

Northstar Care for Children Uniform Assessment

December 1, 2015



Minnesota Assessment of Parenting for Children and Youth Child Domains (Ages 0-12)

Assessment Information

CHILD'S NAME _____ Date of BIRTH _____

CAREGIVER'S NAME _____ Date of PLACEMENT _____

ASSESSMENT Date _____ EFFECTIVE Date _____

Date Assessor REQUESTED APPROVAL _____ APPROVAL Date _____

Contact Information

LEGALLY RESPONSIBLE AGENCY _____

FINANCIALLY RESPONSIBLE AGENCY _____

Assessor Information (person completing the MAPCY)

Name of Assessor _____

Assessor phone (e.g. 651-000-0000) _____

Assessor e-mail _____

Assessor consulted with the following to complete the assessment: _____

CHILD DOMAINS – MAPCY



Minnesota Assessment of Parenting for Children and Youth

CHILD DOMAIN A: Placement Experience

Scope: This domain considers the actions and efforts of a caregiver to provide a stable family for a child, providing for a child's basic needs, making a child part of the family, and improving a caregivers' parenting skills. This domain considers the number of foster homes, residential facilities, shelters, group homes, or correctional facilities a child has been placed in while receiving mental health, juvenile justice, developmental disabilities or child welfare services. Placement does not include paid services provided to a child, nor does it consider camp, informal family arrangements or respite as a placement.

Focus: Because a child came to a caregiver's family, through the child welfare system, they have been removed from their family and need their basic needs met as well as a sense of stability and home.

Parenting: For all children, entering foster care disrupts daily life, home and family relationships. Children who have experienced placement instability or re-entry need caregivers who commit to the additional support, reassurance and understanding of the traumatic effect multiple moves have on a child's development, ability to trust, and future family relationships. In this domain, parenting is about providing a stable home with long-term family relationships.

Special points: There are no special points available in this domain.

A. Child's Needs

CHECK ONE

- a. During their lifetime, a child has been placed in two or fewer foster family or facility placements.
- b. During their lifetime, a child experienced one or more:
 - Has been placed in three to five foster family or facility placements, or
 - Has re-entered foster care after reunification or trial home visit.
- c. During their lifetime, a child experienced one or more:
 - Has been placed in six to eight foster family or facility placements,
 - Has experienced a disrupted pre-adoptive placement or pre-kinship placement, or
 - Has re-entered foster care after adoption or court ordered relative custody arrangement.
- d. During their lifetime, a child experienced one or more:
 - Has been placed in nine or more foster family or facility placements, or
 - Has experienced a legally dissolved adoption or court ordered relative custody arrangement.

Explain if you selected a child needs rating of d:

A. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Supports a child's needs in their home, consistent with the care parents provide, including: food, clothing, shelter, school supplies and personal incidentals. (Basic)
- 2. Advocate or seek appropriate services and supports for child. (Basic)
- 3. Demonstrates a capacity to make adjustments in the home and parenting style to address child's needs and interests, and to include them in family chores and recreation. (Basic)
- 4. Engages with child to make sense of their past by contacting and supporting relationships with people from the child's past, and other activities that would help them understand important events in their life (For foster child, this requires approval by the county or tribal agency responsible for placement). (Significant)
- 5. Seek and attend meetings or training to improve the quality of parent care, including training specific to a child's individual needs and/or regularly attends support groups focused on caregiver's needs. (Significant)
- 6. Supports family stability by seeking and participating in community or cultural services. (Significant)
- 7. Accepts child returning to their home after trial home visit or reunification with parent or relative that was unsuccessful, or after running away from the caregiver's home for more than 72 hours. Child is returning to the same caregiver that previously cared for them. (Significant)
- 8. Accepts child into their home:
 - After more than 30 days of hospitalization. Caregiver engaged with child and visited during the hospitalization to develop a relationship and learn about the child's needs, or
 - After trial home visit or reunification with parent or relative that included a child experiencing physical abuse, sexual abuse or neglect. Child is returning to the same caregiver that previously cared for them. (Extensive)
- 9. Accepts child returning to their home after a pre-adoptive or pre-kinship placement disrupted; a child is returning to the same caregiver that previously cared for them prior to the pre-adoptive or pre-kinship placement. (Extensive)
- 10. Accepts child returning to their home after a short stay (72 hours to 59 days) in residential treatment, or other residential or correctional program or hospitalization. Caregiver remained engaged with child during treatment and the child is returning to the same caregiver that previously cared for them. (Extensive)
- 11. Accepts child returning to their home after a legally dissolved adoption or legally dissolved court ordered relative custody arrangement. Child is returning to the same caregiver that previously cared for them prior to adoption. (Exceptional)
- 12. Accepts child returning to their home after 60 days or more in residential treatment, or other residential or correctional program or hospitalization. Caregiver remained engaged with child during treatment and child is returning to the same caregiver that previously cared for them. (Extensive & Exceptional)
- 13. None of the above indicators apply to caregiver's parental care and attention. (None)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN B: Dynamics in the Caregiver's Home

Scope: This domain measures the parental attention to meet the needs of all children living in the caregiver's home. This domain supports positive interactions in a caregiver's family, but does not include relationships with siblings who are not living together in caregiver's home (Domain E), child care (Domain H).

Focus: Because a child came to a caregiver's family through the child welfare system, parental care must recognize the additional complexity and safety concerns that caring for a sibling group or an unrelated group of children/youth brings to the caregiver's home.

Parenting: All children need a parent-child relationship that includes individual parental attention, positive family interactions, and healthy relationships with their siblings or other children/youth in the home. In this domain, parenting is about nurturing a child's connection to their caregiver(s), and to the people living in a caregiver's home. Parents physically and emotionally care for children and youth in their home, providing individual attention to each one, and ensuring that interactions among the children and youth in the home are safe and healthy.

Special points: There are no special points available in this domain.

B. Child's Needs

CHECK ONE

- a. Child is the only child living in caregiver's home.
- b. Child is placed with one sibling, and/or a caregiver is parenting other children/youth in the home.
- c. Child is placed with two siblings and a caregiver is parenting other children/youth in the home.
- d. Child is placed with three or more siblings and a caregiver is parenting other children/youth in the home.

Explain if you selected a child needs rating of d:

B. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Supports children to develop healthy sibling relationships in the home. Parenting helps children resolve everyday disputes and promotes a sense of belonging. Caregivers pay attention to relationships and interactions among family members in the home. (Basic)
- 2. Is able to provide the parental attention in the home to meet a child's individual needs. (Basic)
- 3. Considers difficult or intense interactions among children in the home and adjusts parental attention to support healthy interactions. (Significant)
- 4. Identify interactions in the home that include physical conflicts among children living in the home and makes adjustments to parental attention in order to safely maintain and teach healthy family interactions. (Extensive)

- 5. Identify dangerous interactions among children in the home that are a safety risk. A mental health or social service professional has identified the safety risk and developed a written safety plan caregivers follow to provide daily routine with intense parental attention to ensure safe sibling interactions among children in the home and when they are in the community. (Exceptional)
- 6. None of the above indicators apply to caregiver's parental care and attention. (None)

Child receives services that provide the caregiver with relief from parenting duties while family/friends or other professional services care for a child's needs. These parental relief services include respite, personal care attendant (PCA) services, in-home nursing, waived service provider or other designated service provider.

Caregiver:

- Arranges and engages with additional adults or service providers for a child to receive these services, or
- Provides services as a designated waiver service provider or other professional for a period of time in the home.

Child receives services that provide relief from parental care duties for:

CHECK ONE

- 11. Seven hours or less a week, and up to one respite weekend a month, or no relief is available due to any reason including the following: child is not be eligible for services; child is eligible for services but a caregiver cannot access service providers; or family/friends do not provide substitute care. (Basic)
- 12. Eight or more hours a week, up to and including 14 hours a week, in addition to one respite weekend a month. (Significant)
- 13. Fifteen or more hours a week, up to and including 28 hours a week, in addition to one respite weekend a month. (Extensive)
- 14. Twenty-nine hours or more a week, in addition to one respite weekend a month. (Exceptional)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN C: Supervision, Guidance and Structure

Scope: This domain measures the supervision, guidance and structure provided by a caregiver. This includes supervision provided in a caregiver’s home or in the community for a child. This domain does not include adapting parenting to meet the needs of siblings in the home (Domain B), supervising family visits in the caregiver’s home (Domain E), or adapting to a child’s culture (Domain F).

Focus: Because a child came to a caregiver’s family through the child welfare system, it is vital that a caregiver’s guidance promotes communication and skill-building while teaching and reinforcing appropriate behavior. This domain will not provide an exclusive list of all children’s needs or behaviors.

Parenting: All children need to learn how to interact with others, learn cultural norms, and learn how to behave appropriately, including developing self-control and problem-solving skills. Children need opportunities to build skills in the community and at home with age-appropriate independence. In this domain, parenting is about providing structure and guidance using the parenting practices and beliefs of a caregiver’s culture while taking into consideration a child’s culture to support the development of a child’s skills, and ensure the safety of a child in the community, with peers and at home.

Special points: Special points in this domain are based on the interaction of the level of parenting indicated in this domain with the level of child’s needs as determined in Domain D: Mental Health, Physical Health & Development. Higher needs in that domain will make supervision, guidance, and structure more complicated and therefore get extra points.

C. Child’s Needs

CHECK ONE

- a. Child usually follows the rules and expectations, accepts guidance and adjusts to new situations.
- b. Child shows occasional challenging or difficult behaviors, but age appropriate at home and in the community.
- c. Child’s daily behaviors or conditions restrict (prevents) them from participating in age-appropriate activities in the home or community.
- d. Child’s daily behaviors or conditions severely limits their functioning and affects their safety and other’s safety.

Explain if you selected a child needs rating of d:

C. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Provides developmentally appropriate guidance, supervision and discipline and sets limits to keep child safe and helps them learn to behave appropriately at home, with peers and in the community. This includes developing and maintaining a daily routine for infants and toddlers and child-proofing the home based on a child’s age and developmental needs. (Basic)

- 2. Provides guidance and supervision to the structure of child's activities, considering disruptive behaviors or emotional reactions that are not typical for child's age, and adapts their parenting and activities to safely manage behavior in their home, with peers and in the community. (Significant)
- 3. Provides extra attention for child's difficult interactions with peers or pets. Caregiver can define how child's interactions with peers are difficult and/or are unsafe with pets, and how their parenting supports child to have safe and healthy peer relationships with others in the community, and safe interactions with pets. (Significant)
- 4. Recently completed specialized training on specific parenting strategies and structure in the home used to manage child's behaviors. (Significant)
- 5. For a child age 5 or under, utilizes alarms on doors/windows, visual monitors or other safety devices required to ensure the child's safety. This does not include child proofing a home for an infant or young child. (Significant)
- 6. For a child age 6 and over, utilizes alarms on doors/windows, visual monitors or other safety devices required to ensure the safety of child and others in the home and community. (Extensive)
- 7. Meets three or more times a month with a culturally appropriate behavioral or mental health professional or corrections officer to adapt their parenting to implement a specific plan of supervision, guidance and structure to reduce or safely manage child's disruptive behavior(s) in the home and community. (Extensive)
- 8. Provides individual care and attention for a child who has either:
 - Frequent episodes of intense distress not typical for their age, or
 - A serious medical condition, illness, disability or complex medical needs. (Extensive)
- 9. Provides constant adult supervision to a child age 8 or older. This supervision ensures a child's safety in the home, with peers and in the community. This child is never left alone, with peers or in the community without a responsible adult present. (Extensive)
- 10. Provides one-to-one supervision of child or is responsible to ensure another adult provides one-to-one supervision in the home and community. Child cannot be left alone in any room in caregiver's home without a responsible adult present due to: emotional functioning that is assessed to be a danger to self or others, or due to a medical condition requiring continuous supervision of a specific life threatening condition or behavior. (Exceptional)
- 11. None of the above indicators apply to caregiver's parental care and attention. (None)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN D: Mental Health, Physical Health and Development

Scope: This domain measures a child's physical, cognitive, emotional and social development, including physical health needs, and measures parenting not typical for a child's age. This domain includes caregiver efforts to ensure that a child receives medical care. This domain is not about parental activities typical for a child's age. It does not include medical or other paid services provided by caregiver(s) as a professional, arranging service in the home such as personal care attendant services (PCA) (Domain B), transportation for medical services (Medical Assistance), educational programs (Domain G), or child care (Domain H).

Focus: Many children receiving child welfare services have a mental health diagnosis, identified developmental delays, and physical health needs which require the efforts of caregivers to ensure they receive medical services. This domain considers the additional parental care needed to support and improve a child's current functioning in the home and community, while promoting a child's physical health and development.

Parenting: All children need a safe, nurturing home, where they can grow, meet developmental milestones, and develop family relationships with caregiver(s) they can count on to provide for their needs. All children need medical check-ups, immunizations, dental care, vision care, as well as care when they are sick, injured or have a chronic illness.

Parents demonstrate and promote healthy emotional development, build trust, teach coping skills, support children to develop healthy relationships, and request professional help when children show signs of emotional/behavioral needs beyond parents' care. All caregivers provide medication (over-the-counter or prescription), and maintain a child's health and development records. Caregivers provide a child with activities and toys needed to learn skills and meet developmental milestones. Caregivers use their culture and community as the context for their parenting and household routine.

Special points: Special points can be based on the quantity of indicators that support the levels of parenting or they can represent demanding levels of parenting accomplished with less support and parenting relief as indicated in Domain B: Dynamics in the Caregiver's Home indicators 11-14.

D1. Child's Emotional/Behavioral Needs

CHECK ONE

- a. Displays strong coping skills and positive behavior management in dealing with crises, trauma, disappointment, and daily challenges. Is able to develop and maintain trusting relationships.
- b. Displays age-appropriate coping responses but has emotional reactions typical for their age and/or related to a situation. May demonstrate some anxiety, grief or isolation, but maintains situational appropriate emotional and behavioral control.
- c. Displays a pattern of one or all of the following:
 - Difficulties in coping with situational stress, crisis or problems that frequently impair their functioning in home or community.
 - Displays behaviors or mental health symptoms that are atypical for their age and not believed to be due to medical problems (These include, but are not limited to, eating/feeding or sleeping problems, running away, inappropriate sexual behavior, self-injury, hostile behaviors [e.g. biting, fighting], mood disorders, sustained attachment issues, depression, somatic complaints, apathy or encopresis or enuresis for children over age 6)
 - Displays daily behaviors for an infant or toddler that impair the responsive relationship between caregiver and child (dysregulation or lethargic children).
- d. Displays an established history of severe impairment in one or more areas of functioning due to chronic/severe mental health symptoms or behaviors that are a risk to self or others, such as fire-setting, suicidal (life-threatening) behaviors, sexually dangerous or violent behaviors towards people and/or animals.

D2. Child's Physical Health Needs

CHECK ONE

- a. Demonstrates general good health and has no known health care needs. Receives medical care as needed for injuries and preventive medical/dental/vision care, including immunizations.
- b. Has diagnosed health problems or disability that can be addressed with minimal interventions that typically require no formal training, or a health problem that is stabilized with treatment.
- c. Has a chronic condition, illness and/or physical disability that limits some activities. A condition requires regular professional medical services, professional and routine interventions that may be provided by caregiver after minimal instruction.
- d. Has a serious health condition, illness and/or disability that severely limits their daily functioning. The condition requires professional monitoring and extensive medical services, and care is provided by a professional and/or caregiver who has received substantial instruction.

D3. Child's Developmental Needs

CHECK ONE

- a. Motor, language, cognitive and social/emotional skills that are above what is considered typical for their chronological age.
- b. Motor, language, cognitive and social/emotional skills that are consistent with chronological age-level expectations.
- c. Motor, language, cognitive and social/emotional skills are delayed for most chronological age-level expectations. Child has minor developmental delay or autistic behaviors. This includes: Gross or fine motor, language, social and cognitive skills and minor autistic-like behaviors.
- d. Motor, language, cognitive and social/emotional skills are two or more age levels behind chronological age-level expectations. This includes: Gross or fine motor, language, cognitive and social/emotional skills, severe autistic behaviors that are indicative of a severe learning disability. These major developmental delays impact a child's ability to perform all, or nearly all, daily living tasks in the home consistent with their age.

Explain if you selected a child needs rating of d:

D. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Provides a loving, nurturing home, and respects child's culture and experiences, encourages family communication in the home, and provides guidance to help child develop healthy peer friendships. (Basic)
- 2. Is aware of child's emotions, takes the time to help talk about their feelings, while respecting culture and experiences. (Basic)

- 3. Coordinates and participates in medical appointments for routine care, including dental and vision appointments for child. When sick, caregiver provides care and needed medication, and shares developmentally appropriate health information with child. (Basic)
- 4. Maintains a written record of child's medical history and ensures they have has medical coverage. (Basic)
- 5. Has toys, books and activities available in the home to promote child's development. (Basic)
- 6. Feeds, diapers, guides toilet training, bathes and provides mobility assistance according to the individual needs of a child age 4 or younger. (Basic)
- 7. Pays attention to child's development, tracks progress and takes action to support the child to reach age-appropriate milestones. (Significant)
- 8. Applies various parenting strategies to ensure daily activities in the home and community to support child through an emotional reaction not typical for their age. Can apply these strategies to comfort child, soothe a baby or toddler, and stabilize the situation. (Significant)
- 9. Monitors and supervises child's on-going medication for medical or mental health needs. This includes monitoring behavioral and physical effects of medication, ensuring the child receives the professional oversight necessary for the medication. (Significant)
- 10. Provides or joins child with in in-home exercises, treatments or activities directed and designed by a licensed medical or behavioral professional, to be done daily or several times a week to improve child's physical and/or developmental delays. (Significant)
- 11. Is required to complete training from a medical professional to provide specific treatments and monitor medical equipment in their home for child's care. (Extensive)
- 12. Supports child's mental health needs by participating in on-going family therapy, or meeting with a culturally appropriate mental health professional to improve caregiver's family communication. Caregiver puts into action specific parental strategies in the home, which are directed by a culturally appropriate mental health professional. (Extensive)
- 13. Puts into action in the home a specific continuing care plan for child's medical care and/or developmental needs designed by a physician or other qualified medical, mental health, or behavioral professional. The plan includes monitoring specific health concerns or developmental lags, monitoring and supervision of medication and reporting progress to a health professional. This may include care for child being treated by a health professional for encopresis or enuresis. (Extensive)
- 14. Takes child to medical and/or therapy appointments outside the home several times a month, possibly doing some or all of the scheduling. Requires more than 12 hours of caregiver's time each month to take child to and attend an appointment. (Extensive)
- 15. Actively participates with in-home professional services several times a month. Caregiver is present during the service and engages with the professional and child, requires more than 16 hours of caregiver's time each month. (Extensive)
- 16. Provides substantial daily basic care assistance not typical for a child age 5 or older, such as feeding, diapering, bathing and mobility assistance. (Extensive)
- 17. Transforms parenting to safely manage child's complex behaviors or conditions that are a safety risk to self or others. This requires caregiver to have knowledge about child's medical or mental health needs, adjusts their parenting to meet individual health needs, and utilize community medical and mental health services to safely care for child in the home. (Exceptional)
- 18. Provide all basic care that is not typical for a child age 5 or older, such as feeding, diapering, bathing and mobility assistance. (Exceptional)
- 19. None of the above indicators apply to caregiver's parental care and attention. (None)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN E: Preserving Connections

Scope: This domain measures child's contact and connections with their birth parents, legal parents, guardians, siblings, relatives and kin that they do not live with. This domain is not about the relationships with others in the caregiver's home (Domain B). In this domain, contact is any type of communication, but visitation is face to face.

Focus: Because a child came to the caregiver's family through the child welfare system, they have family that is distinct from the caregiver. It is in their best interest to preserve these relationships, unless doing so would be detrimental.

Parenting: All children benefit from preserved connections with relatives and others who do not live in the same home. In this domain, parenting is about nurturing a child's connection with parents, siblings who do not live in the caregiver's home, relatives and kin. Maintaining family connections has life-long significance for a child; it preserves family and medical history, identity, and cultural information.

Special points: Special points in this domain and Domain F: Developing Identity are based on the quantity of indicators that support the levels of parenting in both domains.

E. Child's Needs

CHECK ONE

- a. Has supportive relationships, positive interactions with parents, siblings, relatives or kin.
- b. Has positive interactions with parents, siblings, relatives or kin, despite some lapses of contact with family; or the child has no contact with parents, siblings, relatives or kin.
- c. Visits parent(s), siblings, relatives or kin, but these visits are difficult for them. Child's experiences have affected their interactions with parents, siblings, relatives or kin.
- d. Visits parents, siblings, relatives or kin, but these visits are traumatic for them. These experiences have severely impeded their sense of safety and security.

Explain if you selected a child needs rating of d:

E. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Supports family and/or sibling visits or contacts, helps child prepare for visits, and helps them with any reactions. (Basic)
- 2. Shares information about child with parents, siblings or other relatives to maintain parental responsibilities and to preserve connections. (Basic)
- 3. Respects and values child's connection to parents or relatives when visits or contacts are infrequent, unpredictable, or do not occur. Caregiver shares information with child about their family to preserve connections and family history. (Basic)
- 4. Helps child with their reactions to visits or canceled visits that impact their temperament for more than a 24-hour period. (Significant)

- 5. Notifies the child's parents or other relatives of medical appointments, and invites them to school or community activities. (Significant)
- 6. Welcomes child's parent(s), siblings, or other relatives into their home to preserve or strengthen their attachment and involve them in child's care and activities. (Significant)
- 7. Formally mentors or participates in therapy with child's parent(s), prospective adoptive parents or relative custodians, having contact with them several times a week. (Extensive)
- 8. Is responsible to supervise regular face-to-face visits with child's birth parent or other adult relatives, per court order, case plan or contact agreement. (Extensive)
- 9. Actively assists child with unusually intense reactions related to regular visitation. (Extensive)
- 10. Drives or goes with child to visit parent(s), siblings, relatives or kin more than 16 times a month. (Extensive)
- 11. Drives one hundred miles or more every month for child to visit parents, siblings, relatives or kin. (Extensive)
- 12. Contact with child's parents or other relatives is complex and difficult, caregiver(s) safely maintains a relationship and contact with child's family by exercising sound judgment. (Exceptional)
- 13. None of the above indicators apply to caregiver's parental care and attention. (None)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN F: Developing Identity

NOTE: If child is not yet 3 years old, child's needs should be rated "b." Parental Care and Attention is measured in this domain, regardless of child's age.

Is child under 3 years of age?

- Yes
- No

Scope: This domain measures child's developing identity and social connections that sustain and strengthen their well-being, and efforts of caregivers to connect a child with relationships and community resources that develop and preserve their identity and culture. Identity is defined as a sense of who one is and a sense of belonging or membership to a cultural group or multiple groups. A child's identity and sense of self is developed with reference to their birth and extended family, peers, social and culture influences, religion, community and law, media (including social media), gender and other factors.

Culture is the shared beliefs, customs, practices and social behavior of a particular group; this would include a child's ethnicity and race, faith/spirituality, socio-economic factors, sexual identity, families' traditions and social identity. Practices, customs and social behaviors include language, milestones, food, celebrations, clothing, strengths and history, norms of behavior, and child-rearing practices. Community consists of formal organizations and informal group(s) of people, or locations or social media groups with which a child feels a sense of membership, fulfillment of needs, and shared emotional connections. A child's developing identity, their connection to others and how they feel about it influences behavior, cognitive and emotional outcomes including academic achievement, levels of happiness, anxiety, social integration, self-esteem and over-all well-being.

Focus: Because a child came to the caregiver's family through the child welfare system, the child's developing identity is influenced by their past and all cultural connections must be considered and honored. This domain is not specifically about preserving family connections (Domain E) or supervision (Domain C), but considers the efforts of the caregiver(s) to develop, preserve and support a child's growing identity and well-being.

Parenting: All children need relationships and social connections to develop their identity, including their ability to successfully integrate and synthesize their life experiences into their identity. In this domain, parenting is about initiating conversations, demonstrating and ensuring a child has relationships in the family and community that help a child develop their identity and positive self-image. A caregiver's leadership and acceptance of responsibility encourages a child's development in this area. Without parental support, a child is likely to show less interest in or make less effective use of, supports and resources to develop an authentic, healthy identity.

Special points: Special points in this domain and Domain E: Preserving Connections are based on the quantity of indicators that support the levels of parenting in both domains.

F. Child's Needs

CHECK ONE

- a. Reflects a strong sense of identity and demonstrates a positive self-image. They can talk about their connection and familiarity with their cultural customs and practices. Socializing with others connected with the community is a source of comfort and strength.
- b. Reflects typical, age-appropriate identity development, and is comfortable with cultural customs and practices, and is socializing with others connected to a community.
- c. Reflects a conflicted identity or a poor self-image that is considered atypical for their age, adversely affecting their interest in developing familiarity with cultural customs or practices, and with others connected with their community.

- d. Reflects a damaged identity, or absence of an identity that contributes to self-destructive behaviors or relationships. A child's damaged self-image is evident in their current social behaviors that seek to damage or disengage relationships.

Explain if you selected a child needs rating of d:

F. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Demonstrates respect for child's identity and their community. Caregiver makes efforts to increase cultural awareness and takes the responsibility to show and teach child about their family history, including their birth family's culture and community. Ensures child has items and information needed to maintain skin and hair care. (Basic)
- 2. Demonstrates awareness and makes efforts to keep child emotionally and physically safe from intolerance in the home and community. (Basic)
- 3. Provides a home environment for child with food, language, toys, clothing and community activities that support child developing a positive self-image and authentic, healthy identity. (Significant)
- 4. Has established significant, ongoing positive relationships with individuals or other families who are willing to mentor child's developing individual identity. Caregiver can identify specific people, and their deliberate, recognizable actions with child established for this purpose. (Significant)
- 5. Demonstrates and mentors child to develop skills to safely negotiate difficulties in diverse settings at school, in the neighborhood, within social media communities and in public. (Extensive)
- 6. Regularly coordinates, attends or hosts cultural community events to help child establish, develop and maintain connection to their culture that builds their identity. Caregiver can identify frequency of specific events and how they support child's identity development. (Extensive)
- 7. Drives 200 miles or more each month for child to attend events to make or keep connections with their culture and community: (Extensive)
- 8. Helps child repair and build their damaged identity. Caregiver can list the substantial, deliberate parenting actions they take to nurture child's pride in their identity, and involvement in group activities that build positive self-image. (Extensive) (This indicator is valid only when paired with need d)
- 9. Transformed their daily life to include child's individual identity and community into caregiver's daily life. Caregiver and family have made permanent major life changes to commit to child's identity and community, such as joining a new faith community, moving to a new home or changing schools. (Exceptional)
- 10. None of the above indicators apply to caregiver's parental care and attention. (None)

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN G: Education

Scope: This domain measures the parental care needed in a caregiver’s home to support learning and educational success and considers activities that a child participates in that are typical for their age. This domain is not about the educational services provided by the school system or a caregiver who decides to homeschool a child.

Focus: Because a child came to the caregiver’s family through the child welfare system, educational stability is very important for their future. Parental care would also encourage a child’s involvement in typical childhood activities.

Parenting: All children need to learn, develop school readiness skills, attend school, have education supported at home, and participate in typical childhood activities available in their school or community. In this domain, parenting is about supporting a child’s education by encouraging learning, arranging early childhood screenings, providing school supplies, prompting school attendance, communicating with teachers and other education professionals, and reinforcing homework completion. Caregivers promote school, sports, art or community activities because those activities help children develop social skills, build and maintain healthy peer relationships, and promote emotional and physical development.

Special points: Special points in this domain are based on the support by a caregiver for extra activities in which a child participates.

G. Child’s Needs

CHECK ONE

- a. Is working above appropriate grade level, or exceeds expectations of their special education individual education plan (IEP).
- b. Is working at appropriate grade level, or meets expectations of their special education IEP. Select this item for an infant or preschool child, who does not have an IEP.
- c. Is working below appropriate grade level in at least one, but not more than half of academic subject areas, and/or struggles to meet expectations of their special education IEP.
- d. Is working below grade level in more than half of academic subject areas, and/or does not meet expectations of their special education IEP.

Explain if you selected a child needs rating of d:

G. Parenting Care and Attention

Caregiver(s): CHECK ALL THAT APPLY

- 1. Encourages educational activities in the home, and reads to child, including an infant or preschooler. (Basic)
- 2. Arranges for a preschool program that develops school readiness and ensures child receives early childhood educational screenings. (Basic)
- 3. Ensures child’s school enrollment and attendance, provides school supplies, supports for homework, and attends school meetings. (Basic)
- 4. Attends child’s school conferences/meetings, and communicates with teachers and other education professionals. (Basic)

- 5. Is involved in daily communication with child's teachers or other school staff. (Significant)
- 6. Has specific responsibility in child's IEP, such as the plan defines caregiver as picking up child early from school in response to a certain set of behaviors. (Significant)
- 7. Involved daily with child and their homework during the school year, supporting child's efforts with direct supervision and attentive positive reinforcement. (Significant)
- 8. Attends child's school conferences or other related school meetings in a school that is farther away than caregiver's local school district to ensure staff is aware of child's needs in the classroom. (Significant)
- 9. Supports educational success and attendance for child who has current attendance issues such as school suspension, is involved with a school truancy program, school phobia or had other serious school attendance issues. This includes disruptive behaviors that require caregiver's regular (more than weekly) intervention at the school with child. (Extensive)
- 10. Supports child in a home-based educational program who may have been expelled from school, is involved in an alternative education program, or cannot attend a daily school program (This does not include a homeschool program that a caregiver decided to provide, or day treatment where education is a component of the daily program). (Extensive & Exceptional)
- 11. None of the above indicators apply to caregiver's parental care and attention. (None)

Ensures school stability for child by providing daily transportation when bus service is not available to keep them attending the same school:

CHECK ONE

- 12. Time to drive child to school takes longer than 30 minutes, but 60 minutes or less a day. (Significant)
- 13. Time to drive child to school takes longer than 60 minutes, but less than 90 minutes a day. (Extensive)
- 14. Time to drive child to school takes longer than 90 minutes a day. (Exceptional)
- 15. Not applicable. (None)

G. Additional Parental Care and Attention on Activities

CHECK ALL THAT APPLY

- 16. Offers child the opportunity to have social activities with friends and provides age-appropriate activities in the home, consistent with child's interests.
- 17. Includes child in family recreational activities and family vacations.
- 18. Has effectively advocated with an organization to change and adapt the typical activities for a child with special needs.

Registers, provides for the cost of the activities (or secures additional funding supports from the community) and transports child to:

CHECK ONE

- 19. None or not applicable.
- 20. One after-school activity.
- 21. Several after-school activities.

Explain if you selected parenting indicators of Extensive or Exceptional:

CHILD DOMAIN H: Child Care

Scope: This domain measures child care needed for when caregiver works outside the home, or is enrolled in a training or education program.

Focus: This rating is based on an average of the child care needed throughout the calendar year. This is not for incidental babysitting needs or to support caregiver's volunteer activities. If caregiver's work or education program hours vary, it may be necessary to determine the average child care needs. If full time is not needed every week, a caregiver does not need full time child care. Levels are adjusted to reflect the typically higher child care needs of younger children ages 0 to 6 compared to those ages 7 to 12.

This domain does not include educational programs offered by the school district or community action agency, such as early childhood or Head Start. However, it could include any preschool program that is not supported by the local school district or social service programs.

Special points: There are no special points available in this domain.

H. Needs

CHECK ONE

- a. Is not needed or is minimal. A caregiver needing child care does not work or attend an education program outside the home year round, the need is nine hours a week or less. Select this item if Minnesota Child Care Assistance program or other resources pay for child care cost. (Basic)
- b. Is needed for 10 to 19 hours a week, or needed for work or education during the summer only. (Significant)
- c. Is needed for 20 to 29 hours a week. (Extensive)
- d. Is needed for 30 to 39 hours a week. (Exceptional)
- e. Is needed for 40 or more hours a week. (Maximum)

Explain if you selected a rating of Extensive or Exceptional or Maximum:

MAPCY EXTRAORDINARY LEVEL INCREASES

Scope: To maintain a child or youth with high needs, safely in the community with caregivers who can meet their needs, “extraordinary level increases” of supplemental difficulty of care are available throughout Northstar Care. This is available to children and youth in foster care, receiving kinship assistance or adoption assistance to prevent residential placement when caregivers are providing extraordinary parenting and intensive supervision needed to safely care for a child with very high needs in their home.

Focus: The extraordinary level increases are available when a child meets the conditions of the five initial tests. These tests are split into three entry level tests and two certifying tests. The three entry level tests are done within Social Service Information System (SSIS) to determine children and youth who have very high needs and are a candidate for extraordinary level increases. SSIS will inform the rater that the entry level tests have been passed. If so, the assessor completes the certifying tests that starts/stops the Extraordinary Level Increase process.

Parenting: When the initial tests determine the child’s eligibility for the extraordinary levels, parenting indicators are considered to determine the extraordinary care and intensive supervision provide by the caregiver as a parent that are not supported by Medical Assistance or other services. If the child is receiving Medical Assistance waived services or other in-home services to provide necessary care for children with disabilities, the additional parenting that is not covered by the purchased service must be described. Extraordinary level increases do not pay for services and the increase to the standard levels must describe the specified parental care and supervision that supports gaps that are met by parenting.

Extraordinary Level Increase Initial Tests

Three Entry Tests

Is child’s total standard MAPCY score 62 or higher?

- Yes
- No (Go no further; child is not eligible for Extraordinary Levels)

Looking at the child’s need level in Domain D Mental Health, Physical Health & Development, which of the following is true?

- Level “d” for AT LEAST ONE of the scales in Domain D
- Level “c” for BOTH the Emotional & Behavioral scale (D1) and the Development scale (D3)
- NEITHER of the above applies (Go no further; child is not eligible for Extraordinary Levels)

Looking at the Parenting level (the highest indicator with a complete ladder) in Domain C Supervision, Guidance & Structure, which of the following is TRUE?

- Level is “Extensive”
- Level is “Exceptional”
- Neither of the above applies (Go no further; child is not eligible for Extraordinary Levels)

Two Certifying Tests

Based on the child's score, needs and supervision level, it is possible that the child may qualify for an Extraordinary Level increase. Consider the following questions:

Does child currently physically reside in the home with the caregiver?

- Yes
- No (Go no further; child is not eligible for Extraordinary Levels)

Placement prevents residential placement:

Does the agency certify that, but for the placement with this caregiver, the child would be in a residential facility, another type of residential or correctional program or hospitalization?

- Yes, I so certify
- No (Go no further; child is not eligible for Extraordinary Levels)

Agency Screening: *Minnesota Statutes, sections 245.4885, 256B.092 and 260C.157 requires responsible social service agency screening teams to determine the child's level of care. Did the agency screening team or the comparable process conducted by a tribal social service agency determine the child's level of care need would be residential placement WITHOUT the parental care of this caregiver?*

- Yes
- No (Go no further; child is not eligible for Extraordinary Levels)

Agency Screening Date: (MM/DD/YYYY)

Provide a brief description of how caregiver can uniquely and safely support this child (who would otherwise require placement in a residential facility, another type of residential or correctional program or hospitalization) in living in the community.

Extraordinary Level Increase Indicators:

Pre-Rated Extraordinary Level Increase Indicators

If all five initial tests are met, additional information is used to determine if Extraordinary Levels might be warranted, and if so how many. Four of the indicators are determined by indicators previously selected in the standard MAPCY assessment.

1. **Intensive Supervision – Education:** A child cannot be left alone and is suspended or expelled from school. MAPCY responses selected would be Domain C, Indicator 10 and Domain G Indicator 10.
2. **Intensive Supervision – Service Access I:** Relief is available from caregiver duty 8 – 14 hours a week, in addition to one respite weekend a month. MAPCY response selected would be Domain B, Indicator 12.
3. **Intensive Supervision – Service Access II:** Relief is available from caregiver duty for 7 or fewer hours a week and/or one respite weekend a month. MAPCY response selected would be Domain B, Indicator 11.
4. **Intensive Supervision – Medically Dependent I:** This pre-rated indicator is based on the extensive number of medical, therapy or professional service appointments a caregiver schedules, coordinates, takes or participates in with a child. MAPCY response is pre-rated when both Indicators 14 and 15 are selected in standard tool Domain D.

Extraordinary Level Increase Indicators

If Domain B, Indicator 11 has been selected, the following extraordinary level indicators are determined by the assessor. Select the parental indicators that apply to the care a child is receiving.

Service Access: CHECK ONE

- 5. Intensive Supervision - Service Access III:** Relief is not available from caregiver duty. A child is eligible for eight or more hours a week of services by a professional provider, including respite care, a personal care attendant (PCA), Medical Assistance waiver vendor, in-home nursing, or similar services where a caregiver can leave a child to another's supervision. However, due to the lack of availability of family or service providers, a caregiver cannot access approved services that include a parental relief component. This indicator does not apply if a caregiver has arranged to function as a designated waiver service provider for a child in their care who is the subject of this assessment. This is not available to a Foster Residence setting.
- 6. Intensive Supervision - Service Access IV:** Relief is not available from caregiver duty. A child is eligible for eight or more hours a week of services by a professional service provider, including respite care, a personal care attendant (PCA), Medical Assistance waiver vendor, in-home nursing, or similar services where a caregiver can leave a child to another's supervision. However, due to a child's previous aggressive/assaultive behaviors toward service providers, a caregiver cannot access approved services that include a parental relief component. This indicator does not apply if a caregiver has arranged to function as a designated waiver service provider for a child in their care who is the subject of this assessment.
- 7. None of the above**

Night Supervision: CHECK ONE

- 8. Intensive Supervision - Night I:** Based on a written safety plan developed by an agency or a medical, mental health, behavioral, or corrections professional, at least one caregiver is required on an ongoing basis to get up every night, more than once at regular intervals to check on the welfare of a child due to sleep disturbances or other medical or safety conditions.

- 9. Intensive Supervision - Night II:** Based on a written safety plan developed by the agency or a medical, mental health, behavioral, or corrections professional, at least one caregiver is required on an ongoing basis to be awake at all times due to medical or safety conditions. Caregivers sleep in shifts.
- 10. None of the above**

Intensive Supervision – Restricted Placement: CHECK ONE

- 11. Intensive Supervision – Restricted Placement I:** For safety purposes, a child is the youngest child in a caregiver’s home. This is valid only when paired with child needs “d” in Domain D: Emotional/Behavioral Needs, and as long as a child remains the youngest child in a caregiver’s home.
- 12. Intensive Supervision – Restricted Placement II:** For safety purposes, a child is the sole child in a caregiver’s home. This is valid only when paired with child needs “a” in Domain B: Dynamics in a Caregiver’s Home and “d” in Domain D: Emotional/Behavioral Needs, and as long as they remain the sole child in a caregiver’s home.
- 13. None of the above**

Intensive Supervision – Medically Dependent: CHECK ALL THAT APPLY

- 14. Intensive Supervision – Medically Dependent II:** Based on a written medical care plan developed by an agency, medical or mental health professional, a caregiver as parent is required to coordinate medical care, therapy and/or treatment for a child with prolonged dependency on medical care. These conditions require caregiver, as a parent, to administer daily specialized medication or treatment, and provide intensive supervision of a child’s physical symptoms or conditions. This is valid only when paired with a child need “d” in Domain D: Emotional/Behavioral Needs, or Domain D: Physical Health Needs.
- 15. Medically Dependent II does not apply**
- 16. Medically Dependent III:** This conditional indicator is determined by SSIS when Intensive Supervision – Medically Dependent II is selected and a caregiver is actively mentoring a child’s parents, prospective adoptive parents or relative custodian to learn and participate in a child’s care. This indicator is rated when Medically Dependent II is paired with the standard tool Domain E: Indicator 7.

Required Documentation: If **at least** one of the indicators in Service Access, Night Supervision or Medically Dependent was selected, explain the efforts of the legally or financially responsible agency, caregiver(s), parents and others to request support services in the home and community that would ease the degree of a caregiver’s parental duties for the care and supervision of a child, including Medical Assistance waived services. When Night Supervision or Medically Dependent II is selected, a current copy of the written safety plan or medical plan should be available, if requested.

Extraordinary Level Increase Magnifiers

If at least one Extraordinary Level indicator is selected (including pre-rated indicators), sibling or placement magnifiers can boost the amount of the increase. A magnifier cannot determine any Extraordinary Level increase by itself, but indicates greater intensity of child's need.

Sibling Magnifier: CHECK ONE

- 17. Sibling Supervision:** Child is one of two siblings from the same family that caregiver is currently caring for in their home (This cannot be selected if Intensive Supervision – Restricted Placement II is selected).
- 18. Sibling Supervision:** Child is one of three siblings from the same family that caregiver is currently caring for in their home (This cannot be selected if Intensive Supervision – Restricted Placement II is selected).
- 19. None of the above**

Placement Magnifier: Additional points are awarded if responses in Domain A: Placement Experience, needs “c” or “d” is selected (SSIS checks to determine if a placement magnifier exists).