

Youth Support

Youth Wellbeing Assessment Common Assessment Tool (CAT) Guide

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Introduction

The Youth Support model uses the Common Assessment Tool (CAT) to assess a young person's strengths and needs and inform support planning. The aim of support planning is to provide young person-directed practical support around their connections with family and community, education/training/employment, housing and health.

The Youth Support service and the young person work together to develop an understanding of the young person's strengths and skills, needs and risks, to inform the development of a support plan that considers multiple issues.

The assessment framework allows the Youth Support service and the young person and their family (if involved) to measure the young person's progress over time.

This User Guide explains how to use the CAT, outlines the features of the Tool and explains how to interpret CAT data for the purpose of tracking a young person's progress and data reporting.

About the Common Assessment Tool (CAT)

The Common Assessment Tool (CAT) is the assessment tool used by Youth Support services providing a Support and case management service. A shorter version of the tool, the Initial Contact assessment tool, is used by Access services (see Appendix A of the Youth Support Services Practice Guide).

The CAT ensures that all assessments are:

- **Comprehensive**, focusing on the whole of the young person
- **Consistent** between Youth Support services from agency to agency
- **Accurate** in giving a picture of a young person's changing situation, including any crisis issues that may emerge from time to time
- **Reliable** in capturing data for review and reporting.

The CAT is a comprehensive assessment tool, but does not provide an exhaustive measure of a young person's complex and multiple needs. This tool complements other specialist assessment tools to further investigate specific issues such as mental health.

The Tool includes the *CAT Domains, Indicators Guide* and *CAT Form*.

The CAT Domains and Indicators Guide describe the young person outcome measures, standard scale (1 to 5) and indicators for each of scale. Indicators reflect the Youth Support outcome measures.

Common Assessment Tool Features

The CAT covers eleven 'issues' domains and two 'change' domains.

Completion of the CAT informs support plans for young people to connect with family and community, and to engage in education, training and employment pathways, maintain safe housing and build their skills to maintain their own wellbeing across these domains. To ensure sustainable change in young people's lives it is fundamental to address issues holistically, including recognising the inter-relationship between all domains of the young person's life.

Issue Domains

Domains include:

1. My Housing
2. My Schooling or Work & Income
3. My Family Relationships
4. My Social Connections (peer relationships)
5. My Physical Health
6. My Drug & Alcohol use
7. My Mental Health
8. My Culture (applicable to identified Indigenous or CALD young people)
9. My Parenting & Children (applicable to young persons who are pregnant or parenting including the primary carer, non-residential parent or if their child is in care)
10. My Disability (applicable to young persons who have a disability or learning difficulty, or may have a potential undiagnosed issue)
11. My Safety & the Law (applicable to young persons who have contact with Youth Justice or Corrective Services).

Change Domains

The 'change domains' measure the young person's desire and capacity to work towards positive change in these areas of their life where things could be better. These are a reflection of the young person's skills, confidence and awareness.

1. *Desire to change*: motivation, willingness to take action, perception of the need for change, reflection, deciding to set goals and plan actions
2. *Capacity to change*: coping and self-management, self-belief and confidence, positive thinking, belief in own skills e.g. in creating/maintaining positive relationships, problem solving and decision making skills, and knowledge.

Together these components provide a picture of a young person's current situation and opportunities for positive change. It helps the young person clarify what they need to work on to achieve their goals through their participation in Youth Support service.

Conversations between the youth support worker and the young person are important opportunities to improve understanding about the inter-relationship between various issues and the need to develop core skills to support family and community connection, and engagement in education, training and employment pathways.

Standard for measuring outcomes: 1 to 5 Scale

The CAT uses a 1 to 5 scale. The values of scale are:

- 1 = Can be a lot better
- 2 = Can be better
- 3 = OK (but can be better)
- 4 = Doing well
- 5 = Doing great

The CAT indicators provide details and examples to determine rating within each domain. As well as ensuring consistency and comprehensiveness in assessment, these indicators provide a useful basis for discussion with each young person about their status, strengths and risks.

The assessment process – when to do what

The assessment of young persons is a potentially intrusive process which can negatively impact on engaging young persons. For this reason, an assessment and review should be part of the rapport building with the young person and occur in association with the support being provided rather than solely for the purpose of information gathering.

A comprehensive assessment takes time. In the early phase of working with a young person, assessment conversations may focus on maintaining engagement or urgent issues. The initial assessment usually takes place over several conversations between the young person and the youth support worker (rather than structured interviews). Youth support workers may find it easier to gather information informally while working with the young person on some early and urgent practical supports – this can also help with building rapport.

The youth support worker and the young person must complete the CAT at intake and closure for all young persons with a support plan (young people receiving services from a Support service). This is so that change over time in the young person's issues and skills can be captured.

- The initial CAT assessment is best completed within 2 weeks of the young person being accepted for a Support service.
- Completing CAT reviews at approximately three-monthly intervals (at minimum) will assist youth support workers to track a young person's progress over time, particularly young people who participate in youth support for several months.
- CAT case closure review should be completed just prior to the young person leaving the service.

This tool has been designed to encourage participation from young persons in the assessment, review and case planning process. If the youth support worker and the young person complete the assessment together:

- the assessment is likely to be more accurate
- the young person is more likely to take responsibility for achieving their goals
- the process will provide opportunities for learning and building young person's core skills.

Youth support workers are strongly encouraged to become familiar with the CAT Domains and Indicators Guide before conducting any CAT assessments with young persons.

Step by step instructions

1. Explain to the young person the purpose of the CAT and what's involved. Explain that you will use the assessment to gather information about the young person's strengths and needs and review their progress over the time in order to give them individual support.

 *Tip: Where the young person is reluctant or apprehensive of assessment processes, discuss and address any concerns the young person might have about the process and ownership of information. i.e. 'we can use the CAT to work out how I can best support you, and later on when we look back at it, it can help us see what works well'.*

2. Work through each domain in any order. Prompt questions are provided as a guide, and some information about the young person can be gathered through observations, e.g. smoking habits. Use information gathered to check against the indicators to determine a rating for each domain.

 *Tip: You may wish to talk to other stakeholders (school staff or family members) to get information for the assessment that the young person is unable to provide. You may need the young person's consent to allow you to talk with other parties about the young person.*

 The indicators use professional language, but youth support worker should use youth friendly terms when talking to young people about their assessment, goals and support plan.

3. Discuss with the young person their views about their situation and take this into account when going through the indicators for each domain.

💡 *Tip: Sometimes a young person and the youth support worker will disagree about the seriousness or risk of a situation – e.g. if a young person thinks their school attendance is not an issue but the youth support worker has observed otherwise. Negotiate these differences by introducing a different perspective. Note the young person's current motivation and desire for change.*

4. Talk to the young person about which issues they see as priorities to address in their support plan. Ask them to nominate up to three current priorities if relevant (i.e. if there are several areas of concern to them).

💡 *Tip: the CAT Review Diagram can be a useful visual aid to help the young person and youth support worker to:*

- **Prioritise** issues for the Support Plan
- **Think** about the inter-relationships between the issues they face
- **Talk** about their view of their readiness to work on various issues and their current confidence about their skills in problem solving, making good decisions, and managing their relationships.

5. For each subsequent CAT review, follow the above process for assessment. It's important to show the young person how far they have come and to talk about areas that still need work.

Using the CAT to inform the support plan

Good practice involves the youth support worker and young person completing the assessment process together to support both planning and/or case coordination, to meet the young person's needs. However, if this is not possible, the youth support worker can use their professional judgment to complete the assessment on behalf of the young person.

After completing the initial CAT assessment, this information should inform priorities and goals for the young person's support plan.

Scores of 1 and 2 in any of the components should be a flag that the issue is or has potential to be an imminent risk/serious need for the young person. This information can be used in discussions with the young person when planning their goals or in supervision if the youth support worker is finding the issue particularly challenging.

At the same time, the approach also allows youth support workers to hone in on the young person's strengths, such as existing core skills and motivation for change.

Refer to the **Practice Guide** for Youth Support Service for information about the support planning process including completing a Support Plan.

Using and Interpreting CAT data

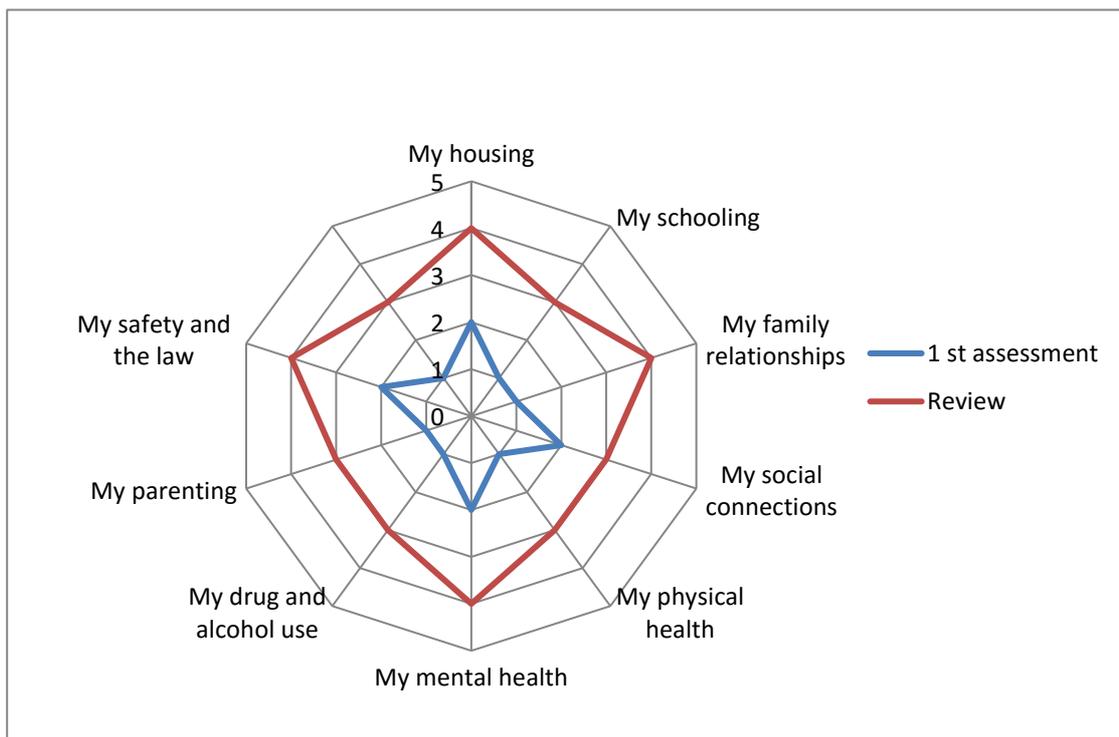
The data obtained by completing the CAT can be used to analyse an individual young person's progress and compare progress between groups of young persons, for instance, comparing the progress of young people by gender, age or specific issues.

This data provides a rich source of information including whether young persons supported by Youth Support services are making an appropriate level of progress. This can highlight areas of success and/or areas for improvement.

The diagram below shows how the data can illustrate a young person's progress through changes in the CAT score. For example, in most domains, a young person may score 1 or 2 at initial assessment. As crises are resolved and the young person begins to work on their underlying issues and core skills by the first review, the score in some domains has improved indicated by a score of 3 or 4, as illustrated by the 'spider' diagram below.

The CAT ratings can be used to create a 'spider' progress chart using Excel (as shown below), or shown visually on other types of visual scales.

Figure 1: Client progress between initial assessment and review (using Excel 'radar' chart).



YOUTH WELLBEING CAT ASSESSMENT FORM

Young person: _____

Date: ____/____/____

Youth support worker: _____

REVIEW: Initial detailed assessment Three-monthly review Case Closure

	Tick if a priority	How I'm Doing				
		1	2	3	4	5
My housing						
<i>What is your current housing situation?</i>						
My schooling or work & income						
<i>What is your current participation in school or work / income?</i>						
My family relationships						
<i>What is the current situation with your family relationships?</i>						
My social connections						
<i>What is the current level of your social connections with peers?</i>						
My physical health						
<i>What is your current health situation?</i>						
My drug and alcohol use						
<i>What is the impact of your substance use on your current well-being?</i>						
My mental health						
<i>What is your current mental health situation?</i>						
My culture (if relevant)	N/A					
<i>What is your current level of cultural connection?</i>						
My parenting and children (if relevant)	N/A					
<i>What is your current parenting situation?</i>						
My disability (if relevant)	N/A					
<i>What is your current disability situation?</i>						
My involvement with the law (if relevant)	N/A					
<i>What is your current involvement with the criminal justice system?</i>						
My desire / motivation to make changes						
<i>How motivated are you to achieve change across relevant domains?</i>						
My belief in my capacity to make changes						
<i>How confident are you of your ability to achieve change across relevant domains?</i>						

Issues domains - things to consider

DOMAINS	Conversation Starters
My Housing	<p>What do you like about your house / where you live? Who lives in your home? What are they like? How do you feel about those people? Have there been times when you felt unsafe at home? Does anyone make you feel unsafe? What do they do? What do you do at home? What would you change?</p>
My Schooling or Work & Income	<p>How do feel about going to school / training? Do you have friends at school / TAFE? How many days do you go to school? When you are at school / training, what do you like doing? What do you like least? Have you had any other schooling experiences? What are your teachers like? Can you understand what the teacher is saying? How do you get to school / TAFE / work? What do you do if you have problem? Who do you talk to? What do you do at lunch? Do you hang out with other kids? How do you feel about work the teacher gives you? Easy? Hard? Are you getting an income from Centrelink? Who gives you money for lunch or to buy things? How do you get money for clothes and books? Do you know about Centrelink? How often do you get a Centrelink payment? How do you pay rent / board? Do you know what budgeting means? Do you budget your money? Some people find they spend their money as soon as they get it, do you find this? Do you loan people money? Do you save money? Is there anything you need to / want to buy?</p>
My Family Relationships	<p>Do you live with parents / another family member / carers? Which relationships in your family are good ones? How do you feel about your family? How well do you get on with your mum / your dad / carer most of the time? What types of things cause disagreements? Do you feel you have someone in your family you can trust? Is there anyone in the family that you are worried about? Is there anyone in your family that makes you feel uncomfortable or unsafe? (If not at home) When did you last have contact with someone from your family? Who was that? Have Child Safety contacted you or your family? How have they been involved? How do you feel about the Child Safety workers?</p>
My Social Connections	<p>Do you have people you think of as friends? Where do you know them from? Do you have people that you can talk to about problems? Do you feel that they listen / help you / support you? Is there anyone you think is cool? Why? What ways do you use to make friends? Are you involved in any sport / groups / organised activities? When you get angry / upset with someone, what do you usually do? Are you currently in a relationship? Do you have a partner? Is there someone who is the most important / most special in your life? Is there anyone that makes you feel uncomfortable or unsafe? Is anyone bullying you? At school / work / on-line?</p>
My Physical Health	<p>Do you reckon you are a healthy person? Why? Are you worried about your health in any way? What do you typically eat each day? Do you feel you get enough sleep? Why?</p>

DOMAINS	Conversation Starters
	<p>When you worry, where do you feel that? Do you sometimes feel butterflies in your stomach? Do you get headaches? Do you feel pains? Do you have someone to tell if you aren't feeling well? Do you know how to get to a doctor? Do you have a Medicare card? Do you have a particular doctor you generally go to? Have you ever seen a doctor / when did you last see a doctor?</p>
My Use of Drugs and Alcohol	<p>Do you drink alcohol? How often? Do you smoke cigarettes? How many a day? Do you use illegal drugs? How often? When / where do you generally use substances? What worries do you have about your use of cigarettes / alcohol / substances?</p>
My Mental health	<ul style="list-style-type: none"> • Talk with the young person about what mental health is <ul style="list-style-type: none"> – Do you know what I mean when I say mental health? – What is that in your language? – Mental health is about feelings – you might feel sad or down, or get butterflies, or not feel in control. Sometimes this can stop you from doing things like going to school or seeing your friends – Have you felt this way recently? Have you talked with anyone about how you are feeling? • Normalise mental health concerns, i.e. people with depression can present in many ways • If they are engaged with a service <ul style="list-style-type: none"> – How do you find it? Do you think it's useful? – Has seeing them helped your situation? – Tell me about your medications – are they helping you? • If they express concerns re stigma, discuss <ul style="list-style-type: none"> – Has something happened for you to feel that way? – If others think _____, do you think that of yourself too? Why / why not? – Do you have anyone who you identify with who also have mental health difficulties? • If they have a particular diagnosis (made by a doctor)? <ul style="list-style-type: none"> – Do you agree with your diagnosis? – What do you think it means? – How do you feel about it? – Do you think a different diagnosis would be more appropriate? • Ask about current medications, taking a harm minimisation approach <ul style="list-style-type: none"> – How often do you take them? – Where do you get them? – Are you aware of any side effects? – Possible interactions with other medications / AOD use • When workers identify a risk in a particular area, use questions to identify boundaries, limitations and insight into behaviours
My Culture	<p>How strongly would you say you identify with your culture? Who in your family / mob teaches you about culture? Are there particulate ways / times that you celebrate your culture? What things do you do that are particularly to do with your culture? Do you want to learn more about your culture? What helped you to settle into life in Australia? How might you use these strengths to help you face problems? What did you enjoy doing in your country?</p>
My Pregnancy and Parenting	<p>Are you pregnant and/or parenting? Have you had ante-natal appointments or any other parenting help? What are you doing well? Struggling with? Is Child Safety involved? In what ways? What is your parenting experience like in your own family?</p>

DOMAINS	Conversation Starters
	Are your parents / other family members supportive? Do you have any other support? Are you with the mother / father of your child? Are there any custody issues? Is where are you living at the moment suitable for a baby / child? Do you use a child care service? Has the pregnancy been difficult?
My Disability	Do you have any type of disability? How have you managed this? Is your disability making things harder for you at school / work? How has this condition affected you? Have you had to use an aide or support? Do you know what support services available? Are you getting a Disability Support Pension?
My Safety and the Law	Have you had contact with the police or courts? How do you feel about police? Have you or your family had contact with Youth Justice workers? Have your friends had contact with Youth Justice workers? Are you under probation / have reporting conditions? Are you managing to keep to these? Do you have a Youth Justice worker? How easy or hard is it for you to keep out of trouble? Do you know about legal aid?
CHANGE DOMAINS Use these indicators to assess an overall score for these two domains	
My desire / motivation to change	<p>Readiness for change:</p> <ol style="list-style-type: none"> 1 Hostile, unwilling to make positive change 2 Demonstrates passive support for change (no action) 3 Believes there may be a need to change 4 Demonstrates co-operation and acts to make change 5 Actively working on change <p>Self-motivation:</p> <ol style="list-style-type: none"> 1 Unwilling to self-motivate or relies heavily on external motivation for basic tasks 2 Recognises the need to self-motivate 3 Requires some external motivation 4 Self-motivates sometimes 5 Self-motivates easily and consistently <p>Taking responsibility:</p> <ol style="list-style-type: none"> 1 Accepts, is proud of anti-social / criminal behaviour 2 Minimises, denies, justifies, excuses own behaviour or blames others 3 Some awareness of the need to take responsibility for own actions 4 Recognises that he or she must accept responsibility for own actions 5 Voluntarily accepts responsibility for behaviour

DOMAINS	Conversation Starters
My capacity to change	<p>Problem solving skills:</p> <ol style="list-style-type: none"> 1 Cannot identify when problem behaviours or situations occur 2 Can sometimes identify problem behaviours or situations 3 Can identify / describe problem behaviours or situations 4 Can generate different solutions to problems 5 Can apply appropriate solutions to problems <p>Consequential thinking:</p> <ol style="list-style-type: none"> 1 Believes nothing matters; does not understand there are consequences of actions 2 Sometimes confused about the consequences of action 3 Understands there are good and bad consequences of actions 4 Can identify specific consequences of his / her actions 5 Acts to achieve positive outcomes and avoids negative consequences <p>Goal setting & planning skills:</p> <ol style="list-style-type: none"> 1 No interest or desire to set goals and make plans for the future 2 Lacks skills and motivation for developing realistic goals and plans 3 Understands the need to plan, but may set unrealistic plans 4 Demonstrates skills in developing realistic goals, plans and enlists support to achieve goals 5 Carefully sets out realistic goals, plans, takes action to achieve goals <p>Sense of Self:</p> <ol style="list-style-type: none"> 1 Immature sense of self identity 2 Inconsistently mature 3 Recognises the need to have a sense of self identity and maturity 4 Has a strong sense of self and is consistently mature 5 Demonstrates maturity overall

Some sub-categories in the above Change Domains have been adapted from the Youth Assessment & Screening Instrument, developed by Orbis.

INDICATORS GUIDE

Housing		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the client's current housing situation ?	High risk e.g. High risk of violence, abuse, harassment, unsafe shelter (homeless) or facilities, sleeping rough, imminent risk of homelessness	Moderate risk e.g. Moderate risk of violence, abuse, harassment, inadequate shelter or facilities, couch surfing, tenancy failing	Low risk e.g. Low risk of violence, abuse, harassment, adequate shelter or facilities	Safe e.g. Safe- no known risk , good shelter or facilities	Safe and stable – no known risk e.g. Very safe and stable, very good shelter or facilities
Impact	How does the situation impact on their well-being?	Housing situation has significant negative impact e.g. significantly affecting physical and emotional health	Housing situation has a somewhat negative impact on well-being and other goals	Housing situation makes being well-being and focusing on other goals a bit hard	Housing situation supports well-being and achievement of other goals e.g. Housing provides appropriate facilities for daily activities	Housing situation enhances well-being and achievement of other goals
Schooling or work		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the current participation in earning or learning?	No Participation e.g. History of repeated suspension/ exclusion from school, long period of non-attendance. Unable to maintain a job, no access to employment support, no access to income support. Not learning or earning.	Low Participation e.g. Recent history of exclusion/ suspension from school, intermittent non-attendance. Unable to maintain a job, poor access to employment support, transport barriers.	Inconsistent Participation e.g. At risk of suspension/ expulsion from school, difficulties or improvements in interaction with education/ training staff. Learning difficulty, minor transport or housing problems. Accessing employment assistance/ training.	Active Participation e.g. Regular attendance, good access to school or training facility, participates in school or training activities. Participates in school or training activities. Participating in employment programs, maintaining work, sustained access to Centrelink.	Demonstrated Participation e.g. Regular attendance, consistent completion of tasks, participation/ re-engaged in school/ training activities for min 10 weeks. Achieving qualifications, good experience and references, independent with transport and housing.
Impact	How does the situation impact on their well-being?	Situation has significant negative impact e.g. Very limited literacy and numeracy, significant barrier to completing education or training, very limited future employment options because of education	Situation makes focus on educational/ training goals difficult e.g. Low literacy and numeracy, significant barrier to completing education or training, very limited future employment options because of education	Situation makes focus on educational/ training goals a bit hard e.g. Adequate literacy and numeracy, low barriers/ some opportunities to complete education or training, seek employment in the future	Situation supports achievement of educational/ training goals e.g. No difficulties with literacy or numeracy, education enables to access or will provide future options in training or employment	Situation enhances achievement of educational/ training goals e.g. Education/ training or work enhance other areas in life and will provide future options, good literacy and numeracy skills.

Family Relationships		1 Could be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the situation with family relationships?	<u>Unstable</u> e.g. No supportive relationships within family, constant conflict / volatile relationships, identified domestic violence, abuse or neglect, no access to recreation activities as a family	<u>Limited Support</u> e.g. Limited supportive relationships within family, frequent conflict in relationships, at risk of domestic violence, abuse or neglect limited access to recreation activities as a family	<u>Some support</u> e.g. Relationships within family are ok at times, challenging or rebuilding relationships with family, some opportunities to access to recreation activities as a family	<u>Stable</u> e.g. Stable relationship within family, accessing recreation activities as a family	<u>Stable and Supportive</u> e.g. Good relationships within family, supportive network of extended family, participation in recreation activities as a family
Impact	How does the situation impact on their well-being?	Family relationship makes focus on goals <u>unlikely</u>	Family relationship makes focus on goals <u>difficult</u>	Family relationship makes focus on goals <u>somewhat likely</u>	Family relationship <u>supports</u> focus on and achievement of goals	Family relationship <u>enhances</u> focus on and achievement of goals
Social Connections		1 Could be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the current level of social connection with peers ?	<u>Limited social connections</u> e.g. Lacking supportive relationships; interactions or contact with peers, not accessing social/ recreational activities; no or limited access to public or private transport	<u>Loose social connections</u> e.g. Limited relationships, interactions or contact with peers, not accessing social/ recreational activities; limited access to public or private transport	<u>Some social connections</u> e.g. Some supportive relationships, interactions or contact with peers, accessing social/ recreational activities; inconsistent access to public or private transport	<u>Reasonable social connections</u> e.g. Supportive relationships, interactions or contact with peers, accessing social/ recreational activities; accessing public or private transport	<u>Excellent social connections</u> e.g. A wide network of friends and community relationships, participating in social/ recreational activities; accessing transport
Impact	How does the situation impact on their well-being?	Poor social connections makes focus on goals <u>unlikely</u> e.g. Socially isolated; dependent on family relationship(s)	Low social connections makes focus on goals <u>difficult</u> e.g. Socially isolated; mostly dependent on family relationship(s)	Some social connections makes focus on goals <u>somewhat likely</u> e.g. Challenging or engaging in relationships with peers or others in the community	Social connections <u>supports</u> focus on achievement of goals e.g. Good relationships with peers and others in the community	Social connections <u>enhances</u> focus on achievement of goals e.g. Maintained relationships with peers and others in the community

Physical Health		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the client's current health situation?	Condition is in <u>crisis</u> <i>e.g. Hygiene, nutrition, exercise, heavy smoking), risky sexual behaviour, severe dental issues; morbidly obese (BMI >35), frequent and serious poorly controlled chronic illness (diabetes, asthma etc.)</i>	Condition is <u>unmanaged</u> <i>e.g. Hygiene, nutrition, exercise, heavy smoking), risky sexual behaviour, serious dental issues; obese (BMI >30), poorly controlled chronic illness (diabetes, asthma etc.)</i>	Condition is <u>not well managed</u> <i>e.g. Hygiene, nutrition, exercise, smoking, risky sexual behaviour, some dental issues, at risk of obesity; overweight (BMI >25), inconsistent management/prevention of chronic illness (diabetes, asthma etc.)</i>	Condition is <u>managed</u> <i>e.g. Reasonable hygiene, nutrition, exercise, social smoking, etc., good sexual health practice, routine dental hygiene; good weight (BMI 23-25), good management of chronic illness (diabetes, asthma etc.)</i>	Condition is <u>well managed or absent</u> <i>e.g. Good hygiene, nutrition, exercise, ceased smoking, safe sexual health, good dental hygiene and treatment access; good weight (BMI 19-23), good prevention and early intervention of chronic illness (diabetes, asthma etc.)</i>
Impact	How does the situation impact on their well-being?	Health situation makes focus on goals <u>unlikely</u> <i>e.g. Consistently intoxicated, lengthy irregular attendance; regular, lengthy hospitalisations</i>	Health situation makes focus on goals <u>difficult</u> <i>e.g. Regularly intoxicated, irregular attendance; lengthy hospitalisations</i>	Health situation makes focus goals <u>somewhat likely</u> <i>e.g. Occasionally intoxicated, some days off school, work or training</i>	Health situation <u>supports</u> achievement of goals <i>e.g. Never intoxicated at school/training; regular attendance; few days off school</i>	Health situation <u>enhances</u> achievement of goals <i>e.g. Never intoxicated at school/training; regular</i>
My Drug and Alcohol Use		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What are the substances that the client uses?	Multiple simultaneous drug use/chronic use of Class A or B substances <i>e.g. Alcohol, tobacco, cannabis, inhalants, ice, illegal prescription drugs. No regard for drug interaction. Unsafe methods</i>	Multiple non-simultaneous drug use/chronic use of Class C substance <i>e.g. Alcohol, tobacco, cannabis, inhalants, ice, illegal prescription drugs. Multiple drug types not taken simultaneously. Unsafe usage methods</i>	Controlled drug use <i>e.g. Alcohol, tobacco, cannabis, inhalants, ice, illegal prescription drugs interactions known. Understands and implements harm minimisation usage methods</i>	Substance <u>under control</u> <i>e.g. Alcohol, tobacco, cannabis, . Regard for drug interaction. Understands and uses harm minimisation methods.</i>	No usage
	What is the clients' usage pattern?	Compulsive use Used today/ Daily usage <i>e.g. Frequent high doses resulting in psychological/ physiological dependence, used within the previous 24 hours</i>	Situational use Used this week <i>e.g. Used when there's a need to be alert, calm, to relieve anxiety, physical or emotional pain; used on multiple occasions this week, not daily</i>	Recreational use Used this month <i>e.g. Controlled use on social occasions; used weekly, 2 or 3 times a week</i>	Experimental use Used last 2 months ago <i>e.g. Short term use motivated by curiosity or desire to experience new feelings or moods; mostly weekend usage, social occasions</i>	No usage in the last 6 months <i>e.g. Extended periods of abstinence or not using at all</i>
	What is the clients' family and peers usage of drugs and alcohol?	Family/ peers encourage/supply drugs <i>e.g. Consistent exposure high levels of drug use with family/peers, drug use encouraged/supported</i>	Family/peers use consistently <i>e.g. Exposure to high levels of drug use, drug use not encouraged but not discouraged</i>	Family/peers use sometimes <i>e.g. Exposure to moderate levels of drug use, drug use discouraged</i>	Family/peers engage in occasional social drug use <i>e.g. Exposure to low level responsible drug use, drug use discouraged</i>	Family/peers don't use <i>Supportively discourage use</i>
Impact	How does the situation impact on their well-being?	Substance use makes focus on other goals <u>impossible</u> <i>e.g. Consistently intoxicated, unable to get to school/work or appointments</i>	Substance use makes focus on other goals <u>unlikely</u> <i>e.g. Regularly intoxicated, unable to consistently attend school/work or appointments</i>	Substance use makes focus on other goals a <u>bit difficult</u> <i>e.g. Occasionally intoxicated, some days of school/work or missed appointments</i>	Substance use <u>does not prevent</u> achievement of other goals	No substance use

Mental Health		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the client's current mental health situation?	In <u>critical</u> crisis e.g. Hospitalization due to psychosis or manic episode (depressive anxiety; schizophrenia); behaviour disorders (ADHD, ODD; conduct disorder) or suicide attempts, at critical risk of harm	In <u>crisis</u> e.g. Experiencing of psychosis or manic episode (depressive anxiety; schizophrenia); behaviour disorders (ADHD, ODD, conduct disorder); suicidal ideation, at significant risk of harm	<u>Resolving</u> situation/ getting worse e.g. Accessing treatment/therapy/ medication	Situation mainly <u>resolved</u> e.g. Maintaining treatment plan	<u>No</u> problem or <u>well managed</u> mental health wellbeing e.g. No symptoms, good level of mood, behavioural and conduct
Impact	How does the situation impact on their well-being?	Mental Health has a <u>serious</u> impact on current and future options e.g. Two or more of: difficulty in maintaining relationships, personal care or distorted perception of reality and cognition	Mental Health has a <u>moderate</u> impact on current and future options e.g. One of: difficulty in maintaining relationships, personal care or distorted perception of reality cognition	Mental Health has a <u>low</u> impact on current and future options e.g. Resolving mental health status allows for rebuilding damaged relationships, maintaining personal care and uptake of education or employment opportunities	Mental Health <u>supports</u> current and future options e.g. Effort previously expended in resolving mental health status is now able to be focused into achievement of educational/ training goals	Mental Health <u>enhances</u> current and future options e.g. Good coping plans and distress tolerance, coping skills have been generalised to other areas
Culture		1 Could be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the current level of cultural connection?	<u>Limited</u> cultural connections due to: Social isolation; family breakdown; exposure to discrimination, racism, bullying; experience of adversity, trauma; limited language/ networks; financial stress; settlement/ migration or refugee experience	<u>Loose</u> cultural connections due to: Social isolation; family breakdown; exposure to discrimination, racism, bullying; experience of adversity, trauma; limited language/ networks; financial stress; settlement/ migration or refugee experience	<u>Some</u> cultural connections e.g. Some social isolation or making connections; some family issues or being addressed; some exposure to- discrimination/ racism/ bullying/ trauma/ settlement or migration experience and beginning to recognise issue	<u>Reasonable</u> cultural connections e.g. Making cultural (language/ spiritual/ custom/ community) connections; addressing negative experiences; has reasonable cultural supports	<u>Stable</u> cultural connections e.g. Maintaining cultural (language/ spiritual/ custom/ community) connection; managing negative cultural experiences; stable cultural connections in the community
Impact	How does the situation impact on their well-being?	Poor cultural connections makes focus on goals <u>unlikely</u>	Loose cultural connections makes focus on goals <u>difficult</u>	Some cultural connections makes focus on goals <u>somewhat likely</u>	Cultural connections <u>supports</u> focus on achievement of goals	Cultural connections <u>enhances</u> focus on achievement of goals

Parenting		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the client's current parenting situation?	Limited Parenting Capacity: e.g. Basic care, safety, emotional warmth, stimulation, guidance/ boundaries, stability of child is compromised. Limited Child Development: Child(ren's) health, education, emotional/behavioural/social development, identity and self-care skills Limited Pregnancy Care: Antenatal care, low/no risk taking behaviours, (Males: Unsupportive of partner during antenatal period)	Minimum Parenting Capacity: e.g. Basic care, safety, emotional warmth, stimulation, guidance/ boundaries, stability is provided Minimum Child Development: Child(ren's) health, education, emotional/behavioural/social development, identity and self-care skills Minimum Pregnancy Care: Antenatal care, low/no risk taking behaviours (Males: Somewhat supportive of partner during antenatal period)	Some Parenting Capacity: e.g. Basic care, safety, emotional warmth, stimulation, guidance, stability is provided Some Child Development: Child(ren's) health, education, emotional/behavioural/social development, identity and self-care skills Some Pregnancy Care: Antenatal care, low/no risk taking behaviours (Males: Generally supportive of partner during antenatal period)	Good Parenting Capacity: e.g. Basic care, safety, emotional warmth, stimulation, guidance/ boundaries, stability is provided Good Child Development: Child(ren's) health, education, emotional/behavioural/social development, identity and self-care skills Good Pregnancy Care: Antenatal care, low/no risk taking behaviours (Males: Consistently supportive of partner during antenatal period)	Great Parenting Capacity: e.g. Basic care, safety, emotional warmth, stimulation, guidance/ boundaries, stability is provided Great Child Development: Child(ren's) health, education, emotional/behavioural/social development, identity and self-care skills Great Pregnancy Care: Antenatal care, low/no risk taking behaviours (Males: Consistently supportive of partner during antenatal period)
Impact	How does the situation impact on their well-being?	Focus on parenting unlikely e.g. Child Safety involvement, no child care, custody disputes, drug and alcohol issues, unmanaged disability/ mental health issues, financial stress	Focus on parenting difficult e.g. Child Safety involvement, no child care, custody disputes, drug and alcohol issues, unmanaged disability/ mental health issues, financial stress	Parenting issues have minor impact e.g. Child Safety involvement reduced/ resolved, child care, custody being resolved, drug/ alcohol issues, mental health issues, disability being managed	Parenting abilities support achievement of own goals e.g. Child care in place, children's issues are well-managed, accessing support for personal or parenting needs	Parenting enhances family life & achievement of goals e.g. Parenting has positive impact on family life and personal aspirations
Disability		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
Presenting Situation	What is the client's current disability situation?	Unmanaged diagnosed or undiagnosed condition e.g. Speech & language, ASD, visual & hearing impairments, learning difficulties, sensory and auditory processing issues, cognitive, physical or functional disability	Condition not well managed diagnosed or undiagnosed e.g. Speech & language, ASD, visual & hearing impairments, learning difficulties, sensory and auditory processing issues, cognitive, physical or functional disability	Inconsistent management of diagnosed or undiagnosed condition e.g. Speech & language, ASD, visual & hearing impairments, learning difficulties, sensory and auditory processing issues, cognitive, physical or functional disability	Condition reasonably managed e.g. Speech & language, ASD, visual & hearing impairments, learning difficulties, sensory and auditory processing issues,, cognitive, physical or functional disability	Condition well managed or absent e.g. Speech & language, ASD, visual & hearing impairments, learning difficulties, sensory and auditory processing issues,, cognitive, physical or functional disability
Impact	How does the situation impact on their well-being?	Situation makes focus on goals unlikely e.g. significant barriers to: completing education or training, other life skills	Situation makes focus on goals difficult e.g. difficulty in: completing education or training, other life skills because of mismanaged disability	Situation makes focus on goals somewhat likely e.g. adequate literacy and numeracy, low barriers/ some opportunities to: complete education or training, obtain other life skills	Situation supports achievement of goals e.g. no difficulties with literacy or numeracy, situation enables access to future options in life	Situation enhances achievement of goals e.g. management of disability enhance other areas in life and will provide good future options.

Safety and the Law		1 Can be a lot better	2 Can be better	3 OK	4 Doing well	5 Doing great
	What is the client's current involvement with Youth Justice/ criminal justice agencies?	<u>High Risk</u> e.g. Multiple prior criminal history (in detention/ police custody), recent offending, court order, high risk environment (peer offending, disengaged from training/ employment, regular use of drugs or alcohol or violence)	<u>Moderate Risk</u> e.g. One prior criminal history (in detention/ police custody), recent or current court order, moderate risk environment (limited support, at risk of or disengagement, regular use of AOD, some aggression or violence)	<u>Low Risk</u> e.g. recent or current court order, police caution, low risk environment (some support, no offending history, low motivation to engage with training or employment, low drug or alcohol use, low aggression/violence)	<u>Protective Factors</u> e.g. Completed court order, no offending or involvement with police in the last 6mths, living in a supportive environment, engaged in education/ training, employment, reduced drug or alcohol, no display of aggression or violence < 6mths	<u>Good Protective Factors</u> e.g. No offending or involvement with police in the last 12mths, lives in a supportive place, engaged in training/ employment, no AOD, no display of aggression or violence < 12mths
Impact	How does the situation impact on their well-being?	Situation makes focus on educational/ training goals <u>unlikely</u> e.g. Lack of stability; restrictions due to YJ order; interrupts ability to achieve goals; causes significant distress	Situation makes focus on educational/ training goals <u>difficult</u> e.g. Lack of stability; restrictions on employment due to YJ order; interrupts ability to achieve goals; causes some distress	Situation makes focus on educational/ training goals <u>somewhat likely</u> e.g. Adequate stability; compliance with YJ order does not interrupt ability to achieve goals; causes occasional distress	Situation <u>supports</u> achievement of educational/ training goals e.g. Good stability of placement; YJ order nearing completion; able to participate in range of activities; gets support from YJ officers	Situation <u>enhances</u> achievement of educational/ training goals e.g. Stable and consistent placement; YJ order completed; able to participate in range of activities; no distress