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| --- | --- |
| SAFETY | Confirming safe environments***(Did the worker confirm if the child(ren) were in a safe environment?)*** |
| Yes / No |
| Impending Danger Threats – Safety Assessments/Planning***(Did the worker assess impending danger threats / plan around safety as necessary?******Note – it is still necessary to assess safety when the case is a ‘Safe’ case.)*** |
| Yes / No |

|  |  |
| --- | --- |
| CHILD DEVELOPMENT | Education***(Did the worker assess if the child(ren)’s education needs were being addressed,******if the child(ren) is in school?*** |
| Yes / No / Not Applicable |
| General Development***(Did the worker assess the child(ren) is engaging in developmentally appropriate activities?*** |
| Yes / No |

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| --- | --- |
| CHILD DEVELOPMENT (continued) | Physical Health***(Did the worker assess the child(ren)’s physical health?*** |
| Yes / No |
| Mental Health***(Did the worker assess the child(ren)’s mental health, if age-appropriate?*** |
| Yes / No / Not Applicable |

|  |  |
| --- | --- |
| CASE PLANNING | Case Plan***(Did the worker assess for the service needs of all household members?******Did the worker assess if the case is sufficiently progressing?)*** |
| **Service needs?** Yes / No | **Progress?** Yes / No |
| Permanency Plan***(Did the worker assess if the permanency plan (if applicable) is sufficient?)*** |
| Yes / No / Not Applicable |
| Visitation Plan***(Did the worker assess if the visitation plan (if applicable) is sufficient?)*** |
| Yes / No / Not Applicable |