

## 886A Tip Sheet

### General Tips

Referrals go out to dozens of agencies each referral episode. Keep your audience in mind when writing, both in terms of who will be reading them, but also how many people will be reading them.

- Write in a way that provides the necessary information but also protects and respects the privacy of the child/youth and their family.
- Be cautious with your word choice and tone. Negative perceptions of a child/youth or their history can leak into the written word inadvertently.
  - Always use strengths-based, trauma-informed language taking care not to blame the child/youth for their trauma or reactions to it.

Be thorough! Answer every question, even if it's with an "N/A".

- Leaving fields blank leaves the impression you don't know the information being asked or are simply choosing not to provide it. "N/A" will make sure providers know that this topic is not applicable in this case.

If you don't know the answer to a question, ASK!

- Treatment providers, previously involved DCBS staff, caregivers, the child/youth, biological families, etc. likely know the answers and can fill in gaps.

Please use care to avoid duplicating the same information multiple times in multiple sections throughout the 886A.

Keep in mind that the treating provider will be completing a comprehensive assessment of the youth's strengths and needs to inform treatment planning. The 886a is not that assessment; it is a referral for treatment. The referral should not contain all of the information needed to provide care and therapeutic services to the child; it should contain enough information for a provider to decide if they are able to accept placement/treatment of the youth.

### Section A

Height, weight, and gender identity are very important pieces of information, do not leave these blank!

- You can obtain information from recent hospitalization or physician records for height and weight.
- You can also talk to the youth regarding their gender identity.
  - If a youth identifies in a way that is different than their gender assigned at birth, or prefers a different name, please use that name and corresponding pronouns throughout the 886A.

### Section C

ONLY select the reason(s) you are submitting a new 886A (Level of Care Assignment, QRTP Assessment, Placement Referral).

- Selecting multiple options when you really have a single purpose slows down response time.

If you are submitting a new 886A for placement purposes, under “Explain why a placement is needed at this time”

- Provide a general summary and include the services the child/youth will need in their next placement.

#### Section D

Please respond to the prompt “Provide description of maltreatment, including dates and individuals involved in maltreatment.”

- This question is misleading and upcoming changes to the wording will provide clarification.
- When writing the response to this question, provide a high-level summary of the child/youth’s experiences of trauma/maltreatment with no identifying information regarding other individuals.
- Additional or more specific information necessary for treatment purposes can be provided as needed to caregivers and treatment providers upon placement.

#### Section E

This section is your chance to really highlight the great things about the child/youth. It is also a great place to incorporate the child’s/youth’s voice.

- Question 1: EVERYONE has strengths! Be mindful in identifying what is great about the child/youth you are working with and share those things here.
- Question 2: This is a great place to share what a child/youth is interested in and any activities they enjoy participating in. If you are not sure or have not talked with the youth recently about these things, please do so before completing this section.
- Question 3: Focus on anything the youth really needs in their next placement to increase success.
  - This includes any fears, supervision, or accommodation needs. Be clear and specific when you document needed accommodations.
- Question 4: This response allows you to share what the youth would like in a placement, or any additional needs not specified in Question 3.

#### Section F

It is very important to ensure you have appropriate documentation for youth with cognitive/intellectual functioning issues or who are suspected or have been diagnosed with Autism Spectrum Disorder (ASD).

- Question 1:
  - If you are aware of concerns, but do not yet have documentation to support those, please explain that clearly along with what the concerns are.
  - If there are no concerns regarding cognitive/intellectual functioning, it is good to state that here as well.

- Question 2: Please include this information in its entirety when you have psychological testing available.
  - Always obtain copies of psychological reports and keep them in the child's/youth's file.
- Question 3:
  - If there are suspicions of ASD and testing is needed, please state that and summarize why you think testing is needed.
  - If there is confirmation of ASD, please document that here along with when and how it was diagnosed whenever possible.

#### Section G/H

Only select check boxes that apply to the child/youth you are writing about and pay attention to "Recent" versus "History".

- Recent means a behavior or issue that has occurred within the last six (6) months.
- History means a behavior or issue that has occurred more than six (6) months ago, but not more recently than that.

Use the narrative section to describe each behavior/issue selected in the table as well as the frequency and severity of occurrences and last known occurrence.

- Work in reverse chronological order from most recent issues to those that are historical. This helps the reader focus on current issues, while still providing information about any major historical behaviors.
- Add context to behavioral incidents and connect them back to the child's/youth's history of trauma where you can.

#### Section J

It is very important that you include all mental/behavioral health AND physical health diagnoses here!

#### Section L

Please make sure this is up to date with services the youth is currently receiving in placement including medication management, therapies, etc.

#### Section N

Make sure this is up to date.

- Medications can change a lot. If you are unsure, please ask the treatment provider or caregiver for a current list.

#### Section P

This information does not pre-populate, make sure you fill this out accurately and completely!

<b>Section Q</b>
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Please fill this out accurately and completely.

- Use the narrative question below to describe any court orders in effect, upcoming court dates, etc.

<b>Section R</b>
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Include information about what the contact/visitation should look like.

- This is a good place to identify any supports for visitation as applicable (example: If the family is able to travel a certain portion of the distance or if DCBS can assist with transport) as this information can be very helpful if a placement far from a child's/youth's home region is considering.

<b>Section S</b>
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For question 3, please provide a high-level overview of these issues with no identifying information.