

IN THE CIRCUIT COURT OF THE JUDICIAL CIRCUIT
IN AND FOR COUNTY, FLORIDA
JUVENILE DIVISION

IN THE INTEREST OF:

CASE NO.:

JUDICIAL REVIEW SOCIAL STUDY REPORT
FOR EXTENDED FOSTER CARE

Table of Contents

I. SIGNIFICANT CHANGES SINCE LAST CASE PLAN OR JUDICIAL/ PERMANENCY REVIEW	2
II. CURRENT COURT APPROVED PRIMARY PERMANENCY GOAL.....	2
III. CURRENT SUPERVISED LIVING ARRANGEMENT OF YOUNG ADULT	2
IV. SUMMARY OF RECOMMENDATIONS OF THE DEPARTMENT.....	2
V. OUTCOMES EVALUATION	3
VI. PARTICIPATION	4
VII. EDUCATION INFORMATION.....	4
VIII. EMPLOYMENT INFORMATION.....	5
IX. REVIEW SUMMARY	5
X. ATTACHMENTS TO COURT REPORT	5

Comment [DA1]: Pre-fills from the Legal Documentation page based on the selected County, which is mapped to the applicable Circuit. The circuit number must be FIRST, SECOND, THIRD, etc. ; this header only displays on the first and second page

Comment [DA2]: Pre-fills from the Legal Documentation page based on the selected Court Case Number.

Comment [DA3]: Pre-fills with young adult's name and DOB. The labels "Young Adult" and "D.O.B" will not be displayed.

Comment [DA4]: The naming convention must be "Judicial Review Social Study Report For Extended Foster Care" and should only appear on the Table of Contents page and first page following, none of the others. In addition, there is no logo on the Young Adult Judicial Review.

Comment [DA5]: Footer and Page numbering must start on the 2nd page. The Table of Contents sections are always going to be these, however, the page numbers should dynamically update each time the template is launched until the Legal Documentation page is approved and frozen.

IN THE CIRCUIT COURT OF THE [REDACTED] JUDICIAL CIRCUIT
 IN AND FOR [REDACTED] COUNTY, FLORIDA
 JUVENILE DIVISION

IN THE INTEREST OF: [REDACTED]

CASE NO.: [REDACTED]

Comment [DA6]: Pre-fills from the Legal Documentation page based on the selected County, which is mapped to the applicable Circuit. The circuit number must be FIRST, SECOND, THIRD, etc. ; this header only displays on the first and second page

Comment [DA7]: Pre-fills from the Legal Documentation page based on the selected Court Case Number.

Comment [DA8]: Pre-fills with young adult's name and DOB. The labels "Young Adult" and "D.O.B" will not be displayed.

**JUDICIAL REVIEW SOCIAL STUDY REPORT
 FOR EXTENDED FOSTER CARE**

JUDICIAL HISTORY

Date of current Judicial Review Hearing: [REDACTED]

Date of entry of Order Accepting Case Plan for Extended Foster Care: [REDACTED]

Comment [DA9]: Pre-fills from the YA Judicial Review Worksheet – Review Summary tab – Review Summary group box.

Date Adjudicated Dependent	Date of Last Judicial Review Hearing	Date by Which Next Permanency Hearing is Due	Is this also a Permanency Review	
			Yes	No
[REDACTED]	[REDACTED]	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>

Comment [DA10]: Pre-fills from the YA JR Worksheet page – Review Summary Tab.

Comment [DA11]: Pre-fills from the young adult's Legal Record page - Legal page, within that particular FSFN Case, where the Legal Action Initiated is either Dependency Adjudication - Consent or Dependency Adjudication - Trial where the Result is "Petition Granted" and pre-fills with the minimum Completed Date.

I. SIGNIFICANT CHANGES SINCE LAST CASE PLAN OR JUDICIAL/ PERMANENCY REVIEW

[REDACTED]

Comment [DA12]: Pre-fills from the YA JR Worksheet page – Review Summary tab – Date of Last Judicial Review.

II. CURRENT COURT APPROVED PRIMARY PERMANENCY GOAL

Transition from Licensed Care to Independent Living

Effective Date: [REDACTED]

Comment [DA13]: Pre-fills from the YA JR Worksheet page – Review Summary tab - Is this also a Permanency Review?

Comment [DA14]: Pre-fills from the YA JR Worksheet page – Review Summary tab - Date by Which Next Permanency Hearing is Due.

III. CURRENT SUPERVISED LIVING ARRANGEMENT OF YOUNG ADULT

[REDACTED]

Comment [DA15]: Pre-fills from the YA JR Worksheet page – Review Summary tab.

Comment [DA16]: Date approved case plan approved by the court (pulled from case plan)

IV. SUMMARY OF RECOMMENDATIONS OF THE DEPARTMENT

[REDACTED]

Comment [DA17]: Pre-fills with type of living arrangement from the YA JR Worksheet – Supervised Living Arrangement tab

Comment [DA18]: Pre-fills from the YA Judicial Review Worksheet.

Summary of Services provided to Young Adult:

[REDACTED]

Comment [DA19]: Pre-fills from the YA JR Worksheet page – Review Summary tab.

Summary of Young Adult's progress toward meeting case plan goal:

[REDACTED]

Comment [DA20]: Pre-fills from the YA JR Worksheet page – Review Summary tab.

PARTIES TO CASE PLAN

Primary Address	
Phone Number	
Alternate Phone Number	
Mailing Address	
Email Address	

Comment [DA21]: Pre-fills from the young adult's Person Management page. Use the most recent Primary Resident and Mailing address.

Phone Number	
Address	
Email Address	

Comment [DA22]: Pre-fills from the Professions/Family Support Network Contacts tab of the Maintain Case page with a Case Manager; Legal Guardian of Young Adult; Role of Guardian ad Litem and will pull in the associated details if documented on Person Management. Use the most recent address; regardless of type. Repeat table as needed.

V. OUTCOMES EVALUATION

Outcome applies to the following young adult: _____

Outcome will be achieved when: _____

Estimated Cost to young adult (if applicable): _____

Who	Actions/Tasks	Est. Cmpltn Date	Responsible Party for Cost	Location of Delivery of Services	Date of Service Referral	Service Referral Request Needed	Fre Ser
Provider Name	FSFN Provider	Provider Address	Provider Phone Number	Provider Email			
Service Category	Service Type	Task Complete					

Comment [DA23]: Pre-fills the Outcome from the YA JR Worksheet – Outcome Evaluation tab. The Outcomes will pre-fill in the order they are captured on the Outcome Evaluation tab. Within the template, the Outcomes are numbered in sequential order.

Comment [DA24]: Pre-fills young adult's name

Comment [DA25]: Pre-fills with the Outcome Achieved information documented on the YA JR Plan Worksheet – Outcomes tab.

Comment [DA26]: Pre-fills with the Est. Cost to Young Adult(if applicable) on the YA JR Worksheet – Outcome Evaluation tab. Also includes the Terms

Overall Outcome Progress: Excellent Adequate Not adequate No progress

Explanation of progress assessment: _____

Comment [DA27]: All values within this table pre-fill from the YA JR Worksheet page – Outcomes tab for each inserted Task within an Outcome. Note that a single Outcome can have multiple associated tasks, and therefore this table will repeat for each Task inserted within an Outcome. In addition, if information is not captured in the optional fields, the field within the table will appear blank.

Progress Toward Achieving Case Plan Goals: Excellent Adequate Not adequate No progress

Explanation of progress assessment: _____

Comment [DA28]: Based on the selected Provider (if applicable), the FSFN Provider will display Yes or No, indicating if the provider was selected or user entered text; the Provider's Address, Phone Number, and Email address will also display.

Changes in case plan goals, outcomes, actions and/or supports:

- No changes needed
- Changes in case plan needed
- Case closure recommended

Barriers to Achieving Desired Case Plan Outcomes: _____

Comment [DA29]: Pre-fills with Yes or No based on whether the check box is selected or not on the YA JR Worksheet.

Comment [DA30]: Pre-fills from the YA Judicial Review Worksheet for each Outcome.

Comment [DA31]: Pre-fills overall for the Case Plan Outcomes, not for each individual Outcome.

Comment [DA32]: Pre-fills overall for the Case Plan Outcomes, not for each individual Outcome.

RESOURCES

Assistance provided to the young adult to address his or her needs:

Comment [DA33]: Pre-fills from the YA JR Worksheet – Resources/Participation tab

Assistance provided to the Foster Parents or Legal Guardians to address the needs of the young adult:

VI. PARTICIPATION**Comment [DA34]:** Pre-fills from the YA Judicial Review Worksheet - Resources/Participation tab.

Was young adult notified of Hearing?		Is young adult planning to attend?		If not attending, state reason:	Plan for participation in hearing:
Yes	No	Yes	No		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Date the young adult was informed of the need to draft document:	Did young adult indicate interest in drafting this document?	If yes, the date the young adult provided input into this document:	Describe how the young adult participated or why they did not:
	Yes	No	
	<input type="checkbox"/>	<input type="checkbox"/>	

SUPERVISED LIVING ARRANGEMENT**Comment [DA35]:** Pre-fills from YA JR Worksheet – Supervised Living Arrangement tab.

Type of supervised living arrangement: How does the supervised living arrangement provide the young adult with a level of supervision consistent with his or her individual education, health care needs, permanency plan, and independent living goals:	
How does the supervised living arrangement offer, at a minimum, life skills instruction, counseling, educational support, employment preparation and placement, and development of support networks:	
Describe the strengths of this supervised living arrangement:	
Describe any problems with the supervised living arrangement:	

VII. EDUCATION INFORMATION**Comment [DA36]:** Pre-fills from YA Case Plan Worksheet – Education tab.

Current School Name:	
Current School Address:	
Current School Phone Number:	
Current Grade Level:	
Is the young adult an ESE student?	<input type="checkbox"/> Yes <input type="checkbox"/> No
ESE Programs:	
Does the young adult have a Transitional Individualized Education Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, the date of the most recent TIEP:	
Is the young adult performing on current education level?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain.	

Comment [DA37]: Display this table if secondary school.

Current School Name:	
Current School Address:	
Current School Phone Number:	
Type of Program:	

Comment [DA38]: Display this table if post-secondary or vocational school.

Number of hours currently enrolled:	
Total credits earned to date:	
Is Young Adult also in Postsecondary Educational Services and Support [PESS]?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other relevant information for PESS enrollment:	

VIII. EMPLOYMENT INFORMATION

EMPLOYMENT OR PROGRAM TO PROMOTE OR ELIMINATE BARRIERS TO EMPLOYMENT	
Is the young adult employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide the name and address of the employer:	
Number of hours worked per month:	
Is the young adult participating in a program or activity designed to promote or eliminate barriers to employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what is the name of the program or activity:	

Comment [DA39]: Pre-fills from YA Case Plan Worksheet – Employment/MMH tabs.

CONDITION EXEMPTING PARTICIPATION REQUIREMENTS EMPLOYMENT	
Nature of condition:	
Is there documentation of condition included:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Comment [DA40]: Only display if there is a disability identified on the MMH group box on the Employment/MMH tab.

Use narrative from MMH for the Nature of the condition. If Documentation of Conditions exempting participation –Attached check box on Attachment tab, indicate Yes

IX. REVIEW SUMMARY

Significant changes since last Case Plan or Judicial/Permanency Review:	
Summary of recommendations to the court:	

Comment [DA41]: Pre-fills from the YA Judicial Review Worksheet.

Comment [DA42]: Pre-fills from the YA Judicial Review Worksheet.

Comment [DA43]: Pre-fills from the YA Judicial Review Worksheet.

X. ATTACHMENTS TO COURT REPORT

Education	
Grades or Progress Reports	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached Reason:
Transitional Individual Education Plan (if applicable)	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached Reason:
Independent Living	
Caregiver Statement	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached Reason:
Transition Plan	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached Reason:
Optional Attachments (select and attach to Judicial Review)	
Documentation of conditions exempting participation	<input type="checkbox"/> Attached
Other:	<input type="checkbox"/> Attached
Other:	<input type="checkbox"/> Attached
Other:	<input type="checkbox"/> Attached

Comment [DA44]: Pre-fills from the YA JR Worksheet – Attachments tab.

SIGNATURE

Young Adult: Date Signed

Case Manager: Date Signed

Case Manager Supervisor: Date Signed

Legal Guardian of Young Adult: Date Signed

CLS Attorney: Date Signed

Other: Date Signed

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by U. S. mail/hand delivery/electronic delivery/facsimile to:

This day of , 20 .

CLS Attorney

Date: