What is Most Important for a Child?



and relatives contacted to

plan for permanency

As a CRB board member, you make a difference in the life of a child. The fact-finding process and questions you ask during the review help ensure children receive what is most important -- family connection, culture, consistency, safety, health, education, well-being, permanency and a successful transition to adulthood. Thank you for the great work you do!

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Family	Safety	Health	Well-Being
Connection to Family,	Child Safety is	Medical, Dental and	Child-Centered
Siblings and Culture Finding 2 Relative Search began within	Paramount Finding 3 Child's attorney sees child at 	Mental Health Needs Finding 3 Nursing Intake Assessment	Case Plans Finding 3 • CANS Evaluation 60 days;
 30 days of placement; If not placed with a relative, relative search is ongoing; If siblings not placed 	 least every 90 days; Consistent and appropriate foster placement that meets child's needs and safety; 	 shortly after entering care; Health Assessment 30 days; Dental, Age 1+, 30 days; Well-Child Checks current ; 	 ECI Evaluation, under Age 3, within 60 days; Child receiving appropriate developmental services;
 Finding 3 Parenting time is in best interest of child; Child is staying connected to 	 If safety concerns identified, recommendations to address; Foster Children Bill of Rights posted in the foster home and signed by youth, age 14+ 	 Immunizations current; Hearing /Vision Age 3+; All medical concerns being addressed; Mental Health Evaluation, Age 3+, within 30 days; 	 Educational services in place; DHS communicating with schools; DHS attending IEP meetings; IEP/504 Plan current; Receiving tutoring if needed;
 extended family; Child receiving culturally appropriate services; If ICWA, tribe is involved in case planning 	 Finding 6 Board can identify parental change that has taken place in terms of lessened safety threats and increased 	 Recommended mental health services referred; Child receiving all recommended services; Medication management If child is prescribed more 	 Older youth on track to graduate (24 credits); Opportunities to participate in extracurricular activities; Transition Plan Age 14+;
 Finding 4 DHS offering supplemental parenting time during normally occurring events such as school conferences and medical appointments; 	 protective capacity Finding 8 Face to Face Monthly Contacts with child every month and in the foster 	 In child is prescribed more than two psychotropic prescriptions, or if child is under age 6, required annual medication review held; Child placed in appropriate 	 ILP Referred Age 16+ Youth included in case planning Finding 7 Concurrent planning in place and relatives contacted to be and relatives.

level of care

home every other month

If progress, additional parenting time explored

Finding 2

Finding 3

Finding 4

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