**GUARDIAN *ad Litem* REPORT TO COURT**

**CASA KANE COUNTY**

**CASE NUMBER(S)**: **TEMPORARY CUSTODY DATE**:

**ADJUDICATION DATE**:

**DISPOSITION DATE**:

**LAST PRH DATE:** *delete if not applicable*

**DATE OF GOAL CHANGE:** *delete if not applicable*

**HEARING DATE**:

**PURPOSE OF HEARING**: Termination of Parental Rights/Best Interest

**IN THE MATTER OF:** *Oldest child listed first*

DOB AGE

First Name Last Name

First Name Last Name

**INTERVIEWED:** *Listed in alphabetical order by last name*

First Name Last Name Identification *relationship to children*

**REPORTS and MATERIALS REVIEWED:**

*This should be the date the report was created and the name.*

|  |
| --- |
| **DATE OF REPORT / TITLE** |
| 08/29/2017 – Client Service Plan |
| 10/06/2017 – Individual Education Plan |

**DATES OF ALL CHILD VISITS:**

*This portion of the report will be completed by the Advocate Supervisor*

First Name Last Name Dates of all visits *- indicate in person or virtual*

First Name Last Name Dates of all visits - *indicate in person or virtual*

*If a child visit is not completed, good cause must be provided such as minor refuses visit, minor on run, minor is ill, etc. Identify if visits were in person or virtual.*

**ICWA:** This case does or does not have Indian Child Welfare Act involvement.

*If there is ICWA involvement, detail who identified Native American heritage and when that information was provided, and all known follow-up completed by DCFS/SAO.*

**CASE HISTORY:**

*A brief factual history of what brought the case into care and whether or not any parent has signed general surrenders or specific consents.*

**FINDINGS R ELATED TO THE CHILD:**

*Information should be included for each heading listed below.*

**First Name Last Name** (age)

Child’s Physical Safety and Welfare

* Description of placement / home and what space has been dedicated to the child including sleeping arrangements
* Family composition (who lives in the home).
* Needs are being met like food, clothing etc.
* Any Safety/Risk Concerns?

Development of Child’s Identity

* How long has the child been in the pre-adoptive home?
* Observations of child’s growth and development since being placed in the pre-adoptive home
* Is the Foster parent willing to continue to permit the minor to visit with his biological siblings and or extended biological family?

Child’s Familial, Culture and Religious Background

* How are foster parents fostering the child’s cultural background?
* Describe any sibling or relative contact and relationship
* Native language of child and whether is it being used or fostered
* Child’s religious background
* Racial or ethnic traditions/heritage

Child’s Sense of Attachment

* Describe where the child actually feels love, attachment, and a sense of being valued
* Describe where does the child have a sense of security (i.e runs to FM when scared, etc)
* Are the foster parents willing to provide permanency?
* Describe child’s interaction with household members
* Describe child’s interaction and bond with foster parents
* Have the interactions you described been consistent in all of your visits?
* What does the child call the foster parents?
* Child’s interaction and bond with foster parent’s extended family

Child’s Wishes

Child’s Community Ties:

* School, daycare
* Friends
* Activities
* Religious activities and involvement

Child’s Need for Permanence

* How long has the child been in care?
* Child’s current age
* Observations regarding child and parent relationship including frequency of visits and contact
* Is the continued relationship with parent figures, siblings or relatives important for the child’s emotional and mental wellbeing?
* Therapeutic Recommendations on Permanency

The Uniqueness of Family & Child

* Does the child have any special needs or services?
* Are foster parents providing or committed to providing those needs?
* If the child has any needs, describe how their needs are being met now.

**RECOMMENDATIONS:**

1. The Court find that it is in [Child’s First Name & Last Name] best interest for the parental rights of [Parent(s) First Name & Last Name]be terminated and that the minor be free for adoption.
2. The Court proceed to Permanency Review Hearing instanter and should consider the permanency goal of adoption for the minor(s).
3. Court finds at the Permanency Review Hearing that minor(s) remain a ward of the court and make the following additional findings:
4. Custody and guardianship remain with DCFS.
5. Client Service Plan and services are appropriate.
6. Agency has (has not) made reasonable efforts.
7. Other recommendations to be focused on.

Respectfully submitted by CASA/GAL: First Name Last Initial Date: