

## Abuse, Neglect, and Dependency Exercise

For each scenario, determine:

- 1) Whether or not you would initiate a juvenile court action on behalf of the child or children in question.
- 2) Under which statutory provision(s) you would file for each child.

### CASE SCENARIO 1 – Mary and Dennis

In April, Susan became severely depressed and emotionally unable to care for her children. She placed Mary (age 4) and Dennis (age 6) with their father, Doug. Doug violates terms of his parole and is incarcerated. He leaves the children with his mother, Anna. When Anna becomes overwhelmed with two small children the children move in August, to Susan's sister, Priscilla, and her husband, Charles. In October, Priscilla took Mary to daycare where a worker observed that Mary had several bruises on her legs and back. Mary was also holding her arm saying it hurt. A referral of physical abuse was called into screening. The intake caseworker made face to face contact with Priscilla, Charles, Mary, and Dennis in their home. Priscilla and Charles denied knowing that Mary was injured and stated that bumps and bruises were due to “typical bumps and bruises for a toddler.” When interviewed alone, both Dennis and Mary reported that Priscilla and Charles had grabbed Mary by her arm “a lot” and “spanked her hard” when she wouldn’t follow the rules. The intake caseworker asked Priscilla to take Mary to the hospital for an X-ray. The X-ray confirmed that Mary had a fractured arm and there were several other fractures in various stages of healing. The intake caseworker tried to contact Susan and Doug to discuss the current allegations. Doug was incarcerated at the time due to parole violations. Priscilla reported that she had no contact information for Susan and that neither Susan nor Doug had visited with the children. Priscilla reported that she no longer wanted the children in her home because “this is ridiculous.”

The intake caseworker immediately contacts her supervisor and the supervisor contacts their agency attorney. At this time, both parents are unable to provide care for their children. The current caregivers are being investigated for physical abuse of Mary and have insisted the children be removed from their home. An emergency custody motion (*ex parte*) is filed with the court by the agency attorney. A custody hearing is scheduled for the following day.

Per rule, the agency is required to provide written and verbal notification to the parents. The caseworker drives to the jail and provides Doug with verbal and written notification. The caseworker attempts to contact Susan at her last known address; however, she is not home. The caseworker sends Susan written notification of the removal to Susan's last known address and documents all of the attempts in SACWIS.

The intake caseworker reaches out to several family members and all refuse to take placement of the children. The children are placed in foster care.

At the hearing the following day, neither parent attends the court hearing. A temporary order of custody (TOC) is awarded to the agency and the case is set for trial. A TOC expires after 30 days. The agency attorney files a motion citing Mary is an abused child (according to statute) and both as dependent minors. The motion requests the children be placed in the temporary custody of the agency. Notification of the trial was sent to both parents.

At the trial, Mary is adjudicated an abused and neglected minor and Dennis is adjudicated a dependent minor. The children were ordered into the temporary custody of the agency (note...temporary custody lasts 12 month and can be extended 6 months twice). No family is present.

One month later, Susan contacts you. She reports she had been in treatment for bi-polar disorder and depression. She reports that she is under the care of a counselor, psychiatrist, and case manager. Susan reports being furious with Doug as she thought the children would be safe with him. She had no idea the children were with Priscilla and Charles and that she never would have wanted Mary and Dennis to stay with them.

You make a home visit to Susan's home. It is neat and clean. There is plenty of food in the home, and you observe the children to have beds and clothing. You contact all of Susan's service providers. They vouch for her and say that she is compliant with treatment and has the support of friends. Susan receives social security assistance and other community benefits. The principal from Dennis's old school calls you (Susan signed a release); she reports that Susan has always been involved in school, and Dennis attended school regularly. She explains that Susan told her that the children were going to live with their father for a few months so she could get treatment for mental health issues.

You schedule a supervised visit between Susan and the children in her home. The children are elated to see their mother and be in their home. You observe a clear bond between the three. Both Mary and Dennis run to Susan and she hugs both of them tightly. Susan tells the children how much she missed them and is happy to see them. The children sit on their mother's lap and talk to them about their new friends in foster care. Susan repeatedly hugs and kisses them. Susan prepares their favorite snacks and they sit at the table and eat together.

You complete a safety re-assessment and find that there are no active safety threats for Susan. You are concerned regarding the stability of her mental health; however, the amount of support she has from her treatment team and friends mitigate that concern. You discuss this with your supervisor. You also update the children's GAL regarding the case. She agrees that there is no active safety threat and the children should be reunified. The next court date, however, is not for 8 more months. You request the agency attorney file for an earlier court date. That hearing is scheduled in 45 days. The attorney explains that you are able to send children home on "leave status" up to 60 days prior to the court hearing. Therefore, the children were placed at home with Susan.

At the court hearing, you and the agency provide the court with the case plan and copies of compliance reports from Susan's counselors, as well as from the children's school. The GAL also provides the court with observations she has had with Susan and the children during her home visits. The agency attorney asks for custody of the children be returned to Susan and asks for a COPS order (Court Ordered Protective Supervision). The COPS order mandates that Susan continue to work with the agency to ensure she continues to make progress. The judge sets a review of the case in 6 months. At that court hearing, you provide the court with observations from your monthly home visits, updates from the children's school, and updates from Susan's mental health providers. The judge terminates the COPS order. You begin to prepare your case for closure.

## **CASE SCENARIO 2 - Lucy**

Lucy is the first child born to Norma and Luke, born on December 31. The doctor reports that Lucy was estimated to be at 35 weeks gestation at birth (mildly premature). Her birth weight was 4.0 pounds—somewhat low for her age. Norma admits to the intake caseworker to using heroin intravenously during the last two weeks of her pregnancy. Norma states that she has tried to stop using several times; however, she has not been able to. Lucy's urine

screen is positive for cocaine and opiates (heroin). Luke reports that he has been clean for over a year and attends 12 step meetings. He reported that he moved out of Norma's home several months ago because of her substance use. He reports that he loves Norma and knows Norma wants to be a good mother. Norma states that she wants to stop using because she wants the opportunity to be a good mother. She doesn't want to lose Lucy and is willing to go into treatment. Luke agrees to move in with Norma to help her.

A voluntary in-home safety plan is developed listing Luke as the responsible party. Luke agrees to not allow unsupervised contact between Norma and Lucy. The case is transferred to ongoing services. You refer Norma for substance use services, including random urine screens. Lucy is linked with Help Me Grow services. For the first month, it appears that the family was making progress. Norma links with outpatient services and is screening clean. Norma and Luke report they are going to give their relationship another try. Lucy is up to date on medical appointments and steadily gaining weight. You make weekly face-to-face contact with the family.

You have a home visit scheduled and Luke cancels. The following week, you make an unannounced home visit and no one is home. Norma misses 3 screens over a 2-week period. You receive a call from law enforcement stating that Luke and Norma had overdosed with Lucy in the car. Law enforcement observed multiple heroin needles in the car. Norma still had a heroin needle in her arm when found. Both are charged with drug possession and child endangerment. Lucy is transported to the agency by law enforcement. At that time, both parents are unable to provide care for Lucy and an emergency order of custody is received (*ex parte*) and a hearing is scheduled for the following day. You make face-to-face contact with both Norma and Luke in the hospital. Both are incredibly upset. You provide them with the date/time location of the hearing (both verbally and in writing). You ask if they have family members available. Luke explains that his father is an alcoholic and is violent with his mother and Norma explains that she was involved with the agency as child and her mother also struggles with addiction. You ask for other family/friends that could care for Lucy and they tell you there is no one. You explain that Lucy will be placed in foster care. They both state they intend to be at the hearing; however, they do not show up. You provide the court (or your county legal department) with all the reasonable efforts you implemented to prevent removal. You document prior supportive services (urine screens, Help Me Grow) and the in-home safety plan. A temporary order of custody (TOC) is awarded to the agency and the case is set for trial. A TOC expires after 30 days. The agency attorney files a motion citing Lucy as

a dependent child. The motion requests the Lucy be placed in the temporary custody of the agency. Notification of the trial was sent to both parents. Norma and Luke apply for court appointed attorneys and a GAL is appointed for Lucy.

You invite both Norma and Luke to come to the agency for a case plan meeting. Prior to the meeting, you review the Family Assessment and review risk/non-risk contributors. When they arrive, you talk with them about their strengths and address the concerns you have for them regarding substance use. Both acknowledge they need help and want to be better parents. You link them with services for substance use and explain they will need to provide screens to the agency. You also review their visitation schedule with them. You explain that when they sign the case plan, this will be filed with the court. The case plan becomes a court order.

At the trial for temporary custody, Lucy was adjudicated dependent and placed in the temporary custody of the agency. The case plan was submitted and approved as well.

Norma enters in-patient treatment and Luke links with out-patient treatment. Norma's counselor reports that she was actively engaged in treatment. She is screening clean regularly. Luke is initially engaged in treatment but starts to miss treatment sessions due to his work schedule. He also misses several screens. He is living with a friend. Both parents visit Lucy separately on a supervised basis. During visits, both parents are attentive to Lucy. They feed her, change her diapers, hold her, and talk to her during that time.

Norma is discharged from treatment after 90 days. Before discharge, she links with out-patient services. You express concern that she plans on residing with her mother, as her mother has an extensive history with the agency (when Norma was a child) and has struggles with addiction herself.

Norma, Luke and Norma's counselor, and the GAL attend the Semi-Annual Review. Luke reports that he is employed in construction and is seeking housing. He is discharged from treatment due to a lack of compliance. During the review period, it was reported that he missed 27 urine screens (out of 50). He had 11 total negative screens and 12 positives. Six screens were positive for opiates (he said he had a prescription but could not provide verification), 4 were positive for amphetamines, and two for alcohol. Norma is actively engaged in outpatient treatment, and had several months of consistently clean screens. She is still residing with her mother and looking for employment. After consultation with your supervisor and the GAL,

Norma's visits with Lucy move to in-home unsupervised visits. Visits will expand to overnights in one month. Luke's visits remain supervised at the agency.

The Semi-Annual Review is document is filed with the court.

You make home visits to Norma's mother's home during an unsupervised visit with Lucy. You observe Norma being attentive to the needs of Lucy. Norma obtains a job and a 2-bedroom apartment. Weekend unsupervised visits begin shortly thereafter.

In month 9 of the case, you learn that Luke was arrested on drug trafficking charges and is facing 10 years in prison (due to other prior drug-related arrests). Norma also starts to miss urine screens. Foster mother tells you that when she picked up Lucy from her last weekend visit, a man was holding Lucy and Norma was not home. Foster mother reports that Lucy was also returning from visits, dirty, hungry, and with significant diaper rash. Norma does not return your calls and continues to miss screens. You cancel unsupervised visits. You make an unannounced home visit to Norma's home. You observe several pieces of drug paraphernalia on the coffee table and beer cans in the kitchen. Norma tells you she relapsed and that she intends to go back to treatment. Norma never goes to treatment, continues to miss screens, and is facing eviction.

You learn that Norma is hospitalized after another overdose and checked herself out against the doctor's advice. You continue to make attempts to contact her by calling, sending her letters, contacting her mother and home visits.

The annual review for Lucy is two months away. After discussing this with your supervisor and completing a reunification assessment, it is determined that the level of risk to Lucy is intensive and neither parent has reduced the safety threat that brought Lucy into placement. A motion for permanent custody of Lucy is filed.

### **CASE SCENARIO 3 – Renee**

Trey talked to his aunt Rita four months ago and asked her to care for his two-year-old daughter, Renee, because he wanted to seek in-patient treatment for his ongoing substance use disorder. Renee's mother is deceased. Rita has cared for Renee in her home for the past four months. She has provided Renee with any care needed, including adequate food, clothing,

and shelter. Trey completed treatment and is employed as a mechanic. He has stable housing. Trey picked up Renee to live with him.

Several months later, the agency received a referral of neglect stating that Trey is using, and recently lost his job. Trey reported he did relapse but is clean. He reported he needed services to support him. The agency offers to open a voluntary case to support Trey. You are the assigned caseworker. Trey is linked with urine screens, protective daycare, outpatient treatment, and Help Me Grow. Several months later, Trey begins to miss screens, and several Help Me Grow appointments. He has not been responsive to your attempts for home visits. Renee has not been seen for over a month.

You discuss the case with your supervisor and he contacts the agency attorney. You provide the attorney with the case history, current circumstances, and services you put in place to support Trey and Renee. The attorney recommends a filing for Court Ordered Protective Supervision (COPS). There is no new information suggesting that Renee is unsafe; however, you still want to monitor Trey's progress in reducing the safety concerns. Trey contacts you after being served his court paperwork. He reports that he is overwhelmed with "all these appointments" and that he lost his job. You explain we are asking the court to become involved to ensure Renee is safe.

Your attorney files a motion for COPS and a hearing date is set. A COPS order is received, and a GAL is assigned. Another hearing is set in six months to determine if COPS is still warranted. You link Trey with a parenting mentor to help him stay organized in managing appointments and responsibilities for Renee. You also provide him with employment resources. Trey continues to use protective daycare and starts screening again. All of his screens are clean. He secured new employment and housing.

At the semi-annual review (SAR), you report that Trey continues to make significant progress on his case plan. The SAR is filed with the court. Renee was thriving in Trey's home. Trey also has increased his family support. The GAL has been to the house and observed Trey and Renee to have a strong bond.

At the court hearing, you provide the court with your assessment (based on observations, collateral contacts, safety and risk reassessments), that Trey has addressed all of the safety and behavioral concerns outlined on the case plan and that COPS is no longer needed. Trey also reports that he no longer needs services from the agency. The COPS order is terminated.

## CASE SCENARIO 4 – Sheila

Your agency receives a call from the school counselor at John Brown elementary school. 14-year-old Sheila told the counselor that her stepfather John had been fondling her “private parts.” When you interviewed Sheila, she repeated the allegation. John denies the allegation; however, after a police investigation, he is facing criminal charges. Anna, (mother) is furious with Sheila and told the caseworker that the child is a liar and a troublemaker who was angry with John for “making her toe the line.” Anna refuses to tell John to move out of the home. Sheila’s biological father is deceased. You are the assigned intake caseworker.

You are significantly concerned for the safety of Sheila not only because of the sexual abuse allegations, but Anna’s refusal to ensure Sheila’s safety. You schedule a Team Decision Making Meeting. At the meeting Anna states she wants “nothing to do with Sheila” and wants her “out of the house.” Various safety plans are discussed (out-of-home safety plan, Voluntary Agreement for Care) but Anna refuses to participate in the planning. Sheila states that she has talked with her aunt Leah, and Leah is willing to take placement of Sheila. The intake caseworker immediately contacts her supervisor and the supervisor contacts their agency attorney. Anna refuses to care for her child. She further places her daughter at increased risk of harm by her refusal to put safe guards in place for Sheila. You present this information to your attorney and request an emergency custody order. An *ex parte* is received and a hearing is scheduled for the following day. The intake caseworker provides Anna with written and verbal notification of the hearing.

Leah completes a home assessment and Sheila is placed in her home. The following day, the agency receives TOC of Sheila (as Anna did not show up to the hearing). A motion of temporary custody trial is scheduled in 30 days. The next day, you receive a visit to the office from Leah and Anna. Anna states that she wants Leah to take custody of Sheila. They had already been to the courthouse to fill out the paperwork. Leah’s motion is heard at the adjudication/dispositional hearing. You speak to the agency attorney who advises you that Leah’s motion will be heard at the upcoming hearing. The agency will not contest Leah’s motion. Prior to the hearing you refer Leah for kinship supportive services. You also link Sheila with counseling. In addition, based on safety and family assessments as well as collateral contact with law enforcement, allegations of sexual abuse were substantiated. Law enforcement is pursuing criminal charges. At the hearing, Sheila is adjudicated an abused and dependent minor and placed in the legal custody of Leah.