

SACWIS CHEAT SHEET/KEY
Bold Font: Category of Data
Underline Font: Where Data is collected in SACWIS

**ILLINOIS DEPARTMENT OF CHILDREN AND FAMILY SERVICES
SOCIAL HISTORY
INCLUDING INTEGRATED ASSESSMENT
WITH CLINICAL SCREENER**

To the IA Screener: In SACWIS the information on this page will be automatically generated except for the Integrated Assessment Interview Activity, which is entered on the General Hyperlink of the Integrated Assessment. After completing the IA report, the IA screener should delete all prompts under headings (e.g., writing in this color gray) before distributing to readers. NOTE that any print appearing in a black font, bold or regular, should not be deleted.

- Case Name:**
- Case (SACWIS) ID:**
- County of Jurisdiction:**
- Permanency Worker:**
- Worker Supervisor:**
- Worker RSF:**
- IA Report Prepared By:**
- Completed IA Report Date:**
- Family (SACWIS) ID:**
- Docket:**
- Worker Agency:**

Integrated Assessment Interview Activity
(General Hyperlink, Integrated Assessment Interview Activity)

Date	Type (Interview, Screening, or Both)	Those Present	Screener(s)

Children's Identifying Information

Child's Name, Gender, Date of Birth	Sacwis ID	Legal Status	Date of PC	Date of TC	Living Arrangement

Parents/Caretakers

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Name	Relationship	Date of Birth	Preferred Language	Household Member?

I. Reason for DCFS Involvement

(General Hyperlink, I. Reason for DCFS Involvement)

Case opening reason: (Please list the case opening reason, ie. Neglect, etc.)

Sources of Information: **Cite only the DCP investigation.**

- Briefly summarize pertinent findings from reviewed DCP packet. In your discussion, cite reason for current involvement, including allegation number and name.
- Identify whether this is the family’s first involvement with DCFS or the child welfare system. Briefly, indicate reason for prior involvement and outcome. NOTE: You do not need to go into details about prior involvement here; instead, you will be able to discuss prior involvement in the section titled, “History of Prior Abuse and Neglect.”
- Do not cite any prior “unfounded” reports. In cases having prior “unfounded” reports, the screener mentions only the number of reports. Without going into detail..
- Conclude with dates for PC and TC. State date and current placement type (e.g., home of relative, shelter, foster care, etc.) for minors.
- In some cases, a child may be moved after the interview but before the completion of this report. In these cases, state name of new placement, reason for placement change and date moved.

II. Participant Assessment Information for (Insert name of Parent/Caretaker/Paramour)

NOTE: Complete an entire separate section with all headings for each parent/primary caretaker/paramour

Parent/Guardian Interview

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

Include in your narrative, the following information:

- Place of interview, who participated in interviews. Document any failed or cancelled previous attempts at interviewing. Cite specific reason for failure.
- Birth parent’s age, ethnic background, physical appearance, include height and weight
- Primary language spoken and/or any communication needs (e.g., visually or hearing impaired, etc.)
- Brief mental status. Note the client’s attitude toward screener and interview process. Did they understand the purpose of the assessment and participate willingly? Discuss any pertinent observations about interview.
- Comment on client’s reality-testing (oriented to person, place, and time; evidence of paranoia or delusional thoughts, etc.), mood and range of emotional expression.
- Comment on the client’s level of insight into his or her behavior and judgment. For example, do they understand why they are involved with DCFS, or how their actions (or inactions) resulted in DCFS involvement?

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- Note specific mental health/behavior concerns or delays that may be impacting the interview. For example, was the client under the influence of substances at the time of interview, going through withdrawal from substances, suspected learning or cognitive delays?

Parent Personal History

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

This section applies to the parent/caretaker's family background

- Date and place of birth. Include cultural background and/or countries of origin
- Name of parents. Include status of parents' relationship to each other, their type of employment, and brief description of personality during childhood.
- Number of siblings and age rank
- Client's perception of his or her childhood and adolescence. Specifically state whether client was involved in any of the following during youth – gang activity, legal difficulties, conduct or behavior problems, and/or substance use. Did client experience any serious losses or traumatic events during youth? Was client ever exposed to physical or sexual abuse?
- Include comments on family closeness and support, expression of affection, and family discipline.
- Discuss history of romantic involvements and relationships. For example, when did client begin dating? First sexual encounter? Client's response to these milestones? Parents' response to these milestones? Include Marriages/significant partners (include divorce, separation, and children born from unions, or partnerships)
- Who in client's family (other than the client) has a history of domestic violence, physical or sexual abuse?
- Who in the client's family (other than the client) has a history of substance abuse (include alcohol and prescription/ non-prescription drugs)?
- Who in the client's family (other than client) has history of mental illness, developmental disability, mental retardation, and or psychiatric treatment?

Education and Cognitive Functioning

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

In your discussion, note client's highest level of educational achievement, history of academic failure, special education, and/or learning delays in school, vocational or military training.

Cite any records obtained related to academic history or cognitive functioning, such as school transcripts, psychological evaluations, etc. Briefly discuss pertinent findings.

Based on your interview, state whether you suspect any significant cognitive delays impacting parent's ability to minimally care for children. Please provide specific statements or behaviors exhibited in the client's history and/or interview used to form your conclusions. Avoid making statements like client has "low average" or "average" intellectual functioning.

Criminal Behavior and Background

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

This section should include the client's history of convicted or admitted participation in criminal activity; frequency of offenses, types of offenses (felony vs. misdemeanor, violent vs. non-violent). Cite chronologically with dates, from earlier to latest. Include any periods of incarceration, probation, or parole. Cite the results from the client's current LEADS background check. If client is currently on parole or probation, cite the name and location of his or her PO. Cite any conditions or requirements of client's current parole or probation.

Report current associations with past accomplices or others who are criminally involved, including gang affiliation, gang related tattoos. Describe any evidence of rehabilitation.

Work History

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

Note the client's history of employment, beginning with his or her first job. Discuss work performance, such as longest job, reason for termination, relationship with coworkers and supervisors, etc. Did substance use ever impact work history? Did the client's emotional state (e.g., depression, anxiety, etc.) ever prevent or interfere with employment?

Social/Romantic Relationships

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

NOTE: In the "Parent History" section you most likely discussed the client's history of significant romantic involvements or relationships. Here, the writer should focus more on the quality of these relationships – How does the client describe the relationship? What happened to end the relationship? Was there any presence of substance use, domestic violence, or arguments resulting in police involvement during the relationship? Any contact now? If they had a child together, is there any involvement?

Make sure to comment on the nature and quality of relationships with each child's birth parent.

Current Living Situation

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

Note the client's current living situation, including the home address, number of bedrooms, who lives in the home, length of stay, how client supports self and family, who is responsible for daily chores or responsibilities in home, sources of emotional support, and/or contact with family. Also note whether any person(s) in the home, other than the client, have a current or past history of criminal behavior, domestic violence, substance use, and/or involvement in addictive or compulsive behaviors such as gambling, etc.

Substance Use

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

When the client has been evaluated by JCAP or similar type of substance abuse assessment, the writer should note date of assessment, results and recommendations.

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This section provides a more detailed explanation and history of client's substance use, if applicable. The writer should present information regarding client's current and past history of substance use, including age of onset, names and frequency of substances used. If client is current using illicit substances, include usage patterns and drug of choice.

When applicable, writer should comment on the client's past treatment history, involvement in aftercare or support programs, length of sustained abstinence, and client's perception of what events led to relapse. Lastly, if client is currently in treatment, comment on client's motivation for recovery.

Interests, Hobbies, and Talents

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

- Describe the client's interests, hobbies and talents. Include the frequency of involvement in activities and the last time client engaged in each. If client was previously involved in hobbies or interests but is no longer, why did they stop?
- Are there any obstacles preventing the client from participating in these hobbies or interests, such as lack of transportation, scheduling conflicts, client's behavior, etc.

Support Systems

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

This section contains discussion of client's social and family support system, including present and past involvement in community and/or mental health services. Interaction with extended family, neighbors, friends, and/or cultural ethnic support systems, e.g. church, community groups, clubs. Writer should identify client's primary support. For example: Whom does the client turn to in an emergency? Who would the client trust with his or her children? NOTE: Parent Interview tool provides a lot of questions in this area.

Parenting Abilities

(Individual/Educational Factors, Integrated Caretaker Factors Expansion Arrow)

Include a discussion of the client's report and understanding of the events leading to his or her current involvement with the Department. If the client was previously involved with child welfare department, what was the outcome? What is his or her perception of what happened in his or her life to lead to this current involvement?

In this section the writer should comment on the client's child-rearing attitudes and abilities. Does the client have any history of prior parent training? Comment on the client's perception of his or her strengths as a parent and perceived areas of risk and needs.

In addition, the writer should obtain from the client, his or her understanding of the obstacles preventing him or her from successfully caring for their child or children. The writer should discuss the impact, if applicable, of substance use, domestic violence, criminal behavior, addictive behavior, and/or client's history and psychological functioning on his or her ability to protect and parent the children.

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Medical/Developmental Condition

(Family/Medical Factors, Medical/Mental Health History, Participant, Medical/Developmental Condition)

Include history of childhood and adult medical hospitalizations, any severe injuries or illnesses, types of treatment with results or recommendations, pre-natal and pregnancy, etc. **NOTE: Psychiatric treatment, including hospitalizations goes under “Mental/Emotional health” section.**

Mental/Emotional Health

(Family/Medical Factors, Medical/Mental Health History, Participant, Mental/Emotional Health)

This section contains information regarding the client’s current emotional state and mental health issues – e.g., presence of depression or mood disorder, anxiety, thought disorder, etc. **NOTE: Refer to the Interview tool for a screening of mental health symptoms.**

Comment on client’s history of current symptoms or behaviors, including date or age of onset, course of symptoms, and client’s understanding of what history or behavior contributes to current emotional problems.

Comment on client’s history of past and current psychiatric or mental health treatment (including psychotropic medication). What was client working on in treatment? Why did they seek treatment at that time? Did client feel treatment was effective? Explain.

Note whether the client is currently in psychological or psychiatric treatment. If so, describe type, onset, reason for treatment, and frequency of treatment. Document whether mandated by court, probation, child welfare, etc.

III. Participant Assessment Information for (Insert name of Child)

PROMPT TO IA SCREENER/WRITER: (NO DATA IS ENTERED HERE! THIS IS ONLY INSTRUCTION FOR WRITING)

When completing these sections on each child, the writer should incorporate information obtained from the parent(s)/guardian and substitute caregiver(s) interviews, even when confronted with discrepant information. For example, child denies having any problems in school, but foster parent or mother report child is getting along poorly with his peers and failing classes.

Child’s Educational Well-being

(Individual/Educational Factors, Education Expansion Arrow)

If applicable, cite results from school reports. Please answer the following questions as they pertain to the child. SACWIS requires that you answer the first question. Only answer the subsequent questions that apply to the child. Once an answer is selected in SACWIS, the user cannot go back and not answer the question. If the subsequent questions do not apply to the child leave the question blank in SACWIS.

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Is the child currently in an educational program? (In other words, is the child currently enrolled in school)

If no, please answer the following:

Should the child be in an educational program? *

Explain:

***If the child is not in an educational program and should be in an educational program, please enter data pertaining to the Child's Educational situation in the Child Personal History section AND in the Child's Recommendations section. Currently, this one field does not print on the SACWIS generated IA due to a SACWIS error.**

Age in Grade/Development Typical for Age

Is the child at the appropriate developmental level?

Explain:

Is this the appropriate grade?

Circumstances that have contributed to the child being in a chronologically inappropriate grade: (Advanced, Early Birth Date, Held Back, Lack of Attendance, Late Birth Date, Medical Retention)

Education/Early Childhood Status

Does the child have all their educational needs met in the current program/placement?

Explain:

Educational Resources and Support Available in Home

Does the caregiver of the child feel capable and supported in helping the child with homework, learning to read and attending school meetings?

Explain:

Academic Performance of School Age Child

Is the Child's academic performance at grade level in all subjects?

In what areas is the child not at grade level:

For a child in school who receives progress reports but does not have letter grades is progress satisfactory?

In what areas is the progress not satisfactory:

For a child who receives letter grades, are grades a C or better on the report card?

In what areas is the grade below a C:

Educational/Developmental Mobility

Has the child attended the same early childhood provider or school for the past 2 years?

If no, what is the impact of the child?

How many transfers have taken place in the past 2 years?

Disciplinary Status:

Please list Disciplinary Actions, Type, Date and Length

Do these Disciplinary Action(s) need to be addressed in the Service Plan?

Explain:

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School Attendance/Participation in Early Childhood Programs

How many days has the child been absent for the last completed semester?

What is the impact on the child:

Has the Life Skills Assessment been completed on this child? (If no please explain)

If child is in special education, has the DCRS transition plan been coordinated with the school's transition plan?
(If no please explain)

Medical/Developmental Condition – Child

(Family/Medical Factors, Medical/Mental Health History, Participant, Medical/Developmental Condition)

Enter 0-5 A&S (S/E), Denver II Findings and CHE Data Here.

- **Comprehensive Health Evaluation Information**

Cite Health Works information below:

Date of Comprehensive Health Exam (CHE):

Place where CHE occurred:

Immunization Status: Current or Not Current

Immunizations due:

Well Child Exam Status:

Date of Next Exam:

Name of Selected Primary Care Physician:

Special Health Care Needs (e.g. asthma, sickle cell, etc.)

Other: (List name or source of information, findings, recommendations and date)

- Writer should cite and summarize any past medical records, including hospitalizations. Cite current medical information, including names of prescription medications and reasons for medication. Discuss who administers, when last administered and child's compliance with medication regime.
- Identify any community resources the child is affiliated with for medical care.

- For children five years and younger, please refer to results from developmental screens and other indicators to determine whether a further referral needs to be made.

- **Developmental Evaluation Results**

Cite results from child's developmental screening

- State whether child is on target in all areas of development (language, coordination, motor control, height, weight, bladder/bowel control, puberty, intellectual, self-care, feeding, sensory) and whether he or she requires special treatment or services.
- There are any delays/lags in one or more of the developmental milestones; requires and/or has received special treatment, or
- Has severe developmental delays in one or more areas of development; requires and/or has received special treatment, or

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- Has severe developmental delays in one or more areas of development and receives special treatment
- Does child's developmental disability increase his/her vulnerability to maltreatment?
- If indicator was used, how was information obtained? (self-report, report from others, formal documentation, personal observation, etc.)

****For children 0-3, please use the below screening tools. For children 3-6, please advance to the next series of screening tools listed below. Please delete the screening tool/s that do not apply.**

0-3 Ages & Stages, Ages & Stages Social/Emotional, or Denver II, report significant scores/findings:

In BOLD, state name of tool using one of the above-mentioned choices.

Then, select score and provide explanation and recommendations for each of the following:

Communication (babbling, vocalizing, listening, and understanding)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Gross Motor Development and Activity (arm, body, and leg movements)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Fine Motor Development and Activity (hand and finger movements)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Cognitive/Problem Solving (learning and playing with toys)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Personal/Social (feeding self, washing hands, holding own bottle, etc.)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

****For children three to six years old: Using the Early Screening Inventory- Pre-school or Kindergarten and the Ages & Stages Social/Emotional, report significant scores/findings:**

Visual Motor/Adaptive (Problem Solving, Hand –Eye Coordination, Imitation Skills, Memory)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

DRAFT

Recommendation:

Language/Cognition (Verbal Expression/Reasoning, Number Concepts, Auditory Sequential Memory)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Gross Motor (Balance, Following Directions)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Speech Development (Articulation, intelligibility within/outside of context. Include any speech or language concerns including consonant or vowel errors)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation

Overall Impressions of screening experience/additional comments (Child's ability to attend to tasks, follow directions and provide eye contact etc.)

Mental/Emotional Health – Child

(Family/Medical Factors, Medical/Mental Health History, Participant, Mental/Emotional Health) Findings Here

- State place of interview. Include names and relationship all participants.
- Child's age, ethnic background, physical appearance, include height and weight
- Primary language spoken and/or any communication needs (e.g. visually or hearing impaired, etc.)
- Brief mental status and attitude toward screener and interview process. Discuss any pertinent observations made during the interview

For children six and above continue. For children five years under, move to next section:

- Comment on client's reality-testing (oriented to person, place and time; evidence of paranoia or delusional thoughts, etc.)
- Comment on client's level of insight into their own behavior and judgment
- Comment on child's mood and affect
- Note specific mental health/behavioral concerns or delays, (refer to screening tools for symptoms related to depression, anxiety, etc.). For example, current substance use or intoxication, depressed mood, anxiousness, hyperactivity, learning or cognitive delays, etc.
- Document whether child is on any psychotropic medications, include dosage if available. Also note who administers medication, when last administered and compliance with medication regime.

****For children 0-5, please use the below screening tool, Ages and Stages – Social-Emotional. Please delete the screening tool/s that do not apply.**

Social-Emotional Functioning:

Coping/Emotional (feeling states and coping behavior)

Determine if: Age Appropriate, Within Functional Limits, or Area of Concern?

Explanation:

Recommendation:

Sensory Processing:

Is child over/under sensitive to any stimuli such as touch, sound, clothing, etc?

State Regulation:

Does the child exhibit any unusual feeding, sleep, or elimination patterns?

For children six years and older:

- Describe child’s mental health history. (If none, so state.) Writer should cite any pertinent past records from psychiatric or mental health treatment. In addition to citing records, cite other sources of information, such as interviews with collateral family members, therapists, school personnel, etc.

Consider information from the CANS to address these next questions:

- Using the child interview and emotional functioning screening instrument, identify any symptoms experienced by the child.
- Assuming that some event or experience in the child’s life or history has had an impact on his or her functioning and current behavior, what events or behaviors in the child’s history or experiences are impacting his or her emotional functioning today? Such as a family history of substance use, parental depression or psychiatric illness, domestic violence, death or loss, illness, multiple placement changes, etc.
- Do any of these behaviors increase his/her vulnerability to maltreatment from others?
- Describe strengths or coping mechanisms that child has/uses to mitigate emotional or mental conditions. For children five years and younger, please address coping and emotional behaviors

Child Personal History

(Individual/Educational Factors, Integrated Child Factors Expansion Arrow) In addition to prompts, enter Description of Child’s Family Origin Here

This section applies to the child’s family background:

- Date and place of birth. Include cultural background and/or countries of origin
- Name of parents
- Number of siblings and age rank

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- Client's perception of their childhood (include comments on family closeness and support, expression of affection, by who and how were they disciplined, any history of sexual or physical abuse, substance use, developmental disability)
- Parents' marital status and child's perception of parents' relationships. (*Include divorce, separation, and children born from unions, or partnerships*)
- Family history of domestic violence, physical or sexual abuse
- Family history of substance abuse (*include alcohol and prescription/ non-prescription drugs*)
- Family history of mental illness, developmental disability, mental retardation, and or psychiatric treatment
- Family history of criminal activity or involvement with the legal system.

Child's Interaction with Caretaker (Birth parent)/Paramour (Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

- Describe child-caretaker (parent) interaction
- From whom does the child receive most support and nurturance?
- Is child able to develop appropriate attachments and trusting relationships with adults? For children under five years, comment on relationship to person(s) – for example, does the child exhibit eye contact, discriminating caregivers from strangers, etc.
- What is the child's reaction to separation from parent(s), including the perpetrator?
- What is the child's ability to self-protect?
- What is the child(ren)'s perception of parents? What is the child(ren)'s reaction to the maltreatment event(s)?

Child's Fear of Caretaker (Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

Address risk factors if they have been addressed.

Behavioral Problems that the Child may be exhibiting: (Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

- Child exhibits no behavioral problems or history of such
- Describe child's behaviors and whether or not their behavior increases their vulnerability to maltreatment. What kinds of specific behavioral problems is the child having and in what settings?
- Is child able to regulate his/her behavior and impulses?
- Describe how child relates to others and (peers and adults)
- Has the child engaged in any delinquent behavior and if so what kinds?
- What interventions have been tried to control the child's behavior?
- What kinds of interventions are currently being requested?

Child's Support System (Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

- Describe child's support system
 - Who are the significant others in the child's life?

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- To whom is the child primarily attached? How is this expressed?
- How does child relate to siblings, adults and peers in age-appropriate manner?
- Identify any community resources the child is affiliated with.
- Describe the child's interests, hobbies and talents. Include the frequency of involvement in activities and the last time child engaged in each.
 - Are there any obstacles preventing the child from participating in these hobbies or interests, such as lack of transportation, scheduling conflicts, child's behavior, etc.
- Does child engage in age-appropriate relationships and activities?

Child's Adjustment to Placement (for Children in Substitute Care)

(This remaining information will be entered in the Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

Substitute Caregiver's Perceptions of Child (From the Substitute Caregiver Interview information)

Describe child's current placement – e.g., shelter, group home, psychiatric hospital, licensed foster home, or home of relative. State the date of placement. In cases of foster care or home of relative, protect confidentiality of caregiver. Do not provide foster parent's address or telephone number. In foster care, list other members of the family household and their relationship to the child, if any.

This section contains a discussion of the caregiver's (e.g., foster parent, shelter staff, etc.) perception of the child in his or her home environment, school and community setting.

Identify who was interviewed in the caregiver interview and his or her relation to child. State the date and place of interview. Discuss the caregiver's report of the child's functioning and development in the placement. How is the child adjusting to the placement? How does the child get along with other children in the home, facility? Are there any difficulties in the home, school or community? Has the child had any difficulties being away from his or her parents or former caregiver? How is the child dealing with separation from his parent and family? How does the child relate to the current caregiver and/or others in the home?

Also address the child's social functioning. Are there any problems with conduct or emotions at home or in school? Any symptoms of post-traumatic stress, such as nightmares, trouble sleeping, periods of tearfulness, etc.? Comment on the caregiver's perception of child's expression of emotions, substance use, hobbies and interests, and general behavior.

Finally, address the following:

- Does the child have any contact with his or her parents or former caregivers?
- Is parent-child and sibling visitation occurring? How does the child respond to visits? How does the child respond before or after visits? Does the child exhibit any anxiety or adjustment difficulties before or after visits with family? What is the child's reaction to separation from siblings and significant others, including the perpetrator? Describe any sibling rivalry??
- Does the child still have contact with his or her siblings and/or extended family?

IV. Substitute Caregiver Interview

FOR THESE TWO SECTIONS (Analysis Hyperlink, Substitute Caregiver Interview Expansion Arrow)

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- **Strengths and/or Areas of Concern For the Substitute Caregiver**
(Analysis Tab, Substitute Caregiver Interview Expansion Arrow)

- Identify strengths of the child’s current caregiver and placement. The writer provides a commentary on the primary caregiver’s parenting style and day-to-day involvement in each child’s life. Describe the members of the household, how family members are related to each other, how household members relate to the child and birth parent. How does the child get along with other children in the home, facility?
- Are there any concerns about the child’s current placement? For example, the foster parent works extended hours, leaving the child with an elderly relative who has serious medical problems.

Significant findings from Child & Adolescent Needs & Strengths: (CANS): Using the CANS scoring profile as a guide for this section, the IA screener should begin by discussing any significant needs (e.g., 2’s and 3’s) identified in the “Caregiver Needs and Strengths.”

Last, the IA screener discusses the caregiver’s significant strengths and resources (e.g., “Caregiver Needs and Strengths.” Briefly discuss how these strengths may be used to offset or minimize any identified risks or areas of concern.

- **Respite Needs**
(Analysis Tab, Substitute Caregiver Interview Expansion Arrow)

The writer should identify any respite caregivers by name, including time spent with each child and any specialized training.

V. Family Functioning Factors (SACWIS: Family/Medical Factors Hyperlink)

History of abuse/neglect or other history of child welfare service needs in the Family (Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- **NOTE:** In cases with a past history of DCFS involvement, the writer should make efforts receive and review information from the previous case file related to reason for DCFS involvement, response to treatment and intervention, and outcome of case.
- History of multi-generational abuse/neglect in the family as described by the family and others (include abuse/neglect to same victim and by same perpetrator). Consider ethnic/cultural background, if relevant, using concrete and observable examples.
- Does a history of abuse/neglect increase the risk to the child?
- If history of abuse, neglect or other child welfare service need is present, describe: severity, how pervasive, how it affects current ability to care for and protect the child, how it affects family’s current functioning to care for and protect child. Specifically assess how this factor relates to current risk and safety.
- Does the family have any history of ongoing child welfare needs and services and if so for what?

Family's Financial Stability

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Does the family have sufficient funds to meet the family's expenses?
- If family experiences financial difficulty, how does this impact on the child's health and well-being?
- Is the family eligible for public benefits such as unemployment, TANF, SSI, etc.?
- Is caretaker employed? If unemployed, describe reason for unemployment.
- Is family homeless or experiencing some other environmental difficulty? If yes, can the situation be successfully resolved through a short-term intensive intervention (e.g., Norman, homemaker services)?

Environmental Conditions of the Home

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Describe the home, any physical/structural problems, whether utilities are working, any safety or health concerns, and/or any housekeeping issues.
- Privacy; adequacy of space; sharing bedrooms by unrelated persons or children/caretakers of opposite sex.
- Are there weapons in the home? If yes, are they registered? Are they kept safely out of child(ren)'s reach?

Community/Neighborhood Environment

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Describe the community
- Availability of resources; family's ability or inability to use resources; barriers to using resources (e.g., language, transportation); governmental or community resources involved with family; family's level of dependency on governmental or community resources; availability of and willingness to use resources when in crisis.

Domestic Violence

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- If indicator was used, how was information for indicator obtained? (self-report, report from others, formal documentation, interview with treating professional, personal observation, etc.)
- If domestic violence is present, does it pose an immediate or continuing threat to the child?
- Describe patterns in the use of power and authority between the partners, and whether power and authority is used to intimidate the other. Consider, if relevant, ethnic/cultural/family history background. Use concrete, observable terms.
- If domestic violence is present, have there been incidents of physical violence between the partners resulting in injuries (hospitalization required (including emergency room)? If yes, describe the circumstances as specifically as possible (including the alleged abuser's perception). List dates, where hospitalized, type of treatment received. Has there ever been any social service involvement? If yes, what was the result?)
- Has there been police involvement (or reports made), court involvement (order of protection or criminal charges brought).

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- Is there a need for crisis intervention (domestic violence shelter, domestic violence counseling)? List dates, where services were obtained and the result(s) at the time.
- Describe emergency crisis plans to provide safety, if needed.
- If domestic violence is present, are/were there any contributing factors (e.g., use of alcohol or other substances by any party involved at the time of the alleged/documentated incidents)?

Family Dynamics

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Family relationships - (i.e., g., communication among family members, affection, attachments, roles in the family system). Consider ethnic/cultural/family history background. Be specific. Provide examples.
- Functioning (how stress is handled, how problems are solved, how responsibilities are shared, boundaries). Consider ethnic/cultural/family history background. Be specific. Provide examples.
- Social functioning (e.g., isolated, large extended family, community ties)
- Stability - (i.e., frequent moves, frequent job changes).
- Does family dysfunction pose an immediate or continuing threat to the child?

Special Treatment Approaches Related to Racial, Ethnic or Cultural Considerations

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Describe child's racial, ethnic and cultural background
- Concerns or family issues related to race, ethnicity, religion, culture, gender, sexual preference or age; any special treatment approaches required as a result of racial, ethnic or cultural considerations; whether or not these factors impact risk and safety issues.

Family Strengths/Resources

(Family/Medical Factors, Family Functioning Factors Expansion Arrow)

- Summary of family's strengths and resources for addressing the maltreatment that led to Department involvement.
- Briefly discuss significant findings from the CANS in the following section:

Significant findings from Child & Adolescent Needs & Strengths: (CANS): Using the CANS scoring profile as a guide for this section, the IA screener should begin the discussion by identifying significant elevations (e.g., 2's or 3's) related to "Trauma Experiences" and "Traumatic Stress Symptoms" for each primary caregiver. Then, the IA screener should briefly discuss significant elevations (i.e., 2's and 3's). The screener should include in this discussion any significant needs (e.g., 2's and 3's) identified in the "Caregiver Needs and Strengths."

Last, the IA screener discusses the caregiver's significant strengths and resources (e.g., "Caregiver Needs and Strengths." Briefly discuss how these strengths may be used to offset or minimize any identified risks or areas of concern.

VI. Recommendations

A. Child Recommendations

(Individual/Educational Factors, Integrated Child Factors Expansion Arrow)

Provide a brief summary on each child screened. In this summary the screener should discuss the reason for the child’s involvement with the Department and any significant findings from the interview and screens. Discuss how the child is adjusting or coping with the trauma incurred while in the home, as well as separation from his or her caregiver.

Significant findings from Child & Adolescent Needs & Strengths: (CANS): Using the CANS scoring profile as a guide for this section, the IA screener should begin the discussion by identifying significant elevations (e.g., 2’s or 3’s) related to “Trauma Experiences” and “Traumatic Stress Symptoms” for each child. Then, the IA screener should briefly discuss significant elevations (i.e., 2’s and 3’s) related to “Life Domain Functioning,” “Acculturation,” “Child Behavioral/Emotional Needs,” “Child Risk Behaviors,” and, when appropriate, “Rating for Children Five Years Old and Younger” or “Transition to Adulthood.”

Last, the IA screener discusses the child’s significant strengths and resources (e.g., “Child Strengths”) Briefly discuss how these strengths may be used to offset or minimize any identified risks or areas of concern.

Recommendations will appear on the client/family service plan and should be specific and consistent with identified risks and concerns. When making a recommendation, list service first (e.g., individual therapy) followed by explanation and/or rationalization. When possible, tie into the client's history, functioning and prognosis when making recommendations.

B. Substitute Caregiver Recommendations

(Analysis Hyperlink, Substitute Caregiver Interview Expansion Arrow) (Information entered will print at end of the IA Report)

C. Family Prognosis & Recommendations

(Family/Medical Factors, Family Functioning Factors Expansion Arrow) In addition to prompts, add Visitation Recommendations (Information entered will print at end of the IA Report)

Provide a brief summary of what brought the family into care (Reason for DCFS involvement) and any significant findings about parents from history and interview.

*(Family Visitation Recommendations)

After talking with the caseworker and supervisor, the writer should address visitation recommendations. Are the child and sibling visits occurring? Based on your interview, specify if there are any concerns about the current visitation plan. Identify concerns or points that went into your thinking in making this decision. If recommending an alternative type of visitation, please explain reason for decision.

*(Parent(s)/Paramour/Guardian/etc. recommendations)

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Recommendations will appear on the client/family service plan and should be specific and consistent with identified risks and concerns. When making a recommendation, cite type of service first – e.g., individual therapy, followed by a rationale or explanation. Consider the client's history, functioning and prognosis when making recommendations. For example, client has been through multiple parenting classes and continues to demonstrate same or similar behavior. Include any external recommendations from other assessments (such as HealthWorks, JCAP, etc.).

*(Prognosis)

After considering the above information (specifically the birth parent's history and functioning, the child's functioning and needs, and identified risks), the writer provides a statement regarding the family's prognosis for permanency and parenting ability. Include recommendations as to services for children and parents, as well as recommendations concerning the child's legal status and placement.

Signatures:

Integrated Assessment Screener	Date	Child Welfare Specialist	Date
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Supervisor	Date	Supervisor	Date
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