

FAMILY ASSESSMENT FIELD GUIDE

General Information

A Family Assessment assists workers in assessing risk and identifying the strengths and needs present in the family system to determine what level of service the family needs. Included in the Family Assessment are the review of safety issues, child harm, strengths and needs assessment, family perception, risk assessment and service planning.

The Family Assessment is completed within 30 days (45 days when necessary information for the family assessment cannot be obtained within 30 days and the reasons are documented in the case record) from receipt of the child abuse, neglect, and/or dependency report.

The Family Assessment is completed on the family who is the subject of the report. For the purpose of completion of the Family Assessment, family includes the following individuals, as applicable:

- ACV(s)
- Siblings of ACV(s)
- The parent(s) or caretaker(s) of the ACV(s)
- Step/Half siblings of the ACV(s) living within the ACV's home
- Paramour of the parent/caretaker
- Children of the paramour residing in the home
- Other children residing in the home of whom the parent/caretaker has custody/guardianship
- A related or unrelated adult residing in the home who has routine responsibility for care of the ACV(s) and his/her sibling(s) (e.g., provides supervision or assists in meeting the basic needs, such as feeding and/or bathing child)

"Others" residing in the home, but not included within the definition of family are other adults residing in the household who have no responsibilities for the care of the ACV(s) and his/her sibling(s) and/or other children residing in the home regardless of their parent/caretaker's status or involvement in the report. These identified "others" will be interviewed and assessed but will not be listed as members of the family on the Family Assessment. Instead, their presence and impact on the family will be recorded within the rationales of the Strengths and Needs Assessment.

Strengths and Needs Assessment

Strengths and Needs Assessment is a systematic evaluation of all the elements to determine the family's strengths and needs. Four categories with associated elements under each category have been identified. Elements are rated by the caseworker as No Risk Contributor (NRC) or Risk Contributor (RC). The caseworker assesses how each element impacts the risk of maltreatment to a child. Each element would be considered a risk contributor if it creates or increases the likelihood of maltreatment to a child. No risk contributor would be an assessment element that neither reduces nor increases the likelihood of maltreatment to a child.

A family may have many positive attributes or characteristics. Caseworker should review all elements which are not contributing to risk to identify how they interact with those elements contributing to risk. When one element reduces the risk posed by another, a worker should consider the element that reduces the risk as a strength.

A rating of "Unknown" means that not enough information is available to evaluate whether an element is contributing to risk or not. If the element is rated "unknown," include why the information is unknown and what additional information should be obtained. The use of "Unknown" rating is permissible only with supervisory approval. Documentation of supervisory approval must be made in the case record.

The caseworker must provide a rationale for the factor to support the ratings for each element contained in that category. The rationale must include each person in the family being rated and should discuss how the individual elements interact with one another, including if any strengths for the individual exists. Specific behavioral facts, observations, or statements should be included in the rationale. Caseworkers should strive to describe the family traits specifically, not in general terms.

When using the examples for No Risk Contributor or Risk Contributor, caseworkers must take into consideration the unique characteristics of the family, adult or child and the specific dynamics of the case (how they may increase or decrease the likelihood of maltreatment to a child). The Field Guide is ONLY a guide and professional judgment must be applied in every case.

CATEGORY 1: Child Functioning

1. Self-Protection

This element addresses a child's ability to protect oneself. The caseworker should note the child's age and issues of abuse and/or neglect, including whether the child is able to recognize abuse or neglect.

Please keep in mind that it is not the responsibility of the child, regardless of age, to provide protection for themselves. The caretaker has the ultimate responsibility to protect the child.

Recommended Interview Questions:

Suggested Questions For Adults

- When and where were the children born?
- Have you discussed with your child what to do if someone hurts them? Who to call? Where to go?
- Who would your child talk to if he/she was afraid?
- How close are you to your neighbors?
- How well do you know your neighbors?

Suggested Questions for Children

- What would you do if your mother and father left you home alone?
- What would you do in an emergency? Do you have access to a telephone? Do you know the phone numbers of police, firemen, friends and relatives?
- Do you know how to use the telephone?
- If your family does not have a telephone, how would you summon help?
- Who would you talk to/tell if someone was hurting you? What would you do if someone was hurting you?
- What people do you trust?

Observations and Written Examples

Observations

- Request to see each child's birth certificate, if available.
- Observe if emergency phone numbers are posted in the home.
- Verify if there is a working phone in the home.
- Observe how isolated the home is; are there neighbors close by.

Examples of No Risk Contributor (NRC)

- Able to seek needed treatment for effects of abuse/neglect.
- Able to effectively ward off abuse/neglect by resisting physically or removing self from potentially abusive/neglectful situation (escapes or hides, does not escalate the situation).
- Able to recognize potential abuse/neglect soon enough to avoid it.
- Able, if necessary, to seek assistance of caretaker or authorities to prevent or stop abuse or neglect.
- Some ambivalence about seeking help of authorities but will turn to an appropriate supportive person (e.g., parent, grandparents).

Examples of Risk Contributor (RC)

- Able to recognize potential abuse/neglect, but not always successful at avoiding it.
- Recognizes caretaker's behavior as abusive/neglectful, but not able to avoid it.
- Makes no attempt to seek further help if rebuffed when initially seeks assistance.
- Fails to remove self from dangerous situations.
- May actually deny abuse/neglect, or passively blame self rather than perpetrator.
- Unable to inform non-abusive/non-neglectful caretaker or appropriate authorities about abuse or neglect.
- Accepts abusive/neglectful behavior as a normal way of life.

2. Physical/Cognitive/Social Development

This element refers to the degree to which a child's physical, cognitive, or social development may effect the child's vulnerability to abuse and/or neglect. It also includes how these issues effect the parent's response to the child.

Note when rating:

The condition of pregnancy during the adolescent years is not, in of itself, a risk contributor.

Recommended Interview Questions:

Suggested Questions for Adults

- Tell me about the delivery and birth of your child; any complications?
- How much did he/she weigh? What kind of prenatal care did you have? Was this a planned pregnancy?
- What are the things your child can do on his/her own? What are some of the things that you need to help him/her with?
- Does he/she have any medical problems? Who is your child's pediatrician (what is the doctor's name)? When was the last time your child saw the doctor? What did the doctor say about him/her developmentally?
- When your child is happy, what does he/she do? How about when he/she is unhappy?
- What school does your child attend? What grade? Who is his/her teacher? What kind of classes does your child take? Is your child in any special education classes and for what reason?
- How would you compare your child with others his/her age?

Observations and Written Examples

Observations

- Does the child have glasses? Hearing impairment? Leg braces? Any noticeable physical disabilities?
- How does the child talk (single words, phrases, whole sentences)? Does he/she understand when spoken to?
- Developmental milestones for preschoolers (e.g., roll, sit, crawl, walk). May use Denver Developmental or NCAST as a guide.
- Child's interaction in play with others.

Examples of No Risk Contributor (NRC)

- Child's physical, cognitive and social development are within normal range for child's age.
- If child is an infant, not premature.
- No developmental delay, specific learning disability, physical disability, congenital abnormality, chronic illness, alcohol or drug addiction.
- Corrected minor visual or hearing impairment.
- Mild chronic illness (asthma, allergies) which does not interfere with daily activities.
- Slight speech, visual or hearing impairment (uncorrected) which do not interfere with daily activities.
- Child's development slower than same age peers but no cause for alarm.

Examples of Risk Contributor (RC)

- Adolescent exhibits social and/or developmental delay.
- Child is an infant with colic/excessive crying.
- Specific learning disability requiring special education.
- Mental retardation.
- Conditions requiring leg or arm brace, crutches or other special equipment.
- Symptoms significantly reduce the child's ability to perform everyday activities. (e.g., heart condition)
- Child displays developmental delays (i.e., 3 year old has little or no language development; 6 month old shows little social/emotional response to environment; 4 year old not engaging in interactive play; 9 month old unable to grasp objects, control head, sit up; 3 year old cannot dress or feed self.)
- Child tests positive for drugs/alcohol at birth.
- Neurologically impaired.
- Diseases affecting motor coordination (e.g., cerebral palsy, muscular dystrophy.)
- Confinement to wheelchair.
- Juvenile diabetes.
- Child requires around the clock medical care or attention (e.g., apnea monitor, feeding tube, tracheotomy and suction.)

3. Emotional/Behavioral Functioning

The element identifies those behaviors of children which may increase the potential for negative caretaker responses. Also consider any behavior identified as a trigger for abusive interactions. Generally, caseworkers should be assessing if a child's behavior toward self and/or others has contributed to stressful interpersonal relationships.

Note when rating this element:

- *Recognize that lack of impulse control or attention span is affected by a child's age, gender and culture.*
- ***Make sure quiet behavior is not mistaken for depression. In order to consider emotional abuse, a connection must be made between the caretaker's behavior and the effect on the child, as demonstrated by child's behavior.***

Recommended Interview Questions:

Suggested Questions for Adults

- How would you describe your child?
- Do you feel your child has behavioral problems? If so, describe the behaviors to me.
- Has the child been involved with Juvenile Court? Suspended from school? If so, for what reason?
- Has the child ever engaged in fire setting?
- Does the child wet the bed?
- How does your child behave with pets? Siblings? Playmates?
- Does your child participate in groups? Which ones?

Suggested Questions for Children

- Are you having any problems in school? At home?
- Have you ever tried cigarettes, drugs, alcohol? How often?
- Have you ever thought of hurting or harming yourself?
- Tell me about your eating habits? What kinds of foods, how much, how often, ever get sick after eating?
- What makes you feel sad? How often do you feel sad?

Observations and Written Examples:

Observations

- Observe the child - does the child engage in age appropriate activities?
- Does the child appear happy, hyperactive, withdrawn?

Examples of No Risk Contributor (NRC)

- Child responds to age-appropriate expectations.
- Child usually responds positively to authority figures - accepts corrections and directions.
- Child generally avoids provoking adult.
- Child responds positively to parent intervention.
- Child has been diagnosed as hyperactive and is currently taking medication which is effective.
- Child has occasional temper tantrums.
- Child has limited attention span.
- Child constantly clings to parent or significant adult.

Examples of Risk Contributor (RC)

- Child is resistant to toilet training.
- Child who has non-organic enuretic or encopretic condition.
- Child appears hyperactive but has not been diagnosed as such.
- Antisocial behavior, lying, destruction of property.
- Sadness, depression - listlessness, withdrawal which impairs academic performance or peer relationships.
- Severely depressed or suicidal, self-mutilating.
- Signs of anxiety or fear (e.g., sleep disturbance, overeating) which interferes with ability to form positive social relationships.
- Anorexia/Bulimia.
- Autistic child.
- Adolescent is diagnosed oppositional defiant disorder.
- Child lacks any emotional attachments*.
- Child engages in fire-setting.
- Child tortures animals.
- Child has problems with reality. (e.g., delusions, hallucinations)
- Child's behavior escalates in response to limit-setting or punishment by caretaker.
- Child evidences a pattern of provocative behavior in presence of adult or ensures that adult finds out about misconduct.
- Child is verbally abusive to parents or other authority figures.

- Child is sexually and/or physically aggressive toward other children or adults.
- Child continues to incite adult even after hostile exchange begins.
- Child mocks adult's attempt to control misconduct.
- Child responds to abuse by physically assaulting adult, which in turn escalates the violence.
- Child has been arrested.
- Use of or addiction to alcohol and/or drugs.
- Pre-adolescent or adolescent child runs away to high risk environment (e.g., crack house).
- Youth engages in prostitution.
- Habitual delinquent behaviors leading to recurrent involvement with criminal juvenile justice system.
- Truancy

**** A child who lacks emotional attachments could have been subjected to separation from primary caretakers. Caseworkers need to be aware that multiple placements with alternate caretakers may contribute to the development of attachment/bonding disorders in children. Consequently, caseworkers should attempt to avoid multiple placements for all children, but especially young children because of the potential effects on their ability to attach and bond to others.***

CATEGORY 2: Adult Functioning

4. Cognitive Abilities

This element refers to the caretaker's and/or other adult's ability to comprehend risk to the child and respond with appropriate protective action. It is also concerned with the level of maturity demonstrated by the adult, including the caretaker's ability to make judgments regarding a child's welfare.

Recommended Interview Questions:

Suggested Questions for Adults

- How did you do in school? Did you graduate from high school? What is the highest grade you completed? Did you have difficulties in school academically? Were you in any special education classes?
- How do you manage your money? Do you need assistance managing your finances? Do you understand the need to manage your money?
- Do you understand what you need to provide your child? Do you understand what a child's basic needs are? Do you feel capable of providing these needs, including preparing meals?
- Give examples of time when you felt you protected your child; also of times when you felt you did not protect your child. In the latter, what would you do differently?
- If your child came to you and confided that they had been the victim of some type of abuse or neglect, what would be your response?
- Does your child need you to protect him/her? From who or what?

Observations and Written Examples:

Observations

- Through observation and ongoing conversation, assess parental ability to manage money (including circumstantial evidence), prepare meals and understand child's basic needs and need for protection.

Examples of No Risk Contributor (NRC)

- Adult is cognitively able to manage finances, prepare meals and provide for the child's basic needs.
- Adult understands the need to protect the child from abuse and/or neglect and is willing and able to do so.
- Adult recognizes the need to protect child and is willing to do so but is occasionally unavailable to protect child.
- Adult has made some effective attempts to protect child.

Examples of Risk Contributor (RC)

- Adult lacks understanding and reasoning skills.
- Cognitive impairment may inhibit adult from responding to an emergency situation.
- Cognitively impaired adult unable to recognize and provide for the child's basic needs.
- Cognitive impairment allows child to be exploited.
- Cognitively impaired adult places child in physical danger.

5. Physical Health

Caseworkers assess the caretaker and/or other adults' physical health in relation to their ability to interact with the child, to protect the child, and to provide appropriate parenting to the child. It includes an individual's physical ability to intervene to protect a child.

Recommended Interview Questions:

Suggested Questions for Adults

- Do you have any physical or medical problems?
- How is your health? Who is your doctor? Have you ever been hospitalized? Are you on any medication now? Were you in the past?
- Have you ever been physically injured and could not care for your child?
- Do you receive SSI disability? If so, what for?

Observations and Written Examples:

Observations

- Note whether there are any obvious physical impairments and inquire as to the history and current affects on parenting abilities.

Examples of No Risk Contributor (NRC)

- Adult does not have any physical or medical problems.
- Physical disability may exist but does not interfere with adult's mobility and dexterity (e.g., missing limb with artificial replacement.)

Examples of Risk Contributor (RC)

- Chronic illness or disability reduces capacity to supervise, discipline or monitor child.
- Physical condition may inhibit adult from responding to an emergency situation.
- Episodic or permanent physical impairment results in periodic inability of adult to run household or provide for child's basic needs.
- Physical illness or disability prevents adult from cooking for child, bathing child, making necessary purchases, for periods of months or more.
- Physical condition requires lengthy and/or frequent periods of hospitalization during which the adult is unable to care for the child.

6. Emotional/Mental Health Functioning

This element refers to the adult's emotional and mental health functioning, including how it may impair the caretaker's capacity to provide care to self and/or child. It also includes the adult's ability to control impulses of anger, hostility, and physical violence.

Recommended Interview Questions:

Suggested Questions for Adults

- What do you do when you get angry?
- What do you like most about yourself?
- What do you like least about yourself?
- Have you or anyone in your family ever been in counseling? (Request adults to sign release of information to contact other professionals involved with them.)
- Do you ever feel too tired to begin another day?

Observations and Written Examples:

Observations

- Assess through conversation whether there may be a serious mental or emotional impairment, and seek formal confirmation if warranted (e.g., hysteria, flat affect, depression.)

Examples of No Risk Contributor (NRC)

- Adult does not exhibit any emotional or mental health impairment.
- Adult does have an emotional or mental health impairment, but this condition is under control and is not inhibiting adult's ability to provide care, guidance and support to the child(ren.)

Examples of Risk Contributor (RC)

- Chronic emotional or mental condition reduces capacity to supervise, discipline or monitor child.
- Emotional or mental condition may inhibit adult from responding to an emergency situation.
- Frequent and severe alteration in mood. (e.g., intermittent depression, periods of agitation, hysteria or apathy) produces extreme fluctuation in the adult's response to the child. (e.g., ignores child, over-reacts to child's needs, becomes hostile.)
- Episodic or permanent emotional or mental impairment results in periodic inability to run household or provide for child's basic needs.
- Emotional or mental illness or disability is present that prevents adult from cooking for child, bathing child, making necessary purchases, for periods of months or more.
- Emotional or mental condition requires lengthy and/or frequent periods of hospitalization in which the adult is unable to care for child.
- Emotional or mental condition allows child to be exploited.

7. Domestic Relations (Domestic Violence)

Caseworkers should assess the dynamics and quality of relationships. Historical or current conflictual or violent interactions between adults should be carefully assessed. Caseworkers should look for evidence that one caretaker's behaviors or actions may be directly responsible for stressful interactions with the other and how caretakers respond to problems or stress in their interactions.

Recommended Interview Questions:

Suggested Questions for Adults

- How do you and your partner (e.g., spouse, boyfriend) handle disagreements?
- How would you describe your relationship with your partner?
- How do you and your partner cooperate with one another?
- How do you and your partner communicate with one another?
- Have you ever been mistreated by your partner? How? Have you ever been hit, slapped, or bruised by your partner?
- Have you ever mistreated your partner? How? Have you ever hit, slapped, or bruised your partner?
- Have you been involved in previous relationships where you were mistreated by a partner?
- Have the police ever been called to your home due to a domestic dispute?
- Have you ever felt intimidated or threatened by a partner?
- Have you ever filed a restraining order or criminal complaint against a partner?

Suggested Questions for Children

- How do your caretakers get along?
- Have you ever seen your caretakers argue?
- Have you ever seen your caretakers fight physically? Do they verbally fight?
- Has anyone ever gotten hurt during these fights?
- Has the police ever come to your house because your caregivers were fighting?

If members of the family and the child(ren) do not report issues or concerns regarding domestic violence in response to the above or similar questions, the assessment of domestic relations via interviews can be concluded. However, should other corroborating information concerning domestic violence such as police reports present itself during the course of the assessment/investigation, more pointed questions as outlined below should be asked.

If the report alleged that domestic violence occurs or has occurred between the caretaker and a partner or issues concerning domestic violence are uncovered during the assessment/investigation, the following are examples of suggested questions to ask the adult victim and adult aggressor.

Suggested Questions for Adult Victim when Interviewing Alone

Assessment of Dangerousness of Batterer

- Does your partner ever prevent you from leaving home, working or going to school?
- Does your partner destroy your possessions or things of value to you?
- Does your partner monitor your activities or phone calls?
- Does your partner accuse you of being unfaithful?
- Has your partner ever threatened to commit suicide?
- Has your partner ever hit, slapped, pushed or kicked you?
- Does your partner own or have access to a weapon? Has he ever attacked you with a weapon?
- Are weapons kept in the home presently? Where? Are they loaded or unloaded?
- Does your partner have a history of violent behavior outside the home?
- Is there a criminal record including assaults of you?
- Does your partner engage in reckless behavior? Describe.
- Has your partner ever forced you to have sex or to participate in sexual activities that make you uncomfortable?
- Has your partner ever hurt or killed a pet?
- Does your partner have a history of depression or other mental illness?
- Does your partner abuse drugs or alcohol?
- Does your partner threaten or assault people who try to help you?

Assessment of Risk to Children

- Has your partner ever threatened to hurt or kill your child?
- Has your partner ever removed or threatened to remove the child from your care? What happened?
- Has your partner hit your child with belts, straps, or other objects which have left marks, bruises, welts or other injuries?

- Has your partner touched your child in a way that made either you or the child uncomfortable?
- Has your child tried to intervene to protect you from your partner? Was he/she ever injured as a result?
- Has your child ever been unintentionally harmed when objects were thrown or weapons used in the home?
- Does your child's behavior remind you of your partner's behavior? If yes, describe.
- Do you have to use physical punishment to get your child to behave? If yes, describe.
- Does your child ever try to hurt him/herself, pets or destroy possessions?
- Is your child anxious or fearful of leaving you?
- Does the teacher/babysitter/daycare provider complain about your child's fighting behavior (fighting, destroying property, not paying attention, withdrawn)?
- Has your partner ever assaulted you while you were holding your child?

Assessment of Adult's Attempts to Seek Help and Service Needs

- Is your extended family aware of the abuse? How have they been supportive or you?
- Have you told anyone outside the family about the abuse (friend, clergy, co-worker, doctor)? How have they been supportive of you?
- Have you ever seen a counselor/therapist? Has your partner ever seen a counselor? Was counseling helpful?
- Have you ever left the home as a result of the abuse? If yes, when did this occur and where did you stay? How long?
- Did you take the children with you when you left? If not, why?
- Have the police ever been called for assistance? Who called?
- Have you ever gone to court to press charges or file a restraining order?
- Have you utilized a battered women's program? What happened?
- Do you want to separate from your partner? If yes, where would you go? If no, how can we help to ensure the safety of you and your children?

Suggested Questions for Adult Aggressor

Caution should be taken to interview each party separately.

- What do you and your partner do when you have a disagreement?
- Have you ever been arrested or charged with domestic violence? Assaulting another person? Any other crimes?
- Have you ever left home as a result of the abuse? If yes, when did this occur and where did you stay? How long?
- Have the police ever been called for assistance? Who called?

Observations and Written Examples:

Observations

- Complete a criminal record check.
- Observe the condition of the home: broken door frames, holes in walls, broken windows and any dangerous pets.

Examples of No Risk Contributor (NRC)

- Adults in the family do not interact with each other in a violent manner.
- No emotional, sexual or physical abuse of spouse/partner.
- Adults in the family have sporadic verbal arguments and disagreements.
- Adults handle verbal arguments and disagreements in a non-violent manner.

Examples of Risk Contributors (RC)

- Chronic serious arguments and disagreements between adults and/or others in the home which causes stress or is harmful to domestic functioning.
- Little communication, support or attachment between adults; few positive interactions.
- Adult is repeatedly involved with abusing partners.
- Either adult has a history of domestic violence, as a perpetrator or a victim.
- Domestic violence resulting in bruising, bruised eye, scratches, broken bones, internal injuries, concussion, burns or death.
- A relationship characterized by domestic conflicts, often involving physical violence, that require intervention by police, family, or others.
- Family has arguments which include shoving, hitting, slapping, verbal abuse or throwing objects.
- Current moderate level of marital or domestic discord that interferes with family functioning.
- Threatening with a lethal weapon.
- Adult has a history of torturing or killing a family pet.

8. Substance Use

The caseworker should evaluate the effects of substance use on the adult's emotional and physical state, including the caretaker's ability to control interaction with the child. The effects the substance use has on family finances, employment, and criminal activity should be assessed. The caseworker assesses previous history of substance use, the severity/duration of substance misuse, and the escalation of severity of misuse over time.

Recommended Interview Questions:

Suggested Questions for Adults

- What jobs have you held in the last three (3) years?
- What is the source of your income?
- What do you usually spend your money on?
- Were you ever behind in your rent/mortgage? If yes, how often does this occur?
- Have you ever had your utilities turned off? If yes, when did this happen? How often has this happened?
- Do you receive food stamps?
- Have you ever spent all of your food stamps, but ran out of food?
- How many times has this happened? How often does this happen?
- Tell me what a typical day is like for you.
- Tell me about your friends? What kind of things do you do together?
- How would you describe your relationship with _____?
- Have there been changes in your relationships? (**May want to inquire about any violence in their relationships*)
- What medication do you take (prescription and over the counter)?
- How often do you drink? Smoke?
- How much do you drink? Smoke?
- When was the last time you drank? Smoked?
- When have you used cocaine? ...Marijuana?
- When did you first started using ...?
- Do others see your substance use as a problem?
- Would you be willing to take a random drug test?

Suggested Questions to ask Children

- Who do you know that drinks alcohol, smokes pot/crack, or "Huffs" (inhalant)? What about people in your family?
- Does your parent usually act the same all of the time or are they nicer/meaner on some days?
- When do people in your house usually sleep?
- What do you know about "Huffing", etc.? Do you know anyone who is "Huffing"?

Suggested Questions for Others

- Have you seen any alcohol, drugs, inhalants in the house? Describe what you saw.
- When was the last time you saw _____ use alcohol? Drugs?
- Why do you believe there are alcohol, drugs or inhalants involved?

Observations and Written Examples:

Observations

- Observe home for drug paraphernalia and/or any strange odors.
- Observe parents' behavior.
- Observe number and types of persons coming in and out of home.
- Complete a criminal record check, including traffic offenses.

Examples of No Risk Contributors (NRC)

- Adult has no known or suspected history of alcohol abuse or drug addiction.
- Adult does not use illegal drugs.
- Adult drinks socially and the use of alcohol has no effect on parenting abilities.
- Adult does not currently use substances, but has a history of alcoholism/chemical dependency with/without treatment.
- Adult has episodes of occasional drinking that incapacitates, but does not result in abusive or neglectful behavior to the child(ren.)

Examples of Risk Contributors (RC)

- Adult's use, abuse or addiction to alcohol or other substances leads to abusive or neglectful behaviors towards the child(ren.)(e.g., does not provide appropriate supervision, does not provide basic needs, physically harms child)
- Adult's use, abuse or addiction to alcohol or other substances greatly inhibits his/her judgment pertaining to parenting his/her

child(ren.)

- Patterns and/or frequency of alcohol or substance use is increasing.
- Due to alcohol or substance use, the needs of the child(ren) become secondary.
- Adult regularly abuses alcohol or other substances to the point of having problems in social functioning (legal problems, misuse of available funds.)
- Adult regularly uses marijuana or other illegal substances and/or uses in presence of children
- Intoxication of adult causes conflict in the home.
- Adult encourages, allows and/or knowingly provides substance use by minors.
- Adult has had multiple periods of incapacitating intoxication. (e.g., passing out, emotional collapse)
- Substance abuse or addiction prevents caretaker from attending work and/or maintaining consistent employment.
- Adult becomes threatening or aggressive during periods of substance abuse.
- Adult becomes threatening or aggressive during periods of substance abuse.
- Adult has had repeated admissions for detoxification.
- Adult has been hospitalized because of physical problems due to substance abuse.
- Adult has had repeated traffic violations, criminal arrests, and/or incarcerations directly related to substance abuse.
- Adult's life is organized around substance use.

9. Response to Stressors

The focus of this element is on the intensity, severity, and the number of stressors affecting the care of the child. The stressors need to be identified along with each adult's response to those stressors.

Recommended Interview Questions:

Suggested Questions for Adults

- How are you feeling? How are things going for you?
- What are the family problems with which you struggle?
- Are you having any difficulties that you'd like me to know about/need some help with?
- What are the major worries on your mind today?
- Does this problem affect your child? If so, how?
- What do you think are the causes of these problems?
- Give examples of when you feel totally in control of your family, and times when you feel you have no control.
- Who do you look to for support? What kind of support do they offer you?
- What have you tried in the past to fix the problem? Do you know why that hasn't worked? Is there anything you would like to try now, which I could help you with?

Observations and Written Examples:

Observations:

- What is the adult's reaction to agency involvement? How does the adult's reaction to agency involvement affect his/her response to stress?
- What is the adult's reaction to allegations of the report? How do they view the incident which generated the report? Do they understand the seriousness of the allegation?

Examples of No Risk Contributors (NRC)

- Few stressors; care of child not affected by parent's response to these stressors.
- Adult is confident of ability to manage normal routine under stress and appears to be doing so.
- Disruptions in family's life or routine have led to anxiety, irritation, denial; minor depression (e.g., occasional marital conflict has caused some tension; illness of family member has caused financial problems) creating minor family conflict.

Examples of Risk Contributors (RC)

- Stressors prevalent; adult's response causes disruption in providing care to child(ren.)
- Family crises and/or losses have led to intense anxiety, major depression, frequent family conflict. (e.g., marital separation has led to severe alcohol abuse; serious illness of elderly parent has impoverished family or caused serious marital conflict, loss of income due to main provider having to leave the home).
- Stressors appear to be causing significant disruption to parenting skills.
- Family crises and/or losses have led to serious psychiatric problems, violence, criminal behavior, divorce. (e.g., death of a child leads to suicide attempt by parent; loss of job or problems with special needs child begins cycle of domestic violence)
- Stressors appear to be causing adult to minimize the seriousness of the allegation, affecting his/her involvement in the investigation.

10. Parenting Practices

This element assesses the caretaker's view of the child and expectations based on the child's age, physical, and developmental stage. The adult's use of discipline shall be addressed. Whether the adult is over-controlling as evidenced by unreasonable and/or excessive rules, being overly demanding or overbearing, overreaction, or berating/demeaning responses to relatively minor infractions must also be assessed. Caseworkers assess whether the caretaker views the child as a source of frustration or a problem and is motivated to improve parenting skills.

Recommended Interview Questions:

Suggested Questions for Adults

- What is your meal or feeding schedule? What do you feed your children at each meal?
- What does your child do that upsets you?
- What do you do when your child acts out or misbehaves?
- Tell what you expect your child can do on his/her own. What are things you must help with/do for her/him?
- What do you do to have fun with your child? To teach your child?
- What kind of help do you provide your child with school work?
- Describe your child's daily schedule (getting up, dressing, meals, baths, naps, bedtime).
- How do you comfort your child when he/she is upset?
- Describe your beliefs on potty-training? How did you potty train your child? When did you potty train your child?
- What does your child do that really makes you happy or proud?
- What does your child do that really makes you angry?
- Every child does things he/she is not supposed to do, what does your child do that he/she is not supposed to do? When he/she does this, how does it make you feel? What do you do?
- Why do you think your child acts this way?
- Describe how you discipline your child.
- Which of your children misbehaves the most? The least? What kind of discipline works with each particular child?
- Does your child ever strike back at you? What do you do then?

Suggested Questions for the Child

- Ask the child to describe the family's daily routine (getting up, dressing, meals, bath and bedtime.)
- What do you do alone? What does mom/dad or the family members help with or do for you?
- Who checks your homework, attends parent/teacher conferences, etc.?
- What does your mom or dad do when you've broken a rule?
- How do you know when the adults in your family are angry?
- What happens when you get disciplined? (If hitting, what does the adult hit you with?)
- What do you do when you are disciplined?
- Do you ever have any marks?
- What happens when you come home from school with a good paper?
- How does your brother/sister get disciplined?
- Show how you stand in the corner when you're disciplined. Which corner? How long do you have to stay there?
- How long do you have to stay in your room? What can you do when you're there? What happens when it's time to eat? What do you do if you have to use the bathroom? Have you ever been locked in your room?

Suggested Questions for Others (relatives, school teacher, etc.)

- What have you observed about adults parenting skills?
- How do adults show the children they are loved?
- For teacher- Does any family member participate in child's educational process? What have you observed regarding parental involvement/understanding of child's physical and educational needs?

Written Examples:

Examples of No Risk Contributors (NRC)

- Adult demonstrates understanding of child's capabilities given his/her age and intellectual development, responds appropriately to child(ren) and is usually appropriate in what he/she expects of the child(ren.)
- Consistently rewards appropriate behavior and provides consequences for negative behavior.
- Spontaneously praises child.
- Allows child to try new tasks and provides assistance as needed.
- Adult effectively communicates rules and limits to child.
- Has some inappropriate expectations but does not discipline child for not meeting them.
- May contradict self or provide child with unclear boundaries or expectations at times.

- Expresses praise, though not as freely as criticism.
- Occasionally inconsistently follows through with rewards or age appropriate discipline.
- Adult understands that children have different needs at different ages and usually is able to meet those needs.
- Adult typically responds appropriately to child's misconduct.
- Adult provides appropriate structuring and consequences.
- Adult typically responds calmly to child's misbehavior but becomes angry or frustrated on occasion.
- Adult may be inconsistent around limit setting.
- Adult responds with irritability/yelling to negative attention-getting behavior.

Examples of Risk Contributor (RC)

- Has little understanding of child's level of development and punishes child for failing to meet inappropriate expectations.
- Physical punishment that results in harm to a child. (e.g., bruises, cuts, welts, burns)
- Provides no age appropriate limits or boundaries to the child.
- Adult only responds to child's negative behavior.
- Positive or age-appropriate behavior is ignored.
- Adult has no understanding of child's capabilities or needs. (e.g., spansks infant for crying, expects child to learn basic self-help skills without parent's teaching)
- Does not understand or denies child's need for stimulation. (e.g., does not talk to child, does not play with child)
- Punishes child for engaging in positive behaviors. (e.g., adult punishes three (3) year old who dresses self imperfectly)
- Adult is overwhelmed by task of parenting and feels helpless to manage child's behavior.
- Abandons effort to provide guidance, discipline.
- Refuses to recognize the child's physical, social, developmental, intellectual behavior and emotional limitations.
- Adult responds excessively to instances of minor misconduct.
- Adult's typical response to misbehavior is anger and harsh punishment (verbal or physical).
- Adult's typical response to misbehavior is rage or "out of control" reaction.
- Adult believes and verbalizes that child deliberately misbehaves to "get his goat" or to cause problems.
- Adult provokes child to misbehave and responds abusively. (e.g., adult teases child to the point that child misbehaves)
- Adult responds to child's behavior by utilizing physically assaulting methods which in turn escalates the violence.

CATEGORY 3: Family Functioning

11. Family Roles, Interactions and Relationships

This element assesses the role that each member of the family plays within the family system. The dynamics and quality of the relationship between caretaker and child should be examined. Caseworkers should assess whether there is a history of stressful or conflictive interactions between caretaker and child.

Recommended Interview Questions:

Suggested Questions for Adults

- Tell me about your family. Are you proud of your family?
- Do you enjoy spending time as a family?
- How does the family spend time together?
- What role does each family member play?
- Do you ever say things to family members that you later wish you had not? If so, what?
- Tell me about your children.
- How would you describe each of your children?
- How do you feel about your children? How would you describe their feelings for you?
- Do you have a favorite child? Why/why not?
- Which child do you think you'll be most proud of when he/she grows up?
- What do you like to do with your children?
- Approximately how much time do you and your child play (interact) together each day?
- What is your child's favorite game (activity)?
- What is it like to take care of your child when he/she is sick?
- What are the rules with respect to each particular child?
- What is your understanding of why I am here? How do you feel about my being here?
- What are the family problems with which you struggle?
- Does this problem affect your child? If so, how?
- What do you think are the causes of these problems?
- What have you tried in the past to fix the problem? Do you know why that has not worked? Is there anything you would like to try now, which I could help you with?

Suggested Questions for Children

- What kinds of things do you do together with adults in your family? (*Be aware of cultural differences*)
- If you could change something about your parents, what would you change?
- When something is bothering you, do you share it with anyone? Who? Why them?
- Who takes care of: Baby? Siblings? You? Mom? Dad?
- What are your jobs?
- Who wins arguments?
- What are the family rules you must follow? Who enforces them?
- Are they the same for all your brothers/sisters?
- Do you help mom/dad? Give examples.

Observations and Written Examples:

Observations

- Observe every household members' interaction with one another.
- When someone interrupts, how do family members react?
- How does the parent respond to the child(ren)'s actions or requests?
- Do the adults smile at one another, including the children?
- Does the adult look at the family member when he/she is speaking?
- Do the adults touch or hold the child(ren)?
- Do the adults talk about family members with admiration, love or respect during the course of the conversation?
- Does the child(ren) warm up to new people after a period of time?
- Does the child(ren) play independently?
- Do the children attempt to share experiences with the adults and do the adults engage?
- How does the adult react to the child(ren)'s expression of emotion (e.g., pain, emotional upset, excitement, fear)?
- Are there any pictures of family members around the home?
- Are children's projects of artwork displayed?

- Do the adults seem interested in the child(ren)?
- Watch interaction between family members. Look for physical contact and who initiates it.

Examples of No Risk Contributors (NRC)

- Each child boldly explores environment while periodically returning to caretaker for encouragement.
- Family interactions are frequent and pleasurable to all.
- Adult immediately and consistently responds to each child's needs.
- Each child demonstrates respect for family values.
- Adult is proud of each child's accomplishments.
- Adult is empathetic with each child's pain/distress.
- Child(ren) internalizes caretaker expectations without inner conflict/emotional problems.
- Child(ren) have positive roles within the family.
- Family members openly express affection to one another.
- Family members' interactions occur frequently but are occasionally marked by tension and/or frustration.
- Adult understands child's messages but occasionally ignores them.
- Child occasionally doubts caretaker's love.
- Adult demonstrates occasional lack of interest in child's accomplishments.
- Adult rarely praises child, but can identify strengths or positive qualities in child if asked.
- Family rarely makes spontaneous expression of affection towards one another, but family members do respond to affection-seeking or expression of affection when it does happen.
- Family members are treated fairly.
- Only responsibilities that a child can handle, due to the child's age and physical and mental capabilities, are given to the child.
- Child is included in age-appropriate family activities.
- Child is given responsibilities that are unusual for a child at his/her level of development, but appears to handle them reasonably well.
- Child(ren) are not blamed for family problems or circumstances beyond his/her control.
- Adult understands and acknowledges problem(s) within the family and the nature and severity of effects on the child(ren.)

Examples of Risk Contributor (RC)

- Child's request for attention or affection is ignored or met with hostility.
- Adult avoids interaction and time spent with child(ren) if possible (even child care tasks.)
- Adult only sees negative qualities in child, does not praise or encourage child.
- Almost complete lack of interaction among family members.
- Child fails to seek out caretaker when confronted with danger or the unknown.
- Child must frequently engage in negative attention-getting behavior to elicit a response from the parent.
- Adult rarely touches, holds or looks at the child.
- Adult shows no empathy with child's pain.
- Child shows little distress at extended absence of caretaker.
- Adult demonstrates little or no ability to recognize child's needs and/or messages.
- Child demonstrates almost total inability to form relationships with other children/adults.
- Adults express dislike for parenting and/or for child(ren).
- Adult consistently speaks to and about child(ren) in belittling, critical or resentful manner.
- Adult prevents child from other social contacts and affectionate relationships.
- Child(ren) appears to be scapegoated in family.
- Child(ren) is forced to work before legally qualified to do so.
- Child(ren) is given parental responsibilities clearly beyond his/her capabilities; these responsibilities have ill effects or are dangerous (e.g., exhaustion, distress, chronic conflict, role confusion, young child cooking, ironing, doing carpentry, climbing ladders).
- Child(ren) is consistently and actively excluded from family activities, blamed for anything negative that happens and physically punished for events beyond his/her control.
- Adult projects blame of family problems onto the child(ren) and others.
- Adult acknowledges family problems but fails to recognize their severity.
- Adult denies any problem in the family and any ill effects these problems have on the child(ren).
- Adult maintains denial of family functioning even when confronted with evidence of family problems.

12. Resource Management and Household Maintenance

The caseworker should consider whether the family has the economic resources to meet the basic needs of family, including shelter, utilities, food, medical care, and/or clothing. Whether or not a lack of income or family not living within its means is due to the adult's actions should also be assessed.

Recommended Interview Questions:

Suggested Questions for Adults

- What is your family income?
- Is your income regular/consistent?
- Can you meet the basic needs of the family (food, clothing, rent, utilities) regularly/consistently?
- Are you able to provide for the family's medical needs?
- Have you ever used any social service (e.g., public assistance, food pantry, WIC, subsidized housing) to assist you in obtaining the basic needs of the family?
- Have you ever had to move because you could not afford rent? How frequently does this happen?
- How do you budget your family income?

Written Examples:

Examples of No Risk Contributors (NRC)

- Income regular/consistent and exceeds basic needs.
- Income regular/consistent and meets basic needs. (e.g., receiving public assistance and meets basic needs)
- Income is irregular/inconsistent, but able to meet basic needs during periods of no income.

Examples of Risk Contributors (RC)

- Family cannot afford housing or can only afford inadequate housing.
- Family is frequently unable to provide for basic needs, such as food, clothing, utilities, and/or medical care.
- Family moves frequently because they cannot afford to pay rent.
- Family has adequate income/resources but misuses them to the extent that basic needs of the family are not being met.

13. Extended Family, Social and Community Supports

Caseworkers assess whether strong and positive support systems to protect a child or to assist the family are available, accessible, and adequate. Whether the support systems are negative or create conflict will also be assessed.

Recommended Interview Questions:

Suggested Questions for Adults

- What was the hardest thing you have had to face in your life? Who did you call when that happened? How did they help you?
- Do you have any friends or relatives in town who support you and help you out?
- Do you have any friends or relatives in other cities or states you can call for emotional support? Who are they and where do they live?
- Which of your friends or relatives are you closest to?
- Who among your friends or relatives do you rely on for help?
- How often does your family attend church? What church do you attend? Does your family find it a satisfying experience?
- What do you or your family like to do for fun?
- Who do you like to spend time with when you are not taking care of your children? Doing what? How often do you get a chance to do this?
- Do you belong to any social groups or organizations (e.g., YMCA, Bowling League, Civic Club)? How long have you been involved? What frequency?

Suggested Questions for Children

- Do you have any friends? What type of activities do you like to do together? How long have you been friends? How do your friends support you?
- Do you have any relatives you feel close to? How do your relatives support you?
- Do you belong to any social groups (e.g., team sports, school clubs, Boy/Girl Scouts, Boys and Girls Club)? How long have you been involved?
- Who do you like to spend time with? Doing what? How often do you get a chance to do this?

Suggested Questions for Others (relatives, friends)

- Do the adults or children turn to you for help, support and/or companionship? How often and in what circumstances?
- Are there times you wish that the adult or child would have sought your help but did not? When?

Written Examples:

Examples of No Risk Contributors (NRC)

- Frequent face-to-face contact or activity with supportive persons.
- Reciprocal supportive contacts with extended family.
- Active membership in civic, church, or other organizations.
- Participates in social activities (e.g., YMCA, Bowling League, Boy/Girl Scouts).
- Involvement with community agencies as needed.
- Regular face-to-face contact or activity with a close friend or relative or regular telephone contact with friend.
- Occasional social activities.
- Occasional supportive contacts with extended family (may be long distance), initiated by either.
- Effective use of community resources, but could benefit from more contact.

Examples of Risk Contributors (RC)

- Irregular or no contact with supportive friend or relative.
- Rare or no social activities.
- Rare supportive contacts with extended family; only initiated by adult, who is reluctant to contact extended family.
- Adult has knowledge of community resources but there is a gap between resources available and needs.
- Lacks the skills to initiate social contact.
- Would not have anyone but professionals to call in an emergency. Family has no support system to intervene during an emergency or crisis.
- Lack of friends or other supportive relationships.
- Lack of contact or hostile contact with extended family.
- Social contacts are not emotionally supportive and may even be destructive.
- Geographic isolation (e.g., no transportation, no means to communicate).
- Definite under use of community resources or refuses to make use of available resources.
- Socially ostracized.

CATEGORY 4: Historical

14. Caretaker's Victimization of Other Children

This element assesses whether the caretaker and/or other adult in the family has a history of victimizing other children. A review of past agency records, other PCSA records, and law enforcement records and/or convictions for all adults in the family is necessary when assessing this element.

Recommended Interview Questions:

Suggested Questions for Adults

- Do you have any children other than those living in this household? If so, what are their names and where do they live?
- Have you ever had contact with a child's protective services agency?
- Do you have a police record of any kind?
- Has anyone ever reported a concern about you in the past? What were the circumstances?

Suggested Questions for Others (relatives, school)

- Inquire about family history.

Observations and Written Examples:

Consider

- Step children, children of paramour(s), children cared for (when adult was babysitting), other relatives' children
- Adult's juvenile record if known or available

Observations

- Check case for history with agency and review.
- Verify information obtained through the assessment process.
- Contact other counties where other children might have been victimized and may have given information.

Examples of No Risk Contributors (NRC)

- There is no history of victimization toward other children.
- Information gathered indicates a history of poor parenting practices with other children, but these practices would not qualify as abuse or neglect.

Examples of Risk Contributors (RC)

- Adult has subjected another child to behaviors that would qualify as abuse or neglect.
- History of victimizing other children, multiple incidents or multiple families or children.
- Prior child abuse or neglect with another child victim(s) necessitating court intervention.
- Involuntary termination of parental rights of a child.

15. Caretaker's Abuse/Neglect as a Child

This element assesses whether or not a caretaker and/or other adult has a history of childhood abuse and/or neglect. When rating this element, the caseworker should assess the impact the childhood abuse and/or neglect (regardless of the type and severity of the abuse/neglect) has on his/her current ability to provide care, guidance and support to the child(ren).

Recommended Interview Questions:

Suggested Questions for Adults

- Tell me about your childhood. What did you do together as a family?
- What was a typical day like when you were growing up and in grade school?
- Who cooked and cleaned and took you to the doctor when you were ill?
- Who disciplined you and how were you usually disciplined?
- How effective do you think this discipline was?
- How did this kind of discipline make you feel?
- What do you think are the best ways to get good behavior from children?
- Do you feel you pleased with your parents or let them down?
- Do you feel you were ever abused or neglected as a child? When?
- Had anyone ever sexually abused you or made you feel uncomfortable in a sexual manner as a child? By whom?
- As a child, do you recall having a caseworker? If so, where did you live and what was his/her name?
- Do you feel that you have been emotionally or otherwise affected by the abuse and/or neglect?
- Did you receive any supportive services (e.g., counseling) to assist you in coping with any effects of the abuse/neglect? Were these services helpful?
- Do you feel that the abuse/neglect experienced in your childhood is currently affecting your ability to parent the child(ren)? In what ways?
- Do you recognize any differences in the way you were raised versus how you wish to raise the child(ren)?

Observations and Written Examples:

Observations

- Check adult's history as child with agency.

Examples of No Risk Contributors (NRC)

- Adult reports receiving affection, attention, support and protection from parent or other family member.
- Adult did not experience family violence.
- Adult was not a victim of neglect, physical abuse, emotional abuse or sexual abuse.
- Adult was subjected to childhood abuse and/or neglect regardless of severity, but the effects of the abuse or neglect are not affecting the adult's ability to care the child(ren.)

Examples of Risk Contributors (RC)

- Adult was subjected to childhood abuse and/or neglect, regardless of severity, which is affecting the adult to the extent that he/she is unable to provide or has difficulty providing care, guidance and support to the child(ren.)
- Adult minimizes impact of childhood abuse and/or neglect, over-estimates child's resilience (e.g., says "I grew up in a dirty, rat infested house with garbage on the floors and I am okay" or "My father used to whip me and it didn't do me any harm.")
- Adult recalls repeated beatings and/or physical attacks; recalls no appropriate discipline; adult is not currently able to provide or is having difficulty providing appropriate discipline or demonstrating appropriate parenting skills to the child(ren.)
- Adult was severely emotionally rejected and/or humiliated and is not currently able to parent or has difficulty parenting the child(ren.)
- Adult was sexually abused and received no support or protection upon disclosure; adult is not currently able to provide or has difficulty providing support, care, guidance and/or protection to the child(ren.)
- Adult reports being a victim of severe neglect that resulted in physical illness, malnourishment and emotional/psychological problems. The results of the severe neglect is currently affecting his/her ability to parent the child(ren.)

16. Impact of Past Services

This element assesses the impact, whether positive or negative, of any previous community or supportive services the adult may have utilized.

Recommended Interview Questions:

Suggested Questions for Adults

- Have you ever utilized any supportive services in the past?
- What type of services have you utilized in the past?
- What were the reasons for lack of use or the use of each service?
- How long did you use each service?
- Did you successfully complete each service?
- How did each service impact you? Does the service continue to positively/negatively impact you? How are you able to benefit from each service?

Written Examples:

Examples of No Risk Contributors (NRC)

- Adult has not felt the need to utilize any supportive services in the past.
- Adult has utilized a supportive service which has positively impacted the individual.

Examples of Risk Contributors (RC)

- Adult has felt the need to utilize supportive services in the past but has not used any service.
- Adult has utilized a past supportive service but the service has not impacted or has provided a negative impact on this individual.

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INSTRUCTIONS:

The following chart depicts what materials are to be removed from the Child Protective Services Manual and CAPMIS Field Guide and what materials are to be inserted.

REMOVE AND FILE AS OBSOLETE	INSERT/ REPLACEMENT
	Child Protective Services Manual and CAPMIS Field Guides