

JEFFERSON/BAXTER CASE EXAMPLE

REFERRAL

Child Victim:	Joshua Baxter (18 months)
Birth Mother:	Tammy Jefferson (36)
Birth Father:	Tom Baxter (38)
Siblings:	John Jefferson (16)

REPORTER IS WORRIED ABOUT THE FOLLOWING

A University Hospital social worker called to report that Tom Baxter brought his, son Joshua, to the emergency room. Joshua had a black right eye and a bruise and small gash on his left cheek.

According to the reporter, Tom went to the home of Tammy Jefferson to care for Joshua for the weekend. (Tammy is Joshua's mother, and Joshua lives with her.) Tammy was going to Las Vegas with her boyfriend, Juan Martinez; the couple recently moved in together. Tom told Tammy he was concerned about Juan's controlling behavior: Juan gets upset about Tammy being in contact with Tom, even though it is just to talk about Joshua. Tom has only a cell phone number for Tammy and no other information.

Tom noticed Joshua's bruises and cut immediately. When he asked Tammy how Joshua got hurt, she replied, "He fell."

Tom said he had not seen his son since last week, and he said Joshua did not have any bruises or cuts then. Tom said that right after Tammy left for her trip, he went straight to the hospital.

Tom said Tammy has another child in the care of the child's father. He does not know the details of their parenting arrangement. Tom was unable to provide information about Tammy's support network but shared that he has a sister. Tom reported not having many friends due to some life choices he is not proud of.

The physician reported that the bruise on Joshua's left cheek is blue and yellowish, but the bruising around the eye is black and bluish. The eye alone might not have raised concerns, the physician said, but the cheek was unlikely to have been bruised and cut in a fall and could not have been bruised during the same reported fall as the black eye. The explanation of the fall is inconsistent with the injuries and is more likely a result of abuse, the physician said.

What does the reporter know about what is working well?

Tom took his son to the hospital as soon as he saw the injuries. Tom has a sister who may be able to provide support. Hospital staff observed that Joshua seeks his father for comfort, and Tom appears caring and concerned about the child's injuries.

What does the reporter think needs to happen next?

Hospital staff will continue to examine the child and take an X-ray.

PROVISIONAL HARM STATEMENT

University Hospital social worker reports that Joshua, who is 18 months old, suffered bruising around the eye and a bruise and cut on his cheek while in the care of his mother, Tammy Jefferson. It is unknown how the child was injured.

AGENCY HISTORY

Tammy Jefferson as perpetrator:

- **2016 Inconclusive physical abuse by Tammy (bruises).** Victim: John Jefferson (not victim in current referral)
- **2017 Substantiated physical abuse by Tammy (bruises).** Victim: John Jefferson (not victim in current referral). Referral resulted in a petition being filed, but it was dismissed at the disposition hearing: Care and custody to John's father with a juvenile court exit order.
- Tammy Jefferson was child victim (physical abuse by father in 1990).
- Tom Baxter: no child welfare history as a child

CRIMINAL HISTORY

- Tammy: Petty theft (age 24)
- Tom: Vehicle theft (age 18), breaking and entering (22), DUI (23 and 28).

CALLS FOR SERVICE TO TAMMY'S HOME

- Four calls due to verbal altercations between Tammy and her boyfriend in the past six months. None of the calls resulted in an arrest.

STOP HERE. COMPLETE THE HOTLINE TOOLS.

INTERVIEWS WITH HOSPITAL SOCIAL WORKER AND LAW ENFORCEMENT

SEGMENT 2: DAY OF REFERRAL, 2:45 P.M.

The child welfare worker arrived at the ER. Hospital social worker Melanie Wright reported that Joshua has been examined, and they are waiting for him in X-ray. The child's overall appearance was clean; he was wearing a clean shirt, pants, and diaper when he arrived at the hospital. Doctors indicated that Joshua appears well-nourished and within normal height and weight for his age. Nursing staff reported he appears "bonded" to his father and relaxed in his care, and hospital staff have observed Tom responding effectively to Joshua's curiosity and playfulness.

Hospital social workers have been unable to locate Tammy using the cell phone number provided. They left a message for her to contact the hospital as soon as possible.

Hospital staff reported to the worker that they had been looking for Tom for the past 45 minutes to get medical consent for an X-ray. About 30 minutes after the worker arrived, Tom showed up at his son's exam room and provided consent.

When the worker began interviewing Tom, she could smell alcohol on Tom's breath and noticed slurring of speech. When asked about it, Tom admitted to feeling great stress over the incident because his father used to hit him when he was a child, and he cannot stand to see the same thing happen to his own son. Tom wants his son to live with him, but he is currently living in a halfway house for recovering drug addicts, and he cannot take his son to live with him there. He is proud to say that he has been clean from crack cocaine since completing rehab three months ago. The alcohol was a slip, and he has had several slips since becoming clean. Joshua's mother and the staff at the halfway house know of only one other slip with alcohol, and Tom is afraid that he may be evicted from the program if they learn about this one. When asked what his plan was for caring for his son, he shrugged.

Tom said he and Tammy used to "party" together. Tom said Tammy stopped using cocaine and drinking alcohol a few months before she got pregnant with Joshua. Tom admitted that he continued to use drugs after Tammy stopped. Tammy kept him from seeing Joshua while he was using drugs, and he just resumed his relationship with Joshua two months ago after rehab. Tom said he and Tammy have an informal agreement (i.e., no court order) that he can visit Joshua weekly as long as he is not using drugs or alcohol.

The worker asked Tom if he has any extended family support or friends who are a support for him. Tom said he has a sister, Sheila Baxter. He has not had much contact with her in the past year, but he still thinks of her as a support. Tom said that due to his struggles with addiction, he does not have many supportive friends. Tom agreed to allow the child welfare worker to contact his sister to learn what she knows about Tom's care of Joshua in the past and to talk about ways she might be able to help in this situation.

Hospital staff filed a police report, and police arrived at the hospital. The attending physician met with Tom, the worker, and law enforcement to report that the X-ray results showed no serious injury to Joshua's eye or cheek. Police photographed the injuries, which do not require hospitalization. There are no apparent signs of concussion. Law enforcement asked Tom to interview him, and he agreed. After

the interview, the officer said she does not believe Tom caused the injuries based on observation of Tom with the child, the timeline of the injuries, discussions with the worker about Tammy's history, and medical facts.

While the child welfare worker stayed with Tom and Joshua at the emergency room, the officer went to Tammy's home in an attempt to locate her. There was no response at the door. The officer pulled police records about calls for service to Tammy's address. The record indicated four calls for service due to verbal altercations between Tammy and her boyfriend in the past six months. No arrests ever resulted from any of the calls.

The officer met with Tammy's apartment manager, who said he saw Tammy and Joshua alone yesterday, and Joshua had a black eye and a bruised cheek at that time. The manager asked Tammy how Joshua got the black eye, and she replied he hit himself in the eye with a toy truck. The manager said he often hears Tammy and her boyfriend yelling at Joshua and at each other. Although the manager said he has not seen any injuries to the child after hearing them fight, he did mention having to repair a hole in the wall and a door that was knocked off the hinge during the past few months.

When the officer returned to the hospital, she met with the child welfare worker and the attending physician. The physician determined that the injuries are not consistent with Tammy's explanation, but they are consistent with abuse. The officer said a criminal report will be made, but she is not confident that it will result in charges because the cause of the injuries is unclear.

INTERVIEW WITH SHEILA BAXTER

With Tom present, the child welfare worker called Tom's sister, Sheila Baxter, to further assess Tom's ability to provide safe care for Joshua. Sheila said she loves her brother and nephew, but she drew a line with Tom after he took advantage of her a number of times. When asked about her knowledge of Tom's care of Joshua in the past, Sheila replied that Tom wants to be a good father, but his problems with substance misuse have prevented him from making good choices about Joshua's care. He largely has left Joshua's care to Tammy.

Sheila reported the following.

- One year ago, she was asked to babysit for a few hours, and Tom showed up eight hours late and was under the influence. She kept the baby overnight until Tom was clean.
- A few weeks later, Tom showed up with Joshua, asking for food and a place to stay. She helped him, then talked with him about the care he was failing to provide to Joshua. She has not seen Tom since.
- Sheila is worried that Tom might be leaving Joshua with others who might not be safe. She said she also is concerned about how he is providing for Joshua's basic needs.
- Sheila is willing to be a safety resource for Tom and Joshua if Tom actively works on his recovery.

STOP HERE.

Identify the households to be assessed and the primary and secondary caregivers in each household. Then, for each household, complete only the child vulnerabilities, safety threats, and caregiver complicating behaviors sections of the safety assessment.

INTERVIEW WITH TOM BAXTER AND SHEILA BAXTER

CREATING A SAFETY PLAN

The worker met with Tom to create a plan for Joshua's immediate safety and supervision. The worker asked Tom if he or Tammy have any Native American heritage; Tom said family members on his mother's side have Cherokee heritage, but he does not know about Tammy. Tom said he thinks of himself and his son as Native American and Black.

Tom said he is listed on his son's birth certificate, and he will do anything he can to get full custody of Joshua, even if it means staying clean and sober. Tom does not want his son to return to Tammy's home. He said Joshua cries whenever he sees Juan and whenever Joshua returns to Tammy's home. Tom expressed worry about his son being placed in a foster home. Tom said he can move into an apartment by Monday, and he thinks Sheila, who has a toddler son named Bobby, would be willing to allow him and Joshua to stay with her until he gets an apartment. The worker told Tom that in order to make a plan for Joshua's safety, the worker would need Sheila to come to the hospital to be part of the conversation. Tom called her, and she agreed to meet with the worker and Tom at the hospital.

The worker met with Tom and Sheila to discuss creating a short-term plan for Joshua's safety. Sheila provided the worker with the information necessary for a background check. Tom told his sister that there is a worry about his sobriety and his ability to maintain safety for his son. Tom admitted to his sister that he relapsed, and he would like her to be part of his support system and a safe person for his son.

The worker told Tom and Sheila that immediate action is needed due to the injuries Joshua suffered. To keep Joshua safe, they could use one of two options: place Joshua in protective custody or create a shared plan between the worker, Tom, and Sheila that will ensure Joshua's immediate safety. Sheila agreed that she, too, would be worried if Tom were allowed to care for Joshua on his own without some support. If the decision is to protectively place Joshua, Sheila said she would like to be considered for Joshua's placement. She acknowledged that she had not seen Joshua in a long time due to some problems in her relationship with Tom, but she feels confident that she can meet Joshua's needs because she is caring for her own son, Bobby.

Tom asked his sister and the worker if he and Joshua could spend the weekend at Sheila's home. He would like to help his sister with providing care for Joshua. The worker, Tom, and Sheila agreed that Tom and Joshua would spend the weekend in Sheila's home. Tom agreed not to use alcohol for the duration of this safety plan. Sheila agreed to call child welfare services if Tom does not follow the safety plan. The team will meet on Monday and discuss a long-term plan.

While hospital staff was feeding Joshua prior to preparing his discharge, the worker again tried to locate Tammy. He called her cell phone number and got no answer. The worker also drove to Tammy's home and left a note under the door for her to call the agency as soon as she returns.

STOP HERE.

For each household, complete the household strengths and protective actions, in-home protective interventions, and placement intervention sections of the safety assessment. Identify a safety decision for each household.

SAFETY PLAN

Family Name: Tom Baxter **Referral/case #:** _____

Date: 7/11/21 This plan will be reviewed on 7/13/21 or no more than 30 days from the safety plan's date.

Today, at least one child in the Jefferson and Baxter families is in some danger, and immediate action must be taken so everyone feels sure that the child will be safe. The family, its support network, and the agency have worked together to identify ways to ensure the safety of the child while everyone works together to resolve the identified worries. Everyone in the family, its support network, and the county child protective service workers believe that if we work together, we can help the child in the family stay at home safely while these worries are resolved. This plan describes our shared understanding of why people are worried and what we agree to do to make sure the child remains safe until the plan is reviewed.

WHAT IS THE DANGER? (SDM® SAFETY THREAT)

SAFETY THREAT #	DESCRIBE THE SPECIFIC SITUATION OR ACTIONS THAT CAUSE THE CHILD TO BE UNSAFE (DANGER STATEMENT)	NAME(S) OF CHILD(REN) IN DANGER
1 and 7	Harm Statement (Tammy Jefferson's household) University Hospital social worker reports that Joshua, who is 18 months old, was injured (black eye and bruise/cut to cheek) while in the care of his mother, Tammy Jefferson, and her boyfriend, Juan Martinez. The hospital determined the injuries are not consistent with an accidental injury and are consistent with abuse. The explanations that Tammy gave to Tom and a neighbor about how Joshua got hurt were different, and the doctor stated the injuries could not have occurred at the same time or in the way she described to others.	Joshua Baxter
1, 7, and 9	Danger Statement (Tammy Jefferson's household) Child Welfare Services (CWS) is worried that Joshua could be physically harmed (black eyes, bruising, or more serious head injuries) while he is in Tammy's care and without the help, support, and supervision he needs, especially because no one knows how Joshua got hurt, and there have been concerns about Tammy physically injuring Joshua's half-brother in the past.	Joshua Baxter
3	Danger Statement (Tom Baxter's household) CWS, Tom, and Sheila (Tom's sister), are worried that when Tom drinks alcohol or uses drugs and becomes distracted and unavailable, Joshua could be physically harmed (be unsupervised and/or get out of the house, be taken advantage of and get hurt) or emotionally harmed (become scared and confused).	Joshua Baxter

WHAT IS THE PLAN TO KEEP THE CHILD SAFE?

SAFETY THREAT	WHAT ACTIONS WILL BE TAKEN TO ADDRESS THE DANGER?	WHO WILL TAKE THESE STEPS?	WHAT WILL BE DONE IF THESE ACTIONS ARE NOT WORKING?
1, 7, and 9	<ol style="list-style-type: none"> 1. Sheila and Tom agree to immediately contact the worker (or an on-call worker) for help if Tammy comes to Sheila's home. Because Tammy has shared legal custody and physical placement of Joshua, Sheila and Tom may need to call police or CWS to help if she comes to try to pick Joshua up. 2. Sheila and Tom agree to ask Tammy to contact the worker if she gets in touch with either of them. 	Tom and Sheila	Either Sheila or Tom will call for help from the after-hours CWS worker or police.
3	<ol style="list-style-type: none"> 1. Tom will remain sober (no alcohol or drug use) for the next two days while he is responsible for Joshua's care. 2. Tom will make sure Sheila is available to provide substitute care for Joshua if Tom needs to be away from him. 3. Sheila will supervise all interactions between Tom and Joshua until they all meet with the CWS worker on Monday, July 13. 	Tom and Sheila	Either Tom or Sheila will call the after-hours CWS worker or police if there are any concerns about the plan not working. Sheila will call for help if Tom tries to leave with Joshua, or if she observes him being unsafe with Joshua.

While we may not agree about the details of these worries, we do agree to follow the plan until the review date. We understand that if the plan does not keep the child safe, we will need to work together again to create a new plan, or the child may have to stay with someone other than their parents/legal guardians.

Parents/Legal Guardians: _____ **Worker/Supervisor:** _____

Child: _____ **Other Participants:** _____

WHOM TO CALL IF THE PLAN IS NOT WORKING

ASSIGNED CHILD WELFARE WORKER

- **Name:** Darran Huntsman
- **Telephone Number:** 555-555-5555

CHILD WELFARE SUPERVISOR

- **Name:** Kathy Danver
- **Telephone Number:** 555-555-5556

AFTER-HOURS CHILD WELFARE SERVICES WORKER

(Before and after business hours; weekends and holidays)

- **Instructions:** Call sheriff's dispatch and ask for the on-call CWS worker.
- **Telephone Number:** 555-555-5557

CONTINUED ASSESSMENT/INVESTIGATION

The worker received a report from the overnight on-call child welfare worker. According to the report, Sheila Baxter called the worker and said Tom left the house on Saturday to get some milk for Joshua and never returned. She has tried to call him but has not had any success. Joshua is still in her care.

The worker met with Sheila at her home. Sheila said Tom still has not returned and has not responded to her calls. Sheila is worried Tom may have relapsed. The worker explained to Sheila that because the plan is not working, the worker will need to place Joshua in protective custody.

Efforts to reach Tom by phone were unsuccessful. Sheila expressed worry about Joshua being placed in foster care. The worker said Joshua could be placed in Sheila's home as an emergency relative approved placement while the investigation continues into Tammy's whereabouts and the status of Tom. The worker asked Sheila to have Tom call the worker if he tries to return to her home or contacts her.

Since Joshua was placed into protective custody, the worker completed a new safety assessment, resulting in a safety decision of unsafe. The worker coordinated with police to place Joshua into protective custody and completed the emergency relative approval processes and paperwork with Sheila. The worker again attempted to reach Tom by phone, but he did not answer. The worker left a voicemail.

The worker reviewed Tammy's previous agency history, criminal history, and calls for service to the home (mentioned earlier). There was never any evidence of physical harm to either adult or the child when police arrived. Tammy has no known history of mental health issues. Tammy has a history of drug use, but she reportedly has been sober for two years.

ONE DAY AFTER REFERRAL

The worker tried to reach Tammy again, but her call went to voicemail. The worker left a message and also left an additional note in Tammy's mailbox.

Tom called the worker to apologize for not being able to follow the safety plan. He said he was feeling overwhelmed and stressed about what happened to his son. He said he felt like he should have protected his son, and this caused him to feel like a "bad father."

Tom said that when he went out to buy milk, he found himself in the alcohol aisle, and before he knew it, he began drinking; he could not recall the events of most of the weekend. Tom said he was calling from a friend's house, where he is now staying. Tom provided the worker with the address and contact information. Tom said he now knows he needs help with his substance misuse and is willing to do anything to be a "good" father for Joshua. The worker informed Tom that Joshua will remain in Sheila's home and that he will be provided with supervised visits.

Another family team meeting with Tom and his support network determined that Joshua cannot safely live with either of his parents at this time and should remain in the relative placement with Sheila.

INTERVIEW WITH TAMMY JEFFERSON

TWO DAYS AFTER REFERRAL

The worker received a phone call from Tammy, Joshua's mother. Tammy sounded upset and said she was confused about what is going on with her son. She told the worker she is currently in Las Vegas with Juan; her phone battery died, and she forgot her power cord. The worker informed Tammy that Tom took Joshua to the hospital because of the black eye and bruised cheek. Tammy expressed her frustration with Tom and stated that she told Tom that Joshua had fallen down.

The worker told Tammy that she needs to meet with her and Juan. Tammy seemed apprehensive about including her boyfriend in the investigation but stated that she and Juan were on their way back from Las Vegas and agreed to meet with the worker tomorrow at the detention hearing. The worker asked Tammy if she has any Native American heritage; Tammy denied having any Native American heritage and said she identifies as Caucasian.

THREE DAYS AFTER REFERRAL: DETENTION HEARING

Custody was granted to the agency, and Joshua was placed with Sheila, the paternal aunt. Tom, Tammy, Juan, and Sheila were all present in court. Tom was adjudicated as the presumed father. The court found that ICWA may apply due to Tom being Cherokee and directed the agency to notify tribal organizations. An ICWA representative was also present.

ASSESSMENT WITH TOM PRIOR TO THE COURT HEARING

The worker asked about Tom's history. He said he had a crack cocaine habit, but he has not used since completing rehab three months ago. He did admit to having a few beers when he gets anxious. He was employed as a roofer before he got into drugs and fell off a roof. Tom admitted his multiple slips with alcohol to the halfway house. By policy, he has been kicked out. He plans to stay with friends or find a rooming house for now. He can reapply to the halfway house after 30 days if he remains clean.

The worker contacted the halfway house, and staff confirmed that Tom has entered its program on a probationary status due to his recent relapse with alcohol. He will be allowed to resume his residency program after a 30-day waiting period. The staff member who spoke to the worker said Tom gets along well with the other members of the group and that he will start counseling with the staff psychologist for his depression, which he has suffered from since adolescence.

The staff member stated that the halfway house is working with Tom on building his supports to help him be successful and sober when he leaves the facility. Tom plans to attend 90 AA meetings in the next 90 days. The worker asked the staff member how important AA is to Tom, and he indicated that he believes it is a very important element for maintaining Tom's sobriety. When asked how close Tom is to people at AA, the staff member said Tom has some good friends there. He has a sponsor, but he has

not had much contact with him. He has not started to work on his steps. He is hopeful that AA will become an important part of his life.

Tom said he has seen Tammy, who blames him for overreacting to the bruises and reporting her to the agency.

ASSESSMENT WITH TAMMY AFTER THE DETENTION HEARING

After the court hearing, the worker went to Tammy's house for their scheduled meeting. Tammy and Juan were at the home. The apartment was clean and neat and contained all the appropriate supplies to care for an infant. The worker told the couple that she needed to speak with each of them separately. Juan went into the bedroom while the worker met with Tammy.

Tammy appeared to be nervous; she fidgeted in her seat and played with her fingers. She said she does not trust anyone from the agency and will not reveal personal information to anyone from the agency ever again. She said the last time she dealt with the agency, she thought what she told the worker would remain confidential, but then they talked about it in court.

The worker apologized for any misunderstanding that may have happened in Tammy's previous case and informed Tammy that anything that may be reflected in a court document will be shared with Tammy. The worker tried to help Tammy understand that providing safety for Joshua will require a partnership between the worker, Tammy, Juan, and Tom.

Tammy admitted to having a history with drugs but denied any current use. "I have not used any drugs since before I had Joshua," she said. Tammy reported she was physically abused as a child by her father. She said her relationship with Tom ended because he would not stop using drugs.

Tammy has stable employment. She has worked as a receptionist for the same company for the past three years. Tammy continued to express her fear about Joshua being involved with the agency. She stated that when her older son was removed from her care, his father was able to get custody of him before she could complete her case plan. She is worried this will happen again.

The worker asked Tammy about Joshua's injuries. Tammy said he fell down, and she added that Joshua tends to fall a lot. She said she loves her son and would never do anything to hurt him. She said he does need to be disciplined because he can be "out of control" at times. She said Joshua throws major tantrums, and she is worried that her son might hurt himself if she does not intervene. Tammy stated that sometimes she has to restrain Joshua to keep him safe. When the worker tried to ask Tammy for more information about "intervening" and "restraining" Joshua during a tantrum, Tammy did not want to talk about it and again stated she would never hurt her son.

The worker asked Tammy about calls for service to her home. Tammy again appeared to be nervous and started to fidget. She said her neighbors are nosy and try to cause problems in her relationship by calling the police for everything. She went on to say that she is passionate, and there are times when she talks loudly. Juan is equally passionate, and he can be loud as well, she said. Tammy said they have

a wonderful and loving relationship, and they hardly ever disagree. She stated that if there was anything wrong, the police would have done something.

INTERVIEW WITH JUAN MARTINEZ

The worker met with Juan Martinez, Tammy's boyfriend. The worker discussed Joshua's injuries with Juan and asked if he knew how they occurred. "How would I know? The kid is clumsy. He is a boy, and in order for him to become a man, he should be able to shake off an injury," Juan said. He denied ever disciplining Juan, stating, "That's his mother's job." Juan said he would watch Joshua once in a while for Tammy when she goes to work, but he continued to deny disciplining the child.

Juan said he met Tammy nine months ago at a gas station. They dated for a few months and moved in together two months ago. Juan said he loves Tammy and will do anything for her. He said he has never seen Tammy harm Joshua. The worker asked Juan about the calls for service to the home. Juan replied that he believes the neighbors call the police because he is Mexican. He said he and Tammy have a great relationship, and they never argue.

Juan said he drinks beer, usually two or three after work to relax. He currently works at the gas station where he and Tammy first met. Juan denied having a history of abusing any substances, and he does not have any biological children. The worker looked into Juan's criminal history and discovered that he was arrested eight years ago on suspicion of domestic violence, but he was not charged. Juan also has CWS history: He spent a few years in foster care due to substantiated physical abuse by his father. When the worker tried to explore Juan's history with him, he refused to talk about it.

The worker asked Tammy if she had any family or friends who she believed would be a good support system, and asked whom she would like to invite to any family meeting held by the agency. Tammy said she did not have any at this time and said she is okay with Joshua being with Tom's sister. She does not want Joshua in foster care, and she wants access to him at Sheila's home at any time. The worker explained the need for her to have only supervised visits with Joshua, due to the substantiated finding of her abuse of him.

Tammy and Juan neither denied nor admitted to harming Joshua. Tammy agreed to the plan of having Sheila supervise her visits with Joshua and occasionally having the worker be present. She agreed to meet with Tom and the worker to review both of their case plans for reunification and to establish a clear visitation agreement for her to see Joshua.

STOP HERE. COMPLETE TWO RISK ASSESSMENTS.

CHILD AND FAMILY TEAM MEETING, TWO DAYS AFTER DETENTION HEARING

Present at the Child and Family Team meeting (CFT) were Tammy Jefferson; Tammy's friend, Kim Bush; Tammy's boyfriend, Juan Martinez; Tom Baxter; Tom's sponsor, Bill Smith; and the paternal aunt, Sheila Baxter.

The worker explained the purpose of the family team meeting by sharing the danger statements for each household with the group.

- **CWS is worried** that because Joshua got hurt (black eyes, gash, and bruising) when he was in Tammy and Juan's care and no one is sure how it happened, Joshua might get hurt again (black eyes, bruising, or more serious head injuries).
- **CWS, Sheila, and Tom are worried** that when Tom drinks alcohol or uses drugs and becomes distracted and unavailable, Joshua could be physically harmed (be unsupervised and/or get out of the house, be taken advantage of and get hurt) or emotionally harmed (become scared and confused).

The worker explained her concerns to the group: The agency is worried that if Joshua does not have an identified support network to ensure he is provided with age-appropriate supervision and a safe environment and that his needs are met, he could be left without supervision or physically harmed in the future.

The worker explored the culture of the parents by having Tammy and Tom share how they identify themselves. Tammy stated that she identifies as a Caucasian, heterosexual female, and she feels that her cultural identity and support network is a resource. Tom stated he identifies as both a Black and Native American heterosexual male. Tom stated that while he has never had much contact with his tribal community, he always felt connected to some of the stories his family told about their Native American spiritual traditions.

The worker had Tammy and Tom share their relationship story with the group. Tom and Tammy stated that their relationship lasted about a year. They met when Tom's company was replacing the roof on Tammy's apartment building. They moved in together after only a few weeks of dating. Tammy said their relationship fell apart because she decided to stop using drugs as Tom's drug use continued to escalate. Tom would disappear for days at a time, and then one day Tammy packed all his belongings and changed the locks. Both reported that there was never any violence in their relationship. Both agreed that Tom tried to support Tammy during the pregnancy. Tammy admitted she did not allow Tom access to Joshua for seven to eight months prior to his completion of rehab. They both agreed that she was just trying to keep their son safe.

Tammy reported that she is healthy and has started to use exercise to relieve stress. She said she loves Joshua and would never do anything to hurt him. Tammy was tearful throughout the meeting. She expressed frustration with the danger statement and believes that she and Juan are being unfairly blamed for everything.

The worker took this opportunity to state that the purpose of the CFT is not to blame or shame anyone, but to create a plan for Joshua's long-term safety. Tammy thanked Sheila for allowing Joshua to be placed in her home and not allowing him to be placed with strangers. Tammy admitted that her relationship with Juan is not perfect, but that no relationship is perfect. Tammy then stated that for the most part, she and Juan get along well.

Juan did not say much during the meeting. He did not admit to or deny harming Joshua, but he stated it is not his job to "discipline" Joshua because he is not his son. Juan said he will support Tammy the best he can, but he will not do any services. Juan shared that in his culture, people do not go outside of family for help, with the exception of church. He said he does not believe in sharing problems with "outsiders."

The group completed the CANS during the CFT meeting, and it was determined there were identified needs related to Tom's substance misuse and mental health and Tammy's need for parenting skills and mental health support related to her past traumas. The child and family team had consensus on identifying the needs for the family. (See Trainee Guide Handout: CANS Relevant Needs & Strengths Grid.)

The worker asked the group to create a case plan to help Tom and Tammy make the changes needed to provide long-term safety for Joshua. Creating the case plan is a joint effort between the worker and the parents. The case plan uses services to support the desired change in behaviors to ensure child safety. The worker expressed a worry about Tom's substance misuse possibly preventing him from providing long-term safety for Joshua.

Tom agreed that he needs help to be successful with his efforts to remain in recovery. He wants Sheila, the other members of his support network, and the worker to help him be accountable for participating in his substance abuse treatment and random drug screens. He admitted to feeling quite uncertain about how to care for Joshua full time and is open to any type of parenting skills training. Sheila agreed, saying that Tom really has no idea how to care for a small child; for example, he has asked Sheila why Joshua is not potty-trained yet. (Joshua is only 18 months old.) Tom said he has several friends who have been clean and sober for several years and are willing to coach him.

Tom also suggested that he would like help from the job placement center so that when he is medically cleared to return to work, he can work full time and have the resources to get a place for himself and his son. Tom said he is a licensed master roofer. He does temporary day labor work to cover his expenses while he is at the halfway house, but that will not be enough to support his son.

Tom agreed to keep the worker informed of his living arrangements at all times and to have regular contact with the worker. He hopes to be back in the halfway house within 30 days. Tom will find out how to renew his roofing license to get full-time work to support his son.

Ever since he fell from the roof, Tom has been under the care of an orthopedist for treatment of broken ribs and a punctured lung. He has not been medically cleared to return to work, which is why he is working as a day laborer. The doctor supplied a free sample of the antibiotic Tom is using for a recurring lung infection, which had been aggravated by his cocaine use. He feels pretty down about not being able to work. Tom hopes that three months of being drug-free will help the infection clear so he can return to work.

The worker then discussed the agency's current worries with Tammy in an effort to continue trying to partner with her in the reunification and case planning process. The worker shared a worry about age-appropriate discipline. The worker talked with Tammy about how much she loves her child—so much that she kept him safe from Tom when he was using drugs. Tammy shared that no one understands how Joshua can behave at times and how his tantrums can be out of control. She admitted to struggling with calming him down at times, especially after a long day of work.

The worker stated the agency would like to support Tammy with being able to safely discipline her son by having her take parenting classes. Tammy agreed that she could benefit from parenting classes. She also said that at times, she struggles with her feelings about the abuse she was subjected to as a child and the sadness she feels when she thinks about her older son. The worker explored Tammy's willingness to participate in therapy to help her process her past traumas. Tammy agreed to attend therapy and stated that it might actually help her.

Sheila described Joshua as being developmentally on target. He is adjusting to his new environment nicely. Joshua is starting to form more words and enjoys having books read to him. He especially enjoys being with his cousin Bobby, and he likes having the dog sleep with him. Joshua seems very anxious whenever voices are raised. He flinches and draws back if he is approached quickly. There have been several incidents in which Joshua hit Bobby or the dog. Sheila took Joshua to Bobby's pediatrician for a follow-up appointment, and the pediatrician said Joshua's eye is healing well.

Sheila described her brother as an incredible source of support when she went through her divorce, and he is seen by everyone as willing to help others. Sheila agreed to be part of Joshua's long-term support system. Sheila shared that other family members would be able to join, and she agreed to provide the worker with their names and contact information.

Tammy tearfully expressed that she really misses her son and would like to be able to see him. After discussion, it was agreed that Tammy could see Joshua three times a week for one-hour supervised visits, with the aunt doing the supervision. Tammy must call 24 hours in advance to confirm that she will attend. Tom will be allowed three visits per week as well, and he also must call to confirm his attendance. The worker will meet with each parent to help them plan activities for visits that support their behavioral goals.

The worker spoke with the halfway house staff member, who said that Tom has good relationships with the other residents and helps others whenever they need it. He has a strong support group, including his sponsor and friends in recovery.

Tom has a diagnosis of depression from when he was 17 years old. He recently has been diagnosed with chemical dependency and is doing well in treatment; his last relapse happened the day Joshua went to the hospital. The staff believe that Tom is serious about recovery, but he still needs the external support of the halfway house. He has started Antabuse to add a layer of protection against another relapse, and he needs to learn ways to manage stress better. Tom is described as having pretty low self-esteem and being mildly depressed. Staff believe he is having trouble coping with being out of work. Part of his program at the halfway house will include weekly sessions with a staff counselor to address depression and self-esteem issues.

BAXTER CASE PLAN

GOAL STATEMENT

Joshua will always be taken care of by a safe, sober, and responsible adult who cares for and supervises him at all times and always meets his basic needs.

NEED AREA	OBJECTIVES	SERVICES	AGENCY
Substance Abuse	Tom will be able to show everyone that he can stay clean and sober and use his recovery skills to manage daily stresses so that he is physically and emotionally available and able to be a parent to Joshua. He will show everyone that he can and will use a plan for safe care of Joshua if he ever experiences a relapse.	<ul style="list-style-type: none"> • Residency in halfway house • Counseling as provided by the halfway house, including individual and group therapy as well as educational classes • Random drug and alcohol screens • Tom will explore options with the local ICWA health center for services to support his recovery. 	<ul style="list-style-type: none"> • Monitor, support, and fund (if necessary) Tom's continued participation in counseling and participation in 12-step programs • Monitor and support Tom through face-to-face contacts per policy and through collateral contacts and support network development
Parenting Skills	<p>Tom will be able to show everyone that he can engage and set limits with Joshua so that he is always physically and emotionally safe.</p> <p>Tom will be able to show everyone he can take the lead parenting role so that Joshua feels calm and sure that Tom is taking care of him.</p>	<ul style="list-style-type: none"> • Parenting skills/child development classes at the rehab center or other approved service provider • Education, modeling of parenting skills, and measurement by Tom's sister, Sheila • Regular progressive visitation that allows Tom to demonstrate his parenting skills and ability to provide for Joshua's needs • Tom will explore options with the local ICWA health center for services to support development of his parenting skills. 	<ul style="list-style-type: none"> • Monitor, support, and fund (if necessary) parenting skills/child development service provision and development of a support network • Follow up with service provider and relative caregiver in support of their efforts • Support Tom in planning and participating in visitation with Joshua to develop and demonstrate his parenting skills

NEED AREA	OBJECTIVES	SERVICES	AGENCY
Resource Management/ Basic Needs	Tom will be able to show everyone that he can provide a safe and stable home and enough self-sufficient legal income to take care of Joshua. Tom will always make sure that everyone living in the home is safe to be around Joshua.	<ul style="list-style-type: none"> • Monitor, support, and fund (if necessary) medical care and job development services • Refer Tom to reunification housing services • Monitor and support Tom through face-to-face contacts per policy and through collateral contacts 	<ul style="list-style-type: none"> • Monitor and support Tom’s progress through attendance at visits and other face-to-face contacts; encourage development of a support network. • Follow up with service provider and relative caregiver in support of their efforts

JEFFERSON CASE PLAN

GOAL STATEMENT

Joshua will be cared for by at least one safe and responsible adult who knows how to safely care for his physical and behavioral needs, and who is knowledgeable about and skilled in meeting his developmental need for a secure attachment with his caregiver.

NEED AREA	OBJECTIVES	SERVICES	AGENCY
Physical Abuse/Trauma History	<p>Tammy will be able to show everyone that she can recognize and safely manage her reactions to Joshua’s behaviors that result from her own childhood experiences.</p> <p>Tammy will show everyone that when she becomes overwhelmed by memories and feelings from her own experiences, she can get help from another safe adult to care for Joshua until she feels calm and in control.</p>	<ul style="list-style-type: none"> • Counseling as provided by a licensed provider, including individual and group therapy as well as educational classes • Supervised visitation activities, which can progress to unsupervised visitation that will allow Tammy to demonstrate her ability to safely manage Joshua’s behavior 	<ul style="list-style-type: none"> • Monitor, support, and fund (if necessary) continued participation in counseling; encourage development of a support network. • Monitor and support Tammy through face-to-face contacts per policy and through collateral contacts

NEED AREA	OBJECTIVES	SERVICES	AGENCY
Parenting Skills	Tammy will be able to show everyone that she can engage and set limits with Joshua so that he is always physically and emotionally safe.	<ul style="list-style-type: none"> • Parenting skills/child development classes offered by an approved service provider. • Education, modeling of parenting skills, and measurement offered by whoever provides supervision of visits. 	<ul style="list-style-type: none"> • Monitor, support, and fund (if necessary) parenting skills/child development service provision. • Follow up with service provider and relative caregiver in support of their efforts; encourage development of a support network

SIX-MONTH HEARING/PERMANENCY HEARING

Joshua has continued to grow and develop, and he is experiencing no medical problems. Sheila reports a substantial reduction in Joshua's anxiety and aggressive behavior. He is now up to date on all immunizations. Joshua is starting to form three-word sentences and is very active. Joshua has been observed by the worker and his aunt to be positively attached to his father and becomes very excited when his father comes for visits. Sheila reports that recently, Joshua has begun to cry when his father leaves at the end of the visits and must be consoled and assured that he will return. Sheila has placed a picture of Tom and Joshua on the nightstand in his room.

Tammy participated in one parenting class and kept her first two visits with Joshua, but she has not been seen or heard from since. Tammy became upset at her last visit because Juan was not permitted to participate. When she and Juan were instructed to contact the worker in order for Juan to be able to visit with Joshua, they both left, and Tammy did not visit with Joshua.

Tammy did not participate in any of her scheduled therapy sessions. The worker has made efforts to contact Tammy, with no success. Tammy and her boyfriend moved out of their apartment complex, and Tammy's phone is no longer in service. The worker was able to make contact Tammy by phone at her place of employment. Tammy agreed to meet with the worker on two separate occasions, but she never showed up. Sheila and Tom have agreed that if they hear from Tammy, they will tell her she has to contact the worker before she can have contact with her son.

Tom continued treatment for drug and alcohol misuse. He has been drug-free for almost nine months and sober for six months. He has not experienced a relapse since the day he went to buy milk at the start of the case. He missed one visit due to a conflict with a substance abuse treatment class but has attended 45 of the 48 scheduled visits.

During visits, Tom has shown that he can be very nurturing with Joshua and is generally attentive toward him. In the beginning, he sometimes seemed lost about how to handle situations, such as when Joshua was climbing all over the furniture in potentially dangerous ways. At first Tom just kept saying, "Be careful" without actually intervening. He has used a parenting class to explore different ways to handle situations such as these, and he has made good use of coaching from his sister. Tom has now begun to demonstrate an ability to prevent Joshua from climbing in dangerous ways with child-safe barriers, and at times physically picking up Joshua and redirecting the behavior.

Tom continues to work on being able to manage Joshua's outbursts when Tom sets limits, and Tom frequently struggles in this area. Tom is in the process of completing his parenting education classes through his substance abuse treatment facility. During the past six months, Tom has been able to complete his "90 in 90" meetings, attend 12-step meetings at least three times a week since then, and has a positive support system in place. He has regular contact with his sponsor and has started to build a circle of support of sober friends. Tom was able to renew his roofing license and obtain employment as a roofer, and he wants to stay with his sister while he is on a waiting list to rent a small apartment.

A CFT meeting was held to discuss modifying Tom's visitation plan. Sheila and Tom were both in attendance. Tom asked for his visits to progress to overnight visits. The team discussed the progress Tom has made with his parenting skills and ability to redirect Joshua's behaviors. The team discussed

the bond between Joshua and his father and agreed to modify the visitation plan. Tom was granted overnight visits with his son. Prior to the start of overnight visits, the worker visited the apartment while Tom and Joshua were there. The apartment is adequately furnished, clean, neat, and meets the safety needs of a 2-year-old. Tom has obtained a crib that will convert to a twin bed when Joshua is ready. There is also a toy box with toys appropriate for Joshua's age and stage of development. Tom has also started taking Joshua to his doctor and dental appointments.

Visitation continued to be successful, and Tom's time spent caring for Joshua was extended to two days straight.

STOP HERE. COMPLETE THE REUNIFICATION REASSESSMENT.

TWELVE-MONTH REVIEW/FAMILY MAINTENANCE

At the six-month family reunification status review hearing, the judge returned Joshua to Tom's care and custody and ordered family maintenance services. During the review period, Tom has demonstrated sobriety from drugs for more than a year and from alcohol for nearly 12 months.

There have been no new referrals for Tom's home during this review period. Tom has been managing his feelings of depression and his self-esteem by becoming physically fit. Tom has found the feeling he gets from working out is better than any drug, and he feels great. He has completed his substance abuse counseling, and his counselor states that Tom demonstrates good insight and has worked out good plans for maintaining sobriety. His sponsor has become his strongest mentor, and he feels that AA has totally changed his life. His counselor and sponsor note that Tom has been able to recognize his feelings related to his own childhood experiences, and as a result, his mood has remained quite stable, and he expresses feeling hopeful and confident as a single parent.

Tom continues to build his circle of support and has continued to add people to his long-term safety plan for Joshua. Tom has started to build a relationship with a woman named Carol, whom he met three months ago at an AA meeting. He made sure to provide Carol's information to the worker for a background check prior to introducing her to Joshua. Carol is a good support person for Tom and Joshua. Tom has provided a list of his emotional triggers to members of his support system so they can identify if he is not in a "safe "place. Tom continues to work full time as a roofer. Tom and Joshua have moved into a two- bedroom apartment, which allows Joshua to have his own room.

Tom was able to complete his parenting classes at the substance abuse treatment center, and during the worker's monthly unannounced visits, he has demonstrated his knowledge and skills in child rearing. With his father's assistance, Joshua has now been potty-trained, and he will be able to continue to attend Sheila's in-home daycare.

Tammy has not had any contact with the agency or the family.

STOP HERE. COMPLETE THE RISK REASSESSMENT FOR IN-HOME CASES.