

Please Note: The assessment of family strengths and needs must include consideration of the definition of each category and critical thinking. The examples of Risk Contributors provided in each category are EXAMPLES only and NOT an all-inclusive list.

## Child Functioning

The assessment of child functioning elements is based on the existence of the characteristics and **is not conditional to the adult's responses and parenting behaviors for the risk assessment.**

### Self-Protection

The caseworker should note the child's age and past experiences of abuse and/or neglect, including how the past experiences may increase the risk of the child being abused or neglected. All children 0-5 years of age should be identified as "RC" for this element. Children 6 years of age and older should be assessed per the remaining criteria.

#### Examples of Risk Contributors

Is 0 – 5 years of age.	Is not visible to others outside of the family system.	
Does not verbalize that maltreatment is occurring.	Denies abuse/neglect.	
Accepts abusive/neglectful behavior as a way of life.	Blames self for the abuse/neglect.	
Is passive as a result of history of CA/N.		

### Physical/Cognitive/Social Development

This element refers to the degree to which a child's physical, cognitive, or social development may increase the risk of the child being abused or neglected.

#### Examples of Risk Contributors

Inability to maintain peer relationships.	Is immobile.	
Unable to recognize actions that are neglectful.	Has a specific learning disability.	
Unable to problem solve.	Unable to communicate.	
Has a cognitive disability.	Small stature and under weight.	
Unable to understand actions of "cause and effect."	Unable to recognize actions that are abusive.	
The soft spot (on the head) has not yet closed.	Has a cognitive delay relative to age.	
Requires intensive physical care (medically fragile, hearing impaired, blind).	Physical appearance does not fit cultural norms (disfigured, obese).	
Tests positive for drugs/alcohol at birth and displays signs of withdrawal or other symptoms.	Physical appearance provokes parental hostility (resembles an individual the caretaker does not like).	
Has a mental health diagnosis that impacts understanding/reasoning.	Seeks out confrontational interactions with same aged peers.	
Current stage of development creates parental frustration (e.g., the child is not potty trained, has temper tantrums, bites).	Diseases affecting motor coordination (e.g., cerebral palsy, muscular dystrophy).	
Displays developmental delays (i.e., 6 month old shows little social/emotional response to environment; 9 month old unable to grasp objects, control head, sit up; 3 year old has little or no language development; 3 year old cannot dress or feed self; 4 year old not engaging in interactive play).	Has a physical disability/diagnosis that requires special care and attention (physical therapy, diabetic, developmentally disabled, hearing impaired).	

### Emotional/Behavioral Functioning

This element refers to the child's emotional attachment and behavioral reactions/actions that may increase the risk of the child being abused or neglected.

#### Examples of Risk Contributors

Is argumentative with caregiver.	Has an eating disorder.	
Seeks negative attention by agitating others.	Cries excessively.	
Overreacts to audible noises.	Has a high energy level; in constant motion.	
Is overly sensitive to physical touch.	Unable to soothe self.	
Lacks the ability to deescalate self.	Runs away from home.	
Demonstrates sexually provocative behaviors.	Uses or has an addiction to alcohol and/or drugs.	
Involved with juvenile court (unruly/delinquent).	Resistant to toilet training.	
Exhibits anti-social behavior (lying, destruction of property, fire-setting, abuses or tortures animals).	Is defiant (physically and/or verbally) to caregiver/authority.	
Engages in committing crimes (vandalism, shoplifting, selling drugs, sex trafficking).	Requires intense emotional support from his or her caretaker.	
Unable to adapt to intrusions, transitions, and changes without distress.	Does not demonstrate an attachment to his or her caretaker.	
Unable to tolerate external events or stimulation that interferes with or diverts the child from an ongoing activity.	Unable to tolerate frustration – (how easily the child can withstand the disorganizing effects of limits, obstacles, and rules).	
Is oppositional to authority (parent, teachers, neighbors, other adults).	Behavior escalates in response to limit-setting or punishment by caretaker.	
Continues to incite adult even after hostile exchange begins.	Does not demonstrate an attachment to his or her caretaker.	
	Is sexually and/or physically aggressive toward other children.	

## Adult Functioning

The assessment of the adult functioning elements is based on the existence of the adult characteristics and certain elements are relative to the unique child's characteristics for a thorough assessment of risk.

### ***Cognitive Abilities***

This element refers to the degree to which a caretaker's/adult's cognitive functioning may increase the risk of the child being abused or neglected.

#### **Examples of Risk Contributors**

	Is not reality oriented.	Lacks understanding and reasoning skills.	
	Organic or inorganic cognitive impairment.	Cognitive delay subjects child to unsafe situations.	
	Cognitive impairment allows child to be exploited.	Does not understand supervision of a child.	
	Does not understand the basic needs of the child.	Does not understand the child's physical abilities in relation to age.	
	Does not have accurate knowledge of age-appropriate supervision for the child.	Cognitive impairment inhibiting adult from responding to an emergency situation.	
	Does not understand the child's development in relation to the child's age	Unable to recognize the child's basic needs due to cognitive impairment.	
	Does not understand the child's ability/inability to complete chores.	Does not understand the common stressors of parenting; has unrealistic expectations of the child.	
	Caretaker does not recognize/understand need to protect child.	Cognitive delay impacts understanding of sanitary home/disposal of waste.	

### ***Physical Health***

This element refers to the degree to which a caretaker's/adult's physical health may increase the risk of the child being abused or neglected. The assessment should address the caretaker's/adult's ability to interact, protect, and parent the child.

#### **Examples of Risk Contributors**

	Physical condition inhibits adult from responding to an emergency situation.	Chronic illness reduces capacity to provide for child's basic needs.	
	Episodic physical impairment that results in an inability to provide for child's basic needs.	Physical condition requires lengthy and/or frequent periods of hospitalization during which the adult is unable to care for the child.	
	Permanent physical impairment that results in an inability to provide for child's basic needs.	Physical injury that results in an inability to provide for child's basic needs.	

### ***Emotional/Mental Health Functioning***

This element refers to the degree to which a caretaker's/adult's emotional and mental health functioning may increase the risk of the child being abused or neglected. The assessment should address the caretaker's/adult's ability to interact, protect, and parent the child. The assessment should include the caretaker's/adult's ability to control impulses, anger, hostility, and physical violence.

#### **Examples of Risk Contributors**

	Is not reality oriented.	Lacks understanding and reasoning skills.	
	Actions reflect desire to harm the child.	Describes child in degrading or demeaning way.	
	Mental health impairment allows child to be exploited.	Excludes child from family activities regularly.	
	Does not understand the basic needs of the child.	Does not understand the need to supervise a child.	
	Does not have accurate knowledge of age-appropriate supervision for the child.	Mental health impairment inhibiting adult from responding to an emergency situation.	
	Does not understand the child's ability/inability to complete chores.	Does not understand the common stressors of parenting; has unrealistic expectations of the child.	
	Does not understand the child's development in relation to the child's age	Unable to recognize the child's basic needs due to mental health impairment.	
	Does not understand the child's physical abilities in relation to age.	Caretaker does not recognize/understand need to protect child.	
	Does not demonstrate love, empathy, or sensitivity to child.	Mental health impairment impacts understanding of sanitary home/disposal of waste	
	Blames child for the circumstances/incidents occurring or occurred that are beyond the child's control.	Mental health impairment subjects child to unsafe situations.	
	Frequent and severe alteration in mood produces extreme fluctuation in the adult's response to the child.	Mental health condition requires lengthy and/or frequent periods of hospitalization during which the caretaker/adult is unable to care for the child.	
	Emotional instability during which the caretaker/adult is unable to care for the child's basic needs.	Believes that child's misbehavior is intentional to provoke the caretaker/adult.	

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### **Domestic Relations (Domestic Violence)**

This element refers to the degree to which a caretaker's/adult's current and historical relationships and interactions may increase the risk of the child being abused or neglected. The assessment considers the relationship dynamics between the caretakers/adults. The assessment should examine whether a pattern of coercive control exists and results in conflictual or violent interactions thereby impacting the interaction, protection, and care of the child.

#### **Examples of Risk Contributors**

	Uses weapons to threaten or harm another person.	Has visible inflicted injuries.	
	Caretaker/adult believes the other adult will kill him/her.	Family violence in which a child attempts to intervene.	
	Uses strangulation to threaten or harm another person.	The family violence is escalating.	
	Exhibits physical aggression, temper outbursts or unwarranted reactions.	Authoritarian or controlling behaviors over other adult/caretaker.	
	Uses gestures or actions to intimidate or threaten other adults or children in the home.	Exhibits assaultive behaviors toward an caretaker/adult or child.	
	Acts of family violence interferes with parenting practices.	Family violence in which a child is harmed while attempting to intervene.	
	Current moderate level of marital or domestic discord that interferes with family functioning.	Little communication, support or attachment between adults; few positive interactions.	
	Relationships characterized by domestic conflicts, often involving physical violence, that require intervention by police, family, or others.	Caretaker/adult has a history of abusing, torturing or killing a family pet.	
	Acts of family violence impact the child regardless if the child witnessed the incident (disruption of daily routine, injuries on adult, damage to residence, arrest, and interactions between adults).		

### **Substance Use**

This element refers to the degree to which a caretaker's/adult's substance use may increase the risk of the child being abused or neglected. The assessment considers the substance use and its impact on the following: emotional responses/attachment, physical health, interactions with the child and adults, family finances, employment, and criminal activity. The severity, frequency and types of substances should be considered including the caretaker's/adult's history of substance use.

#### **Examples of Risk Contributors**

	Has periods of incapacitating intoxication.	Inability to care for child due to substance abuse.	
	Substance use creates problems in social functioning.	Caretaker/adult encourages or allows substance use by minors.	
	Use, abuse or addiction to substances inhibits judgment pertaining to parenting.	Admissions or hospitalizations for detoxification or physical problems due to substance abuse.	
	Abusing substances to the extent that control of actions is significantly impaired.	Patterns and/or frequency of substance use is increasing.	
	Becomes threatening or aggressive during periods of substance use.	The needs of the child become secondary to the use of substances.	
	Caretaker's/adult's substance use subjects child to unsafe situations.	Regularly uses illegal substances in presence of child.	
	Arrest(s) and/or incarceration(s) due to substance trafficking.	Substance use causes conflict in the relationships with other adults or children.	
	Traffic violations, arrest(s) and/or incarceration(s) due to substance abuse/use.		

### **Response to Stressors**

This element refers to the degree the caretaker's/adult's response to stressors may increase the risk of the child being abused or neglected. The assessment considers the impact the stressors have on the caretaker's/adult's emotional responses/attachments, physical health, and interactions. The assessment should identify the stressor(s), the resulting behavior(s), and the impact on the care of the child. This element is an assessment of the caretaker's/adult's ability to react and "manage" stressors. The caretaker's/adult's reactions to stressors should be documented as well as addressing how the reactions impact parenting practices. Responses to stressors which do not have negative impacts on the child's care, supervision or provision of basic needs should be identified to support the NRC rating.

#### **Examples of Risk Contributors**

	Is not reality oriented.	Lacks understanding and reasoning skills.	
	Caretaker/adult subjects child to unsafe situations.	Has an unrealistic expectation of the child.	
	Inhibits caretaker/adult from responding to an emergency situation.	Does not provide the basic needs of the child.	
	Exacerbates caretaker's/adult's pre-existing condition such as substance use/abuse, mental health, or physical condition.	Caretaker/adult rationalizes his/her lack of intervention or blames the child for the abuse and/or neglect	

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### **Parenting Practices**

This element refers to the degree to which the caretaker's/adult's parenting practices may increase the risk of the child being abused or neglected. The assessment considers the caretaker's/adult's view of the child, expectations of the child's behaviors, responsibilities assigned to the child, discipline techniques, limit setting, establishing clear boundaries, and parenting decisions. The assessment is of the parenting skills demonstrated by the caretaker/adult in relation to the elements identified within the child functioning category, such as the child's physical health and development. The assessment should identify the parenting practices which are contributing to risk (RC).

#### **Examples of Risk Contributors**

Does not provide basic needs of the child regularly.	Child is not fed food consistently.	
Overwhelmed by task of parenting and results in unsanitary or poor home conditions	Does not dress child in clothes suitable for the season regularly.	
Caretaker denies child food or water for an extended period of time.	Does not respond to or ignores child's physical, social or emotional needs.	
Does not attend to child's personal hygiene that results in rashes, dirty hair or body odor regularly.	Does not access resources to provide shelter for child.	
Does not attend medical appointments regularly.	Does not administer required medication to child as directed.	
Does not use a capable/competent person to supervise the child in the caretaker's absence.	Does not provide the child with supervision appropriate to age/development.	
Child is given responsibilities beyond his/her capabilities that are potentially dangerous (e.g., young child cooking, ironing, doing carpentry, climbing ladders, caring for infant).	Does not recognize or has little understanding of child's level of development and abilities for behaviors/tasks.	
Caretaker's behaviors indicate an unwillingness or lack of interest in parenting.	Child's request for attention or affection is ignored or met with hostility.	
Does not respond to an emergency situation involving the child.	Caretaker/adult knowingly places child at risk (e.g., leaves child with known perpetrator).	
Caretaker's/adult's typical response to misbehavior is anger and harsh punishment (verbal or physical).	Regularly excludes child from family activities.	
Provokes child to misbehave (e.g., caretaker/adult teases child to the point that child misbehaves).	Child(ren) appears to be scapegoated in family.	
Does not establish clear boundaries, limits or consistent consequences.	Actions reflect desire to harm the child.	
Does not demonstrate love, empathy, or sensitivity to child.	Predominately describes child in degrading or demeaning manner.	
Only responds to child's negative behavior.		

### **Family Functioning**

The assessment of the family functioning elements is based on an examination of all members of the family, how they interact and impact one another and the family home environment.

#### **Family Roles, Interactions, and Relationships**

This element assesses each member's relationships and roles in the family that may increase the risk of the child being abused or neglected. The dynamics and quality of the relationships between the caretaker and child; child and other adults; child and siblings; and adults should be examined. Caseworkers should also assess the history of these interactions and how they impact family functioning.

#### **Examples of Risk Contributors**

Caretaker/adult projects blame for family problems onto the child.	Almost complete lack of interaction among family members.	
Caretaker/adult denies any problem in the family and any ill effects these problems have on the child.	A member of the family demonstrates almost a total inability to form a relationship with other children/adults in the home.	
Child's physical/cognitive/social development negatively impacts the other family members' relationships/roles.	Child's emotional/behavioral functioning negatively impacts the other family members' relationships/roles.	
Caretaker's/adult's cognitive abilities negatively impact the other family members' relationships/roles.	Caretaker's/adult's physical health negatively impacts the other family members' relationships/roles.	
Caretaker's/adult's domestic relations negatively impacts the other family members' relationships/roles.	Caretaker's/adult's substance use negatively impacts the other family members' relationships/roles.	
Caretaker's/adult's response to stressors negatively impacts the other family members' relationships/roles.	Caretaker's/adult's parenting practices negatively impact the other family members' relationships/roles.	
Caretaker's/adult's emotional/mental health negatively impacts the other family members' relationships/roles.		



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### **Resource Management and Household Maintenance**

This element refers to the degree to which the family's income, economic resources, and home conditions may increase the risk of the child being abused or neglected. This element refers to the financial resources available to the family to meet and maintain basic needs. The availability and utilization of familial or community services should be examined. An assessment of whether the family has the economic resources to meet the basic needs of the family, including shelter, utilities, food, medical care, and/or clothing should be completed. Additionally, the information regarding the family's living conditions should be included.

#### **Examples of Risk Contributors**

	Housing is unsanitary, filthy, infested, a health hazard.	Exposed electrical wiring within reach of children.	
	Poor home conditions.	Piles of clothing, trash, boxes, or debris pose a fire hazard.	
	Family is homeless or moves frequently because they cannot afford to pay rent.	The physical structure of the house is unstable: holes in the floor, ceiling, and walls.	
	Excessive cockroaches, mice, rats, etc present in the home.	Caretaker's/adult's decision making regarding how to use available income impacts the ability to meet the basic needs of the child.	
	Family is frequently unable to provide for basic needs, such as food, clothing, utilities, and/or medical care.	Family is not eligible for needed community services to meet basic needs of the family.	
	Excessive garbage or rotted or spoiled food is not disposed in container.	Room covered with animal feces or urine.	
	Services needed by the family are available but unknown to the family.	Services/resources needed by the family are not available.	

### **Extended Family, Social and Community Connectedness**

This element refers to the degree to which the dynamics, quality, and frequency of interactions the family has with extended family, friends, kin, and the community that may increase the risk of the child being abused or neglected. The assessment is to include an examination of the family's extended social support network. The assessment should identify whether familial, social and community connections exist, are available, are accessible and positively impact each family member. This element prompts the identification and assessment of familial activities, family and social connections, and cultural norms to determine how they influence identified risk contributors. Caseworkers should assess whether there is a history of stressful or conflictual interactions between family members and their social supports and how the conflict impacts the family system.

#### **Examples of Risk Contributors**

	Does not utilize resources to assist with meeting the family's need for assistance with housing, utilities, transportation.	Unaware of local resources to assist with meeting the family's need for assistance with housing, utilities, transportation.	
	Lack of or has connections negatively impact the child's physical/cognitive/social development.	Lack of or has connections that negatively impact the child's emotional/behavioral functioning.	
	Lack of or has connections that negatively impact the adult's emotional/mental health.	Lack of or has connections that negatively impact the adult's physical health.	
	Lack of or has connections that negatively impact the adult's domestic relations.	Lack of or has connections that negatively impact the adult's substance use.	
	Lack of or has connections that negatively impact the adult's response to stressors.	Lack of or has connections that negatively impact the adult's parenting practices.	

### **Historical**

The assessment of the historical elements explores the dynamic of the impact on the adults current functioning and risk to the child based on the adults past experiences.

### **Caretaker's Victimization of Other Children**

This element assesses whether the caretaker and any other adults in the home have a history of victimizing children that may increase the risk of the child being abused or neglected. The caseworker should consider a review of all PCSA and law enforcement records, including any court intervention. The assessment should include the identification of any pattern of abusing children such as the age or gender of the child, specific types of maltreatment, and /or the relationship of the alleged perpetrator to the child's parent. Patterns of victimization should be identified within and outside of the children residing in the current household.

#### **Examples of Risk Contributors**

	Caretaker's/adult's past involvement with law enforcement related to crimes against children.	Caretaker/adult has previously had an involuntary termination of parental rights of a biological child.	
	Caretaker/adult has been identified as an alleged perpetrator in previously substantiated report(s) of abuse/neglect.	Caretaker/adult has a pattern of receiving ongoing services by a child protective services agency.	

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Caretaker's Abuse/Neglect as a Child			
This element assesses the caretaker's/adult's history of abuse and/or neglect as a child that may increase the risk of the child being abused or neglected. The caseworker should consider how past victimization as a child influences the parental role and parenting practices and can be associated with risk contributors identified in the Adult Category and Family Category.			
Examples of Risk Contributors			
	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting cognitive abilities.	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting physical health.	
	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting emotional/mental health.	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting domestic relations.	
	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting substance use.	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting response to stressors.	
	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting parenting practices.	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting physical family roles, interactions and relationships.	
	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting resource management and household maintenance.	Caretaker/adult's childhood physical, sexual or emotional abuse or neglect is impacting extended family, social and community supports.	
Impact of Past Services			
This element assesses the caretaker's/adult's utilization and effectiveness of past services that may increase the risk of the child being abused or neglected. The element considers all of the elements within the adult functioning category that are rated as risk contributors. The caseworker should assess if past parenting practices have been impacted by the past services received. Any behavioral change resulting from the service received should be identified.			
Examples of Risk Contributors			
	Caretaker's/adult's are not willing to attend a needed service as a result of a prior negative experience.	Caretakers/adults have felt the need to utilize services but have not used a service.	
	Service providers have refused to provide services to the caretakers/adults as a result of non-compliance or over utilization.	Caretakers/adults have been resistive to receiving any assistance from community support/services.	
	The service available did not target the specified need of the caretaker's/adult's.		
Assessment Notes			