

## 1208 RISK ASSESSMENT

Chapter: **Child Protective Field Services**

Section: **CPS Family Assessments**



New Hampshire Division for Children, Youth and Families Policy Manual

Policy Directive: **08-03**

Approved:

Effective Date: **May 2008**

Handwritten signature of Maggie Bishop in black ink.

Scheduled Review Date:

Maggie Bishop, Director

Related Statute(s): [RSA 169-C](#)

Related Admin Rule(s):

Related Federal Regulation(s):

Related Form(s):

Bridges' Screen(s) and Attachment(s):

### Purpose

To describe the process and requirements of assessing referrals of child abuse and neglect. The primary goal of the assessment process is to ensure the safety of the child(ren).

### Policy

- I. The [Risk Assessment](#) is a tool that obtains an objective appraisal of the likelihood that a family will maltreat their child(ren) in the next 12 to 18 months. This tool does not predict recurrence, but assesses whether a family is more or less likely to have another abuse or neglect incident without intervention. [Interventions for children and families](#) are described in the following section of policy.
- II. The Family Risk Assessment is:
  - A. Completed on all child abuse and neglect assessments, where a response priority level is assigned;
  - B. Completed at the conclusion of the assessment, but no later than 60 days from the receipt of the referral by the District Office;
  - C. Based on conditions that exist at the completion of the assessment;
  - D. Completed on the household that provides the majority of the childcare. If the child resides equally in both households, select the household in which the maltreatment occurred.
- III. The CPSW must make every effort throughout the assessment to obtain the information needed to answer each question on the Family Risk Assessment Form.
- IV. Both the neglect and abuse scales are completed regardless of the type of allegations reported or assessed.
- V. A discretionary override to increase the risk level can be requested by the CPSW and approved or performed by the supervisor.
- VI. The risk level is used to [guide the interventions](#) that occur with the child(ren) and families.