Permanency Planning Indicator

Case Name:	Form Completion Date:
Parent or Prior Custodian:	Social Worker's Name:
Case Number:	Jocial Worker S Name.
	Section 2 Parriers
Section 1 – Strengths	Section 2 – Barriers
Parent-Child Relationships 1. Parent shows empathy for child	Catastrophic Prior Abuse *1. Parent has killed or seriously harmed another child through abuse
1. Falent shows empathy for child	or neglect and no significant change has occurred in the interim.
2. Parent responds appropriately to the child's verbal and non-verbal	*2. Parent has repeatedly and with premeditation harmed or tortured
signals	this child.
3. Parent has an ability to put the child's needs ahead of his/her own.	*3. Child experienced sexual abuse by a caretaker or entered foster
	care due to sexual abuse.
4. When they are together, the child shows comfort in the parent's	Child experienced physical abuse in infancy.
presence.	Pommana Life atrida
In the past, the parent has met the child's basic physical and emotional needs.	Dangerous Lifestyle
Parent accepts some responsibility for the problems that brought	Darent's only visible support system and only visible means of
the child into care or to the attention of the authorities.	financial support is found in illegal drugs, prostitution, and street life.
Current Parental Support System	Rarent is addicted to debilitating illegal drugs or alcohol.
8. Parent has positive, significant relationships with other adults who	7. Pattern of documented domestic violence between the spouses and
seem free of overt pathology.	they refuse to separate.
	Parent has a recent history of serious criminal activity and jail.
9. Parent has a meaningful support system that can help him/her	Mother abused drugs/alcohol during pregnancy despite medical
now (job, counselor, faith based group/network/institution).	evidence to the contrary.
10. Extended family is nearby and capable of providing support.	Significant History
Past Parental Support System	*10. Parental rights to another child have been terminated following a period of service delivery to the parent and no significant change has
	occurred in the interim.
11. Extended family history shows family members able to help	11. There have been three or more CPS interventions for serious
appropriately when one member is not functioning well.	separate incidents, indicating a chronic pattern of abuse or severe
The state of the s	neglect.
12. Relatives came forward to offer help when the child needed	12. In addition to emotional trauma, the child has suffered more than
placement.	one form of abuse, neglect, or sexual abuse.
13. Relatives have followed through on commitments in the past.	13. Siblings have been placed in foster care or with relatives for a
	period of time over six month duration or have had repeated
44. There are significant other adults and blood valetimes who have	placements with CPS intervention.
14. There are significant other adults, not blood relatives, who have helped the family in the past.	14. This child has been abandoned with friends, relatives, hospital, or in foster care; or once the child placed in subsequent care, the parent
helped the family in the past.	does not visit of his/her own accord.
15. Significant other adults have followed through on commitments in	15. CPS preventative measures have failed to keep the child with the
the past.	parent.
Family History	16. Parent is under the age of 16 with no parenting support system,
	and placement of the child and parent together has failed due to
	parent's behavior.
16. Family's ethnic, cultural, or religious background includes and	17. Parent grew up in foster care or group care, or in a family of
emphasis on mutual caretaking and shard parenting in times of crisis.17. Parent's own history shows consistency of parental caregiver.	intergenerational abuse. 18. Parent has asked to relinquish the child on more than one
17. Falent's own history shows consistency of parental caregiver.	occasion following initial intervention.
18. Parent's history shows evidence of his/her childhood needs being	Parental Conditions
met adequately.	
Parent's Self-Care and Maturity	*19. Parent diagnosed with severe mental illness (psychosis,
19. Parent's general health is good.	schizophrenia, borderline personality disorder, sociopathy) which has
20. Parent uses medical care for self appropriately.	not responded to previously delivered mental health services.
21. Parent's hygiene and grooming are consistently adequate.	20. Parent's symptoms continue, rending parent unable to protect and
22. Parent has a history of stability in housing.	nurture child.
23. Parent has a solid employment history.	21. Parent has a diagnosis of chronic and debilitating mental or
24. Parent has graduated from high school or possesses a GED.	physical illness: psychosis, schizophrenia, borderline personality
25. Parent has employable skills.	disorder, sociopathy, brain injury, or other physical illness that responds slowly or not at all to current treatment modalities.
Child's Development	, ,
26. Child shows age-appropriate cognitive abilities.	22. Parent is intellectually impaired, has shown significant self-care deficits, and has no support system of relatives able to share
27. Child is able to attend to tasks at an age-appropriate level.	parenting
28. Child shows evidence of conscience development.	
29. Child has appropriate social skills.	
30. Major behavioral problems are absent.	
Section 3 - Need for Concurrent Plan	
Concurrent Plan Needed	
Concurrent Plan Not Needed	
The Permanency Planning Indicator is done once, as early in the	
process as possible, to determine if the child will be placed in a	* Extreme conditions making family reunification a low probability.
permanency planning resource family.	
Reassessment consists of review of the parent's visitation with	Adapted from Concurrent Planning: From Permanency Planning to
the child and progress with the case plan.	Permanency Action, Katz and Robinson.