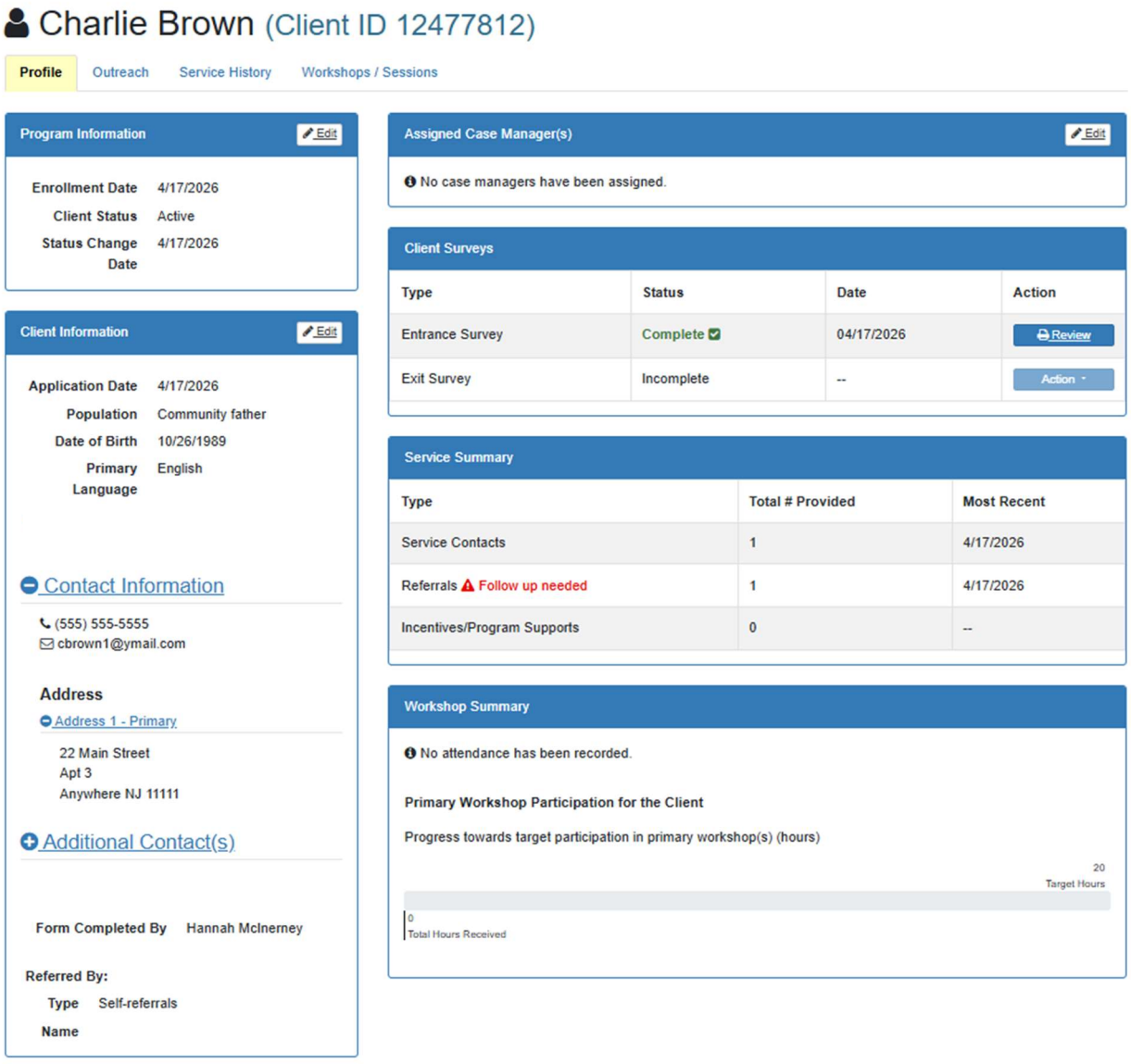
nFORM Client Profile (screen C3)

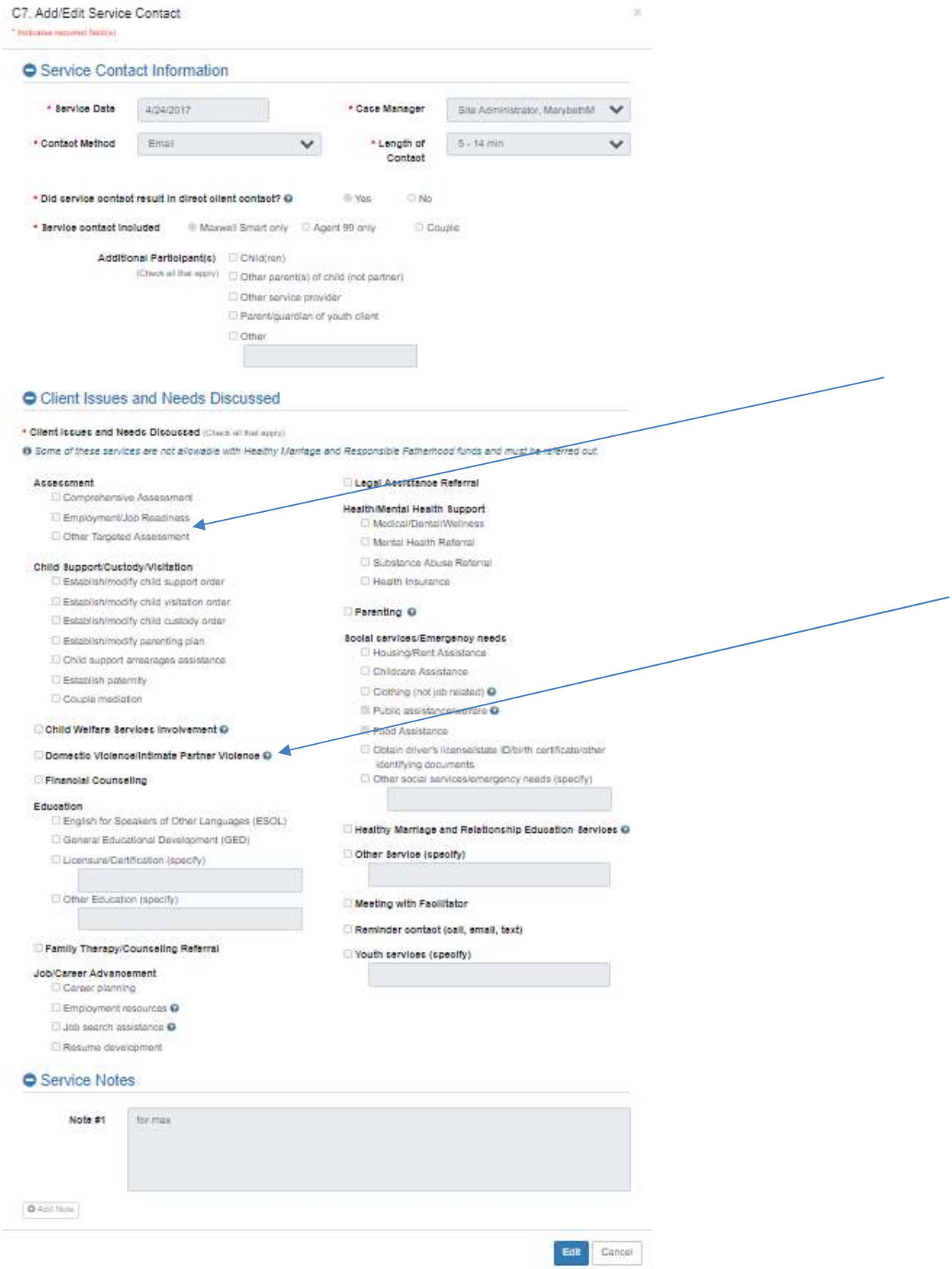
ACF will remove the statement indicating whether or not a client has been screened for intimate partner violence or teen dating violence from the Client Information box on the Client Profile. This statement previously appeared below the Primary Language indicator.

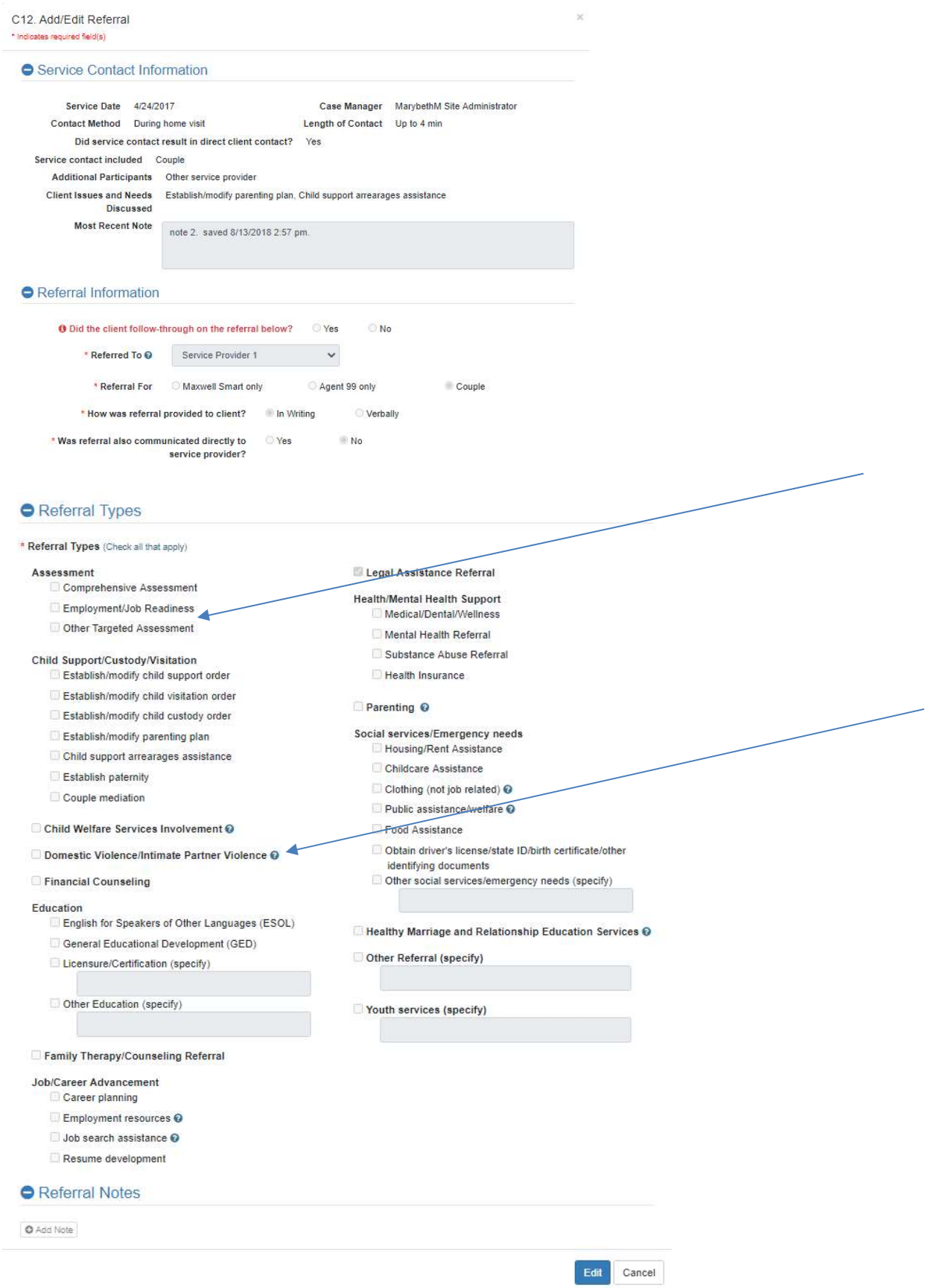


nFORM Screens C7. Add/Edit Service Contact and C12. Add/Edit Referral

ACF will modify screens C7 and C12. On both screens, an optional field labeled "Domestic Violence/Intimate Partner Violence (DV/IPV) Screening" will be added to the Assessment section on the upper left, immediately below "Employment/Job Readiness". In addition, the existing field labeled "Domestic Violence/Intimate Partner Violence" will be revised to "Domestic Violence/Intimate Partner Violence (DV/IPV) Services".

Arrows on the screen shots below indicate where these changes will be made.


C7. Add/Edit Service Contact
Service Contact Information
* Service Date
4/24/2017
* Case Manager
Site Administrator, MarybethM
* Contact Method
Email
* Length of Contact
5 - 14 min
* Did service contact result in direct client contact?
Yes
No
* Service contact included
Maxwell Smart only
Agent 99 only
Couple
Additional Participant(s)
(Check all that apply)
Child(ren)
Other parent(s) of child (not partner)
Other service provider
Parent/guardian of youth client
Other
Client Issues and Needs Discussed
* Client issues and needs discussed (Check all that apply)
Some of these services are not allowable with Healthy Marriage and Responsible Fatherhood funds and must be referred out.
Assessment
Comprehensive Assessment
Employment/Job Readiness
Other Targeted Assessment
Child Support/Custody/Visitation
Establish/modify child support order
Establish/modify child visitation order
Establish/modify child custody order
Establish/modify parenting plan
Child support arrearages assistance
Establish paternity
Couple mediation
Child Welfare Services involvement
Domestic Violence/Intimate Partner Violence
Financial Counseling
Education
English for Speakers of Other Languages (ESOL)
General Educational Development (GED)
Licensure/Certification (specify)
Other Education (specify)
Family Therapy/Counseling Referral
Job/Career Advancement
Career planning
Employment resources
Job search assistance
Resume development
Legal Assistance Referral
Health/Mental Health Support
Medical/Dental/Wellness
Mental Health Referral
Substance Abuse Referral
Health Insurance
Parenting
Social services/Emergency needs
Housing/Rent Assistance
Childcare Assistance
Clothing (not job related)
Public assistance/welfare
Food Assistance
Obtain driver's license/state ID/birth certificate/other identifying documents
Other social services/emergency needs (specify)
Healthy Marriage and Relationship Education Services
Other Service (specify)
Meeting with Facilitator
Reminder contact (call, email, text)
Youth services (specify)
Service Notes
Note #1
for max
Add Note
Edit
Cancel


C12. Add/Edit Referral
* Indicates required field(s)
Service Contact Information
Service Date 4/24/2017
Case Manager MarybethM Site Administrator
Contact Method During home visit
Length of Contact Up to 4 min
Did service contact result in direct client contact? Yes
Service contact included Couple
Additional Participants Other service provider
Client Issues and Needs Discussed Establish/modify parenting plan, Child support arrearages assistance
Most Recent Note
note 2. saved 8/13/2018 2:57 pm.
Referral Information
Did the client follow-through on the referral below? Yes No
* Referred To Service Provider 1
* Referral For Maxwell Smart only Agent 99 only Couple
* How was referral provided to client? In Writing Verbally
* Was referral also communicated directly to service provider? Yes No
Referral Types
* Referral Types (Check all that apply)
Assessment
Comprehensive Assessment
Employment/Job Readiness
Other Targeted Assessment
Child Support/Custody/Visitation
Establish/modify child support order
Establish/modify child visitation order
Establish/modify child custody order
Establish/modify parenting plan
Child support arrearages assistance
Establish paternity
Couple mediation
Child Welfare Services Involvement
Domestic Violence/Intimate Partner Violence
Financial Counseling
Education
English for Speakers of Other Languages (ESOL)
General Educational Development (GED)
Licensure/Certification (specify)
Other Education (specify)
Family Therapy/Counseling Referral
Job/Career Advancement
Career planning
Employment resources
Job search assistance
Resume development
Legal Assistance Referral
Health/Mental Health Support
Medical/Dental/Wellness
Mental Health Referral
Substance Abuse Referral
Health Insurance
Parenting
Social services/Emergency needs
Housing/Rent Assistance
Childcare Assistance
Clothing (not job related)
Public assistance/welfare
Food Assistance
Obtain driver's license/state ID/birth certificate/other identifying documents
Other social services/emergency needs (specify)
Healthy Marriage and Relationship Education Services
Other Referral (specify)
Youth services (specify)
Referral Notes
Add Note
Edit
Cancel