

	<b>INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY</b>	
	<b>Chapter 8:</b> Out-of-Home	<b>Effective Date:</b> October 1, 2019
	<b>Section 44:</b> Out-of-Home Risk and Safety Reassessment	<b>Version:</b> 3

<b>STATEMENTS OF PURPOSE</b>
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The Indiana Department of Child Services (DCS) will conduct an [Out-of-Home Risk and Safety Reassessment](#) on all open cases where at least one (1) child is placed in out-of-home care. The [Out-of-Home Risk and Safety Reassessment](#) will be used to structure critical case management decisions for children in placement who have a permanency goal of reunification by:

1. Routinely monitoring critical case factors that affect goal achievement;
2. Helping to structure the case review process; and
3. Expediting permanency for children in out-of-home care.

**Note:** If more than one (1) household is receiving reunification services, complete one (1) tool on each household.

The [Out-of-Home Risk and Safety Reassessment](#) will be conducted at least every 180 days and prior to completing an updated [Case Plan \(SF 2956\)](#). The [Out-of-Home Risk and Safety Reassessment](#) will also be conducted when reunification is recommended, when a change in the permanency planning goal is identified, and at any time if there are new circumstances or new information that affect risk.

The [Out-of-Home Risk and Safety Reassessment](#) guides decision making to:

1. Return a child to the removal household or another household with a legal right to placement (non-removal household);
2. Temporarily maintain out-of-home placement; and/or
3. Terminate reunification services and implement a different permanency plan.

**Note:** The removal household is the household from which the child was removed. If the designation of the removal household is unclear due to joint custody, then the household where the most serious maltreatment occurred is to be designated the removal household. Non-removal households are those with legal rights to the child (e.g., father's home and mother's home).

Code References

N/A

<b>PROCEDURE</b>
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The Family Case Manager (FCM) will:

1. Print the [Out-of-Home Risk and Safety Reassessment](#) and answer all questions;
2. Determine the Reunification Risk Level, noting any appropriate Overrides;
3. Evaluate the [Visitation Plan](#) by indicating visit frequency and quality of visit;
4. Determine if any safety threats exist;
5. Indicate which protective factors mitigate the safety threats;

6. Indicate if any safety interventions could control the threat to safety;
7. Identify the safety decision;
8. Reference the Placement/Permanency Plan Guidelines located in the [Out-of-Home Risk and Safety Reassessment](#) to obtain a recommendation;
9. Use the Override function, in conjunction with supervisory approval to document a different case outcome;
10. Use the Recommendation Summary of all of the Reunification Assessment Components to make case recommendations;
11. Discuss the results of the [Out-of-Home Risk and Safety Reassessment](#) with the Child and Family Team (CFT) to develop a plan to assist in the identification and utilization of the families strengths, and informal supports to address needs; and
12. Upload a completed copy of the [Out-of-Home Risk and Safety Reassessment](#) to the case management system.

The FCM Supervisor will:

1. Continually monitor, coach, and mentor the FCM on use of the [Out-of-Home Risk and Safety Reassessment](#) during [clinical supervision](#); and
2. Ensure the [Out-of-Home Risk and Safety Reassessment](#) is properly documented in the case management system.

**Note:** If no safety threats exists and the risk is low to moderate, consider recommending case closure.

<b>PRACTICE GUIDANCE</b>
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### **Out-of-Home Risk and Safety Reassessment**

Following the principles of family-centered practice, the [Out-of-Home Risk and Safety Reassessment](#) is completed in conjunction with each appropriate household. The [Out-of-Home Risk and Safety Reassessment](#) should be shared with the household when a case is first opened so that the household understands exactly what will be used to evaluate reunification potential and the threshold they must reach. Specifically, inform the household members of their original risk level, and explain that this will serve as the baseline for assessing reunification readiness. The [Case Plan \(SF 2956\)](#) should be shared with the household at the same time so that the household understands what is expected. Also, explain to the household members that a new substantiation or failure to progress toward case plan goals would increase their risk level, and that progress toward case plan goals will reduce their risk level. Explain that both the quantity and quality of visitation will also be considered when evaluating risk. Discuss the Reunification Safety Assessment within the [Out-of-Home Risk and Safety Reassessment](#), and explain that if everything else would support reunification, the final consideration is safety. The household members must either demonstrate that no safety threats are present or there must be a plan to address any identified safety threats.

### **Safety Reassessment**

A Safety Reassessment is a part of the [Out-of-Home Risk and Safety Reassessment](#) and is used by the FCM throughout the life of the case to consider the safety of the child if he/she were to be returned home at this time, as well as current conditions in the home, current caregiver characteristics, child characteristics, and interactions between caregivers and the child during visitation. Note that safety threat items are the same as on the [Initial Safety Assessment](#) but may have slight variations to reflect the decision at hand. Prior to assessing the child's current safety, the FCM should review the safety assessment that led to removal. Indicate (mark)

whether any child vulnerabilities are present, and consider these vulnerabilities when reviewing safety items. Note that these vulnerability issues provide a context for safety assessment. The presence of one (1) or more vulnerabilities does not automatically mean the child is unsafe.

### **Risk Reassessment**

The Risk Reassessment is a part of the [Out-of-Home Risk and Safety Reassessment](#) and is used by the FCM throughout the life of the case to determine the presence of risk factors that indicate the likelihood of future child maltreatment. The Risk Reassessment also assists FCMs in evaluating whether risk levels have decreased, remained the same, or have increased since the completion of the [Initial Family Risk Assessment](#). In addition to the Risk Reassessment Tool, FCMs should reference the [Family Functional Assessment \(FFA\) Field Guide](#) when working with self-identified Lesbian, Gay, Bisexual, Transgendered, and Questioning (LGBTQ) youth. Reassessment questions that may be helpful in determining the risk factors for LGBTQ youth may be found in the [FFA Field Guide](#).

## **FORMS AND TOOLS**

1. [Case Plan \(SF 2956\)](#) – Available in the case management system
2. [Out-of-Home Risk and Safety Reassessment](#) – Available in the case management system
3. [Out-of-Home Risk and Safety Reassessment Definitions](#)
4. [IN Guidebook](#)
5. [Family Functional Assessment \(FFA\) Field Guide](#) – Available on the Indiana Practice Model SharePoint
6. [Initial Safety Assessment](#) – Available in the case management system
7. [Initial Family Risk Assessment](#) – Available in the case management system
8. [Visitation Plan](#) – Available in the case management system

## **RELATED INFORMATION**

### **Safety vs. Risk Assessment**

It is important to keep in mind the difference between safety and risk when completing the [Out-of-Home Risk and Safety Reassessment](#). The Safety Assessment assesses the child's present danger and the interventions currently needed to protect the child. In contrast, the Risk Assessment looks at the likelihood of future maltreatment.

### **Clinical Supervision**

Clinical Supervision is a process in which an individual with specific knowledge, expertise, or skill provides support while overseeing and facilitating the learning of another individual.

**Example:** The focus of clinical supervision for an FCM is on practice that directly impacts outcomes for families.