

Little City Foundation

Policies & Procedures

Subject:				Policy #	
CHILDBRIDGE-ASSESSMENT AND SERVICE PLANNING				CB 07	
Approved:	Shaw E. Jamers	Issued:	Revised:	Page:	
**	Q	12/10	6/11; 03/13	1 of 3	

PURPOSE:

The purpose of this policy is to define assessment and service planning for individuals receiving services and to specify the roles and responsibilities of the treatment team members.

SCOPE:

The policy applies to all persons receiving services through the ChildBridge Program.

POLICY:

It is the ChildBridge policy to conduct thorough and ongoing assessments of each individual receiving services to determine his/her specific service needs, to and then to develop and implement an individualized service plan to meet those needs, and identify supports required to help each child achieve success.

PROCEDURE:

Children assigned to ChildBridge programs are offered services and supports as defined in their specific Service Plan.

- For DCFS wards, services are outlined in a DCFS Service Plan which is managed through SACWIS, a DCFS database. For all children placed in a ChildBridge Group Home, a comprehensive Residential Service Plan/Individual Treatment Plan is provided.
- For children receiving services through the Home Based Children's Waiver, an Individualized Service Plan is provided.
- Children who receive mental health services through Little City Foundation's clinical team and are placed through the Foster Care/Adoption Program are subsequently provided with an Individualized Mental Health Treatment Plan.
- Children who reside in the CGH are provided a Behavior Support Plan drafted by a Little City ChildBridge Behavior Analyst.

Service Plans are created for the child to promote the development and skill acquisition in major life areas such as activities of daily living, skills of independence, interpersonal skill development, community integration, and socialization. Service Plans also include self-administration of medication training for individuals whose assessments determine they are not currently able to independently complete this task.

Plans are also created to meet the contractual obligations and requirements of governing bodies such as the Department of Children and Family Services [DCFS] and the Department of Human Services and the Department of Healthcare and Family Services [HFS].

Date Reviewed	1
---------------	---

04/15

03/18



Planning Cycle

Children assigned to a ChildBridge Program are assigned an initial service plan within 30 days of placement in their designated program.

All service plans are reviewed with the multidisciplinary team minimally every 6 months to review progress toward goals and discontinue, continue, or create new goals as needed.

All Part 132 Mental Health Treatment Plans are reviewed quarterly to gauge success in progress and revise as needed.

Assessments

Assessments inform the planning process in order to provide the child with optimal supports required to help him/her achieve success. They shall determine the individual's strengths and needs, level of functioning, presenting problems, intensity of supports needed, disability, diagnosis and the services the individual needs, and shall be sensitive to the individual's racial, ethnic and cultural background, chronological and developmental age, visual and auditory impairments, language preferences and degree of disability.

Assessments may be conducted by the Case Manager, Child Welfare Specialist, clinical team, medical team, recreational team, art therapy team, and/or supervisors assigned to the case. Assessments may be required by governing bodies (i.e. CANS and Ansel-Casey Assessments for all DCFS wards, ICAP and SAMAs for all DHS funding recipients) or by Little City best practice (i.e. Family Needs Assessment, Supports Intensity Scale, Ability Assessments, Sensory Profiles, FEAS, and/or Functional Analysis Assessment).

Progress Documentation

Progress in services is documented regardless of service the child is assigned and funding source supporting service provision.

For children receiving services through the Children's Group Homes:

- Daily shift summaries are provided for all shifts. Shift summaries reflect goals and objectives the child worked on during the day as well as accomplishments made or lack of progress toward achieving success.
- Monthly QSP notes provide a review of the child's monthly progress toward goals and objectives outlined in the child's Residential Service Plan as well as identify additional needs or supports that would facilitate success for the child.

For children receiving services through the Children's Home Based Waiver:

- Progress notes are provided for each shift a staff member worked supporting an individual in his/her home.
- Monthly QSP notes provide a review of the child's monthly progress toward goals and objectives outlined in the child's Individual Service Plan as well as identify additional needs or supports that would facilitate success for the child.

For children receiving services through the Foster Care/Adoption Program:

• Progress notes are detailed by Child Welfare Specialists through the DCFS SACWIS database, monitored



by the Social Work Supervisor, and reviewed in monthly supervision between the Child Welfare Specialist and Social Work Supervisor.

• Mental Health Progress notes reflect progress or lack thereof toward goals and objectives relating to a child's Mental Health Treatment Plan for those receiving clinical services.

Documentation is stored on the child's hard case file for the duration of the life of the case.