~~~~**PPS Worker: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GENOGRAM**

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| **Worries** | | **Safety** | |
| **CURRENT & PAST HARM** *First describe the current reported harm and then summarize any pattern of past harm. Be sure to describe both what happened and impact on the child(ren).* | | **CURRENT & PAST SAFETY** *First describe what is in place that’s keeping the children safe right now and then describe how the children have been kept safe in the past when the worries were present. Be sure to describe both what happened and the impact on the child(ren).* | |
| **Complicating Factors** *What is happening in and around this family that might make building safety more challenging?* | | **Family Resources** *Who or what does this family have around them that might help in the safety building process? Who are the strongest connections for this family and their children?* | |
| **FUTURE DANGER** *Write a separate description of the future danger for each type of alleged harm. The future danger statement should answer three questions: Who is worried? What they are worried might happen? What’s the possible negative impact on the children?* | | **SAFETY GOAL** *For each future danger, write a corresponding safety goal. The safety goal should answer three questions: What is the desired outcome? What needs to be happening differently in the care of the children? What’s the anticipated positive impact for the children?* | |
| **Lasting Safety**  **Lasting Safety Scaling Question:** On a scale of 0–10 where 10 is the worries for this family are no more serious than for a typical family in our community everyone is confident the kids will grow up safe enough and well enough in their current situation without CPS involvement and 0 is things are so bad for these children that everyone is really worried they are likely to be hurt or suffer lasting/serious negative effects if something doesn’t change. Where would you rate this situation today from that 0 to that 10?  0  10 | | | |
| **0 is…** *Use this space to turn the future dangers and corresponding safety goals into case-specific safety scales* | **Ratings**     |  |  |  |  | | --- | --- | --- | --- | | **Name** | **Role** | **Date** | **Rating** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | | **10 is…** *Use this space to turn the future dangers and corresponding safety goals into case-specific safety scales* |
| **Reasons for Ratings:** *Describe each person’s reasons for giving the rating they did on the Lasting Safety Scale.* | | | |
| **Next Steps** | | | |
| *What steps will be taken to mitigate the risk and build lasting safety with this family for their children?* | | | |