

RISK ASSESSMENT/REASSESSMENT DEFINITIONS AND INSTRUCTIONS

RISK ASSESSMENT DEFINITIONS AND INSTRUCTIONS

Risk Assessment Instructions

The Risk Assessment form is composed of two scales: the Neglect Scale and the Abuse scale. **Only one household can be assessed on a risk form.** If two households are involved in the alleged incident(s), separate Risk Assessment forms should be completed for each household.

On items involving “caregiver(s),” **select one or two** parent(s)/substitute(s) based on physical/emotional proximity to child(ren). Do not rate more than two caregivers in a home. If an item relates to all caregivers and the household has more than one caregiver, **rate the caregiver with the more severe behavior.**

The primary caregiver is the adult living in the household who assumes the most responsibility for childcare. When two adults are present and the worker is in doubt which one assumes the most child care responsibility, the **adult with legal responsibility for the child(ren)** involved in the incident should be selected as the primary caregiver. For example, when a mother and her boyfriend reside in the same household and appear to equally share caregiver responsibilities for the child(ren), the mother is selected. If this does not resolve the question, the legally responsible adult who was a perpetrator or alleged perpetrator should be selected. For example, when a mother and father reside in the same household and appear to equally share caregiving responsibilities for the child(ren) and the mother is the perpetrator or alleged perpetrator, the mother is selected. In circumstances where both parents are in the household, equally sharing caregiving responsibilities, and both have been identified as perpetrators or alleged perpetrators, the parent demonstrating the more severe behavior is selected. Only one primary caregiver can be identified.

The secondary caregiver is defined as an adult living in the household who has routine responsibility for childcare, but less responsibility than the primary caregiver. A partner may be a secondary caregiver even though he or she has minimal responsibility for care of the child(ren).

The Risk Assessment **must be completed within 30 days of case opening** (i.e., at or prior to completion of the CPS investigation).

If the child moves to a different household as a result of the crisis, the Risk Assessment is completed on the household in which the child(ren) will remain. If the child will remain in the new household, the Risk Assessment would be completed on the new household. If the plan is to reunify the child(ren), the Risk Assessment would be **completed on the household from which the child was removed.**

Risk Assessment Definitions

NEGLECT SCALE

N1. Current Allegation is for Neglect

Score “1” if the current allegation is for any type of neglect and “-1” if not. This includes referred allegations as well as allegations made during the course of the investigation. Neglect refers to physical neglect, medical neglect, educational neglect as well as other forms of neglect.

N2. Prior Neglect Investigations

- a. Score “-1” if there were no investigations of neglect (do not include referrals that were not assigned for investigation) prior to the current investigation.
- b. Score “1” if there was one or more investigations (do not include referrals that were not assigned for investigation) of neglect allegations prior to the current investigation.
- c. Score “2” if there was one investigation of neglect allegation that was substantiated prior to the current investigation.
- d. Score “3” if there were two or more substantiated investigations of neglect allegations prior to the current investigation.

Where possible, history from other county or state jurisdictions should be checked. Exclude investigations of out-of-home perpetrators (e.g., day care) unless one or more caregivers failed to protect.

N3. Household has Previously Received Child Protective Services

Score “1” if household has previously received child protective services or is currently receiving services as a result of a prior investigation. Service history includes voluntary or court-ordered family services or Family Preservation Services, but does not include delinquency services and does not include CPS investigations that did not result in an opened service case. Score “3” if any child has previously been removed from the household.

N4. Number of Children in Household

Score the appropriate amount given the number of children under 18 years of age.

N5. Age of Youngest Child in Household

Score the appropriate amount given the current age of the youngest child presently in the household where the maltreatment incident reportedly occurred. If a child is removed as a result of the current investigation, count the child as residing in the home.

N6. Primary Caregiver's Assessment of Incident

Score the appropriate amount according to the primary caregiver's assessment of the severity of the incident and record the sum as the item score:

- a. Score "0" if none of the following is applicable for the caregiver.
- b. Score "2" if the primary caregiver minimizes the possibility of or actual harm to child(ren) (e.g., "The child bruises easily").
- c. Score "2" if the primary caregiver displaces responsibility for the incident or the severity of the incident (e.g., "The neighbors treat their kids worse - do something about them").

N7. Primary Caregiver Provides Physical Care or Supervision Inconsistent with Child's Needs

Score "2" if physical care of child(ren) (age-appropriate feeding, clothing, shelter, hygiene, and medical care of child[ren]) threatens the child(ren)'s well-being or results in harm to child(ren). Also score "2" if supervision of child(ren), that is, caregiver's oversight of routine child activity threatens the child(ren)'s well-being or results in harm to child(ren). Examples include:

- a. leaving younger and/or vulnerable child(ren) alone;
- b. leaving any child(ren) younger than mid-adolescence alone overnight;
- c. repeated failure to obtain standard immunizations;
- d. failure to obtain medical care for severe or chronic illness;
- e. repeated failure to provide child(ren) with clothing appropriate to the weather;
- f. persistent rat or roach infestations;
- g. inadequate or inoperative plumbing or heating;
- h. poisonous substance or dangerous objects lying within reach of small child(ren);
- i. child(ren) is wearing filthy clothes for extended periods of time; or
- j. child(ren) is not being bathed on a regular basis resulting in dirt caked on skin and hair and a strong odor.

N8. Primary Caregiver has Substance Use Problem

Score “1” if the primary caregiver has a current substance use problem that interferes with his/her or the family’s functioning. Such interference is evidenced by:

- a. substance use that affects or affected:
 - 1. employment,
 - 2. criminal involvement,
 - 3. marital or family relationships, or
 - 4. ability to provide protection, supervision, and care for the child(ren);
- b. an arrest in the past two years for driving under the influence or refusing breathalyser testing;
- c. self report of a problem;
- d. recently received or is receiving treatment;
- e. multiple positive urine samples;
- f. health/medical problems resulting from substance use;
- g. child(ren) was diagnosed with Fetal Alcohol Syndrome or Exposure (FAS or FAE) or child had a positive toxicology screen at birth and primary caregiver was birthing parent. Legal, non-abusive prescription drug use should not be scored.

N9. Child in Household has Mental Health/Behavioral Problem

Score “1” if any child in the household shows mental health or behavioral problems not related to a physical or developmental disability. Such a problem might be indicated by regular visits to a therapist, attendance in a special classroom for behavioral problems, or prescriptions for psychoactive medication.

N10. Recent or History of Domestic Violence in Household

Score “1” if any caregiver was a victim or perpetrator of domestic violence at any time. Domestic violence includes any physical assault, pattern of verbal harassment/threats, or intimidation. Include only domestic violence between caregivers or between a caregiver and another adult household member. Do not include parent-child or child-child violence.

N11. Caregiver(s) Have History of Homelessness

Score “3” if any caregiver has had multiple periods of homelessness at any time in the past, regardless of the household’s housing status at time of investigation.

ABUSE SCALE

A1. Prior Investigations

Score the appropriate amount given the count of all investigations, substantiated or not, which were assigned for CPS investigation for any type of allegation (abuse, neglect or other) prior to the complaint resulting in the current investigation. Where possible, history from other county or state jurisdictions should be checked. Exclude investigations of out-of-home perpetrators (e.g., day care) unless one or more caregivers failed to protect.

A2. Household has Previously Received Child Protective Services

Score “2” if household has previously received child protective services or is currently receiving services as a result of a prior investigation. Service history includes voluntary or court-ordered family services or Family Preservation Services, but does not include delinquency services and does not include CPS investigations that did not result in an opened service case.

A3. Primary Caregiver has History of Abuse or Neglect as a Child

Score “2” if credible statements by the primary caregiver or others indicate that the primary caregiver was maltreated as a child (maltreatment includes neglect or physical, sexual or other abuse).

A4. Primary Caregiver was Placed in Protective Services as a Child

Score “3” if credible statements by the primary caregiver or others indicate that the primary caregiver was placed in protective services as a child.

A5. Caregiver(s) Provides Supervision Inconsistent with Child’s Needs

Score “1” if the primary caregiver provides supervision inconsistent with a child’s needs; that is, caregiver oversight of routine child activity is not appropriate to the child(ren)’s age and development. Inconsistent with child(ren)’s needs means the child(ren)’s well-being was potentially threatened or harm actually resulted. Examples include:

- a. leaving younger and/or vulnerable child(ren) alone;
- b. leaving any child(ren) younger than mid-adolescence alone overnight.

A6. Caregiver(s) Employs Excessive/Inappropriate Discipline

Score “2” if the caregiver’s disciplinary practices caused or threatened harm to child(ren) because they were excessively harsh physically or emotionally and/or inappropriate to the child(ren)’s age or development. Examples include:

- a. locking child(ren) in closet or basement;
- b. holding child(ren)’s hand over fire;

- c. hitting child(ren) with instruments; or
- d. depriving young child(ren) of physical and/or social activity for extended periods).

A7. Caregiver(s) Involved in Disruptive/Volatile Adult Relationships

Score “1” if relationships between caregivers or with other adults in the household have a negative impact on and/or disrupt family functioning. For example, caregiver(s) and/or other adults in the household fail to work together, cooperate, or problem solve which has a negative effect upon family member relationships (this includes but is not limited to domestic violence). If caregiver is not involved in a relationship, the answer is “no.”

A8. Characteristics of Children in Household

Score the appropriate amount for each characteristic present and record the sum as the item score:

- a. Score “0” if no child in the household exhibits characteristics listed below.
- b. Score “2” if any child in the household has mental health or behavioral problems not related to a physical or developmental disability (includes ADHD/ADDD). This could be indicated by:
 - 1. DSM diagnosis;
 - 2. receiving mental health treatment;
 - 3. attendance in a special classroom because of behavioral problems; or
 - 4. currently taking psychoactive medication.
- c. Score “2” if any child in the household has any significant physical handicap or disability. This does not include learning disabilities or ADHD.

A9. Caregiver(s) has History of Mental Health Treatment

Score the appropriate amount regarding whether or not either or both caregivers have receive mental health treatment in the past. Indicate that treatment was received if credible and/or verifiable statements by the caregivers or others indicate that one or both caregivers were recommended for or received outpatient or inpatient treatment for emotional problems at any time.

A10. Secondary Caregiver has a Substance Use Problem

Score the appropriate amount regarding whether or not the secondary caregiver has a substance use problem that interferes with the his/her or the family’s functioning. Such interference is evidenced by:

- a. substance use that affects or affected:
 - 1. employment,
 - 2. criminal involvement,
 - 3. marital or family relationships,
 - 4. ability to provide protection, supervision, and care for the child(ren);

- b. an arrest in the past two years for driving under the influence or refusing breathalyser testing;
- c. self report of a problem;
- d. recently received or is receiving treatment;
- e. multiple positive urine samples;
- f. health/medical problems resulting from substance use.

Legal, non-abusive prescription drug use should not be scored.

After scoring all items in each scale, the caseworker totals the score for each scale and determines the risk level by checking the appropriate boxes in the risk level section.

Overrides

Policy Overrides

After completing the risk scales, the caseworker should determine if any of the **Policy Overrides** should be applied. This upgrades the risk level to high regardless of the Scored Risk Level. Policy overrides reflect incident seriousness and child vulnerability concerns.

Discretionary Overrides

After completing the risk scales, the caseworker should determine if there are any other **Discretionary Overrides** that should be applied to either increase or decrease the risk level. This is used when the worker is aware of unique case circumstances, known to the worker, that warrant a higher risk level. **The caseworker must receive supervisory approval for a discretionary override.**

Workers may reassess the case whenever she/he determines an adjustment in the risk score is warranted (either up or down).

RISK REASSESSMENT DEFINITIONS AND INSTRUCTIONS

Risk Reassessment Instructions

While the initial risk assessment has different scales for abuse and neglect, there is only one scale for the reassessment. The focus at reassessment is the impact of services provided to the family during the period assessed or on whether certain events in the family have occurred during the previous review period. The first four items are those that are strongly related to the probability of subsequent abuse and/or neglect and generally do not change from the initial assessment. The next four items relate to events that have or have not occurred since the initial risk assessment or most recent reassessment that was not prompted by an investigation. The final four items specifically relate to the caregiver(s) use of treatment services provided by the agency. The risk reassessment must be completed six months from date of completion of the Family Services Plan and every six months thereafter. The risk reassessment must also be completed prior to case closure.

Risk Reassessment Definitions

R1. Prior Investigations

Score the appropriate amount, given the count of all investigations, substantiated or not, which were assigned for CPS investigation for any type of allegation (abuse, neglect or other) prior to the complaint resulting in the current case. Where possible, history from other county or state jurisdictions should be checked. Exclude investigations of out-of-home perpetrators (e.g., day care) unless one or more caregivers failed to protect.

R2. Household has Previously Received Child Protective Services

Score "2" if household has previously received child protective services or is currently receiving services as a result of a prior investigation. Service history includes voluntary or court-ordered family services or Family Preservation Services, but does not include delinquency services and does not include CPS investigations that did not result in an opened service case.

R3. Number of Children in Household

Score the appropriate amount given the number of children under 18 years of age.

R4. Age of Youngest Child in Household

Score the appropriate amount given the current age of the youngest child presently in the household where the maltreatment incident reportedly occurred. If a child is removed as a result of the current investigation, count the child as residing in the home.

R5. New CPS Substantiated or Inconclusive Investigation Since the Initial Risk Assessment or most recent Reassessment that was not prompted by an Investigation

Score “3” if anyone in the household has been investigated for child maltreatment during the full time period since the initial risk assessment or most recent reassessment that was not prompted by an investigation.

R6. Either Caregiver has a Current Substance Use Problem

Score “0” if either caregiver does not have a current substance use problem that interferes with his/her or the family’s functioning. Score “1” if either caregiver has a problem and score “3” if either caregiver was offered treatment and refused.

Such interference is evidenced by:

- a. substance use that affects or affected:
 1. employment,
 2. criminal involvement,
 3. marital or family relationships, or
 4. ability to provide protection, supervision, and care for the child(ren);
- b. an arrest in the previous assessment period for driving under the influence or refusing breathalyser testing;
- c. self report of a problem;
- d. recently received or is receiving treatment;
- e. multiple positive urine samples;
- f. health/medical problems resulting from substance use;
- g. within the last assessment period, child(ren) was diagnosed with Fetal Alcohol Syndrome or Exposure (FAS or FAE) or child had a positive toxicology screen at birth and primary caregiver was birthing parent.

Legal, non-abusive prescription drug use should not be scored.

R7. Disruptive/Volatile Adult Relationships in the Household

Score “2” if relationships between caregivers or with other adults in the household have a negative impact on and/or disrupt family functioning. For example, caregiver(s) and/or other adults in the household fail to work together, cooperate, or problem solve which has a negative effect upon family member relationships (this includes but is not limited to domestic violence). If caregiver is not involved in a relationship, the answer is “no, no problems.”

R8. Caregiver is Able to Provide Physical Care/Supervision to Children

Score the appropriate amount if physical care of child(ren) (age-appropriate feeding, clothing, shelter, hygiene, and medical care of child[ren]) threatens the child(ren)’s well-being or results in harm to child(ren). Also score the appropriate

amount if supervision of child(ren), that is, caregiver's oversight of routine child activity threatens the child(ren)'s well-being or results in harm to child(ren). Examples include:

- a. leaving younger and/or vulnerable child(ren) under the age of six alone;
- b. leaving any child(ren) younger than mid-adolescence alone overnight;
- c. repeated failure to obtain standard immunizations;
- d. failure to obtain medical care for severe or chronic illness;
- e. repeated failure to provide child(ren) with clothing appropriate to the weather;
- f. persistent rat or roach infestations;
- g. inadequate or inoperative plumbing or heating;
- h. poisonous substance or dangerous objects lying within reach of small child(ren);
- i. child(ren) is wearing filthy clothes for extended periods of time; or
- j. child(ren) is not being bathed on a regular basis resulting in dirt caked on skin and hair and a strong odor.

R9. Primary Caregiver's Use of Treatment/Training Programs

Score this item based on whether the primary caregiver has demonstrated or is beginning to demonstrate skills learned from participation in services:

- a. Score "0" if not applicable. All desired services were unavailable during the last assessment period;
- b. Score "0" if not applicable.
- c. Score "-1" if caregiver successfully completed all services recommended or actively participating in services; or is pursuing objectives detailed in FSP. Observation demonstrates caregiver's application of learned skills in interaction(s) between child(ren)/caregiver, caregiver to caregiver, caregiver to other significant adult(s), self-care, home maintenance, financial management, or demonstration of skills toward reaching the behavioral objectives agreed upon in FSP;
- d. Score "1" if there was minimal participation in pursuing objectives in FSP. The caregiver is minimally participating in services, has made progress but is not fully complying with the objectives in FSP;

- e. Score “2” if caregiver has participated in services but is not meeting FSP objectives, refused involvement in services, or failed to comply/participate as required. The caregiver refuses services, sporadically follows the FSP, or has not demonstrated the necessary skills due to a failure or inability to participate.

R10. Secondary Caregiver's Use of Treatment/Training Program

Rate this item based on whether the secondary caregiver has demonstrated or is demonstrating skills learned from participation in services:

- a. Score “0” if not applicable. All desired services were unavailable during the last assessment period;
- b. Score “0” if not applicable because there is only one caregiver in the home.
- c. Score “-1” if caregiver successfully completed all services recommended or actively participating in services; or is pursuing objectives detailed FSP. Observations demonstrate caregiver's application of learned skills in interaction(s) between child(ren)/caregiver, caregiver to caregiver, caregiver to other significant adult(s), self-care, home maintenance, financial management, or demonstration of skills toward reaching the behavioral objectives agreed upon in FSP;
- d. Score “1” if there was minimal participation in pursuing objectives in FSP. The caregiver is minimally participating in services, has made progress but is not fully complying with the objectives in FSP;
- e. Score “2” if caregiver has participated in services but is not meeting FSP objectives, refused involvement in services, or failed to comply/participate as required. The caregiver refuses services, sporadically follows the FSP, or has not demonstrated the necessary skills due to a failure or inability to participate.

OVERRIDES

POLICY OVERRIDES

Policy Overrides have been determined by the agency as applying to specific case situations that warrant the highest level of service from the agency, regardless of the scored risk level. **The caseworker circles “yes” and overrides to high if a policy override was identified previously OR if the override condition/event has occurred during this reassessment period.** The Policy Override Risk Level typically continues throughout the reassessment period.

DISCRETIONARY OVERRIDES

The Policy Override Risk Level continues throughout the reassessment period unless the caseworker discretionarily overrides one level lower, after receiving supervisory approval. The caseworker circles “yes” and overrides the Policy Override one level lower. The Discretionary Override Risk Level becomes the selected Risk Level for this reassessment period. The Discretionary Override section of the instrument can also be used to override the Scored Risk Level one level (higher or lower) in cases not subject to a policy override. **Discretionary overrides must be approved in writing by the caseworker’s supervisor in the space provided in the reassessment form.**

This approach recognizes that the conditions/events that warranted a policy override are of such magnitude that they may always impact risk classification. Reducing a risk override level solely due to “passage of time” or “by default” is to be avoided. However, discretionarily overriding the Policy Override Risk Level allows flexibility if the family significantly resolves the issues that contributed to the original condition/event.