

ADOLESCENT FAMILY SUPPORT TEAM GUIDE (CD94) AND INDIVIDUALIZED ACTION PLAN GOALS (CD94) INSTRUCTIONS

Purpose: The Adolescent FST Guide (CD94) is a comprehensive document to guide team members through the FST process. The entire form, although completed, is not to be covered at an FST, just what is pertinent to youth and meeting at that time. The plan identifies the youth-specific team members, the identified individuals for a youth support system, life skills assessment, and continued evaluation. The Individualized Action Plan Goals (CD94) takes the place of the Written Service Agreement if reunification is not the goal and the goals may be focused on transition and life skills obtainment. If reunification is the goal, the Individualized Action Plan (CD94) will be used in conjunction with the family's Written Service Agreement. The Adolescent FST Guide (CD94) is completed according to the age of the youth and is **completed with the youth**. This is an assessment tool to aid in determining life skills needed and obtained and will aid in documentation. It is also a tool to capture a thorough assessment of the youth as well as teach life skills. The Individualized Action Plan Goals (CD94) provides the framework for life skills instruction. It is designed to help youth acquire knowledge and understanding about a life skill and then apply the life skill to real life situations. The Individualized Action Plan Goals (CD94) represents the overall goals for instruction, and the expectations describe what the youth should be able to do after instruction takes place.

Number of Copies & Distribution: The forms are required to be completed as part of the referral packet for Chafee and TLP services. The Adolescent FST Guide (CD94) and Individualized Action Plan Goals (CD94) are filed in the Older Youth section of the case record. The youth should also receive a copy when completed and asked to sign the form. FST members should receive a copy of the form at a minimum of every six months. The form is presented at Permanency Planning Reviews in conjunction with the Child Assessment and Service Plan, CS-1.

Instructions for Completion: The Adolescent FST Guide (CD94) and Individualized Action Plan Goals (CD94) are to be completed within 60 days of a youth coming into care after the age of 14 or turning 14 and at a minimum of every 6 months thereafter. The Adolescent FST Guide (CD94) and Individualized Action Plan Goals (CD94) should be started in the first thirty days of a youth coming into care after the age of 14 or turning 14 in conjunction with the youth by the case manager. It is an on-going document and is presented at Permanency Planning Reviews in conjunction with the Child Assessment and Service Plan, CS-1. For youth eligible for Chafee in an adoptive or guardianship placement, the family will update the paper form with assistance of the Adoptive or Guardianship Case Manager and the revised Adolescent FST Guide (CD94) and Individualized Action Plan (CD94) will be entered into FACES by the Adoptive or Guardianship Case Manager at least every six months. This form must also be completed in order to prepare youth for their exit from the foster care system. The Case Manager or Children's Service Worker (CSW) should plan to meet with their youth to complete exit planning ninety days prior to release from custody. The form should be updated to reflect the youth's plan for successful transition from foster care. The entire form does not need to be completed at once. It is a living document that will be updated constantly throughout the youth's time in care.

Date Completed: The date completed is the date the form was completed initially or updated.

Family Support Team Members: The team members will be pulled from the Case Member Screen. The youth, case manager, case manager's supervisor, Juvenile Officer, and GAL/CASA, and one youth support are required members. The youth with team members' assistance should identify at least 3 individuals who can be used as supports, mentors, and emergency contacts for permanent connections for NYTD purposes. In order for a contact to be considered a permanent connection, they must have an address and a date of birth or approximate age of 18 and over listed.

Youth Advisory Board Participation: Check each box as it applies to the youth.

Youth with Special Needs: Complete this section only if a youth has been determined by the Family Support Team and Supervisory Consultation to be incapacitated. If yes is indicated, the youth is not to be referred for Chafee or TLP services, nor is the youth to be placed in ILA. The date the decision was made and reason must be described.

Community Activities and Agencies Youth Is Involved With: List any extracurricular activities through the community (school, church, etc.) that the youth participates in as well as agencies that the youth is receiving services from.

Strengths/Needs Assessment Completed: This is an optional field. This information will auto populate to yes with the date if the Strengths/Needs Assessment is completed, otherwise it will indicate no.

Casey Life Skills Assessment: This is an optional tool. If the case manager opts not to complete the CLSA, then enter the date the Adolescent FST Guide (CD94) is being completed as the date for the youth completion date of the CLSA. Because this is an interim solution and invalid data is being entered, in the Youth ID # box, please enter memo "CD18-02" for reference as to why this action was taken. If the CLSA is completed, the youth id number and provider number are located on the CLSA report and should be entered in the appropriate field. Check each box as it pertains to the youth and enter additional information if needed. The link to the CLSA report should also then be included in the comments section at the end of the screen. If a youth is incapacitated, please follow exiting procedures and select the youth is incapacitated box.

Life Skills Assessment Worksheet: There are eight domains, with each domain containing numerous statements that may or may not apply to the youth. If the statement is relevant to the youth, check the box. If it is not applicable, do not complete the field. Some items will not apply due to the age of the youth but if applicable, all attempts should be made to document the applicability to the youth. The screen allows comments to be included after relevant statements needing further explanation. Include as much information as possible to achieve a thorough assessment of the youth's life skills. The Education domain can be auto populated from the Education Information screen and the Self Care/Health domain can be auto populated from the Medical Information screen. All or each domain may be collapsed or expanded.

Household Items Inventory (under Daily Living domain): Items in the main text box can be added to the owns or needs box for each section. This section refers to youth ownership of items. It is not referring to if the youth has the item because of their living arrangement. These items should be taken with the youth when the youth moves. If the youth is not living independently or not preparing to live independently (keeping in mind age of youth), items not applicable will not need to be selected.

Comments: Cut and paste the link to the CLSA report (if one has been completed) in this

section and add any additional comments pertaining to the youth's transition plan.

Signature Page: Family Support Team members should sign and date the form at each six month meeting. It is pertinent that the youth sign the form as well as the worker and supervisor to show agreement and approval of the plan.

INDIVIDUALIZED ACTION PLAN GOALS (CD94): Complete each section for each goal. Three to five goals should be listed in this section, but at least 3 quality and appropriate life skills goals are required in order for a referral to be made for Chafee or TLP services. The form allows for as many goals and tasks to be added as needed but the SMART process should be kept in mind. Goals should be **S**pecific, **M**easurable, **A**ttainable, **R**ealistic, and **T**ime-limited. Goals may be filtered by all active goals, all goals, goals completed, goals not completed, and incomplete goals by selection in the drop-down box. The goal should be entered in the goal section and the life skills domain selected specific to the goal from the drop-down box. The objective field is also entered. This form should be updated as the youth completes the goals or when new goals are deemed necessary by the team, however updates should occur at a minimum of every six months. Goals may also be cut and pasted from the resource guide through the [Resources to Inspire Guide](#) available through the Casey Life Skills website.

When adding a task, the tasks to accomplish, who will do the task, the service/resource to be accessed, the date to be completed should be entered. When the task is accomplished, the date accomplished should be entered. When a goal is complete, the "Goal Complete" box should be selected. Goals and tasks can be removed if entered in error but should not be removed due to incompleteness or a change in the youth's plan and desires. If a youth is not able to complete the goal or there is a change in the youth's plan desires, the "Inactivate the Goal" box should be selected and the reason why entered.

Forms Retention: The form with signatures is filed in the Older Youth Program Services section of the case file and retained indefinitely.

Memoranda History: CD13-56, [CD18-02](#), CD19-