

CITIZEN REVIEW PANEL DATA FORM

CASE ID # _____

DATE OF REVIEW _____

FAMILY MEMBERS

Relationship	DOB	Gender	Race	Role	Residence Type*	County/State

Residence Type: 1 (Home of custodial parent(s)); 2 (Home of other relative); 3 (Non-relative, non-licensed home); 4 (Homeless); 5 (Foster home); 6 (Group home); 7 (BH licensed facility); 8 (Detention facility); 9 (Correctional facility); 10 (Shelter facility); 11 (Independent living); 12 (Runaway); 13 (Other parent home, non-custodial); 14 (Other); 15 (unknown)

REPORT HISTORY:

of CPS Reports on Family _____; Number of prior substantiated reports on family _____
 Date of initial report: _____; Date of most recent report: _____;

Report Date	Perpetrator	Victim	Allegation	Risk	Finding

Allegations: _____

CASE RECORD REVIEW

STAGE 1: INTAKE AND INITIAL SCREENING

Recommendations/Comments on Intake/Initial Screening (Consider Hotline's response to report, including accuracy and timeliness.)

STAGE 2: INVESTIGATION OR ASSESSMENT

1. Investigation coordination with law enforcement: Were interagency protocols followed? yes; no; n/a; unk

Comments: _____

2. Thoroughness and accuracy of the investigation;

A. Did the investigation address the required areas of:

- i The existence, cause, nature and extent of child maltreatment? yes; no; n/a; unk
- ii The existence of previous injuries? yes; no; n/a; unk
- iii Identity of the person responsible for the maltreatment? yes; no; n/a; unk
- iv Names and conditions of other children in the home? yes; no; n/a; unk
- v The environment where the child resides? yes; no; n/a; unk.

Comments: _____

- B. Were necessary medical evaluations completed in a timely manner? yes; no; n/a; unk

Comments: (Consider timeliness and quality of medical examinations.)

C. Were necessary psychological evaluations completed in a timely manner? yes; no; n/a; unk

Comments: (Consider timeliness and quality of psychological evaluations.)

D. Completion and thoroughness of interviews

- i Were parents, caregivers and the alleged abusive person interviewed? yes; no; n/a; unk
- ii Was the alleged victim interviewed alone, away from the presence of the alleged abusive person? yes; no; n/a; unk
- iii Were other children in the home interviewed? yes; no; n/a; unk
- iv Does the case record reflect compliance with the protocol or policy? yes; no; n/a; unk
- v Was the reporting source or others with knowledge of the maltreatment contacted and interviewed by the investigator? yes; no; n/a; unk

Comments: _____

3. Recommendations/Comments on Investigation Stage: (Consider above answers, promptness and quality of investigations, use of family advocacy center, steps to reduce trauma when answering this question.)

STAGE 3: CRISIS INTERVENTION, SAFETY ASSESSMENT, EMERGENCY PLACEMENT, AND FAMILY STABILIZATION

1. Safety Issues: Were immediate and adequate steps taken to ensure the safety of the child(ren)?
yes; no; n/a; unk

Comments: (Explore strengths and/or weaknesses in the following areas - safety assessment, identification of risks, services offered, and adequate safety plan.)

2. Comments on Crisis Intervention, Safety Assessment, Emergency Placement, & Family Stabilization Stage: (Consider above question, efforts to mitigate the effects of removal, efforts to allow the child to safely remain with the parent(s), and consideration given to relative placement.)

STAGE 4: INVESTIGATION FINDINGS/ DETERMINATION

1. Was sufficient information gathered to make a final determination of the finding? yes; no; n/a; unk

Comments: _____

2. Did the case record document support the finding (for example: substantiated, proposed substantiation or unsubstantiated)? yes; no; n/a; unk

Comments: _____

3. Comments on Report Findings/Determination Stage:

STAGE 5: CASE PLANNING/CASE PLAN IMPLEMENTATION
(Answer for cases opened for services with CPS)

1. Was the case plan developed timely and reviewed periodically in accordance with ACYF policy? yes; no; n/a; unk

Comments: _____

2. Were the following persons involved with the planning process:

- A. Parents/guardians? yes; no; n/a; unk
- B. Child(ren)? yes; no; n/a; unk
- C. Other relatives? yes; no; n/a; unk
- D. Other team members? yes; no; n/a; unk

Comments: _____

3. Were needs of the family adequately identified and addressed in the case plan, including modifications to reflect progress or other changes in needs? yes; no; n/a; unk

Comments: _____

4. Was a range of services offered to the family to promote reunification or permanent placement outside the home? yes; no; n/a; unk

Comments: _____

5. Were there barriers to obtaining services? yes; no; n/a; unk

Comments: _____

6. Were timely, meaningful contacts made with the child(ren) and parent(s)? yes; no; n/a; unk

Comments: (Consider compliance with agency policy, frequency of face-to-face contacts, visits in the family home/foster home and whether pertinent issues were addressed.)

7. Was the content/purpose of the contact or visit reflected in the records? yes; no; n/a; unk

Comments: _____

8. Comments on Case Planning Stage: (In addition to the above questions, consider: visitation plans with parents and siblings, medical and dental care of children, mental health treatment, educational needs and stability of out-of-home placements.)

STAGE 6: CASE CLOSURE (Answer if the case was closed at the time of review)

1. Were identified risks sufficiently resolved prior to case closure? yes; no; n/a; unk
- A. If no, what were the unresolved risks? _____
- B. In the Panel's opinion, were these risks severe enough to warrant further involvement with CPS? yes; no; n/a; unk

Comments: _____

2. What were the identified reasons for case closure?
- Risks were no longer severe enough to warrant further CPS involvement
 - Parents/guardians refused CPS services
 - Parents/guardians agreed to participate in community services
 - Dependency petition was dismissed

Comments: _____

3. Did the Panel agree with the decision to close the case? yes; no; n/a; unk

Comments: _____

4. Comments on case closure stage: (In addition to the above questions, consider if prior to closure this decision was discussed with the family, and if clear instructions were provided to family members on any follow-up issues or actions to take if safety concerns return?)

FAMILY RISK FACTORS:

- | | | |
|---|--|---|
| G Substance abuse | G Lack of anger control | G Lack of motivation to provide adequate care |
| G Mental health problems | G Lack of parenting skills | G Prior removals by CPS or severance of parental rights |
| G Domestic violence | G Lack of resources for adequate food/shelter/medical care/childcare | G Prior substantiated reports |
| G History of violence outside of home | G Teen Parent | Other _____ |
| G Lack of physical or mental ability to provide adequate care | G Prior child death | |

CASE REVIEW FINDINGS:

1. Were State/Federal policies followed? yes; no

Comments: _____

2. Based upon this review, does the panel recommend any changes in policies and procedures?

yes; no

Comments: _____
