

Safety Plan - Family Time (contact with other family members) should be included as part of this plan and include all the risks associated with Covid-19. In order to help with this, please refer to the Family Time Covid-19 Risk Assessment and Protocol.

This document replaces the Risk Assessment, the agreement (contract) with the child's parents, and the family time schedule and should be compiled with all members of the network, including foster carers.

This Safety Plan should be treated as a live document and updated regularly

Details of Child:

Family Name		Given Names	
Actual DOB		Gender	
Ethnicity		Primary Language	
Primary Address		Telephone	
		Mobile	
		Case Number	
Secondary Address	Carers details	Current Address	

Key Dates

Date this Plan was Completed	
Name of Allocated Case Worker	

Family and Network Details (please ensure this includes Foster Carers) this can be done virtually if not in person.

Who would the child say are the most important people in their life?	
Who would the parents say are the people around them that help and support them? These are the people who will form the network	
Who are the most important professionals involved with the child and family?	
Communication Needs (including language and disability) If anyone does not have English as their primary language, and/or anyone has a disability, please provide relevant details here.	

Please select the genogram for the Child/ren and Family

Add Genogram

What needs to happen?

Safety Plans should always be created together with the parents, carers, foster carers child and key members of the support network

Bottom Lines

Professional bottom-lines are the minimum that must happen for	
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Children's Services to be satisfied and they cannot compromise on. You may need to consider a bottom line specifically relating to Covid-19. For example wearing a face covering, ringing in if you feel unwell and are unsure if you have Covid-19 symptoms.	
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Timeline Please ensure that a risk assessment relating to Covid-19 is considered and tasks identified within the timeline. (Please include details that would have previously been recorded in the Family Time schedule e.g. who, how, when, where)

Week	Task	Meetings and Monitoring	Changes
1			
2			
3			
4			
5			

Words and Pictures (to include some elements of Covid-19 and Family Time where appropriate, see OMG for an example)

Have the words and pictures been written and shared with the network?	<input type="radio"/> Yes <input type="radio"/> No
When was it done? (Please ensure this has been attached) Make sure this is the date of the version you are referencing.	

Who is involved in the plan? Please ensure that the Foster Carers are included as an integral part of this plan and their views recorded

Please ensure all people listed are recorded on the child's main demographics.

Name and Role	How often will they see the child?	What are the specific tasks of this person? Who is involved and what have they agreed to do / specific tasks Please ensure child's foster carers if the child is in foster care. What needs to be done and by who Who is the network lead? This may change over time	Network Lead

Plan Rules

The Plan Rules will address each concerning behaviour in turn. Moving from what is working well on to stressors, and triggers for 'red flag' or emergency events and consider who will do what when problems arise?

Signs of Safety

Key Issues arising from Danger Statement(s) Please include in the plan rules relating to Covid-19 for example if the bottom lines are not being adhered to e.g. if someone refuse to wear a mask without medical exemption.	Existing Safety / What is Working well?	Stressors and Triggers	Indicators Danger is emerging or present (Red Flags)	Who will do what when problems arise?

Recording and Demonstrating the Plan

Has a children’s version of the plan been created and shared with the child?	<input type="radio"/> Yes <input type="radio"/> No			
When was this completed? (please ensure this is attached)				
How will the family demonstrate the use of the plan?	<input type="radio"/> Safety Journal <input type="radio"/> Facebook Group <input type="radio"/> WhatsApp group <input type="radio"/> Other			
How is it kept up to date and who is responsible for it?	Dad is responsible for the safety journal			
Would a safety object be helpful for this child or young person?	<input type="radio"/> Yes <input type="radio"/> No			
Safety Objects Plan				
Child's Name	Safety Object	How will the child use the Safety Object?	What action will be taken?	When has the Safety Object been 'fire drill' tested'?

Agreement:

I agree that I have read the Safety Plan in full and this has been fully discussed and explained with me and I have received a copy to keep.

Signed

Dated

Parent

Signed

Dated

Parent

Signed

Dated

Carer/Foster Carer

Signed

Dated

Social Worker