

**PART A: LOCATOR INFORMATION**

<b>Mediators: Please provide <u>both</u> case record numbers (JQ &amp; FACTS)</b>	
MEDIATOR:	
COURT CASE JQ#: D - _____ - JQ - _____ - _____ (Use complete case number. E.g., D-1314-JQ-2009-001)	
CYFD FACTS#: (From PPW, Supervisor or CCA)	
COUNTY:	
JUDICIAL DISTRICT:	
FAMILY NAMES:	
NAME OF YOUNGEST CHILD ON THE CASE:	
_____ (First)	_____ (Last)
<input type="checkbox"/> A MEDIATION TOOK PLACE ON (date) _____ <input type="checkbox"/> NO MEDIATION <input type="checkbox"/> To be rescheduled <input type="checkbox"/> Cancelled	

**PART B: FAMILY CHARACTERISTICS (please check)**

<b>REASON FOR REFERRAL</b> (Reasons for investigation or issues identified in the legal petition.)			
<input type="checkbox"/> Physical Abuse	<input type="checkbox"/> Neglect	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Sexual Abuse	<input type="checkbox"/> Emotional Abuse	<input type="checkbox"/> Unknown	

<b>FAMILY CHARACTERISTICS</b> (Relevant challenging family issues. Please check all that apply.)		
<input type="checkbox"/> Parent Mental Health	<input type="checkbox"/> Parents Developmental Issues	<input type="checkbox"/> Homelessness
<input type="checkbox"/> Child Mental Health	<input type="checkbox"/> Child Developmental Issues	<input type="checkbox"/> Victim is teen parent
<input type="checkbox"/> Parent Substance Abuse	<input type="checkbox"/> Ongoing Domestic Violence	<input type="checkbox"/> Ongoing Divorce or Custody issues
<input type="checkbox"/> Child Substance Abuse	<input type="checkbox"/> Ongoing Juvenile Justice case	<input type="checkbox"/> Criminal case file/pending
<input type="checkbox"/> Cultural/Religious Issues	<input type="checkbox"/> Teen Parents	<input type="checkbox"/> Other (specify):

<b>ETHNICITY</b>			
<input type="checkbox"/> Asian American	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> White/Caucasian	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Native American	<input type="checkbox"/> Pacific Islander	

**PART C: MEDIATION INFORMATION**

<b>DATE:</b> _____		<b>TIME:</b> _____			
<b>PRE-MEDIATION</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Indicate with whom you pre-mediated: (Check all that apply)</b>					
<input type="checkbox"/> Birth Parents <input type="checkbox"/> Foster Parents <input type="checkbox"/> Respondent Attorneys <input type="checkbox"/> CYFD Attorney <input type="checkbox"/> CYFD staff <input type="checkbox"/> GAL <input type="checkbox"/> Youth Attorney <input type="checkbox"/> Other (specify):					
<b>PRE-MEDIATION HRS:</b> _____ <b>MINS:</b> _____ // <b>FOLLOW-UP HRS:</b> _____ <b>MINS:</b> _____					
<b>MEDIATION SESSION HRS:</b> _____ <b>MINS:</b> _____					
<b>TOTAL MEDIATION SERVICES</b> HRS: _____ MINS: _____ (must match time on invoice)					
<b>TIMING</b> (please circle)	Open Adoption	Custody	Pre-Adjudicatory Hearing	Pre-Initial Judicial Review	Pre-Permanency Hearing
	Guardianship	Termination	OTHER (specify):		

**CHILDREN'S COURT MEDIATION PROGRAM (CCMP)- MEDIATION CASE RECORD**

<b>PARTIES PRESENT</b>							
	<b>Yes</b>	<b>No</b>	<b>NA</b>		<b>Yes</b>	<b>No</b>	<b>NA</b>
Respondent 1				CCA			
Respondent 2				Worker/PPW			
Respondent 3				CYFD Supervisor			
Attorney for Respondent 1				Relative(s)			
Attorney for Respondent 2				Foster Parent(s)			
Attorney for Respondent 3				CASA			
Child/ren				Adoption Worker			
GAL				Prospective Adoptive Parents			
Youth Attorney				Other: _____			

<b>CONSENSUS REACHED ON ISSUES</b>				
<b>ISSUES (Check all that apply)</b>	<b>Full Agreement</b>	<b>Partial Agreement</b>	<b>No Agreement</b>	<b>Not Addressed</b>
Custody/parenting (pre-legal cases)				
The Plea				
Parameters of the trial (legal issues, etc.)				
Safety issues (Safety Plan development)				
Treatment plan development				
Treatment plan review and compliance				
Placement options				
Services for parents				
Services for children				
Visitation				
Housing				
Changes needed in home conditions				
Relationships among the parties				
Parent-child relationship issues				
Concurrent planning				
Change of Plan				
Guardianship				
Relinquishment				
Open Adoption				
Post Adoption Contact Agreement (PACA)				
Termination of Parental Rights				
Other _____				

**MEDIATOR COMMENTS (Please attach sheet)**