STATE OF MARYLAND - DEPARTMENT OF HUMAN RESOURCES
MARYLAND FAMILY RISK ASSESSMENT (MFRA)

Children and Family in Household

Names
DOB
Age

I. BASIC INFORMATION

Date Assessment Initiated: ____________________________

Status Review Date: ____________________________

Timeframe for Completion: ____________________________

Reconsideration

Status Review of MFRA: ____________________________

II. RISK CATEGORIES

A. HISTORY OF CHILD MALTREATMENT:

Risk for History of Child Maltreatment: No known documented incidents of child maltreatment

Comments to Support Rating: ____________________________

B. TYPE AND EXTENT OF CURRENT MALTREATMENT INVESTIGATION:

Risk for Type and Extent of Current Maltreatment Investigation: No maltreatment incident

Comments to Support Rating: ____________________________

C. CHILD CHARACTERISTICS:

<table>
<thead>
<tr>
<th>Child Name</th>
<th>Age (yrs)</th>
<th>Risk Based on Age</th>
<th>Child Functioning</th>
<th>Capacity to Self Protect</th>
</tr>
</thead>
</table>

Risk for Child Characteristics Category: ____________________________

Comments to Support Rating: ____________________________
If this assessment changes the previous assessment for child characteristic category, please explain:

<table>
<thead>
<tr>
<th>Age</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>2 years or younger</td>
</tr>
<tr>
<td>Low</td>
<td>8-12 years old</td>
</tr>
<tr>
<td>Moderate</td>
<td>3-7 years old</td>
</tr>
<tr>
<td>None</td>
<td>13-18 years old</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child Functioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
</tr>
<tr>
<td>Low</td>
</tr>
<tr>
<td>Moderate</td>
</tr>
<tr>
<td>None</td>
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<th>Capacity to Self Protect</th>
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<tbody>
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<td>High</td>
</tr>
<tr>
<td>Low</td>
</tr>
<tr>
<td>Moderate</td>
</tr>
<tr>
<td>None</td>
</tr>
</tbody>
</table>
D. CAREGIVER CHARACTERISTICS:

Caregiver Name: VALERIE ROOSA

Current Substance Abuse: None  Substance abuse not a factor
Caregiver Functioning: None  No identifiable or indication of mental/intellectual/behavioral/physical/social impairment
History of Maltreatment as a Child: None  No known History
Use of Discipline: None  Appropriate and consistent discipline
Empathy/Nurturing/Bonding: None  Displays appropriate affection/stimulation/acceptance of child
Expectations of Child: None  Realistic expectations
Responds to Child's Needs and Provides Supervision: None  Has capacity to protect child from maltreatment and supervises appropriately
Caregiver's History of Violence: None  No known incidents
Recognition of Problem: None (Other than Domestic Violence)  Shows full recognition of problem; is fully willing to cooperate
Motivation to change/Level of Cooperation: None  Willingly cooperates

Risk for Caregiver Characteristics Category:
Comments to Support Rating:

If this assessment changes the previous assessment for caregiver characteristic category, please explain:
E. FAMILIAL, SOCIAL AND ECONOMIC CHARACTERISTICS:

Domestic Violence: No Domestic Violence
Economic Resources of Family: Able to meet family needs
Social Support for Family: Strong family and community support systems
Ability to Cope with Daily Life Stressors: Successfully copes with daily stressors
Risk for Familial, Social and Economic Characteristics:

Comments to Support Rating:
If this assessment rating changes the previous assessment for familial, social and economic characteristic category, please explain:

III. OVERALL RATING OF RISK

History of Child Maltreatment:
Type and Extent of Current Maltreatment Investigations:
Child Characteristics:
Caregiver Characteristics:
Familial, Social and Economic Characteristics:
Overall Rating of Risk for this Assessment Period:

Comments to Support Rating:

IV. DOES THIS FAMILY NEED FURTHER SERVICES

Explanation for Further Service:

V. AUTHORIZATION

Assessor Name: 
Title: 
Date Submitted for Approval: 

Supervisor Name: 
Date of Supervisor Approval: 
Date of Status Review Approval: