the children.

2. Discuss the child's needs (education, clothing, food, medical, emotional, physical). Does the child have any medical or mental health diagnoses? Will accommodations be needed? Describe the caregiver's ability to meet the needs, including any possible special needs.

The children will attend school Monday through Friday and will ride the school bus home from school. Wanda is available to sit with the children daily until Betty gets off work. Betty had clothing for the children that she used on weekends before they were placed with her. She has since purchased what else they needed. Both children receive KTAP and Medicaid. They continue to receive services from the local health department and their pediatrician. Both children are physically healthy with no special needs.

3. What is the caregiver's plan for appropriate child care after school, while the caregiver works, etc.?

As stated above in #1, Wanda will come to the home and keep the children after school while Betty works. Betty states she will not need child care until summer. She reports that during the summer, she would like to enroll the children in a part time day camp. SSW will make a DCC-85 Child Care Assistance Referral for the summer program.

4. Describe the caregiver's:

Comments

Access to transportation in order to attend medical and mental health appointments, parent and sibling visitation, school, etc.	Both grandparents have vehicles with full insurance coverage. Both grandparents understand and agree to transport the children to and from necessary appointments, school and visitations. Wanda does not drive with the children, but she can call Betty and/or 911 if there is an emergency. There is also a neighbor across the street that is at home during the day that Wanda can call if she needs assistance.
Access to communication devices (phone, email, etc.).	Both grandparents have cell phones as well as a land line phone. Betty Childs has access to email on her cell phone.
Access to emergency services.	Grandparents reside within city limits and are approximately 15 minutes from the nearest local hospital. The home has access to two cell phones and one land line phone to contact 911 in case of an emergency. Grandparents have also expressed a formal fire plan with the children in case of fire.
Knowledge of the process to enroll the child in school, transfer benefits provided through the Division of Family Support (DFS), etc.	Both grandparent appear knowledgeable of how to access and apply for Division of Family Support benefits via office appointment and the hotline.

5. Describe the caregiver's understanding of the policy requirements and expectations for the following:

Providing full-time care for the child.	Betty and Bob report they love the children and are willing to take whatever steps are necessary to ensure they provide for their needs. They are willing to care for the children on a long-term basis if needed.
Ensuring school attendance (if age appropriate).	The grandparents are aware of school attendance requirements and willing to ensure the children attend school daily. They report knowledge that the children used to miss school, and they do not want that to continue.
Participating in child's case plan.	SSC discussed DCBS policy and procedures with the relatives. They understand they must participate in the child's case plan and will have assigned tasks to ensure the children's needs are met.
Attending court.	The relatives will attend FTMs and any court hearings deemed necessary. They are willing to assume permanent custody of the children if it is necessary. They both feel it would be best for the children to be raised by their mother and father, but if that is not possible, they will raise them.
Protecting the child from abuse and neglect.	The relatives state they are willing to protect the children from any unsupervised contact with the birth parents and will ensure that the children are not exposed to abusive or neglectful situations. SSC discussed different types of abuse and neglect situations, and relatives reported understanding.
Monthly home visits with SSW.	Betty expresses concerns regarding monthly home visits and her work schedule. SSC discussed that home visits can be scheduled around her work schedule to which Betty was appreciative.
Partnership with parents and their right to visitation.	The relatives state they will abide by any visitation schedule that is arranged. The relatives also expressed concerns that the parents will not attend the visitations consistently and worried that this will be confusing for

	the children. SSC explained policy and procedure regarding parental visitation and requested the relative to contact the SSC with any problems that arise from the children in regards to the visitation.
Maintaining other family connections.	The relatives have a great relationship with extended family members. They have a lot of family that reside in the same area, and they visit frequently.
The requirements for DFS eligibility regarding parents living in the home, etc.	The relatives understand that the parents are not allowed to reside in their home, nor are they allowed to spend the night in the home due to all visitation being supervised between the children and parents. Relatives report that the parents would not be allowed to reside in the home regardless due to their history of theft and substance misuse.

6. Discuss the current relationship and dynamics between the relative/fictive kin caregiver and the birth parents. Discuss the caregiver's plan for establishing boundaries, and discuss any concerns that may be present that would be a barrier to the partnership.

Betty and Bob report that they love and care for their son and daughter-in-law, but they have trust issues due to the long history of substance misuse. The relatives state that they have always "walked on eggshells" around the parents so that they could continue to assist with helping them to care for the children. They reported that the parents would become angry with them if a CPS report was made, and the parents would try to keep the children away from the grandparents. The relatives reported to the SSC that they have printed a calendar with times that the parents are allowed to come to the home to visit with the children and times that the parents can call the children. SSC discussed concerns that could arise from visitation occurring in the relative's home. Betty reported that since she will be supervising the visitation, she would contact the police if the parents ever acted inappropriately, but that the parents have never done that in the past with her. Betty also expressed that since the case has opened, the parents have expressed gratitude for the relatives caring for the children.

7. Understanding of trauma:

Assess caregiver's understanding of parenting children who have experienced trauma.	The relatives state they have not witnessed any major behaviors with the children; however, they are aware that the children have experienced trauma from witnessing their parents physically fight and from finding the parents under the influence of drugs. Relatives report that they want to seek age appropriate therapy for the children because they worry that the children will become confused once they move in with them full time and have supervised visitation with their parents. They report understanding that the children have suffered but they still want to see their parents and have a bond with their parents.
How will they address problematic behaviors?	The relatives state they utilized corporal punishment on the children's father when appropriate but did not utilize corporal punishment on their autistic son. They state they will never spank their grandchildren and are afraid they will spoil them rotten and never discipline them at all. Betty is aware of age appropriate discipline techniques and states she knows if she raises the children, she will have to assume the role of disciplinarian. She reports understanding that there could be problematic behaviors that occur, and she plans to utilize redirection, timeout, and other age appropriate discipline when necessary.
Discuss age appropriate behavior expectations and modifications.	Betty reports utilizing responsibility charts to establish a routine with the children, and that will include cleaning up their toys, bedtime routine, morning routine, etc.

Provide training resources needed to meet specific needs of the child.

No current trainings are necessary for the relatives at this time. If behavior modification becomes an issue, SSC will recommend age appropriate therapy or appropriate trainings for the relatives.

8. Describe caregiver's and household member's physical, psychological, emotional, or intellectual limitations, including diagnosis. Obtain doctor's statement of caregiver's ability if there are concerns.

Betty has medicine-controlled hypertension but no other health problems. She remains active in her family, church, and various community activities. Bob has no health problems. Barry is diagnosed as moderately autistic. He requires 24 hour supervision. He displays no violent tendencies and is not a threat to the children's safety. Worker noted no concerns regarding any of the adults' ability to provide for the safety and protection of the children. Betty will be the primary caregiver to her adult autistic son and her two young grandchildren. She states she will utilize her support system of extended family, friends, and neighbors to assist her in caring for them. She states she has several offers for babysitting, housecleaning, cooking, and running errands. SSC requested Betty to contact the SSC with names of the potential babysitters in order for them to be approved.

a. What services are they receiving and how does this affect their care of the child?

Currently, the family receives no outside services, and the noted physical health issues should not have any limitations to affect the care of the children.

b. List all prescriptions of all household members and obtain prescribing doctor's information.

Betty is prescribed Lotensin (Benazepril) 20mg twice daily. Her prescribing doctor is Dr. Jim Bowman and can be reached at 555-123-4567.

9. Discuss the caregiver's experiences as a child related to child abuse and neglect, and discuss the impact of trauma and their ability to care for the child.

Betty and Bob deny a history of abuse or neglect from their childhood, but both report growing up "in a different time". Bob specifically stated that attitude was not tolerated from his father and that he was "whipped" into shape. He reported that he never felt he was abused or purposely hurt. Bob also stated that he does not utilize physical discipline with his grandchildren and does not talk to them in a negative manner. Betty agreed with Bob's statements that they do not feel like they have experienced trauma and do not feel like their childhoods will negatively influence their ability to parent their grandchildren.

10. Discuss the history found in TWIST, including all reports (substantiated and unsubstantiated reports, resource links), AOC checks, and DPP-159 results.

There was one referral on the family 8 years ago when Barry was 15 years old. He started escaping from the house and was found wandering several times on the highway. This is typical behavior of an autistic child. They installed alarms on all the doors and windows. This referral of neglect/lack of supervision was found to be unsubstantiated, and the case was closed. The relatives have a great understanding of how substance misuse has already affected their grandchildren and them. They have tried to keep the children as much as the mother would allow them to, trying to protect them as much as they could. Their son, the children's father, has been in and out of jail since he was 18 for drug related charges. He currently has no contact with them because they will not support his drug habit.

a. Discuss all high risk behavior patterns and identify protective factors.

Betty and Bob do not display concerns regarding violence, substance misuse, criminal history, mental health or debilitating physical health. Betty and Bob appear very protective of their grandchildren, report that they want to provide a healthy and stable living environment for their grandchildren, and ensure that the children are no longer exposed to drugs and violence.

11. Financial Information:

NET INCOME (AFTER TAXES)

MONTHLY

Primary Caregiver: Betty Childs	\$2,915.00
Other Household Members Who Contribute to Household	\$4,585.00

Child Support	\$0.00
SSI, SNAP, KTAP, HUD	\$530.00 for Barry's SSI and \$225.00 for KTAP
TOTAL MONTHLY DISPOSABLE INCOME	\$8,255.00

EXPENSES

MONTHLY

Mortgage/Rent	\$1,200.00
Food (home, restaurants)	\$800.00 (200.00 for eating out as a family on the weekends)
Clothing	\$150.00 saved monthly and purchased as needed
Household Bills (heat, electricity, telephone, cable, etc.)	\$640.00 (Includes gas heat (65), central air(80), electric (180), home phone (30), cell phones (200) and cable(85))
Transportation (car, bus, taxi, insurance, gas, etc.)	\$195.00 for car insurance on both vehicles and \$200 for gas for the home vehicles (Bob gets a company gas card)
Membership Fees (sports, gym, etc.)	\$85 for the YMCA membership
Loan Payments (bank, personal, credit cards, etc.)	\$520 for Bobs truck payment \$200 for personal loan payment
Other Expenses (charity, child support, garnishment, etc.)	As needed
Child Care	\$560 for Barry's adult daycare each month
TOTAL EXPENSES	\$4,550.00

Total Monthly Net	\$8,255.00
(-) Total Expenses	\$4,550.00
(=) Leftover/Disposable Income	\$3,705.00

Financial Summary:

(Describe the caregiver's financial ability to meet the child's immediate and ongoing need(s).

Both grandparents are employed full time with a combined yearly net income of \$90,000. Betty currently works for the county as a receptionist in the County Attorney's office and makes \$2,915.00 net income. Bob works as an electrician and makes \$4,585.00 net income. Their adult son receives disability for \$530 monthly, and that money is utilized to pay for adult daycare for him. They are currently receiving KTAP for \$225.00 and SSW will complete the Relative Placement Support Benefit request form to purchase two twin beds and two dressers. The relatives report that they have always been able to provide extra support for their grandchildren and that they are not concerned about their ability to provide for their needs.

Section III: Review Summary

Overall review summary including justification of final recommendation:

There appear to be no safety issues present in this safety check and review that would interfere with the caregivers' ability to meet the children's needs. The home is appropriate, and the relatives are financially capable of providing for their needs. They are agreeable with DCBS making home visits, case planning and supervised visitation with the parents. They have a plan in place that is currently working surrounding the children's day to day activities. Wanda comes to the home daily to care for the children after school. Barry attends adult daycare Monday – Friday. However, that still leaves Betty caring for the two children and her adult autistic son four nights a week alone. If this becomes an issue in the future, it will be addressed by the ongoing worker. Another potential problem area is the challenge to be a grandparent in the parenting role. SSC has referred the relatives to a relative support group to assist them in gaining some insight into this reverse role. SSC recommends for the ongoing worker to continue to assess and monitor the stressors associated with parenting grandchildren and an adult autistic child. SSC believes that with the appropriate case planning and support system, this will be a long term placement. The relatives possess genuine love and concern for their grandchildren and have their best interests at heart.

Attach DPP-1278 Relative Placement Support Benefit Acknowledgement Form, if applicable.

Jane Doe, SSC Jane Doe, SSC 00/00/00
Worker Signature & Printed Name Date

John Doe, FSOS John Doe, FSOS 00/00/00
FSOS Signature & Printed Name Date

ICPC APPROVAL ONLY:

- Placement Approved
- Placement Not Approved

Worker Signature & Printed Name Date

FSOS Signature & Printed Name Date