

**Eligibility Determination Checklist**  
**Specific Foster Care Services for Children in Need of Services**  
**Funded through the Comprehensive Services Act (CSA)**  
*Updated effective July 1, 2008*

The Family Assessment and Planning Team, or approved alternative multidisciplinary team, will use this standard checklist to help provide consistent application in determining eligibility across all agencies and communities. Localities may wish to use this checklist to document that the decision regarding the eligibility of the child named below was made in accordance with the “Interagency

Guidelines for Specific Foster Care Services for Children in Need of Services Funded through the Comprehensive Services Act.” This checklist does not apply to abused or neglected children as defined in §63.2-100, **as they are already eligible for** foster care prevention services.

**Name of Child:** \_\_\_\_\_

*The child must meet all four of the following criteria* to be eligible for services under the guidelines.

The team, in accordance with the policies of the CPMT, determines and documents that there are sufficient facts that the following are met:

**Criterion 1 (Check only one box)**

*The child meets the statutory definition of a “child in need of services,”* specifically, “the child’s behavior, conduct, or condition presents or results in a serious threat to the well being and physical safety of the child, or the well-being and physical safety of another person if the child is under the age of 14 (*Code of Virginia*, §16.1-228)

A court has found that the child is in “need of services” in accordance with §16.1-228;  
Date of court finding/Name of Judge: \_\_\_\_\_

The FAPT or approved multidisciplinary team has determined that the child’s behavior, conduct, or condition meets the statutory definition above and is of sufficient duration, severity, disabling and/or self-destructive nature that the child requires services.

The child **does not** meet the statutory definition of a “child in need of services” or either of the two options above.

Describe in **specific terms** the facts and time frames on which the Team based its conclusion that the child’s behavior, conduct or condition presents, or results in a serious threat to the well-being and physical safety of the child, or another person if the child is under the age of 14:

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**Criterion 2 (CSA Eligibility Criteria per §2.2-5212, Code of Virginia) (Check One)**

The child  **does** /  **does not** have *emotional and/or behavioral problems* where *either*:

a. the child's problems:

- have persisted over a significant period of time or, though only in evidence for a short period of time, are of such a critical nature that intervention is warranted; and
- are significantly disabling and are present in several community settings, such as at home, in school or with peers; and
- require services or resources that are unavailable or inaccessible, or that are beyond the normal agency services or routine collaborative processes across agencies, or require coordinated interventions by at least two agencies or

b. the child is currently in, or at imminent risk of entering, purchased residential care; and requires services or resources that are beyond normal agency services or routine collaborative processes across agencies; and requires coordinated services by at least two agencies.

Briefly summarize the facts that the Team used to reach its conclusion:

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**Criterion 3 (Check One)**

The child  **does** /  **does not** *require services*:

a. to address and resolve the immediate crisis that seriously threatens the well being and physical safety of the child or another person; and

b. to preserve and/or strengthen the family while ensuring the safety of the child and other persons; and

c. the child has been identified by the Team as needing:

- services to prevent or eliminate the need for foster care placement. Absent these prevention services, foster care is the planned arrangement for the child or
- placement outside of the home through an agreement between the public agency designated by the CPMT and the parents or legal guardians who retain legal custody. The discharge plan for the child to return home is included in the IFSP.

Briefly summarize the facts that the Team used to reach its conclusion:

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**Criterion 4 (Check One)**

The goal of the family is / is **not** to maintain the child at home (for foster care prevention services) or return the child home as soon as appropriate (for parental agreements).

Briefly summarize the facts, including sources and dates of information that the Team used to reach its conclusion:

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**Recommendation of Team:**

- Child may more appropriately be served through another route**
- This child should be referred to the local Department for Social Services.**
- This child should be referred for evaluation for inpatient psychiatric treatment.**

**Other:** \_\_\_\_\_

**Conclusion of Team (Check only one)**

- There are not sufficient facts that this child meets all 4 of the above criteria required for CSA funding.**
- There are sufficient facts that this child meets all 4 of the above criteria required for CSA funding.**

**Signatures**

**Team Chair**

**Date**

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**Other Team Member Date**

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