



Citizen Review Board
Smith Case Materials

July 2010

Citizen Review Board
Volunteer Board Member Orientation Training

Case Materials Exercise – Smith Case

When reading the case plan and case materials, begin your analysis of the information provided by considering the three basic issues identified below.

1. Who is involved in the case?

Think about...

- Children
- Parents
- Attorneys for parents and children
- DHS
- Foster Parents
- Involved relatives
- A tribe
- Others

2. Where is the case headed?

Think about...

- The goals in the case
- The plan for the children
- The achievement dates for the plan
- How long the children have been in foster care
- Whether the plans are appropriate
- Whether the achievement dates are realistic

3. What is being done in the case?

Think about...

- What is being done by DHS
- What is being done by the parents
- What is being done for the children
- The relationship between the services provided and the reasons the children came into foster care
- Whether the children's needs are being met
- What progress has been made in the case



Child Welfare Case Plan (Child in Substitute Care, DHS has Custody)

Case Name: SMITH, IRVIN P Case Number: FT61448
Worker: Michelle Straughan (32AF) Date: 6/18/09
Branch: Frontier (32)

Child Information

Child's Name: Ann S. Jones Person Letter: C
Date of Birth: 01/10/2002 Age: 7 Primary Language EN -English
Most Recent Removal from Home: 01/06/2009

Mother Information:

Mother's Name: STEPHANIE A. SMITH Date of Birth: 9/5/80
Primary Language: EN - English

Father's Information

Father's Name: RANDALL JONES Date of Birth: 4/6/79
Primary Language: EN - English Father's Legal Status: Legal

Stephanie and Randall were married at the time of Ann's conception and birth. Randall is the legal father on Ann's Birth Certificate. Randall's whereabouts are currently unknown. He has had no contact with Ann since Stephanie and Randall divorced when Ann was 1 year old. Stephanie thinks Randall may be living in

Legal Status: Washington state. A search is underway to locate Randall Jones.

Identified Safety Threats

Identified Safety Threats:

Oregon Safety Threat #2 - One or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Irvin has perpetrated physical and emotional violence against Stephanie in the presence of the children on multiple occasions. The children have both attempted to physically and verbally intervene on behalf of their mother on more than one occasion. Both children report being very fearful of Irvin and have said they are afraid that he will hurt or kill their mother.

Oregon Safety Threat #3 - One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior. Stephanie and Irvin both report that they decide to go to "party" on the spur of the moment and leave the children without adequate supervision. The parents have addictive behaviors that are uncontrolled and leave the children in unsafe situations such as alone, after dark, on a busy roadside.

Oregon Safety Threat #8 - A situation, attitudes and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills and/or motivation necessary to assure a child's safety. Both parents admit there have been at least 6 occasions in the past few months when the children have been left alone for a minimum of several hours. Despite being advised of the children's statements that they were afraid, neither parent understands the threat to the children's safety caused

THIS FORM IS AVAILABLE IN ALTERNATE FORMAT UPON REQUEST

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

by leaving them without appropriate supervision and protection.

Safety Analysis

Safety Analysis:

The unsafe circumstances including lack of supervision and exposure to domestic violence have occurred on at least 6 recent occasions and appear to be increasing in frequency over the past several months. Both parents lack an understanding of their protective role in relation to adequate supervision and protection for the children. Both parents are choosing to "party" (including excessive use of alcohol and possible meth use) several nights a week rather than providing appropriate supervision for the children. Irvin has perpetrated violence against Stephanie in front of the children placing the children at threat of severe harm. Irvin does not recognize the significant negative effects of his violent and controlling behaviors on his children. Stephanie is minimizing the seriousness of the domestic violence, is blaming herself for Irvin's violent and controlling behaviors, and denies the children have been afraid or are at threat of severe harm from the violence perpetrated by Irvin.

Disposition

Disposition:

The assessment was founded for Neglect: Lack of Supervision and Protection against both parents in relation to both children; and Threat of Harm: Domestic Violence against Irvin in relation to both children.

Indian Child Welfare Summary

Indian Child Welfare Summary:

A search is underway to locate Ann's legal father and an ICWA inquiry will be made upon locating him.

Hearing Information

Type of Hearing:

A jurisdictional hearing was held on March 04, 2009

Type of Hearing Narrative:

Legal Information

Jurisdictional Basis:

The mother, Stephanie Smith, has been a victim of domestic violence, perpetrated by Irvin. P. Smith, father of Michael, some of which has occurred in the presence of the children.

The mother is unable to protect the children from exposure to domestic violence.

Irvin P. Smith, Michael's father, has an alcohol problem that impairs his ability to parent the children.

The parents failed to provide the children with the care, guidance and protection necessary for the physical, mental or emotional well-being of the children.

The whereabouts of Randall Jones, the father of Ann Jones, are unknown and he is unavailable to parent his child.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Location of Child

Type of Placement(s):

Relative foster home

Type of Placement(s) Narrative:

The children were placed in Shelter Care on 01/06/09. The children were moved to a relative foster home (maternal grandmother) on 01/30/09 as part of an out-of-home ongoing safety plan developed at the Child Safety Meeting.

Relative Search and Current Placement

Relative Search and Current Placement:

The maternal grandmother was identified as a potential placement resource at the time the children were taken into care. DHS needed some additional information regarding her appropriateness to serve as a relative provider, so the children were originally placed together in Shelter Care. The maternal grandmother has continued to engage with DHS and is certified as the relative foster provider. She has indicated she is willing to be considered as both a temporary and permanent placement resource as needed. Letters have been sent to a maternal sister, aunt and cousin, and to Irvin Smith's parents and siblings. Family foster care is the most appropriate and least restrictive placement for these children as they have spent substantial time in their grandmother's home and have a strong relationship with her. Out of home placement is necessary as Irvin and Stephanie are currently unable and/or unwilling to comply with the requirements of an in-home ongoing safety plan.

Child Safety and Well Being

Child Description, Their Needs and Well-Being:

Both children have had medical and mental health assessments since placement. Both children are currently within normal ranges for physical development and have no unmet health needs. Both children reported to the assessing mental health worker that they have been having nightmares and feel anxious and fearful that their mother will be hurt or die while they are away from her. Recommendations were made within the mental health assessments that both children enter into mental health counseling to address past trauma as well as the current separation from their parents. Both children attended their first counseling session this past week. The children reportedly enjoyed meeting with their counselors and told their grandma they think they will like having someone to talk to about the things that have been scaring them.

Ann is functioning quite well at school both academically and with her peers. Her teacher reports she has recently seemed much more quiet and distracted than usual, but continues to complete her work and requires no special assistance.

Ann and Michael are very close and rarely experience conflict with each other. They are unable to sleep unless they are together in one bedroom. Ann frequently "parents" Michael and maternal grandmother is currently working with the therapist to help reassure Ann that Ann does not have to feel responsible to take care of Michael.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Youth Transitional Programs and Services: n/a

Protective Capacity

Relationship: Mother

Protective Capacity:

Existing Protective Capacity:

Stephanie has and demonstrates the ability to provide for the basic physical needs of her children. She provides nutritious meals, seeks appropriate medical care as needed, provides a clean and physically appropriate home, and assists the children with their personal hygiene routines.

Stephanie has a history of being protective. She has made efforts at safety planning with the children in response to the violence perpetrated by Irvin.

Diminished Protective Capacities:

Stephanie does not demonstrate impulse control. She has failed to plan for her children's safety prior to acting on her urges/desires to "party" including excessive use of alcohol and occasional meth use.

Stephanie does not fully understand her protective role and does not adequately plan to protect the children. She is unrealistic in her expectations of the children to keep themselves safe and underestimates the dangers to the children related to lack of adequate supervision and exposure to the domestic violence perpetrated by Irvin.

Stephanie does not perceive her family's life circumstances accurately. She does not adequately recognize the safety threats to the children posed by the lack of supervision and exposure to Irvin's violent/controlling behaviors. Stephanie minimizes the seriousness of the level of violence that the children have experienced in their home and does not recognize the resulting negative emotional impact on the children.

Relationship: Father

Protective Capacity:

(stepfather to Ann, father to Michael)

Existing Parental Protective Capacity:

Irvin has and demonstrates the ability to take action to provide for the material needs of the children. He maintains steady, stable employment in order to financially support the family in obtaining nutritious meals, medical care as needed, and maintaining a physically adequate home.

Diminished Protective Capacities:

Irvin does not demonstrate impulse control. He has failed to plan for the children's safety prior to acting on his urges/desires to "party" including excessive use of alcohol.

Irvin is not self-aware as a caregiver. He does not understand the cause and effect relationship between his violent/controlling behaviors and the negative impact on the children. Irvin does not recognize his behaviors as being dangerous to others and in conflict with his responsibilities as a caregiver.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Reasonable/Active Efforts to Prevent Placement

Reasonable/Active Efforts to Prevent Placement:

There were no efforts possible at the time of placement to prevent placement. Irvin was too intoxicated to provide for the safety of the children and Stephanie's whereabouts were unknown. Since the time of placement, efforts to reunite have included multiple contacts between the caseworker and family members to analyze how the safety/lack of safety is operating within the family in the attempt to develop an in-home safety plan. Relative search activities including the certification of a relative foster provider (maternal grandmother) and placement of the children in her care. A Child Safety Meeting was held in the attempt to create an in-home ongoing safety plan.

Ongoing Safety Plan

Ongoing Safety Plan:

Neither Stephanie or Irvin currently acknowledge any recognition of the threats to the children's safety posed by the lack of supervision and exposure to domestic violence. Neither Stephanie or Irvin are willing to consider Irvin leaving the home to allow Stephanie and the children to be in the family home with another responsible adult present to ensure adequate supervision and prevent further exposure to domestic violence. Both parents consistently state if the children cannot come home with both parents, and no one else in the home, they should stay with Stephanie's mother, Mrs. Harris. All contact between the children and their parents will be supervised by DHS. Mrs. Harris has agreed to immediately report to the caseworker if either parent attempts to make any type of contact with the children without DHS supervision. The SSA, Certifier and Caseworker will make unannounced visits to ensure the safety and well-being of the children.

Visitation Plan

Visitation Plan:

Stephanie is visiting on Wednesday mornings from 9 to 10 am at the DHS office.
Irvin is visiting on Wednesday mornings from 10:15 to 11:15 am at the DHS office.
DHS SSA is providing transportation when needed. Foster parent usually transports children.
Once a week visit at this time due to DHS time constraints. Time will increase when closer to moving the children home

Permanency Planning

Case Plan Development:

Both Stephanie and Irvin participated in the Protective Capacity Assessment Process to assist in identifying the goals of the case plan. Oregon Family Decision Meetings (one was held for each parent and their extended family members) were held on March 11, 2009 and extended family members for both Stephanie and Irvin's families were present to contribute to the case planning process. The caseworker advised the participants of both meetings as to services available within the community to support the parents in achieving the outcomes of the case plan.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Primary Permanency Plan: Place with parent (return to parent home)

Explanation: This option was discussed and decided upon at both OFDMs

Conditions to Return:

1. Stephanie and/or Irvin must demonstrate a basic recognition of how their own thoughts, emotions and behaviors have contributed to the current lack of child safety and demonstrate a desire to increase her/his ability to protect the children from the safety threats.
 2. Stephanie and/or Irvin must agree that they will not be in the presence of each other while the children are present.
 3. Stephanie and/or Irvin must demonstrate a willingness and ability to comply with an in-home ongoing safety plan, including accepting the services/presence of safety service providers as determined necessary by DHS to assure the children's safety.
-

Expected Outcomes:

1. Ann and Michael will have parent(s)/legal caretaker(s) who can and will consistently and appropriately plan for and provide for the children's safety prior to acting on their own urges/desires.
 2. Ann and Michael will have parent(s)/ legal caretaker (s) who understand the damaging impacts on Ann and Michael of exposure to domestic violence and who consistently take appropriate actions to effectively protect the children from exposure to domestic violence.
-

Actions:

Stephanie has chosen to begin to participate in the Women's Empowerment Group, individual mental health therapy, and will attend her children's mental health therapy sessions as directed by the children's therapists. The intent of these actions is for Stephanie to gain knowledge about the safety needs of her children, including the impacts on the children from the lack of adequate supervision and exposure to domestic violence. Stephanie may also choose to attend AA meetings if she is unable to maintain a level of sobriety that will allow her to meet her children's needs. DHS has also offered additional referrals to Stephanie including a substance abuse assessment and any necessary treatment referrals, and one-on-one Parent Training services, but Stephanie reports she is not interested in those services at this time.

Irvin reports he has decided to enroll in the Batterer's Intervention Group to learn more about domestic violence in general and to further consider whether his behaviors have had any negative impacts on his family. DHS has also offered referrals to a substance abuse assessment and mental health assessment and support in obtaining any necessary treatment and/or counseling services as needed. Irvin was also advised of the parent education services available through DHS and within the local community. Irvin reports he is not interested in substance abuse, mental health or parent education services at this time.

Concurrent Permanency Plan: Adoption

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Explanation:

Progress to Date:

Conditions for Return:

Stephanie and Irvin are not yet ready to enter into an ongoing safety plan that would require anything other than the return of the children to both of them at the family home with no other safety services. Those conditions are not adequate to manage the identified safety threats and the current placement in relative foster care is the most appropriate, least restrictive safety plan at this time.

Expected Outcomes:

Stephanie has begun attending the Women's Empowerment Group and has an intake appointment scheduled next week with a mental health therapist. Stephanie appears to be considering the possibility that her children require more supervision than was provided prior to them coming into care, but has not reached that conclusion quite yet. Stephanie continues to blame herself for the violence perpetrated on her by Irvin and to minimize the seriousness of the violence and the impacts of the violence on her children. The Department will continue to reassess with Stephanie the appropriateness/effectiveness of the services/activities and will make additional referrals if needed in order to assist Stephanie in reaching the expected outcomes.

Irvin has verbally expressed a willingness to participate in the Batterer's Intervention Program, but has failed to attend two recently scheduled intake sessions. Irvin continues to blame Stephanie, the children, and DHS for the family's problems and appears unable or unwilling to consider what role his beliefs and behaviors have had on the lack of child safety. The Department will continue to reassess with Irvin, the appropriateness/effectiveness of the services/activities and will make additional referrals if needed in order to assist Irvin in reaching the expected outcomes.

Primary and Concurrent Permanency Plan Parental Discussion:

Concurrent permanency planning and ASFA timelines were discussed individually with both parents by this caseworker during the Protective Capacity Assessment and prior to and during the OFDMs.

Filing Decision

Filing Decision:

Circumstances requiring filing of a TPR petition do not exist at this time.

Substitute Caregiver Information:

Substitute Caregiver Information:

The relative foster provider has actively connected with Michael's preschool teacher and both children's mental health therapists in order to support her in meeting the children's specific needs while they are in her care.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier (32)

Face – to – Face Contact

Caseworker Contact with Child and Parent:

Regular face to face contact with the children and parents takes place while the family is here for visits, or during home visits.

Contact Dates and Child:

Ann S. Jones (C)

Wednesday, January 14, 2009; Wednesday, February 11, 2009; Wednesday, March 11, 2009;
Wednesday, April 8, 2009; Wednesday, May 13, 2008; Monday, June 8, 2009;

Contact Dates and Mother:

Stephanie A. Smith (B)

Monday, January 12, 2009; Wednesday, February 4, 2009; Wednesday, March 9, 2009; Monday,
April 6, 2009; Monday, May 11, 2009; Monday, May 25, 2009, Thursday, June 11, 2009; Thursday,
June 18, 2009

Contact Dates and Father:

Contact Dates with Relative Caregiver/Foster Parent/Provider:

Regular contact is made with the maternal grandmother.

Collaterals, Relatives and Others:

Child and Family Information

MOTHER INFORMATION

CONFIDENTIAL ADDRESS

Mother's Name: STEPHANIE A. SMITH

Whereabouts: In Home

Bldg/Apt#: Stephanie Smith

Street: 133 Barclay Ave.

City/State/Zip Code: Willamette City, OR 97045

Phone Number: (503) 665-2509

FATHER INFORMATION

CONFIDENTIAL ADDRESS

Father's Name: RANDALL JONES

Whereabouts: Unknown

Bldg/Apt#:

Street:

City/State/Zip Code:

Phone Number: ()

CASA INFORMATION

CASA Name:

Bldg/Apt#:

Street:

City/State/Zip Code:

Phone Number: ()

ATTORNEY INFORMATION

Case Name: SMITH, IRVIN P
Worker: Michelle Straughan (32AF)
Branch: Frontier(32)

Case Number: FT61448
Date: 6/18/09

Phone Number: (503) 237-8671

OTHER SIGNIFICANT PERSONS/RELATIVES

Name: _____
Relationship: _____
Bldg/Apt#: _____ Street: _____
City/State/Zip Code: _____
Phone Number: () _____

Additional Information

Signatures

Caseworker: Michelle Straughan Date: 6-18-09
Supervisor: [Signature] Date: 6-22-09
Parent/Legal Guardian: _____ Date: _____
Parent/Legal Guardian: _____ Date: _____

Mailing Information

Copies of this form mailed by: (Signature) _____ Date: _____
To: Mother: _____ Date: _____
Father: _____ Date: _____
Attorney: _____ Date: _____
Legal Guardian: _____ Date: _____

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Health Information for Child(ren)
CF 310H

Case FT61448
Date .06/18/09
Worker..Straughan
Branch Frontier
Child Name Ann S. Jones
Person Letter P/L C
Date of Birth 1/10/02
Age 7
Primary Language English
Last Updated

1. HEALTH PROVIDERS

Doctor Dr. Bris Last Exam 12/23/08
Dentist Dr. Guscese Last Exam 11/12/08
Therapist ESD Last Exam 5/04/09

2. HEALTH INFORMATION

a. Medical Health

No concerns at this time

b. Allergy Alert N/A

COMMENTS ON HEALTH OR PROVIDERS:

c. Medications N/A

d. Mental Health Information

Has the child had a mental health assessment or a psychological evaluation? [X] Yes [] No

e. Child's Diagnosis

f. Treatment Evaluation Recommended mental health counseling to address past trauma and current separation from parents. Ann reportedly enjoyed meeting with her counselor.

3. IMMUNIZATION HISTORY

Vaccinations such as DPT (Diphtheria/Pertussis/Tetanus), OPV (oral Polio), HIB (Influenza), HEP B (Hepatitis B), and MMR (Measles/Mumps/Rubella) are recommended on the following schedule:

- Age: 2 months: DPT#1, OPV #1, HIB #1, HEP B #2
4 months: DPT #2, OPV #2, HIB #2
6 months: DPT #3, HIB #3, HEP B #3
12 months: Tuberculin Skin Test
15 months: MMR, DPT #4, OPV #3, HIB #4

4-6 years: DPT #5, OPV #4 (Repeat every 10 years)
 Tetanus-Diphtheria (if injured may be needed every 5 years)
 12 years: MMR #2

a. Dates

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

DPT - (Diphtheria/Pertussis/Tetanus)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
DTAP	3/14/02	5/23/02	7/27/02	6/30/03	5/15/06		

Polio

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
IPV	3/14/02	5/23/02	6/30/03	5/15/06			

MMR (Measles/Mumps/Rubella)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
MMR	6/30/03						

Hep B (Hepatitis B)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
PRPOMP	3/14/02	7/27/02					

Varicella (Chickenpox)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
Var							

HIB - (Influenza)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
PROMP	3/14/02	5/23/02	7/27/02	6/30/03			

Tetanus (Additional shots)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness
	5/15/06						

Pneumo (Pneumococcal Conjugate)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

TB Screening

Date: 1/30/02 Type: Result: N

Date: Type: Result:

Date: Type: Result:

Type:
Result:

Medical Immunization Exemptions

If no immunizations are listed, explain why.
Include parent's objections, medical or religious reasons.

4. SIGNATURE AND MAILING INFORMATION

Copies of 310E mailed:

- To: Mother: (Date mailed to mother)
- Father: (Date mailed to mother)
- Provider: (Date mailed to mother)
- Legal Guardian: (Date mailed to mother)
- Other: (Date mailed to mother)
- Enter the names of any other persons (that were provided this information)

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Education Information for Child(ren) CF 310E

Child Name Person Letter Ann S Jones P/L C
Date of Birth 1/10/02
Age 7
Primary Language English
Last Updated

1. EDUCATION

School Name Tualatin West
Street 2123 City St.
City, State, Zip Willamette City, Or 97045
District Evergreen
Grade 2
Address
Grade
Performance in Math below
Performance in Verbal/Reading at grade level
Has Learning Disability no
Attendance full time, part time, not attending, dropped, suspended or expelled. Entry is required when a school has been selected) part time
Has an IEP? no
Will graduate by age 19 yes

- a. Out of State School/School Not on List none
- b. School Performance Staff report poor attendance prior to DHS intervention. Ann has excelled in school since entering foster care. She struggles with math and is currently in summer school to help her retain information she gained this last year. Regular attendance seems to have made a huge difference academically.
- c. Individual Educational Plan (IEP) no
- d. School Experience Ann enjoys school and is getting along well with her peers.

15. SIGNATURE AND MAILING INFORMATION

Caseworker Signature: _____ Date:

Supervisor Signature: _____ Date:

Copies of 310E mailed (by signature):

To: Mother:

Father:

Provider:

Legal Guardian:

Other:

Date mailed to other (Specify): (Enter the name or names of any other persons that were provided this information.)

THIS FORM IS AVAILABLE IN ALTERNATE FORMAT UPON REQUEST

*Indicates a topic mandatory for compliance with Section 422 of the Social Security Act or ICWA requirements

Policy I-1.2

FILE: Narrative Section

CF 310E (7/04)

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Case Name: SMITH, IRVIN P Case Number: FT61448
Worker: Michelle Straughan (32AF) Date: 6/18/09
Branch: Frontier(32)

Child Information

Child's Name: Michael I. Smith Person Letter: D

Date of Birth: 01/24/2004 Age: 5 Primary Language EN - English

Most Recent Removal from Home: 01/06/09

Mother Information:

Mother's Name: STEPHANIE A. SMITH Date of Birth: 9/5/80

Primary Language: EN-English

Father's Information

Father's Name: IRVIN P. SMITH Date of Birth: 4/1/80

Primary Language: EN -English Father's Legal Status: Legal

Irvin and Stephanie were married at the time of Michael's conception and birth. Irvin is listed as legal father on Michael's birth certificate. Stephanie and Irvin remain

Legal Status: married and are living together in the family home.

Identified Safety Threats

Identified Safety Threats:

Oregon Safety Threat #2 - One or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Irvin has perpetrated physical and emotional violence against Stephanie in the presence of the children on multiple occasions. The children have both attempted to physically and verbally intervene on behalf of their mother on more than one occasion. Both children report being very fearful of Irvin and have said they are afraid that he will hurt or kill their mother.

Oregon Safety Threat #3 - One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior. Stephanie and Irvin both report that they decide to go to "party" on the spur of the moment and leave the children without adequate supervision. The parents have addictive behaviors that are uncontrolled and leave the children in unsafe situations such as alone, after dark, on a busy roadside.

Oregon Safety Threat #8 - A situation, attitudes and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills and/or motivation necessary to assure a child's safety. Both parents admit there have been at least 6 occasions in the past few months when the children have been left alone for a minimum of several hours. Despite being advised of the children's statements that they were afraid, neither parent understands the threat to the children's safety caused by leaving them without appropriate supervision and protection.

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Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Safety Analysis

Safety Analysis:

The unsafe circumstances including lack of supervision and exposure to domestic violence have occurred on at least 6 recent occasions and appears to be increasing in frequency over the past several months. Both parents lack an understanding of their protective role in relation to adequate supervision and protection for the children. Both parents are choosing to "party" (including excessive use of alcohol and possible meth use) several nights a week rather than providing appropriate supervision for the children. Irvin has perpetrated violence against Stephanie in front of the children placing the children at threat of severe harm. Irvin does not recognize the significant negative effects of his violent and controlling behaviors on his children. Stephanie is minimizing the seriousness of the domestic violence, is blaming herself for Irvin's violent and controlling behaviors, and denies the children have been afraid or are at threat of severe harm from the violence perpetrated by Irvin.

Disposition

Disposition:

The assessment was founded for Neglect, Lack of Supervision and Protection against both parents in relation to both children; and Threat of Harm: Domestic Violence against Irvin in relation to both children

Indian Child Welfare Summary

Indian Child Welfare Summary:

ICWA forms were completed by Stephanie and Irvin indicating ICWA does not apply.

Hearing Information

Type of Hearing: Jurisdictional

Type of Hearing Narrative:

Legal Information

Jurisdictional Basis:

The mother, Stephanie Smith, has been a victim of domestic violence, perpetrated by Irvin. P. Smith, father of Michael, some of which has occurred in the presence of the children.

The mother is unable to protect the children from exposure to domestic violence.

Irvin P. Smith, Michael's father, has an alcohol problem that impairs his ability to parent the children.

The parents failed to provide the children with the care, guidance and protection necessary for the physical, mental or emotional well-being of the children.

Location of Child

Type of Placement(s): Relative foster home

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Type of Placement(s) Narrative:

The children were placed in Shelter Care on 01/06/09. The children were moved to a relative foster home (maternal grandmother) on 01/30/09 as part of an out-of-home ongoing safety plan developed at the Child Safety Meeting

Relative Search and Current Placement

Relative Search and Current Placement:

The maternal grandmother was identified as a potential placement resource at the time the children were taken into care. DHS needed some additional information regarding her appropriateness to serve as a relative provider, so the children were originally placed together in Shelter Care. The maternal grandmother has continued to engage with DHS and has been certified as the relative foster provider. She has indicated she is willing to be considered as both a temporary and permanent placement resource as needed. Letters have been sent to a maternal sister, aunt and cousin, and to Irvin Smith's parents and siblings. Family foster care is the most appropriate and least restrictive placement for these children as they have spent substantial time in their grandmother's home and have a strong relationship with her. Out of home placement is necessary as Irvin and Stephanie are currently unable and/or unwilling to comply with the requirements of an in-home ongoing safety plan.

Child Safety and Well Being

Child Description, Their Needs and Well-Being:

Both children have had medical and mental health assessments since placement. Both children are currently within normal ranges for physical development and have no unmet health needs. Both children reported to the assessing mental health worker that they have been having nightmares and feel anxious and fearful that their mother will be hurt or die while they are away from her.

Recommendations were made within the mental health assessments that both children enter into mental health counseling to address past trauma as well as the current separation from their parents. Both children attended their first counseling session this past week. The children reportedly enjoyed meeting with their counselors and told their grandma they think they will like having someone to talk to about the things that have been scaring them.

Over the past few months, Michael has been experiencing some increasing behavioral problems with peers (aggressively taking toys away from others, pushing other children down, raising his fist to hit, etc) at his Preschool. The preschool teacher and maternal grandmother have agreed to meet with the mental health therapist and caseworker next week to discuss some of the behavioral concerns and ways to assist Michael. Ann and Michael are very close and rarely experience conflict with each other. They are unable to sleep unless they are together in one bedroom.

Youth Transitional Programs and Services: n/a

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Protective Capacity

Relationship: Mother

Protective Capacity:

Existing Protective Capacity:

Stephanie has and demonstrates the ability to provide for the basic physical needs of her children. She provides nutritious meals, seeks appropriate medical care as needed, provides a clean and physically appropriate home, and assists the children with their personal hygiene routines.

Stephanie has a history of being protective. She has made efforts at safety planning with the children in response to the violence perpetrated by Irvin.

Diminished Protective Capacities:

Stephanie does not demonstrate impulse control. She has failed to plan for her children's safety prior to acting on her urges/desires to "party" including excessive use of alcohol and occasional meth use.

Stephanie does not fully understand her protective role and does not adequately plan to protect the children. She is unrealistic in her expectations of the children to keep themselves safe and under estimates the dangers to the children related to lack of adequate supervision and exposure to the domestic violence perpetrated by Irvin.

Stephanie does not perceive her family's life circumstances accurately. She does not adequately recognize the safety threats to the children posed by the lack of supervision and exposure to Irvin's violent/controlling behaviors. Stephanie minimizes the seriousness of the level of violence that the children have experienced in their home and does not recognize the resulting negative emotional impact on the children.

Relationship: Father

Protective Capacity:

Existing Parental Protective Capacity:

Irvin has and demonstrates the ability to take action to provide for the material needs of the children. He maintains steady, stable employment in order to financially support the family in obtaining nutritious meals, medical care as needed, and maintaining a physically adequate home.

Diminished Protective Capacities:

Irvin does not demonstrate impulse control. He has failed to plan for the children's safety prior to acting on his urges/desires to "party" including excessive use of alcohol.

Irvin is not self-aware as a caregiver. He does not understand the cause and effect relationship between his violent/controlling behaviors and the negative impact on the children. Irvin does not recognize his behaviors as being dangerous to others and in conflict with his responsibilities as a caregiver.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Reasonable/Active Efforts to Prevent Placement

Reasonable/Active Efforts to Prevent Placement:

There were no efforts possible at the time of placement to prevent placement. Irvin was too intoxicated to provide for the safety of the children and Stephanie's whereabouts were unknown. Since the time of placement, efforts to reunite have included multiple contacts between the caseworker and family members to analyze how the safety/lack of safety is operating within the family in the attempt to develop an in-home safety plan. Relative search activities include the certification of a relative foster provider (maternal grandmother) and placement of the children in her care. A Child Safety Meeting was held in the attempt to create an in-home ongoing safety plan.

Ongoing Safety Plan

Ongoing Safety Plan:

Neither Stephanie or Irvin currently acknowledge any recognition of the threats to the children's safety posed by the lack of supervision and exposure to domestic violence. Neither Stephanie or Irvin are willing to consider Irvin leaving the home to allow Stephanie and the children to be in the family home with another responsible adult present to ensure adequate supervision and no further exposure to domestic violence. Both parents consistently state if the children cannot come home with both parents, and no one else in the home, they should stay with Stephanie's mother, Mrs. Harris. Further interviews with Mrs. Harris have allowed DHS to conclude that she is willing and able to serve as a safe relative foster parent to the children. All contact between the children and their parents will be supervised by DHS. Mrs. Harris has agreed to immediately report to the caseworker if either parent attempts to make any type of contact with the children without DHS supervision. The SSA, Certifier and Caseworker will make unannounced visits to ensure the safety and well-being of the children.

Visitation Plan

Visitation Plan:

See attached supervised visitation plan.

Permanency Planning

Case Plan Development:

Both Stephanie and Irvin participated in the Protective Capacity Assessment Process to assist in identifying the goals of the case plan. Oregon Family Decision Meetings (one was held for each parent and their extended family members) were held on March, 11, 2009 and extended family members for both Stephanie and Irvin's families were present to contribute to the case planning process. The caseworker advised the participants of both meetings as to services available within the community to support the parents in achieving the outcomes of the case plan.

Primary Permanency Plan: Place with parent (return to parent home)

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Explanation: This option was discussed and decided upon at both OFDMs

Conditions to Return:

1. Stephanie and/or Irvin must demonstrate a basic recognition of how their own thoughts, emotions and behaviors have contributed to the current lack of child safety and demonstrate a desire to increase her/his ability to protect the children from the safety threats.
 2. Stephanie and/or Irvin must agree that they will not be in the presence of each other while the children are present.
 3. Stephanie and/or Irvin must demonstrate a willingness and ability to comply with an in-home ongoing safety plan, including accepting the services/presence of safety service providers as determined necessary by DHS to assure the children's safety.
-

Expected Outcomes:

1. Ann and Michael will have parent(s)/legal caretaker(s) who can and will consistently and appropriately plan for and provide for the children's safety prior to acting on their own urges/desires.
 2. Ann and Michael will have parent(s)/ legal caretaker (s) who understand the damaging impacts on Ann and Michael of exposure to domestic violence and who consistently take appropriate actions to effectively protect the children from exposure to domestic violence.
-

Actions:

Stephanie has chosen to begin to participate in the Women's Empowerment Group, individual mental health therapy, and will attend her children's mental health therapy sessions as directed by the children's therapists. The intent of these actions is for Stephanie to gain knowledge about the safety needs of her children, including the impacts on the children from the lack of adequate supervision and exposure to domestic violence. Stephanie may also choose to attend AA meetings if she is unable to maintain a level of sobriety that will allow her to meet her children's needs. DHS has also offered additional referrals to Stephanie including a substance abuse assessment and any necessary treatment referrals, and one-on-one Parent Training services, but Stephanie reports she is not interested in those services at this time.

Irvin reports he has decided to enroll in the Batterer's Intervention Group to learn more about domestic violence in general and to further consider whether his behaviors have had any negative impacts on his family. DHS has also offered referrals to a substance abuse assessment and mental health assessment and support in obtaining any necessary treatment and/or counseling services as needed. Irvin was also advised of the parent education services available through DHS and within the local community. Irvin reports he is not interested in substance abuse, mental health or parent education services at this time.

Concurrent Permanency Plan: Adoption

Explanation:

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Progress to Date:

Conditions for Return:

Stephanie and Irvin are not yet ready to enter into an ongoing safety plan that would require anything other than the return of the children to both of them at the family home with no other safety services. Those conditions are not adequate to manage the identified safety threats and the current placement in relative foster care is the most appropriate, least restrictive safety plan at this time.

Expected Outcomes:

Stephanie has begun attending the Women's Empowerment Group and has an intake appointment scheduled next week with a mental health therapist. Stephanie appears to be considering the possibility that her children require more supervision than was provided prior to them coming into care, but has not reached that conclusion quite yet. Stephanie continues to blame herself for the violence perpetrated on her by Irvin and to minimize the seriousness of the violence and the impacts of the violence on her children. The Department will continue to reassess with Stephanie the appropriateness/effectiveness of the services/activities and will make additional referrals if needed in order to assist Stephanie in reaching the expected outcomes.

Irvin has verbally expressed a willingness to participate in the Batterer's Intervention Program, but has failed to attend two recently scheduled intake sessions. Irvin continues to blame Stephanie, the children, and DHS for the family's problems and appears unable or unwilling to consider what role his beliefs and behaviors have had on the lack of child safety. The Department will continue to reassess with Irvin, the appropriateness/effectiveness of the services/activities and will make additional referrals if needed in order to assist Irvin in reaching the expected outcomes.

Primary and Concurrent Permanency Plan Parental Discussion:

Concurrent permanency planning and ASFA timelines were discussed individually with both parents by this caseworker during the Protective Capacity Assessment and prior to and during the OFDMs.

Filing Decision

Filing Decision:

Circumstances requiring filing of a TPR petition do not exist at this time.

Substitute Caregiver Information:

Substitute Caregiver Information:

The relative foster provider has actively connected with Michael's preschool teacher and both children's mental health therapists in order to support her in meeting the children's specific needs while they are in her care.

Face – to – Face Contact

Caseworker Contact with Child and Parent:

Regular face to face contact with the children and parents takes place while the family is here for visits, or during home visits.

Case Name: SMITH, IRVIN P

Case Number: FT61448

Worker: Michelle Straughan (32AF)

Date: 6/18/09

Branch: Frontier(32)

Contact Dates and Child:

Michael I. Smith (D)

Wednesday, January 14, 2009; Wednesday, February 11, 2009; Wednesday, March 11, 2009;
Wednesday, April 8, 2009; Wednesday, May 13, 2009; Monday, June 8, 2008;

Contact Dates and Mother:

Stephanie A. Smith (B)

Monday, January 12, 2009; Wednesday, February 4, 2009; Monday, March 9, 2009; Monday, April 6,
2009; Monday, May 11, 2009; Monday, May 25, 2009; Thursday, June 11, 2009; Thursday, June 18,
2009

Contact Dates and Father:

Irvin P. Smith (A)

Monday, January 12, 2009; Monday, February 9, 2009; Wednesday, March 11, 2009; Wednesday,
April 8, 2009; Wednesday, May 13, 2009; Wednesday, June 10, 2009

Contact Dates with Relative Caregiver/Foster Parent/Provider:

Regular contact is made with the maternal grandmother.

Collaterals, Relatives and Others:

Child and Family Information

MOTHER INFORMATION

CONFIDENTIAL ADDRESS

Mother's Name:

STEPHANIE A. SMITH

Whereabouts: In Home

Bldg/Apt#: Stephanie Smith

Street: 133 Barclay Ave.

City/State/Zip Code: Willamette City, OR 97045

Phone Number: (503) 665-2509

FATHER INFORMATION

CONFIDENTIAL ADDRESS

Father's Name: IRVIN P. SMITH

Whereabouts: In Home

Bldg/Apt#: A

Street: 133 Barclay Ave.

City/State/Zip Code: Willamette City, OR 97045

Phone Number: (503) 665-2509

CASA INFORMATION

CASA Name:

Bldg/Apt#:

Street:

City/State/Zip Code:

Phone Number: ()

ATTORNEY INFORMATION

Attorney Name: Joseph Morgan

Representing: Father

Bldg/Apt#: Suite 7

Street: 13929 Oregon St., Milby, OR 97013

Case Name: SMITH, IRVIN P
Worker: Michelle Straughan (32AF)
Branch: Frontier (32)

Case Number: FT61448
Date: 6/18/09

Attorney Name: Dave Scott
Representing: Mother
Bldg/Apt#: Suite B

Street: 6751 NW Theis Rd., Willamette City, OR 97045
Phone Number: (503) 718-8007

OTHER SIGNIFICANT PERSONS/RELATIVES

Name: I
Relationship:
Bldg/Apt#: Street:
City/State/Zip Code:
Phone Number: ()

Additional Information

Signatures

Caseworker: Michelle Straughan Date: 6.18.09
Supervisor: [Signature] Date: 6-22-09
Parent/Legal Guardian: _____ Date: _____
Parent/Legal Guardian: _____ Date: _____

Mailing Information

Copies of this form mailed by: (Signature) _____ Date: _____
To: Mother: _____ Date: _____
Father: _____ Date: _____
Attorney: _____ Date: _____
Legal Guardian: _____ Date: _____

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Health Information for Child(ren)
CF 310H

Case Irvin P.Smith
Date 06/16/09
Worker.. Straughan
Branch Frontier
Child Name Michael
Person Letter D
Date of Birth 1/24/04
Age 5
Primary Language English
Last Updated

1. HEALTH PROVIDERS

Doctor Dr. Bris Last Exam 5/23/09
Dentist Dr. Guscese Last Exam 11/12/08
Therapist Dr. Morrison Last Exam 05/12/09

2. HEALTH INFORMATION

a. Medical Health Michael is in good physical health. Upon entering care in April he received a Well Child Check. His most recent doctor appointment was May 23 . His grandmother reported adjustments in his medications for puffy eyes and allergies. He is taking Loaratadine, 10 mg. 2x daily

b. Allergy Alert seasonal allergies

COMMENTS ON HEALTH OR PROVIDERS:

c. Medications Loatadine, 10 mg 2X daily.

Michael is being seen by his physician on June 19 for potential medications to assist with his behaviors.

d. Mental Health Information

Has the child had a mental health assessment or a psychological evaluation? [X] Yes [] No

e. Child's Diagnosis

f. Treatment Evaluation Recommended merntal health couseling to address past trauma and current separation from parents.

3. IMMUNIZATION HISTORY

Vaccinations such as DPT (Diphtheria/Pertussis/Tetanus), OPV (oral Polio), HIB (Influenza), HEP B (Hepatitis B), and MMR (Measles/Mumps/Rubella) are recommended on the following schedule:

Age: 2 months: DPT#1, OPV #1, HIB #1, HEP B #2
4 months: DPT #2, OPV #2, HIB #2

6 months: DPT #3, HIB #3, HEP B #3
 12 months: Tuberculin Skin Test
 15 months: MMR, DPT #4, OPV #3, HIB #4
 4-6 years: DPT #5, OPV #4 (Repeat every 10 years)
 Tetanus-Diphtheria (if injured may be needed every 5 years)
 12 years: MMR #2

a. Dates

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

DPT - (Diphtheria/Pertussis/Tetanus)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

Polio

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

MMR (Measles/Mumps/Rubella)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

Hep B (Hepatitis B)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

Varicella (Chickenpox)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

HIB - (Influenza)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

Tetanus (Additional shots)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

Pueumo (Pneumococcal Congugate)

Seq	1 st	2 nd	3 rd	4th	5 th	Series Comp	Had Illness

TB Screening

Date: Type: Result:

Date: Type: Result:

Date: Type: Result:

Type:

Result:

Medical Immunization Exemptions

If no immunizations are listed, explain why.

Include parent's objections, medical or religious reasons.

4. SIGNATURE AND MAILING INFORMATION

Copies of 310E mailed:

To: Mother: (Date mailed to mother)

 Father: (Date mailed to mother)

 Provider: (Date mailed to mother)

 Legal Guardian: (Date mailed to mother)

 Other: (Date mailed to mother)

 Enter the names of any other persons (that were provided this information)

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Education Information for Child(ren) CF 310E

Child Name Person Letter Michael I. Smith P/L DI
Date of Birth 1/24/04
Age 5
Primary Language English
Last Updated

1. EDUCATION

School Name Tualatin West
Street 2123 City St.
City, State, Zip Willamette City, OR 97045
District Evergreen
Grade K
Address
Grade
Performance in Math below
Performance in Verbal/Reading below
Has Learning Disability
Attendance full time, part time, not attending, dropped, suspended or expelled. Entry is required when a school has been selected) Begins school in the fall
Has an IEP? no
Will graduate by age 19 yes

- a. Out of State School/School Not on List none
b. School Performance Michael will be entering kindergarten. He was aggressive and required constant supervision in preschool. Academically he is below peers. He was evaluated and qualifies for ESD services.
c. Individual Educational Plan (IEP)
d. School Experience Despite his aggression at school he can also show affection and kindness to his teachers and other students. Michael enjoys school.

15. SIGNATURE AND MAILING INFORMATION

Caseworker Signature: _____ Date:

Supervisor Signature: _____ Date:

Copies of 310E mailed (by signature):

To: Mother:

Father:

Provider:

Legal Guardian:

Other:

Date mailed to other (Specify): (Enter the name or names of any other persons that were provided this information.)

THIS FORM IS AVAILABLE IN ALTERNATE FORMAT UPON REQUEST

*Indicates a topic mandatory for compliance with Section 422 of the Social Security Act or ICWA requirements

Policy I-1.2

FILE: Narrative Section

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**IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR FRONTIER COUNTY**

In the Matter of:) Petitioner Number: JV230070
)
Ann S. Jones,) **JURISDICTION AND DISPOSITION**
Michael I. Smith) **JUDGMENT**
Wards.)

THE COURT MAKES THE FOLLOWING FINDINGS:

► **Parties appearing:** Father Mother Guardian Child Tribe Deputy District Attorney Assistant Attorney General Attorney for Father Attorney for Mother Attorney for child Attorney for Tribe Attorney for Guardian CASA

The ward resides in Frontier County and is under the age of 18.

The allegations in the petition or amended petition that have been admitted or proven are:
 Paragraphs: _____ were admitted by father on _____; Paragraphs: _____ were not contested by father. There is no legal father or he is deceased. Father could not be located. Father was found in default. Mother denies the petition and:

Paragraphs: _____ were admitted by mother on _____; Paragraphs: _____ were not contested by mother. Mother is deceased or could not be located. Mother was found in default. Mother denies the petition and:

Paragraphs: **a, b, d, e** were proven by the state by a preponderance of the evidence on March 04, 2009.

Attached are amendments made to the admitted or proven petition paragraphs.
 Father Mother stipulates to jurisdiction.

IT IS ORDERED THAT:

The above ward is within the jurisdiction of the Court and declared a ward of the Court by reason of the following:

The ward is beyond the control of his/her parents, guardian or other person having custody based upon the allegations proven or admitted as set forth above.

The ward's conditions, behavior and circumstances are such as to endanger his/her own welfare or the welfare of others.

The ward is dependent for care and support on a public or private ward caring agency that needs the services of the Court in planning for the best interests of the ward.

The parents or any other person(s) having custody of the ward have:

abandoned the ward;

- failed to provide the ward with the care, support, or education required by law;
- subjected the ward to cruelty, depravity, or unexplained physical injury;
- failed to provide the ward with the care, guidance, and protection necessary for the physical, mental, or emotional well-being of the ward.

ICWA does not apply. ICWA applies in this case, the state has met its burden by clear and convincing evidence and the court has considered expert testimony as required by ICWA.
 The petition was not proven and is dismissed.

► **REASONABLE OR ACTIVE EFFORTS** : 419B.185(1).

No reasonable efforts or Active Efforts finding is necessary because the ward has not been removed from the ward’s home or has been returned to the home of a parent.

In light of the circumstances of the ward and the parents and the ward’s health and safety having been considered as the paramount concern, the court finds that the Department of Human Services (DHS):

has made **has not made** reasonable efforts Active Efforts to prevent or eliminate the need for removal of the ward from the home since the date of removal [419B.185];

Reasonable efforts Active Efforts have been made by DHS in that under the circumstances no efforts were possible that would have prevented the need for removal or made it possible for them to return since the date of removal [419B.185];

► **Placement: diligent efforts findings** [419B.192]

A diligent efforts finding required by ORS 419B.192 is not necessary because the ward is not placed in substitute care.

DHS made did not make diligent efforts to place the ward with siblings.

A diligent efforts finding regarding placement with a sibling is not necessary because the ward has no minor siblings. 419B.192

DHS made did not make diligent efforts to place the ward with a suitable relative.

When making reasonable, Active and diligent efforts:

The court adopts as a recitation of reasonable efforts and diligent efforts Active Efforts and diligent efforts and by reference incorporates herein the facts set forth in the Affidavit, Report dated March 02, 2009.

The court further considers evidence received in court.

Additional Findings Set Forth on the Attached Addendum to this Order. Below in **Other**.

//
//
//
/
/
/

CHILD REMOVED FROM HOME:

The selected method of treatment is the least restrictive and intrusive available that adequately addresses the needs of the child. It is in the best interest of the child to be placed out of the home because of the facts set forth the Report submitted by DHS, dated March 02, 2009 and/or as otherwise set forth below. 419B.337(1)(a).

Visitation Findings [419B.337(3)]

- Visitation findings are not necessary because the ward is not in substitute care.
- DHS has developed a parent/child visitation plan and it is approved.
- DHS has not developed an adequate parent/child visitation plan

the court directs that DHS develop an adequate parent/child visitation plan.

the court directs that the parent/child visitation plan include the following provisions:

The court orders adoption of the parent/child visitation plan set forth in the Visitation Addendum attached hereto and incorporated.

CHILD NOT REMOVED FROM HOME OR ORDERED TO BE RETURNED:

The court does not find that it is in the best interests of the child to be placed in substitute care.

REGARDLESS OF PLACEMENT:

- Parents/guardian agree to participate in the services set forth in the Service Agreement.
- Time lines are set to monitor the efforts and progress of the parent/guardian.
- The case plan bears a rational relationship to the jurisdictional findings of the Court.
- The parent/guardian have been informed of the circumstances in which the concurrent plan could be implemented.
- The court has found Special Circumstances apply and JF10 is attached.

IT IS ORDERED THAT:

The child is placed in the legal and physical custody of:

the Department of Human Services (DHS), Mother Father
 _____; and the same is made guardian of said child until further order of the Court pursuant to ORS 419B.370, subject to any conditions now or hereafter ordered by this Court. The child is made a ward of the court pursuant to ORS 419B.328;

Subject to the Service Agreement or Letter of Expectation attached hereto.

Subject to protective supervision ordered pursuant to ORS 419B.331.

The court further orders mother father to comply with the terms of the Service Agreement Letter of Expectation approved this date.

The Court approves:

The case plan and date of achievement is return to parent by January 6, 2009 /

Mother: _____ no later than _____.

Maintain placement with parent.

The concurrent permanent plan and date of achievement is: Adoption Guardianship Placement with a Fit and Willing Relative [419B.476(4)(f)] Planned Permanent Living Arrangement -Date of achievement: April, 2010.

There is no concurrent plan because child is placed with a parent.

OTHER:

X DHS conduct an absent parent search for Mr. Jones

This case shall next be reviewed:

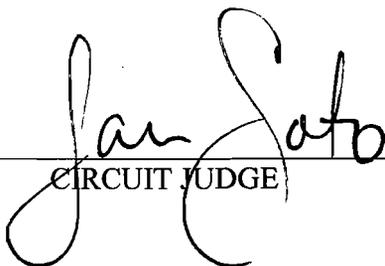
by the court at the annual permanency review on January 06, 2010 at 1:00PM.

by the court at a special review hearing on _____ at _____ AM/PM.

Deadline for DHS to file School Attendance and Face to Face Contact Report with the court: July 6, 2009. [419B.443(1)(d) and (e)]

Parties present today were ORDERED to appear at next date.

DATED: 3/4/09



CIRCUIT JUDGE

Model Juvenile Form	Type:	Number:	Revision
Jurisdiction/Disposition Order	Manual	JF4B	2008-2 120307

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF FRONTIER

Juvenile Department

In the Matter of)
) JV530070
Ann S. Jones) **DEPENDENCY PETITION**
A Child;)
Michael I Smith)
A Child)

TO THE ABOVE ENTITLED COURT:

Petitioner, whose name appears below, respectfully represents to the Court as follows:

The name, age and residence of the above entitled children are as follows: Ann S. Jones is 7 years old having been born on January 10, 2002 and the child's last known address is 133 Barclay Ave. Willamette City, Oregon 97045; Michael I Smith is 5 years old having been born on January 24, 2004 and the child's last known address is 133 Barclay Ave. Willamette City, Oregon 97045.

The children are within the jurisdiction of the Court by reason of the above-mentioned facts and the following facts:

- 1) On or about January 6, 2009, in Willamette City , Oregon, the children's condition or circumstances are such as to endanger the children's welfare, to-wit:
 - a. Irvin P. Smith, Michael's father, has physically and verbally assaulted Stephanie Smith, the children's mother, on multiple occasions within the past 6 months, some of which occurred in the presence of the children
 - b. The mother is unable to protect the children from exposure to domestic violence
 - c. The mother has substance abuse issues which inhibit her ability to effectively parent the children
 - d. Irvin P. Smith, Michael's father, has an alcohol problem that impairs his ability to parent the children.
 - e. The parents failed to provide the children with the care, guidance and protection necessary for the physical, mental or emotional well-being of the children
 - f. The whereabouts of Randall Jones, the father of Ann Jones, are unknown and he is unavailable to parent his child

The name and residence of the child's parents or guardians is as follows:

(Mother) Stephanie Smith, 133 Barclay Ave, Willamette City, Oregon 97045

(Father of Michael) Irvin P. Smith, 133 Barclay Ave, Willamette City, Oregon 97045

(Father of Ann) Randal Jones, whereabouts unknown

The name and residence of the person having physical custody of the child is as follows: *Department of Human Services, Child Welfare Services 200 SE National Avenue, Willamette City, Oregon 97047*

The children reside in Frontier County

The above-named children have lived in the following places with the following persons in the last five years:

This information is being determined

The petitioner, William E Webster, has not participated as a party, witness or in any other capacity, in other litigation concerning the custody of the above-named children in this or any other state.

No other custody litigation involving the child is pending in any other court in this or any other state of which I am aware.

No person, not a party to this proceeding, has physical custody of the above-named children or claims custody or visitation right of whom I am aware

WHEREFORE, Petitioner prays this Court to have an investigation made of the circumstances concerning the above-named children and to make such order or orders as are appropriate in the circumstances.

DATED: January 7, 2009



Petitioner

William E. Webster

Deputy District Attorney

OSB # 27160

**IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR FRONTIER COUNTY**

In the Matter of:) Petitioner Number:
ANN S. JONES) JV530070
MICHAEL I. SMITH)
Children) **SHELTER ORDER**

THE COURT MAKES THE FOLLOWING FINDINGS AND ORDERS based upon a preponderance of the evidence: [Do not use this form for ICWA cases; use JF2i]

► **Parties appearing:** Father Mother Guardian Child Tribe Deputy District Attorney Assistant Attorney General Attorney for Father Attorney for Mother Attorney for child Attorney for Tribe Attorney for Guardian CASA

► **NOTICE FINDINGS:** All parties notified; All parties not notified, DHS will make reasonable efforts to notify the following: **Randall Jones.**

► **INDIAN WARD WELFARE ACT FINDING AND ORDER (ICWA):**

ICWA does not apply, full inquiry having been made;
 DHS has not yet made full inquiry about ICWA; DHS will continue further inquiry and report what it finds back to the court at the next court appearance in this matter. The court cannot currently find that ICWA does or probably will apply.
 ICWA does apply.

► **UCCJEA FINDINGS**

This court has jurisdiction to make an INITIAL ward custody determination because:
 Oregon is the child's home state pursuant to ORS 109.741(1)(a)
 Temporary Emergency Jurisdiction exists in this matter pursuant to ORS 109.751 and will immediately communicate with the State that issued the initial custody determination.
Other: _____.

► **TEMPORARY JURISDICTION FINDINGS AND ORDER:**

The child resides in Frontier County and were taken into physical custody by DHS on January 6, 2009.

The Court was provided and reviewed DHS documentation as required by ORS 419B.185(2).

DHS did **not** provide the documentation as required by ORS 419B.185(2).

Based on the sworn testimony offered this date the Court finds that it is in the best

interests of the children to be removed from the children's home because there is good cause to believe that the children have been neglected and or abused or placed at significant risk of neglect or abuse. 419B.185(d)

[X] The Court further finds that the selected method of treatment is the least restrictive and intrusive available that adequately addresses the needs of the child and that the child cannot be returned home without further danger of suffering physical injury, emotional harm, endangerment to self or others or would not remain within the reach of the court. The court finds that it is in the best interests of the child to be placed outside the child's home.

[] The court does **not** find that it is in the best interests of the child to be placed in substitute care.

► **REASONABLE OR ACTIVE EFFORTS** : 419B.185(1).

[] No reasonable efforts or Active Efforts finding is necessary because the child has not been removed from the child's home or has been returned to the home of a parent.

[X] In light of the circumstances of the child and the parents and the child's health and safety having been considered as the paramount concern, the court finds that the Department of Human Services (DHS):

[] **has made** [] **has not made** [] reasonable efforts [] Active Efforts to prevent or eliminate the need for removal of the child from the home since the date of removal [419B.185];

[X] Reasonable efforts [] Active Efforts have been made by DHS in that under the circumstances no efforts were possible that would have prevented the need for removal or made it possible for them to return since the date of removal [419B.185];

► **Placement: diligent efforts findings** [419B.192]

[] A diligent efforts finding required by ORS 419B.192 is not necessary because the child is not placed in substitute care.

[X] DHS [X] made [] did not make diligent efforts to place the child with siblings.

[] A diligent efforts finding regarding placement with a sibling is not necessary because the child has no minor siblings or it is otherwise not appropriate. 419B.192

[X] DHS [X] made [] did not make diligent efforts to place the child with a suitable relative.

When making reasonable, Active and diligent efforts:

[X] The court adopts as a recitation of [X] reasonable efforts and diligent efforts [] Active Efforts and diligent efforts and by reference incorporates herein the facts set forth in the [X] Affidavit,

[] Report to the Court from DHS dated January 7, 2009 .

[X] The court further considers evidence received in court.

[] Additional Findings [] Set Forth on the Attached Addendum to this Order. [] Below in **Other**.

◆ [] **IT IS ORDERED THAT:**

[] There is probable cause to enter a restraining order against: _____
and that such order is in the best interests of the child. (Attach JUVENILE COURT RESTRAINING
ORDER-JF7) 419.845

▶ **TEMPORARY PLACEMENT**

[X] **IT IS ORDERED** that the child is placed in the temporary care and custody of
[X] Department of Human Services; [] other: _____ and the
same is made guardian of said child until further order of the Court pursuant to ORS
419B.370 and the child is made a ward of the court.

[] the child be returned to _____, the parent or
guardian immediately.

◆ **Other:**

▶ The next Court hearing(s) in this case are:

[] initial appearance for [] mother [] father and is set for _____ AM/PM on _____
[] settlement conference for [] mother [] father and is set for _____ AM/PM on _____
[] pre trial conference for [] mother [] father and is set for _____ AM/PM on _____
_____ Trial date: _____ at _____ am/pm.

The 60 day jurisdiction deadline for this child is: March 6, 2009 [ORS 419B.305(1)]

All parties in attendance were notified of these court dates and are ordered to appear.

DATED: 1/7/09

Jan Joto

CIRCUIT JUDGE

Model Juvenile Form	Type:	Number:	Revision
Shelter Order	Manual	JF2	2008-2 120307

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Verification of ICWA Eligibility

Case Name: SMITH, IRVIN P Case#: FT61448 Worker: Straughan

Name(s) of Child(ren)	D.O.B.	Place of Birth
<u>Michael I Smith</u>	<u>1/24/04</u>	<u>Frontier, Oregon</u>

The following information will be used to establish American Indian/Alaskan Native ancestry. Please answer the questions to be best of your knowledge.

1. Do you have any American Indian or Alaskan Native Ancestry?

NO If "No," stop here and sign the form below.

YES If "Yes," answer **ALL** the questions below. Then turn the form over and fill out the Parent History Chart as completely as possible.

Biological Parent: (Name) _____ AKA: _____

Band or Tribe: _____ Enrollment No.: _____

2. Are you or any of your relatives enrolled in an Alaskan Native corporation? Yes No

If "Yes," name the corporation: _____

3. Have you or any member of your family ever lived on a reservation or in an Alaskan village?

Yes No If "Yes," where? _____

Biological Parent (printed name): IRVIN SMITH Phone No.: _____

Biological Parent Signature: Irvin Smith Date: 1/7/09

If Biological parent(s) are not available, verify information below:

Print Name: _____ Relationship: _____

Signature (if possible): _____ Date: _____

Address: _____ Phone No.: _____

Documented by: _____ Date: _____

THIS FORM IS AVAILABLE IN ALTERNATIVE FORMAT UPON REQUEST

**PARENT HISTORY CHART
BIOLOGICAL PARENT**

Instructions: Provide the following:
Name, where appropriate; Date of Birth (DOB);
Place of Birth (POB); and Tribal Name (Tribe).

Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Biological Parent

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

PRINT LEGIBLY IN DARK INK



Verification of ICWA Eligibility

Case Name: SMITH, IRVIN P Case#: FT61448 Worker: Straughan

Name(s) of Child(ren)	D.O.B.	Place of Birth
<u>Michael I Smith</u>	<u>1/24/04</u>	<u>Frontier, Oregon</u>
<u>Ann S Jones</u>	<u>1/10/02</u>	<u>River City, Oregon</u>

The following information will be used to establish American Indian/Alaskan Native ancestry. Please answer the questions to be best of your knowledge.

- Do you have any American Indian or Alaskan Native Ancestry?
 - NO** If "No," stop here and sign the form below.
 - YES** If "Yes," answer **ALL** the questions below. Then turn the form over and fill out the Parent History Chart as completely as possible.

Biological Parent: (Name) _____ AKA: _____
 Band or Tribe: _____ Enrollment No.: _____

- Are you or any of your relatives enrolled in an Alaskan Native corporation? Yes No
 If "Yes," name the corporation: _____
- Have you or any member of your family ever lived on a reservation or in an Alaskan village?
 Yes No If "Yes," where? _____

Biological Parent (printed name): Stephanie Smith Phone No.: 503-605-2500
 Biological Parent Signature: Stephanie Smith Date: 1-7-09

If Biological parent(s) are not available, verify information below:

Print Name: _____ Relationship: _____
 Signature (if possible): _____ Date: _____
 Address: _____ Phone No.: _____
 Documented by: _____ Date: _____

THIS FORM IS AVAILABLE IN ALTERNATIVE FORMAT UPON REQUEST

**PARENT HISTORY CHART
BIOLOGICAL PARENT**

Instructions: Provide the following:
Name, where appropriate; Date of Birth (DOB);
Place of Birth (POB); and Tribal Name (Tribe).

Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Biological Parent

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandmother

Name: _____
DOB: _____
POB: _____
Tribe: _____

Great Great Grandfather

Name: _____
DOB: _____
POB: _____
Tribe: _____

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ONGOING VISIT AND CONTACT PLAN



Case Name: IRVIN P. SMITH

Child(ren)'s Name: Ann Jones and Michael Smith

Ongoing visitation plan established within 30 days from the date that the child enters substitute care.

Specifications of Person(s) allowed Contact:

Name(s): Stephanie Smith Supervised visits: NO YES

If supervised, who will supervise: Robin Augland or other DHS staff

If supervised, reason supervision is required: Court ordered

Day and time visitation is scheduled for this person:

DAY	START TIME	END TIME	LOCATION
Wednesday	9:00 am	10:00 am	DHS office

Purpose of visit: To continue and strengthen the parent/child bond. To increase Stephanie's parenting knowledge and skills. To support the emotional well-being of the children.

Name(s): Irvin Smith Supervised visits: NO YES

If supervised, who will supervise: Robin Augland or other DHS staff

If supervised, reason supervision is required: Court Ordered

Day and time visitation is scheduled for this person:

DAY	START TIME	END TIME	LOCATION
Wednesday	10:15 am	11:15 am	DHS office

Purpose of visit: To continue and strengthen the parent/child bond. To increase Irvin's parenting knowledge and skills. To support the emotional well-being of the children.

Other Visit Information:

Transportation arrangements: Robin or another DHS staff will transport the children to and from visits. If parents need transportation please contact Robin as far in advance as possible to arrange transportation.

Activities that can occur during the visit: Parent training, consultation and support.

Reasons that a visit may be canceled: Parental or child illness, parental work conflict or treatment obligation and unavoidable lack of agency personnel to transport and/or supervise the visit.

THIS FORM IS AVAILABLE IN ALTERNATE FORMAT UPON REQUEST

If you are unable to make your scheduled visit please call Robin as far in advance as possible to reschedule. You may also leave a message for Robin if you are not able to make the visit. Please do not leave a message with the caseworker because she may not get it in time to notify Robin you have

Rescheduling visit procedure: cancelled

Contact Person for rescheduling a visit: Robin Augland

Person's Phone No.: (503) 212-3970

Reasons that a visit may be ended: Verbal or physical aggression of any kind. Failure by the parent to improve inappropriate conversations or behaviors when instructed to do so by DHS staff out of the hearing range of the children.

Ways in which a visit may be ended: Robin will announce the end of the visit and encourage positive

How will missed visits be handled: Missed visits will be rescheduled by Robin at the first available opportunity. Robin will notify everyone of the new date/time.

The visitation plan will be revised when school begins so as not to interfere with the children's education. The visit plan and required level of supervision will be reviewed

When and how the visitation plan will be reviewed: monthly.

Other visitation consideration: (i.e., contact through e-mail, letters, phone calls, or at appointments with providers.)

Parents and relatives may send card and letters to the children through DHS. All written correspondence will be screened/approved by the caseworker.

Relatives may make arrangements with Robin to visit the children at least once a month. Prior approval of the caseworker and availability of DHS staff are needed to accomodate relative visits.

DHS-approved relatives may be able to supervise occasional visits such as for special events. Parents must request these visits as far in advance as possible to be sure DHS has time to make all necessary approvals and arrangements.

Plan Developed With:

- Parent(s)
- Substitute Caregiver
- Extended Family
- SSA
- CASA
- Friends
- Child or Young adult
- Legal Guardians
- Other: _____

Copies Provided To:

- Parent(s)
- Substitute Caregiver
- Extended Family
- SSA
- CASA
- Friends
- Child or Young adult
- Legal Guardians
- Other: _____

- This plan does support the ongoing safety plan.
- The parents or legal guardians do understand the language of this visitation plan.
- Visits are arranged to maximize contact between the parents or legal guardians and the child or young adult.
- This plan does take into consideration the child or young adult's age, developmental level, and attachments needs related to the parents legal guardians and others.
- As possible, this plan does not disrupt the child or young adult's school schedule.
- Any identified barriers to visitation have been addressed during the development of this plan.
- Development of this plan has taken into consideration the parent's or legal guardian's employment and treatment obligations.
- Safety considerations such as domestic violence have been considered in the development of this plan.

2 / 8 / 09

Parent *Irvin Smith*
Print Name: Irvin P. Smith

Date

2 / 8 / 09

Parent *Stephanie Smith*
Print Name: Stephanie Smith

Date

Legal Guardian
Print Name:

Date

2 / 8 / 09

Caseworker *Michelle Straughan*
Print Name: Michelle Straughan

Date

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Action Agreement

Case Name: Irvin P. Smith
Worker: Michelle Straughan
Branch: Frontier (32)

Case Number: FT 61448
Date: 2/09/09

Parent/Child(ren) Information

Parent Information:

Stephanie Smith

Parent Information:

Irvin P Smith

Children:

Michael I Smith

This Action Agreement documents the current child safety threats, the changes needed in parental protective capacity, and the specific actions to be taken over the next 90 days to increase the parents or legal guardians' ability to provide for the safety of their child(ren). This Action Agreement supplements and supports the Case Plan.

Identified Safety Threats to Child(ren):

State the safety threats that were identified in the CPS assessment to which the child was vulnerable and for which there was insufficient parental protective capacity.

-Oregon Safety Threat # 2 - One or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Irvin has perpetrated physical and emotional violence against Stephanie in the presence of the children on multiple occasions. The children have both attempted to physically and verbally intervene on behalf of their mother on more than one occasion. Both children report being very fearful of Irvin and have said they are afraid that he will hurt or kill their mother.

Oregon Safety Threat # 3 - One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior. Stephanie and Irvin both report that they decide to go to "party" on the spur of the moment and leave the children without adequate supervision. The parents have addictive patterns and behaviors that are uncontrolled and leave the children in unsafe situations such as alone, after dark, on a busy roadside. Oregon Safety threat

#8 - A situation, attitudes and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills and/or motivation necessary to assure a child's safety. Both parents admit there have been at least 6 occasions in the past few months when the children have been left alone for a minimum of several hours. Despite being advised of the children's statements that they were afraid, neither parent understands the threat to the children's safety caused by leaving them without

Case Name: Irvin P. Smith

Case Number: FT 61448

Worker: Michelle Straughan

Date: 2/09/09

Branch: Frontier (32)

appropriate supervision and protection.

Which of the above Safety Threat(s) is/are being addressed by this Action Agreement:
#2

Expected Outcomes: Irvin will recognize the danger to his children posed by his violent and controlling behaviors. Irvin will recognize his violent and controlling behaviors as being in direct conflict with his protective role as a parent. Irvin will learn and demonstrate behaviors which are consistent with his protective role and keep his children safe.

List the changes in cognitive, behavioral or emotional protective capacities the parents must make and demonstrate to increase their ability to keep the child(ren) safe in relation to the Safety Threats addressed by this Action Agreement.

Activity or Service:

Activity or Service: Batterers Intervention Program

Participant: Irvin and the BIP program staff

Responsibilities: Irvin will enroll in and complete the BIP. BIP program staff will provide progress reports to the DHS caseworker.

Start/End Dates: March 2, 2009 - completion of the program projected to be December 1, 2009

Court Order: yes

Progress will be measured by:

List the behavioral, cognitive and emotional changes that demonstrate enhanced parental protective capacity as observed, or evidenced by: (Examples may include: professional assessments, observed behavior by family and community members, demonstrated by, etc.)

Irvin's progress toward understanding his protective parental role and becoming self-aware as a caregiver will be measured through:

The BIP assessments and observations of Irvin's communications and behaviors by BIP program staff, DHS staff and others.

Irvin's behaviors and communications during visitation with his children as observed by DHS staff.

Ongoing face to face conversations (at least once each 30 days) with the DHS caseworker.

Reports of observations of changes from family and community members.

- I will actively participate in services and activities that will help me to make and demonstrate needed changes.
- I understand that changes I make must be noticed over time by significant others, including my child(ren), my caseworker and other professionals..

Case Name: Irvin P. Smith Case Number: FT 61448
Worker: Michelle Straughan Date: 2/09/09
Branch: Frontier (32)

- I will stay in contact with my caseworker and will notify my caseworker within 24 hours if my address or phone number changes.
- I understand that this agreement may be followed by additional agreements as I work toward regaining sole responsibility for assuring the safety of my child(ren).

Parent: *Irvin P. Smith*

Date: 2/9/09

Caseworker: *Michelle Straughan*

Date: 2/9/09

Date to Review/Update the action Agreement: 05/13/09

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Action Agreement

Case Name: Irvin P. Smith
Worker: Michelle Straughan
Branch: Frontier (32)

Case Number: FT 61448
Date: 03/09/09

Parent/Child(ren) Information

Parent Information:

Stephanie Smith

Parent Information:

Irvin P Smith

Children:

Ann Jones Michael I Smith

This Action Agreement documents the current child safety threats, the changes needed in parental protective capacity, and the specific actions to be taken over the next 90 days to increase the parents or legal guardians' ability to provide for the safety of their child(ren). This Action Agreement supplements and supports the Case Plan.

Identified Safety Threats to Child(ren):

State the safety threats that were identified in the CPS assessment to which the child was vulnerable and for which there was insufficient parental protective capacity.

Oregon Safety Threat # 2 - One or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Irvin has perpetrated physical and emotional violence against Stephanie in the presence of the children on multiple occasions. The children have both attempted to physically and verbally intervene on behalf of their mother on more than one occasion. Both children report being very fearful of Irvin and have said they are afraid that he will hurt or kill their mother.

Oregon Safety Threat # 3 - One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior. Stephanie and Irvin both report that they decide to go to "party" on the spur of the moment and leave the children without adequate supervision. The parents have addictive patterns and behaviors that are uncontrolled and leave the children in unsafe situations such as alone, after dark, on a busy roadside.

Oregon Safety threat #8 - A situation, attitudes and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills and/or motivation necessary to assure a child's safety. Both parents admit there have been at least 6 occasions in the past few months when the children have been left alone for a minimum of several hours. Despite being advised of the children's statements that they were afraid, neither

Case Name: Irvin P. Smith

Case Number: FT 61448

Worker: Michelle Straughan

Date: 03/09/09

Branch: Frontier (32)

parent understands the threat to the children's safety caused by leaving them without appropriate supervision and protection.

Which of the above Safety Threat(s) is/are being addressed by this Action Agreement:
#2

Expected Outcomes: Stephanie will understand the danger Irvin's violent and controlling behaviors pose to her and her children. Stephanie will understand and be able to fulfill her protective role as a parent to keep her children safe. Stephanie will understand the impact of Domestic Violence on her children.

List the changes in cognitive, behavioral or emotional protective capacities the parents must make and demonstrate to increase their ability to keep the child(ren) safe in relation to the Safety Threats addressed by this Action Agreement.

Activity or Service:

Activity or Service: Domestic Violence Victim's Counseling/Women's Empowerment Group

Participant: Stephanie and Safe Harbor's staff

Responsibilities: Stephanie will enroll in and complete the Safe Harbor Domestic Violence program. Safe Harbor staff will provide progress reports to the DHS caseworker.

Start/End Dates: March 15, 2009 - completion of the program projected to be September 15, 2009

Court Order: yes

Progress will be measured by:

List the behavioral, cognitive and emotional changes that demonstrate enhanced parental protective capacity as observed, or evidenced by: (Examples may include: professional assessments, observed behavior by family and community members, demonstrated by, etc.)

Stephanie's progress toward understanding her protective parental role and becoming self-aware as a caregiver will be measured through:

Observations of Stephanie's communications and behaviors by Safe Harbor staff, DHS staff and others.

Stephanie's behaviors and communications during visitation with her children as observed by DHS staff.

Ongoing face to face conversations (at least once each 30 days) with the DHS caseworker.

Reports of observations of changes from family and community members.

- I will actively participate in services and activities that will help me to make and demonstrate needed changes.
- I understand that changes I make must be noticed over time by significant others,

Case Name: Irvin P. Smith

Case Number: FT 61448

Worker: Michelle Straughan

Date: 03/09/09

Branch: Frontier (32)

including my child(ren), my caseworker and other professionals..

- I will stay in contact with my caseworker and will notify my caseworker within 24 hours if my address or phone number changes.
- I understand that this agreement may be followed by additional agreements as I work toward regaining sole responsibility for assuring the safety of my child(ren).

Parent: Stephanie Smith

Date: 3-9-09

Caseworker: Michelle Straughan

Date: 3/9/09

Date to Review/Update the action Agreement: 06/09/09

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The Oregon Family Decision Meeting

- See Attached Preparation and Follow-up Guidelines -
 (Meets requirements of ORS 417.365 through 417.375)

Family Name: Smith Date: 03/11/09 Meeting #: 1
 Case Number: FT61448 Case Plan: Return to Parent
 Case Worker: Michelle Straughan Facilitator: Debbie Foster

I - Information Sharing

Children:

Name	Age	Placement Date	Placement Resource Location
Ann S. Jones	7	01/06/09	maternal grandmother
Michae I. Smith	5	01/06/09	maternal grandmother

Participants Invited to the Meeting:

Present Y/N	Name	Relationship to Child or Family	Phone Number (Optional)
Y	Michelle Straughan	Perm Caseworker	
Y	Marlene Davidson	CPS Caseworker	
Y	Robin Augland	SSA	
Y	Stephanie Smith	Mother	
Y	Roberta Harris	maternal grandmother	

Items marked with "*" are mandatory to comply with HB2787.

Needs of the Children: Family members and other participants identify the needs of the children for safety, attachment, well-being, and permanency. Progress will be assessed by changes in the family’s ability to adequately meet these identified needs.

They need their mom and dad to put the children's needs before their own. They need love and stability. They need to feel and to be safe. They need to know their mother is safe. Ann needs to be a child free of parental responsibilities for caring for Michael.

Strengths/Protective Capacity of the Child’s Family:

Stephanie provides for the basic physical needs of her children, She provides nutritious meals, seeks appropriate medical care, provides a clean home and assists the children with their personal hygiene. She has made efforts at safety planning with her children in response to the violence by Irvin.

II - Family Plan

Plan the Parents and Other Family Members Will Pursue:

Goal intended to provide child safety, permanency, or well-being	Activity or Service to Meet Goal	Person Responsible	Timelines
Understands and is able to fulfill her protective role.	IFS services, DV victim's counseling/support	Stephanie Caseworker Providers	Beginning in one week
Receives emotional support she needs to be available to focus on the needs of the children.	IFS services and DV victim's counseling/support	Stephanie Caseworker Providers	Beginning in one week
Understands the impacts of Domestic Violence on the children	IFS services and DV victim's counseling/support	Stephanie Caseworker Providers	Beginning in one week
Loving, stable home	relative foster care	Roberta Caseworker	Ongoing
Maintain parent/child bond	Relative supervised visits Therapeutic visits	Roberta Caseworker IFS Provider	by 11/09

*** Services the State Office will Provide to Support the Family’s Plan:**

Service	Person Responsible	Timelines
Visitations	SSA	Ongoing

*** Services the State Office will Provide to Support the Family's Plan:**

Service	Person Responsible	Timelines
Transportation	Caseworker	As needed
Maintain regular contact/communication with parents	Caseworker	no less than every 30 days
Maintain regular contact/communication with children	Caseworker	no less than every 30 days
Maintain regular contact/communication with change service Providers	Caseworker	no less than every 90 days
Maintain regular contact/communication with relative foster parent	Caseworker	no less than every 30 days

Community Services to Support the Family's Plan:

Person Responsible	Timelines
IFS Provider - Janie Fanning	weekly starting next
Safe Harbors (Domestic Violence education and support)	weekly starting next

Alternate/Concurrent Plan:

Adoption was the concurrent plan decided upon with the family during this meeting.

*** Benefits of Compliance with this Plan:**

It will be possible for DHS to continue to work toward the return of the legal and physical custody of the children to one or both parents.

*** Consequences of Non-Compliance with this Plan:**

It may become necessary to implement the alternate/concurrent plan.

*** Date/Purpose for Future Meetings:**

The next meeting is in 90 days to review the progress toward the Expected Outcomes of the case and to ensure the needs of the children continue to be met.

Recommended Participants	Date to Attend
Addy Powers - Stephanies sister	TBD
Natalie Reed - Roberta's sister/Stephanie's aunt	TBD
Dale Reed - Stephanie's cousin, Natalie's child	TBD

III - Agreement/Acknowledgment

Service Agreement:

When signed below, this document is the service agreement between the State Office and participating family members. Family members understand that they are expected to pursue the services and conditions identified as part of the plan they have helped develop and have agreed to.

Family <i>Stephanie Smith</i>	Date 3-11-09
State Office <i>Michelle Straugham</i>	Date 3/11/09

*** Acknowledgment of the Plan as Described Above:**

The undersigned participated in the Family Decision Meeting and acknowledge that they are aware of and understand the plan developed at this meeting.

Name	Date
<i>Malen Duvon</i>	2/11/09
<i>Ron Auger</i>	3-11-09
<i>Roberta Harris</i>	3/11/09

Review Date: _____
 Person completing this form: Debbie Foster

* Copy of Plan sent to all participants within 21 days? Yes No

THIS FORM AVAILABLE IN ALTERNATIVE FORMAT UPON REQUEST

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The Oregon Family Decision Meeting

- See Attached Preparation and Follow-up Guidelines -
 (Meets requirements of ORS 417.365 through 417.375)

Family Name: Smith Date: 3/11/09 Meeting #: 1
 Case Number: FT61448 Case Plan: Return to Parent
 Case Worker: Michelle Straughan Facilitator: Debbie Foster

I - Information Sharing

Children:

Name	Age	Placement Date	Placement Resource Location
Michael I. Smith	5	1/06/09	maternal grandmother

Participants Invited to the Meeting:

Present Y/N	Name	Relationship to Child or Family	Phone Number (Optional)
Y	Irvin P. Smith	Father	
Y	Michelle Straughan	Perm Caseworker	
Y	Marlene Davidson	CPS Caseworker	
Y	Robin Augland	SSA	
Y	Sherri Smith	Irvin's sister	

Items marked with "*" are mandatory to comply with HB2787.

Needs of the Children: Family members and other participants identify the needs of the children for safety, attachment, well-being, and permanency. Progress will be assessed by changes in the family’s ability to adequately meet these identified needs. They need their mom and dad to put the children's needs before their own. They need love and stability. They need to feel and to be safe. They need to know their mother is safe. Ann needs to be a child free of parental responsibilities for caring for Michael.

Strengths/Protective Capacity of the Child’s Family:

Irvin has employment and financially provides for the material needs of his family . He has indicated a willingness to enroll in the Batterer's Intervention Group to learn more about domestic violence and to consider whether his behaviors have had any negative impact on his family.

II - Family Plan

Plan the Parents and Other Family Members Will Pursue:

Goal intended to provide child safety, permanency, or well-being	Activity or Service to Meet Goal	Person Responsible	Timelines
Understand the danger to his children posed by his violent and controlling behaviors	Batterer's Intervention Program	Irvin Caseworker BIP staff	Beginning April 06,2009
Recognize his violent and controlling behaviors as being in direct conflict with his protective role as a parent	Batterer's Intervention Program/IFS services	Irvin Caseworker IFS Provider	Beginning April 06, 2009
Learn and demonstrate behaviors which are consistent with his protective role and keep his children safe	Batterer's Intervention Program/IFS services	Irvin Caseworker IFS Provider	Beginning April 06, 2009
Maintain parent/child bond	Relative supervised visits Therapeutic Visits	Sherri Smith Caseworker IFS Provider	By October, 2009

*** Services the State Office will Provide to Support the Family’s Plan:**

Service	Person Responsible	Timelines
Visitations	SSA	Ongoing
Transportation	Caseworker	as needed
Maintain regular contact/communication with parents	Caseworker	no less than every 30 days
Maintain regular contact/communication with children	Caseworker	no less than every 30 days
Maintain regular contact/communication with change service Providers	Caseworker	no less than every 90 days

Community Services to Support the Family's Plan:

Person Responsible	Timelines
IFS Provider - Janie Fanning	weekly starting next
Batterer's Intervention Program	Starting April ,2009

Alternate/Concurrent Plan:

Adoption was the concurrent plan decided upon with the family during this meeting.

*** Benefits of Compliance with this Plan:**

It will be possible for DHS to continue to work toward the return of the legal and physical custody of the children to one or both parents.

*** Consequences of Non-Compliance with this Plan:**

It may become necessary to implement the alternate/concurrent plan.

*** Date/Purpose for Future Meetings:**

The next meeting is in 90 days to review the progress toward the Expected Outcomes of the case and to ensure the needs of the children continue to be met.

Recommended Participants	Date to Attend
Irvin's parents, Lex and Jean Smith	TBD

III - Agreement/Acknowledgment

Service Agreement:

When signed below, this document is the service agreement between the State Office and participating family members. Family members understand that they are expected to pursue the services and conditions identified as part of the plan they have helped develop and have agreed to.

Family	Date
<i>Teri Smith</i>	3-11-09
State Office	Date
<i>Michelle Strangheim</i>	3/11/09

*** Acknowledgment of the Plan as Described Above:**

The undersigned participated in the Family Decision Meeting and acknowledge that they are aware of and understand the plan developed at this meeting.

Name	Date
<i>Marlene Davis</i>	3/11/09
<i>Ron August</i>	3-11-09
<i>Sheri Smith</i>	3/11/09

Review Date: _____

Person completing this form: Debbie Foster

* Copy of Plan sent to all participants within 21 days? Yes No

THIS FORM AVAILABLE IN ALTERNATIVE FORMAT UPON REQUEST

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K/ICDS FT61448 06/18/09 PAGE:1
 CASE: FT61448 SMITH, IRVIN P. CASE STATUS: OPEN DATELC:
 SERVICE HISTORY DISPLAY
 P/L: C NAME: JONES, ANN S. SEX: F DOB: 1/10/02 P/T: C
 SERV SERV BEGIN DISP SERV PROV PROVIDER SERV
 NMBR TYPE DATE DATE DISP NMBR NAME ENTRY

 3 SREL 01/30/09 R23344 ROBERTA HARRIS 01/30/09
 2 SFAM 01/19/09 01/30/09 SLSC X33320 GINGER ROBB 01/30/09
 1 SEFC 01/06/09 01/19/09 SOCS X33320 GINGER ROBB 01/19/09

I034 - NO MORE DATA TO BE DISPLAYED

PFE=RETURNS TO IICD

4-C B Facis 170.104.128.11 FT61448 1/2

K/ICDS FT61448
CASE: FT61448 SMITH, IRVIN P.

CASE STATUS: OPEN
SERVICE HISTORY DISPLAY

06/18/09 PAGE:1
DATELC:

P/L: D NAME: SMITH, MICHAEL I.

SEX: M DOB: 01/24/04

P/T: D

SERV	SERV	BEGIN	DISP	SERV	PROV	PROVIDER	SERV
NMBR	TYPE	DATE	DATE	DISP	NMBR	NAME	ENTRY

3	SREL	01/30/09			R23344	ROBERTA HARRIS	01/30/09
2	SFAM	01/19/09	01/30/09	SLSC	X33320	GINGER ROBB	01/30/09
1	SEFC	01/06/09	01/19/09	SOCS	X33320	GINGER ROBB	01/19/09

I034 - NO MORE DATA TO BE DISPLAYED

PFE=RETURNS TO IICD

4-C B Facis 170.104.128.11 FT61448 1/2