

**VIRGINIA DEPARTMENT OF SOCIAL SERVICES
FAMILY RISK REASSESSMENT**

OASIS Case Name: _____
 Worker Name: _____
 Reassessment Date ___/___/___

Case #: _____
 Supervisor: _____

Score

- R1. Number of prior neglect or abuse CPS investigations/assessments**
- a. None.....0
- b. One.....1
- c. Two or more.....2

- R2. Household has previously received child welfare services (voluntary/court-ordered)**
- a. No0
- b. Yes1

- R3. Primary caretaker has a history of abuse or neglect as a child**
- a. No0
- b. Yes1

- R4. Child characteristics (check applicable items and add for score)**
- a. ___One or more children in household is developmentally or physically disabled.....1
- b. ___One or more children in household is medically fragile or diagnosed with failure to thrive.....1
- c. ___No child has any of the above characteristics0

The following case observations pertain only to the period since the last risk assessment/reassessment.

- R5. New investigation/assessment of abuse/neglect since the initial risk assessment or last reassessment**
- a. No0
- b. Yes2

- R6. Caretaker has not addressed alcohol or drug abuse problem since last risk assessment/reassessment (check one)**
- a. ___No history of alcohol or drug abuse problem.....0
- b. ___No current alcohol or drug abuse problem; no intervention needed.....0
- c. ___Yes, alcohol or drug abuse problem; problem is being addressed0
- d. ___Yes, alcohol or drug abuse problem; problem is not being addressed.....1

- R7. Problems with adult relationships**
- a. None of the following apply0
- b. Yes, harmful/tumultuous relationships with adults1
- c. Yes, domestic violence2

- R8. Primary caretaker provides physical care inconsistent with child needs**
- a. No problems.....0
- b. Yes, problems1

- R9. Caretaker's progress with service plan (if two caretakers in household, base score on the caretaker who demonstrates the least progress)**
- a. ___Not applicable; all services unavailable.....0
- b. ___Successfully completed all services recommended or actively participating in services; pursuing objectives detailed in service plan0
- c. ___Minimal participation in pursuing objectives in service plan2
- d. ___Has participated but is not meeting objectives; refuses involvement in services or failed to comply/participate as required.....4

TOTAL SCORE SCORED RISK LEVEL. Assign the family's risk level based on the following chart:

Score	Risk Level
0-2	_____ Low
3-5	_____ Moderate
6-8	_____ High
9-16	_____ Very High

POLICY OVERRIDES. Circle yes if condition is applicable in the case. If any condition is applicable, override final risk level to very high.

- Yes No 1. Sexual abuse case AND the perpetrator is likely to have access to the child victim.
Yes No 2. Non-accidental injury to a child under age 3.
Yes No 3. Severe non-accidental injury.
Yes No 4. Parent/caretaker action or inaction resulted in death of a child due to abuse or neglect.

DISCRETIONARY OVERRIDE. If a discretionary override is made, circle yes, circle override risk level, and indicate reason. Risk level may be overridden one level higher or lower.

Yes No 5. If yes, override risk level (circle one): Low Moderate High Very High
Reason: _____

Supervisors review/approval of discretionary override: _____
Date: __/__/_____

FINAL RISK LEVEL (circle final level assigned): Low Moderate High Very High

Not included on electronic version:

CASE STATUS (at close of review):

- Case remains open for CPS services
- Case transferred to foster care services
- Case closed. If closed, reason: _____
Closure Date: _____

Family Risk Reassessment Definitions

- R1. Number of prior neglect or abuse CPS investigations/assessments.

Score the item based on the count of all investigations/assessments for any type of abuse or neglect prior to the investigation/assessment resulting in the current case. In counting investigations/assessments, the conclusion (i.e., founded or not) does not matter. Where possible, history from other jurisdictions should be checked. Exclude screened-out referrals and investigations/assessments of out-of-home perpetrators (e.g., daycare) unless one (1) or more caretakers failed to protect.

- R2. Household has previously received child welfare services (voluntary/court-ordered)

Score 1 if the household has previously received child welfare services prior to the current event. Service history includes voluntary or court-ordered family services, but does not include delinquency or CHINS services.

- R3. Primary caretaker has a history of abuse or neglect as a child

Score 1 if credible statements by the primary caretaker or others indicate that the primary caretaker was maltreated as a child (maltreatment includes neglect or physical, sexual, or other abuse).

- R4. Child characteristics

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

- Score 1 if any child is developmentally or physically disabled, including any of the following: intellectual disability, learning disability, other developmental problem, or significant physical handicap.
- Score 1 if any child in the household is medically fragile, defined as having a long-term (six (6) months or more) physical condition requiring medical intervention, or is diagnosed as failure to thrive.
- Score 0 if no child in the household exhibits characteristics listed above.
- R5. New investigation/assessment of abuse/neglect since the initial risk assessment or last reassessment

Score 2 if at least one (1) investigation/assessment has been initiated since the initial risk assessment or last reassessment. This includes open or completed investigations/ assessments, regardless of investigation/assessment conclusion, that have been initiated since the initial risk assessment or last reassessment.

- R6. Caretaker has not addressed alcohol or drug abuse problem since last risk assessment/reassessment

Indicate whether or not the primary and/or secondary caretaker has a current alcohol/drug abuse problem that interferes with the caretaker or the family functioning and he/she is not addressing the problem. If both caretakers have a substance abuse problem, rate the more negative behavior of the two (2) caretakers. Not addressing the problem is evidenced by the following:

- Substance use that affects or affected caretaker's employment; criminal involvement; marital or family relationships; or his/her ability to provide protection, supervision, and care for the child;
- An arrest since the last assessment/reassessment for driving under the influence or refusing breathalyzer testing;
- Self-report of a problem;
- Multiple positive urine samples;
- Health/medical problems resulting from substance use;
- Child diagnosed with Fetal Alcohol Syndrome (FAS) or Fetal Alcohol Effects (FAE) or child had positive toxicology screen at birth and primary or secondary caretaker was birthing parent.

Score as follows:

- Score 0 if there is no history of an alcohol or drug abuse problem.
 - Score 0 if there is no current alcohol or drug abuse problem that requires intervention.
 - Score 0 if there is an alcohol or drug abuse problem and the problem is being addressed.
 - Score 1 if there is an alcohol or drug abuse problem and the problem is not being addressed.
 - Legal, non-abusive prescription drug use should not be scored.
- R7. Problems with adult relationships

Score this item based upon current status of adult relationships in the household.

- Score 0 if there are no problems observed.
- Score 1 if yes, there are harmful/tumultuous adult relationships that are harmful to domestic functioning or the care the child receives (but not at

the level of DV). An example is a live-in boyfriend who encourages the mother's use of drugs.

- Score 2 if yes, DV is present. Household has had, since the most recent assessment, physical assault(s) or periods of intimidation/threats/harassment between caretakers or between a caretaker and another adult.

Additional information regarding assessing DV can be found in the VDSS Child and Family Services Manual, [Chapter H. Domestic Violence](#) Section 1.5.

- R8. Primary caretaker provides physical care inconsistent with child needs

Score 1 if physical care of child (age-appropriate feeding, clothing, shelter, hygiene, and medical care of child) threatens the child's well-being or results in harm to the child. Examples include the following:

- Repeated failure to obtain required immunizations;
- Failure to obtain medical care for severe or chronic illness;
- Repeated failure to provide child with clothing appropriate to the weather;
- Persistent rat or roach infestations;
- Inadequate or inoperative plumbing or heating;
- Poisonous substance or dangerous objects lying within reach of small child;
- Child is wearing filthy clothes for extended periods of time; or
- Child is not being bathed on a regular basis, resulting in dirt caked on skin and hair and a strong odor.

- R9. Caretaker's progress with service plan

Score this item based on whether the caretaker has demonstrated or is beginning to demonstrate skills learned from participation in services. If there are two (2) caretakers in the household, base the answer on the caretaker who demonstrates the least progress.

- Score 0 if not applicable. All desired services were unavailable during the last assessment period.
- Score 0 if caretaker successfully completed all services recommended or is actively participating in services; or is pursuing objectives detailed

in the service plan. Caretaker applies learned skills in interaction(s) between child/caretaker, caretaker and other caretaker, and caretaker and other significant adult(s); self-care; home maintenance; financial management; or demonstrates skills toward reaching the behavioral objectives agreed upon in the service plan.

- Score 2 if there was minimal participation in pursuing objectives in the service plan. The caretaker is minimally participating in services, has made progress but is not fully complying with the objectives in the service plan, or has not yet demonstrated the skills learned from participation in services.
- Score 4 if caretaker has participated in services but is not meeting service plan objectives, refused involvement in services, or failed to comply/participate as required. The caretaker refuses services, sporadically follows the service plan, or has not demonstrated the necessary skills due to a failure or inability to participate.

Family Risk Reassessment Guidance and Procedures

The family risk reassessment combines items from the original family risk assessment with additional items that evaluate a family's progress toward service plan goals. Research has demonstrated that, for the reassessment, a single index best categorizes risk for future maltreatment. Unlike the initial risk assessment, which contains separate indices for risk of neglect and risk of abuse, the risk reassessment tool is composed of a single index.

Which Cases: All open CPS cases in which all children who are receiving case management services remain in the home.

Who: The CPS on-going worker.

When: In conjunction with every service plan review, every 90 days after completion of the initial service plan.

A risk reassessment should be completed sooner if there are new circumstances or new information that would affect risk.

If a new referral is received while a case is open, an initial risk assessment (not a risk reassessment) will be completed during the investigation/assessment, according to risk assessment guidance and procedures.

Decisions: The risk reassessment guides the decision to close a case.

All cases in which risk is reduced to low should be considered for closure unless special circumstances exist.

Cases in which risk remains or is reduced to moderate should be considered for closure if there is a corresponding reduction in priority needs as indicated in the family strengths and needs review (see FSNA review guidance and procedures).

High or very high risk cases should remain open unless special circumstances exist.

Appropriate Completion:

Items R1–R4: Using the definitions, determine the appropriate response for each item and enter the corresponding score. Note that items R1 and R2 refer to the period of time PRIOR to the investigation/assessment that led to the opening of the current case. Scores for these two (2) items should be identical to corresponding items on the initial risk assessment unless additional information has become available.

Item R3 may change if new information is available or if there has been a change in primary caretaker.

Item R4 may change if a child's condition has changed, or if a child with a described condition is no longer part of the household (children in foster care with a plan to return home are considered part of the household).

Items R5–R9: These items are scored based ONLY on observations since the most recent assessment or reassessment.

Using the definitions, determine the appropriate response for each item and enter the corresponding score.

After entering the score for each individual item, enter the total score and indicate the corresponding risk level.

Policy Overrides:

As on the initial risk assessment, the agency has determined that there are certain conditions that are so serious that a risk level of very high should be assigned regardless of the risk assessment score. The policy overrides refer to incidents or conditions that occurred since the initial risk assessment or last reassessment.

Policy overrides require supervisor review and approval.

Discretionary Override:

Discretionary overrides are used by the CPS on-going worker whenever the worker believes that the risk score does not accurately portray the family's actual risk level. Unlike the initial

risk assessment in which the worker could only increase the risk level, the risk reassessment permits the worker to increase or decrease the risk level by one (1) step. The reason a worker may now decrease the risk level is that after a minimum of three (3) months, the worker has acquired significant knowledge of the family. If the worker applies a discretionary override, the reason should be documented.

Discretionary overrides require supervisory review and approval.