

ARD Periodic Review Instrument

Court Case # _____
 Case Open Date ____/____/____
 Initial Review ____ Re-Review ____

Judicial District # _____

Case Review Period Start Date ____/____/____
mm dd yyyy

Administrative Review Division
DYC Instrument
July 2010

Identifying Information:

Client: _____
Last First MI

Date of the Review ____/____/____
mm dd yyyy

Case I.D.# _____

Client I.D. # _____

Date of Birth ____/____/____
mm dd yyyy

Region Name ____/____

Client Manager Name _____

Reviewer I.D.#/Name ____/____

#	Requirements	Questions	Answers			Location
COURT						
1 C	CRS 19-1-115 (6) (a) & (b) CRS 19-2-906.5 (1)(a)(b) CRS 19-3-401 (1.5), CRS 19-3-403 (3.6) (a) CRS 19-3-502 (2.5) 45CFR Part 1356.21(d) 2 DYC Policy 19.5, A	(Initial Review Only) Is there a mittimus that contains best interest or welfare of the child language, <u>and</u> determines if reasonable efforts were made or an emergency justified lack of reasonable efforts, <u>and</u> does not contain “nunc pro tunc” language? (Check all “No” responses that apply)	YES			Mittimus Court Orders
			No best interest			
			No, dual reasonable efforts			
			No reasonable efforts/emergency			
			No mittimus			
			No, contains “nunc pro tunc” language			
NA						
2 D	19-2-921(5)(b)(a), C.R.S. as amended by House Bill 06-1255	Is this a combined 6-month periodic review and Permanency Hearing with the ALJ?	Yes	No	NA	Court Orders
IV-E						
3 C	DYC Policy 19.1, I	Has IV-E Eligibility been determined <i>within 45 days of removal</i> ?	Yes	No	NA	Financial Record
4 C	DYC Policy 19.1, I	(Re-Review Only) Has a timely IV-E redetermination been completed during the review period?	Yes	No	NA	Financial Record

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#	Requirements	Questions	Answers	Location		
DUE PROCESS						
5 C	(CRS 19-3-502(7)) DYC Policy 19.3, III, B, 2 (e) Items 26 & 29 475 5 G	Were all required parties invited to the review and given at least two-weeks' notice? (Check all "No" responses that apply)	Yes	Trails		
			No, client			
			No, mother/guardian			
			No, father/guardian			
			No, provider			
			No, client manager			
SAFETY						
6 C	DYC Policy 3.14, III, A,1 DYC Policy 9.17,1 DYC Policy 9.17, B, 1& 2 DYC Policy 9.8, III, A-F	If any new allegations/incidents of abuse or neglect identified during the review period, were ALL of these reported/documented in Trails as new referrals?	Yes	No	NA	Trails Search by Tools, Search and Client ID
7 C	DYC Policy 9.8, III, A-F Item 4	If any new safety concerns were received regarding this client, were the safety needs of the client adequately addressed during the review period? (Check all "No" responses that apply)	Yes	Critical Incidents Trails		
			No change in DCP			
			No referral to law enforcement			
			No, other			
			No placement change			
			No crisis intervention (MH/hospital/detention, etc.)			
CASE PLANNING/SERVICES						
8 C	Item 18	Was the out-of-home provider engaged in case planning during the review period?	Yes	Trails Face-to-face		
			No			
			No, efforts made but refused			
			NA			
9 D	DYC Policy 19.2, III, A, 2, (f)	How was the out-of-home provider engaged in case planning during the review period? (Check all responses that apply)	MDT/DCP monthly staffings	Face-to-face Trails		
			Signature			
			FF contacts			
			Telephone contacts			
			Email contact			
			Other			
			NA			

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#	Requirements	Questions	Answers			Location
CASE PLANNING/SERVICES						
10 C	CRS 19-3-209 Items 18 & 25	Was the client engaged in case planning during the review period?	Yes			Trails Face-to-face
			No			
			No, efforts made but refused			
			NA			
11 D	DYC Policy 19.2, III, A, 1, (a) Items 18 & 25	How was the client engaged in case planning, during the review period? (Check all responses that apply)	MDT/ DCP Monthly Staffings			Trails Face-to-face
			Signature			
			FF contacts			
			Telephone contacts			
			Email contact			
			Other			
			NA			
12 C	Items 18 & 25	Was the mother/guardian/kin engaged in case planning during the review period?	Yes			Trails Face-to-face
			No			
			No, efforts made but refused			
			NA			
13 D	DYC Policy 19.2, III, A, 1, (a) Item 18 & 25	How was the mother/guardian/kin engaged in case planning during the review period? (Check all responses that apply)	MDT/ DCP Monthly Staffings			Trails Face-to-face Monthly contact reports
			Signature			
			FF contacts			
			Telephone contacts			
			Email contact			
			Other			
14 C	Items 18 & 25	Was the father/guardian/kin engaged in case planning during the review period?	Yes			Trails Face-to-face Monthly contact reports
			No			
			No, efforts made but refused			
			NA			
15 D	DYC Policy 19.2, III, A, 1, (a) Item 18 & 25	How was the father/guardian/kin engaged in case planning during the review period? (Check all responses that apply)	MDT/ DCP Monthly Staffings			Trails Face-to-face Monthly contact reports
			Signature			
			FF contacts			
			Telephone contacts			
			Email contact			
			Other			
16 C	DYC Policy 19.2, III A, 2,(k, 3) DYC Policy 19.3 II, D (6,d) 475 (5) A Items 11 & 16	Is the client placed within close proximity to his/her parents or other potential permanent caregiver’s home?	Yes	No	NA	Trails

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#	Requirements	Questions	Answers			Location
CASE PLANNING/SERVICES						
17 C	Item 16	If the client is not placed in close proximity to his/her parents or other potential permanent caregiver's home, were reasonable efforts made to support or facilitate face-to-face contact with the parents or potential permanent caregivers?	Yes	No	NA	Trails Face-to-face
18 C	DYC Policy 19.2, III, A, 2, (c) DYC Policy 19.3 II, D, (5) Item 4, 12, 15, 17, 26 475 5 (A)	At the time of the review, is the client placed in the most appropriate setting to meet his/her individual needs? (Check all "No" responses that apply)	Yes No appropriate level of care No, client's needs not addressed/met No, relatives not considered No, other No, safety issues No, cultural No, primary connections No, unable to determine where client is placed (requires a comment to Regional Director) NA			Trails Face-to-face
19 C	DYC Policy 19.2, III,A,2, (b,c,d,e)	Does the DCP contain a description of the type and appropriateness of the homes or facilities in which the client was placed during the review period?	Yes	No	NA	Trails
20 C	DYC Policy 19.2, 1A DYC Policy 19.2 III A 2 (b) DYC Policy 19.2 III C 2 DYC Policy 19.3 II D (1-7) DYC Policy 19.3 II C 5	Does the DCP/Parole Plan document services directed at the areas of need identified through assessment?	Yes No No, IL not addressed No DCP developed No, all task time frames expired No, some task time frames expired NA			Trails

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#	Requirements	Questions	Answers	Location
CASE PLANNING/SERVICES				
21 C		Does the DCP/Parole Plan include clear expectations of all parties in order to achieve the permanency goal? (Check all “No” responses that apply)	Yes	Face-to-face Trails
			No, client	
			No, mother	
			No, father	
			No, provider	
			No, Division	
			No DCP/Parole Plan developed	
			No, all task time frames expired	
NA				
22 C	DYC Policy 19.2 III, A, 2, (j) DYC Policy 19.2, III, B, 3, 3(a)	Is the client, age 16 years + 60 days or older, receiving all the services identified in the assessment and the ILP? (Check all “No” responses that apply)	Yes	Trails Face-to-face
			No	
			No, client refused services	
			No, lack of resources	
			No, provider issues	
			No re-assessment of needs	
			No, cost	
			NA	
23 D	DYC Policy 19.2, III, A, 2, (g, h, I, j) DYC Policy 19.3, II, D, 4-5	If the client, age 16 years + 60 days or older, is not receiving all identified Independent Living services/resources, which are missing? (Check all that apply)	Assessments	Trails Face-to-face
			Employment	
			Education	
			Budget/savings	
			Health	
			Housing	
			Vocational services	
			Transportation	
			Community resources	
			Other	
			NA	
24 C	PL 110-351 DYC Policy 16.4, B, 1-7 DYC Policy 16.7, I, III, A Undocumented 16.14 475 (5) H	Is there a comprehensive, client-driven Emancipation Transition Plan (ETP) that was developed 90 business days before the end of the client’s commitment? (Check all “No” responses that apply. However, use only “No Plan” if there is no ETP)	Yes	Trails Face-to-face
			No plan	
			No, not client-driven	
			No signature	
			No, not timely	
			NA	

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#	Requirements	Questions	Answers	Location
CASE PLANNING/SERVICES				
25 C	CRS 26-5-101 (o)(1)(II)	Have all vital documents been obtained for clients with an OPPLA goal 90 business days before the end of the client's commitment?	Yes	Hard File Trails Face-to-face
			No Birth Certificate	
			No Social Security card	
			No State ID/driver's license	
			No medical/dental records	
			No educational records	
			No, other	
NA				
EDUCATION				
26 C	DYC Policy 19.2, III, A, 2, k (1, 6) DYC Policy 19.3 II, D (6, a-d) Item 21 475 1 D	Is the client's education/school record in the case file? (During the review period.) (Check all "No" responses that apply)	Yes	Hard File School Reports Face-to-face
			No name of current school	
			No address of current school	
			No credit count	
			No current IEP	
			No current grade reports	
			No GED/Diploma	
NA				
27 C	DYC Policy 19.3 II, C DYC Policy 17.2, I,A, 1-10 B,1.a,b, C, 1-4 17.8	Were the client's educational needs adequately addressed through appropriate educational <u>services</u> during the review period?	Yes	Trails Face-to-face
			No	
			NA	
28 D		Is the client, age 16 or older, on track to graduate from and/or complete high school?	Yes	Trails Face-to-face
			GED	
			Graduated	
			GED earned	
			No, graduate	
			No GED	
			Information not available	
NA				

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#	Requirements	Questions	Answers	Location
EDUCATION				
29 C	PL 110-351 SEC 204 DYC Policy 17.2, III C,3, a DYC Policy 17.2, III C,1	Was educational stability provided for the client during the review period? (Check all “No” responses that apply)	Yes	Trails Face-to-face Hard File
			No, changed schools during review period	
			No, required 504 or IEP special education services were not provided	
			No, delays in record transfer	
			No, delays in enrollment	
			No, appropriateness of educational setting not assessed by the Division	
			No, Division did not advocate	
			No, school district refused to provide the appropriate services	
			No, other	
NA				
HEALTH				
30 C	DYC Policy 19.2, III, A, 2, k (1,4,5) DYC Policy 19.3 II, C, 6 (a-h) Item 22 475 1 C	Is health information in the case file, including name and address of current health care provider(s), known medical problems and current medications? (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No provider name	
			No provider address/phone number	
			No, medical problems not documented	
			No, medications not documented	
			NA	
31 C	DYC Policy 12.3, I DYC Policy 12.3 III D Item 22	(Initial Review Only) Did the client receive a medical exam or medical screening within 30 days of commitment? (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No	
			No, Medicaid card	
			No, Medicaid provider	
			No, not timely	
			No, other	
			NA	

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#	Requirements	Questions	Answers	Location
HEALTH				
32 C	DYC Policy 12.3 III, E, 1 Item 22	(Initial Review Only) Did the client receive a full dental examination within 30 days of commitment? (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No	
			No, Medicaid card	
			No, Medicaid provider	
			No, not timely	
			No, other	
			NA	
33 C	DYC Policy 12.3 & 12.4 Item 22 475 1 c	Has the client received regular health care, including immunizations and/or treatment for identified health needs, during the review period? (<u>Services delivered</u>) (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No, lack of timely referral or follow through	
			No, immunizations	
			No, treatment for identified needs	
			No, delay in services, systemic	
			No, Medicaid	
			No, other	
NA				
34 C	DYC Policy 12.3 & 12.4 Item 22	Has the client received regular dental care and treatment for identified dental needs during the review period? (<u>Services delivered</u>) (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No, lack of timely referral or follow through	
			No, treatment for identified needs	
			No, delay in services, systemic	
			No, Medicaid	
			No, other	
NA				
35 C	DYC Policy 12.3, III, A Item 23	Were mental health services provided to meet the client’s needs during the review period? (Check all “No” responses that apply)	Yes	Trails Hard File – Health Records Face-to-face Provider Report
			No, delays of 2 + weeks	
			No, changed mental health provider	
			No, mental health systems issue	
			No, client refused services	
			No available services	
			No sufficient services	
			No, OOH provider issue	
			No referral	
			No, Medicaid	
			No, other	
NA				

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#	Requirements	Questions	Answers	Location
HEALTH				
36 D	Item 17	If substance abuse issues have been identified during the review period for the client, what are the substances of use? (Check all that apply)	Alcohol	Trails Hard file Health Records DCP monthly contact reviews Face-to-face Provider Report
			Marijuana	
			Methamphetamine	
			Cocaine/Crack	
			Heroin	
			Other Opiates	
			CNS Depressants	
			CNS Stimulants/Amphetamines	
			Other	
			NA	
37 D	DYC Policy 15.6 III A & B, 5 (a through e), 6 DYC Policy 15.7, I DYC Policy 15.5 I, II	If substance abuse issues have been identified during the review period for the client, were substance abuse treatment services provided to the client? (Check all "No" responses that apply)	Yes	Trails Hard file Health Records DCP monthly contact reviews Face-to-face Provider Report
			No referral made	
			No available services	
			No sufficient services	
			No, delays of 2 + weeks	
			No, client refused services	
			No requested provider report	
			No received provider report	
			Unable to determine-outside services	
			NA	
PERMANENCY				
38 C	DYC Policy 16.3, I DYC Policy 16.3, III, B, 2 (a) through (e) Item 6	If the client experienced one or more moves during the review period, were ALL of the placement changes planned by the Division in an effort to achieve the client's case goals or to meet the needs of the client? (Check "Yes, in line with case goal + planned" if both Yes answers are appropriate)	Yes, in line with case goal + planned	Trails Hard File Face-to-face
			Yes, to meet client's specific needs + planned	
			No	
			NA	
39 D	Item 6	If the client experienced one or more moves that were not planned by the Division in an effort to achieve the client's case goals or to meet the needs of the client, what was/were the reason(s) for the move(s) during the review period? (Check all that apply)	More than one move	Trails Hard File Face-to-face
			Temporary setting	
			Provider request	
			Provider quit or closed	
			Escape	
			Client's behavior	
			Provider abuse or neglect allegations	
			Client-on-client abuse	
			Client in inappropriate level of care	
			Other	
NA				

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#	Requirements	Questions	Answers	Location
PERMANENCY				
40 D	PL 96-272 Sec 475, 1,(B) DYC Policy 19.2, III, A, 2, (f & g) DYC Policy 21.1, III, E, 3 (f) 4 (a) (b) (c)	For clients with a permanency goal of return home, is progress being made toward achieving the goal? (Check all “No” responses that apply)	Yes	Trails Face-to-face
			No, client services appropriateness	
			No, parent(s)/guardian(s) services appropriateness	
			No, client safety	
			No, parent lack of progress	
			No, inadequate monthly parent contact	
			No, other potential caregiver lack of progress	
			No, client lack of progress	
			No, lack of effort/inadequate supervision	
			No, caseload/turnover	
			No, ICJ	
			No, placement provider does not support permanency goal	
			No, lack of community supports	
			No, other	
NA				
41 D	DYC Policy 21.1, III, E, 3 (f)(g)(i)	For clients with a permanency goal of permanent placement with a relative/non-relative through legal guardianship/permanent custody, is progress being made toward achieving the goal? (Check all “No” responses that apply)	Yes	Trails Face-to-face
			No, client services appropriateness	
			No, parent(s)/guardian(s) services appropriateness	
			No, client safety	
			No, other potential caregiver lack of progress	
			No, client lack of progress	
			No, lack of effort/Inadequate supervision	
			No, caseload/turnover	
			No, ICJ	
			No, cultural/primary connection	
			No, placement provider does not support permanency goal	
			No, lack of community supports	
			No, other	
			NA	
42 D	CRS 19-3-508 (7) CRS 19-3-702 (4) & (5) Items 7 & 8	In the reviewer’s opinion, is the primary permanency goal, at the time of the review, appropriate for this client?	Yes	Trails Face-to-face
			No	
			NA	

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#	Requirements	Questions	Answers	Location
PERMANENCY				
43 D	Items 7,8,9,10, & 26	If, in the reviewer’s opinion, the permanency goal is not appropriate at the time of the review, what should the appropriate permanency goal be?	Return home	
			Adoption	
			Guardianship	
			Relative custody or legal guardianship	
			OPPLA LTFC	
			OPPLA Emancipation	
			All options have not been sufficiently explored	
			NA	
44 C	DYC Policy 21.1 III, E, 3 (a)	How many months should the assigned client manager have made face-to-face contact with the client during the review period?	1	Trails Visitation plan
			2	
			3	
			4	
			5	
			6	
			7	
			NA	
45 C	Item 19	How many months did the assigned client manager make face-to-face contact with the client during the review period?	0	Trails Visitation plan
			1	
			2	
			3	
			4	
			5	
			6	
			7	
NA				
46 C	Item 19	For a client placed outside the state, is there documentation that the client is visited at least monthly by a professional of either the sending or receiving state?	Yes	Trails
			No	
			NA	
47 C	DYC Policy 21.1, III, E, 3, (e), 4, (a) Item 19 Item 20	Was the quality of contacts made with the client sufficient to address issues pertaining to the safety, permanency, and well-being of the client and to promote achievement of case goals? (Check all “No” responses that apply)	Yes	Trails
			No, content insufficient	
			No assessment of safety	
			No time alone with client	
			NA	

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#	Requirements	Questions	Answers			Location
PERMANENCY						
48 C	DYC Policy 21.1, III, E, 3, (a) Item 19 Item 20	If the client’s goal is to return home, did contact with the mother/guardian/kin occur on a monthly basis?	Yes	No	NA	Trails
49 C	DYC Policy 21.1, III, E, 3, (e), 4, (a) Item 19 Item 20	If the client’s goal is to return home, was the quality of contacts made with the mother/guardian/kin sufficient to address issues pertaining to the safety, permanency, and well-being of the client and to promote achievement of case goals?	Yes	No	NA	Trails
50 C	DYC Policy 21.1, III, E, 3, (a) Item 19 Item 20	If the client’s goal is to return home, did contact with the father/guardian/kin occur on a monthly basis?	Yes	No	NA	Trails
51 C	DYC Policy 21.1, III, E, 3, (b) Item 19 Item 20	If the client’s goal is to return home, was the quality of contacts made with the father/guardian/kin sufficient to address issues pertaining to the safety, permanency, and well being of the client and to promote achievement of case goals?	Yes	No	NA	Trails
52 C	DYC Policy 18.1, I DYC Policy 18.1, II Item 13	Does the frequency of visitation with the mother/guardian/kin adequately address the needs of the client to maintain or promote continuity of the relationship? (Check all “No” responses that apply)	Yes			Trails Face-to-face
			No, mother/guardian/kin			
			No, client			
			No, Division			
			No, court			
			No, OOH provider			
			No, other			
NA						
53 C	DYC Policy 18.1, I DYC Policy 18.1, II Item 13	Does the frequency of visitation with the father/guardian/kin adequately address the needs of the client to maintain or promote continuity of the relationship? (Check all “No” responses that apply)	Yes			Trails Face-to-face
			No, father/guardian/kin			
			No, client			
			No, Division			
			No, court			
			No, OOH provider			
			No, other			
NA						

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#	Requirements	Questions	Answers			Location
ADDITIONAL QUESTIONS						
54 C	DYC Policy 18.1, III D, 3 Item 13	Does the frequency of visitation with the sibling(s) adequately address the needs of the client to maintain or promote continuity of the relationship(s)? (Check all "No" responses that apply)	Yes			Trails Face-to-face
			No, parent/guardian/kin			
			No, client			
			No, Division			
			No, court			
			No, OOH provider			
			No, sibling			
			No, other			
NA						
55 C		Were the previous compliance issues addressed? (All or nothing)	Yes	No	NA	Trails Face-to-face
56 I	P.L. 110-351 475 (1) C	Were the child/youth's educational needs assessed?	Yes	No	NA	Trails Hard File Face-to-Face
57 I	Item 23	Were the child/youth's mental health needs assessed?	Yes	No	NA	Hard Copy Health Record Trails Face-to-Face
58 C	475 (5)(I) P.L. 112-34	If the client is 16 years and older has the youth received a copy of all consumer credit reports annually?	Yes			Trail Hard File
			No, Client			
			No, not requested			
			No, Requested but not received - Equifax			
			No, Requested but not received - TransUnion			
			No, Requested but not received - Experian			
			NA			
59 C	475 (5)(I) P.L. 112-34	If the client is 16 years and older and has a credit report with evidence of inaccuracies, has the Divison of Youth Corrections referred the youth to an approved agency to resolve the inaccuracies?	Yes	No	NA	Trails Hard File
60 C	475 (5)(I) P.L. 112-34	If the client is 16 years and older and has a credit report with evidence of inaccuracies, is the Division of Youth Corrections making efforts to resolve the inaccuracies, or have the inaccuracies been addressed?	Yes	No	NA	Trails Hard File