

FAMILY SAFETY CONTRACT

Child's Name: _____

Date: _____

The _____ Family agrees to the following rules designed for the protection of children in our care.

PREVENTION RULES:

1. Caregivers will enforce and discuss, if appropriate, the following prevention rules with all family members living in their home.
2. Caregivers will establish reasonable guidelines concerning what level of supervision (auditory, visual, in the same room) is required for persons living in the home. Sexually victimized and sexually aggressive children newly placed with caregivers will require at least visual supervision until they become better known to the caregivers.

3. The following people are approved to supervise contact between the children:

5. Older children will never be responsible for baby-sitting or supervising younger children.
6. Caregivers will model and enforce appropriate physical boundaries among family members living in the home. Physical affection between children should be brief, and should avoid bodily contact, such as lying together or sitting on laps.
7. Caregivers will limit access to bedrooms by establishing and enforcing ground rules on who is allowed to visit whose bedroom and under what conditions.
8. Children will never be together in a bedroom or bathroom behind closed doors.
9. One family member uses the bathroom at a time with the door fully closed.
10. All family members will sleep in their own beds.
11. All family members bathe, shower, and toilet separately.
12. Family members will respect personal space, such as knocking before entering a room.
13. Caregivers will establish a dress code which outlines the type of clothing that is acceptable and under what circumstances.
14. Caregivers will encourage, model and support open communication among family members about important events occurring in the home. No secrets among family members allowed.
15. No pornography (magazines, pictures, or video) in the home.
16. Ensure that the child is the youngest child placed in the home unless the placement is a treatment facility with adequate video monitoring.
17. When matching a child exhibiting sexually abusive or reactive behaviors to a substitute care placement, consideration shall be given to factors that increase the vulnerability of other children living in the home, such as mental and/or emotional disability, physical disability, chronic illness and physical size.
18. Placing a child who has exhibited sexually abusive or reactive behaviors in a private bedroom unless the placement is a facility with adequate video monitoring.

Please check all that apply and list the child's name that it applies:

- _____ May never be placed in a bedroom with a younger child or more vulnerable child (includes a developmentally delayed, medically fragile, or much smaller child).
- _____ Must have his/her own room.
- _____ May never be placed in a bedroom with a younger child or with a history of sexual abuse victimization, sexual aggression, or sexual reactivity.
- _____ Must have alarms on his/her bedroom door.
- _____ May not have access to items that could potentially be used as a weapon, such as knives or other dangerous items. These items will be kept in a locked area that is not accessible to the child.
- _____ May not have access to matches, lighters, or other items that could potentially be used to light a fire. These items will be kept in a locked area that is not accessible to the child.

INTERVENTION STRATEGIES

1. In the event that prevention measures break down and child-on-child sexual abuse occurs or appears to be imminent, caretaker will immediately.
 - Separate the child from the others
 - Report the incident to the children's case manager and complete an Incident Report
 - Report the incident to the Abuse Hotline 1(800) 96-ABUSE / 1(800) 962-2873
 - Call your local fire department
 - Cooperate with authorities conducting an investigation

2. Some additional and more specific rules that apply to our family based on the child's known history and high risk factors:

SIGNATURES:

Caregiver: _____ Date:

Other: _____ Date

Caregiver: _____ Date:

Other: _____ Date

CPI/DCM: _____ Date:

CPI/DCMS: _____ Date:

Date of current placement: (Today's date) _____