



FLORIDA SAFETY DECISION MAKING METHODOLOGY

Progress Update

Case Name:

FSFN Case ID:

Date of Most Recent Safety Plan:

Worker Name:

Approval Date:

I. HOUSEHOLD COMPOSITION

Child Name	Date of Birth	Primary Goal	Concurrent Goal	Current Placement

Parent/ Legal Guardian(s)/ Other Adult Household Members in Caregiving Role:

Name	Date of Birth

Family Support Network

Name	Role

II. MALTREATMENT AND NATURE OF MALTREATMENT

What is the extent of the maltreatment? What surrounding circumstances accompany the alleged maltreatment?

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Additional Ongoing Information

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III. CHILD FUNCTIONING

How does the child function on a daily basis? Include physical health, development; emotion and temperament; intellectual functioning; behavior; ability to communicate; self-control; educational performance; peer relations; behaviors that seem to provoke parent/caregiver reaction/behavior; activities with family and others. Include a description of each child's vulnerability based on threats identified.

IV. ADULT FUNCTIONING

How does the adult function on a daily basis? Overall life management. Include assessment and analysis of prior child abuse/neglect history, criminal behavior, impulse control, substance use/abuse, violence and domestic violence, mental health; include an assessment of the adult's physical health, emotion and temperament, cognitive ability; intellectual functioning; behavior; ability to communicate; self-control; education; peer and family relations, employment, etc.

V. PARENTING

General – What are the overall, typical, parenting practices used by the parents/legal guardians? Discipline/Behavior Management – What are the disciplinary approaches used by the parents/legal guardians, and under what circumstances?

VI. REASONS FOR ONGOING INVOLVEMENT

Danger Statement (Develop in collaboration with the family)

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VII. FAMILY CHANGE STRATEGY

Family Goal: Describe how the family will be functioning when all children are safe and the family is able to independently meet the needs of their children. (Developed in collaboration with the family.)

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Ideas: Describe ideas parent/legal guardian, worker, child or other network members have for moving toward the Family Goal.

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Potential Barriers: Describe things that could get in the way of change from the family's perspective and/or the family team's perspective.

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VIII. CHILD NEED INDICATORS

Children	Child Needs									
	Emotional/ Trauma	Behavioral (e.g. risk taking behavior, runaway, etc)	Development	Education	Physical Health/ Disability	Family Relationships	Peer/ Adult Relationships	Cultural Identity	Substance Awareness	Life Skills Development

IX. PRIORITY NEEDS

	Rating	Parent Meeting Needs?

If the parent is meeting the need, describe their actions. If the parent needs support or assistance to meet the needs of the child, the need will be addressed in the Case Plan.

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X. PROTECTIVE CAPACITIES

Adults	Capacity Categories and Types																	
	Behavioral				Cognitive						Emotional							
	Controls Impulses	Takes Action	Sets aside own needs for child	Demonstrates adequate skills	Adaptive as a Parent/Legal Guardian	Is self aware	Is intellectually able	Recognizes threats	Recognizes child's needs	Understands protective role	Plans and articulates plans for protection	Meets own emotional needs	Is resilient	Is tolerant	Is stable	Expresses love, empathy, sensitivity to the child	Is positively attached with child	Is aligned and supports the child

XI. PRIORITY NEEDS

	Rating	Include in Case Plan?

If a diminished protective capacity will not be addressed in the Case Plan, describe the assessment process to reach this conclusion.

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XII. MOTIVATION FOR CHANGE

Adult	Motivation

XIII. IN-HOME SAFETY ANALYSIS AND PLANNING (removal home)

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In-Home Safety Plan is determined. Summarize the conditions that have changed since last safety analysis to support reunification with an In-Home Safety Plan.

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Out-of-Home Safety Plan is the only protective intervention possible for one or more children (whether family designated arrangement or removal/placement).

Summarize reason for Out of Home Safety Plan or removal/placement (if applicable), and conditions for return. Conditions for return should be related to reasons for removal and behaviorally based. These are parent/legal guardian actions and behaviors that must be demonstrated over time to sufficiently address the impending danger and allow for the child to safely return home.

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XIV. CURRENT SAFETY PLAN ASSESSMENT FOR SUFFICIENCY

- Safety plan is sufficient, no need for changes to the plan at this time.
- Safety plan is not sufficient, not controlling for child safety or no longer applicable; change in safety plan is needed.
- Safety plan is no longer needed.

IN-HOME SAFETY ANALYSIS AND PLANNING

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Based on the determination selected above, describe the assessment process to reach this conclusion.

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XV. OUTCOME(S) EVALUATION

Outcome Achievement:

Applies to the following caregivers:

Applies to the following caregivers:					Est. Cost to Parent(s) (if applicable):			
Who	Actions/Tasks	Estimated Completion Date	Task Completed	Responsible Party for Cost	Location of Delivery of Services	Date of Service Referral	Service Referral Request Needed	Freq. of Service
Provider Name		FSFN Provider	Provider Address			Provider Phone Number	Provider Email	



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Service Category	Service Type	Task Complete
Overall Outcome Progress: Explanation of progress assessment:		
Changes in case plan goals, outcomes, actions and/ or supports:		
Barriers To Achieving Desired Case Plan Outcomes:		