

SCWI/ISA Progress Review/BERS-2 Questions for Progress Review Report

The ISA Progress Review is to be administered for each child determined ISA eligible who enters ISA services. The progress of a child and family shall be reviewed upon entry and exit from services and supports, as well as quarterly, while they are participating in the ISA, and the data shall be submitted to AMH, Oregon Health Authority utilizing the electronic format found at <https://apps.state.or.us/cf1/amh/>

Please contact cprs.help@state.or.us if you do not have access, need a password, and/or have not had training on how to use the system.

Child's Information

- ▶ Provider: CPMS Provider Number
- ▶ Case Number: CPMS Case Number
- ▶ Recipient ID: Child's Medicaid ID Number
- ▶ Last Name: Child's legal last name
- ▶ First Name: Child's legal first name
- ▶ Birth Name: (May or may not be different from child's legal name)
- ▶ Date of Birth: Child's birth date
- ▶ Gender: Child's sex
- ▶ Program: ISA, SCWI, or both (may not appear on new forms)

Residence

- ▶ Current Residence: Select one from list below
 - Biological/adoptive family member
 - Other relative or a friend (not foster care)
 - Long-term foster care placement
 - Temporary foster care placement
 - Therapeutic foster care
 - Residential treatment center
 - Other (include statement describing type of residence)
- ▶ Residence statement:

- ▶ Number of times child changed residence (for any reason) within the last 90 days:
- ▶ Number of unplanned/disruptive residence changes:
- ▶ Placement Disruption due to: Check all that apply.
 - No placement disruption – DOES NOT APPLY
 - Noncompliance in self-care
 - Refusal to engage in expected activities (does not include school refusal)
 - School refusal
 - Property destruction
 - Self-abusive behaviors
 - Sexual acting-out behaviors
 - Fecal smearing
 - Other *Please describe:*

Health Care Provider

- ▶ Child has a primary health care provider (check if “Yes”):
- ▶ Child is being prescribed psychotropic medication (check if “Yes”):
- ▶ Type of provider prescribing psychotropic medications (select from list):
 - Psychiatrist
 - Pediatrician
 - Psychiatric Mental Health Nurse Practitioner (PMHNP)
 - Other (not listed above)
 - Unknown
- ▶ Date of last medication check:

Caregiver Rating

There are 23 items in this section. Items 1 – 12 apply only to children aged 0 – 5; for children of school age, begin with item 13, School Performance.

In the past 30 days, when in settings with same-aged peers, how often has the child:

1. Demonstrated age-appropriate socialization skills?

- Never
 - Rarely or Seldom
 - Often or Usually
 - Consistently, Always or Almost Always
2. Met developmental milestones in the use of language skills?
- Never
 - Rarely or Seldom
 - Often or Usually
 - Consistently, Always or Almost Always
3. Met developmental milestones in the use of motor skills?
- Never
 - Rarely or Seldom
 - Often or Usually
 - Consistently, Always or Almost Always
4. Met developmental milestones in the use of cognitive skills?
- Never
 - Rarely or Seldom
 - Often or Usually
 - Consistently, Always or Almost Always
5. In the past 30 days, has the child been excluded from a setting with same-aged peers, outside of the home, due to behavioral challenges?
- No
 - Yes
 - Unknown
 - Not Applicable (child not in such a setting in past 30 days)

Rate child's ability to function well and at a developmentally appropriate level, in the past 30 days, with respect to:

6. Sleeping:
- Rarely or never able to function well
 - Sometimes able to function well

- Usually able to function well
 - Consistently able to function well
 - N/A, because regulation of functioning not expected at this age/stage in development
 - Unknown
7. Ability to self-soothe:
- Rarely or never able to function well
 - Sometimes able to function well
 - Usually able to function well
 - Consistently able to function well
 - N/A, because regulation of functioning not expected at this age/stage in development
 - Unknown
8. Ability to be soothed with adult support or assistance:
- Rarely or never able to function well
 - Sometimes able to function well
 - Usually able to function well
 - Consistently able to function well
 - Unknown

“Runaway-equivalent” behaviors in past 30 days (compared to typical behavior for a child of this age; do not rate developmentally normal or playful behavior)

9. Child withdraws and appears to be unreachable/numb/frozen
- Not at all
 - Rarely
 - Sometimes
 - Frequently
 - Not applicable
 - Unknown
10. Child acts out indiscriminately
- Not at all

- Rarely
 - Sometimes
 - Frequently
 - Not applicable
 - Unknown
- 11.** Child seeks adults indiscriminately
- Not at all
 - Rarely
 - Sometimes
 - Frequently
 - Not applicable
 - Unknown
- 12.** Child runs out of adult line of sight or leaves contained area intentionally
- Not at all
 - Rarely
 - Sometimes
 - Frequently
 - Not applicable
 - Unknown

Complete the remaining items for children of ALL ages.

- 13.** Indicate the frequency with which the following statement is true: “Over the past 20 scheduled school days, the child has been producing school work of acceptable quality for his or her ability level.”
- N/A (Child not in school)
 - Never
 - Seldom
 - Sometimes
 - Frequently
 - Very Frequently or Always
 - Rating deferred /Unknown
- 14.** Who of the following participated in the current or the most recent Child and Family Team (CFT) meeting? Check all that apply.

- One or more of the child's current primary caregiver(s)
- Child
- Natural supports, such as other family member(s) or friends(s)
- Child welfare representative /caseworker
- Mental health provider(s) for child
- Chemical dependency provider(s) for child
- Legal representative /Attorney /Guardian Ad Litem (do not include Juvenile Justice)
- Educator /School teacher/ School representative
- Juvenile Justice representative
- Other *Please describe:*

15. Child's risk of self-harm (includes reckless or intentional risk taking behavior that may endanger the child)

- No history of behavior that would place the child at risk for physical harm to self, or that has resulted in physical harm to self
- History of behavior (but NOT in the past 30 days) that has placed the child at risk for physical harm to self, or that has resulted in physical harm to self
- Within the past 30 days, child has engaged in behavior that has placed the child at risk for physical harm to self, or that has resulted in physical harm to self
- Child has engaged in behavior within the past 30 days that has placed child at immediate risk of death
- Unknown

16. Child's risk of harm to others

- No history of behaviors that pose danger to others
- History (but not in past 30 days) of homicidal ideation, physically harmful aggression, or fire setting that has put self or others in danger of harm
- Homicidal ideation, physically harmful aggression, or deliberate fire setting in past 30 days (but not in past 24 hours)
- In past 24 hours, homicidal ideation with plan, physically harmful aggression, deliberate fire setting, or command hallucinations involving harm of others

- Unknown
- 17.** Child's history of / risk for running away
- No history of running away
 - History of running away, but no instances of running away in the past 30 days
 - Ran away once or twice in the past 30 days (with no instance of child being gone overnight)
 - Ran away several times in the past 30 days (with no instance of child being gone overnight)
 - Ran away at least once in the past 30 days (with at least one instance of child being gone overnight)
 - Unknown
- 18.** Child's history of / risk for delinquency.
- No history of delinquency
 - History of delinquency, but not in the past 30 days
 - Recent acts of delinquency (in the past 30 days)
 - In the past 30 days, severe acts of delinquency that place others at risk of significant loss or injury and place child at risk of adult sanctions
 - Rating deferred / Unknown
- 19.** Evidence of substance abuse over past 30 days.
- No evidence of substance abuse over past 30 days, or no history of substance abuse
 - Suspicion of substance abuse
 - Clear evidence of substance abuse that is interfering with child's ability to function in at least one role or setting
 - Clear evidence of substance dependence and/or child requires detoxification
 - Rating deferred / Unknown
- 20.** The service coordination plan supports:
- ▶ Child's Culture (select from list) No; Yes; Unknown
 - ▶ Caregiver's Culture (select from list) No; Yes; Unknown

- ▶ Child's Language (select from list) No; Yes; Unknown
- ▶ Caregiver's Language (select from list) No; Yes; Unknown

21. Caregiver's rating of their social network over the past thirty (30) calendar days.

- Caregiver has NO family or social network that could help with raising the child
- Caregiver has SOME family or social network that MAY BE ABLE to help with raising the child
- Caregiver has SOME family or social network that ACTIVELY HELPS with raising the child
- Caregiver has SIGNIFICANT family or social network that ACTIVELY HELPS with raising the child
- Caregiver's social network unknown
- Not Applicable

22. Caregiver rating of available supports for problematic behavior.

- No support
- Limited (inadequate) support
- Adequate support
- Excellent support
- No rating / information not available

23. Summary estimate of child's progress since last review

- Not applicable (this is first review)
- Improved
- About the same
- Not doing as well

(NOTE: Do NOT check anything other than "not applicable" for new entries into the system)

