

**New Mexico Child and Adolescent Needs and Strengths**

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| Date: |       |
| Type: | [ ]  Initial [ ]  Scheduled Update [ ]  Major Life Event [ ]  Exit  |

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| Assessor ID: |       | Program: |       |
| Client Name: |       | Client ID: |       | DOB |       |
| Gender: |       | Ethnicity: |       | Grade: |       | Zip Code: |       |

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| For the **Individual** **Strengths**, use the following categories and action levels: |
|  0 – Well-developed centerpiece strength; may be used as a centerpiece in an intervention/action plan |
|  1 – Identified and useful strength. Strength will be used, maintained or built upon as part of the plan. May require some effort to develop  strength into a centerpiece strength |
|  2 – Strengths have been identified but require strength-building efforts before they can be effectively utilized as part of a plan. Identified but  not useful. |
|  3 – An area in which no current strength is identified; efforts may be recommended to develop a strength in this area. |
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| **INDIVIDUAL STRENGTHS DOMAIN (Ages 6+)** |
| **Items** | **N/A 0 1 2 3** |  |  |  **0 1 2 3** |
| Family Strengths |  [ ]  [ ]  [ ]  [ ]  |  | Community Life |  [ ]  [ ]  [ ]  [ ]  |
| Interpersonal  |  [ ]  [ ]  [ ]  [ ]  |  | Relationship Permanence |  [ ]  [ ]  [ ]  [ ]  |
| Optimism |  [ ]  [ ]  [ ]  [ ]  |  | Resiliency |  [ ]  [ ]  [ ]  [ ]  |
| Educational Setting  |  [ ]  [ ]  [ ]  [ ]  [ ]  |  | Resourcefulness |  [ ]  [ ]  [ ]  [ ]  |
| Vocational  |  [ ]  [ ]  [ ]  [ ]  [ ]  |  | Cultural Identity |  [ ]  [ ]  [ ]  [ ]  |
| Talents and Interests |  [ ]  [ ]  [ ]  [ ]  |  | Natural Supports |  [ ]  [ ]  [ ]  [ ]  |
| Spiritual/Religious |  [ ]  [ ]  [ ]  [ ]  |  |  |   |
| Please write a rationale for Centerpiece (‘0’) and Useful (‘1’) Strengths, as well as Strengths to Build (‘2’ or ‘3’). |
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| For the **Needs Domains**, use the following categories and action levels: |
| 0 – No current need; no need for action or intervention. |
| 1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement. |
| 2 – Action is required to ensure that the identified need is addressed; need is interfering with functioning. |
| 3 – Need is dangerous or disabling; requires immediate and/or intensive action. |

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| **LIFE FUNCTIONING DOMAIN (Ages 6+)** |
| **Items** | **N/A 0 1 2 3** |  |  |  **0 1 2 3** |
| Family Functioning  |  [ ]  [ ]  [ ]  [ ]  |  | Sexual Development |  [ ]  [ ]  [ ]  [ ]  |
| Living Situation |  [ ]  [ ]  [ ]  [ ]  |  | Sleep |  [ ]  [ ]  [ ]  [ ]  |
| Social Functioning |  [ ]  [ ]  [ ]  [ ]  |  | School Attendance |  [ ]  [ ]  [ ]  [ ]  |
| Recreational |  [ ]  [ ]  [ ]  [ ]  |  | School Behavior |  [ ]  [ ]  [ ]  [ ]  |
| *Developmental/Intellectual (A)* |  [ ]  [ ]  [ ]  [ ]  |  | School Achievement |  [ ]  [ ]  [ ]  [ ]   |
| Legal |  [ ]  [ ]  [ ]  [ ]  |  | Decision Making |  [ ]  [ ]  [ ]  [ ]  |
| *Medical/Physical (B)* |  [ ]  [ ]  [ ]  [ ]  |  |  |  |

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| ***A. DEVELOPMENTAL NEEDS MODULE*** *(To complete when the Developmental/Intellectual item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Cognitive* |  [ ]  [ ]  [ ]  [ ]  |  |  *Communication* |  [ ]  [ ]  [ ]  [ ]  |
|  *Developmental* |  [ ]  [ ]  [ ]  [ ]  |  |  *Self-Care/ Daily Living Skills* |  [ ]  [ ]  [ ]  [ ]  |
| ***B. MEDICAL HEALTH MODULE*** *(To complete when the Medical/Physical item is rated ‘‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Life Threatening* |  [ ]  [ ]  [ ]  [ ]  |  |  *Intensity of Treatment* |  [ ]  [ ]  [ ]  [ ]  |
|  *Chronicity* |  [ ]  [ ]  [ ]  [ ]  |  |  *Organizational Complexity* |  [ ]  [ ]  [ ]  [ ]  |
|  *Diagnostic Complexity* |  [ ]  [ ]  [ ]  [ ]  |  |  *Emotional Response* |  [ ]  [ ]  [ ]  [ ]  |
|  *Impairment in Functioning* |  [ ]  [ ]  [ ]  [ ]  |  |  *Family Stress* |  [ ]  [ ]  [ ]  [ ]  |
| Please write a rationale for any item in the Life Functioning Domain or associated module rated actionable (‘2’ or ‘3’).  |
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| **BEHAVIORAL/EMOTIONAL NEEDS DOMAIN (Ages 6+)** |
| **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Psychosis (Thought Disorder) |  [ ]  [ ]  [ ]  [ ]  |  | Adjustment to Trauma |  [ ]  [ ]  [ ]  [ ]  |
| Impulsivity/Hyperactivity |  [ ]  [ ]  [ ]  [ ]  |  | Anger Control |  [ ]  [ ]  [ ]  [ ]  |
| Attention/Concentration |  [ ]  [ ]  [ ]  [ ]  |  | *Substance Use (C)* |  [ ]  [ ]  [ ]  [ ]  |
| Depression  |  [ ]  [ ]  [ ]  [ ]  |  | Eating Disturbance |  [ ]  [ ]  [ ]  [ ]  |
| Anxiety  |  [ ]  [ ]  [ ]  [ ]  |  | Attachment Difficulties |  [ ]  [ ]  [ ]  [ ]  |
| Oppositional (Non-Compl. with Auth.) |  [ ]  [ ]  [ ]  [ ]  |  | Behavioral Regression |  [ ]  [ ]  [ ]  [ ]  |
| Conduct (Antisocial Behavior) |  [ ]  [ ]  [ ]  [ ]  |  | Somatization |  [ ]  [ ]  [ ]  [ ]  |
| ***C. SUBSTANCE USE DISORDER MODULE*** *(To complete when the Substance Use item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Severity of Use* |  [ ]  [ ]  [ ]  [ ]  |  |  *Parental Influences*  |  [ ]  [ ]  [ ]  [ ]  |
|  *Duration of Use* |  [ ]  [ ]  [ ]  [ ]  |  |  *Environmental Influences* |  [ ]  [ ]  [ ]  [ ]  |
|  *Stage of Recovery* |  [ ]  [ ]  [ ]  [ ]  |  |  *Recovery Support in Community* |  [ ]  [ ]  [ ]  [ ]  |
|  *Peer Influences* |  [ ]  [ ]  [ ]  [ ]  |  |  |  |
| Please write a rationale for any item in the Behavioral/Emotional Needs Domain or associated module rated actionable (‘2’ or ‘3’). |
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| **RISK BEHAVIORS DOMAIN (Ages 6+)** |
| **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
| *Suicide Risk (C)* |  [ ]  [ ]  [ ]  [ ]  |  | *Runaway (G)* |  [ ]  [ ]  [ ]  [ ]  |
| Non-Suicidal Self-Injurious Behavior |  [ ]  [ ]  [ ]  [ ]  |  | Intentional Misbehavior |  [ ]  [ ]  [ ]  [ ]  |
| Other Self-Harm (Recklessness) |  [ ]  [ ]  [ ]  [ ]  |  | *Fire Setting (H)* |  [ ]  [ ]  [ ]  [ ]  |
| *Danger to Others (D)* |  [ ]  [ ]  [ ]  [ ]  |  | Sexually Reactive Behavior |  [ ]  [ ]  [ ]  [ ]  |
| *Sexual Aggression (E)* |  [ ]  [ ]  [ ]  [ ]  |  | *Victimization/Exploitation (I)* |  [ ]  [ ]  [ ]  [ ]  |
| *Delinquent Behavior (F)* |  [ ]  [ ]  [ ]  [ ]  |  |  |   |
| ***D. SUICIDE RISK MODULE*** *(To complete when the Suicide Risk item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
| History of Attempts | [ ]  [ ]  [ ]  [ ]  |  | Suicide Intent | [ ]  [ ]  [ ]  [ ]  |
| Suicide Ideation | [ ]  [ ]  [ ]  [ ]  |  | Suicide Planning | [ ]  [ ]  [ ]  [ ]  |
| ***E. DANGEROUSNESS/VIOLENCE MODULE*** *(To complete when the Danger to Others item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *History of Violence* |  [ ]  [ ]  [ ]  [ ]  |  |  *Violent Thinking* |  [ ]  [ ]  [ ]  [ ]  |
|  *Frustration Management* |  [ ]  [ ]  [ ]  [ ]  |  |  *Aware of Violence Potential* |  [ ]  [ ]  [ ]  [ ]  |
|  *Hostility* |  [ ]  [ ]  [ ]  [ ]  |  |  *Response to Consequences* |  [ ]  [ ]  [ ]  [ ]  |
|  *Paranoid Thinking* |  [ ]  [ ]  [ ]  [ ]  |  |  *Commitment to Self-Control* |  [ ]  [ ]  [ ]  [ ]  |
|  *Secondary Gains from Anger* |  [ ]  [ ]  [ ]  [ ]  |  |  *Treatment Involvement* |  [ ]  [ ]  [ ]  [ ]  |
| ***F. SEXUALLY AGGRESSIVE BEHAVIOR MODULE*** *(To complete when the Sexual Aggression item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Relationship* |  [ ]  [ ]  [ ]  [ ]  |  |  *Type of Sex Act* |  [ ]  [ ]  [ ]  [ ]  |
|  *Physical Force/Threat* |  [ ]  [ ]  [ ]  [ ]  |  |  *Response to Accusation* |  [ ]  [ ]  [ ]  [ ]  |
|  *Planning* |  [ ]  [ ]  [ ]  [ ]  |  |  *Temporal Consistency* |  [ ]  [ ]  [ ]  [ ]  |
|  *Age Differential* |  [ ]  [ ]  [ ]  [ ]  |  |  *History of Sexually Aggressive Behav.* |  [ ]  [ ]  [ ]  [ ]  |
| ***G. JUVENILE JUSTICE MODULE*** *(To complete when the Delinquent Behavior item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *History* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Peer Influences* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Seriousness* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Parental Criminal Behavior* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Planning* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Environmental Influences* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Community Safety* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Legal Compliance* |  *[ ]  [ ]  [ ]  [ ]*  |
| ***H. RUNAWAY MODULE*** *(To complete when the Runaway item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Frequency of Running* |  [ ]  [ ]  [ ]  [ ]  |  |  *Likelihood of Return on Own* |  [ ]  [ ]  [ ]  [ ]  |
|  *Consistency of Destination* |  [ ]  [ ]  [ ]  [ ]  |  |  *Involvement with Others* |  [ ]  [ ]  [ ]  [ ]  |
|  *Safety of Destination* |  [ ]  [ ]  [ ]  [ ]  |  |  *Realistic Expectations* |  [ ]  [ ]  [ ]  [ ]  |
|  *Involvement in Illegal Activities* |  [ ]  [ ]  [ ]  [ ]  |  |  *Planning* |  [ ]  [ ]  [ ]  [ ]  |
| ***I. FIRE SETTING MODULE*** *(To complete when the Fire Setting item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *History* |  [ ]  [ ]  [ ]  [ ]  |  |  *Community Safety* |  [ ]  [ ]  [ ]  [ ]  |
|  *Seriousness* |  [ ]  [ ]  [ ]  [ ]  |  |  *Response to Accusation* |  [ ]  [ ]  [ ]  [ ]  |
|  *Planning* |  [ ]  [ ]  [ ]  [ ]  |  |  *Remorse* |  [ ]  [ ]  [ ]  [ ]  |
|  *Use of Accelerants* |  [ ]  [ ]  [ ]  [ ]  |  |  *Likelihood of Future Fire Setting* |  [ ]  [ ]  [ ]  [ ]  |
|  *Intention to Harm* |  [ ]  [ ]  [ ]  [ ]  |  |  |  |
| ***J. COMMERCIALLY SEXUALLY EXPLOITED MODULE*** *(To complete when the Victimization/Exploitation item is rated ‘1’, ‘2’ or ‘3’.)* |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Duration of Exploitation* |  [ ]  [ ]  [ ]  [ ]  |  |  *Exploitation of Others* |  [ ]  [ ]  [ ]  [ ]  |
|  *Age of Onset - Exploitation* |  [ ]  [ ]  [ ]  [ ]  |  |  *Reproductive Health* |  [ ]  [ ]  [ ]  [ ]  |
|  *Perception of Dangerousness* |  [ ]  [ ]  [ ]  [ ]  |  |  *Arrest for Loitering/Solicitation* |  [ ]  [ ]  [ ]  [ ]  |
|  *Knowledge of Exploitation* |  [ ]  [ ]  [ ]  [ ]  |  |  *Exploitation History* |  [ ]  [ ]  [ ]  [ ]  |
|  *Trauma Bond* |  [ ]  [ ]  [ ]  [ ]  |  |  |  |

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| Please write a rationale for any item in the Risk Behaviors or any associated module rated actionable (‘2’ or ‘3’). |
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| **CULTURAL NEEDS DOMAIN (All Ages. For Children birth thru age 5, rate this section for the family.)** |
|  **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Language  |  [ ]  [ ]  [ ]  [ ]  |  | Cultural Stress |  [ ]  [ ]  [ ]  [ ]  |
| Traditions and Rituals  |  [ ]  [ ]  [ ]  [ ]  |  | Cultural Diffs. within the Family |  [ ]  [ ]  [ ]  [ ]  |
| Please write a rationale for any item in the Cultural Factors Domain rated actionable (‘2’ or ‘3’). |
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| **EARLY CHILDHOOD DOMAIN (Age birth thru age 5)** |
| **Items N/A** |  **0 1 2 3** |  | **N/A** |  **0 1 2 3** |
| *Challenges* |   |  | *Functioning continued* |   |
| Impulsivity/Hyperactivity |  [ ]  [ ]  [ ]  [ ]  |  | Early Education |  [ ]  [ ]  [ ]  [ ]  |
| Depression |  [ ]  [ ]  [ ]  [ ]  |  | Social and Emotional Functioning |  [ ]  [ ]  [ ]  [ ]  |
| Anxiety |  [ ]  [ ]  [ ]  [ ]  |  | Developmental/Intellectual |  [ ]  [ ]  [ ]  [ ]  |
| Oppositional |  [ ]  [ ]  [ ]  [ ]  |  |  Medical/Physical |  [ ]  [ ]  [ ]  [ ]  |
| Aggressive Behaviors |  [ ]  [ ]  [ ]  [ ]  |  | *Risk Behaviors & Factors* |   |
| Attachment Difficulties |  [ ]  [ ]  [ ]  [ ]  |  | Self-Harm (12 months+) [ ]  |  [ ]  [ ]  [ ]  [ ]  |
| Adjustment to Trauma |  [ ]  [ ]  [ ]  [ ]  |  | Exploited |  [ ]  [ ]  [ ]  [ ]  |
| Regulatory |  [ ]  [ ]  [ ]  [ ]  |  | Prenatal Care |  [ ]  [ ]  [ ]  [ ]  |
| Atypical Behaviors |  [ ]  [ ]  [ ]  [ ]  |  | Exposure |  [ ]  [ ]  [ ]  [ ]  |
|  Sleep (12 months +) [ ]  |  [ ]  [ ]  [ ]  [ ]  |  | Labor and Delivery |  [ ]  [ ]  [ ]  [ ]  |
| *Functioning* |  |  | Birth Weight |  [ ]  [ ]  [ ]  [ ]  |
| Family Functioning |  [ ]  [ ]  [ ]  [ ]  |  | Failure to Thrive |  [ ]  [ ]  [ ]  [ ]  |
| For the **Early Childhood Strengths**, use the following categories and action levels: |
|  0 – Well-developed centerpiece strength; may be used as a centerpiece in an intervention/action plan |
|  1 – Identified and useful strength. Strength will be used, maintained or built upon as part of the plan. May require some effort to develop  strength into a centerpiece strength |
|  2 – Strengths have been identified but require strength-building efforts before they can be effectively utilized as part of a plan. Identified but  not useful. |
|  3 – An area in which no current strength is identified; efforts may be recommended to develop a strength in this area. |
| **Items**  |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Family Strengths | [ ]  [ ]  [ ]  [ ]  |  | Resiliency (Persistence & Adaptab.) | [ ]  [ ]  [ ]  [ ]  |
| Interpersonal | [ ]  [ ]  [ ]  [ ]  |  | Relationship Permanence | [ ]  [ ]  [ ]  [ ]  |
| Natural Supports | [ ]  [ ]  [ ]  [ ]  |  | Playfulness | [ ]  [ ]  [ ]  [ ]  |
| Please write a rationale for any item in the Early Childhood Domain rated actionable (‘2’ or ‘3’). |
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| **TRANSITION AGE YOUTH DOMAIN (Ages 16+)** |
| For the **Transition Age Youth Needs Domains**, use the following categories and action levels: |
|  0 – No current need; no need for action or intervention. |
|  1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement. |
|  2 – Action is required to ensure that the identified need is addressed; need is interfering with functioning. |
|  3 – Need is dangerous or disabling; requires immediate and/or intensive action. |
| **Items** | **N/A 0 1 2 3** |  |  |  **0 1 2 3** |
| *Behavioral/Emotional Needs* |  |  | *Functioning continued* |  |
| Interpersonal Problems |  [ ]  [ ]  [ ]  [ ]  |  | Self-Care |  [ ]  [ ]  [ ]  [ ]  |
| *Functioning* |  |  | Medication Adherence |  [ ]  [ ]  [ ]  [ ]  |
| Independent Living Skills |  [ ]  [ ]  [ ]  [ ]  |  | Intimate Relationships |  [ ]  [ ]  [ ]  [ ]  |
| *Parental/Caregiving Roles (J)* |  [ ]  [ ]  [ ]  [ ]  [ ]  |  | Transportation |  [ ]  [ ]  [ ]  [ ]  |
| *Job Functioning (K)* |  [ ]  [ ]  [ ]  [ ]  [ ]  |  |  |  |
| ***K. PARENTING/CAREGIVING MODULE*** *(To complete when the Parental/Caregiving Role item is rated ‘1’, ‘2’ or ‘3’.)* |
| **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
|  *Knowledge of Needs* |  [ ]  [ ]  [ ]  [ ]  |  |  *Organization* |  [ ]  [ ]  [ ]  [ ]  |
|  *Supervision* |  [ ]  [ ]  [ ]  [ ]  |  |  *Marital/Partner Viol. In the Home* |  [ ]  [ ]  [ ]  [ ]  |
|  *Involvement with Care* |  [ ]  [ ]  [ ]  [ ]  |  |  |  |
| ***L. READINESS INVENTORY FOR SUCCESSFUL EMPLOYMENT MODULE*** *(To complete when the Job Functioning item is rated ‘1’, ‘2’ or ‘3’.)* |
| **Items** | **N/A 0 1 2 3** |  |  |  **0 1 2 3** |
|  *Career Aspirations* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Job Relations* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Aspirational Congruence* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Job Enjoyment* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Labor Market Expectations* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Customer Orientation* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Work Ethic* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Routine* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Work History* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Skills Relevant to Aspirations* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Time Since Last Job* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Digital Literacy* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Job Turnover*  |  [ ]  [ ]  [ ]  [ ]  [ ]  |  |  *Financial Literacy* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Job Attendance* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Resume Cover Letter* |  *[ ]  [ ]  [ ]  [ ]*  |
|  *Job Performance* |  *[ ]  [ ]  [ ]  [ ]*  |  |  *Interview Clothes* |  *[ ]  [ ]  [ ]  [ ]*  |
| Please write a rationale for any item in the Transition Age Youth Domain or associated module rated actionable (‘2’ or ‘3’). |
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| For the **Potentially Traumatic/Adverse Childhood Experiences**, use the following categories and action levels: |
|  No – No evidence of any trauma of this type. |
|  Yes – Child/youth has had experience, or there is suspicion that the child/youth has experienced this type of trauma—one incident, multiple  incidents, or chronic, on-going experiences. |

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| **POTENTIALLY TRAUMATIC/ADVERSE CHILDHOOD EXPERIENCES -- LIFETIME EXPOSURE (All Ages)** |
|  | **No Yes** |  |  | **No Yes** |
| Sexual Abuse  | [ ]  [ ]  |  | Witness to Family Violence | [ ]  [ ]  |
| Physical Abuse | [ ]  [ ]  |  | Witness to Community/School Violence | [ ]  [ ]  |
| Neglect | [ ]  [ ]  |  | Witness /Victim of Criminal Acts | [ ]  [ ]  |
| Emotional Abuse | [ ]  [ ]  |  | War/Terrorism Affected | [ ]  [ ]  |
| Medical Trauma | [ ]  [ ]  |  | Disrupt in Caregiving/Attachment Losses | [ ]  [ ]  |
| Natural or Manmade Disaster | [ ]  [ ]  |  | Parental Criminal Behavior | [ ]  [ ]  |
| Please write a rationale for any item rated ‘YES’.  |
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| For the **Needs Domains**, use the following categories and action levels: |
| 0 – No current need; no need for action or intervention. |
| 1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement. |
| 2 – Action is required to ensure that the identified need is addressed; need is interfering with functioning. |
| 3 – Need is dangerous or disabling; requires immediate and/or intensive action. |

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| **TRAUMATIC STRESS SYMPTOMS (Ages 6+)** |
| **Items** |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Emotional and/or Phys. Dysregulation |  [ ]  [ ]  [ ]  [ ]  |  | Avoidance  |  [ ]  [ ]  [ ]  [ ]  |
| Intrusions / Re-experiencing |  [ ]  [ ]  [ ]  [ ]  |  | Numbing |  [ ]  [ ]  [ ]  [ ]  |
| Traumatic Grief & Separation |  [ ]  [ ]  [ ]  [ ]  |  | Dissociation |  [ ]  [ ]  [ ]  [ ]  |
| Hyperarousal |  [ ]  [ ]  [ ]  [ ]  |  | Time Before Treatment |  [ ]  [ ]  [ ]  [ ]  |
| Please write a rationale for any item in the Traumatic Stress Symptoms Domain rated actionable (‘2’ or ‘3’). |
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| **CAREGIVER RESOURCES & NEEDS DOMAIN (All Ages) [ ]** Not applicable; no caregiver identified. |
| 0 – No current need; no need for action or intervention. This may be a resource for the child/youth. |
| 1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement. This may be  an opportunity for resource building. |
| 2 – Need is interfering with the provision of care; action is required to ensure that the identified need is addressed. |
| 3 – Need prevents the provision of care; requires immediate and/or intensive action. |

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| **Caregiver Information** |
| **First Name:**       | **Last Name:**       | **Relationship:**       |
|  |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Supervision |  [ ]  [ ]  [ ]  [ ]  |  | Substance Use  |  [ ]  [ ]  [ ]  [ ]  |
| Involvement with Care  |  [ ]  [ ]  [ ]  [ ]  |  | Developmental |  [ ]  [ ]  [ ]  [ ]  |
| Knowledge  |  [ ]  [ ]  [ ]  [ ]  |  | Safety  |  [ ]  [ ]  [ ]  [ ]  |
| Organization  |  [ ]  [ ]  [ ]  [ ]  |  | Family Stress |  [ ]  [ ]  [ ]  [ ]  |
| Social Resources  |  [ ]  [ ]  [ ]  [ ]  |  | Caregiver Post-traumatic Reactions |  [ ]  [ ]  [ ]  [ ]  |
| Residential Stability |  [ ]  [ ]  [ ]  [ ]  |  | Marital/Partner Viol. In the Home |  [ ]  [ ]  [ ]  [ ]  |
| Medical/Physical  |  [ ]  [ ]  [ ]  [ ]  |  | Family Relationship to the System  |  [ ]  [ ]  [ ]  [ ]  |
|  Mental Health |  [ ]  [ ]  [ ]  [ ]  |  | Legal Involvement |  [ ]  [ ]  [ ]  [ ]  |
| Please write a rationale for any item in the Caregiver Resources and Needs Domain rated actionable (‘2’ or ‘3’). |
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| **Caregiver Information** |
| **First Name:**       | **Last Name:**       | **Relationship:**       |
|  |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Supervision |  [ ]  [ ]  [ ]  [ ]  |  |  Substance Use  |  [ ]  [ ]  [ ]  [ ]  |
| Involvement with Care  |  [ ]  [ ]  [ ]  [ ]  |  | Developmental |  [ ]  [ ]  [ ]  [ ]  |
| Knowledge  |  [ ]  [ ]  [ ]  [ ]  |  | Safety  |  [ ]  [ ]  [ ]  [ ]  |
| Organization  |  [ ]  [ ]  [ ]  [ ]  |  | Family Stress |  [ ]  [ ]  [ ]  [ ]  |
| Social Resources  |  [ ]  [ ]  [ ]  [ ]  |  | Caregiver Post-traumatic Reactions |  [ ]  [ ]  [ ]  [ ]  |
| Residential Stability |  [ ]  [ ]  [ ]  [ ]  |  | Marital/Partner Viol. In the Home |  [ ]  [ ]  [ ]  [ ]  |
| Medical/Physical  |  [ ]  [ ]  [ ]  [ ]  |  | Family Relationship to the System |  [ ]  [ ]  [ ]  [ ]  |
| Mental Health |  [ ]  [ ]  [ ]  [ ]  |  | Legal Involvement  |  [ ]  [ ]  [ ]  [ ]  |
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| **First Name:**       | **Last Name:**       | **Relationship:**       |
|  |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Supervision |  [ ]  [ ]  [ ]  [ ]  |  |  Substance Use  |  [ ]  [ ]  [ ]  [ ]  |
| Involvement with Care  |  [ ]  [ ]  [ ]  [ ]  |  | Developmental |  [ ]  [ ]  [ ]  [ ]  |
| Knowledge  |  [ ]  [ ]  [ ]  [ ]  |  | Safety |  [ ]  [ ]  [ ]  [ ]  |
| Organization  |  [ ]  [ ]  [ ]  [ ]  |  | Family Stress |  [ ]  [ ]  [ ]  [ ]  |
| Social Resources  |  [ ]  [ ]  [ ]  [ ]  |  | Caregiver Post-traumatic Reactions |  [ ]  [ ]  [ ]  [ ]  |
| Residential Stability |  [ ]  [ ]  [ ]  [ ]  |  | Marital/Partner Viol. In the Home |  [ ]  [ ]  [ ]  [ ]  |
| Medical/Physical  |  [ ]  [ ]  [ ]  [ ]  |  | Family Relationship to the System |  [ ]  [ ]  [ ]  [ ]  |
| Mental Health  |  [ ]  [ ]  [ ]  [ ]  |  | Legal Involvement  |  [ ]  [ ]  [ ]  [ ]  |
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| **Caregiver Information** |
| **First Name:**       | **Last Name:**       | **Relationship:**       |
|  |  **0 1 2 3** |  |  |  **0 1 2 3** |
| Supervision |  [ ]  [ ]  [ ]  [ ]  |  |  Substance Use  |  [ ]  [ ]  [ ]  [ ]  |
| Involvement with Care  |  [ ]  [ ]  [ ]  [ ]  |  | Developmental |  [ ]  [ ]  [ ]  [ ]  |
| Knowledge  |  [ ]  [ ]  [ ]  [ ]  |  | Safety |  [ ]  [ ]  [ ]  [ ]  |
| Organization  |  [ ]  [ ]  [ ]  [ ]  |  | Family Stress |  [ ]  [ ]  [ ]  [ ]  |
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| Residential Stability |  [ ]  [ ]  [ ]  [ ]  |  | Marital/Partner Viol. In the Home |  [ ]  [ ]  [ ]  [ ]  |
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