

**NORTH CAROLINA
FAMILY RISK ASSESSMENT OF ABUSE/NEGLECT**

Case Name: _____ Case #: _____ Date: _____
 County Name: _____ Social Worker Name: _____ Date Report Received: _____
 Children: _____
 Primary Caregiver: _____ Secondary Caregiver: _____

(Regardless of the type of allegations reported, ALL items on the risk assessment are to be completed.)

NEGLECT	Score	ABUSE	Score
N1. Current Report is for Neglect		A1. Current Report is for Abuse	
a. No 0		a. No 0	
b. Yes 1	_____	b. Yes 1	_____
N2. Number of Prior Assigned Reports		A2. Prior Assigned Abuse Reports	
a. None 0		a. None 0	
b. One 1		b. Abuse report(s) 1	
c. Two or more 2	_____	c. Sexual abuse report(s) 2	
		d. Both b and c 3	_____
N3. Number of Children in the Home		A3. Prior CPS Service History	
a. Two or fewer 0		a. No 0	
b. Three or more 1	_____	b. Yes 1	_____
N4. Number of Adults in Home at Time of Report		A4. Number of Children in the Home	
a. Two or more 0		a. One 0	
b. One or none 1	_____	b. Two or more 1	_____
N5. Age of Primary Caregiver		A5. Caregiver(s) Abused as Child(ren)	
a. 30 or older 0		a. No 0	
b. 29 or younger 1	_____	b. Yes 1	_____
N6. Characteristics of Primary Caregiver		A6. Secondary Caregiver has a Current Substance Abuse	
<i>(check and add for Score)</i>		problem.	
a. Not applicable 0		a. No. or no secondary caregiver 0	
b. Lacks parenting skills 1		b. Yes (check all that apply)	
c. Lacks self-esteem 1		___ Alcohol abuse problem	
d. Apathetic or hopeless 1	_____	___ Drug abuse problem 1	_____
N7. Primary Caregiver Involved in Harmful Relationships		A7. Primary or Secondary Caregiver Employs Excessive	
a. No 0		and/or inappropriate Discipline	
b. Yes, but not a victim of domestic violence 1		a. No 0	
c. Yes, as a victim of domestic violence 2	_____	b. Yes 2	_____
N8. Primary Caregiver has a Current Substance Abuse Problem		A8. Caregiver(s) has a History of Domestic Violence	
a. No 0		a. No 0	
b. Alcohol only 1		b. Yes 1	_____
c. Other drug(s) (with or without alcohol) 3	_____		
N9. Household is Experiencing Severe Financial Difficulty		A9. Caregiver(s) is a Domineering Parent	
a. No 0		a. No 0	
b. Yes 1	_____	b. Yes 1	_____
N10. Primary Caregiver's Motivation to Improve Parenting Skills		A10. Child in the Home has a Developmental Disability or	
a. Motivated and realistic 0		History of Delinquency	
b. Unmotivated 1		a. No 0	
c. Motivated but unrealistic 2	_____	b. Yes (check all that apply)..... 1	_____
		___ Developmental disability including	
		emotionally impaired	
		___ History of delinquency	
N11. Caregiver(s) Response to Assessment		A11. Secondary Caregiver Motivated to Improve Parenting	
a. Viewed situation as seriously as social worker and		a. Yes, or no secondary caregiver in home	0
cooperated satisfactorily 0		b. No..... 2	_____
b. Viewed situation less seriously than social worker	1		
c. Failed to cooperate satisfactorily 2		A12. Primary Caregiver Views Incident Less Seriously than Agency	
d. Both b and c	3	a. No 0	
	_____	b. Yes 1	_____

TOTAL NEGLECT RISK SCORE _____

TOTAL ABUSE RISK SCORE _____

RISK LEVEL

Assign the family's risk level based on the highest score on either scale, using the following chart:

<u>Neglect Score</u>	<u>Abuse Score</u>	<u>Risk Level</u>
___ 0- 4	___ 0- 2	___ Low
___ 5- 7	___ 3- 5	___ Moderate
___ 8-12	___ 6- 9	___ High
___ 13-20	___ 10-16	___ Intensive

OVERRIDES

Policy: Override to intensive. Check appropriate reason.

- ___ 1. Sexual Abuse cases where the perpetrator is likely to have access to the child victim.
- ___ 2. Cases with non-accidental physical injury to an infant.
- ___ 3. Serious non-accidental physical injury warranting hospital or medical treatment.
- ___ 4. Death (previous or current) of a sibling as a result of abuse or neglect.

Discretionary: Override (increase **one level**)

5. Reason: _____

OVERRIDE RISK LEVEL: ___ Moderate ___ High ___ Intensive

Social Worker: _____ Date: _____

Supervisor's Review/Approval of Override: _____ Date: _____

**NORTH CAROLINA
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DEFINITIONS**

Only one household should be assessed on a risk assessment form. If the allegations involve maltreatment in two households and both have responsibilities for childcare, complete **two** separate Risk Assessment tools. In situations where the parents are not living together a Family Risk Assessment of Abuse/Neglect will **only** be completed on the home of the alleged perpetrator.

The primary caregiver is the adult (typically the parent) living in the household who assumes the most responsibility for childcare. When two adult caregivers are present and the worker is in doubt about which one assumes the most child care responsibility, the adult legally responsible for the children involved in the incident should be selected. If this rule does not resolve the question, the legally responsible adult who is an alleged perpetrator should be selected. **Only one primary caregiver can be identified (per form/household.)**

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 living together partner can be a secondary caregiver even though they have minimal responsibility for the care of the child(ren).

NEGLECT SCALE

N1. Current Report is for Neglect

- a) **No** - The current report is not for neglect.
- b) **Yes** -- The current report is for neglect or both abuse and neglect. This includes any allegations under assessment even if not identified in the original report.

N2. Number of Prior Assigned Reports

Use Central Registry to count all maltreatment reports, for all children in the home which were assigned for CPS assessment for any type of abuse or neglect prior to the report resulting in the current assessment.

N3. Number of Children in the Home

Number of individuals under 18 years of age *residing* in the home at the time of the current report. If a child is removed as a result of the assessment or is on runaway status, count the child as residing in the home.

N4. Number of Adults in Home at Time of Report

Number of individuals 18 years of age or older *residing* in home at time of current report.

N5. Age of Primary Caregiver - Age at the time of assessment

N6. Characteristics of Primary Caregiver

Check appropriate box and **add the indicated** scores for each characteristic of the primary caregiver:

- a) **Not applicable**
- b) **Lacks parenting skills** - inability or unwillingness to care for/supervise children, uses excessive physical/verbal punishment, lacks knowledge of child development and age-appropriate expectations for children, poor knowledge of age-appropriate disciplinary methods
- c) **Lacks self-esteem** -lacks confidence, is withdrawn, doubts abilities, self-disparagement; or

- d) **Apathetic or hopeless** - appears overwhelmed, is indifferent, recent substantial decline in hygiene, energy level, and/or physical appearance not related to a medical problem.

N7. Primary Caregiver Involved in Harmful Relationships

- a) **No**
- b) **Yes, but not a victim of domestic violence** - adult relationships outside the home such as criminal activities which are harmful to domestic functioning or child care, or harmful adult relationships inside the home not at the level of domestic violence; or
- c) **Yes, as victim of domestic violence** – a relationship characterized by domestic disturbances or conflicts that warrant intervention by police, family, or others, often involving physical violence by one or both caregivers. See A8 definition also.

N8. Primary Caregiver has a Current Substance Abuse Problem

The primary caregiver has a *current* alcohol/drug abuse problem, evidenced by use causing conflict in home, extreme behavior/attitudes, financial difficulties, frequent illness, job absenteeism, job changes or unemployment, or driving under the influence, traffic violations, criminal arrests, disappearance of household items (especially those easily sold), or life organized around substance use.

- a) **No problem with substances;**
- b) **Alcohol only** -alcohol abuse but no problem with other drugs; or
- c) **Other drug(s) (with or without alcohol)** - abusing drugs other than alcohol such as cocaine, marijuana, heroin, barbiturate, prescription, etc. The caregiver may be poly-addicted and may also abuse alcohol.

N9. Household is Experiencing Severe Financial Difficulty

- a) **No** -- caregiver(s) consistently pays for basic household necessities or poverty is the sole factor and caregivers are willing to access resources/services needed to correct the concern.
- b) **Yes** -- caregiver(s) cannot consistently pay for one or more basic household necessities (rent, heat, light, food, clothing). Household is not living within its means due to caregiver actions or inaction.

N10. Primary Caregiver's Motivation to Improve Parenting Skills

The assessment is based on worker judgment made by observing primary caregiver response to a safety plan or other offers of agency assistance made during the assessment.

- a) **Motivated and Realistic** - no need to improve parenting skills, or there is a need and the primary caregiver is willing and able to work with the agency within established time frames;
- b) **Unmotivated** - able, but has not demonstrated a willingness to address parenting skills issues within established time frames;
- c) **Motivated but Unrealistic** - willing to make agreed upon changes but the primary caregiver's physical, intellectual, or mental ability precludes making the changes within established time frames.

N11. Caregiver(s) Response to Assessment

Score the appropriate item based on the caregiver who is least cooperative or is least in agreement with the Social Worker.

- a) **Viewed situation as seriously as Social Worker and cooperated satisfactorily** - a single caregiver or both regard the situation as seriously as the social worker and are cooperative as evidenced by involvement in services planning for self/children, making safety plans for the child (ren), etc.;
- b) **Viewed situation less seriously than Social Worker** - *either* caregiver views the determined incident less seriously than the social worker or minimizes the level of harm to the child (ren);
- c) **Failed to cooperate satisfactorily** - *either* caregiver refuses involvement in the assessment and/or refuses access to the child (ren) during the assessment, etc.;
- d) **Both b and c** - *either* caregiver views the situation less seriously than Social Worker *and* did not cooperate during the assessment.

ABUSE SCALE

A1. Current Report is for Abuse

- a. **No** -- current report is not for abuse.
- b. **Yes** -- the current report is for abuse or both abuse and neglect. This includes any allegations under assessment even if not identified in the original report.

A2. Prior Assigned Abuse Reports -- include all reports assigned for CPS assessment for any type of abuse prior to the current assessment.

- a) **None** -- No prior *abuse* reports investigated;
- b) **Abuse Report(s)** -- any prior investigated report of any type of abuse *except* sexual abuse;
- c) **Sexual Abuse Report(s)** -- Any prior investigated sexual abuse report; or
- d) **Both b and c** -- Prior investigated reports of *both* sexual abuse and other types of abuse.

A3. Prior CPS Service History – contact other counties and states where there is believed to be prior CPS history on this family.

- a) **No** –this family has not received CPS Case Planning and Case Management Services or Child Placement services as a result of a prior finding of “substantiated” or “services needed” report of abuse and/or neglect.
- b) **Yes** –this family has received CPS Case Planning and Case Management Services or Child Placement services as a result of a prior finding of “substantiated” or “services needed” report of abuse, neglect or is receiving CPS Case Planning and Case Management Services or Child Placement services at the time of the current assessment.

A4. Number of Children in the Home

The number of individuals under 18 years of age *residing* in the home at the time of the current report, including those removed as a result of the assessment or on runaway status.

A5. Caregiver(s) Abused as Child (ren)

- a) **No** –neither caregiver was abused as a child, based on credible statements by the caregiver(s) or others.
- b) **Yes** –credible statements were provided by the caregiver(s) or others on whether *either or both* caregivers were abused as children. Abuse includes physical, sexual, and any other type of abuse.

A6. Secondary Caregiver has a Current Substance Abuse Problem

- a) **No** –the secondary caregiver has neither an alcohol nor drug abuse problem, or if there is no secondary caregiver in the home.
- b) **Yes** –secondary caregiver has a current alcohol/drug abuse problem as evidenced by use causing conflict in home, extreme behavior/attitudes, financial difficulties, frequent illness, job absenteeism, job changes or unemployment, or driving under the influence, traffic violations, criminal arrests, disappearance of household items (especially those easily sold), or life organized around substance use (*if yes, check appropriate boxes*).

A7. Primary or Secondary Caregiver Employs Excessive and/or Inappropriate Discipline

- a) **No** -- neither caregiver employs excessive and/or inappropriate disciplinary practices.
- b) **Yes** –either caregiver employs excessive and/or inappropriate disciplinary practices, particularly methods employed to punish children in the home. The circumstances of the current incident and past practices may be considered. One standard is whether caregiver disciplinary practices caused or threatened harm to a child because they were excessively harsh physically or emotionally and/or inappropriate given the child's age or development.

A8. Caregiver(s) has a History of Domestic Violence

- a) **No** -- neither caregiver has a history of domestic violence.
- b) **Yes** -- *either* caregiver has a history of domestic violence defined as adult mistreatment of another adult, evidenced by hitting, slapping, yelling, berating, verbal/physical abuse, arguments (may involve, or be blamed on, children), physical fighting (with or without injury), continuing threats, ultimata, intimidation, frequent separation/reconciliation, involvement of law enforcement and/or domestic violence programs, restraining orders, or criminal reports.

A9. Caregiver(s) is a Domineering Parent

- a) **No** -- neither caregiver is a domineering parent.
- b) **Yes** -- *either* caregiver is domineering over child(ren), evidenced by rude remarks/behavior, controlling, abusive, unreasonable and/or excessive rules, overly restrictive, overreacts, unfair, or berating.

A10. Child in the Home has a Developmental Disability or a History of Delinquency

- a) **No** – there is no history of either;
- b) **Yes** – (**Check all that apply. Score 1 if either or both exist.**)

Developmental Disability -- there is evidence that a child has a special need including mental retardation, attention deficit disorder, learning disability. or is emotionally impaired.

History of Delinquency - any child has been referred to juvenile court for delinquent or status offense behavior. Status offenses not brought to court attention but which create stress within the household should also be scored here, such as children who run away from home, are habitually truant from school, or have drug or alcohol problems

All. Secondary Caregiver Motivated to Improve Parenting Skills

The assessment is based on worker judgment made by observing secondary caregiver response to a safety plan and/or other offers of agency assistance made during the assessment.

- a) **No** - the secondary caregiver needs to improve parenting skills but is not motivated and/or able to work with the agency; or
- b) **Yes, or no secondary caregiver in home** –no need to improve parenting skills or there is no secondary caregiver. If there is a need, the secondary caregiver is willing and able to work with the agency to improve parenting skills.

A12. Primary Caregiver Views Incident Less Seriously than Agency

- a) **No** - the primary caregiver views the abuse incident as seriously as or more seriously than the agency; or this is not an abuse incident.
- b) **Yes** - the primary caregiver views the abuse incident less seriously than the agency by refusing to be involved in safety planning for self/children, refusing services, and/or minimizing the level of abuse sustained by child.

**NORTH CAROLINA
FAMILY RISK ASSESSMENT OF ABUSE/NEGLECT
POLICY AND PROCEDURES**

The Family Risk Assessment determines the level of risk of future harm in the family and determines the level of service to be provided to each family. It identifies families which have intensive, high, moderate, or low probabilities of continuing to abuse or neglect their children. By completing the risk assessment, the worker obtains an objective appraisal of the likelihood that a family will maltreat their children in the next 18 to 24 months. The difference between the risk levels is substantial. High-risk families have significantly higher rates than low risk families of subsequent reports and substantiations and are more often involved in serious abuse or neglect incidents.

The risk scales are based on research on cases with “substantiated” or “services needed” abuse or neglect that examined the relationships between family characteristics and the outcomes of subsequent abuse and neglect. The scales do not predict recurrence, simply that a family is more or less likely to have another incident without intervention by the agency. One important result of the research is that a single instrument should not be used to assess the risk of both abuse and neglect. Different family dynamics are present in abuse and neglect situations. Hence, separate scales are used to assess the future probability of abuse or neglect.

Complete both the abuse and neglect scales regardless of the type of allegation(s) reported or assessed. All items on the risk assessment scales are completed. *The assigned social worker must make every effort throughout the assessment to obtain the information needed to answer each assessment question. However, if information cannot be obtained to answer a specific item, score the item as "0."*

Which cases: All CPS maltreatment reports assigned for an assessment that involve a family caregiver. This does not apply to reports involving child care facilities; residential facilities such as group homes or DHHS facilities. This does apply to non-licensed living arrangements, the non-custodial parents home or licensed family foster homes.

Who completes: Social worker assigned to complete the assessment.

When: The risk assessment shall be completed and documented prior to the case decision. It is one of the elements considered in making the case decision.

A risk assessment shall also be completed when a new CPS report occurs in an open Case Planning/Case Management or Child Placement case.

Decision: The risk assessment identifies the level of risk of future maltreatment and guides the case decision including whether to close a report or open a case for Case Planning and Case Management or Child Placement services.

Appropriate completion: Only **one** household can be assessed on the risk assessment form. If the allegations involve maltreatment in two households and both have responsibilities for childcare, complete two separate Risk Assessment tools. In situations where the parents are not living together, a Family Risk Assessment of Abuse/Neglect will only be completed on the home of the alleged perpetrator.

In situations where an adult relative is entrusted with the care of the child and is the alleged perpetrator, the Risk Assessment is conducted in the home where the child resides. In some cases (for example, joint custody cases), it may be difficult to identify the household in which the children reside. The household which provides the majority of the child care should be selected. If that fails, choose the household where the CA/N incident took place.

Some items are very objective (such as prior CA/N history or the age of the caregiver). **Others** require the worker to use discretionary judgment based on his or her assessment of the family.

Following scoring all items in each scale, the assigned social worker totals the score for each scale and determines the risk level by checking the appropriate boxes in the risk level section. The highest score from either scale determines the risk level.

Overrides

Policy Overrides

Policy overrides reflect incident seriousness and child vulnerability concerns, and have been determined by the agency to be case situations that warrant the highest level of service from the agency regardless of the risk scale score. If any policy override reasons exist, the risk level is increased to intensive.

After completing the risk scales, the assigned social worker indicates if any policy override reasons exist. If more than one reason exists, indicate the primary override reason. Only one reason can be selected. All overrides must be approved in writing by the supervisor.

Discretionary Overrides

The assigned social worker also indicates if there are any discretionary override reasons. A discretionary override is used to increase the risk level by one increment in any case where the assigned social worker feels the risk level set by the scales is too low. All overrides must be approved in writing by the supervisor.

Discretionary overrides should be used only in exceptional cases and cannot be used to lower the risk level.