



**PARENTS/LEGAL GUARDIANS****Name/  
Birthdate****Address/  
Phone****Relationship/  
To Whom**

This information will populate from the parent's Client Notebook. If a parent's address is confidential, delete the address and enter "Confidential". If the identity of a parent or the requested information in the grid is unknown, enter "Unknown" in the spaces provided.

**OTHERS****Name/  
Birthdate****Address/  
Phone****Relationship/  
To Whom**

Select only those individuals who have a direct interest in the child. It is not necessary to list collateral contacts in this section. If necessary, edit/enter data directly into these fields. If this section is unnecessary, enter "none" to show the Court that this section was considered.

**INTERPRETER****Interpreter Required****Language****For Whom**

Complete this section only if an interpreter is needed at the hearing. If an interpreter is not needed, enter "N/A." If an interpreter is needed, under the "Interpreter Required" enter "Yes," under "Language", enter the language spoken by the interpreter, under "For Whom," enter the name(s) of the person(s) requiring the interpreter.

**ATTORNEYS****Name****Address/  
Phone****Representing**

Majority of the information in this field is pre-populated by the database. Information regarding attorneys representing tribes or tribal organizations is the only information that must be entered manually. If necessary, edit/enter data directly into these fields. If this is a new filing of a WIC 300 petition and none of the parties have an attorney of record, enter "N/A."

**INDIAN CHILD WELFARE ACT STATUS**

The Indian Child Welfare Act does or may apply.

**Child's Name****Indian Child****Tribe (If Known)****ICWA Eligible**

- Indicate if the child(ren) may be or is **American Indian** from a federally recognized or non-federally recognized tribe.
- If the child is or may be an American Indian, clearly document in detail all active efforts made to locate an American Indian home for the child's placement.
- Indicate whether the tribe(s) and/or the Bureau of Indian Affairs and the Secretary of Interior have been notified that dependent child proceedings have been initiated on the



**Additional Legal History**

If any previous WIC Section 300 petition or 342, 387 or 388 supplemental petitions have been filed, list the date it was filed and the date the petition was sustained and enter the exact language of the sustained supporting fact(s) on the petitions, the name of the child on whose behalf the petition was filed and the date it was sustained or dismissed. If any of the sustained supporting fact(s) contain the exact same language, it is only necessary to enter the sustained supporting fact once.

Example: a-1, c-1, and d-1

On or about March 5, 1999 and on prior occasions, the child Lisa Conflict was sexually abused by her father, Fred Payne. Said abuse included, but was not limited to, fondling of the child's breasts. Further, the child's mother, Ann Marie Conflict, failed to protect the child. Such conduct by the child's father and her mother's failure to protect the child endangered the child's physical and emotional health and safety and places the child at risk of further sexual abuse.

If applicable, describe the filing of any additional petitions (WIC Sections 342, 387 or 388), jurisdictional transfers and/or prior dependency court proceedings and indicate the date sustained or dismissed.

Example:

A supplemental WIC Section 387 petition was filed on behalf of Lisa Conflict on 01/02/1999. On 02/03/99, the WIC 387 petition was sustained.

List the supporting facts of the petition, using the exact language of the sustained petition.

**REASON FOR HEARING****Date/Time****Removed From****Relationship****Removal Reason**

The information required in this field must be manually entered by the user; it currently does not populate from the database.

**Reason for Detention/Family Assessment**

Under this heading, discuss the following:

- Indicate, without compromising the confidentiality of the reporting party, if applicable, how the case was referred to DCFS and what the allegations were.
- Discuss the results of the investigation as they relate to each allegation, and explain specific finding for each child.
- Describe where the interview took place, the date and time, who was present, and whether it was conducted on the telephone or in person.
- Record specific and clearly presented facts regarding the reasons for the detention or non-detention of the child(ren).
- If a child is detained, present the facts, which indicate why (s)he is at risk if left in the home.
- If a child is not detained, present the facts, which indicate why (s)he is not at risk if allowed to remain in the home.

- Include a factual summary of the threats identified on the SDM Safety Assessment.
- Describe significant social, cultural, psychological, medical or economic factors.
- If pictures have been taken (as in a dirty home case), attach them to the detention report.
- If this detention is the result of a failed Voluntary Family Maintenance (VFM) or Voluntary Family Reunification (VFR) Agreement, discuss the facts that led to the establishment of the VFM/VFR.
  - Describe in detail the provisions of the VFM/VFR agreement and attach a copy of the signed agreement to the Detention Report.
  - Describe clearly the facts that led to the removal of the children and the current facts that indicate the children are at risk. Do not just state that the parents failed to do what they agreed to do, but explain in detail.

### Current Medical, Mental and Emotional Status of the Children

- Provide a description of each child's current medical, mental and emotional status.
  - For new filings on an existing case attach the [Health and Education Passport \(HEP\)](#) document to the court report.
- Indicate if a Hub referral has been submitted for a medical examination at the Hub.
- Describe any previous and/or current medical and/or mental health problem(s), including BMI score if available to address any weight problems.
- Discuss the parent's, caregiver's and your own observations of the child's mental and emotional status.
- If the child was born drug or alcohol dependent, give as much information as possible about the condition of the baby.
  - Submit the Newborn Risk Assessment, which the hospital is required to do on the mother.
  - Provide specific information concerning the child's condition, a copy of the child's and mother's (if available) toxicology report and a copy of the hospital's Newborn Risk Assessment.
- If a SCAN team evaluation or a physical examination has been performed on the child(ren) prior to the detention or a consultation with the Hub physician has been made, that information should be contained as well.
- Address all doctor's/therapist's reports/letters diagnosis, treatment, progress and participation, and medications (including psychotropic) taken in the body of the report and attach them to the court report.

### Efforts to Place Siblings or Half-siblings Together

Enter the above heading manually only when more than one child was removed from the home:

- Address whether or not siblings or half-siblings have been placed together.
- If they have not, indicate the reasons it is not in the best interest of the children and provide specific facts in support of this decision.
- Document all efforts that have been made to place siblings together and what plans have been made to ensure sibling visitation or future plans for placing them together.

### School Information

Enter the above heading only if any of the children are of school age

- Describe the child's current educational status.
- Discuss whether or not a determination has been made as to whether or not the child will be able to attend his or her school of origin (public or non-public).
- Additionally, if the child had a disability and an active individualized education program prior to removal, indicate that at least ten (10) days before the change of placement, the local educational agency that provided a special education program for the child prior to removal and the receiving special education local plan area was notified in writing of the impending change of placement.
  - Attach a copy of the most recent Individualized IEP or 504 Plan.
- If parental rights to make educational decisions have been limited, indicate the name of the person the school district appointed as the educational surrogate.
- If a parent's educational rights have not been limited, discuss whether the parent is meeting the educational needs of the child responsibly or whether the court should consider limiting those rights.
- Attach all documents along with the current HEP to the court report.

#### Necessity for Congregate Care for a Child Age Six or Younger

Enter the above heading only if the child is age six (6) or younger and is in need of congregate care: “

- Address the reasons why it is necessary to place the child in congregate care. Some examples are:
  - Need to secure a complete and adequate evaluation, including placement planning and transition time, in order to determine what is the most appropriate placement setting for the child.
  - Placing a newborn so that the baby can be placed with his or her mother
  - Keeping a sibling group together.
- Provide a timeline as to when it is anticipated that the child will be placed out of the congregate care setting.

#### Family Strengths

Enter all factors indicating the positive trait/character qualities for each involved party. This information is obtained through the CSW's observations, statements from involved parties and activities completed by the parents or child. Incorporate the results of the SDM Family Strengths and Needs Assessment or Reassessment, without referencing the tool itself. Do not attach any SDM tools when submitting documents to court, unless ordered by the court to do so.

#### PATERNITY/LEGAL RELATIONSHIP

Provide all available information regarding the paternity of the child. Provide the court with the necessary facts for the court to make the determination whether a man is the alleged or presumed father. If an alleged father denies paternity on a JV-505, Statement of Paternity, no further notice is required and he is no longer part of the case. If a JV-501, Parentage: Finding and Judgment, is available, attach it to the report.

When the identity of the father is unknown, enter: “The identity of [enter the name(s) of the child(ren)]'s father is unknown.”

If available, attach the child's birth certificate and if not yet available, indicate what has been done to obtain it. If no birth certificate exists or the birth certificate has incorrect information, address what information needs to be corrected and what efforts are being made to obtain a correct birth certificate.

#### **PRIOR CHILD WELFARE HISTORY**

Discuss the results of CWS/CMS clearances. If there is a history of child welfare services, describe the type of allegations involved and the results of the investigation and the extent of child protective services. Include a statement regarding the potential impact of any child welfare history upon the abilities of the parent(s)/legal guardian(s) to care for the child at this time.

In addition, include any contacts the child has had with the delinquency court pursuant to WIC 601 or 602. If known, provide the name and contact number of the child's probation officer and defense counselor.

Enter "No prior child welfare history" if no record is found.

#### **CRIMINAL HISTORY**

Provide the results of all criminal records clearances on the parents, legal guardians, other adults residing in the home, those adults who have familiar or intimate relationship with any adult living in the home and those youth over fourteen (14) years of age who you believe may have a criminal record.

Address all clearance results in the report. Enter the person's name, AKA, and a description of arrests and/or convictions. Also include probation/parole status, date probation/parole status expires and the name and phone number of current Probation/Parole Officer, if known.

If a parent is currently incarcerated, include the name and location of the jail/prison. The inmate's jail or prison ID number; and the anticipated release date.

Enter "No criminal history known at this time" if there is no criminal record found. Attach the results of the criminal history to the court report.

In cases involving prospective adoptive or adoptive parent(s), present the results of clearances in a general fashion that provides information with enough facts to assess child safety, but does not violate the confidentiality of the prospective adoptive or adoptive parent(s). Consult with county counsel if there are issues regarding confidentiality.

If a request has been submitted for criminal records but the results have not been received, indicate who the clearance was for, his or her relationship to the child, and the date the request was submitted. If a parent refused or failed to Live-Scan, request the court to order the parent to Live-Scan.

#### **EFFORTS TO LOCATE ABSENT PARENTS**

When the report is being created, a dialog box will display these options:

- Efforts to Locate Absent Parents section needed?  Yes  No.



- Select “Yes” whenever the whereabouts of a parent/legal guardian is unknown.
- Select “No” if the whereabouts of all parents/legal guardians is known.
- If the answer is yes, the heading “Efforts to Locate Absent Parents” will appear; if the answer is no, the heading will not appear.

If a parent's/legal guardian's whereabouts are unknown, document efforts made to locate him or her. Enter the name of each individual (last name first), his/her relationship to the child or role in the case, the date interviewed and if the interview was conducted in person or by telephone and what, if any, information the individual provided regarding the whereabouts of the absent parent/legal guardian.

### **THE NEED (IF ANY) FOR CONTINUED DETENTION**

When the report is being created, a dialog box will display with these options:

1. There is a substantial danger to the physical health of the child or the child is suffering severe emotional damage, and there are no reasonable means by which the child's physical or emotional health may be protected without removing the child from the parents' or guardians' physical custody.
2. There is substantial evidence that a parent, guardian, or custodian of the child is likely to flee the jurisdiction of the court.
3. The child has left a placement in which he or she was placed by the juvenile court.
4. The child indicates an unwillingness to return home, if the child has been physically or sexually abused by a person residing in the home.
  - Select the appropriate option.
  - If the case facts require the selection of more than one option, enter an “X” in the box for all other options selected.
  - Describe the safety threats in the SDM Safety Assessment tool that were identified without referencing the tool itself.
  - Provide a summary of facts supporting the SDM Risk Assessment factors, which are the basis for the continued detention of the child.

### **REASONABLE EFFORTS AND/OR PRIOR INTERVENTION/SERVICES OFFERED**

When the report is being created, a dialog box will display with these options:

1. “Reasonable Efforts were made to prevent or eliminate the need for the child(ren)’s removal from the home. The following Pre-placement Preventive Services were provided but were not effective in preventing or eliminating the need for removal of the child from the home.”
  - If this first option is selected, a second dialog box will appear.
    - Select all previous services provided and future services to be provided.
2. “The Lack of Pre-Placement Preventive Services was reasonable because of the emergent nature of the situation.” - **DO NOT USE THIS SELECTION** – Instead, use the following:
  - “Due to concerns for the child’s safety, efforts, beyond the initial response and assessment, are not warranted.”

In this section, make the appropriate selection. Discuss the Safety Interventions identified in the SDM Safety Assessment tool without referencing the tool itself. If interventions were used, describe the interventions used and results.



Indicate whether or not a Team Decision Making Meeting took place prior to the removal of the child(ren) and provide a brief summary of what transpired and what was the outcome of the meeting.

If a SDM Safety Plan was in effect prior to removal, provide the date the SDM Safety went into effect and specify the Planned/Services Implemented to mitigate the safety threat(s), community resources that might be available, or the availability of family preservation services. If there are no other services available, explain why.

For Indian Children, document active efforts that were delivered to prevent the need for removal of the child. These efforts must be delivered and unsuccessful before taking an Indian child into temporary custody. Such efforts may include but are not limited to providing remedial services and rehabilitative programs designed to prevent the breakup of the Indian family.

The only exception where active efforts are excused is if it is during an emergency and option one (1) has been selected.

If the family has received or the plan is to provide Family Preservation Services, select the "Other" option. Discuss Family Preservation Services in the next section below.

Document efforts to contact incarcerated parents to determine whether he or she has a plan for that child. If the only allegation of the petition is that, a parent is incarcerated and cannot arrange for the care of the child(ren), document what efforts were made to contact the incarcerated parent to determine whether or not that parent has a plan for his or her child(ren). If the parent has a plan for his or her child(ren) which is determined to be unacceptable, document in detail the facts that support that determination.

If the DCFS 179-MH and DCFS 179-PHI were signed by the parent, document the following:

"Parent/Legal Guardian (enter parent's name) signed the DCFS 179 MH Parental Consent for Child's Mental Health/Developmental Assessment and Participation in Mental Health/Developmental Services, and the DCFS 179-PHI, Authorization for Disclosure of Child's Protected Health Information."

If consent was not obtained from the parent/legal guardian before the Detention hearing describe the efforts made to obtain the parent's signature on the forms, and the reason why it was not possible to obtain the signature.

**Results of Previous Services:**

The selections made for Previous Services provided will appear below this heading.

**Example:**

**Counseling, Emergency In-Home Caretakers, Case Management, Emergency Shelter Care, Parent Training, Public Assistance Services, Out of Home Respite Care, Teaching and Demonstration Homemaker, Transportation, Other Services.**

Indicate the name(s) of the individual and/or agencies that provided the services, when they were provided and for how long and the results of those services. Address all doctors' and/or therapists' reports and attach them to the report.

If the family received Up Front Assessment services, indicate what agency provided services and the services provided as recommended by the Up Front Assessment. Do not make reference to or attach the Up Front Assessment.

For Indian Children, document how the prevailing social and cultural values, conditions and the way of life of the Indian child's tribe were taken into account as it relates to the child's detention. Document the results of available resources that were provided to the Indian child's extended family, tribe and other social service agencies and individual Indian caregiver services provided.

**AVAILABLE SERVICES/REFERRAL METHODS WHICH COULD PREVENT THE NEED FOR FURTHER DETENTION AND/OR FACILITATE FUTURE RETURN OF THE CHILD(REN) TO PARENTS/LEGAL GUARDIANS**

The selections made for "Future Services" to be provided will appear below this heading.

**Example:**

**Counseling, Emergency In-Home Caretakers, Case Management, Emergency Shelter Care, Parent Training, Public Assistance Services, Out of Home Respite Care, Transportation, Other Services.**

Indicate the name(s) of the individual and/or agencies that will be providing the services, the date the service began/will begin, if known. If you are not recommending release at the detention hearing, describe how the proposed services could facilitate the future return of the child. If applicable, describe how the proposed services will prevent the need for further detention. Incorporate the recommendations of the Up Front Assessment but do not make reference to or attach the Up Front Assessment.

**RELATIVE PLACEMENT INFORMATION**

There are relatives to consider for placement.

<b><u>Child(s) Name</u></b>	<b><u>Relatives Name/Address/Phone</u></b>	<b><u>Relationship/To Whom</u></b>
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When the report is being created, a dialog box will display three (3) options:

1. There are relatives to consider for placement.

Enter the required information. Document the date that the "Relative Notification Letter" was mailed to all appropriate relatives located. If the child has been placed or will be placed with a relative, enter the relative's address, telephone number, and relationship to the child and the results of the prospective caregiver's evaluation. If the home of a prospective relative caregiver has been assessed and the child was not placed in that home, state the specific reason(s), why the child was not placed in that home including all the risk factors that led to this decision. If the denial is based on criminal records information, discuss whether or not criminal record exemptions can be obtained. If this is a 387 petition and a child is being removed from the home of a relative because the relative's home/placement doesn't meet Title 22 Approval Standards, provide all of the risk factors that led to the child's removal.

If a prospective relative was identified but is not willing to care for the child(ren), provide his/her name, address, telephone number and relationship to the child and, if known, the reason(s) (s)he/ is unwilling to care for the child. If the child has not been placed with a relative, state what efforts were made to identify, evaluate and place the child(ren) with non-relative extended family members.

2. There are no relatives to consider for placement.

If the child(ren) is/are not placed with a relative at the time of detention, provide a description of all efforts made to locate potential relative caregivers or non-relative extended family members. If a potential relative caregiver has been identified and is willing to care for the child(ren) but not assessed, provide his/her name address, phone number and relationship to the child(ren). State all current to evaluate a relative pursuant to WIC 309(d).

3. The parents have not provided sufficient information regarding relatives for placement consideration.

For all options, address the results/status of all CII, Live-Scan and CACI clearances on the prospective relative caregivers and, if applicable, other adults residing in the home. Ensure that copies of any clearances are sent/faxed to IDC with the report. If the results are pending, indicate the date the request was submitted.

## **WITNESS STATEMENTS/SUPPORTING EVIDENCE**

### **Witness Statements:**

Enter statements regarding the specific allegations as they relate to the case. Clearly state what each individual's testimony will be if called to testify. Include verbatim statements, whenever possible. Attempt to have face-to-face contacts with each person. Enter the date, time, place of interview, and relationship to the case. If the person was interviewed by telephone, enter the telephone number.

#### **Example:**

Detective John Day, LAPD Hollenbeck Division; badge number 2468; 2111 E. First Street, Los Angeles, CA 90033; (323) 555-2345. Interviewed in person on 03/23/1999 and can testify to the

detention and statements of Lisa regarding the sexual abuse by her father, Fred Conflict. Detective Day is available 6:30 A.M. - 3:00 P.M., Monday-Friday.

**Child(ren)'s Statements:**

Include name, relationship to the family member (son, daughter, and brother), what they specifically reported, date the statement was obtained, where the interview took place and who else was present. Record statements verbatim whenever possible, use quotation marks and enter the date the quote was made. If the child is non-verbal and/or too young to make a statement, enter the child's name followed by "The child is non-verbal" or "The child is too young to make a statement."

**Parents/Legal Guardians Statements:**

Include name, relationship to the child, what they specifically reported, date the statement was obtained, where the interview took place, and who else was present. Include information regarding all of the allegations and any information regarding the parent(s)/legal guardian(s)' willingness to participate in a service case plan. Record statements verbatim, whenever possible, using quotation marks. If a parents' /legal guardian's whereabouts are unknown, enter "[name of the parent/legal guardian and his or her relationship to the child) whereabouts are unknown]." If a parent/legal guardian was unavailable or refused to make a statement, document accordingly.

**Supporting Evidence**

List all supporting evidence, such as police reports, Live-Scan clearances, doctor's/hospital reports, photographs, and other relevant information, which may be used to support the allegations in the petition at the arraignment/detention hearing and/or the jurisdictional/disposition hearing.

**Example:**

Live-Scan clearance for Fred Conflict, dated (enter the date the Live-Scan was obtained).  
LAPD Detective John Day's report, dated (enter the date of the report).

**FAMILY VISITATION**

Within five (5) hours of a child being detained, depending on the circumstances, initial telephone contact must be set up between the parent and the child(ren); and within seventy-two (72) hours or removal a [visitation](#) must be facilitated. Regular contact should be maintained thereafter, prior to the detention hearing. Explain what arrangements have been made prior to submission of the detention report to IDC. The IDC CSW will enter any recommendations regarding visitation. Enter "The Court's attention is respectfully referred to the attached Court Report Addendum completed by the IDC CSW."

**CONFIDENTIALITY OF PLACEMENT**

Indicate if a [nondisclosure](#) order is in effect, the date it was issued, the department number of the court and the reasons for the order. Indicate if there is a need for the court to order a nondisclosure order, and provide specific facts that support the need for the order. Pursuant to WIC Section 308, the address of a licensed foster family home (including all Foster Family Agency (FFA) homes) must be kept confidential until the dispositional hearing, at which time

the court may then authorize, upon a finding of good cause, the disclosure of the address. The provision of WIC 308 does not apply to the home of a non-custodial parent, relative, small family homes, group homes and hospitals.

### **ATTACHMENTS**

The attachments identified in this report are attached hereto and incorporated herein by this reference.

List all attachments and ensure that listed attachments are, in fact, attached to the report. Include the title of the attachments and the date it was written.

Example:

Police Report/Pomona Police Department #00-0000, dated 01/01/01.

Pomona Valley Medical Center-Medical Record #00000, dated 01/01/01.

Ensure that any confidential information, such as those deemed confidential in the body of the report, shall also be protected in the attachment(s).

- The ICWA-010(A) for each child must be attached to all Detention Reports.
- If an alleged father completed a JV 505, Statement Regarding Paternity (Juvenile Dependency) at any time during the life of the case, it must be included in the attachments.

### **RECOMMENDATION**

A court order must be requested for an Initial Medical Examination. Include the following recommendation:

It is respectfully recommended that the court make the following order:

“DCFS is hereby ordered to obtain Medical Hub medical services for the child(ren) (enter child’s name). DCFS shall submit the referral form to the appropriate Medical Hub as soon as possible to initiate services in a timely manner. Services shall include, but are not limited to, initial medical evaluation, mental health screening, dental screening, and disability screening along with required follow up and ongoing routine medical care provided by the Medical Hub, or other community medical, mental health, and dental providers. The Court orders the release of any and all medical records in DCFS’ possession regarding the child[ren] (enter child’s name) to the Medical Hub provider for the coordination of care and treatment of the child[ren] (enter child’s name) as specified in this order unless release by DCFS is otherwise prohibited by law. Information regarding the Medical Hub services and any report prepared by the Medical Hub or other medical provider shall be provided to DCFS for the coordination of care, treatment, and supervision of the child. Such information shall not include the details of therapeutic sessions or statements made by the child[ren] unless there is a legally permissible basis to do so. Further, pursuant to Welfare and Institutions Code Sections 5328.04 and Civil Code Section 56.103 information disclosed pursuant to this order may not be admitted into evidence in any criminal or delinquency proceeding against the child. Nothing in this section shall prohibit identical evidence derived solely

from other lawful means from being admissible in a criminal proceeding nor is intended to prohibit a health care provider from providing care to a minor or disclosing health information about a minor to DCFS if there is a legally permissible basis to do so.”

“DCFS is to regularly update this Court and all parties to this case, and their legal counsel, regarding the status of the Medical Hub assessment and follow-up care and treatment provided.”

Make the following recommendation if the DCFS 179 was not signed by the parent/legal guardian before the Detention Hearing and the child is placed with a non-relative extended family member:

It is respectfully recommended that the court make the following order:

“Grant DCFS the ability to authorize medical, surgical, dental, or other remedial care for the dependent child by licensed practitioners, as it may, from time to time appear necessary, pursuant to WIC 369.”

Make the following recommendation if the DCFS 179-MH and 179-PHI were not signed by the parent/legal guardian before the Detention hearing:

It is respectfully recommended that the court make the following order:

“The court orders a mental health and/or developmental assessment of the child[ren] \_\_\_\_\_ to be performed by a licensed mental health professional within the State DMH approved disciplines. Further, the developmental assessment of the child[ren] may be performed by an approved Regional Center provider. The above referenced mental health and/or developmental assessment is to be used solely for the purpose of coordinating/providing treatment and/or other services for the child[ren].

Upon recommendation of the approved professional, necessary mental health and/or developmental treatment is authorized and DCFS is to secure services to be provided by a licensed mental health professional within the State DMH approved disciplines or a qualified person under the direction of a licensed mental health professional within the State DMH approved disciplines. Further, necessary mental health and/or developmental treatment may be provided by Regional Center staff or an approved Regional Center provider. The child[ren]'s attorney is to be notified within 72 hours from the time the child[ren] is referred for mental health and/or developmental treatment.

This order does not apply to administration of psychotropic medications.

The child[ren]'s service provider shall provide DCFS with information relevant to the care and treatment of the child[ren] upon request by DCFS. Such information shall not include the details of therapeutic sessions or statements made by the child[ren] unless otherwise required by law. Further pursuant to Welfare and Institutions Code Section 5328.04 and Civil Code §56.103 information disclosed pursuant to this order may not be admitted into evidence in any criminal or delinquency proceeding against the child.

Nothing in this order shall prohibit identical evidence derived solely from other lawful means from being admissible in a criminal proceeding. DCFS is to regularly update this Court, all parties to this case, and their legal counsel, regarding the status of the mental health and/or developmental assessment and treatment authorized pursuant to this order.”

The IDC CSW will complete any other additional recommendations. Enter “The Court’s attention is respectfully referred to the attached Court Report Addendum completed by the IDC CSW.”

The Recommendations Guide has been posted to CWS/CMS under LA County Specific templates. To access the Recommendations Guide, take the following steps:

While in the ID tab of the Court Management Section (Purple button), select “+” under create a New JV Document, then change the “Document Category” to “County”, then select “Recommendations Guide” to access the document, select the appropriate recommendations and paste them into the court report.

OR

While in the Case Management Section (Green button), select ‘create a new document’, select Los Angeles County, then select Recommendations Guide, and select the appropriate recommendations and paste them into the court report.

There may be additional recommendation(s) that need to be included but are not found on the Recommendations Guide. These recommendations must be manually written into the report.

**Respectfully Submitted,**

Philip L. Browning, Director  
Department of Children and Family Services

**By**

**I Declare Under Penalty of Perjury that the Foregoing is True and Correct.**

Executed at \_\_\_\_\_, California this \_\_\_\_\_ day of \_\_\_\_\_,



Child's Name

CK00000

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**CSW Name, Title, File #, First Initial. Last Name, Phone Number**

**Date**

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**SCSW Name, SCSW, Phone Number**

**Date**

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**ARA Name, ARA, Phone Number (If ARA approval is required)**

**Date**

*I have read and considered the above report.*

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**Judicial Officer**

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**Date**