

SCREENING for CHILD WELL BEING

_____ Co. Work First Program Date _____

Child's Name: _____ DOB: _____ Gender: _____

Current Grade: _____ PDC#: _____

Parent/Caretaker Name(s): _____

(Please respond to letters A-D regarding the child named on this form. A separate form should be completed for each child.)

A. Social Support (Y/N)

- Attends daycare/school regularly _____
- Gets along well at school _____
- Current or past school suspensions _____
- Performing on grade level _____
- Receives resource help at school _____
- Participates in extracurricular school /community activities _____
- Has age appropriate friends / playmates _____
- Current or past involvement with the juvenile justice system _____
- To whom does the child turn for comfort when upset or hurt?

B. Environment (Y/N)

- Is home single family _____ with relatives/friends _____ a shelter _____
- Is home/community reasonably safe and free from hazards _____
- Are clothes proper for season/temperature _____
- Are toys and books available _____
- Does teen child have some private space _____

C. Emotional/Mental Health (Y/N)

- Has hyperactivity/attention deficit diagnosis _____
- Has conduct/behavioral challenges _____
- Receives mental health services _____
- Other _____

D. Physical Health (Y/N)

- Immunizations current _____
- Does child get sufficient sleep/rest _____
- Does child have a primary care medical provider _____
- Does get annual health checks _____
- Takes prescribed medications _____
- Receives routine dental care _____
- Receives routine vision care _____
- Speech impairment _____
- Hearing impairment _____
- Other _____

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2Gen 4 Work First / Economic and Family Services Section

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Screening Summary

Child/ Family Strengths (include supports and resources)

Challenges/Areas of Need (include supports and resources)

Agency Name

Referral Date

Reason

Outcome

1.

2.

3.

Case Worker

Date

Parent/Caretaker

Date

Instructions for the DSS-6902, Child Well Being Screening Tool

The screening may be used with minor children through the age of 17. For children under the age of three, any time a parent/caretaker expresses concern about how a child is developing, contact your local Children's Developmental Services Agency (CDSA) to make a referral. If the parent/caretaker or agency needs assistance with the referral process, please contact the early intervention program state office at 919-707-5520 or your local CDSA (<http://www.ncei.org>).

This screening should be offered to all families but is not a program requirement for a parent/caretaker complete the screening. The parent/caretaker may opt to complete the screening for a single child or for multiple children within the same household. Each child requires the completion of a separate screening tool.

The screening may be administered by the Work First case worker or the parent/caretaker may complete Sections A – D on their own. After Sections A- D are completed, the Work First case worker and the parent/caretaker will discuss both the child's strengths and identify any needs/challenges.

The case worker will document the discussion in the identified Screening Summary areas on the back of the form. The parent/caretaker and the worker should discuss the agencies and/or community resources available in the respective community and make the appropriate referrals. The case worker and the parent/caretaker will decide on the frequency of follow up meetings to determine the effectiveness of the referral(s) and to monitor the referral outcomes. It is suggested that these meeting occur on no less than quarterly.

When introducing the screening tool, please read or paraphrase the following statement:

Physical health and mental health can affect a family's ability to thrive both emotionally and financially. When children receive the necessary supports to be successful, it not only improves the child's outcomes but also the outcomes for the family. Parents/caretakers that feel the emotional, physical, intellectual and social needs of their children are being met many times experience less family strain on relationships and are more successful at work.

The Child Well Being Screening is an informal tool designed to assist you in identifying your child's strengths but also the areas that may impact your child's well-being and development. After completing the screening, we talk about some resources and services that may help with any unaddressed needs.

Potential external agencies/services for referral. (This list is not all inclusive; services in each county and region may differ.)

Vocational Rehabilitation
Workforce Innovations and Opportunity (WIOA)
Goodwill Industries (training, clothing, case management)
Social Security Administration
Community College /Local GED & AHS Programs/ Literacy Services
Community Action Agencies (emergency assistance, case management, mentoring etc.)
Adolescent Parenting Program
CDSA (early childhood intervention services)
Child Care Services (child care resource and referral)
Smart Start Initiatives
Head Start Programs (family enrichment, early childhood education)
Salvation Army (clothing, mentoring, emergency assistance)
Public Health Department and Clinic (health screenings, nutrition and health education.)
HUD/Local Housing Office
Area Mental Health Services (mental health counseling, substance use intervention)
Public School Social Workers and Counselors (educational services, developmental and behavioral services)
United Way (provides information of community agencies and resources specific to each county)