

BSAS – Building Skills Plan Summary

This screen is used to display, modify and add information about the transitional living plan for a client involved with the Montana Foster Care Independence Program. This screen can only be updated by workers with a CBW (BSA Staff), CBS (BSA Supervisor) or SPG (Program Bureau; Foster Care Specialist) staff type.

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CAFSBSAS          BUILDING SKILLS PLAN SUMMARY          07/14/2016    12:22
USER ID : C74142CW  MODIFY                                PAGE NO: 001
CAPS ID : 00001602   00      NAME: BANANA, BONNIE

PLAN START DATE:          ANTICIPATED EMANCIPATION DATE: 06/15/2016
FC CLOSURE DATE: 06/30/2016    I.L. SERVICE END DATE:

I.L. GOAL: CFC  CONTINUE IN FC, FINISH HS ED OR GED
OBJECTIVE                                                    END DATE
GRADUATED FROM HIGH SCHOOL                                99/99/9999
OBTAIN SUMMER EMPLOYMENT                                99/99/9999
APPLY FOR FINANCIAL AID                                  99/99/9999

MENTOR NAME(S) : ANNIE APPLE
CASH STIPEND AMOUNT:
HOW TO CONTACT THE CHILD AFTER EMANCIPATION: BETTY BOOP (406) 444-5678

SHIFT+F1=MORE DETAIL                                     PATH:
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Field Descriptions (F12) indicates code lookup is available.

CAPS ID

This field will display the CAPS ID of the client who was entered on the SERN (Services List) screen.

NAME

This field will display the name of the person whose ID is displayed in the CAPS ID field.

PLAN START DATE

This field will display the start date of the SBSAP (BSA Transitional Living Plan) service entered on the SERN (Services Detail: Non-Payable) screen.

ANTICIPATED EMANCIPATION DATE

Enter the date of the client's 21st birthday.

FC CLOSURE DATE

Enter the date the client aged out of foster care. *This would be the end date for the last foster care placement on the CPHL (Client Placement History List) screen.*

I.L. SERVICE END DATE

Enter the date of the client's 21st birthday.

I.L. GOAL (F12)

Enter the independent living goal for the client.

OBJECTIVE

Enter the individual independent living objectives for the client. *Up to seven (7) individual objectives can be entered. These are free-form text fields.*

END DATE

Enter the anticipated end date for the objective. If the objective has already been achieved, enter the date it was achieved.

MENTOR NAME(S)

Enter the name of the client's program mentor, if applicable. There is room for three names.

CASH STIPEND AMOUNT

This field will display the total amount that has been paid in cash stipends for this client. *This is the SBSAC (BSA Youth Cash Stipend) service entered on the SERP (Services Detail: Payable) screen. Once these payments are posted, the cash stipend amount field will be updated.*

HOW TO CONTACT THE CHILD AFTER EMANCIPATION

Enter the address or phone number contact information for the client.

Additional Information

In order to access the BSAS screen, a SBSAA (BSA Skills Assessment) service must first be entered on the SERN (Services Detail: Non-Payable) screen.

Once the SBSAA service is entered, then a SBSAP (BSA Transitional Living Plan) service must be entered. When you press enter to update the SBSAP service, the system will automatically take you to the BSAS screen.