|  |
| --- |
| Initial  Re-assessment  Discharge |

**Illinois Medicaid Comprehensive Assessment of Needs and Strengths (IM+CANS)**

**Addendum 3 – DCFS Involved Youth**

**Please note: This addendum must be completed for DCFS involved children and youth.**

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| **24. GENERAL INFORMATION – DCFS ADDENDUM** | | | | |
| **Youth’s Name** | | **RIN** | **Staff Completing Form** | **Date Completed** |
|  | |  |  |  |
| **DCFS Involvement:** | Youth in Care  Intact Family Services  Intensive Placement Stability Services (IPS) | | | |

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| **25. [H2] SEXUALLY AGGRESSIVE BEHAVIOR SUB-MODULE – ADDITIONAL DCFS YOUTH ITEMS** | | | | | |
| **This section is to be completed when the Sexually Problematic Behavior Module, Sexual Aggression item is rated 1, 2 or 3.** | | | | | |
| **Item** | | **0 1 2 3** |  | **Item** | **0 1 2 3** |
| *Temporal Consistency* | |  |  | *Severity of Sexual Abuse* |  |
| *History of Sexually Abusive Behavior* | |  |  | *Prior Treatment* |  |
| **Supplemental Information:** Provide additional information regarding the youth’s needs as it relates to his/her sexually aggressive behavior (items rated 2 and 3). | | | | | |
|  | | | | | |
| **26. PARENT/GUARDIAN SAFETY CONCERNS** | | | | | |
| **Item** | **n/a 0 1 2 3** | |  | **Item** | **0 1 2 3** |
| Discipline |  | |  | Frustration Tolerance |  |
| Condition of the Home |  | |  | History of Maltreatment of Children |  |
| **Supplemental Information:** Provide additional information regarding parent/guardian safety (items rated 2 and 3). The narrative can include relevant information from the Family Information section (IM+CANS, p. 7). | | | | | |

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| **27. PARENT/GUARDIAN WELLBEING CONCERNS** | | | | |
| **Item** | **0 1 2 3** |  | **Item** | **0 1 2 3** |
| Parent/Guardian Traumatic Reactions |  |  | Independent Living Skills |  |
| Parent/Guardian Understanding of Impact of |  |  | Relationship/Contact with Caseworker |  |
| Own Behavior on Children |  |  | Responsibility in Maltreatment |  |
| Effective Parenting Approaches |  |  | Relationship with Abuser(s) |  |
| **Supplemental Information**: Provide additional information regarding parent/guardian resilience (items rated 2 and 3). The narrative can include relevant information from the Family Information section (IM+CANS, p. 7). | | | | |

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| **28. PARENT/GUARDIAN PERMANENCE CONCERNS** | | | | |
| **Item** | **0 1 2 3** |  | **Item** | **NA 0 1 2 3** |
| Social and Family Connections |  |  | Parent/Guardian Participation in Visitation |  |
| Involvement in Personal Treatment |  |  | Commitment to Reunification |  |
| **Supplemental Information:** Provide additional information regarding positive family, community, and social connections; and commitment to permanency plan goal (items rated 2 and 3). | | | | |

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| **29. SUBSTITUTE CAREGIVER COMMITMENT TO PERMANENCE**   N/A – youth does not have a substitute caregiver | | | | |
| **Item** | **0 1 2 3** |  | **Item** | **0 1 2 3** |
| Collaboration with Other Parents/Caregivers |  |  | Inclusion of the Youth in the Foster Family |  |
| Subst. Caregiver Support for Perm. Plan Goal |  |  |  |  |
| **Supplemental Information:** Provide additional information regarding the substitute caregiver’s commitment to the permanency plan goal(items rated 2 and 3). The narrative can include relevant information from the Caregiver Needs and Strengths Addendum. | | | | |

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| **30. INTACT FAMILY SERVICES MODULE**  N/A – youth is not enrolled in Intact Family Services | | | | | | |
| **Item** | **n/a 0 1 2 3** | |  | **Item** | **n/a 0 1 2 3** | |
| Parental/Secondary Caregiver Collaboration |  | |  | Family Role Appropriateness |  | |
| Family Conflict |  | |  | Home Maintenance |  | |
| Family Communication |  | |  |  |  | |
| **Supplemental Information:** Provide additional information regarding the family system(items rated 2 and 3). The narrative can include relevant information from the Family Information section (IM+CANS, p. 7). | | | | | | |
|  | | | | | | |
| **31. INTENSIVE PLACEMENT STABILIZATION SERVICES (IPS) MODULE**  N/A – youth is not enrolled in IPS | | | | | | |
| **Youth Items** | | **0 1 2 3** |  | **Substitute Caregiver Items** | | **0 1 2 3** |
| Years in Care | |  |  | Knowledge of Youth’s Development and Needs | |  |
| Placement History | |  |  | Discipline | |  |
|  | |  |  | Substitute Caregiver Management of Emotions | |  |
| **Supplemental Information:** Provide additional information regarding the youth and substitute caregiver involved with the IPS program(items rated 2 and 3). The narrative can include relevant information from the Caregiver Needs and Strengths Addendum. | | | | | | |