



May 17, 2023

Family, Children and Adult Services Manual Transmittal Letter No. 522

To: Family, Children and Adult Services Manual Holders

From: Matt Damschroder, Director

Subject: Amendment to Forms JFS 01409 and JFS 01409i

This letter transmits amendments to forms JFS 01409 and JFS 01409i related to the safety plan for children and the instructions for completing the safety plan. These forms have been revised as a result of recommendations received from county partners. Both forms will become effective 6/1/2023.

The following is a brief explanation of the changes:

JFS 01409 entitled Comprehensive Assessment Planning Model Safety Plan for Children has been updated to align with Ohio SACWIS language and formatting. Sections have been added to include safety plan type and the ability to capture name, date, and time of verbal authorization provided by a custodial parent, legal guardian, legal custodian, or responsible person not physically present to sign the JFS 01409.

JFS 01409i entitled Comprehensive Assessment Planning Model Safety Plan for Children Instructions has been updated to align with the changes made to the JFS 01409 and to further clarify requirements of a safety plan set forth in OAC Rule 5101:2-37-02 PCSA requirements for completing the safety plan.

INSTRUCTIONS:

The following chart indicates the materials that should be removed from the Family, Children and Adult Services Manual (FCASM) and the materials that should be added.

LOCATION	REMOVE AND FILE AS OBSOLETE	INSERT/REPLACEMENT
FORMS	JFS 01409 JFS 01409i	JFS 01409 JFS 01409i
TRANSMITTALS		FCASMTL No. 522

Ohio Department of Job and Family Services
COMPREHENSIVE ASSESSMENT PLANNING MODEL
SAFETY PLAN FOR CHILDREN

Section 1: Identifying Information

Case Name	Case Number	Date
Caseworker	Supervisor	Agency Phone Number

Names of the child(ren) included in this safety plan

Names of the parent/guardian/custodian(s)

Name	Name	Name	Name
Phone	Phone	Phone	Phone

IMPORTANT INFORMATION ABOUT SAFETY PLANS

This safety plan is a specific agreement to help ensure your child(ren)'s safety. Your decision to sign this safety plan is voluntary. The custody of your child(ren) does not change under this safety plan. Children Services is here to help you protect your child(ren) when you may not be able to do it on your own.

Signing this safety plan shows your agreement to follow the safety plan. You will be notified by the caseworker when the safety plan ends. The safety plan may also be changed if new or different activities are necessary.

You must contact your caseworker immediately if you decide that you will not or cannot continue following the plan. If you cannot or will not continue following the plan, Children Services may have to take other action(s) to keep your child(ren) safe.

You may contact _____ (*Caseworker Name*) at _____ (*Phone Number*) if you have any questions about this safety plan.

Case Name	Case Number
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Section 2: Safety Plan Activities

Identify the safety threat(s) and serious harm from which the child(ren) needs protection.

Action step(s)

Describe specific activity(ies) necessary to protect the child(ren):	Responsible person(s) for activity:
	Name
	Phone
	Name
	Phone
	Name
	Phone

Explain how each activity will control the occurrence of serious harm.

Monitoring Plan

How will the activity(ies) be monitored?	How often will the activity(ies) be monitored?	Who will monitor the activity(ies)?
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Safety Plan Type

<input type="checkbox"/> In-home safety plan	<input type="checkbox"/> Out-of-home safety plan
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Section 3: Signatures

Check here if any parent/guardian/custodian(s) or responsible person provided verbal approval of the safety plan due to being unavailable to sign.

Parent/Guardian/Custodian or Responsible Person Name	Date/Time of verbal approval
Parent/Guardian/Custodian or Responsible Person Name	Date/Time of verbal approval
Parent/Guardian/Custodian or Responsible Person Name	Date/Time of verbal approval

The safety plan has been explained to me and any questions I had about this safety plan were answered by Children Services. I understand, agree to follow, and have received a copy of the safety plan.

Parent/Guardian/Custodian's Signature	Date	Other's Signature	Date
Parent/Guardian/Custodian's Signature	Date	Caseworker's Signature	Date
Other's Signature	Date	Supervisor's Signature	Date

Date Safety Plan Discontinued _____

Date of Notification to Parent/Guardian/Custodian(s) _____

Ohio Department of Job and Family Services
COMPREHENSIVE ASSESSMENT PLANNING MODEL
SAFETY PLAN FOR CHILDREN INSTRUCTIONS

GENERAL INFORMATION

The philosophy of the CAPM model is that the assessment of safety drives the development of the safety plan. An assessment of safety is conducted in response to a child abuse and/or neglect report, dependency report, or any other instances in which safety needs assessed throughout the life of a case. The safety assessment includes the identification of safety threats, child vulnerabilities, and protective capacities which specifies the need for a safety response.

A child is determined safe when there are no immediate threats of serious harm present or the protective capacities in the family can control any identified threats. The safety plan is a specific and concrete control strategy implemented immediately when a family's protective capacities are not sufficient to manage the immediate threats of serious harm to a child. The caseworker must determine if there are any interventions (e.g., supplementing protective capacities through another individual, restricting access to the child(ren), crisis intervention services, intensive monitoring, etc.) that could be immediately implemented to control or manage any identified threats of serious harm.

An in-home safety plan and out-of-home safety plan is a voluntary agreement between the PCSA and the parent, guardian, or custodian. The custody of the child(ren) does not change and remains with the parent, guardian, or custodian. When identifying the type of safety plan to implement, caseworkers are to consider the least restrictive safety plan. The least restrictive safety plan is an in-home safety plan and provides interventions necessary to immediately protect the child(ren) while the child(ren) remains in the home. An out-of-home safety plan provides interventions necessary to immediately protect the child(ren) while the child(ren) is voluntarily placed out of the home (e.g., with relative/kin).

The most restrictive safety plan is a legally authorized out-of-home placement, in which the child(ren) is legally removed from the home and custody is transferred to the PCSA or relative/kin. This option is utilized when either the caretaker will not, or cannot, agree to an in-home or out-of-home safety plan or there is a lack of services to the degree that legal removal from the home is the only safety intervention which will effectively control the identified threats of serious harm to ensure child safety. **Note:** Completion of the JFS 01409 is not required for a child whose safety response is legally authorized out-of-home placement.

Assessing safety is an ongoing process and is conducted throughout the life of a case to determine whether there are current and significant safety threats to a child. When an ongoing assessment of safety (e.g., during home visits or other family contacts) determines an active safety threat is present, a safety plan must be implemented.

SAFETY PLAN GUIDELINES

The safety plan identifies specific activities to secure the safety of the child(ren), the person(s) responsible for each activity, how the activities will control the identified safety threats, and how the plan will be monitored. In order to determine the degree of intervention necessary to protect the child, consider the safety threats which were identified in the assessment of safety, the child's vulnerability, and the protective capacities of the family.

Development

The parents, guardians, or custodians are an integral part of the safety plan and should have a prominent role in its development and implementation. The agency and the parents, guardians, or custodians should mutually agree on the action steps and the responsible parties. The safety plan should build upon the protective capacities of the family and include community and extended family supports that are available or are already in place.

Monitoring

The PCSA is responsible for monitoring safety plans to ensure that the action steps are controlling the identified safety threat(s). If an in-home safety plan is active, the caseworker must make weekly home visits with the family to monitor the safety plan. An out-of-home safety plan requires weekly contact with the child(ren) or the persons responsible for the action steps by either phone or face-to-face to monitor the safety plan. Face-to-face contact is also required every other week to monitor an out-of-home safety plan.

During the home visits the caseworker will, at a minimum, see all children involved and the persons responsible for the action steps identified on the safety plan. Others can assist in monitoring. However, the caseworker must maintain frequent contact with the individual to ensure compliance with the safety plan activities. Allowing others to participate in monitoring the safety plan does not relieve the caseworker from the required home visits and contacts.

Implementation

To implement a safety plan, the PCSA must obtain signatures on the JFS 01409 from the custodial parent, legal guardian, or legal custodian and all persons responsible for a safety plan action step. If any of the individuals are not present to sign the JFS 01409, the safety plan may be implemented with a verbal authorization. The PCSA must document the date and time the verbal approval was received.

The caseworker must obtain signature(s) of the custodial parent/legal guardian/legal custodian or responsible party within five working days from receipt of the verbal authorization. Attempts to gain signature(s) and any reasons why the signature(s) cannot be obtained are to be documented in the case record.

If attempts to obtain the signature(s) were unsuccessful, the agency can be granted an extension when the custodial parent, legal guardian, or legal custodian who provided the verbal authorization is absent and not interfering with the agreed upon safety plan activities and the responsible party is following the safety plan and controlling the active safety threat(s) to the child.

SAFETY PLAN INSTRUCTIONS

Section 1: Identifying Information

Page numbers: Enter the total number of pages where indicated. Enter the case name, case number, date, caseworker name, supervisor name, and agency phone number.

Names of the child(ren) included in this safety plan

List the name(s) of all children who are included in the safety plan.

Names of the parent/guardian/custodian(s)

List the name(s) and phone number(s) of the parent/guardian/custodian(s)

IMPORTANT INFORMATION ABOUT SAFETY PLANS

Parent/Guardian/Custodian(s) participating in the development of the safety plan must be informed of the "Important Information about Safety Plans" section. Parent/Guardian/Custodian(s) may either read this section of the safety plan or it may be read to them by the caseworker.

Enter contact information (worker name and telephone number) in the spaces indicated.

Section 2: Safety Plan Activities

Page numbers: Enter the page number and total number of pages where indicated.

Enter Case Name and Case Number.

Identify the safety threat(s) and serious harm from which the child(ren) needs protection.

Describe the specific acts or conditions that have created/are creating an immediate safety threat and/or serious harm to the child(ren). Identify the person(s) responsible for the threat of harm and from whom the child(ren) needs protection.

Action Steps

Describe specific activity(ies) necessary to protect the child(ren):

Identify the specific activity(ies) that must occur to control the safety threat and to keep the child(ren) safe. Each action step must specify the child(ren) to whom the action step applies.

Responsible person for activity: Enter the name(s) of each person(s) responsible for carrying out the action step activity.

Enter the phone number(s) or contact information for the responsible person(s).

Explain how each activity will control the occurrence of serious harm:

Explain how each safety plan activity will control immediate safety threats that place the child(ren) in danger of serious harm.

Monitoring Plan

How will the activity(ies) be monitored?

Describe what will occur to monitor compliance with the safety plan activities (e.g., home visits, phone calls, etc.).

How often will the activity(ies) be monitored?

Document the frequency of monitoring (e.g., weekly, bi-weekly, etc.).

Who will monitor the activity(ies)?

Document who will complete the monitoring activities (e.g., assigned caseworker, case aide, agency representative, another agency, etc.).

Safety Plan Type

Select the appropriate check box for the type of safety plan implemented.

- In-home safety plan
- Out-of-home safety plan

Section 3: Signatures

Check here if any parent/guardian/custodian(s) or responsible party provided verbal approval of the safety plan due to being unavailable to sign.

Enter the parent/guardian/custodian or responsible person name and the date and time of their verbal approval.

The safety plan has been explained to me and any questions I had about this safety plan were answered by Children Services. I understand, agree to follow, and have received a copy of the safety plan.

Parent/Guardian/Custodian(s) and others participating in the safety plan must read or have the statement read to them.

Obtain signatures and dates for each Parent/Guardian/Custodian and all other responsible person(s) named in an action step of the safety plan.

Date Safety Plan Discontinued

Date of Notification to Parent/Guardian/Custodian(s)

The agency must notify the parent/guardian/custodian and each responsible person in writing within two working days of the discontinuation of the safety plan. Document the date the safety plan was discontinued and the date the parent/guardian/custodian(s) were notified.