Community Care Plan
(This page to be completed by family/youth)

Youth:	Date:	☐ New Staffing	Review	☐ Returning to Community
Reason for referral:	Family's Information (completed by fam	nily with assistance as i	needed)	
Reason for referral.				
V 04	I Fam	9 (
Youth strengths:	ramı	ily strengths:		
Youth needs:	Fami	ily needs:		
		.,		
	Internation Consists on	-LO		
Overtion	Intervention: Services and			
Question	To be completed by ta	mily and youth with assistance	e as needed	
What is important to the youth?				

intervention: Services and Support Needs	
Question	To be completed by family and youth with assistance as needed
What is important to the youth?	
What is important to the family?	
What do others need to know or do to support the youth?	
What do others need to know or do to support the family?	

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	ow as it is discussed. All areas s tant to this youth. Whenever pos	•	nly develop goals and strategies rior to meeting in conjunction with
Education	Transportation Treatment Extracurricular Activities	Medical	Faith-Based Support
Housing		Peer Support	Mentoring
Supervision		Parent Support	Natural Support

Youth's Name _____

Interve	ntion Goals and Strategies*		
Service/ Support Description	By whom?	By when?	Done?
	(name, phone number, email)	-	(check)
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Youth's Name	
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If the youth is not currently living at home, or if the youth is going to move away from home, indicate what steps are being taken to make sure that the transition is smooth and timely. Consider insurance, transportation, visits, living arrangements, and any other areas of concern.

Participants (we agree to partic	ipate in the Community Care Plan and pro	vide specified services/resources)
Print Name	Signature	Agency

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Youth's Name	
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System of Care Community Care Plan Instructions

Who should fill out the Community Care Plan? The Community Care Plan has two parts—the plan itself and the background information that informs the plan. These two sections are completed in different ways:

- Background information (separate document): The case manager from the lead agency is responsible for making sure the background information is complete prior to the LIPT meeting. The first page is for the family to complete, with the case manager's assistance. Pages 2 and 3 are the responsibility of the case manager. The case manager must also be prepared to <u>clearly and succinctly</u> present a five-minute summary of the background information to the LIPT. Note: If you have information to add to the "Plan" section that will help the committee, go ahead and complete it prior to the meeting as well.
- Plan: The Local Interagency Planning Team (LIPT) establishes the bones of the plan in the LIPT
 meeting. The case manager is responsible for taking notes then meeting with the youth and
 family, going over the plan in detail, fleshing out the details, and getting signatures at the next
 LIPT meeting.

When should the Community Care Plan be completed? The intervention goals and strategies should be drafted at the first meeting with the family and finalized as soon as possible. Most likely, the case manager will meet with the family and provide a list of the specific providers and services that are available to meet the family's and youth's needs. Once the family selects the services that will best meet their needs, the case manager can bring the detailed Community Care Plan back to the LIPT for final review and signatures.

Where should the Community Care Plan be kept? The LIPT chair should keep a file copy, and the case manager from the lead agency should keep a copy for ongoing implementation and monitoring.

What guidelines should be followed in completing the Community Care Plan? The following guidelines should be followed:

- Elicit at least three strengths.
- > Keep the focus on the youth and family, not on the agencies and providers.
- Emphasize natural supports.
- Focus on completing the Community Care Plan. If there is a crisis, it may need to be dealt with and documented in the Crisis Plan, but it shouldn't distract the LIPT from completing the Community Care Plan.
- Consider all types of transitions—into/out of home, into/out of services, into adulthood.
- If any area on any part of the Community Care Plan is not applicable to the youth, write "N/A" rather than leave anything blank.