



Relinquishment Risk Assessment and Key Predictive Factors & Indicators Matrix

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1. Introduction

Based on the findings of *Desperate Measures – The relinquishment of children with a disability into state care in Victoria Report 2012*¹, the West Division has developed the Relinquishment Risk Assessment and Key Predictive Factors & Indicators Matrix (KPI) to assist case managers and programs determine the degree to which a child or adult's care giver or placement is at risk of breaking down.

The KPI has been produced using the key protective factors and key predictors evidenced in the findings and recommendations of *Desperate Measures*, Centre of Human Services Research Evaluation² and the Department for Communities and Social Inclusion, South Australia³.

2. What is the purpose of the Risk Assessment and Key Predictive Factors & Indicators Matrix?

At the core of the department's work, programs and staff strive to deliver person centred support to children and adults with a disability and their families. Despite our best intentions, care giver or placement breakdowns continue to occur.

The Risk Assessment and Key Predictive Factors & Indicators (KPI) Matrix has been developed for the purpose of providing staff with a tool that will help them recognise the early warning signs of a carer or placement break down. With the use of the matrix it is envisaged that programs will be better positioned to provide a more proactive response to individual circumstances and manage potential carer or placement breakdown more efficiently. Using a weighted scale the KPI will enable staff to:

- Identify early indicators and predictive factors regarding the probable break down of a placement or care arrangement
- Facilitate a plan outlining the necessary actions to mitigate the risk of a carer or placement break down by introducing/increasing support to areas assessed as having the greatest impact (key contributing factors and risk indicators) on the child or adults placement
- Trigger the Rapid Response practise framework where a break down is imminent.

3. Who should complete the Relinquishment Risk Assessment?

The Relinquishment Risk Assessment should be used by a key worker with primary case management or in a care coordination role. The tool is for internal use and can be completed by any of the following practitioners:

- Case Managers: DHHS Disability Client Services, Child Protection, Disability Justice or Youth Justice
- Other programs may include: NDIA Support Coordination, Placement Coordination Unit, Disability Respite Booking Team, Local Area Connections staff or DHHS Disability Accommodation Services staff.

¹ Desperate Measures: The Relinquishment of Children into State Care in Victoria (Victorian Equal Opportunity and Human Rights Commission: 2012)

² Literature review - Redesign of disability funded services for children living with disabilities in voluntary out-of-home care placements (Centre for Human Services Research and Evaluation: November 2014)

³ Department for Communities and Social Inclusion (South Australia) *Supporting Families: Factors contributing to children and young people with disability living in voluntary out-of-home care* December 2014

4. When should the Relinquishment Risk Assessment matrix be used?

Application of the tool will be at the discretion of the staff member or program. It is recommended that the matrix is used if/when a practitioner, Team Leader or program has concerns that a care giver or placement break down is imminent.

Examples of when the matrix might be completed include:

- At the commencement of a Client Service Agreement or intake process - Team Leaders may choose to complete the matrix to determine priority for case allocation. In these instances it is recommended that a succeeding matrix is completed as a part of the case closure or review process to gauge the effectiveness of the program's intervention.
- The tool could be completed for any child or adult seeking disability funded supports via the Disability Support Register (DSR). Case Managers may wish to use the results of the matrix to support the individual DSR profile and service needs request.
- When a case manager or program receives recurring reports from a care giver that they are burnt out and struggling to cope with their child's needs
- When staff in a residential service flags with areas that the child or adult's care needs have become incompatible with the service model or residential profile.
- Discussions during supervision or case planning meetings.

5. Measuring the probability of relinquishment

Using the table below as a guide staff to assign a numeric score (value) for each of the key contributing factors and risk indicators. When filling in the KPFI the staff should choose a score that is indicative of the person's circumstances and that provides a clear indication regarding the level of impact to the persons care giver or placement. The overall score of the KPFI will help staff assess the probability of a care giver or placement break down.

1. Rare	Impact on care/placement as risk factor is uncommon, infrequent or absent
2. Minor	Minimal impact on care/placement as risk factor is temporary or of limited intensity and status quo is quickly restored
3. Moderate	Medium impact on care/placement as risk factor is regularly present, is of medium intensity, requires intervention/support to restore status quo
4. Major	High impact on care/placement as risk factor is regularly present, is of high intensity, requires significant intervention/support to restore status quo
5. Critical	Severe impact as risk factor is constant and intense, and significant intervention/support is unlikely to restore status quo, breakdown is imminent

RISK MATRIX

Instructions for use

1. For each Key Predictive Factors & Indicator (KPI) circle the number in the Impact Scale that best reflects the level of influence and effect the predictor currently has on the person's care giver or placement.
2. Add up the total of each section to achieve an overall score. The cumulative results of the matrix will provide staff with an indication of the potential risk of relinquishment for the child or adult with a disability
3. See *SCORING INSTRUCTIONS* on page 5 to determine the response and action plan

SECTION 1: Contact Information

Name of person completing the KPI	
Area/Program of person completing the KPI	
Date the KPI completed	
CRIS No/Initials of child or person with a disability	

SECTION 2: KEY PREDICTIVE FACTORS & INDICATORS (KPI)

PART A : THE CHILD OR ADULT WITH A DISABILITY	IMPACT OF KPI ON CARER/PLACEMENT					
1. Displays behaviours of concern	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
2. Has high support needs as a result of behaviours of concern	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
3. Is without regular or appropriate assistance and has high levels of dependence to meet basic needs <i>E.g. the person cannot ambulate independently and requires 2x staff to assist with all transfers and mobility; the individual seeks extraordinary levels of emotional support from their carer.</i>	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
4. Requires frequent and intensive medical attention	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
5. Has multiple and / or severe functional limitations that exceed the carer/placements capability and requires specialised care <i>E.g. the person is currently residing in a semi-independent supported accommodation but has lost all independent living skills as a result of early onset dementia and now requires full physical supports for all activities of daily living.</i>	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
6. Has limited communication that is impeding the carers capacity to develop an emotional, nurturing relationship with the child	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
7. The child with a disability is entering/approaching puberty	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
TOTAL RISK INDICATORS	/35					

PART B: THE CARER/FAMILY	IMPACT OF KPI ON CARER/PLACEMENT					
1. Presents with high emotional strain and distress	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
2. Is a sole carer who does not have access to immediate or	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical

extended natural support to provide respite						
3. Has advised of plans for their child to move to shared supported accommodation once he/she reaches the age of 18yrs.	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
4. Has a history of multiple reports that they can no longer cope and that the parent wants to 'relinquish' care of their person with a disability	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
5. The size of the family unit impacts on the level of support/interaction between the carer and the person or child with a disability.	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
6. The parent/carers are experiencing marital distress	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
7. The parent or carers capacity to provide care has diminished as a result of ageing, ill health, family violence or death	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
8. The carer or parent are experiencing financial hardship and distress	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
9. The carer has low levels of social/informal supports	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
10. Regularly accesses or seeks access to respite i.e. at least half of every week and is often away from the family home.	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
11. Due to child/adults behaviours of concern the carer has been unable to meet the emotional and developmental needs of their children without a disability.	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
TOTAL RISK INDICATORS	/55					

PART C: SUPPORT & SERVICE SYSTEM	IMPACT OF KPFI ON CARER/PLACEMENT					
1. Lack of appropriate supports because of living in remote areas	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
2. Lack of respite care because of limited out- of-home respite options for children	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
3. Carer experiences consistent issues with workforce capacity e.g. skills gaps of formal support providers	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
4. The family have experienced a fragmented, inconsistent and hard to navigate service system	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
5. Lack of support options due to the characteristics of the individual being cared for e.g. specialized out of home care or supported accommodation options not available	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
6. The person with a disability/child is from a CALD or ATSI background and was unable to access culturally specific services	0 N/A	1 Rare	2 Minor	3 Moderate	4 Major	5 Critical
TOTAL RISK INDICATORS	/30					

SCORING INSTRUCTIONS

1. Add up the total of the scores for Part A- C of the Risk Matrix.
2. Record the overall score below
3. Highlight/circle the corresponding risk indicator in the scale below and refer to instructions for the RECOMMENDED ACTION PLAN:

The overall score for the child or adult with a disability is: _____ /120

The overall score indicates that the risk of carer or placement break down is:

- 0 - 30: Minimal
- 31 - 49: Moderate
- 50 – 74: HIGH
- 75 – 94: CRITICAL
- 95 – 120: IMMINENT

RECOMMENDED ACTION PLAN

Overall Score 0-30: Minimal Risk of Carer or Placement break down

1. Record the results and save the matrix on the individuals CRIS file. The corresponding notes should highlight what services have been engaged; what referrals have been completed and a time frame for reviewing the results of the matrix and action plan.
2. A second matrix should be completed at the case manager/program's discretion as a part of the case review or closure process. The outcome of the ensuing matrix will inform whether the case manager or program should instigate the Risk Management or Rapid Response process or if no further action is required.

Overall Score 31 – 49: Moderate Risk of Carer or Placement break down

3. Apply steps 1 & 2 above.
4. For score between 31- 49 discuss the results with the relevant line manager highlighting the potential for the case to escalate
5. Review the KPFI to determine what section(s) achieved the greatest score. The case manager with support of the team leader should then develop an action plan designed to ease/eliminate the impact of the key contributing factors.
6. A second matrix should be completed within 12 weeks of the implementation of the action plan
7. Contingent on the results of the subsequent KPFI, the case manager to determine the need for further action i.e. continuation of original action plan OR initiate the Risk Management & Rapid Response using the *Rapid Response Guidelines for Instances of Placement or Care Giver Breakdown*.

Overall Score 50 - 120: High - Imminent Risk of Carer or Placement break down

8. Apply steps 1-7 (scores above 31-49)
9. Initiate the Refer to *Rapid Response Guidelines for Instances of Placement or Care Giver Breakdown*.

Notwithstanding of the final score, planning for the appropriate response should be raised with the relevant line manager and/or program area.