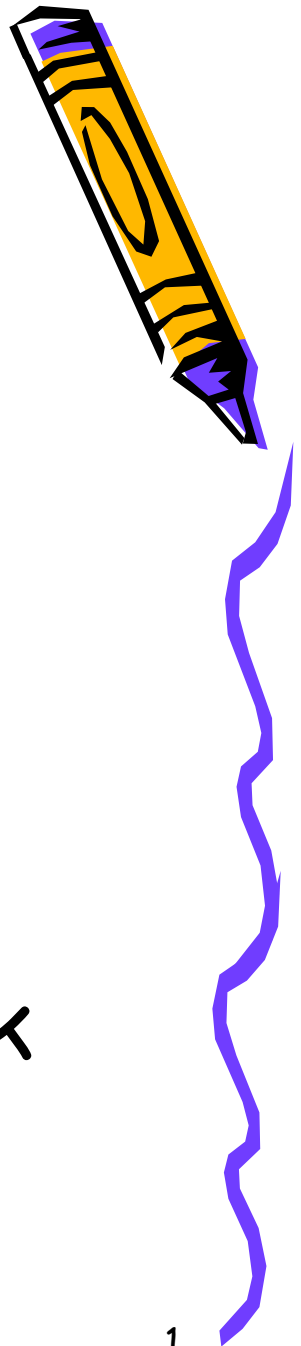




# Florida Safe Families Network Overview



# FSFN is:

- Florida's Statewide Automated Child Welfare Information System (SACWIS)
- Replaced Homesafenet (HSN)
- Official Child Welfare Case Record



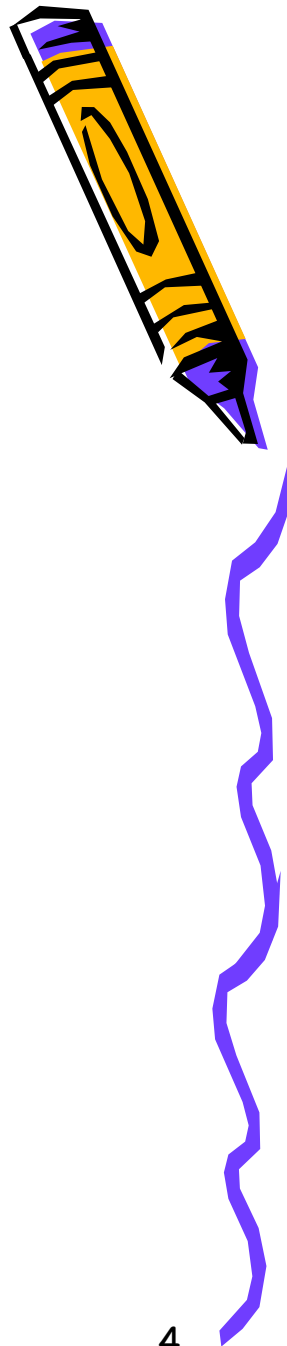
# FSFN is utilized by:

- Florida Abuse Hotline
- Child Protective Investigators
- CBC Case Managers
- Adult Protective Investigators
- Legal
- Licensing
- DCF Administration



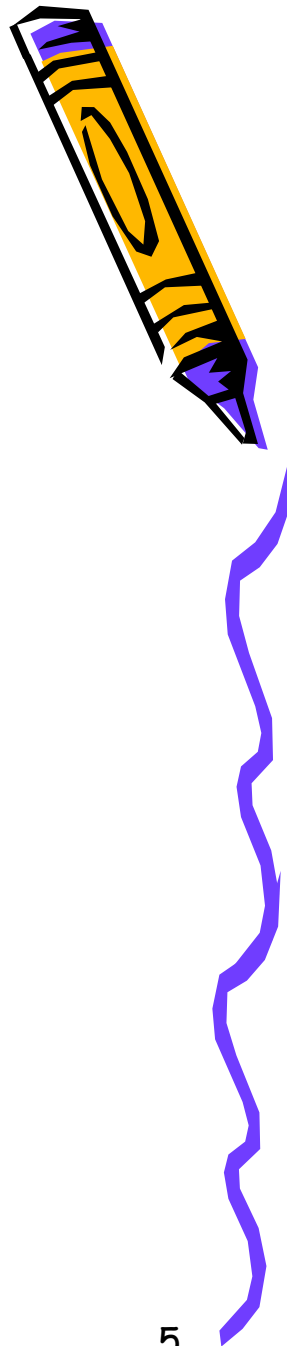
# Functionality Includes:

- Historical Abuse Records
- Current Placement Information
- Educational Providers
- Medical Information
- Missing Children Reporting Forms
- Photographs
- Management & Performance Reports
- Family Assessment
- Judicial Reviews




# Additional Functionality of Release 2b

- Legal
- Licensing & Placement Information
- Fiscal
- Unified Home Study
- Business Intelligence Environment (Data Warehouse)



Create Maintain Utilities Help

## Workers

 Corn IV, Conn (301)

Unit Supervisor , 02 Leon Admn

 [mehta\\_neal \(10191\)](#)

Investigative Worker Ext.: , 02 Leon Admn

 [Buckeye, Brutus \(637\)](#)

Investigative Worker Ext.: , 02 Leon Admn

 [Buzz, Barney \(10077\)](#)

Investigative Worker Ext.: , 02 Leon Admn

 [Bob, Betty \(10088\)](#) [Actions](#)

Investigation 02/06/2007 Buzz, Barney FL

 [Boston, Hobler \(10087\)](#) [Actions](#)


Special Condition 02/05/2007 Buzz, Barney FL

 [Folly, Trolley \(10081\)](#) [Actions](#)

Investigation 02/05/2007 Buzz, Barney FL

 [Goody, Ollie \(10032\)](#) [Actions](#)


Investigation 01/31/2007 Buzz, Barney , Anna Maria, FL 32333-1234

 [Gumby, Gandy \(10080\)](#) [Actions](#)

Investigation 02/05/2007 Buzz, Barney , Atlantis, FL 22222-1234

 [Intake, First \(10051\)](#) [Actions](#)


Investigation 02/02/2007 Buzz, Barney FL

 [Joots, Herb \(10118\)](#) [Actions](#)

Investigation 02/09/2007 Buzz, Barney FL

 [Joots, Jill \(10033\)](#) [Actions](#)

Investigation 01/31/2007 Buzz, Barney FL

 [Pickle, Penny \(10028\)](#) [Actions](#)

Investigation 01/30/2007 Buzz, Barney , Apopka, FL

 [Vicks, Steve \(10040\)](#) [Actions](#)

Investigation 02/01/2007 Buzz, Barney FL

 [kunu great \(10103\)](#) [Actions](#)

Pending Other Placement Alachua Buzz, Barney

 [Craig Center \(10020\)](#) [Actions](#)

Active Placement Bay Buzz, Barney

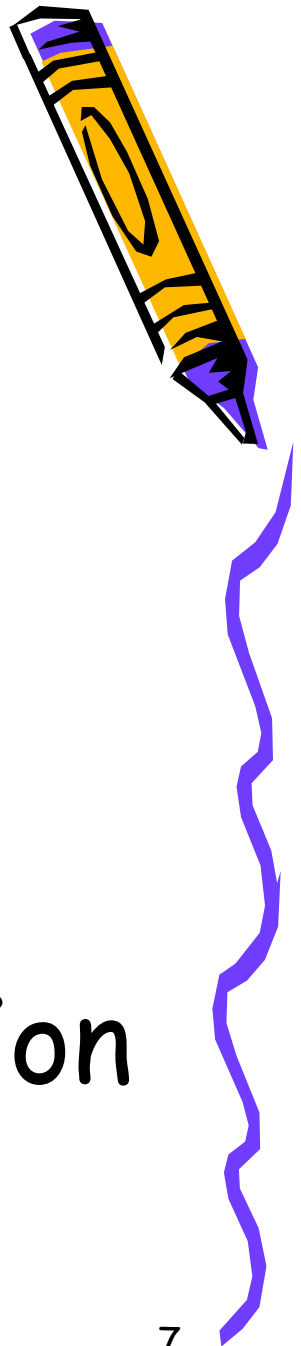
 [CI Unit, Jane \(10289\)](#)

Counselor Ext.: , 02 Leon Admn

 [Kando, Kelly \(1798\)](#)



# Documentation of Psychotherapeutic Medication in FSFN



http://fsfn-production.dcf.state.fl.us/ - Florida Safe Families Network - Windows Internet Explo...

# Florida Safe Families Network

Create Maintain Utilities Help

Case Work Provider Work Search Refresh Print Help Logout

## BETH M. PASEK's Desktop - 080000 DISTRICT 8

☐ Date Restricted ☐ Participant View

- Ticklers
- Cases
- Providers
- Workers
- Approvals
- Intakes

### FSFN Messages and Links

[Register HERE for the Child Welfare Professional Development Series!](#)  
[DO NOT USE FILE CABINET/SCANNING UNTIL FURTHER NOTICE!](#)  
[FSFN Website](#)

### Unit Messages and Links

Done

Trusted sites 100%



[Case](#)
[Person](#)
[Provider/Organization](#)
[Worker](#)

## Search Criteria

Last Name:	Sewell	First Name:	Jim	Middle Name:	<input type="text"/>	Person ID:	<input type="text"/>
ID:	<input type="text"/>	Age Range Begin:	<input type="text"/>	Age Range End:	<input type="text"/>		
DOB Range Begin:	<input type="text" value="00/00/0000"/>	DOB Range End:	<input type="text" value="00/00/0000"/>	DOB:	<input type="text" value="01/06/1995"/>		


Search Precision: 
  
 Low High

**Search**

+ Additional Search Criteria

Record 1 to 1 of 1

## Persons Returned


 SEWELL, JIM (66107)

**Close**

Case Person Provider/Organization Worker

Search Criteria

Last Name: Sewell First Name: Jim Middle Name: Person ID:  
ID: Age Range: Age Range:  
DOB Range Begin: 00/00/0000 DOB Range End: 00/00/0000 DOB: 01/06/1995

Search Precision: Low High

Search

+ Additional Search Criteria

Record 1 to 4 of 4

Persons Returned

Sewell, Jim C/O: Chariot House, 2666 Lime ST, Fort Myers Male, 01/06/1995, Other

- Basic Person Information
- Related People
- Merged Persons
- Intakes
- Investigation
- Special Conditions Referral
- Cases

Close

Case Person Provider/Organization Worker

Search Criteria

Last Name: Sewell First Name: Jim Middle Name: Person ID:

ID: Age Range Begin: Age Range End: DOB: 01/06/1995

DOB Range Begin: 00/00/0000 DOB Range End: 00/00/0000

Search Precision: Low High

Search

+ Additional Search Criteria

Record 1 to 4 of 4

Persons Returned

- Investigation closed UNKNOWN 01/12/2003
- SEWELL, MAGNOLIA Actions
- Out-of-Home - Court Ordered opened Yes! SUE SMITH Child Case Manager 09/16/2002
- Related People
- Assignment
- Education
- Family Assessment
- Interim Child Information
- Medical/Mental Health

Close

General Information

Name:	Sewell, Jim	Gender:	Male	Race:	White
SSN:	555-12-3456	Date of Birth:	01/06/1995	Ethnicity:	Other
Medicaid Number:	123-45-6489-0				

Medical Profile

Medications

Mental Health Profile

Medical History

Primary Health Care Providers

Physician/Clinic:	Dr. Moore	Address:	2665 Cleveland Ave. #108 Fort Myers, FL 33901	Phone:	(813) 555-1234
Other Health Care Provider:		Address:		Phone:	
Dentist:	Smiley Face Dental	Address:	6900-30 Daniels Parkway Fort Myers, FL 33912	Phone:	(813) 555-1234
MH Professional:	Mental Health Inc.	Address:	3903 Martin Luther King Blvd. Suite E Fort Myers, FL 33916	Phone:	(813) 555-1234
HMO:		Address:		Phone:	
Psychiatrist:	Dr. James	Address:	3903 Martin Luther King Blvd. Suite E Fort Myers, FL 33916	Phone:	(813) 555-1234
Emergency Contact:		Address:		Phone:	
Medicaid Number:	123-45-6489-0				


Basic

Health Problems:

Allergies:

☒ Immunizations Up To Date ☒ Record On File Date:

Last Updated By: SUE SMITH Date Last Updated: 05/22/2009

Options:   

General Information

Name: Sewell, Jim      Gender: Male      Race: White  
 SSN: 555-12-3456      Date of Birth: 01/06/1995      Ethnicity: Other  
 Medicaid Number: 123-45-6489-0

Medical Profile

Medications

Mental Health Profile

Medical History

Summary of Medication(s)

Physician/Practitioner	Prescribed Medication	Is Medication Psychotropic	Date Prescribed	Date Stopped
Dr. Moore	Risperdal	Y	01/31/2008	07/18/2008
Dr. Moore	Depakote	Y	01/31/2008	07/18/2008
Dr. Moore	Other: Clonidine	Y	01/31/2008	07/18/2008
Dr. Moore	Clozapine	Y	07/18/2008	
Dr. Moore	Depakote	Y	07/18/2008	
Dr. Moore	Risperdal	Y	07/18/2008	

Insert

Options:   

Save

Close

General Information

Name:	Sewell, Jim	Gender:	Male	Race:	White
SSN:	555-12-3456	Date of Birth:	01/06/1995	Ethnicity:	Other
Medicaid Number:	123-45-6489-0				

Medical Profile

Medications

Mental Health Profile

Medical History

Treatment Information

☒ Prior Treatment-Inpatient ☒ Prior Treatment-Outpatient Last CBHA Evaluation 04/16/2009

Substance Use

<input type="checkbox"/> Alcohol	Frequency :	<input type="text"/>	<input type="checkbox"/> Marijuana	Frequency :	<input type="text"/>	Last Updated: <input type="text"/>
<input type="checkbox"/> Drugs	Frequency :	<input type="text"/>	<input type="checkbox"/> Solvents	Frequency :	<input type="text"/>	

☒ Psychological/Psychiatric Referral Made Made To: Suncoast Psychometrics

Status: completed pre-adoption eval

Other Mental Health Concerns: ADHD, Intermittent Explosive Disorder, Bipolar Disorder, Aspergers

Last Updated By: SUE SMITH Date Updated: 05/22/2009

+ Axis I

+ Axis II

Caregiver(s) Information at time of Intake

Emotionally Disturbed:	<input type="text"/>	Learning Disability:	<input type="text"/>	Visually or Hearing Impaired:	<input type="text"/>	Physically Disabled:	<input type="text"/>
Other Medical Condition:	<input type="text"/>	Drug Abuse:	<input type="text"/>	Mental Retardation:	<input type="text"/>	Alcohol Abuse:	<input type="text"/>

Options:

General Information

Name: Sewell, Jim Gender: Male Race: White  
 SSN: 555-12-3456 Date of Birth: 01/06/1995 Ethnicity: Other  
 Medicaid Number: 123-45-6489-0

Medical Profile

Medications

Mental Health Profile

Medical History

Treatment History

Condition Type:

Service Dates: First:  Last:

Other Provider:

Provider Type:

Type of Service:

FSFN Provider:

Procedure

Medication management-new provider.

Diagnosis

ADHD, Mood Disorder, Aspergers.

Describe the diagnosis, assessments, and/or treatment for the child.

Medication management. Continue counseling services.

Condition Type:

Service Dates: First:  Last:

Other Provider:

Provider Type:

FSFN Provider:

Insert

Options:

Save

Close