

## **INCARCERATED PARENT'S CHILD STATUS REPORT, CS-2 A INSTRUCTIONS**

**Purpose:** This form is to be completed quarterly and mailed to the incarcerated parent(s) of a child placed in the custody of the Children's Division. The purpose of the form is to provide an incarcerated parent with information regarding:

1. The child's current status (including date(s), purpose(s), and outcome(s) of all medical and dental appointments in the last quarter, medicine prescribed, and therapy report).
2. Family Support Team Meeting (FST) recommendations (next FST meeting date).
3. Date and time of next court hearing and the court's recommendations.

**Number of Copies and Distribution:** Send the original form to the incarcerated parent and maintain a copy in the case record.

### **Instructions for Completion:**

1. Enter the incarcerated parent's name and the date that the form is sent.
2. Enter the child's name.

### **Section I: Medical Report**

3. Summarize all medical and dental appointments in the last quarter.
4. Summarize the child's progress in therapy. Explain why the child is receiving therapy, and when the child began participating in therapy, if applicable. Also include any change in therapist(s) and why the change was made.

### **Section II: Family Support Team Meeting**

5. Summarize the recommendations of the Family Support Team (FST) meetings (in the last quarter) as well as the date and time of the next FST meeting.

### **Section III: Court Hearings**

6. Enter the date of the most recent court hearing and the next court hearing including the recommendations from the most recent hearing.
7. The Children's Service Worker completing the form should sign and date the form.

When and if new information regarding the child (i.e. change in location or worker) the worker will notify the parent of the changes by letter or phone and document such in the case record.

**Instructions for Retention:** This form is to be maintained in the case record.

**Memoranda History:** CD10-14