

IN THE DISTRICT OF THE FIRST JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF *****
MAGISTRATE DIVISION

In the Matter of:) Case no. *CV- XXXX-XXX*
Name of the child)
DOB 00/00/00)
A Child under 18 years of age) Adjudicatory Report of the Guardian *ad Litem*

Insert photo of child(ren)

Use title and last name throughout report for adult (Mr. Smith). Use child’s first name (Ezra). For families that have similar names, such as multiple Mr. Smiths (Mr. Smith as grandfather and Mr. Smith as father), after the first use of a name of individuals other than the parents, provide a clarifying nickname that will then be used throughout, such as Mr. Smith (“Paternal Grandfather”). Do not use “Mother” or “Father”.

Referral:

Date and reason for removal: Insert the reasons given by the safety assessor in IDHW affidavit OR given by the police officer in the police report. (Correcting grammar and punctuation are allowed.) For change of disposition (i.e. child was in protective supervision and had to be re-sheltered include the original and new shelter reasons (with dates). Place the new shelter reason first then the prior shelter reason.

Note if a particular child that was on the initial referral has been removed and why (i.e. moved to live with safe parent) from the case or if a particular child has been added and the reason for being added (i.e. birth of child, newborn shelter where siblings are later added).

This reason will be duplicated in future reports.

Guardian *ad Litem* Recommendations:

- Legal custody with IDHW
- Legal custody with IDHW with extended home visits
- Protective supervision of IDHW
- Dismiss the case

Additional Recommendations:

This section may include recommendations for visitation (i.e. with one parent and not the other, supervised or unsupervised). If the GAL recommends a protective order, specifics for the protective order must be included. Factual information needs to be included in the report below to have the recommendation considered. Without a factual basis to support the recommendations, they are only an opinion, and the court cannot base decisions about the future of a child on the opinion of the GAL.

- Protective order on behalf of child(ren)
Comments:
- Supervised visits
Comments:
- Unsupervised visits
Comments:
- Other

Other comments:

Expressed Wishes for Each Child (not required):

Program Guidance: This information is **not required** at the adjudicatory hearing. However, if the child has expressed a wish or wishes you may include this information here. The child may also choose to communicate with the court through a letter or through the Guardian *ad Litem*.

- Child is not capable of expressing wishes.
- Child is capable of expressing wishes.

Question asked: Is there anything you would like to share with the Judge regarding your living situation?"

Answer provided:

Comments:

Guardian *ad Litem* Concerns:

Bullet point concerns. Concerns need to be tied to the recommendations and the body of the report must include factual information that supports the concerns.

Child Well-being:

Child Contacted:

Start with date, type of visit (Face to face, phone call, televideo) IN BOLD, then name(s) of child(ren), then location of visit. Then describe factual observations while visiting with the child. Children visited as same time can be reported together. Report each visit separately. In person FACE TO FACE visits are required a minimum of monthly. Televideo and phone visits can serve as FACE TO FACE only with prior Supervisor approval. If you have met your child(ren) Face to Face, then these can be additional visits without approval.

(i.e.) **7/1/2020. Televideo.** Ezra. Foster home. OR

(i.e.) **7/6/2020. Face to Face.** Ezra, George, Hanna. City Park.

Ezra appeared....

George seemed...

Hanna spent most her time....

(i.e.) **7/15/2020. Phone.** Hanna. Daycare. Hanna was playing....

Visitation:

Narrative of factual observations of child visits with parents/siblings. Include those in attendance (note who is and who is not appropriate to bring), how often child(ren) is/are visiting their family. Is visit supervised or unsupervised.

Observations:

-Did parents miss visits?

-Were parents on-time, appropriate?

-Did parents say inappropriate things to kids:

-promises, leading questions, asking where foster home is, burdening child with cps case matters, whispering

-swearing, anger, sexual comments/actions

-Were parents sober/not sober?

-Did parents bring toys or snacks?

-Did parents engage with child or on phone during the visit?

-How did the child(ren) respond to the parents?

-cry, anger, joy, hugs/no hugs, dysregulated, anxious, ignore, hit, won't play

-How did child(ren) respond to parents at drop off and pick-up?

-unemotional/emotional, cry, complacent, angry, happy to see foster parents,

Education for Each Child:

-Where is the child attending school.

-Is the child attending the same school as before placement.

-Teachers comments (i.e. child's behavior in school, with peers, attitude towards learning...)
-Grades and attendance.
-Child's attitude towards school.
-IEP or 504 in place?

Medical for Each Child:

Enter each child's full name and the Medical/Dental/Vision/Mental health diagnosis, including psychotropic medication and treatment.

Current Services for Each Child:

Services child is *currently* receiving such as...
-Infant Toddler, Head Start, counseling, therapies (OT, PT, ST), Independent Living, CBRS

Current Placement for Each Child:

Placement type options include non-relative foster home, relative foster home, fictive kin foster home, congregate care, non-relative pre-adoptive home, relative pre-adoptive home, detention, department of juvenile corrections, hospital.

Comments: Are siblings placed together? Do they like their placement? What are the challenges placing this child?

If children placed separately, cut and paste section for additional info.

- Child(ren) was originally removed on_____.
- Child(ren) has/have been placed _____times since initial removal.
- *Current* placement type:

Comments:

Any civil or criminal proceedings involving child such as probation, Juvenile Detention, custody disputes/agreement/order between parents, etc. If there are none, insert N/A.

Parents' Situation:

1. Mother:

2. Father:

Information is about all fathers and all mothers involved, even if the father is not a legal father. If there are multiple parents, relate each parent with the specified child.

Provide relevant information that supports your recommendation to either place the child under protective supervision, vest legal custody in or legal custody with extended home visits.

Identify the status of paternity - legal, bio, presumptive, putative.

Identify the status of the parents regarding housing, employment, transportation, legal status, substance use....

Provide a summary of *relevant* criminal history (domestic violence, incarceration, prior child injury referrals/convictions). Do not include traffic citations, irrelevant misdemeanors, or very old cases.

Prior child protection history for parents and family.

Persons Contacted (collateral contacts):

Include all persons contacted to gather information for the adjudicatory report. Include the relationship of the person to the child. Contacts may include (1) social worker (2) foster parents (3) child(ren) (4) parents (5) extended family (6) day-care providers/teachers (7) substance abuse/mental health counselors (8) probation officers (9) PSR providers. Example includes:

<i>Jane</i>	<i>Foster Parent</i>
<i>Jason Bourne</i>	<i>IDHW Social Worker</i>
<i>Robert Hanson</i>	<i>Susan's father</i>
<i>Joe Blow</i>	<i>Neighbor</i>

If there is substantive or relevant information around the contact *that is not already included in the report*, include in additional information section for each person starting with their name, such as

Joe Blow noted told me he has been seeing Mr. Smith's car parked outside the home.

Additional information:

Documents Reviewed:

Include all relevant documents reviewed such as: case file to date, police report(s), IDHW reports and cps referral history, mental health records, probation, school and medical records.

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct to the best of my knowledge.

Respectfully submitted this ___ day of _____, 20__

Signature of GAL
Guardian *ad Litem*