Cause No: XXCPXXXX change x’s to the case number!

IN THE INTEREST OF : IN THE DISTRICT COURT

Child’s Name

Type child’s name exactly as it is

On the original petition : OF GALVESTON COUNTY, TEXAS

**CHILD(REN) :**   **306Th**  **JUDICIAL DISTRICT**

Do not delete ^

## CASA REPORT TO COURT

This CASA Report to Court has been prepared for the Permanency Hearing to be held on Date of hearing. CASA of Galveston County was assigned to this case on Date of CASA assignment. The CASA Advocate was assigned to this case on Date advocate was assigned.

The hearing type and date can be found in the Hearings tab of Optima

The assignment of CASA date can be found in the CASA order of appointment or the original removal order- see Advocate Case Plan Outline, Step 3(a)(iii) Order Setting Hearing and (iv) Order Appointing CASA

The assignment of the advocate can be found on the CASA Advocate Notice or in Optima under Case Assignments – see Advocate Case Plan Outline, Step 3(a)(v) Notice of Advocate Appointment

1. **Case History**

The Department received an intake on DATE for ALLEGATION by (WHO ALLEGATION IS AGAINST), according to the Affidavit signed by CPS INVESTIGATOR, on DATE AFFIDAVIT SIGNED.

This information comes from the Affidavit, on the first page, it names the Investigator who wrote the affidavit; the date is the date the removal order was signed and the allegation is found in the first sentence of the intake.

see Advocate Case Plan Outline, Step 3(a)(ii) Affidavit

Include the primary and concurrent permanency goals

\*\*\*If parental rights have been terminated, include that here (if not, include parent details under section III)\*\*\*

1. **Child(ren) \*EVERYTHING INCLUDED IN THE COURT REPORT FROM HERE ON OUT, MUST BE FROM INFORMATION CONTAINED IN OPTIMA CONTACT LOGS\***

**Child’s Name**:

Child’s Name was born on Date (Month, day, year spelled out) and is currently (Age).

Describe child, general demeanor, character, extracurricular activities, interests; short paragraph

Include all visits between present and the previous hearing (status or permanency)- see Advocate Case Plan Outline, Step 7 Visit the child/children

If the child is 16+, include whether the child has their social security card, birth certificate, and identification/driver’s license

If child does not have any of the identification documents, include the date you notified and requested this from CPS and whether you have received a response

Placement: (moved to beginning of report)

Include date/longevity of placement- do not include full placement history, just history since the last court hearing

Include interactions and relationship with placement caregivers

Describe the child’s space- adequacy; bed sharing; size of home- see Advocate Case Plan Outline, Step 8 Interview Foster Parents, Caregiver, Case Manager

(if children are placed together, only one placement section is needed)

Education:

Include name of school, grade, teacher, attendance summary and grade summary

-For example: Bob is in the fourth grade, at Fox Elementary School, in Houston Independent School District (HISD)

Include speech/language

Include Early Childhood Intervention (ECI) if the child is birth-3 years old

Include whether child is receiving special education services and has an Individualized Education Plan (IEP) or 504 accommodations – please include what the accommodations are, and what the goals are

Include who signs the IEP (parent, foster parent, other educational surrogate parent)

We should note in this section that we have contacted the Person responsible for the IEP to ensure they believe the child is receiving all services based on the plan.

See Advocate Case Plan Outline, Step 9 Contact Schools

Medical:

This section should include all types of medical providers including vision. If a child has multiple medical providers there should be a paragraph of information for each.

Include who you spoke to and the date

If you requested records, include the date you requested them and how (fax, email, mail)

See Advocate Case Plan Outline, Step 10 Contact Physicians

Dental:

Include who you spoke to and the date

If you requested records, include the date you requested them and how (fax, email, mail)

See Advocate Case Plan Outline, Step 10 Contact Physicians

Psychological:

Include therapy/counseling information- counselor’s name, frequency of therapy, include whether or not you have reviewed the goals and whether or not the counselor has included or informed you about progress the child has made

Include whether a psychological evaluation was completed or not

Psychotropic Medication (list the name of the medication, dosage, and what it is for)

Include whether or not they have had a medication review, and when it was completed.

See Advocate Case Plan Outline, Step 11 Contact Therapist

Child and Adolescent Needs and Strengths Assessment (specifically for children age 3+):

Include when it was requested and who from

Include when it was received and who from

Include date this was done, recommendations, and who did the assessment

(CANS should be updated annually)

1. **Parent(s)**

\*\*\*If parental rights have been terminated, this section is eliminated\*\*\*

**Mother’s Name, Mother**:

Statement about whether the parent has been served

Statement that services were ordered at the status hearing

Statement about whether or not the parent executed a release of information for CASA (include date you requested the release of information)

Statement about whether or not we have permission to speak to mother

See Advocate Case Plan Outline, Step 11 Interview Parents

Succinct statement about whether parent has been completing services and improving

See Advocate Case Plan Outline, Step 12 Contact parent service providers

The first few sections indicate service plan compliance; each heading will reflect each requirement in the service plan…

Psychological:

Detail compliance with psychological evaluation, psychosocial evaluation, individual counseling, family counseling, anger management, domestic violence

Detail how you have verified this information (observed documentation, spoken with provider)

Substance Abuse:

Detail compliance with random drug testing, attendance at NA/AA meetings, completion or attendance in substance abuse treatment programs

Detail how you have verified this information (observed documentation, spoken with provider)

Parenting Classes:

Detail compliance with attendance in parenting classes; detail how you have verified (observed parenting certificate, spoken with provider)

Employment:

Where employed and for what duration; indicate how you have verified (spoken to employer, observed pay stubs)

Housing:

Where they are currently living and for what duration (and how you have verified this), whether rent payments are current, what are the conditions/your observations of the home

Child Support:

What amount of child support was ordered at status (if not, eliminate this section)

Whether they are paying or not

**Father’s Name, Father**: (Copy this section if there are multiple fathers)

Statement about whether the parent has been served

Statement that services were ordered at the status hearing

Statement about whether or not the parent executed a release of information for CASA (include date you requested the release of information)

Statement about whether or not we have permission to speak to father

Statement about whether paternity has been established or not

Statement about whether a paternity registry search has been issued for the specific child

See Advocate Case Plan Outline, Step 11 Interview parents

Succinct statement about whether parent has been completing services and improving

See Advocate Case Plan Outline, Step 12 Contact parent service providers

The first few sections indicate service plan compliance; each heading will reflect each requirement in the service plan…

Psychological:

Detail compliance with psychological evaluation, psychosocial evaluation, individual counseling, family counseling, anger management, domestic violence

Detail how you have verified this information (observed documentation, spoken with provider)

Substance Abuse:

Detail compliance with random drug testing, attendance at NA/AA meetings, completion or attendance in substance abuse treatment programs

Detail how you have verified this information (observed documentation, spoken with provider)

Parenting Classes:

Detail compliance with attendance in parenting classes; detail how you have verified (observed parenting certificate, spoken with provider)

Employment:

Where employed and for what duration; indicate how you have verified (spoken to employer, observed pay stubs)

Housing:

Where they are currently living and for what duration (and how you have verified this), whether rent payments are current, what are the conditions/your observations of the home

Child Support:

What amount of child support was ordered at status (if not, eliminate this section)

Whether they are paying or not

#### **Parent-Child Visits**

Detail the visitation plan and if you have observed any visits to date

-See last court order if there is no family plan

1. **Collaborative Family Engagement (CFE):**

Details about any family or fictive kin interviewed or plans for any team or family meetings since previous court report Any tools completed can be listed here.

See Advocate Case Plan Outline, CFE Section

#### **Concerns**

Concerns you have regarding the child- listed in order of child (if Susie is named as first child in court report, her concerns should come first, then onto the next child, the onto concerns about the parents, then onto all other concerns)

No new information should be disclosed in concerns- all concerns should relate back to some fact or statement in the body of the court report and written as a full statement/sentence

-For example: This CASA is concerned that…..

#### **Recommendations**

This CASA respectfully recommends:

1. All recommendations for children first “(child’s name) remain in his current placement.”

This CASA is concerned as stated above, that neither parent is ready for the child to return home based on…. [Examples: continued positive drug screens, non-compliance in addressing what led to original removal, not completing any services, being unable to be located, not visiting with the child, etc.]

1. Next, all recommendations for parents “Mother/Father Name completes her parenting classes.”
2. All other recommendations follow

#### **Respectfully,**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(type advocate’s name), CASA/GAL Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#  (type supervisor’s name), CASA Supervisor Date

Even for Court Reports where there isn’t an advocate, there needs to be two signature lines- one for supervisor and one for Program manager, Directory of Advocacy, or Executive Director; that way all of our court reports have assurances by two people not just one

Contacts List:

* Name of contact, relationship or position in the case

You may add a photo of the child(ren)