

**OOHC / FAC FORM:
FOSTER CARE HOUSING SAFETY REPORT**

Form number: OOHC 021/1

Issued: January 2015

Contact: Team Leader

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FOSTER CARE HOUSING SAFETY REPORT

Mark any issues that need to be addressed prior to applicant(s) being authorised

Address of inspected home

Lounge/dining/living/other rooms

- Loose cables, cords, tripping objects or sharp corners
- Glass doors without safety glass and marking stickers
- No electric socket covers (*if small children in family*)
- Other concerns

How will the identified issues be addressed?

Kitchen

- Loose cables, cords, tripping objects or sharp corners
- Unsafe storage of utensils, cleaning fluids, medicines and alcohol
- No safety locks on lower cupboards (*if small children in family*)
- Unhygienic storage of food
- Frayed electrical cords or loose electrical appliances



<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?

Stairs

<input type="checkbox"/>	Tread covers insecure or uneven
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<input type="checkbox"/>	Banister too low, inadequately secured or large gaps between rails
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<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?

Bathroom, toilet and laundry

<input type="checkbox"/>	Unsafe storage of medicines, cleaners, razers, electrical appliances
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<input type="checkbox"/>	Sharp edges eg benches, tiles
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<input type="checkbox"/>	Height of Power Points
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<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?



Bedroom planned for foster child

<input type="checkbox"/>	Inadequate space for appropriate furniture or storage
<input type="checkbox"/>	Inadequate privacy available for child or young person
<input type="checkbox"/>	Inadequate light
<input type="checkbox"/>	Other concerns

How will the identified issues be addressed?

Balconies, Verandas and Windows

<input type="checkbox"/>	Unsafe height of balconies
<input type="checkbox"/>	Items on balcony can allow a child to climb over edge.
<input type="checkbox"/>	No railing to secure verandahs
<input type="checkbox"/>	Inadequate locks or grills to prevent child from falling out of window.

How will the identified issues be addressed?

Garden/garage/outdoor area

<input type="checkbox"/>	Unsafe storage of garden equipment and chemicals
<input type="checkbox"/>	Inadequate fencing for safe play
<input type="checkbox"/>	Unsuitable fencing of pools, spas, ponds, dams
<input type="checkbox"/>	Other concerns

How will the identified issues be addressed?

Vehicle

<input type="checkbox"/>	No room or seatbelts available in family car for extra child/young person
<input type="checkbox"/>	Car not comprehensively insured
<input type="checkbox"/>	No first aid kit in car
<input type="checkbox"/>	Other concerns

How will the identified issues be addressed?

Fire safety

<input type="checkbox"/>	Smoke detectors not installed or not working
<input type="checkbox"/>	Access doors and windows not easily opened in event of fire
<input type="checkbox"/>	Other concerns

How will the identified issues be addressed?

Pets

<input type="checkbox"/>	Unhygienic feeding/sleeping/waste/disposal
<input type="checkbox"/>	Unsecure fish tanks
<input type="checkbox"/>	Animal that may harm a child



<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?

Safety and health

<input type="checkbox"/>	Smoking is allowed inside the house	
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<input type="checkbox"/>	Licensed firearms or ammunition are not securely stored	
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<input type="checkbox"/>	No basic first aid kit/equipment in the home	
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<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?

Other

<input type="checkbox"/>	Inadequate space for play – indoors and outdoors	
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<input type="checkbox"/>	Other concerns	
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How will the identified issues be addressed?

Name of Assessor

Date of house inspection

