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|  District Court  Court Address:  17th Judicial District  Adams County Justice Center  1100 Judicial Center Drive  Brighton, CO 80601  THE PEOPLE OF THE STATE OF COLORADO  In the Interest of:  **1st CHILD NAME, 2nd CHILD NAME, 3rd CHILD NAME**  Child(ren)  And Concerning:  **1st PARENT NAME, 2nd PARENT NAME**  Respondent(s), FULL NAME, FULL NAME Special Respondent(s), | COURT USE ONLY |
| Attorney or Party Without Attorney (Name):  CASA: Your Name GAL: Full Name, Esq.    Assistant County Attorney: Full Name, Esq.  Case Worker: Full Name    Respondents’ Attorney: Mother: Full Name, Esq.  Father: Full Name, Esq.  Special Respondent’s Attorney: Pro Se  Date of CASA Report: Enter date  Date of Next Hearing: Enter date  Type of Hearing: Enter type  CASA of Adams and Broomfield Counties  11860 Pecos St  Suite 2700  Westminster, CO 80234  720-523-2855 | Case Number:  **Judge: Last Name Only**  Division: D1, D, or S  **Courtroom: Number** |
| CASA Report | |

This report is of a confidential nature for the benefit of the Court and may be distributed only to the parties to the proceedings.

How to use this Instructional Court Report Template:

The bulleted text in each of the categories in the report are questions that should be considered when writing about the children on your case. They are meant as a prompt to help you address the important information that should be in your report, although all questions and sections may not apply to your particular case or child. Please use the questions as a guide as you create a narrative about the child(ren). Before submitting your completed report to your Advocate Supervisor or Peer Coordinator, make sure to remove all blue text and the bulleted list of questions to consider.

Things to remember throughout the report:

* Remain objective and fact-based and support all your recommendations that you list at the end with facts and observations in the body of your report.
* Refer to the child by their name, not as “The child.” Use the child’s preferred pronouns.
* Describe your observations in detail.
* Quote others and provide the source of the information provided to you.
* Refer to yourself as “this CASA.” Do not use personal pronouns to refer to yourself.
* When referring to an adult for the first time, use both the first and last name and their title in the case and then shorten to Mr./Ms. Last Name for additional mention throughout the report. Do not refer to adults by their first name only.
* To protect confidentiality, do not use the foster parents’ names, address, or the child’s school name. Refer to foster parents as foster mom, foster dad, foster parents.
* If you are updating the court from the last reporting period (from the date of the last hearing until now), does the child’s situation remain the same? If details remain the same (no change), there is no need to repeat the same information from your last report. Advise the Court there is no change and provide a basic summary. Strive to provide relevant updates each time, and continuously update the Court with new information. The Judge keeps all your previous reports in their file and can refer to them for previous information.
* When there are multiple siblings living together in the same placement, you may combine the children under one header (Name, age, parents) and write a paragraph about each child in each of the sections (Placement & Stability, Safety, Health, Interactional Behaviors, Child/Family Strengths, Permanency, and the Educational Advocacy sections of the report). Please talk to your Advocate Supervisor or Peer Coordinator for guidance.

**1st CHILDS NAME (age); Biological child of (Name of MOTHER) and (Name of FATHER)**

**GENERAL ADVOCACY**

Placement & Stability:

Questions to consider for this section:

* Where does the child live and with whom?
* What does the child report about their home environment?
* How long has the child been in this placement?
* How many placements has the child been in since the case opened?
* What caused the change in placements?
* Describe the actual placement – House, Apartment? Neighborhood?
* Is the child living with siblings?
* Has the child been separated from siblings? If separated, what efforts have you made to foster sibling connections and family time?
* What extended family supports have you identified? (Relatives, close family friends, etc)
* Does the child have their own room, own bed, toys?
* Does the child have adequate nourishment? What type of food are they eating?
* If in a foster home, are the child’s cultural needs being met? (foods, traditions, values, religious practices).

Safety

Questions to consider for this section:

* Is the child in a safe placement with safe caregivers?
* Have you observed any red flags that have caused you concern?
* How frequently do you visit with the child?
* Has the child told you that they feel unsafe or uncomfortable in the home or with the caregivers?
* Is the child at risk of abuse or neglect?
* Does the child exhibit any self-harm behaviors or suicide ideation?
* How does the child act with the caregivers around? Is it different than when the child is alone with you?
* What do the caregivers report to you?

Health

Questions to consider for this section:

* What are your observations of the child’s emotional, physical, social, and mental development?
* Is the child enrolled in Medicaid or another health insurance program?
* Does the child have any developmental delays? Has the child been evaluated for specific needs? Do they need evaluation?
* If the child receives therapy, what is the progress?
* Has the parent or caregiver reported a change in the child’s mental health or behavior?
* Does the child receive regular routine medical and dental check-ups?
* If the child has an identified or existing medical or dental need, are physician recommendations being followed?
* Does the child report to you often not feeling well or expressing the need for medical attention?

Interactional Behaviors

Questions to consider for this section:

* Does the child in out of home care have family time with parents, siblings, relatives? How often?
* Is family time supervised, and if so, by whom? Have you observed the family time?
* Is family time held in the community, for the maximum amount of time, in the most unrestrictive manner that protects the child’s health and safety?
* Are the wishes of the child being considered when determining the supervision, location, and timing of family time?
* What has been reported to you about family time, and by whom?
* Does the child say anything to you about family time or about their thoughts about certain people?
* Who is important to the child?
* How does the child act with parents? Either at home or during family time?
* If a parent is incarcerated, has the child been able to have communication or family time with their parent (taking into consideration the child’s health and safety).
* How does the child act with foster parents?
* How does the child act with the Special Respondents?
* What do parents or foster parents say about the child’s behaviors?
* How does the child act with other children?
* How does the child act with pets?
* How does the child interact with you, the CASA?

### Child/Family Strengths:

Questions to consider for this section:

## What supports, traits, interactions, accomplishments, talents/interests, resourcefulness, or resilience have you observed in the child and/or family?

* What strengths or accomplishments have you observed in the parents during this reporting period?
* What are the child’s future goals?
* What external supports or trusted adults does the child have (ie: school counselor, teacher, mentor, therapeutic supports, extracurricular activities, positive peers, etc.)
* What external supports have the parents identified as helpful to them?
* What relatives or extended family members has the child identified as being supportive? Include names of family members who are identified by the child as a caring adult.
* What efforts have you made to support the family and/or foster connections among family members and extended relatives with the child?
* Are there supports or resources you’ve assisted in getting the family/child connected with? A Precious Child, tutoring, food resources, housing resources, daycare etc. Use adamscountyresources.org for ideas.

Permanency

Questions to consider for this section:

* If a permanency goal has not yet been adopted by the court (which happens at a permanency planning hearing), do not offer an opinion as to what a permanency goal should be.
* If the court has adopted a permanency goal, consider the questions below.
* What is the permanency goal?
* Is the child on track to reach permanency as evidenced by your observations and assessments? Why or why not?
* If you are not in support of the permanency goal, why? What are the barriers to the current permanency goal?
* Are the resources or services the parents have identified as needed being provided? What are the barriers to parents receiving services they need? Transportation, work schedules, overlap with other services, lack of financial resources, incarceration, etc.?
* From the caseworker’s verbal or written reports, are the parents making efforts to be successful with their treatment plan?
* What does the child want? Is this possible? Who does the child wish to live with if different than their current placement?
* If you are in support of the permanency goal, what milestones do you believe need to be reached in order for that goal to be achieved?

**EDUCATIONAL ADVOCACY**

Basic Summary & Stability

Questions to consider for this section:

* Is the child enrolled in school or day care?
* What grade are they in?
* How long has the child been in this school or daycare?
* How many times has the child transferred schools or daycare?
* Have the child’s school records been transferred to their current school?
* Has the child demonstrated any new skills or knowledge since you last reported? Note any progress or improvement related to education or school attendance.
* How many adults are invested in the child’s education? Who are they?
* Who does the child identify as school personnel they could turn to in a time of need?
* What are the concerns, barriers, or unmet needs that might be contributing to the child’s ability to perform in school? Ex: virtual or in-person school, IEP or 504 in place if needed, child requiring additional educational support?
* Are there safety concerns for the child while at school?
* For youth in grades 9-12, what are their goals for after graduation? Postsecondary education, vocational school, trades, military, etc.

Behavior

Questions to consider for this section:

* How often do you visit the child at school or daycare?
* What are your observations?
* What behaviors and relationships with counselors, teachers and friends do school or daycare staff report to you?
* What does the child report to you?
* Does the child participate in extracurricular activities?
* Does the child have positive peer relationships? How are things going with friends?
* Is trauma impacting behavior at school?

Attendance

Questions to consider for this section:

* Does the child attend school or daycare regularly?
* How many absences does the child have? Were the absences excused?
* Does the school say they have concerns about truancy? If so, what supports and resources is the school providing the child/family to increase attendance and/or punctuality.
* What are the concerns, barriers or unmet needs that might be contributing to the child’s ability to attend school?
* Does the child have reliable transportation to and from school each day?

Grades

Questions to consider for this section:

* What are the child’s grades?
* Does the child have a current IEP?
* Does the child struggle with any specific subjects?
* Does the child need or receive tutoring?
* Is the child on track to progress to the next grade level?

**YOUTH ADVOCACY (ages 14-21)**

**(Delete this section if it does not apply to the child)**

Life Skills

Questions to consider for this section:

* In regard to acquiring life skills, what are the youth’s strengths and weaknesses?
* Have the youth’s weaknesses been addressed?
* Have the youth’s strengths been capitalized on?
* How are you helping (resume writing, school applications, CHAFEE, researched or connected youth to colleges or secondary education programs)?
* Have you helped the youth attend job fairs, volunteer fairs or workforce centers?

Emancipation Plan

Questions to consider for this section:

* What are your observations and assessments of the youth preparedness for emancipating from the foster care system?
* Will the youth go to college, find employment, enroll in vocational school?
* What are the youth’s career interests?
* Does the youth have housing?
* Will the youth benefit from the Colorado Fostering Success voucher program? (Ask the caseworker)
* Does the youth have any delinquency involvement?
* Have you talked to the youth about Youth in Transition?
* Will the youth transition into adult services?
* Does the youth need any items before emancipating?

Permanent Connections

Questions to consider for this section:

* Who are the 3 appropriate and caring adults that have committed to being permanent connections to the youth after the case closes?
* Are you a permanent connection?
* In what capacity will the permanent connections commit to the youth?
* Has a diligent search for extended family been completed by the Department? What was the result?

**2nd CHILDS NAME (age); Biological child of (Name of MOTHER) and (Name of FATHER)**

**GENERAL ADVOCACY**

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Emancipation Plan

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* In what capacity will the permanent connections commit to the youth?
* Has a diligent search for extended family been completed by the Department? What was the result?

**CASA RECOMMENDATIONS**

List your recommendations using bullet points below. Consider the following areas to make your recommendations: Placement of the child (remain in current placement, be returned home, move placements), visitation, school, medical care, therapy, extracurricular activities, and court-adopted permanency goal (Remain Home, Return Home, Allocation of Parental Responsibilities aka APR, Adoption, Legal Guardianship, Other Planned Permanent Living Arraignment aka OPPLA). Recommendations need to be supported with observations you have written in your report. Be specific!

Use the term “SHALL” in the following format for each recommendation:

* Example: Samantha, Kyle and Sally Doe shall (or shall not) remain in their current placement.
* Example: Samantha shall continue to receive therapeutic services.

**CONTACT LOG:**

Copy and paste from your Optima contact log. You can delete the columns that are unnecessary after pasting (your Advocate Supervisor or Peer Coordinator can help you with this if you need it). Only include contact logs for work that occurred after the last court hearing.

**Type of Contact | Date | Duration**

EXAMPLE:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Visit with Child |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 5/19/2015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3 |
| Phone contact with child |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 5/4/2015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.5 |
| Phone contact with child |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 4/22/2015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.5 |
| Attended meeting/staffing |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 4/20/2015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |

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**CASA PEER COORDINATOR DATE**

**CASA ADVOCATE SUPERVISOR DATE:**