

# Child Assessment and Service Plan (CS-1) Form Instructions

## Purpose

The purpose of this form is to incorporate the statutory requirements of Public Law (P.L.) 96-272, the Adoption Assistance and Child Welfare Act of 1997, Titles IV-B and IV-E of the Social Security Act/Social Security Act Amendments of 1994 (P.L. 103-432), the Indian Child Welfare Act of 1978, and Section 210.720 RSMo. In addition to being a case plan, this form provides for documentation of the worker's assessment of the safety, permanency, and well-being needs of each child.

Appropriate sections of the form will be completed to meet the statutory requirements of 207.020 RSMo. This statute requires an evaluation to be completed and a report made to the court regarding a child's need for placement.

This form has been designed to gather detailed information about a particular child's needs and basic family demographics. The detailed information gathered in each section is then followed by a summary section (outlined in bold) which can quickly be identified and used by the court. The sections outlined in bold are the key pieces of information, which most courts require.

Additionally, the CS-1 serves the following purposes:

- A) Provides an organized way in which information is gathered about a child's specific safety, permanency, and well-being strengths and needs.
- B) Provides a standardized way in which services provided to child and family are documented in the record.
- C) Provides documentation of visitation plan.
- D) Records invitations to and attendance of the FST meeting.
- E) Documents understanding/acceptance/disagreement of the FST recommendations.
- F) Provides a standardized format for recording and documenting the case plan.
- G) Provides information in an organized manner to the FST and to the court on the services needed and progress made by the child and family to ameliorate the conditions, which created the need for placement.
- H) Provides documentation of compliance with the following 18 federal requirements which must in all out-of-home care cases, as stated in P.L. 96-272:
- I) To provide documentation of compliance with the following requirements of P.L. 105-89:
- J) To document compliance with the Indian Child Welfare Act of 1978 (ICWA) which regulates placement proceedings involving Native American children.

## Number of Copies and Distribution

The form is to be presented during the initial FST meeting, with the FST members participating in the development of the case plan. Any identifying information and summary of prior services offered to the family is to be documented by the service worker before the FST meeting. The CS-1 shall be completed within thirty (30) days of initial custody and reviewed for appropriateness at the 30-day FST meeting.

The case manager will provide each team member with a copy of **each individual child's current CS-1** if required for the meeting.

**One CS-1 form is to be completed for each child.** The original is filed in the child's section of the case record. A copy of the original and updated CS-1s should be given to the parents, child (if age appropriate) and the out-of-home care provider following the FST meetings. A copy of the most recently completed CS-1 should be given to all FST members to review at least one week prior to the FST meeting if they were not given a copy of the CS-1 at the end of the previous FST meeting.

The CS-1 should be attached to the required six-month court report.

For cases involving pre-custodial evaluation (i.e. prior to the court actually placing the child in the custody of the division) the original CS-1 will be placed in the parent's record.

## Subsequent CS-1s

The CS-1 is designed to be dynamic form to which information can be continuously added over the life a case. After completion of the initial CS-1, the form should be updated every 30 days until adjudication. After adjudication, the CS-1 should be updated every six (6) months and when a major change occurs such as a change in the permanency plan or placement change.

## Instructions for Completion

Prior to the FST meeting, as much identifying information about the family and child, reasonable efforts to prevent placement, and any services provided should be thoroughly documented on the CS-1. Much of the information on the CS-1 will be populated from FACES. Additional information may be added to the populated sections of the form by clicking on the appropriate buttons on the CS-1 in FACES.

The remaining sections are to be reviewed and completed during the FST meeting with the family. During the FST, the worker will provide information regarding services provided, discuss visitation for period in review and facilitate a discussion about the family/child's progress since the previous FST meeting. This information will be utilized by the team to determine the case plan recommendations for each child. For the areas that require information to be filled in, the directions are listed below.

### ***Assessment Data***

Date completed: Enter the date the CS-1 was completed.

Period Covered: Enter the dates for which the CS-1 covers. For example, if the CS-1 is being completed for the 30 day meeting, the period covered would be the date from which the child was placed into care to the date of the 30 day meeting. If the CS-1 is

being completed for the 60 day meeting, the period covered would be from the date of the 30 day meeting to the date of the 60 day meeting and so forth.

### **Section I – Individual Child’s Data**

***This section details the following specific information about the child:***

Original Reason for Placement/Custody/Jurisdiction:

- a) Describe the reason(s) for custody as stated in the protective custody order.
- b) If the child was placed in out-of-home care on an emergency basis, explain the specific danger.
- c) Explain if voluntary placement was considered in lieu of protective custody.

### **Section II – Family Data**

***This section details specific information about the parent(s)/caretaker(s), siblings, and other household members/significant others.***

**Parent/Caretaker:**

Mother court ordered to pay child support? : Select YES if ordered to pay child support, then enter the amount ordered to pay. Select NO if not ordered to pay child support.

Referral made to Child Support Enforcement? : Select YES or NO.

Paternity established: Select YES or NO.

Father court ordered to pay child support? : Select YES if ordered to pay child support, and then enter the amount ordered to pay. Select NO if not ordered to pay child support.

Referral made to Child Support Enforcement?: Select YES or NO.

**Sibling Data**

Enter the living arrangement/placement for any siblings of the child.

**Other Household Members/Significant Others**

Enter any other household members or others persons who reside in the household.

### **Section III – Reasonable Efforts - Placement/Custody Prevention**

***This section details and then summarizes all services offered prior to placement/custody. Some information for this section may be taken directly from the CD-14A (Family Function Assessment/Re-Assessment). This section also includes information about exploration of the non-custodial parent, relatives, and possible kinship placements.***

IIS referral information: If no IIS referral was made, indicate reason referral not made.

Services Offered Prior to Placement: Enter all formal and informal services offered prior to placement/custody including prior case openings, IIS services, income maintenance assistance referrals etc. When the add service button is selected, additional information will be required for input.

Date of Service: Enter the date the service began and the date the service ended. If service is currently being received leave the service end date field blank.

Provider Name, Address, and Phone Number: Enter the name, address, and phone number for each service provider.

Non-Custodial parent, relative, or kinship explored prior to placement or other possible placement resources: In the fields provided add all individuals considered for placement by entering the name, relationship, address, and phone number of any person contacted or considered for placement. Enter the date of contact with that person as well as their response to that contact.

**Summary of reasonable efforts to prevent placement**: This section should be utilized to summarize all reasonable efforts made by the Division to prevent placement. If the child was removed on an emergency basis, describe the emergency and the conditions, which made the removal necessary to protect the child. Summarize services made available to the family before removal and why further services could not allow the child to safely remain in the home.

#### ***Section IV - Reasonable Efforts to Facilitate Reunification and Provide Permanency***

***This section details and then summarizes services provided to the child and family since placement.***

Services Offered Since Placement: Enter all formal and informal services offered since placement/custody. When the add service button is selected, additional information will be required for input.

Date of Service: Enter the date the service began and the date the service ended. If service is currently being received put *present* in this field.

Provider Name, Address, and Phone Number: Enter the name, address, and phone number for each service provider.

**Summary of reasonable efforts to facilitate reunification and provide permanency**: This section should be utilized to summarize all reasonable efforts made by the Division to facilitate reunification and provide permanency. Based on the services provided, describe the behavioral changes, which have occurred to reduce the risk of maltreatment and progress made by family towards the permanency goal.

#### ***Section V – Visitation***

***This section details the visitation schedule with parents, siblings, and any significant others and then summarizes how those visits went during the period in review.***

Visitation Plan with mother/father/siblings/significant others: If visits have been entered in FACES, a link will appear here that says visitation documentation. When the link is selected, the visitation documentation log will appear where visits can be reviewed or new visits can be inputted. If no visits are held, a box will appear where the worker will need to explain why no visits were held during the period.

**Summary of Visitation for Period Reviewed:** This section should summarize *what actually occurred* during the period of review with regard to visitation. This section should be completed during the FST to facilitate a discussion with all members about what is being accomplished as a result of visits.

## ***Section VI – Child Assessment In Relation To Current Placement***

***This section includes previous placement history, assessment of child/youth safety, permanency and stability, and well-being needs and strengths as well as child/youth adjustment to current placement.***

**Child Safety Needs:** This section documents and summarizes the ways in which a safe environment in the alternative care placement was confirmed and assured for the child/youth. During the FST meeting members should address and comment on the safety of the child/youth *in the current placement*. **This section should summarize how the child’s safety needs were assured initially at placement as well as show safety in placement continues to be assured. If there are safety concerns, they should be documented in this section along with any safety plan developed by the team.**

**Permanency and Stability Needs:** This section should document and summarize the ways in which the child’s permanency and stability needs are being met in the current placement.

Placed with Siblings: Indicate if child is not placed with siblings, indicate what is being done to place siblings together.

Least Restrictive Environment (most family-like): If the child is not placed in the least restrictive environment explain the plan for moving the child to the least restrictive environment. If child is in the least restrictive environment, explain how this is the least restrictive environment for the child.

**Permanency and Stability Comment:** During the FST meeting team members should address and comment on the permanency and stability of the child/youth in the current placement. This section should summarize how the current placement is meeting the child’s permanency and stability needs. This section can also be used to address any other permanency or stability issues not previously addressed.

**WELL-BEING NEEDS:** This section should document and summarize the ways in which the child’s physical, educational, and emotional needs are being met in their current placement.

Education Comments: Summarize the educational needs, school behavior, attendance, performance and extra curricular activities of the child. Also, include any activities performed to address the child’s educational needs and explain reasons for changes in school placements. If appropriate, address any early childhood needs of the child.

Well-Being Comment Section: During the FST meeting the team members

should discuss and develop goals to address the physical, educational, and emotional well-being of the child in their current placement. This section can also be used to address any other well-being issues not previously addressed. This section should summarize how the current placement is meeting the child's well-being needs.

**SUMMARY OF APPROPRIATENESS OF AND CHILD'S ADJUSTMENT TO PLACEMENT:** Utilizing the safety, permanency and well-being assessment information about the child, this section should summarize the appropriateness of and child's adjustment to the current placement.

**SECTION VII – FST DATA AND RECOMMENDATIONS (to be completed during the FST)**  
This section is populated from the FST screen in FACES.

**CASE GOAL AND PERMANENCY PLAN:** This section is to document the current permanency plan for the child.

**SECTION VIII – WRITTEN SERVICE AGREEMENT**

This is to be completed with the participation of the family during the FST. For information on how to complete the WSA, see the WSA instructions on EForms.

Family Signature: The family member/members with whom the WSA was developed should sign their name.

Worker Signature: The Children's Services Worker should sign the WSA indicating they agree with the conditions set forth in the WSA and they have notified the family of their rights with regard to services provided by the Children's Division.

Supervisor Signature: The Children's Service Supervisor should sign the WSA indicating they agree with the conditions set forth in the WSA.

**Memoranda History:**

CD03-32, CD04-22, CD05-05, CD06-16, CD11-84