# CHILDREN WITH PROBLEM SEXUAL BEHAVIORS ASSESSMENT TOOL (CD-214) INSTRUCTIONS

## **PURPOSE:**

Juvenile reports are received when concerns are reported to the Child Abuse and Neglect Hotline regarding children under the age of fourteen (14) have allegedly committed an act of sexual abuse against another child. The Children with Problem Sexual Behaviors Assessment Tool (CD-214) is intended to assist the Children's Service Worker in assessing the child who has been reported and their family. The assessment tool includes questions regarding risk factors that may have led the child to engage in problem and concerning sexual behaviors. Through the assessment process, the Children's Service Worker will gather information to help determine whether the child's sexual behavior may be considered normal or whether the behavior is of concern. The assessment tool helps the Children's Service Worker make recommendations for further intervention with the child and their family. If the family is referred to Family-Centered Services (FCS), a new CD-214 Is not required. The questions on the assessment tool are not intended to be read to families in script form. The Children's Service Worker should be mindful that the questions on the CD-214 are sensitive in nature. The Children's Service Worker should use the tool as a guide to lead conversations with families. It may be necessary to complete the CD-214 over multiple home visits.

## NUMBER OF COPIES AND DISTRIBUTION:

One assessment tool is completed when responding to a juvenile report, which includes the safety plan when required (CD-215).

#### **INSTRUCTIONS FOR COMPLETION:**

#### Case Data:

Incident Number: Enter the incident number assigned by CANHU on the CA/N-1.

County: Enter the county assigned to the report.

Weapon/Serious Injury: If the report contained allegations that the child utilized a weapon or caused serious physical injury during the incident, mark an "x". Reports in which the child has committed an act of sexual abuse and caused serious injury and/or used a weapon should be referred to the Juvenile Office prior to initiating the family assessment.

Case Name: Enter the case name.

Children's Service Worker: Enter the worker completing the assessment.

## Child's Data:

Name: Enter the name of the child with the alleged problem sexual behaviors.

DOB: Enter the child's date of birth.

Last Four Digits of Social Security Number: Enter the last four digits of the child's social security number.

DCN: Enter the child's DCN

Caregiver's Name: Enter the name of the child's primary caregiver.

Caregiver's Relationship: Enter the relationship of the primary caregiver to the child.

Does the Child Live in Multiple Households?: Mark an "x" in the appropriate box.

Address: List all addresses for the child.

#### Parents:

Enter the name, date of birth, address, DCN, and phone number for each parent of the child with alleged problem sexual behaviors.

## Siblings:

Enter the name, DCN, and DOB for each sibling of the child with the alleged problem sexual behaviors. Include full, half, and step-siblings. List the name of any child with Native American Heritage.

## **Other Household Members/Significant Others:**

Enter the name, date of birth, and relationship to the child for any other person residing in any of the households of the child.

#### **Reason for Report:**

Provide a Brief Description of the Incident(s): Summarize the concerns listed in the CA/N-1.

What was the Specific Problematic Sexual Behavior?: Identify the specific sexual behavior of concern.

When did the Incident Occur?: Provide the date, if known, or an approximate time period.

Where did the Incident(s) Occur?: List each location in which the child is known to exhibit sexual behaviors.

How was the Behavior Discovered?: Describe how the behavior was discovered.

How Many Times has the Behavior Occurred?: Provide the number of times, or an approximation of the number of times the child has exhibited problem sexual behaviors.

Describe any Aggression, Threat, Force, and/or Use of Coercion: Describe any use of aggression, threat, force or coercion by the child.

The Children's Service Worker should focus interviews to obtain detailed information about the below areas. The Children's Service Worker should be free to utilize any tool (i.e., genogram, eco-map, timeline, NCFAS G+R, etc.) they find useful in the assessment process:

## Victim(s):

Enter the name, sex, age, and relationship for each victim of the child with problem sexual behaviors.

Explain how the child obtained access to the victim(s).

## **History:**

History of child abuse and neglect, witnessing domestic violence, child and/or parental substance abuse, previous acts of aggression, exposure to violent and sexual acts are all risk factors for problem sexual behaviors. Understanding the child's history will help the Children's Service Worker put the child's behavior into context. If treatment services are recommended, the child's history will be helpful to the service provider to know what, if any, trauma the child has experienced.

#### Access to Other Children:

The Children's Service Worker should obtain information about any possible access the child will have with other children. This is essential in creating an effective safety plan.

#### Family Composition:

The Children's Service Worker should assess the child's relationship with each family member. Familial involvement in the treatment process is key to reducing the child's sexual behaviors. In cases of sibling sexual abuse, relationship issues between the siblings should be addressed and may be telling of the impact of the abuse on the children.

#### Daycare/School:

How the child is functioning in school may help the Children's Service Worker determine whether the school should be notified of the child's problem sexual behavior issues. Safety planning may need to occur within the school setting.

#### **Child Vulnerabilities:**

Assessing the child's vulnerabilities may provide insight into the reason the child is exhibiting problem sexual behaviors. Providing intervention designed to reduce the child's vulnerabilities will hopefully improve the child's overall well-being, which may in turn eliminate the child's need to act out sexually.

## **Caregiver Protective Capacities:**

Assessing the protective capacities of the child's caregiver(s) will assist the Children's Service Worker in making effective safety plans and will aide in making case decisions. If the caregiver

has diminished protective capacities, they may be unable to manage threats to their child(ren)'s safety.

**Other Strengths or Concerns:** The Children's Service Worker should document any other pertinent information not covered in the categories above.

Summation of Service Plans, Concerns, and Recommendations: The Children's Service Worker should summarize the information gathered from the assessment. Is the child's sexual behavior of such a concern that further treatment and intervention is necessary? Is the family able and willing to address the concerning behavior? What services are needed to help the child? Recommendations may include closing the case, or opening a case for Family-Centered Services. The Children's Service Worker should document whether a referral to the juvenile office should be made due to, but not limited to the following:

- When the parent/caregiver of the child with problem sexual behaviors does not engage in the assessment process; or
- When there is no evidence that the parent/caregiver is taking steps to prevent future problem sexual behavior; or
- When there is a repeated incident of problem sexual behavior by the child; or
- The assessment reveals that the child's behaviors are of such severity that the child cannot be safely maintained in the community.

**Mandatory Juvenile Office Referral:** The Children's Service Worker must document why a referral was not made to the juvenile office if the child used a weapon or caused serious physical injury.

#### **INSTRUCTIONS FOR RETENTION:**

The Children with Problem Sexual Behaviors Assessment Tool is to be filed in the family assessment section.

MEMORANDA HISTORY:

CD15-52