COMMUNITY RESPONSE (CR) CASE CLOSURE INFORMATION

Date Completing:	Family#:	_
Date Family Entered CR:	Agency:	
CR Team Member Completing:		
Date of Case Closure:		
OUTCOME 1: IMPROVED PROTECTIVE FACTO	DRS	
Pre and Post Protective Factors Survey Complete If not, why?	ed: Yes No	
IMMEDIATE NEED AND GOALS		
What was the family's immediate need?		
Was it addressed? Yes No	How?	

Family Well-Being: Goal Attainment Scale. This scale should be completed by the family advocate when the family is discharged from Community Response. Please check any of the Family Well-Being Areas that were identified by the family as goals during their participation in the project. For those areas checked, review at discharge, or when the family leaves the program, the level of completion of each of the goals.

Type of goal: short term, intermediate or long term	Goal Area	Rating (Check the box that best reflects the completion of the goal.)		
		Not Complete	Partially Completed	Completed
	Parenting			
	Housing			
	Community Life			
	Food & Nutrition			
	Health & Health Care			
	Education & Jobs			
	Money			
	Transportation			
	Children's Education			
	Informal Supports			
	Children's Behavior			
	Childcare			

Comments regarding goals:

OUTCOME 3: INTRODUCED TO AT LEAST 3 INFORMAL SUPPORTS	
At Intake: # of informal supports At Discharge: # of informal supports family was introduced to	
OUTCOME 4: DECREASED REFERRALS TO CPS	
Are you aware of a report made to CPS regarding this family during their time in the program? Ye	s No
If yes, date: Substantiated? Yes 🗌 No 🗍 UNK	
Reason(s):	
CASE CLOSE REASON	
All service goal(s) attained Partial service goal(s) attained Time limit reached (must also select one of the above) Family decided to close case-at least partial goals met Family moved out of area-at least partial goals met Family no longer engaged-no goals met Open CPS case Other:	
OTHER	
Is this the family's first time in CR?: Yes No	
Other comments:	