

YOUTH WITH ELEVATED NEEDS SIX MONTH REVIEW STAFFING, CD-138 INSTRUCTIONS

Purpose:

This form is to be completed every 6 months to review the status of a youth with elevated needs. The form should be completed during the review, signed by the designated facilitator, and placed in the child's section of the case file.

Instructions for Completion:

- Check the appropriate box to indicate the youth's current elevated needs status.
- Enter the date of the review.
- Enter the youth's identifying information.
- Enter the worker's name.

Present for Meeting

- List those present for the staffing.

Youth's Progress

- Enter information regarding the youth's progress including: what has contributed to the youth's progress, what work has been done in the home, school, community, etc. to improve behaviors, what services need to remain in place for the progress to continue. Enter information regarding reports received from the school, home, therapist, etc. that indicate improvements.

Continuing Areas of Concern

- List the areas that continue to pose a concern. Information should also be included about how the concerns are going to be addressed.

Diagnosis and Current Medication

- Enter the youth's current diagnosis and medication, if any.

Impressions/Recommendations

- Enter the staffing team's recommendations regarding continued appropriateness of current placement type, what additional services may be needed, and suggestions to address those needs.
- The designated facilitator should sign the form at the completion of the review.

Instructions for Retention: This form is to be maintained in the child's section of the case record.

Memoranda History: CD10-08