

Identifying Information

Fields to discuss/think about

Commonly used for data Requests

Performance measure fields

## West Virginia Child Abuse & Neglect Case Status Reporting Form

Post Perm. Mod. Fields added by direction of CIP members in 2014

Ⓢ - difficult to obtain data

### Basic Case Information

J - can be pulled from JANIS

The use of this hardcopy form is optional and is to be used as an aid to complete the online database. All data from this form must be transferred to the database in order for the data to be utilized by the Administrative Office.

#### 1. Case Information:

J Case #: \_\_\_\_\_ J County: \_\_\_\_\_ J Date Original Petition Filed: \_\_\_\_\_

J Was the Child Removed? ☐ Yes ☐ No J Date Child Was Removed: \_\_\_\_\_

Did the Petition seek and obtain custody? ☐ Yes ☐ No

J Is this form being completed for an Amended Petition? ☐ Yes ☐ No

J Date of Amended Petition: \_\_\_\_\_

Type of Amended Petition: ☐ New Factual Allegations of Abuse/Neglect or New Relief Sought  
☐ Respondent Added / Substituted

#### 2. Reassigned Cases: Complete line A. for cases transferred from this Circuit.

Complete line B. for cases transferred to this Circuit.

A. Date Transferred Out: \_\_\_\_\_ To County, State: \_\_\_\_\_

B. Date Transferred In: \_\_\_\_\_ From County, State: \_\_\_\_\_

Other Circuit Prior Case#: \_\_\_\_\_

Ⓢ MDT First Convened: \_\_\_\_\_

Ⓢ Unified Child and Family Case Plan Submission Date: \_\_\_\_\_

J Was there a co-petitioner? \_\_\_\_\_ J If yes, relationship to child: ☐ Father ☐ Mother ☐ Other

Check all Risk Factors indicated in this case that apply (Information is usually contained in the Petition, also review the Child and Family Case Plan): ☐ Drug Abuse ☐ Alcohol Abuse ☐ Domestic Violence  
☐ Mental Health Issues ☐ Sexual Crimes ☐ None Apply

#### 3. Case Judges:

J Judge 1: \_\_\_\_\_ J in: \_\_\_\_\_ J out: \_\_\_\_\_

J Judge 2: \_\_\_\_\_ J in: \_\_\_\_\_ J out: \_\_\_\_\_

#### 4. Related Case Numbers: - used for New View

J 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_

6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_

Case # \_\_\_\_\_

## West Virginia Child Abuse & Neglect Case Status Reporting Form Child Information

The use of this hardcopy form is optional and is to be used as an aid to complete the online database. All data from this form must be transferred to the database in order for the data to be utilized by the Administrative Office.

### 1. Identifying Information:

J First Name: \_\_\_\_\_ J Last Name: \_\_\_\_\_

J Date of Birth: \_\_\_\_\_ J Last Four SSN: \_\_\_\_\_

J Zip Code for Current Placement (If Known): \_\_\_\_\_

### 2. Permanency Planning:

J Has there been a Permanency Planning Determination? ☐ Yes ☐ No

J Initial Permanency Plan Determination Date: \_\_\_\_\_

Permanency Plan: ☐ Adoption ☐ Emancipation/ Independent Living ☐ Permanent Guardianship

☐ Placement with a fit and willing relative ☐ Placement with non abusive parent ☐ Reunification

☐ Another planned permanent living arrangement

Concurrent Plan: ☐ Adoption ☐ Emancipation/ Independent Living ☐ Permanent Guardianship

☐ Placement with a fit and willing relative ☐ Placement with non abusive parent ☐ Reunification

☐ Another planned permanent living arrangement

J ☐ Has the court made finding that NO Reasonable Effort's were required to preserve family?

J Date Findings made: \_\_\_\_\_

### 3. Achievement of Child Permanency:

J Permanency Achieved Date: \_\_\_\_\_

J Type of ASFA-Allowable Permanency Achieved:

☐ Dismissal ☐ Dismissal w/ Non-custodial Services Provided by DHHR ☐ Adoption

☐ Emancipation ☐ Legal Guardianship ☐ Placement w/ Non-abusive Parent

☐ Placement w/ Fit and Willing Relative

Adoption Case Number: \_\_\_\_\_ County Finalizing Adoption: \_\_\_\_\_

☐ Adoption Finalized Out of State

J Extraordinary Reasons to Delay Permanent Placement Beyond 18 months: ☐ Yes ☐ No

J Date of order making extraordinary reasons specific: \_\_\_\_\_

often requested



#### 4. Child Fatality: — used for Fatality Review board

Case Closed due to Child Fatality: \_\_\_\_\_

Referred to Fatality Review Board : ☐ Yes ☐ No

Date Referred to Fatality Review Board: \_\_\_\_\_

#### 5. Other:

J Case Close Date: \_\_\_\_\_

Was there an appeal of the circuit courts decision? ☐ Yes ☐ No

Did the Supreme Court ☐ Affirm or ☐ Reverse back to circuit court

Was there a different permanency outcome as a result? ☐ Yes ☐ No

(If Yes, please fill out the "Post Permanency Modification" Section)

Was this case re-opened due to removal from original permanent placement? ☐ Yes ☐ No

(If Yes, please fill out the "Post Permanency Modification" Section)

"If the child is removed from an adoptive home or other permanent placement after the case has been dismissed, any party with notice thereof and the receiving agency shall promptly report the matter to the circuit court of origin." Rule 45(b)

#### 6. Out Of Home Placement:

✓  
could use for N.V.  
also used for random  
data requests

##### Out Of Home Placement Types

###### In State

FI: Foster Care  
GI: Group Home  
HI: Hospital  
KI: Kinship Placement  
RI: Residential Treatment  
SI: Shelter

###### Out of State

FO: Foster Care  
GO: Group Home  
HO: Hospital  
KO: Kinship Placement  
RO: Residential Treatment  
SO: Shelter

Type	Date Started	Date Ended	Type	Date Started	Date Ended
1st	_____	_____	7th	_____	_____
2nd	_____	_____	8th	_____	_____
3rd	_____	_____	9th	_____	_____
4th	_____	_____	10th	_____	_____
5th	_____	_____	11th	_____	_____
6th	_____	_____	12th	_____	_____

#### J 7. Judicial/Permanent Placement Reviews:

1st	9th	17th
2nd	10th	18th
3rd	11th	19th
4th	12th	20th
5th	13th	21st
6th	14th	22nd
7th	14th	23rd
8th	16th	24th

Comments:

\_\_\_\_\_

\_\_\_\_\_

Case # \_\_\_\_\_

## West Virginia Child Abuse & Neglect Case Status Reporting Form

### Child Information—Post Permanency Modification

The use of this hardcopy form is optional and is to be used as an aid to complete the online database. All data from this form must be transferred to the database in order for the data to be utilized by the Administrative Office.

#### 8. Post Permanency Modification:

Date of re-opened case: \_\_\_\_\_

Permanency Plan: ☐ Adoption ☐ Emancipation/ Independent Living ☐ Permanent Guardianship

☐ Placement with a fit and willing relative ☐ Placement with non abusive parent ☐ Reunification

☐ Another planned permanent living arrangement

#### 9. 2nd Achievement of Child Permanency:

Permanency Achieved Date: \_\_\_\_\_

Type of ASFA-Allowable Permanency Achieved:

☐ Dismissal ☐ Dismissal w/ Non-custodial Services Provided by DHHR ☐ Adoption

☐ Emancipation ☐ Legal Guardianship ☐ Placement w/ Non-abusive Parent

☐ Placement w/ Fit and Willing Relative

Adoption Case Number: \_\_\_\_\_ County Finalizing Adoption: \_\_\_\_\_

☐ Adoption Finalized Out of State

#### 10. Other:

Second Case Close Date: \_\_\_\_\_

#### 11. Out Of Home Placement:

##### Out Of Home Placement Types

###### In State

FI: Foster Care  
GI: Group Home  
HI: Hospital  
KI: Kinship Placement  
RI: Residential Treatment  
SI: Shelter

###### Out of State

FO: Foster Care  
GO: Group Home  
HO: Hospital  
KO: Kinship Placement  
RO: Residential Treatment  
SO: Shelter

Type	Date Started	Date Ended	Type	Date Started	Date Ended
1st	_____	_____	5th	_____	_____
2nd	_____	_____	6th	_____	_____
3rd	_____	_____	7th	_____	_____
4th	_____	_____	8th	_____	_____

#### 12. Judicial/Permanent Placement Reviews:

1st	_____	6th	_____	11th	_____
2nd	_____	7th	_____	12th	_____
3rd	_____	8th	_____	13th	_____
4th	_____	9th	_____	14th	_____
5th	_____	10th	_____	15th	_____

Case # \_\_\_\_\_

**West Virginia Child Abuse & Neglect  
Case Status Reporting Form  
Respondent Form**

The use of this hardcopy form is optional and is to be used as an aid to complete the online database. All data from this form must be transferred to the database in order for the data to be utilized by the Administrative Office.

1. **Respondent:** ☒ Mother ☐ Father ☐ Putative Father ☐ Brother ☐ Father's Girlfriend

☐ Mother's Boyfriend ☐ Foster Parent ☐ Guardian ☐ Sister ☐ Step Parent

☐ Other Relative ☐ Unrelated Person Living in Home ☐ Grandparent ☐ Parent's same sex partner

**J** First Name \_\_\_\_\_ **J** Last Name: \_\_\_\_\_

**J** ☐ Was the respondent added or substituted after the original petition date or was respondent in Original Petition but service was delayed ?

**J** Date Respondent Added: \_\_\_\_\_

2. **Preliminary Hearing:**

**J** Started: \_\_\_\_\_ **J** Ended: \_\_\_\_\_

3. **Pre-Adjudicatory Improvement Period "PAIP" Hearing:**

**J** Was PAIP Granted? ☐ Yes ☐ No **J** Review Hearings: 1 \_\_\_\_\_ 2 \_\_\_\_\_

**J** Date PAIP Begins: \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_

**J** PAIP Termination Date: \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_

(Do not input date until IP has actually ended)

7 \_\_\_\_\_ 8 \_\_\_\_\_

9 \_\_\_\_\_ 10 \_\_\_\_\_

**J** Was Case Dismissed as a result of a successful Improvement Period ? ☐ Yes ☐ No

4. **Adjudicatory Hearing:**

**J** Started: \_\_\_\_\_ **J** Ended: \_\_\_\_\_

**J** Abused Child? ☐ Yes ☐ No **J** Neglected Child? ☐ Yes ☐ No

Date Entered: \_\_\_\_\_ **J** Adjudicated as battered parent ☐ Yes ☐ No

↓  
not currently used in P.M.  
but could be used for potential  
State P.M.

↓  
used for CPACs



### 5. Adjudicatory Improvement Period "AIP" Hearing:

☒ Was AIP Granted?: ☐ Yes ☐ No ☒ AIP Review Hearings: 1 \_\_\_\_\_ 2 \_\_\_\_\_  
3 \_\_\_\_\_ 4 \_\_\_\_\_  
☒ AIP Begin Date: \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_  
7 \_\_\_\_\_ 8 \_\_\_\_\_  
☒ AIP Termination Date: \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_  
(Do not input date until IP has actually ended)

☒ AIP Was Extended Past 6 Months: ☐ Yes ☐ No

☒ Was Case Dismissed as a result of a successful Improvement Period? ☐ Yes ☐ No

### 6. Dispositional Improvement Period "DIP" Hearing:

☒ Was DIP Granted?: ☐ Yes ☐ No ☒ DIP Review Hearings: 1 \_\_\_\_\_ 2 \_\_\_\_\_  
3 \_\_\_\_\_ 4 \_\_\_\_\_  
☒ DIP Begin Date: \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_  
7 \_\_\_\_\_ 8 \_\_\_\_\_  
☒ DIP Termination Date: \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_  
(Do not input date until IP has actually ended)

☒ DIP Extended Beyond 6 Months: ☐ Yes ☐ No

☒ Final Disposition Hearing Date: \_\_\_\_\_

☒ Was Case Dismissed as a result of a successful Improvement Period? ☐ Yes ☐ No

### 7. Final Disposition Hearing Outcome:

☒ Dismissed Petition: \_\_\_\_\_

☒ Referred to Community Agency and Dismissed: \_\_\_\_\_

☒ Returned Child Home Under Supervision and Dismissed: \_\_\_\_\_

☒ Committed Temporary Custody to Someone Other than Parents: \_\_\_\_\_

☒ Terminated Parental or Caretaker Rights: \_\_\_\_\_

☒ ☐ Voluntary Relinquishment ☒ Involuntary Relinquishment

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_