

Signatures: I understand and have helped develop this plan. I have been given a copy.:

SIGNATURE	DATE	This plan was explained to me.	I received a copy of this plan.
Parent: Tiffany L Moose Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Parent: Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Step parent, if applicable: Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Legal Guardian: Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tribal Representative: Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other: Zachary J Fitzgerald Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other: Mia R Fitzgerald Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Social Worker: Alicia Farrington Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor: Debra Anthony Comments:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

This information is available in alternative formats to individuals with disabilities by calling your county worker. TTY users can call through Minnesota Relay at (800) 627-3529. For Speech-to-Speech, call (877) 627-3848. For additional assistance with legal rights and protections for equal access to human services benefits, contact your agency's ADA coordinator.

Behavior or Conditions that need to change: Ms. Moose started the process for Zach to work through his anxiety about his fear of the bus. Ms. Moose takes him to therapy at the Indian Family Center with Jessica Gorman.

Action Steps: Ms. Moose plans to continue with his counseling, and ensure that he attends school everyday.

Permanency: No concerns in this area.

Domain Area:

Behavior or Conditions that need to change:

Action Steps:

Well- Being: No concerns in this area.

Domain Area:

Behavior or Conditions that need to change:

Action Steps:

THE SIGNATURE PAGE FOLLOWS THIS PAGE

FAMILY ASSESSMENT SERVICE PLAN

Family Name: Moose Tiffany, L 114452665
Plan Dates: 04/29/2011 - 06/29/2011
Worker Name: Alicia Farrington

County Case #:
Next Review Date: 06 / 29 / 11
Worker Phone: (651)266-3972

Persons Involved In Plan

Name	DOB	Home Phone	Work Phone
Mia R Fitzgerald	3/29/2007	(651)797-9619	
Zachary J Fitzgerald	12/6/2004	(651)797-9619	
Tiffany L Moose	11/3/1973	(651)797-9619	

What are the child safety concerns? (Reasons Child Protective Services are needed).

Ms. Moose's case opened for investigation for educational neglect concerning her son Zachary. Case was referred for Family Assessment Case Management to monitor school attendance, and offer supportive services for the family.

What are the family's strength, resources and supports that contribute to child safety?

- *Ms. Moose understands that her son needs to get to school daily and on time.**
- * Ms. Moose reported that when her son started kindergarten this year, he experienced a traumatic event. The bus driver dropped her son off at the wrong stop, her son got lost, and he ended up walking to a another school for help. Ms. Moose obtained therapy for her son because he developed anxiety, fearful of being dropped off at wrong stop. Ms. Moose reports that she is consistent with his therapy appointments.**
- *Ms. Moose indicated that she and her children were previously homeless for quite sometime, and securing stable housing has helped with stability.**

What are the family needs that relate to child safety and family well-being?

- *Ms. Moose plans to continue to work with Zach and his therapist.**
- *Ms. Moose agrees to ensure that Zach gets to school daily and on time.**
- *Ms. Moose to develop communication with the school concerning Zach.**

What do we want to happen? (What are the goals of this plan?)

Safety:

Domain Area: Child's Well-Being: Educational Needs