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| Reporting Period: Month/year or date range |
| Youth Information |
| Youth’s Name:  | Juvenile #:  | DOB:  |
| Assigned DJJ Office: Choose an item. | Assigned DJJ Staff:  |
| Provider & Service Information |
| Provider:  | Staff Name/Credentials:  |
| Staff Email:  | Staff Phone:  |
| Service(s):  |
| Service Authorization Dates:  |
| Pre-Service Engagement Date: Explain: Provide a summary of pre-service engagement and efforts to initiate services; specific contacts should be captured under sessions and/or case coordination & collateral contacts below. |
| Service Start Date:  | Service Plan Date:  |
| Anticipated Service Completion Date:  |
| Most Recent YASI Received: [ ]  From initial referral packet [ ]  Updated YASI from DJJ or RSC |
| Targeted YASI Priorities: 1) YASI domain 2) YASI domain 3) YASI domain |
| Rationale for Service: Rationale for this service based on the referral form, YASI, provider’s internal assessment of need, and targeted behavior/needs. |

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| Summary and Overview This Reporting Period |
| [ ]  Youth and family actively engaged in service.[ ]  Youth is progressing towards identified service goals. [ ]  Youth is attending school: \_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Youth is employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Youth is connected to an extra-curricular or school activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Safety or Relapse Prevention Plan has been created/revised. Date: \_\_\_\_\_\_\_\_\_ [ ]  Copy provided to youth/family. [ ]  Copy provided to DJJ Staff. |

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| Overall Progress Since Service Start |
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| Case Coordination & Collateral Contacts *(Current Reporting Period)* |
| Date | Modality | Contact(s) | Summary of Contact |
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| Sessions *Current* Reporting Period Dosage: \_\_\_\_ |
| Date | Time and Duration | Modality/Location | Participant(s) | Session Description |
|   |   |   |   |   |
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| Service Plan Goals |
| Goal 1: Overarching service/treatment goal the youth will focus on during the service  |
| Objective | Target Completion | Status | Actual Completion  |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
| Interventions and Response this Reporting Period: Include a summary of strategies used to increase treatment readiness and mitigate any treatment barriers; interventions delivered for the goal/objectives; youth/family engagement activities; and youth’s response and progress for this reporting period. |

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| Goal 2: Overarching service/treatment goal the youth will focus on during the service  |
| Objective | Target Completion | Status | Actual Completion  |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
| Interventions and Response this Reporting Period: Include a summary of strategies used to increase treatment readiness and mitigate any treatment barriers; interventions delivered for the goal/objectives; youth/family engagement activities; and youth’s response and progress for this reporting period. |

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| Goal 3: Overarching service/treatment goal the youth will focus on during the service  |
| Objective | Target Completion | Status | Actual Completion  |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
|   |   | Status |   |
| Interventions and Response this Reporting Period: Include a summary of strategies used to increase treatment readiness and mitigate any treatment barriers; interventions delivered for the goal/objectives; youth/family engagement activities; and youth’s response and progress for this reporting period. |

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| DJJ Significant Incident |
| [ ]  Youth involved in a DJJ Service Provider Incident. Date of incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date incident report submitted to RSC and DJJ staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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| Recommendations *(Current Reporting Period)* |

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| [ ]  Check here if the DSP is currently recommending DJJ staff request an extension or modification to the current services, or if additional needs have been identified. |
| Include a summary of current and ongoing recommendations including: additional supports needed; response to serious incident, requests to DJJ and the RSC for consideration of service extension requests; requests to DJJ and the RSC for consideration of expanding or deviating from the original targeted behaviors and/or goals identified in the referral; discharge preparations; target completion; need to address incidents; barriers to service delivery; changes to family dynamics impacting service delivery; successes; and/or other current needs. |

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| Report completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_  |
|  Staff Signature/CredentialsI have reviewed and approved this report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_  |

 Supervisor Signature/Credentials

[ ]  Copy of Monthly Progress Report provided to CSU

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| Service Completion and Discharge Summary |
| Discharge Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Reason for Discharge: Service Progress at Discharge: \_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Describe progress made on items within domains of the YASI, including risk and protective factors: Discharge Recommendations:  |