

- 1) Complete pages 1 & 2 in your Web browser (don't save the form to your hard drive)
- 2) Click the *Generate Worksheet* button at the top of page 2
- 3) Go to the bottom of Page 3 and click *Print*
- 4) At the bottom of Page 3, Select *Submit* and click *Go*

## Minnesota Child Well-Being Tool

SSIS WG Name:

SSIS WG Number:

County:

Social Worker:

Program

Child Protection Case Management

Non Child Protection Placement Case

Type:

Initial

Reassessment

Final

Date Completed:

(mm/dd/yy)

### Rate each child according to the current level of functioning:

First Name	MI	Last Name	Birthdate	ICWA <input type="checkbox"/> Yes <input type="checkbox"/> No
First Name	MI	Last Name	Birthdate	ICWA <input type="checkbox"/> Yes <input type="checkbox"/> No
First Name	MI	Last Name	Birthdate	ICWA <input type="checkbox"/> Yes <input type="checkbox"/> No
First Name	MI	Last Name	Birthdate	ICWA <input type="checkbox"/> Yes <input type="checkbox"/> No
First Name	MI	Last Name	Birthdate	ICWA <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Physical Health</b>					
Good health care					
Adequate health care					
Inadequate health care					
Unmet serious health care needs					
<i>For placement cases only</i> Health care exam completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Emotional/Behavioral</b>					
Displays strong emotional coping skills					
Displays appropriate emotional responses					
Periodic emotional responses that limit functioning					
Extreme emotional responses that limit functioning					
Children's mental health screening completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Education</b>					
Outstanding achievement					
Satisfactory achievement					
Some educational difficulty					
Severe educational difficulty					
Child has a specialized educational plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Not Applicable	NA	NA	NA	NA	NA

<b>Family Relationships</b>					
Nurturing/supportive relationships					
Adequate relationships					
Challenged relationships					
Harmful relationships					

<b>Social/Community Support</b>					
Positive support network					
Adequate support network					
Limited support network					
Lacks support network					
Not Applicable	NA	NA	NA	NA	NA

<b>Cultural/Community Identity</b>					
Strong Cultural/Community Identity					
Adequate Cultural/Community Identity					
Limited Cultural/Community Identity					
Disconnected From Cultural/Community Identity					

<b>Development</b>					
Advanced development					
Age-appropriate development					
Limited development					
Severely limited development					

<b>Substance Abuse</b>					
No substance use					
Experimentation					
Alcohol or other drug use					
Abuse/dependency					
Not Applicable	NA	NA	NA	NA	NA

Each child's strengths and needs, to be addressed in the case plan.

**Child Strengths**

**Child Needs**

**Child Strengths**

**Child Needs**



## DEFINITIONS

Rate each child according to the current level of functioning.

### Physical Health

**Good health care.** Demonstrates good health and hygiene care involving awareness of nutrition and exercise. Child has no known health care needs. Child receives routine preventive and medical/dental/vision care including immunization.

**Adequate health care.** Child has no unmet health care needs or has minor health problems that can be addressed with routine intervention. Age-appropriate immunizations are current. Child may have a chronic condition, illness, and/or physical disability that is being adequately addressed.

**Inadequate health care.** Child has health care needs that are inadequately addressed, and/or routine health care is neglected. Child may have a chronic condition, illness, and/or physical disability that is inconsistently being addressed.

**Unmet serious health care needs.** Child has serious health problems that severely limits the ability to function in routine daily activities, and those needs are unmet. Child may have a chronic condition, illness, and/or physical disability that is not being addressed.

### Health Care exam is completed.

Answer **yes** if the child is in placement and had health exam either twelve months before placement or within thirty days after placement.

Answer **no** if child is in placement and a health exam has not been completed as required.

*Minnesota Rule 9560.0600 requires a health exam in the twelve months before placement or within thirty days after placement and at least one health exam per year while in placement.*

## **Emotional/Behavioral**

**Displays strong emotional coping skills.** Child displays strong coping skills in dealing with disappointment, anger grief, stress and daily challenges in home, school, and community. Child is able to develop and maintain trusting relationships. Child is also able to identify the need for, seeks and accepts guidance. Has the ability to adjust to new situations.

**Displays appropriate emotional responses.** Displays age-appropriate emotional coping responses. May demonstrate some symptoms of depression, anxiety or isolation that are situationally-related (such as in home, school or community) and usually maintains appropriate emotional control.

**Periodic emotional responses that limit functioning.** Child has occasional difficulty dealing with situational stress, crises or problems, that impairs functioning in home, school or community. Child displays periodic problem behaviors or exhibits emotional instability including, but not limited to depression, somatic complaints, running away, hostility or apathy.

**Extreme emotional responses that limit functioning.** Inappropriate or extreme emotional responses that prohibit or severely limit adequate functioning in home, school or community. Child exhibits serious emotional instability or chronic/severe problem behaviors such as violence toward self, others, animals or property.

### **Children's mental health screening was completed.**

Answer **yes** if a children's mental health screening has been completed.

Answer **no** if a children's mental health screening has not been completed.

*Minnesota Statute 256.25 Section 2 (14) requires a children's mental health screening be arranged or provided to a child receiving child protective services or a child in out-of-home placement, a child for whom parental rights have been terminated, a child found to be delinquent, and a child found to have committed a juvenile petty offense for the third or subsequent time, unless a screening has been performed within the previous 180 days or the child is currently under the care of a mental health professional. The court or the county agency must notify a parent or guardian whose parental rights have not been terminated of the potential mental health screening and the option to prevent the screening by notifying the court or county agency in writing. The screening shall be conducted with a screening instrument approved by the commissioner of human services.*

## Education

**Outstanding achievement.** Child/youth consistently functions above appropriate grade level and/or is exceeding the expectations of the child's specialized educational plan.

**Satisfactory achievement.** Child/youth consistently functions at appropriate grade level and/or meets expectations of the child's specialized educational plan.

**Some educational difficulty.** Child/youth inconsistently functions at the appropriate grade level and/or struggles to meet the goals of the child's specialized educational plan.

**Severe educational difficulty.** Child/youth functions significantly below grade level and/or is not meeting the goals of the child's specialized educational plan.

**NA.** Not applicable due to child's age or other specific condition.

### **Child has a specialized educational plan.**

Answer **yes** if child has a specialized educational plan.

Answer **no** if child does not have a specialized educational plan.

*Minnesota Statute 125A.023, Subd.3 mandates a IIP for children over the age of three who receive services from the school and one other public agency. Minnesota Statute 125A.027 Subd. 1(b)(4) requires local teams to use a "standardized written plan" that is the IIP.*

*Minnesota Statute 125A.27, Subd.10 defines the IFSP as "a written plan for providing services to a child and the child's family." Minnesota Statute 125A.30 directs local Interagency Early Intervention Committees to assure development of IFSPs for all eligible infants and toddlers with disabilities from birth through age two and their families.*

*Minnesota Statute 125A.08 (a)(1) describes the obligations of school districts in providing services to students with disabilities as per their IEPs.*

*Federal American Disabilities Act - 504 Plan provides for accommodations for students with disabilities.*

## **Family Relationships**

**Nurturing/supportive relationships.** Home environment is stable; child experiences positive interactions with family members, has a sense of belonging within the family. Family defines roles, has clear boundaries, and supports child's growth and development.

**Adequate relationships.** Child experiences positive interactions with family members and feels safe and secure in the family despite some unresolved family conflicts. Family is able to identify and access services on their own.

**Challenged relationships.** Stress/discord within the family interferes with child's safety and sense of security. Family has difficulty identifying and resolving conflict and/or obtaining support and assistance on their own. There is open disagreement on how to handle child problems/discipline.

**Harmful relationships.** Chronic family stress, conflict or violence severely impedes child's sense of safety and security. Family is unable to resolve stress, conflict or violence without interventions and is not able to willing to obtain outside assistance. Family is involved with law enforcement, restraining orders, and/or criminal complaints.

## **Social/Community Support**

**Positive support network.** Routinely interacts with social groups that provide positive support and influence. Models responsible behavior. Participates in age appropriate social activities. Uses leisure time constructively. Has good support network. Child has at least one supportive caring adult in his/her life.

**Adequate support network.** Engages in positive leisure time activities or extra-curricular activities; respects and interacts with others; has adequate support network and age-appropriate peers. Child has stable relationship with others and has developed good conflict resolution skills.

**Limited support network.** Interacts and relates to others but conflicts may be more frequent and serious and child may be unable to resolve them. Child lacks social skills, has non-productive use of leisure time and a limited support network with limited involvement with age-appropriate peers. Child engages in some high risk and/or illegal activities.

**Lacks support network.** Child has poor social skills as demonstrated by frequently conflicted relationships; is isolated; has no support network available; consistently seeks out age-inappropriate peers or exclusively interacts with negative or exploitive peers. Child engages in chronic high risk, and/or illegal activities within the community.

**NA.** Not applicable due to child's age or other specific condition.

## **Cultural/Community Identity**

**Strong Cultural/Community Identity.** Child identifies with cultural and community heritage and beliefs and is connected with people who share similar belief systems. Child knows cultural/community resources both formal and informal, and accesses them as needed.

**Adequate Cultural/Community Identity.** Child is exposed to or identifies with cultural/community heritage and beliefs, practices and traditions within the family. Child recognizes how to access resources in the greater community. Child may experience some conflict and may struggle with cultural/community identity, yet is able to cope.

**Limited Cultural/Community Identity.** Child experiences inter-generational and/or societal conflict surrounding values and norms related to cultural/community differences. Child perceives services and supports as unavailable or access is limited. Conflicts with cultural/community identity creates difficulties for child.

**Disconnected From Cultural/Community Identity.** Child is disconnected from cultural/community heritage and beliefs resulting in isolation, lack of support, and lack of access to resources. Connections are unavailable or child perceives them as unavailable, due to lack of understanding of cultural and language differences of support networks. Conflicts with cultural/community identity result in problematic behaviors exhibited by child.

## Development

**Advanced development.** Child/youth's physical and cognitive skills are above chronological age level; child/youth meets all or most developmental milestones and has developmentally appropriate information to perform daily living skills at or above expectations of peers.

**Age-appropriate development.** Child/youth's physical and cognitive skills are consistent with chronological age level; child/youth meets most developmental milestones and has developmentally appropriate information to adequately manage daily living skills.

**Limited development.** Child/youth has some delays in meeting developmental milestones or lacks developmentally appropriate information that interferes with the child's ability to perform daily living skills without some intervention.

**Severely limited development.** Child/youth has significant delays in meeting developmental milestones or lacks developmentally appropriate information that significantly interferes with the child's ability to perform daily living skills without a formalized structured intervention.

## **Substance Abuse**

(Substances include alcohol, tobacco and other drugs)

**No substance use.** Child has not used substances and/or is aware of consequences of use. Child avoids peer relations/social activities involving substances, and/or chooses not to use despite peer pressure/opportunities to use.

**Experimentation.** No demonstrated history or current problems related to substance use. Adolescents may have experimented with substances, but there is no indication of sustained use.

**Alcohol or other drug use.** Child's current substance use results in disruptive behavior, legal problems, and/or discord in relationships in school/community/family/work. Use may include multiple drugs.

**Abuse/dependency.** Child's chronic abuse and/or dependency results in severe disruption of functioning such as loss of relationships, job, school suspension, expulsion, drop-out, problems with the law, and/or physical harm to self or others. May require medical intervention to detoxify.

**NA.** Not applicable due to child's age or other specific condition.