I. Background Information

Case Name: __________________________ Focus Child: __________________________
# Case Mngrs. during Review Period: ________ Type of Case: __________________________
Date Case Opened: _______________ Date Case Closed: __________________________
Family Composition: ________________________________________________________

Reason(s) for Referral to Services:

Unresolved Concerns Currently or at the Time of Case Closure:

Rating Documented for Standard #70:

II. Strengths & Opportunities for Improvement (in the following areas: Assessment, Family Engagement, Service Planning & Provision, Promoting Case Progress and Supervision)

III. Other Issues/Trends:

IV. Will this case be selected for an In-Depth Interview?  ___ YES  ___ NO

V. Does an RFA need to be generated?  ___ YES  ___ NO
   If yes, type and reason: