

**FOSTER CARE
CHILD ASSESSMENT OF
NEEDS AND STRENGTHS**

Children Ages 4 – 9 Years

FC Case #:
FC Case Name:
Court ID #:
DHS FC Worker Load #:
DHS FC Worker Name:
DOB:
POS Agency Name:
POS Agency Worker Name:

Date Completed: _____

Check One Initial Service Plan Updated Service Plan

Instructions: Rate the child according to the current level of functioning. Explanation of scored items must be contained in the ISP or USP under the "Child Needs and Strengths Assessment" section. All "situational concerns" and priority needs and strengths must be addressed on the current Parent-Agency Treatment Plan and Service Agreement. "U S" (unable to score) may only be scored for a child at the Initial Service Plan. Strengths are defined as any domain scored with a positive number. Scores of "0" reflect appropriate behavior and/or functioning with the specified domain. Items scored as "0" may, but do not to, be considered a strength.

C1. Medical/Physical

Was there prenatal drug/alcohol exposure? Y N U/K

- a. Good health.....+5 _____
- b. Adequate health..... 0 _____
- c. Situational concern-2 _____
- d. Impaired health-3 _____
- e. Severely impaired health-5 _____
- f. Unable to score..... US _____

C2. Mental Health and Well-Being

- a. Healthy emotional behavior/coping skills.....+5 _____
- b. Appropriate emotional behavior/coping skills..... 0 _____
- c. Situational concern-2 _____
- d. Limited emotional behavior/coping skills-3 _____
- e. Severely limited emotional behavior/coping skills-5 _____
- f. Unable to score..... US _____

C3. Child Development

- a. Advanced development+5 _____
- b. Age-appropriate development 0 _____
- c. Situational concern-2 _____
- d. Limited development.....-3 _____
- e. Severely limited development.....-5 _____
- f. Unable to score..... US _____

C4. Family and Kin/Fictive Kin Relationships/Attachments

- a. Nurturing/supportive relationships/attachments+5 _____
- b. Appropriate relationships/attachments 0 _____
- c. Situational concern-2 _____
- d. Limited relationships/attachments-3 _____
- e. Severely limited or no relationships/attachments-5 _____
- f. Unable to score..... US _____

C5. Education

Does child have a special education plan? Y N

Does child need an assessment for special education/early intervention? Y N

- a. Exceptional academic achievement+4
- b. Adequate achievement 0
- c. Situational concern-1
- d. Minor difficulty-2
- e. Major/chronic difficulty-4
- f. Unable to score US

C6. Substance Use (Substances include alcohol, tobacco, and other drugs)

- a. No substance use+1
- b. Past experimentation 0
- c. Situational concern-1
- d. Current substance use-2
- e. Frequent substance use-4
- f. Unable to score US

C7. Sexual Behavior

Has child been sexually abused? Y N U/K

Does child demonstrate sexually inappropriate behavior? Y N U/K

- a. Healthy sexual adjustment/responsible behavior+1
- b. Appropriate sexual adjustment/behavior 0
- c. Situational concern-1
- d. Compromised sexual adjustment/behavior-2
- e. Severely compromised sexual adjustment/reckless behavior.....-4
- f. Unable to score US

C8. Peer/Adult Social Relationships (Non-Family)

- a. Strong social relationships +3
- b. Adequate social relationships0
- c. Situational concern -1
- d. Limited social relationships -2
- e. Severely limited social relationships.....-3
- f. Unable to score US

C9. Cultural/Community Identity

- a. Strong cultural/community identity..... +3
- b. Adequate cultural/community identity0
- c. Situational concern -1
- d. Limited cultural/community identity-2
- e. Disconnected from cultural/community identity-3
- f. Unable to score US

PRIORITY NEEDS AND STRENGTHS:

Based on this assessment, identify below up to three priority needs and strengths of the child (indicate item code and title), if three needs have been scored. Priority needs are the top three domains with a negative number and priority strengths may be the domains that score 0 or a positive number. Address all situational concerns and priority items in the Individual Child Activities and Foster Parent/Relative sections of the Parent Agency Treatment Plan and Service Agreement. If a child has an identified need or situational concern in Medical/Physical, Mental Health and Well-Being and/or Education, it must be addressed with services regardless of priority.

ASSESSMENT DOMAINS		AREAS TO ADDRESS ON ISP/USP	
C1 Medical/Physical Health	Priority Strengths: (list priority strength areas – “a” and “b” responses):	1.	_____
C2 Mental Health and Well-Being		2.	_____
C3 Child Development		3.	_____
C4 Family and Kin/Fictive Kin Relationships/Attachments			
C5 Education	Priority Needs: (list priority need areas – “d” and “e” responses)	1.	_____
C6 Substance Use		2.	_____
C7 Sexual Behavior		3.	_____
C8 Peer/Adult Social Relationships	Situational Concerns: (list <u>all</u> areas assessed as situational concerns – “c” responses)	1.	_____
C9 Cultural/Community Identity		2.	_____
		3.	_____

Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

AUTHORITY: P.A. 280 of 1939.
RESPONSE: Voluntary.
PENALTY: None

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
CHILD ASSESSMENT OF NEEDS AND STRENGTHS FOR CHILDREN 4 – 9 YEARS
DEFINITIONS**

C1. Medical/Physical Health

Was there prenatal drug/alcohol exposure? Answer “yes,” “no,” or “unknown.”

- a. Good health. Child has no known health care needs; child receives routine preventive and medical/dental/vision care, immunizations, health screenings, and hygiene care. If child resided in a high risk environment for lead exposure, the child has received a lead exposure screening.
- b. Adequate health. Child has no unmet health care needs or has minor health problems (ex. allergy shots/medications, etc.) that can be addressed with routine intervention; age-appropriate immunizations and annual medical exams and required health screenings are current.
- c. Situational concern. Child has a special condition(s)/health concern(s) (ex. lice, cold/flu, ear infections, bone fracture, etc.) that may require temporary (anticipated not to exceed 90 days) medical treatment (ex. follow-up with medical personnel, administering of prescription or over-the-counter medications, etc.); and/or child has not received required immunizations or health screenings (including lead exposure if child resided in a high risk environment for lead exposure).
- d. Impaired health. Child has a medical condition(s) that may impair daily functioning (ex. fragile asthmatic, eczema, allergies, etc.) and requires ongoing interventions. This may include effects of prenatal drug exposure and/or effects of lead exposure.
- e. Severely impaired health. Child has a serious, chronic, or acute health condition(s) (ex., diabetes, cerebral palsy, pronounced effects of lead exposure, etc.) that severely impairs functioning and requires ongoing intervention(s).

C2. Mental Health and Well-Being

- a. Healthy emotional behavior/coping skills. Child consistently exhibits an age-appropriate range of emotional behaviors; child displays strong age-appropriate coping skills in dealing with disappointment, anger, grief, stress, and daily challenges in home, school, and community; child is also able to identify the need for, seeks, and accepts guidance; child has a positive and hopeful attitude and readily adjusts to new situations.
- b. Appropriate emotional behavior/coping skills. Child generally exhibits an age-appropriate range of emotional behaviors. Child displays developmentally appropriate emotional coping responses that do not, or minimally interfere with, school, family, or community functioning. Child has age-appropriate ability to cope with a range of emotions and social environments. Child has ability to adjust to new situations.
- c. Situational concern. Child may demonstrate some symptoms reflecting situational sadness, anxiety, aggression, or withdrawal. Maintains situationally-appropriate emotional control. This does not include short-term, adverse reactions to parental visitation, but could include response to initial placement or re-placement (ex. temper tantrums, nightmares, loss of appetite, bedwetting, etc.).
- d. Limited emotional behavior/coping skills. Child has some difficulty dealing with daily stresses, crises, or problems which interfere with family, school, and/or community functioning. Problems may include, but are not limited to, withdrawal from social

interaction, flat affect, changes in sleeping or eating patterns, increased aggression, unusually low frustration/tolerance, etc.

- e. Severely limited emotional behavior/coping skills. Child has consistent difficulty in dealing with daily stresses, crises, or problems which severely impair family, school, and/or community functioning. Child may have diagnosed psychiatric disturbance and may demonstrate severe behavior such as fire setting, suicidal behavior, violence toward people and/or animals, self mutilation, etc. Child frequently threatens to run away from placement.

C3. Child Development

*For this item, base assessment on developmental milestones as described in **the Stages of Development Table of the Foster Care Manual (CFF 722-8B STAGES OF DEVELOPMENT TABLE)**.*

- a. Advanced development. Child's development is above chronological age level. Child meets all physical, language/communication, and cognitive developmental milestones.
- b. Age-appropriate development. Child's development is consistent with chronological age level. Child meets most physical, language/communication, and cognitive developmental milestones.
- c. Situational concern. Child has a situational concern in physical, language/communication, and/or cognitive development as the result of an experience which causes an interruption in progress toward developmental milestone achievement.
- d. Limited development. Child has some delays in meeting physical, language/communication, and/or cognitive developmental milestones. Some services and intervention required.
- e. Severely limited development. Child has severe delays in meeting physical, language/communication, and/or cognitive developmental milestones. Formalized services and structured intervention required.

C4. Family and Kin/Fictive Kin Relationships/Attachments

Score the child's interaction with his/her family (those individuals the child is related to or views as family). For children in placement, base assessment on visits and other contact such as telephone contact or letters.

- a. Nurturing/supportive relationships/attachments. Child has positive interactions with and exhibits strong attachments to family, kin, fictive kin, and/or caregiver. Child has sense of belonging with family.
- b. Appropriate relationships/attachments. Child has positive interactions with and exhibits appropriate attachments to family, kin, fictive kin, and/or caregiver despite some minor conflicts.
- c. Situational concern. Child experiences temporary strain in interaction with family members. Child may be temporarily angry with the family and/or lacks desire for family interaction (ex. visitation, telephone contact, threatens truancy if visit occurs, refuses to participate in family therapy, etc.).
- d. Limited relationships/attachments. Child does not have positive interactions with family, does not exhibit appropriate attachments to family, kin, fictive kin, and/or caregiver. Child does not have a sense of belonging with family.

- e. Severely limited or no relationships/attachments. Child has no interactions or has non-supportive, destructive interactions with family, and exhibits negative attachments to family, kin, fictive kin, and/or caregiver.

C5. Education

Does the child have a special education plan? Answer “yes” or “no.”

Does the child need assessment for special education/early intervention? Answer “yes” or “no.”

- a. Exceptional academic achievement. Child is working above grade level and/or is exceeding the expectations of the child’s specific educational plan. If child is not of mandatory school age, and is not attending school, the child’s cognitive functioning exceeds developmental milestones.
- b. Adequate achievement. Child is working at grade level and/or is meeting expectations of the child’s specific educational plan. If the child is not of mandatory school age, and is not attending school, the child meets most cognitive developmental milestones; or if there are early intervention needs, the child is participating in early intervention services and is meeting or exceeding the goals/expectations of the early intervention plan.
- c. Situational concern. Child may demonstrate some school difficulties (ex., decreased concentration in the classroom, acting-out behavior, regression in academic performance, etc.) that appear temporary in nature.
- d. Minor difficulty. Child is working below grade level in at least one, but not more than half of subject areas, indicating that the current educational plan may need modification. The child may be exhibiting minor truancy or school behavioral problems. If the child is not of mandatory school age, and is not attending school, the child has minor cognitive developmental delays and/or is not meeting some of the goals of the early intervention plan.
- e. Major/chronic difficulty. Child is working below grade level in more than half of subject areas and/or is not meeting the goals of the existing educational plan, indicating that the current plan needs modification, or the child needs a specific educational plan and does not have one in place. Score this item for a child who is legally required to attend school and is not attending, or who has been expelled/excluded from school. If the child is not of mandatory school age, and is not attending school, the child has severe cognitive developmental delays and/or is not meeting any of the goals of the early intervention plan.

C6. Substance Use (Substances include alcohol, tobacco, and other drugs)

- a. No substance use. Child does not use alcohol, drugs, or other substances and is age-appropriately aware of consequences of use. Child is not in peer relationships/social activities involving alcohol and/or other drugs and/or chooses not to use despite peer-pressured opportunities to use. No demonstrated history or current problems related to substance use.
- b. Past experience. Child may have past experience with alcohol and/or other drugs but there is no indication of sustained use.
- c. Situational concern. Child may have an isolated incident or experience with alcohol, tobacco, or other drugs that is not recurring.
- d. Current substance use. Child’s alcohol and/or other drug use has resulted in problematic behavior at home, school, and/or in the community. Use may include

multiple drugs. Child may be involved in peer relationships/social activities involving alcohol, drugs, and other substances.

- e. Frequent substance use. Child's frequent alcohol, drug, or other substance usage results in severe behavior disturbances at home, school, and/or in the community. Child may require medical intervention to detoxify.

C7. Sexual Behavior

Has child been sexually abused? Answer "yes," "no," or "unknown."

Does child demonstrate sexually inappropriate behavior? Answer "yes," "no," or "unknown." Examples may include, but are not limited to, a child who engages in persistent self-stimulation, chronically acts-out toward others children in sexually inappropriate ways, or engages in sexual contact with others.

- a. Healthy sexual adjustment/responsible behavior. Child displays no signs or history of sexual abuse or exploitation. Child exhibits developmentally appropriate sexual awareness and interest.
- b. Appropriate sexual adjustment/behavior. Child does not show any indications of their past sexual abuse and responds to treatment/intervention. Child may participate in age-appropriate sexual behavior or may show age-appropriate interest in sexuality.
- c. Situational concern. Child has begun to exhibit heightened interest/awareness of sexuality that may be a response to a change in situation or incident, such as inappropriate touching and/or comments/language.
- d. Compromised sexual adjustment/behavior. Child is displaying inappropriate behavior due to known or suspected sexual abuse or exploitation. Behaviors may include more sexualized behaviors than same aged children, preoccupation with sexual themes, increased masturbation, and/or simulating sex acts.
- e. Severely compromised sexual adjustment/behavior. Child exhibits extreme sexualized behaviors which may include frequent masturbation, persistent sexually acting out behaviors toward others, etc.

C8. Peer/Adult Social Relationships (Non-Family)

- a. Strong social relationships. Child routinely interacts with social groups having positive support and influence, models responsible behavior, participates in constructive age-appropriate activities. Child is actively engaged with a positive support network that is comprised of at least one supportive, caring non-family adult. Child displays age-appropriate solutions to social conflict.
- b. Adequate social relationships. Child frequently interacts with social groups having positive support and influence; child displays age-appropriate social behavior; frequently participates in positive age-appropriate activities. Child engages with a positive support network. Child frequently displays age-appropriate solutions to social conflict.
- c. Situational concern. Child has a situational concern with peer/adult relationships as the result of an experience (ex. a new school, change of placement, relationship loss, etc.) that may require additional support.
- d. Limited social relationships. Child has limited peer/social relationships and limited adult support. Child demonstrates inconsistent social skills. Child has limited positive interactions with others and demonstrates limited ability to resolve conflicts. Child occasionally engages in high risk behavior/activities.

- e. Severely limited social relationships. Child has severely limited and/or negative peer social relationships, has minimal or lacks non-family adult support, is isolated and lacks access to a support network. Child is unable to resolve social conflict. Child chronically engages in high risk behaviors/activities.

C9. Cultural/Community Identity

- a. Strong cultural/community identity. Child relates positively to his/her cultural, ethnic, and/or religious heritage. Child identifies with and participates in cultural and community heritage, beliefs, and practices. Child expresses age-appropriate inquiries about his/her cultural/community identity.
- b. Adequate cultural/community identity. Child relates to his/her cultural, ethnic, and/or religious heritage. Child has a developing sense of identity with his/her cultural and community heritage. Child expresses an age-appropriate awareness of his/her cultural/community identity.
- c. Situational concern. Child has a situational concern related to the development of a positive cultural/community identity, which causes an interruption in progress toward achievement of such an identity.
- d. Limited cultural/community identity. Child has some conflict with his/her cultural, ethnic, and/or religious heritage. Child's sense of identity with his/her cultural and community heritage is limited. Child does not express an age-appropriate awareness of his/her cultural identity.
- e. Disconnected from cultural/community identity. Child lacks a sense of identity with his/her cultural and community heritage, or has a sense of identity but his/her understanding of it results in negative self-concept, distorted perceptions about identity, and/or impaired social functioning.