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TRANSMITTAL: 95 INF-25

TO: Commissioners of
 Social Services
 Directors of
 Voluntary Agencies

DIVISION: Services and
 Community
 Development

DATE: August 3, 1995

SUBJECT: Risk Assessment
 Implementation Guidelines

SUGGESTED
 DISTRIBUTION: Directors of Services
 Child Welfare Staff

CONTACT PERSON: Services and Community Development Regional Office
 Liason or Barry Salovitz, 1-800-342-3727, ext. 3-0796
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ATTACHMENTS: None

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
			18NYCRR 428		92 LCM-26 Questions & Answers - Volume 1

The purpose of this letter is to share with you and your staff a series of case practice and risk assessment form completion guidelines that you may choose to adopt, if you haven't done so already. It is important to note that the guidelines do not create or suggest a new case documentation mandate. The focus of these optional guidelines is to provide our best thinking regarding the concept of "safety" as it specifically may pertain to those local districts and voluntary agencies who have decided to utilize the series of Risk Assessment and Services Planning Model forms for cases not involved with child protective services.

Some questions may arise regarding why these safety related guidelines are being issued now, especially when there is widespread recognition that our forthcoming CONNECTIONS initiative (New York State's implementation of a State Automated Child Welfare Information System) will address the compatibility difficulties that may be experienced when trying to apply the Risk Assessment Model to non-CPS cases. We believe that the time period that will transpire before the SACWIS case management component is fully operational justifies an interim set of suggested guidelines. Most importantly, we are convinced that these optional guidelines will be favorably received because they address a long-standing dilemma.

The following guidelines represent the Division of Services and Community Development's recommendations to local districts and voluntary agencies that have chosen to apply the New York State Risk Assessment and Services Planning Model to non-CPS cases and who are looking for guidance in applying a "safety" construct.

1. For CPS cases, the original safety concepts, definitions, and case documentation remains unchanged;
2. For non-CPS cases using the Initial, Comprehensive and Reassessment risk based UCR's, Section 1, Part A: Child Safety Review may be adapted to represent a "Child/Family Crisis Review". The appropriate documentation would be a summary of child and/or family behaviors or conditions that caused or principally contributed to a situation where someone (including the child him/herself when applicable; ex. suicide attempt) was seriously harmed or placed in immediate danger. This section would also include associated interventions taken to control the crisis.
3. For non-CPS cases, using the Initial, Comprehensive or Reassessment risk based UCR's, Section 2, Part A: Safety Decision and Response may be adapted to represent a "Child/Family Crisis Decision". The current "Unsafe" designation may reflect a "Child/Family In Crisis" and the "Safe" designation may reflect a "Child/Family Not In Crisis". Some examples of behaviors or conditions that might constitute a continuing "Child/Family In Crisis" status include: child is making suicide threats or attempts, runaway, caretakers hospitalized, homeless, juvenile delinquency, death of a family member, etc.

4. For non-CPS cases, using the Initial, Comprehensive or Reassessment risk based UCR's, Section 2, Part B: Safety Response may be adapted to represent a "Child/Family Crisis Response". The appropriate documentation would be a description of interventions that needs to be continued or initiated to prevent the immediate likelihood that a child and/or family member's behavior or condition would cause or principally contribute to a situation where someone would be seriously harmed.

If you believe that these guidelines will help your staff more closely reflect their case practice and case management responsibilities, please instruct your staff accordingly. In some instances, local districts and contracted voluntary agencies may need to negotiate expectations. In addition, we are instructing selected training contractors to offer these guidelines during appropriate training or technical assistance sessions.

Donald K. Smith