

Profile Name: Central Qi (Only) - 2015

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Acknowledgment of Receipt of CPPN or Practitioner Form
Add'l Reviews to Comprehensive Physical Assessment
Admission Information
Admission/Release Checklist
Adult Sentencing Summary Form
Affidavit - Violation of Adult Court Ordered Juvenile Sanctions
Affidavit for Order to Take Into Custody
Affidavit of Diligent Effort
Affidavit/Petition for Violation of Probation
Assessment of Suicide Risk
Authority For Evaluation and Treatment
Authority for Evaluation and Treatment: Over 18
Bed Management Reports
|--[1-Full Access](#)
Case Notebook
Children/Family in Need of Services Referral Form/ Instructions
Chronic Physical Health Conditions Roster
Clinical Psychotropic Progress Note
Clinical Psychotropic Progress Note Part B
Close Supervision - Visual Checks Log
Commitment Management Conference Summary
Community Arbitration Screening Instrument
Comprehensive Physical Assessment
Confinement Assessment Report
Confinement Report
Controlled Medication Inventory Record
Counseling/Therapy Progress Note
Crisis Assessment
Custody of Individual Health Care Record
Detention
Detention Classification Form (2034)
Detention Release
Detention Risk Assessment
Detention Suicide Risk Parent/Guardian Notification
Document Upload
|--[2-Add](#)
|--[3-Edit \(mine\)](#)
|--[5-Delete \(mine\)](#)
Documentation of Non-Licensed MH Clinical Staff Person's Training in Assessment of SR
Electronic Commitment Package
Episodic Care (First Aid/Emergency) Care Log
Evidence Based Services
|--[2-General](#)
Facilities
Facility Entry Physical Health Screening
Facility Management System
|--[11-ReportsPermission](#)
Family Member Maintenance
Female Body Chart
Female Body Chart
Financial Statement for Determination of Cost Recovery
FMS Management Reports
Follow-Up Assessment of Suicide Risk
Form A - Petition For Requisition To Return A Runaway Juvenile
Form I - Requisition For Runaway Juvenile
Form IA & VI - Application For Compact Services
Form IA & VI - Instructions
Form II - Requisition For Escapee Or Absconder
Form III - Consent For Voluntary Return Of Out Of State Juvenile(s)

Form III - Instructions
Form IV - Instructions
Form IV – Parole Or Probation Investigation Request
Form IX – Quarterly Progress or Violation Report
Form V - Instructions
Form V - Report Of Sending State Upon Parolee Or Probationer Being Sent To The Receiving State
Form VIII - Home Evaluation Report
Guidelines for Obtaining Parental Signature on the AET
Health Discharge Summary – Transfer Note
Health Education Record
Health Related History
Health Services
Health Status Checklist
HIV Youth Consent
Home Detention Agreement
Human Trafficking Alerts Reports
Human Trafficking Screening Tool
Immunization Tracking Record
Independent Living Programs
Individual Determination Report
Individual Determination Report
Individual Health Care Record Checklist and Internal Quality Control
Individualized Mental Health/Substance Abuse Treatment Plan
Individualized Mental Health/Substance Abuse Treatment Plan Review
Infectious and Communicable Disease Form
Initial Mental Health/Substance Abuse Treatment Plan
Interstate Compact Placement Investigations Form
JR Act Screening Instrument
JR Memo to the Department of Children and Families
JR Notification of the Decision to not Involuntarily Commit to DCF
JR Secure Residential Program Notification Checklist
Judge’s Release Notification
Licensed Mental Health Professionals and Substance Abuse Professionals Direct Supervision Log
Limited Consent for Evaluation and Treatment
Male Body Chart
Male Body Chart
MAYSI Questionnaire
Medicaid - Child In Care Eligibility Review And Change Report Form
Medicaid - Child In Care Medicaid Application
Medicaid - Child In Care Request for Medicaid
Medicaid - Declaration of US Citizenship/Lawful Alien Status
Medicaid - Eligibility Review and Communication Form
Medical Information Request Letter
Medication Administration Record
Medication Administration Record Part B
Mental Health Alert - Observation Log
Mental Health/Substance Abuse On-Site Tracking Log
Mental Health/Substance Abuse Referral Summary
Mental Health/Substance Abuse Treatment Discharge Summary
Non-Secure/Home Detention Admission
Notice of Your Obligations to Register as a Sexual Offender
Notification of Escape
Notification of Escape
OHS Web Forms
|--09-Management Reports
Old Detention Risk Assessment
Oral Health Assessment
Order of Transfer to Non-Secure
Order Terminating Supervision
Out of State Travel Permit
Out of State Travel Permit - Instructions
PACT
PACT - Full (ADC)

PACT - Pre-screen (ADC)
PACT Classification
PACT MH/SA Screening Report and Referral
PACT Pre-Post Disposition Report
PACT Recommendation to State Attorney
PACT YES Plan
Parental Notification of Health Related Care: Vaccinations/Immunizations
Parental Notification of Health-Related Care: General
Parental Notification of Health-Related Care: Medications
Performance Summary
Personal and Health Related Information
Practitioner's Orders
Pre-Post Disposition Report
Pre-Release Notification and Acknowledgement
Pre-Release Notification and Acknowledgement
Prescription Medication Verification Checklist
Prevention Assessment Tool
|--08-View All
Prevention Web
|--14-View Prevention
|--15-View CivilCitation
Probation Resource Booking Reports
Probation Suicide Risk Screening Parent/Guardian Notification
Problem Court Orders
Problem Court Orders Referral Form
Problem List
Program Monitoring And Management
|--07- Regional Monitor
Progress Report Form
Reclassification Staffing
Recommendation to State Attorney
Refusal of Treatment Form
Relocation of a Juvenile Offender Letter
Report of On-Site Health Care by Non-Health Care Licensed Staff
Request for Parent/Guardian Signature Authority for Evaluation and Treatment
Resident Contract on Rules and Regulations
Resident Rights
Restitution Payment Form/Instructions
RPACT
RPACT - Management Reports (ADC)
RPACT - Performance Plan (ADC)
RPACT - Residential Reports (ADC)
RPACT Management Reports
RPACT Performance Plan Report
RPACT Performance Summary
RPACT Reports
RPACT Youth Needs Assessment Summary
Secure Detention Admission
Secure Detention Admission - Human Trafficking
Sexually Transmitted Infections Screening Form
SHO, IRT & Maximum Risk Level 10 Worksheets
Sick Call Index
Sick Call Request
Sick Call/Referral Log
Statistical Reports
Substance Abuse and Mental Health Assessment
Substance Abuse and Mental Health Assessment - Part I & Part II
Substance Abuse and Mental Health Assessment Summary of Findings and Recommendations
Substance Abuse and Mental Health Preliminary Screening
Suicide Precautions-Observation Log
Suicide Risk Screening Instrument
Suicide Risk Screening Instrument - Call Center
Suicide Risk Screening Instrument - Call Center Version

Suicide Risk Screening Instrument - General Directions
Suicide Risk Screening Parent/Guardian Notification
Summary of Off-Site Care
Supervision Plan
Supervision Risk Classification Instrument
Supervision Transfer Checklist
Supervision Transfer Summary
Treatment Flow Sheet: Asthma
Treatment Flow Sheet: Diabetes
Treatment Flow Sheet: General
Treatment Flow Sheet: Hypertension
Treatment Flow Sheet: Seizure Disorder
Treatment Flow Sheet: Tuberculosis / INH Therapy
Treatment Plan Sheet: Asthma
Treatment Plan Sheet: Diabetes
Treatment Plan Sheet: General
Treatment Plan Sheet: Hypertension
Treatment Plan Sheet: Seizure Disorder
Treatment Plan Sheet: Tuberculosis / INH Therapy
Tuberculosis Testing Log
Victim Notification of Release From Commitment
Violation of Supervision Affidavit
Waiver of Speedy Trial for Diversionary Program
Waiver Report
Youth Consent for Release of Substance Abuse Treatment
Youth Consent for Substance Abuse Treatment
Youth Consent for Substance Abuse Treatment RSAT or RSAT Overlay Services Program
Youth Records
Youth Requirements