

Brody Jones Case



The following is a sample CRB case packet for the hypothetical case of the Clark/Jones family. Imagine this packet was provided to you before the first CRB review 6 months into the case, which is scheduled to occur on 3/1/2025.

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2. [Shelter Order](#) (pg. 11) – Court order placing child in protective custody.
3. [Judgment of Jurisdiction and Disposition](#) (pg. 16) – Results of the trial stage of a dependency case where allegations against the parents are admitted, proven, or dismissed; and the court may order the state to take certain actions or the parents to complete particular services.
4. [Placement History](#) (pg. 23) – List of all foster placements in Oregon throughout the child's life.
5. [Family Report](#) (pg. 24) – The child welfare case plan. This is the most current and comprehensive update on the family and case, and should be read in its entirety before a CRB review.
6. [Action Agreement](#) (for mother) (pg. 34) – An agreement between ODHS and mother showing services the mother has agreed to complete and ODHS has agreed to assist with or provide.
7. [Action Agreement](#) (for father) (pg. 37) – An agreement between ODHS and father showing services the father has agreed to complete and ODHS has agreed to assist with or provide.
8. [Child and Adolescent Needs and Strengths \(CANS\) Assessment](#) (pg. 39) – An assessment of the child that must be completed within 60 days after entering foster care.
9. [CANS Supervision Plan](#) (pg. 53) – The plan for supervising a child who requires enhanced supervision beyond what is typical for their age. These plans are required for children with overall CANS level scores of 1, 2, or 3.

10. [Verification of American Indian/Alaska Native Membership or Enrollment](#) (for father) (pg. 56) – Provides information about Indian Child Welfare Act (ICWA) eligibility on the father's side.
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14. [Early Intervention \(EI\) screening](#) (pg. 69) – A screening to determine if a child should receive a full EI evaluation. An EI screening is required within 60 days after entering foster care for children age 0 to 2 years.
15. [EI evaluation](#) (pg. 70) – The full evaluation to determine if the child is eligible for EI services.
16. [Family Engagement Meeting \(FEM\) Notes](#) (pg. 72) – A facilitated meeting with the parents to engage them in case planning that must be held within 60 days after the child enters foster care.
17. [Assessment Summary](#) (pg. 75) – Results of the child protective services assessment that brought the child into foster care. It provides similar information as the Protective Custody Report (see #1 above) but in MUCH more detail. Some CRB volunteers and staff feel this document is essential. Other CRB volunteers and staff never (or rarely) look at it. Which side will you fall on? 😊

CRB case packets are not in chronological order and should not be read in their entirety. This would be overwhelming for anyone. As you gain experience, you'll get comfortable scanning through some documents and focusing in on others. **To help you get started, we've highlighted in yellow the information you'll want to read more carefully.** Don't worry about memorizing anything or taking notes at this point. You'll be provided a document with notes already prepared for this case a little later in Orientation Training. Right now, just focus on familiarizing yourself with the kinds of documents that are included in CRB case packets and learning a bit about the Clark/Jones family.

With that said, there is one document you will basically want to read it its entirety. And that document is (drum roll)...

- The Family Report (starts on page 24 of this 87-page document).

Happy reading!

Protective Custody Report

Hearing and Case Information

1. **Date child taken into protective custody:** 8/30/2024 Date of report: 8/30/2024
- Was child taken into protective custody by Protective Custody Order? No
- Shelter hearing date: 8/31/2024
- ODHS case name: Lena Clark ODHS case #: 000000
- ODHS case worker: Sue Smith Phone #: 000-000-0000

Child Information

2. **Name:** Brody Jones DOB: 9/27/2023
- Address: 000 Main Street, Salem, OR 00000

Parent Information

3. ☒ Mark those who have legal custody (prior to Child Welfare involvement).
Complete "other" for a guardian or another legal parent not otherwise identified.
- ☒ **Mother's name:** Lena Clark DOB: 1/25/2005
- Address: 000 Main Street, Salem, OR 00000
- ☒ **Father's name:** Brandon Jones DOB: 3/27/2005
- Address: 0 No Road, Sublimity, OR 00000
- ☐ Other's name: DOB:
- Address:
- Relationship to child:

Hearing Notifications

4. Mark those who were notified of the time, date and place of the hearing. If not notified, explain why and list efforts made to identify and obtain contact information for, and notify the following of the hearing.
- ☒ Mother If not, why?
- ☒ Maternal Grandfather If not, why?
- ☒ Maternal Grandmother If not, why?
- ☒ Father If not, why?
- ☐ Indian Custodian If not, why?
- ☒ Paternal Grandfather If not, why?
- ☒ Paternal Grandmother If not, why?
- ☐ Other (as identified above) If not, why?
- ☐ Tribe(s) (if applicable) If not, why?

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ODHS History

5. List prior ODHS contacts with family or child:

A call of concern came into the child abuse hotline during Ms. Clark's pregnancy with Brody due to lack of prenatal care and concerns about domestic violence. It was closed at screening.

Protective Custody

6. The Department believes protective custody of the child is necessary and the least restrictive means available to:

☒ Mark those that apply.

☒ A. Protect the child from abuse;

☐ B. Prevent the child from inflicting harm on self or others;

☐ C. Ensure the child remains within the reach of the juvenile court to protect the child from abuse or prevent the child from inflicting harm on self or others;

☐ D. Prevent imminent physical damage or harm to the child if there is reason to know the child is an Indian child; or

☐ E. Ensure suspicious injuries were photographed and a medical assessment was conducted in accordance with ORS 419B.023(2).

7. List the facts and circumstances describing why taking protective custody of the child is necessary and least restrictive means available to ensure child safety:

On 8/28/2024, a Home Health Services (HHS) nurse arrived at Ms. Clark's home around 12 pm and had to knock on the door for 10 minutes before Ms. Clark answered. The nurse could hear Brody screaming the entire time she was knocking. When Ms. Clark answered the door, she appeared "bleary eyed" and irritated. She invited the nurse into the home. Upon entry, the home appeared unkempt but there were not any noticeable safety concerns. Ms. Clark went to get Brody out of a back bedroom. When she brought him to the living room, his diaper was so full of urine that it was hanging to his knees. Ms. Clark proceeded to put him in a highchair, without first changing his overly full diaper, at which time the nurse suggested she change his diaper. Again, Ms. Clark was irritated, but did change his diaper. A severe diaper rash was noticed. Brody appeared quite small for his age and dirty with food, dirt, and "grime" on his body. He smelled strongly of urine.

Once placed in the highchair, Ms. Clark placed finger foods on the tray to the highchair. Brody "devoured" these items. He seemed very hungry. Ms. Clark then went to remove him from the highchair. The nurse said he still seemed hungry. Ms. Clark responded that he needs to not eat so much, or he will develop a weight problem like she has. The nurse encouraged Ms. Clark to give him more food. Ms. Clark then found baby food, which the nurse stated was for a much younger child than Brody's age. He again ate this as though he was "starving." Ms. Clark was forceful when feeding Brody and slapped his hands as he tried to grab for the spoon. She said that he was not "thankful." When asked about the last time she fed him, Ms. Clark said it was before bedtime last night around 9 pm. The nurse pointed out that was about 15 hours ago and tried to gently tell the mother that a child his age should not go that long without food. The nurse gave Ms. Clark pamphlets on feeding a child Brody's age. The nurse inquired if Ms. Clark was breast feeding or providing formula. Ms. Clark stated that she didn't like Brody being that close to her and that he hurt her when she tried to breast feed. She said she did give him formula and showed the nurse the formula she had received from WIC.

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About this time, a young male appeared from the bedroom. The mother introduced him as her boyfriend, Brandon. The nurse had heard of Mr. Jones from the mother and knew that he was Brody's biological father and that he and Ms. Clark were separated. Mr. Jones looked "out of it" but the nurse could not ascertain if that was because he just woke up or if he was impaired. Mr. Jones did take Brody and cuddled him when he came into the room, and when he overheard the nurse talk about feeding the baby, he told Ms. Clark that he had been telling her she should feed him more.

The nurse weighed Brody during the visit. Brody weighed 14.5 lbs., which is only the 3rd percentile for weight. The nurse told the parents that this was concerning, and recommended Brody see a doctor right away. Ms. Clark did not seem to take this seriously. Mr. Jones asked a lot of questions but told Ms. Clark it was her job to take care of the child's "doctor appointments and stuff" because he works. The nurse ended up calling to make an appointment for Brody for later in the day.

At the end of the day, the nurse received information that the parents did not bring Brody in for the appointment. She felt Brody needed to be seen by a medical professional right away.

A report came into the child abuse hotline on 8/28/2024 at 4:59 pm.

On 8/29/2024, Child Welfare (CW) worker Sue Smith went to the mother's residence around 8:30 am with Addiction Recover Team (ART) worker Joy Bell. They had to knock on the door for quite a while. A young man who identified himself as Brandon answered the door in his boxers. He invited them inside and went to get Ms. Clark and Brody. Once all 3 were in the room, CW worker Smith explained the reasoning for the visit. Ms. Clark and Mr. Jones were both very defensive and said the Home Health nurse was overreacting. CW worker Smith asked why they missed Brody's doctor appointment the prior day and they said their truck was broken down. They said there wasn't anyone they could call for help because Ms. Clark's mother is a "nut bar" and Mr. Jones' parents live about 40 minutes away and had issues with their own car. CW worker Smith explained that she needed to take Brody to Urgent Care and that she wanted the parents to accompany them by following her car. CW worker Smith helped them make arrangements with a family friend to come pick them up. As they were waiting, the father agreed to provide a UA to ART worker Bell. He stated it would be positive for marijuana and there may be some alcohol from the night before.

Brody was seen by Dr. Nohm at Urgent Care. Dr. Nohm voiced serious concerns for Brody's low weight and lethargy. He noted that Brody was also very dehydrated. Dr. Nohm admitted Brody to the hospital for IVs and observation. Ms. Clark became quite upset and started crying. Mr. Jones got angry and began to blame Ms. Clark for being a "shitty mother" and a "ho." The nurse and CW worker Smith had to intervene to prevent the situation between the parents from getting heated.

CW worker Smith talked to Rose Gold in the hospital parking lot. She had known Ms. Clark since she was a child. She was previously her mother's neighbor. She indicated that Ms. Clark's mother has significant mental health issues and was "terrible" to Ms. Clark when she was a teen. She said that Ms. Clark was emotionally and mentally abused by her mother and that her mother also physically abused her. Her mother had a "turn table" of boyfriends in and out of the house. She said that Ms. Clark's father kidnapped Ms. Clark from the mother when Ms. Clark was little but when Ms. Clark turned 14 she found her mother and her father allowed her to return to her mother. CW worker Smith asked Ms. Gold if she could be a safety service provider for Ms. Clark and Brody. She said she was not able as she works full time and cares for her ailing mother. CW worker Smith inquired about other possible safety service providers. She said that Ms. Clark does not have any real supports in her life and seems to burn through friends.

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PARENTAL CHILDHOOD HISTORY

-Mr. Jones was in foster care from age 3 to 5. He experienced physical abuse by his father, exposure to domestic violence between his mother and father, the death of an uncle by his grandfather, physical abuse by his grandfather, neglect by both parents (rotten teeth, lack of medical care, lack of supervision).

-Mr. Jones was placed in an aunt's care and she obtained guardianship, but it appears he was returned to his parent's care at a later time. Subsequent calls to CW indicate father ceased attending school in the 8th grade. He had significantly poor attendance prior to dropping out. Several reports to CW made by school personnel due to his lack of hygiene, not receiving appropriate nutrition and reports of potential physical abuse by his father. There was an allegation that Mr. Jones was sexually abused by an older male cousin. This and additional reports ended in UNFOUNDED dispositions as Mr. Jones did not ever make any disclosures of abuse.

-Ms. Clark was allegedly kidnapped by her father when she was 5 years old. Unable to verify if this was addressed by law enforcement. Parents went through conflictual divorce resulting in split custody. Father moved to California and had Ms. Clark living with him from age 5-14 in California.

-Ms. Clark returned to Oregon at age 14 to reside with her mother and the reports to CWP begin shortly after. Reports concerning her mother's refusal to access mental health treatment for her daughter's suicidal ideation and cutting. Report of sexually inappropriate behavior by one of mother's boyfriends. Exposure to adult sexual activity. Her mother withholding food from her as a form of weight management. Two reports alleging neglect and mental injury to Ms. Clark were coded as UNFOUNDED. One report alleging sexual abuse was coded as UNABLE TO DETERMINE. Ms. Clark made a disclosure of a consensual sexual relationship with one of her mother's adult boyfriends at age 16 but later recanted. This report also indicates she became pregnant from this relationship and had an abortion. Unable to confirm.

PEDIATRIC RECORDS

-Brody has missed all but 2 appointments. Doctor had ongoing concerns regarding Ms. Clark's functioning which led to his referral to Home Health Services (HHS). Mr. Jones has never attended a medical appointment. Ms. Clark made disparaging remarks about Mr. Jones at the two appointments she did attend. Brody was in the 75th percentile for weight at birth. Continued decrease in his weight percentile noted at both appointments. Concern noted about child's hygiene.

-Notes also indicate that Ms. Clark has previously been on anti-depressants but is not consistent in taking her medication. Doctor noted concern.

FATHER'S DUII ARREST REPORT:

On 6/27/2024, Mr. Jones was pulled over at 2 am due to swerving. He had several other underage individuals in the cab of his pickup. Mr. Jones did not have a legal driver's license. Marijuana was found in the car. All individuals in the car were believed to be intoxicated. Mr. Jones was initially somewhat combative, but later calmed down. He blew a 0.162 which the officer noted would be roughly 9 drinks for a male his weight and is more than double the legal limit. The officer indicted he was "significantly impaired." On the drive to the jail Mr. Jones told the officer he knew he had a problem. He said he needs alcohol to be happy. He relayed that the only time his old man was happy was when he was drunk, but when he got real drunk that is when he got mean.

RESTRAINING ORDER (RO):

In the paperwork Ms. Clark filed to obtain the RO she indicated that she and Mr. Jones' relationship has always been domestically violent. They had been together roughly 2½ years. Ms. Clark reports that Mr. Jones would only "be mean" when he got really drunk. He would tell her she was crazy like her mother and she should just kill herself. She previously caught him with another woman, and he became

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Protective Custody Report

enraged and broke two windows in her apartment. He also reportedly broke a window in her car, shoved her down when she was pregnant and pushed her shoulder while she was holding Brody when Brody was one month old. The incident that led to her filing a restraining order involved her finding messages from other women on his phone and confronting him about it. He threw his phone at the TV which smashed the TV and his phone and shoved her to the ground, causing an injury to her hip when she hit the couch on the way to the floor. She indicated that she believed he had a problem with alcohol and marijuana and noted that he possesses firearms. Mr. Jones did not show up to the restraining order hearing and it was automatically granted by the Judge. His firearms were removed by law enforcement when the RO was granted.

On 8/30/2024, CW worker Smith received information that Brody was ready to be discharged from the hospital. She asked if the hospital could give her until 4:00 pm to work on a possible in-home plan with Ms. Clark. The nurse voiced concerns. She said Ms. Clark had not been very attentive while staying in the hospital with the child. She said Ms. Clark was continually on her phone and took far too many smoke breaks. Mr. Jones had been there for a short time last night, but he and Ms. Clark got into an argument and he stormed out of the hospital.

CW worker Smith made multiple phone calls to Ms. Clark, Mr. Jones and family friend, Rose Gold. She was unable to locate a safety service provider willing to provide 24/7 supervision. CW worker Smith talked to maternal grandmother via phone. She was unable to be a placement resource. She said Ms. Clark got herself into this mess and she needs to deal with it. She spent a substantial amount of time talking very negatively about Ms. Clark and about how she had no business being a mother. She also said Mr. Jones was a "white trash loser." She said Ms. Clark has not figured out that all men are worthless. CW worker attempted to reach paternal grandparents but was unable to contact them via phone. Due to their prior FOUNDED allegations with CW and both of their criminal histories they would be unable to be a resource. Mr. Jones also said he had a sister that would be a resource. She has two children and provides daycare out of her home. CW worker Smith left her a voicemail. Due to inability to develop a safety plan, there was no other choice but to place Brody in resource care.

CW worker Smith met Ms. Clark and Mr. Jones at the hospital at 3 pm and notified them that CW would need to take Brody in protective custody. Ms. Clark's response and affect were strangely flat. She tried to leave the room so she could go get his things from the car. Mr. Jones got angry and said it was "Total bullshit." He said that this was Ms. Clark's fault and he should be able to keep his son. CW worker Smith attempted to explain the agency's concerns about his history of domestic violence around his son and alcohol abuse. He said Ms. Clark was a liar and he has never been arrested. He asked why we believed her over him. He also said he recognizes he has a drinking problem and he is working on that.

CW worker Smith gave Ms. Clark and Mr. Jones the required paperwork and asked them to complete 1270/ICWA paperwork and to complete Father's Questionnaire. Ms. Clark completed the paperwork. Mr. Jones refused. CW worker Smith notified them of court the next day at 1:15 and told them how to apply for court appointed counsel.

Brody was placed in a resource home.

ICWA/ORICWA Efforts

8. List efforts made to determine whether the child or the parents have any American Indian or Alaska Native ancestry, membership, and/or citizenship and the results of those efforts:

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A. Historical efforts to determine Tribal ancestry, membership, and/or citizenship:

N/A

B. Current efforts to determine Tribal ancestry, membership and/or citizenship:

Ms. Clark completed the 1270 ICWA form indicating there is no reason to know that Brody is an Indian child. Mr. Jones was provided the form but refused to complete it. CW worker Dole attempted to contact paternal grandparents to complete the form. Left voicemail.

C. Tribal affiliation of the child and the child's parent(s) or Indian custodian:

D. Efforts to collaborate and partner with the Indian child's Tribe/Tribes:

Efforts to Avoid Protective Custody

9. ☒ Mark one.

☐ A. Efforts made to eliminate the need for protective custody of this child and services provided to make it possible for the child to safely return home:

☒ B. No existing services could have eliminated the need for protective custody of this child because:

Ms. Clark had been receiving services and support from Home Health Services (HHS). Brody Jones was found to be seriously underweight, malnourished and dehydrated during a home visit with an HHS nurse. The HHS nurse told the parents that his low weight was serious and that he needed to be seen by a doctor right away. She made an appointment for them and they failed to take Brody to the appointment. The next day ODHS Child Welfare insisted Brody be taken to Urgent Care. Brody was admitted to the hospital for dehydration and being malnourished. Ms. Clark and Mr. Jones had been his only care providers up to this point.

Child Welfare (CW) worker Smith attempted to develop an in-home plan with each parent but was unable to locate a safety service provider (SSP) willing to provide 24/7 supervision. Family friend Rose Gold could not be a resource due to her work schedule. The maternal grandmother was unwilling to assist. The paternal grandparents could not be a resource due to their CW history. CW worker Smith also attempted to contact a paternal aunt who lives locally and the maternal grandfather who lives out of state. Voicemails were left.

Best Interests

10. Describe why protective custody is in the best interest of the child, including factors relevant to ICWA/ORICWA:

Brody is a very small and vulnerable baby who is completely reliant on his caregivers. Both parents lack the knowledge, skill and understanding as to the seriousness of an 11-month-old child being seriously underweight and dehydrated. Additionally, Brody was exposed to domestic violence when Mr. Jones assaulted Ms. Clark and broke items in the home/vehicle.

Placement

11. A. Date of placement: 8/30/2024

B. Type of placement: Non-Relative Care

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- C. Why this type of placement was chosen (relative/caregiver relationship/most appropriate/least restrictive, other): Most appropriate
- D. Does the child have siblings? ☐ Yes ☒ No
If yes, are the siblings placed together? ☐ Yes ☐ No
If the child is not placed with siblings, describe the efforts made by the Department to place siblings together:
- E. If applicable. Describe how the current placement meets ICWA/ORICWA or the Tribe's established placement preferences:
- F. Will the child remain in the child's School District of Origin? ☐ Yes ☐ No
If not, describe why it is not in the child's best interest to continue attending the School of Origin or any other school in the District of Origin.

Visitation

12. ODHS plan for initial visitation (each parent and siblings):

Findings and Orders

13. ODHS respectfully requests the Court make the following findings and orders:
- ☒ Mark additional case specific findings or orders that apply.
- ☒ The child is placed in the temporary custody of ODHS for care, placement and supervision.
- ☒ ODHS has made reasonable efforts or, if the Indian Child Welfare Act applies, active efforts to provide services and/or other support to prevent or eliminate the need for removal of the child from the home and make it possible for the children to safely return home, OR no services would have eliminated the need for protective custody.
- ☒ ODHS made ☐ active ☒ diligent efforts to notify the parent(s) or Indian custodian of the hearing.
- ☐ ODHS made ☐ active ☒ diligent efforts to identify, obtain contact information for, and notify all grandparents of the hearing.
- ☐ ODHS made active efforts to notify the Indian child's Tribe/Tribes of the basis for the removal; the time, date, and place of the hearing; and the right of the Indian child's Tribe/Tribes to participate in the hearing.
- ☐ It is in the child's best interest to continue in care and be placed ☐ in home or ☐ in substitute care.
- ☐ The child's placement is the least restrictive, most family-like setting available to meet the health and safety needs of the child.
- ☐ ODHS made ☐ active ☐ diligent efforts to place the child with relatives and persons with whom the child has a caregiving relationship.
- ☐ ODHS made ☐ active ☐ diligent efforts to place siblings together.
- OR

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<input type="checkbox"/>	It is not in the child's best interest to be placed with siblings.
<input type="checkbox"/>	It is in the best interest of the child to attend the child's School of Origin.
	OR
<input type="checkbox"/>	It is not in the child's best interest to attend the child's School of Origin or any other school in the child's District of Origin.
<input checked="" type="checkbox"/>	ODHS may use and disclose records, reports, materials or documents in the record of the case or the supplemental confidential if such use and disclosure is reasonably necessary to perform its official duties related to the involvement of the child with the juvenile court.
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Child Welfare caseworker signature: Sue Smith

Date: 8/30/2024

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

In the Matter of:) Case Number: 00JU00000
)
BRODY JONES,) **SHELTER ORDER**
) (ORS 419B.180 et seq.)
A Child.)

This matter came before the Court on: 8/31/2024

Persons appearing:

☐ Check box if person appeared by video or telephone (optional).

Legal Father <input type="checkbox"/> : Brandon Jones	Attorney <input type="checkbox"/> : Adam Fischer
Putative Father <input type="checkbox"/> :	Attorney <input type="checkbox"/> :
Mother <input type="checkbox"/> : Lena Clark	Attorney <input type="checkbox"/> : Alyssa Mellon
Child <input type="checkbox"/> :	Attorney <input type="checkbox"/> : Allen Cassama
Tribe <input type="checkbox"/> :	Tribal Atty/Rep <input type="checkbox"/> :

CASA <input type="checkbox"/> :	Assist. Atty Gen'l <input type="checkbox"/> : Larry Brown
Guardian <input type="checkbox"/> :	Other <input type="checkbox"/> :
ODHS Caseworker <input type="checkbox"/> : Sue Smith	Other <input type="checkbox"/> :
Guardian Ad Litem <input type="checkbox"/> :	

ODHS Documentation: The Oregon Department of Human Services (ODHS) ☒ **did** ☐ **did not** provide the Court with the documentation required by ORS 419B.185.

Evidence Considered:

- ☐ Stipulations by the parties.
☒ The exhibits admitted by the Court.
☐ The testimony of the witness(es) at the hearing.
☐ The following facts and/or law, of which the Court has taken judicial notice: .
☐ Other: .

The findings made below are based on a preponderance of the evidence.

1. INDIAN CHILD WELFARE ACT (ICWA/ORICWA) FINDINGS

- ☒ ODHS made a good faith effort under ORICWA to determine whether the child is an Indian child.
☐ ODHS **did not** make a good faith effort under ORICWA to determine whether the child is an Indian child and therefore the court does not have authority to enter a protective custody order.

☒ At this time, the Court does not have reason to know that ICWA/ORICWA applies. No individual present at the hearing knows or has reason to know the child is an Indian child under ICWA/ORICWA, and there is no additional information that has been presented that provides the court reason to know that ICWA/ORICWA applies. Or Laws 2021, ch. 398, §14.

2. NOTICE FINDINGS

► Parties:

☒ All parties **were** ☐ **were not notified**, and DHS shall make diligent efforts to notify the following of all future hearings: .

☒ Mother ☒ Father ☐ Guardian(s) was provided the notice of obligations and rights required by ORS 419B.117.

► Foster Parent(s)/Care Provider(s)

☒ The child is in substitute care, and ODHS ☒ **did** ☐ **did not** give the foster parent(s)/current care provider(s) notice of the hearing.

☒ The foster parent(s)/current care provider(s) **did not attend** the hearing.

☐ The foster parent(s)/current care provider(s) **attended** the hearing and had an opportunity to be heard.

► Grandparent(s):

☒ ODHS ☒ **made** ☐ **did not make** diligent efforts to identify, obtain contact information for, and notify all grandparents of the hearing.

☒ No grandparents attended the hearing, *or*.

The following grandparents attended the hearing and had an opportunity to be heard:

Maternal:

☐ grandmother ☐ grandfather

Paternal

☐ grandmother ☐ grandfather

☐ The grandparents who attended the hearing were informed of the date of a future hearing.

☐ ODHS **did not** give the grandparents notice of the hearing because: ☐ a prior order relieved ODHS of the notice requirement; ☐ other: .

☐ For good cause shown, the court relieves ODHS of the responsibility to provide notice of this hearing ☐ to all grandparents, ☐ to the following grandparents: .

3. UCCJEA DETERMINATION

This Court ☒ **has** ☐ **does not have** jurisdiction under the UCCJEA (ORS 109.701 to 109.834) to make “a child custody determination.”

4. REASONABLE EFFORTS FINDINGS

In light of the circumstances of the child and the parent(s), having considered the child’s health and safety to be the paramount concerns, and having considered whether placement of the child and referral to the Strengthening, Preserving and Reunifying Families Program is in the child’s best interest (ORS 418.595) the Court finds that:

► ☒ ODHS has made reasonable efforts to provide services and/or other support to prevent or eliminate the need for removal of the child from the home and to make it possible for the child to safely return home. ORS 419B.185. The efforts to prevent removal/to safely return the child home include the following: .

☒ Description of reasonable efforts is attached as Exhibit 1, and is adopted as the Court's written findings.

► ☐ The Court considers ODHS to have made reasonable efforts to prevent or eliminate the need for protective custody even though no services were provided because no services would have eliminated the need for protective custody. ORS 419B.185.

► ☐ ODHS has not made reasonable efforts, to provide services and/or other support to prevent or eliminate the need for removal and make it possible for the child to safely return home. ORS 419B.185.

5. IN-HOME PLACEMENT

☐ The Court has considered the child's health and safety and whether the provision of reasonable services can prevent or eliminate the need to separate the family and finds that placement in the child's home is in the child's best interest and for the child's welfare.

6. PLACEMENT IN SUBSTITUTE CARE

► Substitute Care Determination

☒ The Court has considered the child's health and safety and whether the provision of reasonable services can prevent or eliminate the need to separate the family and finds that the child cannot be safely returned home/maintained in the home without further danger of ☒ suffering physical injury or emotional harm ☐ endangering or harming others ☐ not remaining within the reach of the court process prior to adjudication.

THEREFORE, placement or continuation in substitute care is in the child's best interest and for the child's welfare: .
ORS 419B.185.

☒ The Court further finds that the selected placement ☒ is ☐ is not the least restrictive, most family-like setting that meets the health and safety needs of the child and in reasonable proximity to the child's home. Additional findings: .

► Diligent Efforts

Relative Placement

☐ The child is in substitute care, and ODHS ☒ has ☐ has not made diligent efforts to place the child with a relative, current caretaker (ORS 419A.004(12)), or person who has a caregiver relationship (ORS 419B.116) with the child, as required by ORS 419B.192.

☐ ODHS has decided to place the child with a relative, current caretaker, or person who has a caregiver relationship with the child, but that placement is not in the child's best interest, because: .

Sibling Placement

☐ The child has one or more siblings and is in substitute care. ODHS ☐ has made ☐ has not made diligent efforts to place the child with a sibling, as required by ORS 419B.192. ☐ Placement together is not in the best interest of the child or sibling.

► **Visitation Findings:**

.

7. RESTRAINING ORDER FINDINGS

- ☐ The Court finds that the requirements for entry of a restraining order under ORS 419B.845 are satisfied in this case and that entry of a restraining order against: _____ is for the child's welfare and in the child's best interest.
- ☐ The restraining order is attached.

8. SCHOOL OF ORIGIN.

- ☐ The Court finds **it is** in the child's best interest to attend the child's school of origin.
- ☐ The Court finds **it is not** in the child's best interest to attend the child's school of origin or any other school in the child's district of origin.

THE COURT ORDERS:

► **CASA:** ☒ CASA is appointed to represent the child.

► **Attorneys:** ☒ Attorneys are appointed as follows: Mother: Alyssa Mellon
Father: Adam Fischer Child/ren: Allen Cassama

► **ICWA/ORICWA:** Each party is required to inform the Court immediately if the party receives information that provides reason to know the child is an Indian child. ODHS is ordered to continue its inquiry into whether the child is an Indian Child and report the results of the inquiry to the Court.

► **Temporary custody:**

- ☒ The child is placed in the temporary custody of ODHS for care, placement and supervision, pursuant to ORS 419B.809(5) ☒ in substitute care ☐ in home, subject to the following conditions: _____.
- ☐ The child is placed in the custody of ☐ mother ☐ father ☐ guardian, subject to the following conditions: _____.
- ☐ The child is placed in the temporary custody of: _____.

► **Visitation:** The first visit must occur within ☐ one week ☐ 48 hours ☐ other: _____.

Additional requirements: _____.

☐ Visits not appropriate at this time.

► The jurisdictional hearing will be held by 3/4/2021 or ☐ the court finds good cause to extend the 60-day deadline in ORS 419B.305 based on the following facts: _____.

► **ODHS Disclosure of Records and Reports**

Under ORS 419A.255(4)(a)(C), the Court consents to the use and disclosure of records, reports, materials or documents in the record of the case or the supplemental confidential file by ODHS if such use and disclosure is reasonably necessary to perform its official duties related to the involvement of the child with the juvenile court.

THIS CASE WILL NEXT BE REVIEWED:

APPEARANCE TYPE:	DATE:	TIME:
By the court for initial appearance on:		
By the court for settlement conference on:	9/30/2024	9 AM
By the court for pretrial conference on:		
By the court for trial on:	11/1/2024	9 AM
Readiness Appearance Set For:		
Other:		

► The 60-day deadline for resolving the petition in this case is: 10/28/2024. ORS 419B.305(1).

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

8/31/2024

Sarah Nelson

Sarah Nelson, Circuit Court Judge

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

In the Matter of:) Case Number: 00JU00000
)
BRODY JONES,) **JUDGMENT OF JURISDICTION**
) **AND DISPOSITION**
A Child.)

This matter came before the Court on: 11/1/2024

Persons appearing:

☐ Check box if person appeared by video or telephone (optional)

Legal Father <input type="checkbox"/> : Brandon Jones	Attorney <input type="checkbox"/> : Adam Fischer
Putative Father <input type="checkbox"/> :	Attorney <input type="checkbox"/> :
Mother <input type="checkbox"/> : Lena Clark	Attorney <input type="checkbox"/> : Alyssa Mellon
Child <input type="checkbox"/> :	Attorney <input type="checkbox"/> : Allen Cassama

CASA <input type="checkbox"/> : Susan Winthrope	Assist. Atty Gen'l <input type="checkbox"/> : Larry Brown
Guardian <input type="checkbox"/> :	Other <input type="checkbox"/> :
ODHS Caseworker <input type="checkbox"/> : Lisa Dole	Other <input type="checkbox"/> :
Guardian Ad Litem <input type="checkbox"/> :	

Relevant Dates/Current Placement:

Date juvenile court jurisdiction was established: 11/1/2024

Date the child was last placed in substitute care: 8/30/2024

Date the child was placed in current placement: 8/30/2024

Current Placement: ☐ home with parent or guardian, or ☒ substitute care with: ☐ relative ☐ current caretaker
☒ non-relative/non-current caretaker ☐ residential ☐ other:

ODHS Documentation: The Department of Human Services (ODHS) ☒ **has** ☐ **has not** prepared a written case plan that complies with the requirements of ORS 419B.343.

Evidence Considered

<u>JURISDICTION</u>	<u>DISPOSITION</u>
<input type="checkbox"/> Stipulations by the parties <input checked="" type="checkbox"/> The admissions described below <input checked="" type="checkbox"/> The exhibits admitted at the hearing <input checked="" type="checkbox"/> The testimony of the witnesses at the hearing <input type="checkbox"/> The following facts/law, of which the court has taken judicial notice: <input type="checkbox"/> Other:	<input type="checkbox"/> Stipulations by the parties <input checked="" type="checkbox"/> The exhibits admitted at the hearing <input checked="" type="checkbox"/> The testimony of the witnesses at the hearing <input type="checkbox"/> The following facts/law, of which the court has taken judicial notice: <input type="checkbox"/> Other:

The findings in this judgment are found by a preponderance of the evidence.

1. SUMMONS, NOTICE AND PARTICIPATION

► Parties Summoned:

☒ **Mother** was summoned to the hearing and appeared.

☐ Mother was summoned to the hearing and failed to appear, and she ☐ is ☐ is not a person in the military service who is entitled to the protections of the Servicemembers Civil Relief Act.

☐ Other: .

☒ **Father** was summoned to the hearing and appeared.

☐ Father was summoned to the hearing and failed to appear, and he ☐ is ☐ is not a person in the military service and who is entitled to the protections of the Servicemembers Civil Relief Act.

☐ Other: .

☒ Mother ☒ Father ☐ Guardian(s) was/were provided the notice of obligations and rights required by ORS 419B.117.

► Foster Parent(s)/Care Provider(s):

☒ The child is in substitute care, and ODHS ☒ did ☐ did not give the foster parent(s)/current care provider(s) notice of the hearing.

☐ The foster parent(s)/current care provider(s) did not attend the hearing.

☐ The foster parent(s)/current care provider(s) attended the hearing and had an opportunity to be heard.

► Grandparent(s) :

ODHS ☒ **made** ☐ **did not make** diligent efforts to identify, obtain contact information for, and notify all grandparents of the hearing.

☒ No grandparents attended the hearing, *or*

The following grandparents attended the hearing and had an opportunity to be heard:

Maternal:

☐ grandmother ☐ grandfather

Paternal:

☐ grandmother ☐ grandfather

☐ The grandparents who attended the hearing were informed of the date of a future hearing.

☐ ODHS **did not** give the grandparents notice of the hearing because ☐ a prior order relieved ODHS of the notice requirement, or:

☐ For good cause shown, the Court relieves ODHS of the responsibility to provide notice of this hearing: ☐ to all grandparents, ☐ to the following grandparents:

2. INDIAN CHILD WELFARE ACT (ICWA/ORICWA)

ODHS ☒ did ☐ did not make a good faith effort under ORICWA to determine whether the child is an Indian child.

☒ At this time, the Court does not have reason to know that ICWA/ORICWA applies. No individual present at the hearing knows or has reason to know the child is an Indian child under ICWA/ORICWA, and there is no additional information that has been presented that provides the Court reason to know that ICWA/ORICWA applies. Or Laws 2021, ch. 398, §14.

3. JURISDICTION

► ☒ The child is under 18 years of age, and venue is proper in this court.

- ▶ ☒ This court has jurisdiction under the UCCJEA to make a child custody determination.
- ▶ ☒ Allegations in “Admissions to Petition” form accepted by the court on 10/30/2024 is/are hereby incorporated into this judgment.
- ▶ The following allegations were proved, admitted, dismissed and pending in a jurisdictional judgment on the dates set out below.

Allegations for: Lena Clark				
#	Date of Judgment	Proved/Admitted	Amended	Text (or summary if full text in admissions form)
4A	11/1/2024	<input type="checkbox"/> P <input checked="" type="checkbox"/> A	<input type="checkbox"/> Y	The mother’s mental health issues, if left untreated, interfere with her ability to safely parent.
4B	11/1/2024	<input type="checkbox"/> P <input checked="" type="checkbox"/> A	<input type="checkbox"/> Y	The mother lacks the parenting skills and resources to safely parent the child.
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
#	Date of Judgment	Dismissed/Pended	Text optional	
		<input type="checkbox"/> D <input type="checkbox"/> P		
		<input type="checkbox"/> D <input type="checkbox"/> P		
		<input type="checkbox"/> D <input type="checkbox"/> P		

Allegations for: Brandon Jones				
#	Date of Judgment	Proved/Admitted	Amended	Text (or summary if full text in admissions form)
4C	11/1/2024	<input checked="" type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	The father’s substance abuse, if left untreated, interferes with his ability to safely parent.
4D	11/1/2024	<input type="checkbox"/> P <input checked="" type="checkbox"/> A	<input type="checkbox"/> Y	The father lacks the parenting skills and resource to safely parent the child.
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
		<input type="checkbox"/> P <input type="checkbox"/> A	<input type="checkbox"/> Y	
#	Date of Judgment	Dismissed/Pended	Text optional	
		<input type="checkbox"/> D <input type="checkbox"/> P		
		<input type="checkbox"/> D <input type="checkbox"/> P		
		<input type="checkbox"/> D <input type="checkbox"/> P		

▶ **Jurisdiction Finding**

- ☒ The child **is within** the jurisdiction of the court under ORS 419B.100.
- ☐ The child **is not within** the jurisdiction of the court under ORS 419B.100.

4. **DISPOSITIONAL FINDINGS**

► **PLACEMENT AND CUSTODY FINDINGS**

In-Home Placement:

- ☐ Placement in the **home** is in the child's best interest and for the child's welfare.
- ☐ Placement in the legal custody of **ODHS** for in-home placement is in the child's best interest and for the child's welfare.

Out-of-Home Placement:

- ☒ Placement or continuation in substitute care is in the child's best interest and for the child's welfare, based on the jurisdictional findings under ORS 419B.100 and because the child cannot be safely returned home/maintained in the home without further danger of suffering physical injury or emotional harm or endangering or harming others.
- Additional findings: ORS 419B.337(1).

The Court further finds that it is in the child's best interest and welfare to be placed:

- ☒ in the legal custody of ODHS for substitute care
- ☐ under protective supervision and in substitute care per ☐ ORS 419B.331 ☐ ORS 419B.334

► **Diligent Efforts:**

Relative Placement:

- ☒ The child is in substitute care, and ODHS ☒ has made ☐ has not made diligent efforts to place the child with a relative/person who has a caregiver relationship with the child, as required by ORS 419B.192.
- ☐ ODHS has decided to place the child with a relative or person who has a caregiver relationship with the child, but that placement is not in the child's best interest, because:

Sibling Placement:

- ☐ The child is in substitute care and has one or more siblings in substitute care.
- ODHS ☐ has made ☐ has not made diligent efforts to place the child with a sibling, as required by ORS 419B.192.
- ☐ Placement together is not in the best interest of the child or sibling.

► **Least Restrictive Placement:**

The selected placement ☒ is ☐ is not the least restrictive, most family-like setting that meets the health and safety needs of the child and in reasonable proximity to the child's home. 42 USC § 675(5)(A).

Additional findings:

► **School of Origin:**

- ☐ The Court finds **it is** in the child's best interest to attend the child's school of origin.
- ☐ The Court finds **it is not** in the child's best interest to attend the child's school of origin or any other school in the child's district of origin.

► **Reasonable Efforts**

❖ **Findings Not Required**

- ☐ This judgment does not authorize the removal of the child from the home, and the child is currently in the home and was not removed from the home prior to entry of this judgment.
- ☐ This is not an ICWA case, and, pursuant to ORS 419B.340(5) and (6) (special circumstances), ODHS is not required to make reasonable efforts to reunify the child with ☐ Mother ☐ Father. Additional findings:

❖ **Findings Required**

☒ This judgment commits the child to the **legal custody** of ODHS. The Court has considered the circumstances of the child and parent(s) and the child's health and safety. The court finds:

Efforts Prior to Removal

ODHS has ☒ made ☐ not made reasonable **efforts** to prevent or eliminate the need for removal, as described below.

☒ ODHS has made reasonable efforts because the agency's first contact with the family occurred during an emergency and the child could not remain without jeopardy in the home.

☐ Although ODHS did not make the required reasonable efforts to prevent or eliminate the need for removal, additional preventive/ reunification efforts would not permit the child to remain safely in the home.

Efforts Since Removal

ODHS has ☒ made ☐ not made reasonable efforts to make it possible for the ward to safely return home, as described below.

Description of preventive and reunification efforts and why those efforts were or were not sufficient and whether additional efforts would have been successful:

☒ Description of reasonable efforts is attached as Exhibit 1 ODHS Family Report, and is adopted as the Court's written findings.

The Court considered whether placement of the child and referral to the Strengthening, Preserving and Reunifying Families Program is in the child's best interest as required by ORS 418.595.

► **Case Plan**

The Current Case Plan Is:

☒ Reunification with ☒ Mother ☒ Father ☐ Other:

☐ Other plan:

To be achieved by: Click or tap to enter a date.

The Concurrent Plan Is: Adoption

THE COURT ORDERS:

Wardship

☒ Based on the finding of jurisdiction, the child is made a ward of the Court under ORS 419B.328.

Dismissal

☐ Based on the Court's finding there is no jurisdiction, the petition/amended petition is dismissed.

Placement, Legal Custody and Guardianship

► **In-Home**

☐ The Court grants legal custody and guardianship (ORS 419B.372) of the child to ODHS for care, placement and supervision, and directs the child be placed at home subject to the following conditions: **(OR)**

- ☐ The child is placed under the protective supervision of the Court and in the legal custody of:
☐ Mother ☐ Father ☐ Guardian subject to the following conditions:

► **Out-of-Home**

☒ The Court grants legal custody and guardianship (ORS 419B.372) of the child to ODHS for care, placement and supervision.

☐ The child is placed under the protective supervision of the Court and in the legal custody of pursuant to: ☐ ORS 419B.331 ☐ ORS 419B.334

Parent/Guardians

☐ Mother ☐ Father ☐ Other: to comply with the terms of the ☐ Action Agreement/ Letter of Expectation, dated ☐ Other:

ODHS

☐ ODHS is ordered to:

CASA

☐ CASA is appointed to represent the child/ren.

Visitation ORS 419B.337(3)

☐ ODHS is ordered to develop or modify the visitation plan to include the following provisions:

ICWA/ORICWA: Each party is required to inform the Court immediately if the party receives information that provides reason to know the child is an Indian child. ODHS is ordered to continue its inquiry into whether the child is an Indian Child and report the results of the inquiry to the Court.

ODHS Disclosure of Records and Reports

Under ORS 419A.255(4)(a)(C), the Court consents to the use and disclosure of records, reports, materials or documents in the record of the case or the supplemental confidential file by ODHS if such use and disclosure is reasonably necessary to perform its official duties related to the involvement of the child with the juvenile court.

Additional orders:

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

APPEARANCE TYPE:	DATE:	TIME:
► Review hearing	5/4/2025	9 AM
► Permanency hearing	11/1/2025	9 AM
► If the child is in the legal custody of ODHS and placed in substitute care, the CRB will conduct a review of this case between 5 and 6 months from entry into care.		
► Other:		

▶ <input type="checkbox"/> No further hearings.		

11/1/2024

Sarah Nelson

Sarah Nelson, Circuit Court Judge

Placement History

Child's Last Name: JONES
Child's Person ID: 00000000

Child's First Name: BRODY
DOB: 9/27/2023

Removal Date: 8/30/2024

Case ID	Begin Date	End Date	End Reason	Provider	Service Type	Placement Setting	Status
000000	8/30/2024	9/1/2024	Same Provider	123456	Family Shelter Care Non-Rel 0-5	Regular Family Foster Care- non relative	
000000	9/2/2024			123456	Family Foster Care Non-Rel 0-5	Regular Family Foster Care- non relative	

LISA DOLE
000-000-0000
000 State St
Salem, OR 00000
Lisa.Dole@odhs.oregon.gov

Family Report

Report to: Marion County

Case Name: Lena Clark	Case Number: 000000
Date of Report: 1/23/2025	Date Family Report Approved: 1/23/2025
In the matter of: Brody Jones (00JU00000)	
Type of Hearing: CRB	Date of Hearing: 3/1/2025
Indian Child Welfare Act (ICWA) Applies: No	
Refugee Case: No	

THE OREGON DEPARTMENT OF HUMAN SERVICES (ODHS) REQUESTS:

<input checked="" type="checkbox"/> Continue the current plan

NOTICES

All Grandparents Notified: Yes

All Resource Parents Notified: Yes

PARENTS/GUARDIANS

Basic Information

Name: Lena Clark			
DOB: 1/25/2005	Age: 20	Language: English	Whereabouts: 000 Main St, Salem, OR 00000
Attorney: Alyssa Mellon		Guardian Ad Litem: N/A	

Name: Brandon Jones			
DOB: 3/27/2005	Age: 20	Language: English	Whereabouts: 0 No Rd, Sublimity, OR 00000
Attorney: Adam Fischer		Guardian Ad Litem: N/A	

CHILDREN/YOUNG ADULTS

Basic Information

Name: Brody Jones		
DOB: 9/27/2023	Age: 1	ICWA Status: ICWA Does Not Apply
Parent/Guardian: Lena Clark	Paternity Status: N/A	
Parent/Guardian: Brandon Jones	Paternity Status: Legal/Biological	
Primary Plan: Reunification	Concurrent Plan: Adoption	
Date of Jurisdiction: 11/1/2024		

As required by Oregon law, ODHS is providing notice that tribal customary adoption is a permanency plan option when a court has wardship of an Indian child.

Basis for Jurisdiction (Allegations)	Status	Status Date
The mother's mental health issues, if left untreated, interfere with her ability to safely parent.	Admitted	11/1/2024
The mother lacks the parenting skills and resources to safely parent the child.	Admitted	11/1/2024
The father's substance abuse, if left untreated, interferes with his ability to safely parent.	Proven	11/1/2024
The father lacks the parenting skills and resource to safely parent the child.	Admitted	11/1/2024

Collaterals
Child Attorney: Allen Cassama
Court Appointed Special Advocate: Susan Winthrop

Child/Young Adult Update

Provided Services	Start Date	End Date
Early Childhood Intervention Assessment	10/25/2024	11/18/2024
CANS Screening - Referral	10/11/2024	10/18/2024
Intake RN Assessment	9/6/2024	9/9/2024

Describe how the child/young adult is doing:

Brody is doing very well in his current resource home. There are 5 other children in this home, 4 other foster children and one adopted child. Brody is the youngest child in the home. Brody was screened by Early Intervention (EI) on 10/29/2024. He then had a full EI evaluation and was found to qualify for assistance with muscle strength and motor skills, as well as communication development. He now participates in Occupational Therapy (OT) once per month and the resource parents do exercises with him.

Resource mother reports that Brody is eating very well. She has to pace him, so he doesn't eat so fast that he makes himself throw up. He loves to be held and cuddled. He is still not walking. His pediatrician states that Brody does not have the muscle strength she would expect for an 18-month-old. The pediatrician is considering a referral to OHSU to have him evaluated. The resource mother reports Brody is no longer showing anxiety before naps and bed time.

Describe how the child/young adult was involved with the development of the case plan:

Brody is too young to be involved in the development of his case plan.

Placements

Placement Setting	Start Date	End Date
Provider 123456	8/30/2024	

Number of Days in Care: 119

Number of Out-of-Home Placements: 1

Describe how the current placement meets the child/young adult's physical, emotional, and education needs:

The current resource family is an experienced foster provider. They have done an excellent job working with medical professionals in determining Brody's developmental needs, taking him to OT as well as doing his OT exercises with him. They provide Brody with a secure home environment to support his emotional wellbeing.
Brody does not have any educational needs at this time.

Diligent Efforts to Place with Relatives and Siblings

Efforts to place child/young adult with relatives or person with a caregiver relationship:

A relative search was completed during the Child Protective Service (CPS) Assessment. Neither grandparents were able to be placement resources. There is an aunt that may be a possibility. The agency is working on reaching out to her.

Additional relative information:

Brody has only had contact with his paternal grandparents and maternal grandmother. He has a maternal grandfather in California that he has never met.

Are siblings placed together? N/A

Family Time & Face-to-Face Contacts

Number of Face-to-Face Contacts with CW (cumulative): 6

Face-to-face Contacts for the last six months (dates and locations):

Date	Worker Making Contact	Location
1/6/2025	Lisa Dole	Substitute Care/Child Placement
12/19/2024	Lisa Dole	Court/CRB
11/11/2024	Lisa Dole	Substitute Care/Child Placement
10/6/2024	Lisa Dole	Substitute Care/Child Placement
8/29/2024	Sue Smith	Parent Home

Family Time (cumulative):

Number of Family Time Visits	Family Time With
20	Brandon Jones
25	Lena Clark

Notes about family time/parenting time:

Parenting time is set up to occur weekly at the ODHS office for an hour for each parent (two hours total). Parents are currently visiting separately, at their request. Community visits have been explored, but neither parent has safety service providers to monitor the visits. The SSA assigned to supervise visits has voiced concerns about the mother's attachment and bonding to Brody. She noted that mother seems cold and "removed" during visits and talks to Brody like he is a grown up. The SSA indicates that father is more loving and nurturing, but he seems to lack some basic parenting skills. Father has missed several visits due to obtaining work at the last minute.

Education

Attendance Status: Not School Age

Health

Current Health Care Providers	Last Appointment
Medical: Salem Pediatric	9/29/2024
Dental: Dental Screening	9/28/2024

Immunizations up to date: Yes

Update on child/young adult's health:

Brody is overall a healthy baby, almost toddler. He was behind on his immunizations when he entered care, but he is now up to date. He does appear to have some possible developmental delays that are being monitored by his pediatrician. He is also receiving services from Early Intervention to address these issues.

Cultural and Social Activities

Describe how ODHS makes sure the child/young adult takes part in culturally supportive or developmentally suitable activities. Also tell how the care provider supports and encourages these activities:

Brody's resource family takes him on family outings and to a baby play group.

PARENT/GUARDIAN: Lena Clark**Engagement**

Number of Face-to-Face Contacts with Caseworker (last 6 months): 10

Describe what this parent/guardian wants the team to know about their family and their family's culture:

Lena relayed that she had very different family culture between her time living with her mother and father. She said since she most recently lived with her mother, she would identify closest to her mother's family culture. She said that everything with her mother is "let's see what happens." She said that her mother did not provide any type of consistency around holidays, birthdays, or family activities. She said that she thinks that is best so that children don't get their expectations set high and then have them let down. She did say that she would like

Brody to feel like he could count on her more than she felt like she counted on her mother. She also said she doesn't want Brody to feel so controlled like she did with her father. She said she was not raised with any type of religious beliefs. Her mother did think she was Wiccan for a bit, but that didn't last. Lena said that she does want her child to feel loved and that although her parents fought over her most of her life, she is not sure either of them really loved her.

Describe additional information on parenting time:

Lena currently visits Brody once a week for one hour at a time. The SSA that supervises the visits states that Lena seems "cold" in her interactions with Brody. The agency is looking into providing parent mentoring during the visits to gain additional information regarding Lena's parenting needs and potential disconnect with her child.

Describe the agency's efforts to engage the parent/guardian in the case plan:

ODHS meets with Lena at least monthly to see how she is progressing in her services and talking to her about the Conditions for Return. Lena calls this worker almost daily, sometimes to just vent about how frustrated she is with Brandon.

Connections with Community and Natural Supports:

Lena reports feeling isolated, but she also does not seem to reach out to community supportive services. Specifically, Home Health Services indicated that they have been attempting to reach out for Lena for the last several months and she has not returned their calls or letters. When they did meet with her they gave her information about additional support groups for young mothers and other resources and she did not follow through with any of these additional services. Lena states that her mother is both a support and a stress in her life. At this point, the agency would see her as more of a negative influence on Lena's mental health than a support. Lena's father has reached out to this worker. He mostly seems interested in what Lena did to harm Brody. He seems insistent that she move to California to be with him and give Brody up for adoption.

Conditions for Return

Conditions for Return – Describe what is needed to return the children to this parent/guardian safely:

1. **There is a home-like setting where the mother and child can live.** MET- The mother currently has HUD approved housing with a two-bedroom apartment.
2. **There are not any barriers in the home to allowing safety service providers & activities to occur.** MET – There are not any current barriers in the home to allowing safety services to occur and for the agency to manage an in-home plan.
3. **At least one parent is willing to cooperate with an in-home plan.** MET- Mother expresses she is willing to have people in the home to assist her in caring for Brody.
4. **The necessary safety activities and resources are available to implement an in-home plan.** NOT MET - The mother does not have any safety service providers willing to stay the night with her and check on her several times a day to ensure that she is providing appropriate care to Brody.

Progress toward Conditions for Return:

As stated above, Lena has met 3 of the 4 Conditions for Return. It appears that the main barrier is finding suitable Safety Service Providers that will meet the agency's criteria. Lena did provide the name of a friend, but that friend did not meet the agency criteria.

Expected Outcomes

Strengths – Enhanced Protective Capacity

Describe strengths the parent/guardian has that can help protect the children from each identified safety threat:

Lena is physically able to meet Brody's needs.

She is sufficiently healthy, mobile, and strong.

She is reaching out to caseworker to learn more about parenting and is consistent about showing up for her visits.

Lena is demonstrating improved impulse control. At times, she is able to set aside her relationship issues with Brandon to focus on Brody's needs. At times, she is not able to do this and appears fixated on her relationship with Brandon more than her relationship with her child.

Challenges - Diminished Protective Capacity

Describe challenges that have been a barrier to the parent/guardian's ability to protect the children from each identified safety threat:

Lena has lacked role models for healthy parenting and lacks parenting skills.

Lena appears to be mostly unable to set aside her own needs in favor of her child.

Lena does not seem to have an accurate perception of what a child, Brody's age, is capable of thinking, feeling, and doing.

Expected Outcomes – Regarding this challenge, what needs to change for the case to close:

Lena will be able to set aside her own needs to ensure Brody's needs are met.

Lena will gain the skill necessary and model this skill to show that she has an accurate perception of what children of various ages and stages require from their parents.

Progress:

She has also started parenting classes, but it is unclear if that service has been helpful, as she still appears to struggle with engagement during visitation with her son.

The agency feels that more hands-on parenting training/coaching would be useful while Lena is with Brody. This worker is currently researching a possible special contract with an outside provider to attend Lena and Brody's visits.

Expected Outcome Status: Goal not achieved.

Describe challenges that have been a barrier to the parent/guardian's ability to protect the children from each identified safety threat:

Lena is not able to consistently meet her own emotional/mental health needs.

Expected Outcomes – Regarding this challenge, what needs to change for the case to close:

Lena will ensure she is addressing/treating her mental health needs.

Lena will obtain the skills so that she can find ways to ensure her emotional needs are met and are not directly tied to her relationship with another person.

Progress:

Lena started mental health counseling but only attended two sessions and then stopped attending.

She has not engaged with the various service providers who have reached out to her.

Expected Outcome Status: Goal not achieved.

Services to Support Expected Outcomes

Provider Name	Service Category	Service Type	Start Date	End Date	Court Ordered
Marion County Mental Health	Mental Health Support Services	Mental Health Therapy	11/29/2024	Ongoing	No
Online Parenting Classes	Parenting	Parenting Services	10/18/2024	Ongoing	No
Cheer Resources	DV/Batterer's Intervention	Domestic Violence Survivor Support	11/27/2024	Ongoing	No

PARENT/GUARDIAN: Brandon Jones**Engagement**

Number of Face-to-Face Contacts with Caseworker (last 6 months): 6

Describe what this parent/guardian wants the team to know about their family and their family's culture:

Brandon states that his parents and a couple friends are his support system. He said he was raised to have a good work ethic, take care of your family and be tough. He said he feels that his parents took good care of him when he was a child but probably were not loving like the families you see on television. He said that his parents didn't really tell him they loved him, but he knew they did because they provided him what he needed. He said he did not grow up believing in God. He said his Dad said that a person should be able to see something and touch it to believe in it.

Describe additional information on parenting time:

Brandon has struggled to make all of his scheduled visits. He does a lot of work under the table clearing brush and logging and his work schedule can be unpredictable. When he does attend, he is very attentive with Brody and the SSA that supervises the visits states that Brandon appears to have natural parenting instincts.

Describe the agency's efforts to engage the parent/guardian in the case plan:

ODHS attempts monthly contact with Brandon but he has at times been difficult to contact. This worker sometimes checks in during his visits but does not want to take up his valuable parenting time talking about case planning. This worker has asked him to stay after his visits several times to talk and he has only stayed on one occasion. He states that he gets rides to visits and his ride is unwilling to wait for him.

Connections with Community and Natural Supports:

Brandon does not appear to have any real community supports. His parents have supported him with transportation and a place to stay, but they are not fond of government agencies and have been hostile when meeting with this worker.

Conditions for Return

Conditions for Return – Describe what is needed to return the children to this parent/guardian safely:

1. **There is a home-like setting where the father and child can live. NOT MET**- The father does not have a current home like setting. He is residing with his parents and he said their house would not meet the required standards and his parents do not want a government agency visiting their home. If he is able to obtain recovery housing, this goal will be met.
2. **There are not any barriers in the home to allowing safety service providers & activities to occur. NOT MET** – There are current barriers in father's current residence as his parents do not want outside people visiting their home. If he is able to obtain recovery housing, this goal will be met.
3. **At least one parent is willing to cooperate with an in-home plan. MET**- Father expresses he is willing to have people come to his home, if he had a home for them to come to.
4. **The necessary safety activities and resources are available to implement an in-home Plan. NOT MET**- The father states he does not have any people willing to be safety service providers. But, if he is able to obtain recovery housing there will be safety service providers on site.

Progress toward Conditions for Return:

Brandon's lack of stable housing and safety service providers are significant barriers to a potential in home plan. Brandon is scheduled to enter a residential treatment program in about two weeks from this writing. Once he graduates from that treatment program (average 30 days stay), he may be able to move into a specialized housing program for fathers in recovery. The program is in a group of apartments that is managed by Adapt. This set-up would also allow for onsite safety service providers that live in the complex and check on residents daily or more frequently if needed. Brandon is currently on a waiting list for the recovery housing program. If and when Brandon receives this housing, IN HOME criteria will be met and Brandon will have met the Conditions for Return.

Expected Outcomes

Strengths – Enhanced Protective Capacity

Describe strengths the parent/guardian has that can help protect the children from each identified safety threat:

Brandon is physically able to care for his son and meet his son's basic need. Brandon is aligned with his son. He thinks of himself as being highly connected to his son. Brandon is tolerant as a caregiver. He seems to value how his son feels and does not have unreasonable expectations based on his son's development and age.

Challenges - Diminished Protective Capacity

Describe challenges that have been a barrier to the parent/guardian's ability to protect the children from each identified safety threat:

Brandon does not demonstrate impulse control when using substances. He has a history of acting on his urges and acting without thinking things through when intoxicated.

Expected Outcomes – Regarding this challenge, what needs to change for the case to close:

Brandon needs to be able to show that he can manage his impulses when intoxicated or manage his substance use. His choices, behaviors and attitude will indicate he has

appropriately managing his impulse control and/or substance abuse issues which have led to relationship issues between he and Brody's mother and domestic discord with Brody's mother, involving smashing a TV, in Brody's presence.

Progress:

Brandon is currently engaged in outpatient drug and alcohol treatment. He is scheduled to enter residential treatment within the next two weeks. He has consistently been attending outpatient treatment since end of February but has been unable to maintain his sobriety despite reaching out for assistance. He has continually produced positive UAs for alcohol. His counselor states that the homework has been difficult for Brandon due to his struggles with reading. Brandon and his counselor both feel that residential treatment would benefit him at this time. There are no rooms that permit children in the male housing section of this residential program, so Brody cannot attend with Brandon. Brandon has not engaged in any incidences of violence during this case.

Expected Outcome Status: Goal not achieved

Describe challenges that have been a barrier to the parent/guardian's ability to protect the children from each identified safety threat:

Brandon lacks adequate knowledge to fulfill his parenting responsibilities and tasks.

Expected Outcomes – Regarding this challenge, what needs to change for the case to close:

Brandon will be able to demonstrate adequate parenting skills. His interactions with his son will indicate he is able to meet his parenting responsibilities to ensure his child's safety.

Progress:

Brandon has completed an online parenting class that he was able to attend despite his busy work schedule. He has shown a loving, gentle, and intuitive connection with Brody at his visits. He changes diapers, brings age-appropriate finger foods, and engages with Brody using lots of touch, eye contact and other skills that he has learned in his parenting class.

Expected Outcome Status: Goal achieved

Services to Support Expected Outcomes

Provider Name	Service Category	Service Type	Start Date	End Date	Court Ordered
Addiction Recovery Team	A/D Services/Support	A/D Assessment	10/19/2024	Ongoing	No
Online Parenting Program	Parenting	Parenting Services	10/19/2024	1/18/2025	No
Adapt Drug and Alcohol Solutions	A/D Services/Support	A/D Inpatient/Outpatient Treatment	12/25/2024	Ongoing	No
Adapt Drug and Alcohol Solutions	A/D Services/Support	Sober Living Services	12/25/2024	Ongoing	No

REASONABLE OR ACTIVE EFFORTS REGARDING PLANNING

Brody Jones (000000)

Primary Plan: Reunification

Additional Reasonable efforts to support the child returning or remaining home with parents/guardians not stated in Parents/Guardians section:

Family Engagement Meeting
Gas vouchers
Referral to housing program for Father
Caseworker meetings and support
Increased visitation
Reviewing Protective Capacity Assessment with parents and asking for their input
Speaking to relatives

Concurrent Plan: Adoption

Efforts to develop the concurrent plan:

ODHS has searched for relatives and the parents have been explained the ASFA timelines. Brody's birth certificate and medical records have been gathered and ICWA forms are now complete.
ODHS has discussed the concurrent plan with both parents. The current Resource Parents have also discussed concurrent planning with ODHS.

NEED FOR CONTINUANCE OF SUBSTITUTE CARE AND WARDSHIP

The child/young adult remains in substitute care. ODHS believes it is necessary for the child/young adult's safety and well-being to continue in substitute care because:

☒ ODHS believes substitute care continues to be necessary. Rather than returning the child/young adult home or taking prompt action to secure permanent placement because: Both parents are continuing to engage in services and make necessary changes.

Expected timetable to place with a parent or other permanent placement: 6/27/2025

Termination of the child/young adult's commitment to the legal custody of ODHS is expected to occur on or by: 12/25/2025

Termination of wardship is expected on or by: 12/25/2025

ODHS asked the child/young adult to attend the hearing and offered transportation: N/A

SIGNATURES

Printed Name	Signature	Role	Date Signed
Lena Clark	<i>Lena Clark</i>	Mother	1/23/2025
Lisa Dole	<i>Lisa Dole</i>	ODHS Perm Worker	1/23/2025
Eric Christianson	<i>Eric Christianson</i>	ODHS Supervisor	1/23/2025

Action AgreementCase name: Lena ClarkCase number: 000000Worker: Lisa Dole**Date:** 1/23/2025Branch: Marion**Parent/Child(ren) information****Parent information:**Lena Clark**Children:**Brody Jones

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):

States 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.

One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior.

A situation, attitudes, and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills, and motivation necessary to ensure a child's safety.

Which of the above safety threat(s) is/are being addressed by this Action Agreement: All of the above Safety Threats will be addressed in this Action Agreement.

Expected outcomes:

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.

Ms. Clark will be able to set aside her own needs to ensure Brody's needs are met.

Ms. Clark will gain the skill necessary and model this skill to show that she has an accurate perception of what children of various ages and stages require from their parents.

Ms. Clark will ensure she is addressing/treating her mental health needs.

Ms. Clark will obtain the skills so that she can find ways to ensure her emotional needs are met and are not directly tied to her relationship with another person.

1. Activity or service: Online parenting classes**Participant:** Lena Clark

Responsibilities: Ms. Clark will complete online parenting classes and demonstrate the skills she learned from them during family time with Brody.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

2. Activity or service: Hands-on parent training/coaching

Participant: Lena Clark

Responsibilities: Ms. Clark will practice engaging with Brody during weekly hands-on parent training/coaching sessions.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

3. Activity or service: Parent mentor

Participant: Lena Clark

Responsibilities: Ms. Clark will meet regularly with her assigned parent mentor and be open to learning from them.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

4. Activity or service: Mental health counseling

Participant: Lena Clark

Responsibilities: Ms. Clark will re-engage with a mental health provider of her choice and follow all recommended treatment recommendations.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

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.)

Ms. Clark's progress in the above services will be documented through professional assessments.

Ms. Clark will provide assessments and follow through on any given advice by professionals.

Ms. Clark will be able to demonstrate a safe and substance-free home by allowing both announced and unannounced visits by the caseworker.

Ms. Clark will be able to demonstrate a willing and cooperative attitude by allowing caseworkers and Safety Service Providers to assess observed behaviors and intervene when necessary.

Ms. Clark will be available monthly for face-to-face contact with her caseworker.

Ms. Clark will be able to articulate Brody's needs and demonstrate how she will meet those needs.

- I will actively participate in service 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.
- 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: Lena Clark

Date: 1/23/2025

Caseworker: Lisa Dole

Date: 1/23/2025

Date to review/update the action agreement: 4/25/2025

Action Agreement

Case name: Lena Clark Case number: 000000
Worker: Lisa Dole Date: 1/23/2025
Branch: Marion

Parent/Child(ren) information**Parent information:**Brandon Jones**Children:**Brody Jones

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):

States 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.

One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior.

A situation, attitudes, and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills, and motivation necessary to ensure a child's safety.

Which of the above safety threat(s) is/are being addressed by this Action Agreement: All of the above Safety Threats will be addressed in this Action Agreement.

Expected outcomes:

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.

Mr. Jones needs to be able to show that he can manage his impulses when intoxicated or manage his substance use.

1. Activity or service: A&D treatment

Participant: Brandon Jones

Responsibilities: Mr. Jones will engage in alcohol and drug treatment and follow all recommendations.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

2. Activity or service: Housing to support recovery

Participant: Brandon Jones

Responsibilities: Mr. Jones will maintain safe and stable housing to support recovery.

Start/End dates: 1/23/2025 – 4/25/2025

Court order: No

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.)

Mr. Jones' progress in the above services will be documented through professional assessments.

Mr. Jones will provide assessments and follow through on any given advice by professionals.

Mr. Jones will be able to demonstrate a safe and substance-free home by allowing both announced and unannounced visits by the caseworker.

Mr. Jones will be able to demonstrate a willing and cooperative attitude by allowing caseworkers and Safety Service Providers to assess observed behaviors and intervene when necessary.

Mr. Jones will be available monthly for face-to-face contact with his caseworker.

Mr. Jones will be able to articulate Brody's needs and demonstrate how he will meet those needs.

- I will actively participate in service 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.
- 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: _____ **Date:** _____

Caseworker: _____ **Date:** _____

Date to review/update the action agreement: 4/25/2025

CANS RESULTS 0-5

Child: Brody Jones

CANS Screener: Mason Fletcher

Primary Caseworker: Lisa Dole

Branch: Marion

DOB: 9/27/2023

Screening Type: Initial

Effective Date: 10/18/2024

Scoring

The CANS screening identifies the individual needs and strengths of a child. Each element is given a score of 0-3.

For elements related to needs:

A score of 0 indicates no evidence of a problem.

A score of 1 indicates an area needing to be monitored.

A score of 2 indicates an area needing some sort of action.

A score of 3 indicates a priority for planning.

For elements related to strengths:

A score of 0 or 1 indicates the existence of a strength.

A score of 2 or 3 indicates the need to develop or identify a strength.

The conclusion narrative outlines the foster parent expectations for supervision based on the identified enhanced needs. The narrative also outlines recommendations for services in order for the caseworker to address the identified enhanced needs.

Safety Domain

Child Risk Factors 0-5 Years Old

Risk factors are the types of things that can get children and adolescents in trouble or put them in danger of harming themselves or others. Notice that the time frames for the ratings change, particularly for the '1' and '3' ratings away from the standard 30 day rating window.

1. Birth Weight - *This dimension describes the child's weight at birth as compared to normal development.*

Rating Level: 0

Selected Rating Description: Child born within normal range for weight. A child born 5.5 pounds or more would be rated here.

2. Prenatal Care - *This dimension refers to the health care and birth circumstances experienced by the child in utero.*

Rating Level: 2

Selected Rating Description: Child's biological mother received poor prenatal care, initiated only in the last trimester, or had a moderate form of pregnancy-related illness.

3. Substance Exposure - *This dimension describes the child's exposure to substance use and abuse both before and after birth. (Consider Father's Substance use/abuse as well.)*

Rating Level: 1

Selected Rating Description: Child had either mild in utero exposure, or there is current alcohol and/or drug use in the home or there is suspicion that child has been exposed to substances.

4. Parent or Sibling Problems - *This dimension describes how this child's parents and older siblings have done/are doing in their respective developments.*

Rating Level: 0

Selected Rating Description: The child's parents have no known developmental disabilities. The child has no siblings, or existing siblings are not experiencing any developmental or behavioral problems.

5. Self Harm - *This rating describes behaviors that result in physical injury to the child; e.g. head banging, or other self-injurious behavior and reckless, dangerous behavior that places the child or others at some jeopardy.*

Rating Level: 1

Selected Rating Description: There is a history, suspicion, or a mild level of self-harm behavior.

6. Aggressive Behaviors - *This item rates the child's violent or aggressive behaviors. The intention of the behavior is to cause significant bodily harm to others. Consider caregiver when rating this element, especially when caregiver is not able to influence or control child's violent behavior.*

Rating Level: 0

Selected Rating Description: No evidence of aggressive behaviors.

7. Sexual Behavior - *This item rates age-inappropriate sexualized behaviors that may place a child at risk for victimization or risky sexual practices.*

Rating Level: 0

Selected Rating Description: No evidence of problems with sexualized behaviors.

Document presenting behaviors, actions, or other conditions that support the above findings:

Brody was born a healthy weight. His mother did not receive prenatal care. Resource parent reports that Brody can have issues with self-harm sometimes. She reports that he will sometimes smack himself into the wall repeatedly when upset.

Strengths Domain

Child Risk Factors 0-5 Years Old

These ratings describe a range of assets that children may possess that can facilitate healthy development. An absence of strength is not necessarily a need but an indication that strength-building activities are indicated. In general, strengths are more trait-like, stable characteristics;

however, the 30 day rating window still applies unless over-ridden by the action levels as described below.

8. Family - *Family refers to all family members as defined by the child, or biological relatives and significant others with whom the child is still in contact. Is the family (as defined by the child) a support and strength to the child?*

Rating Level: 2

Selected Rating Description: Mild level of family strengths. Family members are known but currently none are able to provide emotional or concrete support.

9. Interpersonal - *This rating refers to the child's interpersonal skills both with peers and adults.*

Rating Level: 1

Selected Rating Description: Moderate level of interpersonal strengths. Child has formed a positive interpersonal relationship with at least one non-caregiver. Child responds positively to social initiations by adults, but may not initiate such interactions by him-or herself.

10. Adaptability - *This item rates how well a child can adjust in times of transition.*

Rating Level: 0

Selected Rating Description: Child has a strong ability to adjust to changes and transitions.

11. Persistence - *This item rates how well a child can continue an activity when feeling challenged.*

Rating Level: 0

Selected Rating Description: Infant/child has a strong ability to continue an activity when challenged or meeting obstacles.

12. Curiosity - *This rating describes the child's self-initiated efforts to discover his/her world.*

Rating Level: 0

Selected Rating Description: This level indicates a child with exceptional curiosity. Infant displays mouthing and banging of objects within grasp; older child crawls or walks to objects of interest.

13. Playfulness - *This rating describes the child's enjoyment of play alone and with others.*

Rating Level: 0

Selected Rating Description: This level indicates a child with substantial ability to play alone and with others. Child enjoys play, and if old enough, regularly engages in symbolic and means-end play. If still an infant, child displays changing facial expressions in response to different play objects.

14. Relationship Permanence - *This rating refers to the stability of significant relationships in the child's life. This likely includes family members but may also include other individuals.*

Rating Level: 2

Selected Rating Description: This level indicates a child who has had at least one stable relationship over his/her lifetime but has experienced other instability through factors such as divorce, moving, removal from home and death.

Document presenting behaviors, actions, or other conditions that support the above findings:

Brody seeks comfort and nurturance from his resource parent. His relationship permanence has been impacted due to ODHS removal from his biological mother.

Well Being Domain

Exposure to Potentially Traumatic/Adverse Childhood Experiences 0-5 Years Old

These ratings are made based on LIFETIME exposure of trauma or adverse childhood experiences.

15. Sexual Abuse - This rating describes the child's experience of sexual abuse.

Rating Level: 0

Selected Rating Description: There is no evidence that child has experienced sexual abuse.

16. Physical Abuse - This rating describes the child's experience of physical abuse.

Rating Level: 0

Selected Rating Description: There is no evidence that child has experienced physical abuse.

17. Emotional/Verbal Abuse - *This rating describes the degree of severity of emotional abuse, including verbal and nonverbal forms. This item includes both "emotional abuse," which would include psychological maltreatment such as insults or humiliation towards a child and/or "emotional neglect" defined as the denial of emotional attention and/or support from caregivers.*

Rating Level: 2

Selected Rating Description: Child has experienced moderate degree of emotional abuse. For instance, child may be consistently denied emotional attention from caregivers, insulted or humiliated on an ongoing basis, or intentionally isolated from others.

18. Neglect - *This rating describes the severity of neglect an individual has experienced. Neglect can refer to lack of food, shelter or supervision (physical neglect) or a lack of access to needed medical care (medical neglect) or failure to receive academic instruction (emotional neglect).*

Rating Level: 3

Selected Rating Description: Child has experienced a severe level of neglect including multiple and/or prolonged absences (e.g., a day or more) by adults, without minimal supervision, and failure to provide basic necessities of life on a regular basis.

19. Medical Trauma - *This rating describes the severity of medical trauma. Not all medical procedures are experienced as traumatic. Medical trauma results when a medical experience is perceived by the child as mentally or emotionally overwhelming. Potential medical traumas include but are not limited to the following examples: the onset of a life threatening illness; sudden painful medical events; chronic medical conditions resulting from an injury or illness or another type of traumatic event.*

Rating Level: 0

Selected Rating Description: There is no evidence that child has experienced medical trauma.

20. Witness to Family Violence - *This rating describes the severity of exposure/observation of family violence.*

Rating Level: 1

Selected Rating Description: Child has witnessed one episode of family violence and there was no lasting injury.

21. Witness to Community Violence - *This rating describes the severity of exposure to community and school/daycare violence, including bullying*

Rating Level: 0

Selected Rating Description: There is no evidence that child has witnessed or experienced violence in the community or at school.

22. War Affected - *This rating describes the severity of exposure to war, political violence, or torture. Violence or trauma related to terrorism is NOT included here.*

Rating Level: 0

Selected Rating Description: There is no evidence that child has been exposed to war, political violence, or torture.

23. Terrorism Affected - *This rating describes the degree to which a child has been affected by terrorism. Terrorism is defined as "the calculated use of violence or the threat of violence to inculcate fear, intended to coerce or intimidate governments or societies in the pursuit of goals that are generally political, religious or ideological." Terrorism includes attacks by individual acting in isolation (e.g., sniper attacks).*

Rating Level: 0

Selected Rating Description: There is no evidence that child has been affected by terrorism or terrorist activities.

24. Witness/Victim of Criminal Activity - *This rating describes the severity of exposure to criminal activity. Criminal behavior includes any behavior for which an adult could go to prison including drug dealing, prostitution, assault, or battery.*

Rating Level: 0

Selected Rating Description: There is no evidence that child has been victimized or witnessed significant criminal activity.

25. Parental Criminal Behavior (birth parents & legal guardians only) - *This item rates the criminal behavior of both biological and stepparents, and other legal guardians, NOT foster parents.*

Rating Level: 0

Selected Rating Description: There is no evidence that child's parents have ever been engaged in the criminal justice system.

26. Disruptions in Caregiving/Attachment Losses - *This rating describes the extent to which the child has been exposed to disruptions in caregiving involving separation from primary attachment figure(s) and/or attachment losses (i.e., placement in foster care, caregiver incarceration, caregiver deployment, caregiver deportation, death of caregiver, etc.). Children who have had placement changes, including stays in foster care, residential treatment facilities or juvenile justice settings can be rated here. Short term hospital stays or brief juvenile detention stays, during which the child's caregiver remains the same, would not be rated on this item.*

Rating Level: 2

Selected Rating Description: Child has been exposed to 2 or more disruptions in caregiving with known alternative caregivers, or the child has had at least one disruption involving placement with an unknown caregiver. Children who have been placed in foster or other out-of-home care such as residential care facilities would be rated here. Impact of disruption is perceived as moderate to child or others.

Document presenting behaviors, actions, or other conditions that support the above findings:

Brody was left by himself for extended periods of time without food. Brody witnessed his parents yelling and screaming at each other often. It is suspected he also witnessed domestic violence. Brody was placed in foster care in a non-relative family foster home.

Well Being Domain

Symptoms Resulting From Exposure to Trauma or Other Adverse Childhood Experiences 0-5 Years Old

These ratings describe a range of reactions that children and adolescents may exhibit in response to any of the variety of traumatic experiences described in the above domain. Unlike the Trauma Experiences, which are cumulative over the child's lifetime, these symptoms are rated based on how the child is doing over the past 30 days.

27. Adjustment to Trauma - *This item covers the youth's reaction to any potentially traumatic or adverse childhood experience. Any child who meets diagnostic criteria for a trauma-related adjustment disorder, posttraumatic stress disorder and other diagnoses from DSM that the child may have as a result of their exposure to traumatic/adverse childhood experiences would be rated as a 2 or 3 on this item. NOTE: This item allows you to rate the overall severity of the broad range of trauma-related symptoms the child may be experiencing. The remaining items on the CANS will allow you to also rate each of the specific types of symptoms.*

Rating Level: 2

Selected Rating Description: Child presents with a moderate level of trauma-related symptoms. Symptoms can vary widely and may include sleeping or eating disturbances, regressive behavior, behavior problems or problems with attachment. Child may have features of one or more diagnoses and may meet full criteria for a specific DSM diagnosis including but not limited to diagnoses of Post-Traumatic Stress Disorder (PTSD) and Adjustment Disorder.

28. Traumatic Grief/Separation - *This rating describes the level of traumatic grief the youth is experiencing due to death or loss/separation from significant caregivers, siblings, or other significant figures.*

Rating Level: 0

Selected Rating Description: There is no evidence that the child is experiencing traumatic grief reactions or separation from the loss of significant caregivers. Either the child has not experienced a traumatic loss (e.g., death of a loved one) or the child has adjusted well to separation.

29. Reexperiencing - *These symptoms consist of intrusive memories or reminders of traumatic events, including nightmares, flashbacks, intense reliving of the events, and repetitive play with themes of specific traumatic experiences. These symptoms are part of the DSM criteria for PTSD.*

Rating Level: 0

Selected Rating Description: This rating is given to a child with no evidence of intrusive symptoms.

30. Hyperarousal - *These symptoms include difficulty falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, hypervigilance and/or exaggerated startle response. Children may also commonly manifest physical symptoms such as stomach-aches and headaches. These symptoms are part of the DSM criteria for PTSD.*

Rating Level: 2

Selected Rating Description: This rating is given to a child with moderate symptoms of hyperarousal or physiological reactivity associated with the traumatic event(s). The child may exhibit one significant symptom or a combination of two or more of the following symptoms: difficulty falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, hypervigilance and/or exaggerated startle response. Children who commonly manifest distress-related physical symptoms such as stomach-aches and headaches would be rated here. Symptoms are distressing for the child and/or caregiver(s) and negatively impact day-to-day functioning.

31. Avoidance/Flight - *These symptoms include efforts to avoid stimuli associated with traumatic experiences. These symptoms are part of the DSM criteria for PTSD.*

Rating Level: 0

Selected Rating Description: This rating is given to a child with no evidence of avoidance symptoms

32. Numbing - *These symptoms include numbing responses that are part of the DSM criteria for PTSD. These responses were not present before the trauma.*

Rating Level: 0

Selected Rating Description: This rating is given to a child with no evidence of numbing responses.

33. Dissociation - Symptoms included in this dimension are daydreaming, spacing or blanking out, forgetfulness, fragmentation, detachment, and rapid changes in personality often associated with traumatic experiences. This dimension may be used to rate dissociative disorders (e.g., Dissociative Disorder NOS, Dissociative Identity Disorder) but can also exist when other diagnoses are primary (e.g., PTSD, depression).

Rating Level: 0

Selected Rating Description: This rating is given to a child with no evidence of dissociation.

34. Affect Dysregulation And/Or Physiological Dysregulation - These symptoms are characterized by difficulties with arousal regulation. This can include difficulties modulating or expressing emotions and energy states such as emotional outbursts or marked shifts in emotions, overly constricted emotional responses, and intense emotional responses, and/or evidence of constricted, hyper-aroused, or quickly fluctuating energy level. The child may demonstrate such difficulties with a single type or a wide range of emotions and energy states. This can also include difficulties with regulation of body functions, including disturbances in sleeping, eating, and elimination; over-reactivity or under-reactivity to touch and sounds; and physical or somatic complaints. This can also include difficulties with describing emotional or bodily states. The child's behavior likely reflects their difficulty with affective and physiological regulation, especially for younger children. This can be demonstrated as excessive and chronic silly behavior, excessive body movements, difficulties regulating sleep/wake cycle, and inability to fully engage in activities. NOTE: This item should be rated in the context of what is normative for a child's age/developmental stage.

Rating Level: 2

Selected Rating Description: This rating is given to a child with some minor and occasional difficulties with affect/physiological regulation. This child could have some difficulty tolerating intense emotions and become somewhat jumpy or irritable in response to emotionally charged stimuli, or more watchful or hypervigilant in general or have some difficulties with regulating body functions (e.g., sleeping, eating or elimination). This child may also have some difficulty sustaining involvement in activities for any length of time or have some physical or somatic complaints.

Document presenting behaviors, actions, or other conditions that support the above findings:

Resource parent reports Brody is anxious throughout the day, particularly around naps and before bed. He seeks constant attention and nurturing from resource parent.

Well Being Domain

Life Domain Functioning 0-5 Years Old

These ratings describe how children and adolescents are doing in their various environments or life domains. The domains were identified from the children's research literature on wraparound philosophy. Functioning well in all life domains is the goal of a lifetime developmental framework.

35. Family - Family ideally should be defined by the child; however, in the absence of this knowledge, consider the definition of family to be biological and adoptive relatives. Is the family (as defined by the

child) functioning well together? The child's lack of contact with biological or adoptive family, regardless of reason, should also be rated here.

Rating Level: 1

Selected Rating Description: Child is doing adequately in relationships with family members although mild problems may exist.

36. Living Situation - *This item refers to how the child is functioning in his/her current living arrangement, which could be with a relative or in a foster home.*

Rating Level: 0

Selected Rating Description: No evidence of problems in current living situation.

37. Preschool/Child Care Behavior - *This item rates the behavior of the child or youth in school or school-like settings. A rating of 3 would indicate a child who is still having problems after special efforts have been made.*

Rating Level: 0

Selected Rating Description: No evidence of problems with functioning in current preschool or daycare environment or N/A.

38. Preschool/Child Care Achievement - *This item rates the child's ability to learn new concepts in school or school-like setting. Children under 3 will not be rated here.*

Rating Level: 0

Selected Rating Description: No evidence of a problem with learning in current preschool or daycare setting.

39. Social Functioning - *This item refers to the child's social functioning from a developmental perspective.*

Rating Level: 0

Selected Rating Description: No evidence of problems in social functioning.

40. Recreation/Play - *This item is intended to rate the degree to which the child engages in play. The child's interest in and ability to sustain play should be considered here.*

Rating Level: 0

Selected Rating Description: No evidence that infant or child has problems with recreation or play.

41. Developmental - *This rating describes the child's development as compared to standard developmental milestones, as well as the child's cognitive/intellectual functioning, including attention span, persistence, and distractibility.*

Rating Level: 2

Selected Rating Description: There is evidence of a moderate developmental disorder, including Autism Spectrum Disorder, FAE/FAS, Down Syndrome or another developmental delay.

42. Sensory - *This rating describes the child's ability to use all senses, including vision, hearing, smell, touch and kinesthetic (the ability to feel movements of the limbs and body). Include any processing issues in relation to sensory issues in this rating.*

Rating Level: 0

Selected Rating Description: No evidence of sensory problems.

43. Self Care - *This item rates the child's ability to complete developmentally appropriate self care behaviors, including self-feeding, washing hands, putting away toys, toilet training and dressing him/herself.*

Rating Level: 0

Selected Rating Description: No evidence of problems with self care.

44. Motor - *This rating describes the child's fine (e.g., hand grasping and manipulation) and gross (e.g., sitting, standing, walking) motor functioning.*

Rating Level: 2

Selected Rating Description: Child has moderate fine or gross motor deficits.

45. Communication - *This rating describes the child's ability to communicate through any medium including all spontaneous vocalizations and articulations. In this item, it is important to look at each aspect of communication individually, including both expressive and receptive language skills.*

Rating Level: 1

Selected Rating Description: Child has mild problems with receptive or expressive communication.

46. Sleep - *The child must be 12 months of age or older to rate this item. This item rates any disruption in sleep regardless of the cause including problems with going to bed, staying asleep or waking up early.*

Rating Level: 2

Selected Rating Description: Child is having moderate problems with sleep.

47. Medical - *This item refers to the child's physical health status.*

Rating Level: 0

Selected Rating Description: No evidence of medical problems.

48. Physical - This item is used to identify physical limitations, including chronic conditions, that entail impairment in eating, breathing, vision, hearing, mobility, or other functions.

Rating Level: 0

Selected Rating Description: No evidence of physical limitations.

Document presenting behaviors, actions, or other conditions that support the above findings:

Brody struggles with sleep onset but once asleep he sleeps. He takes 2 naps during the day and the first nap is the most difficult for him to fall asleep. He reportedly has delays and is not walking. He also has not said his first word.

Well Being Domain

Acculturation 0-5 Years Old

All children are members of some identifiable cultural group. These ratings describe possible problems that children or adolescents may experience with the relationship between their cultural membership and the predominant culture in which they live.

49. Language - This item includes both spoken and sign language. This item covers any language-related need a family might have that affects its participation in services.

Rating Level: 0

Selected Rating Description: Child and family have no problems communicating in English and do not require the assistance of a translator.

50. Cultural Identity - Cultural identity refers to the child's view of him/herself or the family's view of the child, as belonging to a specific cultural group. This cultural group may be defined by a number of factors including race, religion, ethnicity, geography or lifestyle.

Rating Level: 0

Selected Rating Description: Child has clear and consistent cultural identity and is connected to others who share his/her cultural Identity.

51. Culture Events and Activities - Cultural events are activities and traditions that are culturally specific including the celebration of holidays such as Kwanza, Cinco de Mayo, etc. Activities also may include daily activities that are culturally specific (e.g. praying toward Mecca at specific times, eating a specific diet, access to media). Activities also include being able to speak one's primary language with others.

Rating Level: 0

Selected Rating Description: Child is consistently able to practice activities consistent with his/her cultural identity.

52. Culture Stress - Culture stress refers to experiences and feelings of discomfort and/or distress arising from friction (real or perceived) between an individual's own cultural identity and the predominant culture in which he/she lives.

Rating Level: 0

Selected Rating Description: No evidence of stress between child's cultural identity and current living situation.

Document presenting behaviors, actions, or other conditions that support the above findings:

No cultural issues at this time.

Well Being Domain

Child Behavioral/Emotional Needs 0-5 Years Old

These ratings identify the behavioral health needs of the child or adolescent. While the CANS is not a diagnostic tool, it is designed to be consistent with diagnostic communication. In DSM-IV a diagnosis is defined by a set of symptoms that is associated with either dysfunction or distress. This definition is consistent with the ratings of '2' or '3' as defined by the action levels below:

53. Attachment - This item should be rated within the context of the child's significant parental or caregiver relationships. This item rates child's ability to seek/accept help, accept nurturance, explore their environment and separate from caregiver. A child who meets the criteria for a DSM diagnosis of Reactive Attachment Disorder would be rated here.

Rating Level: 1

Selected Rating Description: There are mild problems with attachment. Child may have a history of or be suspected of having attachment issues.

54. Impulsivity/Hyperactivity - The child should be 3 years of age or older to rate this item. This item rates a child's level of hyperactivity and/or impulsiveness (i.e. loss of control of behaviors). Symptoms that meet the criteria for Attention Deficit/Hyperactivity Disorder (ADHD) would be rated here.

Rating Level: 0

Selected Rating Description: No evidence of hyperactivity or impulsivity problems.

55. Temperament - This rating describes the child's general mood state and ability to be soothed.

Rating Level: 1

Selected Rating Description: This level indicates a child with some mild problems being calmed, soothed, or distracted when angry or upset. Child may have occasional episodes of extended crying or tantrums.

56. Failure to Thrive - Symptoms of failure to thrive focus on normal physical development such as growth and weight gain.

Rating Level: 2

Selected Rating Description: The child has moderate delays in physical development that could be described as failure to thrive (e.g., is below the 10th percentile in terms of height or weight).

57. Feeding/Elimination - *This item rates all dimensions of eating and/or elimination, including sensory issues related to food. Pica would also be rated here.*

Rating Level: 1

Selected Rating Description: Child has mild problems with feeding and/or elimination.

58. Depression - *This item rates symptoms of Depression which may include irritability, depressed mood, changes in eating or sleeping pattern and social withdrawal. Rate a child who meets the DSM criteria for a depressive disorder here.*

Rating Level: 0

Selected Rating Description: No evidence of problems with depression.

59. Anxiety - *This item describes the child's level of fearfulness, worrying or other characteristics of anxiety.*

Rating Level: 3

Selected Rating Description: Severe level of anxiety that is disabling for the child.

60. Atypical Behaviors - *Behaviors may include but are not limited to mouthing after 1 year, head banging, smelling objects, spinning, twirling, hand flapping, finger-flicking, rocking, toe walking, staring at lights, or repetitive and bizarre verbalizations.*

Rating Level: 0

Selected Rating Description: No evidence of atypical behaviors in the infant/child.

61. Service Permanence - *This is intended to describe the stability of the service providers who have worked with the child and/or family. Service providers include: caseworker, therapist, medical provider, foster parent, and school.*

Rating Level: 0

Selected Rating Description: Service providers have been consistent for more than the past two years. This level is also used to rate a child/family who is initiating services for the first time or re-initiating services after an absence from services of at least one year.

Document presenting behaviors, actions, or other conditions that support the above findings:

Brody experiences separation anxiety with his resource parent. He needs to be spoon fed because he will stuff food in his mouth and choke. He appears to be gaining weight.

Conclusion

Describe the basic supervision needs in order to promote the safety and well being of the child. List any recommended services which could be used to address the identified needs:

Based on the information provided, Brody seems to be in good care. He would benefit from minimized disruptions to this placement. Continue to follow doctor recommendations for nutrition and feeding schedule. Closely monitor his weight to ensure he continues to grow. Focus on providing comfort and reassurance to Brody through attention, consistent routines, offering familiar objects, and responding calmly to distress while gradually exposing Brody to new situations in a supportive manner. Work on developing a consistent, calming bedtime routine. Provide a comfort object, gradually increase separation time, and create a secure sleep environment with soft lighting and soothing sounds. Brody would benefit from early intervention services to address his motor delays and possible speech delays.

Enhanced Supervision Level: 1

Child and Adolescent Needs and Strengths (CANS) **Supervision Plan**

For children ages 0-5

Child's Information:

Name: Brody Jones Case number: 000000
Level of Care: Level 1

The CANS Supervision Plan is designed to assess the unique caregiving responsibilities required to support the safety and well-being needs of a specific child over time. It is anticipated that with sufficient supports, a child or youth will stabilize and will be able to maintain stability with a lesser level of intensive care. Enhanced rates of caregiver reimbursement connected to increased caregiver responsibilities are designed to be temporary in nature and decrease over time as the child stabilizes.

The below items on the CANS assessment with a score of 2 or higher must be addressed in the supervision plan.

Supervision needs of the child:

Item number / CANS element	Score	Interventions and supervision actions (Consider proactive use of space, routine, structure of the environment, positive reinforcement, de-escalation techniques, clear and attainable expectations, and collaboration of solving conflictual situations, crisis supports, etc.).
3. Substance exposure	1	
5. Self-harm	1	
6. Aggression	0	
7. Sexual behavior	0	
27. Adjustment to trauma	2	Resource parent will have a daily routine for Brody to promote familiarity. Resource parent will provide comforting and assurance techniques such as reading or singing lullaby at bedtime, keeping a night light on at night, soothing music or white noise in background such as rain or ocean sounds to help Brody fall asleep. Resource parent will use words and touch and extra one-on-one time to help Brody adjust to new environment.
36. Living situation	0	
37. Pre-school/Childcare behavior	0	
39. Social functioning	0	
40. Recreation/play	0	
41. Developmental	2	Resource parent will encourage Brody's development by being nurturing, responsive and caring. Resource parent will provide a positive, stimulating, and interactive

		environment, encouraging Brody to move and play. Resource parent will follow all OT recommendations including performing daily exercises with Brody to increase his muscle strength and balance. Referral to CDRC for further evaluation.
45. Communication	1	
46. Sleep	2	Brody has anxiety around bedtime and being alone. RP will work on establishing a consistent bedtime routine for Brody.
53. Attachment	1	
54. ADHD	0	
56. Failure to thrive	2	Resource parent will follow doctor recommended feeding schedule for Brody involving frequent, small meals throughout the day with high-calorie, nutrient-dense foods, including concentrated infant formula.
55. Temperament	1	
57. Feeding/Elimination	1	

Additional notes (if needed):

ODHS responsibilities and supports (in-home supports, community services, other referrals):

Per recommendation by Brody's PCP, Brody will be referred to CDRC for further evaluation of his motor and communication delays.

ODHS will maintain communication with resource parent to help address concerns or identify resources that would assist resource parent and Brody.

Plan will be reviewed every 60 days.

Resource parent training recommendations to meet the child's needs:

When will this plan be reviewed? (Must be at least every 60 days) _____

Signatures

Resource Parent

Date

Caseworker

Date

Supervisor

Date

RN CANS screener *(if applicable)*

Date

Verification of American Indian/ Alaska Native Membership or Enrollment



Case name: Lena Clark

Case number: 000000

Assigned caseworker: Lisa Dole

The Department of Human Services will use the following information to determine if your child may be an Indian child as defined by the Indian Child Welfare Act. This information may be provided to a number of various federally recognized tribes to inquire as to tribal membership or enrollment status of your child. Please answer the questions to the best of your knowledge. This information is confidential except the information needed to verify tribal membership or enrollment status.

This form is to be completed regarding the biological parent of the child. A separate form must be completed for each biological parent.

Section A

Biological parent of the child (full name): Brandon Jones

Maiden, married, former or alias names: _____

Date of birth: 3/27/2005 Relationship to the child (check one): ☐ Mother ☒ Father

Address: 0 No Road Phone number: 000-000-0000

City, state, ZIP: Sublimity, OR 00000

Ethnicity:

☐ Hispanic/Latino ☒ Not Hispanic/Latino ☐ Unknown ☐ Decline to answer

Race (check all that apply):

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or Pacific Islander ☒ White ☐ Unknown ☐ Decline to answer

Are you a member of a federally recognized Indian tribe or eligible for enrollment/membership in a federally recognized Indian tribe?

☐ Yes Tribe(s): _____
Enrollment number: _____

If yes, complete all questions and sections below, including the family history chart.

☒ **No** Complete all questions and sections below, including the family history chart.

Do you have any American Indian or Alaska Native ancestry?

☐ Yes Tribe(s): _____

☒ **No** ☐ I don't know

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

☐ Yes Who and where? _____

☒ **No**

Are you or any of your relatives enrolled in an Alaska Native corporation?

☐ Yes Who and where? _____

☒ **No**

Have any of your children ever been a ward of tribal court?

☐ Yes Which children and which tribal court? _____

☒ **No**

Section B**Complete below for each of your children**

Name of child (<i>First/middle/last</i>) Brody Jones	Date of birth 9/27/2023	Place of birth Salem, OR
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input checked="" type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input checked="" type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		

Section C

Biological parent signature: <u>Brandon Jones</u>	Date: <u>10/1/2024</u>
Reason the biological parent did not sign this form (check one):	
<input type="checkbox"/> Deceased <input type="checkbox"/> Incarcerated <input type="checkbox"/> Out of county <input type="checkbox"/> Out of state <input type="checkbox"/> Parent refusal	
<input type="checkbox"/> Treatment <input type="checkbox"/> Unable to locate <input type="checkbox"/> Other:	

Who provided the information to complete this form, if not the biological parent?

Please provide identifying information so we may contact you if necessary.

Print name: _____ Relationship to child: _____

Address: _____ Phone number: _____

How is the above individual familiar with the parent's ancestry?

Signature: _____ Date: _____

Documented by (*department staff*): _____ Date: _____

Form completed: ☐ In person ☐ Via telephone ☐ Other: _____

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Instructions: Provide the following: Name (include maiden names), date of birth (DOB), place of birth (POB), date of death (DOD), place of death (POD), Native American heritage and tribe(s) or clan(s).

PRINT LEGIBLY IN DARK INK

Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
	Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
Biological parent <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
	Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____

Grandfather

☐ Adopted

Name _____

DOB: _____

POB: _____

DOD: _____

POD: _____

Tribe: _____

Great Grandfather

☐ Adopted

Name _____

DOB: _____

POB: _____

DOD: _____

POD: _____

Tribe: _____

Great Great Grandmother

☐ Adopted

Name _____

DOB: _____

POB: _____

DOD: _____

POD: _____

Tribe: _____

Great Great Grandfather

☐ Adopted

Name _____

DOB: _____

POB: _____

DOD: _____

POD: _____

Tribe: _____

Verification of American Indian/ Alaska Native Membership or Enrollment



Case name: Lena Clark

Case number: 000000

Assigned caseworker: Sue Smith

The Department of Human Services will use the following information to determine if your child may be an Indian child as defined by the Indian Child Welfare Act. This information may be provided to a number of various federally recognized tribes to inquire as to tribal membership or enrollment status of your child. Please answer the questions to the best of your knowledge. This information is confidential except the information needed to verify tribal membership or enrollment status.

This form is to be completed regarding the biological parent of the child. A separate form must be completed for each biological parent.

Section A

Biological parent of the child (full name): Lena Clark

Maiden, married, former or alias names: _____

Date of birth: 1/25/2005 Relationship to the child (check one): ☒ Mother ☐ Father

Address: 000 Main Street Phone number: 000-000-0000

City, state, ZIP: Salem, OR 00000

Ethnicity:

☐ Hispanic/Latino ☒ Not Hispanic/Latino ☐ Unknown ☐ Decline to answer

Race (check all that apply):

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or Pacific Islander ☒ White ☐ Unknown ☐ Decline to answer

Are you a member of a federally recognized Indian tribe or eligible for enrollment/membership in a federally recognized Indian tribe?

☐ Yes Tribe(s): _____
Enrollment number: _____

If yes, complete all questions and sections below, including the family history chart.

☒ **No** Complete all questions and sections below, including the family history chart.

Do you have any American Indian or Alaska Native ancestry?

☐ Yes Tribe(s): _____

☒ **No** ☐ I don't know

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

☐ Yes Who and where? _____

☒ **No**

Are you or any of your relatives enrolled in an Alaska Native corporation?

☐ Yes Who and where? _____

☒ **No**

Have any of your children ever been a ward of tribal court?

☐ Yes Which children and which tribal court? _____

☒ **No**

Section B**Complete below for each of your children**

Name of child (<i>First/middle/last</i>) Brody Jones	Date of birth 9/27/2023	Place of birth Salem, OR
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input checked="" type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input checked="" type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Name of child (<i>First/middle/last</i>)	Date of birth	Place of birth
Tribe or Native American Ancestry:		Enrollment number:
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		
Race (check all that apply): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Decline to answer		

Section C

Biological parent signature: <u>Lena Clark</u>	Date: <u>8/30/2024</u>
Reason the biological parent did not sign this form (check one):	
<input type="checkbox"/> Deceased <input type="checkbox"/> Incarcerated <input type="checkbox"/> Out of county <input type="checkbox"/> Out of state <input type="checkbox"/> Parent refusal	
<input type="checkbox"/> Treatment <input type="checkbox"/> Unable to locate <input type="checkbox"/> Other:	

Who provided the information to complete this form, if not the biological parent?

Please provide identifying information so we may contact you if necessary.

Print name: _____ Relationship to child: _____

Address: _____ Phone number: _____

How is the above individual familiar with the parent's ancestry?

Signature: _____ Date: _____

Documented by (*department staff*): _____ Date: _____

Form completed: ☐ In person ☐ Via telephone ☐ Other: _____

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dhs-oha.publicationrequest@state.or.us. We accept all relay calls or you can dial 711.

Instructions: Provide the following: Name (include maiden names), date of birth (DOB), place of birth (POB), date of death (DOD), place of death (POD), Native American heritage and tribe(s) or clan(s).

Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	POB: _____ DOD: _____ POD: _____ Tribe: _____	POB: _____ DOD: _____ POD: _____ Tribe: _____	POB: _____ DOD: _____ POD: _____ Tribe: _____
	Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
Biological parent <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____
	Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Grandfather <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____	Great Great Grandmother <input type="checkbox"/> Adopted Name _____ DOB: _____ POB: _____ DOD: _____ POD: _____ Tribe: _____

Father(s) Questionnaire

Case I.D.: 000000 Phone no.: 000-000-0000

Worker name: Sue Smith

Name of Child: Brody Jones

Instructions: Complete one form for each child. This form must be completed with the mother within 30 days of the child's placement (Policy 1-A.4.3).

Otherwise, complete as soon as mother becomes available. Mother must sign on page 2. Do not attempt to complete with Father, other relatives or from information in the case record, etc.

Section A

1. Were you married at the time you became pregnant with this child? ☐ Yes ☒ No

If the answer to question 1 is "No," go on to Section B.

If yes, whom?

When? (date) _____ Where? (city, state) _____

2. Were you living with this man at the time you became pregnant? ☐ Yes ☐ No

3. Do you believe he is the biological father of this child? ☐ Yes ☐ No

If all three answers are "Yes," stop here and have form signed on page 2. Note: The man identified above is the child's LEGAL father.

If either question 2 or 3 is answered "No," please go on to Section C.

Section B

1. Did you get married to anyone between the time you became pregnant and the time you gave birth to this child? ☐ Yes ☒ No

If answer to question 1 is "No," please go on to Section D.

If yes, whom?

When? (date) _____ Where? (city, state) _____

2. Do you believe he is the biological father of this child? ☐ Yes ☐ No

If answers to 1 and 2 are "Yes," stop here and have mother sign form. Note: The man identified above is the child's LEGAL father.

If answer to question 2 is "No," please proceed to Section C.

Section C

1. Did your husband ever live with the child? ☐ Yes ☐ No If "Yes," please explain:

2. Did your husband ever give you money or gifts for the child? ☐ Yes ☐ No

If "Yes," please explain: _____

3. Did you ever refuse money or gifts from your husband for this child? ☐ Yes ☐ No

If "Yes," please explain: _____

4. Are you divorced from this man? ☐ Yes ☐ No

When? (date) _____ Where? (city, state) _____

5. Has your husband ever claimed he was the father of this child? ☐ Yes ☐ No

6. Has any court ever decided that your husband is the father of this child? ☐ Yes ☐ No

Continue to next page

Section D

1. Please check on item and complete where appropriate.

☒ a. I believe the biological father of this child is: Brandon Jones 3/27/2005
Name Birth Date

If the mother indicated there is more than one possible biological father, skip to 1-c and enter the answer there.

- ☐ b. I refuse to identify the biological father of this child; or
☐ c. I do not know the identity of the biological father of this child because:

If "c" is checked, go directly to question #9 below.

2. Did he know you were pregnant? ☒ Yes ☐ No
3. Did he know of the birth of the child? ☒ Yes ☐ No
4. Has he ever seen the child? ☒ Yes ☐ No

If "Yes," approximately how many times? Many times

When did he last see the child (*approximate date*): 8/30/2024

5. Has he ever lived with the child? ☒ Yes ☐ No

If "Yes," what period of time? Off and on since Brody was born

6. Has he ever given you money or gifts for the child? ☒ Yes ☐ No

If "Yes," please explain: Provides money for Brody's care when he can

7. Have you ever refused money or gifts for the child? ☐ Yes ☒ No

If "Yes," please explain: _____

8. Have you or the biological father ever established LEGAL PATERNITY of the child?

☐ Yes ☐ No ☐ Unknown

If "Yes," how? (*please check on only*)

- ☐ Marriage to the mother ☐ Along with the mother, filed a "Joint Paternity Affidavit"
☐ Division of Child Support (DCS, formerly SED) filed paternity action.
☐ Juvenile Court issued a "Paternity Order" ☐ Other: Please describe: _____

Name of county and state where any of the above actions occurred: _____

9. Have you ever received public assistance for the child? ☒ Yes ☐ No

If "Yes," Salem

Marion

Oregon

City

County

State

Section E

1. Does the biological father claim any Indian heritage? ☐ Yes ☒ No ☐ Unknown

If "Yes," please complete the following:

a. Name of tribe: _____

- b. Has he told you or others that he is the father of the child? ☐ Yes ☐ No ☐ Unknown

Verification/signature

I am the mother of (name of child): Brody Jones I have read and/or have had read and explained to me the questions on this form. The information I have supplied is true and accurate to the best of my knowledge.

Lena Clark

8/30/2024

Sue Smith

8/30/2024

Mother's signature

Date

Signature witness

Date

Intake Nursing Assessment



Child's name: Brody Jones	Case number/person number: 000000/0000000
Date of birth: 9/27/2023	Date of assessment: 9/9/2024
Caseworker/phone number: Sue Smith/000-000-0000	Branch: Marion
Child's primary care provider: Dr. Coleman	Phone number: 000-000-0000
Date of contact with foster parent: 9/7/2024	

Known medical history/diagnoses
No known dx. <input type="checkbox"/> Fetal exposure to drugs or alcohol (age 0-1 only)

Current medications	Allergies to medications <input checked="" type="checkbox"/> KNDA
None noted	
<input type="checkbox"/> Medication log provided <input type="checkbox"/> Medication log reviewed <input type="checkbox"/> Not applicable	

General appearance	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other (see notes)
Infant (0-24 months)	
Foster parent-infant, infant-foster parent interaction	
Body symmetry, spontaneous position and movement	Even body symmetry
Symmetry and positioning of facial features	Symmetrical facial features
Strong cry	Yes
General health	
Fontanels	<input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed
Child (2-12 years old)	
Foster parent-child, child-foster parent interaction	
Mood and affect	
Gross and fine motor skills	
Appropriate speech	
Developmental milestones	
General health	
Adolescent and young adult	
Mood and affect	
Personal hygiene	
Communication	
General health	

Vital signs

Temperature	97.8
Respirations	32
Blood pressure	Def
Heart rate	110
Capillary refill	Brisk
Height	27.5 in
Weight	14.9 lbs
Nutrition	
Food allergies	None
Appetite	Child has a good appetite.
Special diet	No
Appropriate weight for age	No
Feeding issues	No

Physical assessment	
Neurological	
Pupils	Even and reactive
Grip	Appears even
Level of consciousness	Awake and alert
Gait and balance	Child does not yet walk or pull himself up to a standing position.
Sleep pattern	Caregiver reports difficulty putting child down for naps and bedtime. Child goes to bed around 9:30 PM and gets up around 7:30-8 AM. Child usually takes two naps.
Respiratory	
Respiratory effort	Even and unlabored
Breathing sounds	Clear throughout
Cardiovascular	
Skin	Pink, warm and dry
Heart sounds	Strong and regular
Radial pulses	Strong and even
Gastrointestinal	
Shape	Flat
Distention	Non-distended
Bowel sounds	BS positive all 4 quads
Elimination (<i>frequency, consistency, color</i>)	Child has been having some constipation with hard stools. RP gave child some prunes and this has helped.
Urinary	
Urination (<i>frequency, color</i>)	Caregiver reports that child has a wet diaper around every 3-4 hours. Normal clear yellow urine.
Bed wetting	
Circumcised (<i>male</i>)	
Reproductive health for adolescent and young adults <input checked="" type="checkbox"/> Not applicable	
Has menses begun (<i>for girls</i>)	
Characteristics of menses	
Sexually active	
Pregnant	
Musculoskeletal	
Ambulation	Child is not yet ambulating
Posture	Normal
Pain/swelling	None noted
Skin	
Color	Pink, warm and dry

Bruising/wounds/skin breaks/rash	Caregiver reports that child has a small diaper rash and reports using some barrier cream.
Ear/nose/throat (ENT)	
Lesions/trauma	None noted
Secretions	None noted
Ear canal	WNL

Additional nursing assessment notes
Sweet little boy who presents much younger than his chronological age.

Adaptive devices and medical equipment (glasses, hearing aid, dental gear, nebulizer, etc.)
<input type="checkbox"/> In child's possession

Home environment
<input checked="" type="checkbox"/> Condition of the home: Home appears clean and organized. <input checked="" type="checkbox"/> Adequate sleeping space: Child currently sleeps in a crib in resource parents' room. <input checked="" type="checkbox"/> Developmentally appropriate toys, games, books: There appears to be lots of toys, games and books available in the home. <input checked="" type="checkbox"/> Nutritious food available: Resource parent denies any difficulties accessing nutritious food. <input type="checkbox"/> Safety concerns: <input type="checkbox"/> Other:

Nursing interventions and recommendations
Caseworker <input checked="" type="checkbox"/> Refer to Early Intervention (0–3 y/o) <input checked="" type="checkbox"/> Refer to WIC for nutritional counseling and support (0–5 y/o) <input checked="" type="checkbox"/> Schedule CANS screening and mental health assessment <input type="checkbox"/> Other:
Foster parent <input checked="" type="checkbox"/> Make appointment with healthcare provider as soon as possible <input checked="" type="checkbox"/> Make appointment with dental health provider as soon as possible (<i>age 1 and older</i>) <input checked="" type="checkbox"/> Review information in health and wellness packet provided <input type="checkbox"/> Other:
Additional intervention and recommendations
Nurse recommends Early Intervention and WIC referral. Nurse provides teaching on prevention and non medication treatment of constipation.
Recommended follow-up: <input type="checkbox"/> None <input type="checkbox"/> Phone call <input type="checkbox"/> Visit Follow-up date:
Personal care assessment completed: <input type="checkbox"/>

Assessment completed by:	Date
Savannah Smithsonian	9/9/2024

**Parent Notification for Early Intervention or
Early Childhood Special Education Evaluation Referral**

Dear Ms. Clark

Your child, Brody Jones

has been referred for an early intervention or early childhood special education evaluation.

A developmental screening indicates that your child has the following difficulties:

- Muscle strength
- Motor skills
- Communication

You will be contacted about this referral. If you would like further information, please call me.

Sincerely,

Nancy Merigold
EI Specialist
000-000-0000

cc. Lisa Dole, ODHS

**STATEMENT OF ELIGIBILITY FOR SPECIAL EDUCATION
DEVELOPMENTAL DELAY
(EARLY INTERVENTION)**

Student Name	DOB	SSID
Brody Jones	9/27/2023	000000
EI/ECSE Program	County	School District
Willamette ESD	Marion	

Comprehensive Evaluation

If a child is suspected of having a developmental delay, a comprehensive evaluation must be conducted for early intervention services including the following (attach evaluation report that describes and explains the results of the evaluation conducted):

- At least one norm-referenced, standardized test addressing the child's level of functioning in each of the following areas: cognitive development, physical development, communication development, social or emotional development and adaptive development:

Assessment	Examiner	Date Conducted	Date Reviewed
Bayley-4	Nancy Merigold	11/3/2024	11/18/2024

- At least one additional procedure to confirm the child's functioning in each area of suspected delay:

Assessment	Examiner	Date Conducted	Date Reviewed
Vineland-3	Sherry Sanders	11/3/2024	11/18/2024

- At least one 20-minute observation of the child:

Assessment	Examiner	Date Conducted	Date Reviewed
Observation	Nancy Merigold	11/3/2024	11/18/2024

- Review of previous testing, medical data and parent reports:

Assessment/Data/Report	Date Conducted	Date Reviewed
ASQ-3	10/28/2024	11/18/2024
CANS	10/18/2024	11/18/2024
Medical Records	11/3/2024	11/18/2024

- Any other evaluative information as necessary to determine eligibility:

Assessment/Data	Examiner	Date Conducted	Date Reviewed

Eligibility Criteria

To be eligible as a child with a developmental delay, the child must have an impairment of 2 standard deviations or more below the mean in one or more of the developmental areas or 1.5 standard deviations below the mean in two or more of the developmental areas. To be eligible for early interventions services, the child must meet one of the following criteria:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	The child is under three years of age and has a developmental delay of 2 or more standard deviations below the mean in one or more of the following developmental areas:		
		<input type="checkbox"/> Communication	<input type="checkbox"/> Adaptive	<input type="checkbox"/> Physical
		<input type="checkbox"/> Social/Emotional	<input type="checkbox"/> Cognitive	
OR				
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	The child is under three years of age and has a developmental delay of 1.5 or more standard deviations below the mean in two or more of the following developmental areas:		
		<input checked="" type="checkbox"/> Communication	<input type="checkbox"/> Adaptive	<input checked="" type="checkbox"/> Physical
		<input type="checkbox"/> Social/Emotional	<input type="checkbox"/> Cognitive	

Eligibility Determination

The team has determined that:

The child has a developmental delay as defined in this rule;	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
By reason thereof, the child requires early intervention (OAR 581-015-2780) services.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

The team determined that this child:

☒ Does qualify for early intervention services with an eligibility of developmental delay.

☐ Does not qualify for early intervention services with an eligibility of developmental delay.

Signature	Title	Agree	Disagree
Nancy Merigold	EI Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sherry Sanders	EI Specialist	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sandra Winters	EI Supervisor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

☒ A copy of the evaluation report and the eligibility statement has been provided to the parent(s).

Family Engagement Meeting Notes

Meeting date: 10/6/2024	Meeting Facilitator: Andrea Timmons
Case name: Lena Clark	Case number: 000000
CPS caseworker and contact information: Sue Smith 000-000-0000 Sue.Smith@odhs.oregon.gov	Ongoing caseworker and contact information: Lisa Dole 000-000-0000 Lisa.Dole@odhs.oregon.gov
CPS supervisor and contact information: Eric Christianson 000-000-0000 Eric.Christianson@odhs.oregon.gov	Ongoing supervisor and contact information: Eric Christianson 000-000-0000 Eric.Christianson@odhs.oregon.gov

Attendance

Name and role	Name and role	Name and role
<input checked="" type="checkbox"/> Lena Clark, Mom	<input checked="" type="checkbox"/> Alyssa Mellon, Mom's Atty	<input checked="" type="checkbox"/> Susan Winthrope, CASA
<input checked="" type="checkbox"/> Brandon Jones, Dad	<input checked="" type="checkbox"/> Adam Fischer, Dad's Atty	<input checked="" type="checkbox"/> Eric Christianson, ODHS Supervisor
<input checked="" type="checkbox"/> Lisa Dole, ODHS Caseworker	<input checked="" type="checkbox"/> Allen Cassama, Child's Atty	<input checked="" type="checkbox"/> Andrea Timmons, Facilitator

Child/youth information

Child's name and age	Number of days in care	Number of days in home	Number of placements	Current type of placement
Brody Jones / 1	37		1	Non-Relative Family Foster Care

Ground rules and meeting agreements

Agreed to and created by the team:
<ul style="list-style-type: none"> Stay solution focused and avoid blaming or shaming One person speaks at a time and the facilitator may need to interrupt Take breaks as needed Privacy – Everything discussed during the meeting is private to the family. Be respectful with the information shared.

Parent information and update

Update from the parents then providers, discussion of strengths and progress:
<p>Lena: Mom shared that she feels like she let everyone down, especially Brody. She wants to be a good mom. Her goal is to keep going and never give up. She is willing to do whatever it takes to get Brody back.</p> <p>Brandon: Dad reports that he has been working a lot. He misses Brody and feels he could care for Brody if he was returned to him.</p>

CW gave parents the flyer for online parenting classes.

Safety planning

Discuss identified safety threats (if requested by parents), the current safety plan, safety service providers, and conditions for return

Current safety plan is the child lives with resource parents 24/7.
-Sees mom and dad separately once per week at ODHS office.

Parents ask what the options are to expand visits:

- CW discussed as they go along and ODHS can manage safety they can open up more visitation
- SSPs (safety service providers) would be needed to help supervise more visits
- SSPs need to pass a background check, CW will need to discuss the safety concerns with them
- SSPs will need to be able to keep kids safe and have boundaries with mom and dad
- Mom asks if her friend could supervise, CW will follow up

Father asks for a list of what he needs to do to get Brody back.

Andrea discussed the conditions for return:

1. Home-like setting - safe, stable and sustainable place for the family to stay.
2. Calm Home - adults to provide routine and behave in a predictable manner.
3. Able and Willing Parent - follow the safety plan and work with ODHS.
4. Safety Service Providers - supports for the family that can monitor the child's safety and inform DHS of concerns.

Andrea shared expected outcomes are what need to happen in order for ODHS to close the case:

- CW gave mom and dad a copy of their expected outcomes
- CW read the expected outcomes to mom and dad
- Dad has concerns about his work schedule making it difficult for him to enroll in the services CW has requested of him. He requested help signing up for parenting classes. Lisa will help him sign up.

Case planning

Adoption and Safe Families Act – Primary and concurrent case plans:

- The Adoption and Safe Families Act (ASFA) is a federal law that was created in 1997 to keep children from staying in foster care for long periods of time.
- For every case, both a primary and concurrent plan are identified. The primary plan is typically Return to Parent. The concurrent plan is a back-up plan, and ODHS is required to make efforts toward the concurrent plan throughout the case, even while working on the primary plan of reunification.
- A permanency hearing will be held no later than 14 months after a child is placed in foster care. During the permanency hearing, the judge will decide whether ODHS should continue working toward reunification or if the focus should change to the concurrent/backup plan. The judge will make their decision based on information presented by all legal parties during the permanency hearing.
- Between now and the permanency hearing, there will be frequent communication between the parent, ODHS and the parent's attorney. Well before the permanency hearing the parent should know what ODHS's recommendation will be to the judge.

Family contact, child updates, expected outcomes, and recommended or court ordered services/referral needs:

Father shared visits are going good.

Mom wants to know when Brody's medical appointments are. She wants to be at all medical appointments.

CW shared that she will notify mom of all medical appointments and work with her if she wants to attend. Usually resource parents take children to medical appointments. If the mom wants to attend, the CW will need to take Brody to the appointment.

Allen shared he visited Brody at the resource home. Brody appears comfortable with the resource parent.

CASA reports she also visited the resource home. Brody is adorable and seems to be settling into a routine.

-CASA is a court appointed special advocate

-They are the child's voice in court

-Can be an advocate for parents also

-They are volunteers

To dos

Assign date	Activity	Person assigned	Outcome	Due date
10/6/2024	Sign up for online parenting classes	Lena Clark		
10/6/2024	Sign up for online parenting classes	Brandon Jones & Lisa Dole		
10/6/2024	Notify parents of Brody's medical appts	Lisa Dole		
10/6/2024	Determine if Lena's friend can be an SSP	Lisa Dole		

Upcoming dates

Next Family Meeting date, time and location:	
Next court date, time and location:	11/1/2024, 9 AM, Trial, Judge Nelson's Courtroom, Marion County Circuit Court.
Other important dates:	

Case ID: 000000
Primary Worker:
 Sue Smith
Contact: 000-000-0000
 000 State Street
 Salem, OR 00000

ASSESSMENT SUMMARY

Lena Clark (000000)

Assessment Type: CPS	Report Category: Familial
Assessment Date: 8/28/2024, 4:59 PM	Allegations: Neglect
Status: Completed	Assigned Worker: Smith, Sue
Response Time: Within 24 hours	Date/Time Initial Contact 8/29/2024, 4:59 PM Required By:

CONTACT INFORMATION

Case Name: Lena Clark	
Case Address: 000 Main Street Salem, OR 00000	CO: Country:
Phone: (000) 000-0000	Alt. Phone:
Primary Language: English	Worker Safety Concerns? <input type="checkbox"/>
Possible Refugee? <input type="checkbox"/>	Interpreter Needed? <input type="checkbox"/>

Additional Contact Information for Parent/Caregivers:

Parent/Caregiver	Primary Address	Phone	Email
Brandon Jones	0 No Road, Sublimity, OR 00000	(000) 000-0000	

ASSESSMENT PARTICIPANTS

Child Participant(s) in Assessment:

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Roles	Language
Brody Jones (000000)	M	9/27/2023	11 months	White		Child - Biological	AV, HM	English

Parent/Caregiver Participant(s) in Assessment:

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Roles	Language
Lena Clark (000000)	F	1/25/2005	19	White		Mother	AP, CN, HM, PR	English
Brandon Jones (000000)	M	3/27/2005	19	White		Father - Legal	AP, NM, PR	English

Other Participant(s) in Assessment:

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Roles	Language

KEY

Roles Description	
AP = Alleged Perpetrator	IC = Identified Child
AV = Alleged Victim	NM = Non-Household Member
CN = Case Name	OC = Other Child in Home
HM = Household member	PR = Parent / Parental Role

SCREENING ALLEGATIONS

Date	Alleged Victim	Alleged Perpetrator	AP Relationship to Victim	Abuse type	Fatality
8/28/2024	Brody Jones	Lena Clark	Mother	Neglect	<input type="checkbox"/>
8/28/2024	Brody Jones	Lena Clark	Mother	Threat of Harm	<input type="checkbox"/>
8/28/2024	Brody Jones	Brandon Jones	Father	Threat of Harm	<input type="checkbox"/>
Does the report allege a death by abuse, serious injury, or aggravated circumstances? <input type="checkbox"/>					

SCREENING REPORTS LINKED TO ASSESSMENT
Screening Information:

Screening Report ID: 000000	Screener: Alisha Jones
Report Type: CPS	Report Category: Familial
Date/Time Report Received: 8/28/2024	Provider ID:
Response Time: 8/29/2024	Allegations: Neglect, Threat of Harm
Police Report Number:	
Screening Decision Narrative: 24 hour response to Clark, Lena # 000000 Allegations of neglect and possible threat of harm to Brody (11 months) by his mother, Lena. Allegation of threat of harm to Brody by his father, Brandon Jones. Per reporter on 8/28/2024, they visited the home as part of their home health services to see Brody. During the visit they witnessed neglect to Brody by the mother. They also voiced concerns about the mother's mental health and/or cognitive functioning regarding her ability to understand and meet her child's needs. Additionally, the child's father was in the home during this visit and the father has a history of being domestically violent toward the mother and possible concerns of drug abuse in the presence of the child. These concerns meet criteria for Present Danger, as the family conditions appear to be out of control and significant, which if left unchecked, may result in severe harm to this vulnerable child. Cross report to Marion County Sheriff's office via email.	

REPORT NARRATIVE
Report Summary:

CHILD Brody Jones Gender: Male

DOB: 9/27/2023

Child Resides With: Mother

Address Information: 000 Main Street, Salem, OR 00000

Custody/Visitation: No information

OR-Kids: Legal Father is Brandon Jones

e-Courts: There is no custody agreement. The current parenting/visitation schedule or parent's living situations are unknown.

Location During the Next 24 Hours: Mother's address

PARENT/CAREGIVERS

MOTHER

Lena Clark

Gender: Female

DOB: 1/25/2005

Relationship to Other Participants: Legal mother to Brody is Lena. No other children listed.

Race: White

Preferred Language: English

Child Resides With: Mother

Address Information: 000 Main Street, Salem, 00000

FATHER

Brandon Jones

Gender: Male

DOB: 3/27/2005

Relationship to Other Participants: Legal father to Brody. No other children listed.

ORKIDS: Legal father to Brody.

Child Resides With: Mother

EXTENT OF ALLEGED ABUSE

Per reporter on 8/28/2024, they visited the home as part of their home health services to see Brody. During the visit they witnessed neglect to Brody by the mother. They also voiced concerns about the mother's mental health and/or cognitive functioning regarding her ability to understand and meet her child's needs. Additionally, the child's father was in the home during this visit and the father has a history of being domestically violent toward the mother and possible concerns of drug abuse in the presence of the child.

CIRCUMSTANCES OF ALLEGED ABUSE

Per reporter on 8/28/2024, they arrived at the mother's home around 12:00 pm and had to knock on the door for 10 minutes before the mother answered the door. They could hear Brody screaming the entire time they were knocking. When mother answered the door, she appeared "bleary eyed" and irritated. She invited the home health staff into the home.

Upon entry they noticed the home to be unkept but did not describe any noticeable safety concerns.

The mother went to get Brody out of a back bedroom. When she brought him to the living room his diaper was so full of urine that it was hanging to his knees. She proceeded to put him in a highchair, without first changing his overly full diaper, at which time the home health staff suggested she change his diaper. Again, she was irritated, but did change his diaper. A severe diaper rash was noticed.

Brody was observed by the home health nurse to be quite small for his age. He was dirty with food, dirt, and "grime" on his body. He smelled strongly of urine.

Once placed in the highchair the mother placed finger foods on the tray to the highchair. Brody "devoured" these items. He seemed very hungry. The mother then went to remove him from the highchair. The home health staff said he still seemed hungry. The mother responded that he needs to not eat so much, or he will develop a weight problem like she has. The home health staff encouraged her to give him more food. She then found baby food, which the HHS stated was for a much younger child than Brody's age. He again ate this as though he was "starving." The mother was forceful when feeding him and slapped his hands as he tried to grab for the spoon. She said that he was not "thankful." When asked about the last time she fed him she said it was before bedtime last night around 9:00 pm. The nurse pointed out that was about 15 hours ago and tried to gently tell the mother that a child his age should not go that long without food.

The HHS gave the mother pamphlets on feeding a child Brody's age. HHS inquired if she was breast feeding or providing formula. The mother stated that she didn't like Brody being that close to her and that he hurt her when she tried to breast feed. She said she did give him formula and showed the home health nurse the formula she had received from WIC.

About this time a young male appeared from the bedroom. The mother introduced him as her boyfriend, Brandon. The home health nurse had heard of Brandon from the mother and knew that they had previously been separated. The mother reported he was a "drug addict" and had been an "asshole" while she was pregnant. The HHS stated the father looked "out of it" but she could not ascertain if that was because he just woke up or if he was impaired.

He did take Brody and cuddle Brody when he came into the room and when he overheard the nurse talk about feeding the baby he told the mother that he had been telling her she should feed him more.

The HHS did weigh Brody at her home visit. Brody weighed 14.5 lbs., which is only the 3rd percentile for weight. The HHS told both parents that this was concerning and recommended he see a doctor right away. The mother did not seem to take this seriously. The father asked a lot of questions but told the mother it was her job to take care of the child's "doctor appointments and stuff" because he works. The HHS ended up calling to make an appointment for the parents for later in the day.

At the end of the day she received information that the parents did not bring the child in for the appointment. She feels Brody needs to be seen by a medical professional right away.

Home Health Staff reported that mother experienced post-partum depression during the first few months of the child's birth and has a history of depression and suicidal ideation. Mother has also previously reported that the father has learning disabilities and may not read well.

In checking OECL, it was determined that there is an active restraining order filed by Lena Clark against Brandon Jones. Effective date is 5/27/2024. A copy of the RO has been requested. In reviewing the details found online it appears that Lena alleges that Brandon threw his phone, destroying her TV, and then pushed her down, causing injury to her hip. She did not contact law enforcement. She additionally noted that he has "pushed and shoved her in the past" while she was holding the baby and that he has an addiction to alcohol and marijuana. Father owns several firearms.

Brandon Jones was also arrested for a DUI and Driving without a license on 6/27/2024. Charges are pending and a trial date is scheduled for 10/25/2024.

CW History

Reports from Community Health on 4/27/2023 that the mother has not been following up on pre-natal care and that the mother told the nurse at her last medical appointment that her boyfriend was domestically violent.

Both parents have substantial history with CW as children. Father was in substitute care from age 3-5 due to parental drug use, familial domestic violence, and neglect.

Describe the child(ren)'s injury or conditions as a result of the alleged abuse:

See narrative.

Describe the child(ren)'s current location, school/daycare including dismissal time, functioning, including special needs, if any, and highlighting current vulnerability, and cultural and language considerations:

Describe the parent and/or caregiver's current location, any cultural/language considerations, and family functioning (if known):

Describe any criminal history of household members and/or concerns for worker:

Father owns firearms.

ALLEGED PERPETRATOR NARRATIVE

Who is the alleged perpetrator and what is their relationship and access to the child:

Mother and father. Full access.

Provide the name, age, and current location of any other children who may be unsafe and describe the relationship between these children and the reported circumstances:

None

Name and contact information of the child's guardian:

See above

ASSESSMENT HISTORY

Assessment Date	Case ID	Case Name	Founded Perpetrator	Report Type	Allegations	Disposition
	No prior hx other than a call to screening during mother's pregnancy					

ASSESSMENT ACTIVITIES

Date/Time Occurred	Worker	Type	Participants	Face-to-Face Contact Type	Face-to-Face Results
8/29/2024, 8:30 am	Sue Smith	Alleged Perpetrator	Lena Clark	Worker/parent	Unscheduled contact occurred
Had face to face contact with Lena at her home.					
8/29/2024, 8:30 am	Sue Smith	Alleged Victim	Brody Jones	Worker/child	Unscheduled contact occurred
Had face to face contact with Brody at his home.					
8/29/2024, 8:30 am	Sue Smith	Alleged Perpetrator	Brandon Jones	Worker/parent	Unscheduled contact occurred
Had face to face contact with Brandon.					
8/29/2024, 8:00 am	Sue Smith	Collateral			
SSA requested Brody's medical records from his pediatrician. SSA also requested LEA records regarding any responses to the home for issues of domestic violence. SSA requested additional information about mother's reports of post-partum depression and any information Home Health may have regarding treatment or services she may have received.					
8/29/2024, 3:00 pm	Sue Smith	Collateral			
Spoke to Rose Gold, family friend of Lena's.					
8/29/2024, 4:00 pm	Sue Smith	Collateral			
Spoke to Urgent Care doctor, Dr. Nohm.					
8/29/2024, 6:30 pm	Sue Smith			Worker/supervisor	

Staffed with Ms. Boss about case planning and decision making.					
8/30/2024, 8:30 am	Sue Smith	Collateral			Unscheduled contact occurred
Phone calls to maternal grandmother; paternal grandparents; Rose Gold, family friend; and Ms. Nurse at Salem hospital.					
8/30/2024, 3:00 pm	Sue Smith	Alleged Perpetrators	Lena Clark Brandon Jones	Worker/parents	Scheduled contact occurred
Met with Lena and Brandon at the hospital.					
8/30/2024, 3:30 pm	Sue Smith	Alleged Victim	Brody Jones	Worker/child	Scheduled contact occurred
Saw Brody at hospital. Transported him to the resource home.					
8/31/2024, 1:00 pm	Sue Smith	Alleged Perpetrators	Lena Clark Brandon Jones	Worker/parents	Scheduled contact occurred
Saw both parents at court. Met with Lena and her attorney after court.					

COMPREHENSIVE ASSESSMENT

Child Functioning

Participant: Brody Jones	DOB: 9/27/2023
<p>Child Functioning:</p> <p>Brody Jones is an 11-month-old male. ICWA may apply. Father has been unwilling to complete the 1270/ICWA paperwork. Brody is the biological child of Lena Clark and Brandon Jones. He is not school aged. Brody is currently very small for his age due to malnutrition. He was recently in the hospital for dehydration and concerns about his weight. Brody was born in the 75th percentile for weight. Brody is a cute baby with sandy blonde hair and blue eyes.</p>	

Adult Functioning

Participant: Lena Clark	DOB: 1/25/2005
<p>Adult Functioning:</p> <p>Lena Clark is a 19-year-old female. ICWA does not apply. She did not graduate High School but did obtain her GED while she was pregnant. She is the biological mother to Brody Jones. She is in a relationship with Brandon Jones, father to Brody.</p> <p>Lena was raised by both her parents until age 4 when her parents separated, and they fought for custody of her. She is the only child to her mother and father. Her mother prevailed in receiving majority custody. Her father moved to California and on a visit with her he took her back to California. She was hidden from her mother from the age 5 until she was 14 when she found her mother with the assistance of a relative. At this time, she was struggling with her relationship with her father, her new stepmother and her stepsiblings. She said she was experiencing depression, and her stepmother told her she just needed to exercise more. She said her father has always been cold and more interested in being right than in being a loving father.</p> <p>At age 14 she moved back with her mother. She said her father was opposed but decided to let her. She said he was more interested in his new family. When she first started living with her mother things were great, for about 4 months. Then her mother started bringing lots of her boyfriends around and leaving Lena alone for the weekend to be with these men. Lena felt very lonely. She reached out to her father and asked if she could return to him and he told her that she made her bed, she could lay in it. Lena said it was around this time that she started cutting. She said cutting made her feel like she had some control of the pain in her life. She said she started doing poorly in school and was not going about half the time and her mother did not seem to care. She said her mother started to yell at her, treat her like "Cinderella" with a ton of chores. She said things got worse when her mother thought one of her boyfriend's paid too much attention to Lena. She said her mother then started telling her she was a slut and that she was fat and ugly and even her father did not want her. She said when her mother had a boyfriend around it was much worse. Lena said she became even more depressed and thought about killing herself. She told a school counselor and CWP came out to talk to her. Her mother told her that if she told them the truth they would send her to a workhouse for teens. Lena said she did not tell the truth. She does remember her school counselor trying to get Lena into counseling, but her mother said</p>	

that was not necessary. Lena said her mother would leave for the weekend and lock up all of the food and Lena would have to ask her friends for food. When Lena was 16 she began a relationship with one of her mother's boyfriends. She said he was the nice to her, bought her things and told her she was pretty. She said they did have a sexual relationship and she became pregnant. He then got really mean and told her she was trying to trap him or get him arrested. He took her to have an abortion and then their relationship ended. She told a friend at school who told the school counselor and then CWP. Her mother was furious and told her she was a whore. Her mother told her she had better lie to CWP and she did.

After this, things were very bad between her and her mother. Her mother was seeing a psychologist and she told Lena that Lena caused her to become schizophrenic. Her mother started drinking and was taking a lot of pills. When she was 17 she met Brandon when she was out one night. They have been together off and on ever since.

She said Brandon is actually a "really good guy" he just loses his temper easily when he drinks too much. She said he had a "messed up childhood" and he really needs her.

She said when she got pregnant they were both happy. When she was approved for HUD housing she found out he could not live with her. He got angry and the night she found that out he went out and got drunk and slept with another woman. She said she broke up with him but took him back a week later. She said since that time they continually break and get back together and when he drinks he cheats on her. She said he was kind of physically aggressive before she got pregnant but after she got pregnant his drinking increased and he was "meaner" and would shove her and push her enough to make her fall down. He would also tell her she was worthless, ugly and fat. She said that she thinks he acts this way because this is how his father treated his mother.

Lena said she feels like she has always struggled with feeling depressed, at least since she was about 12. She said it got really bad when she was pregnant and then "horrible" after Brody was born. She said she thought about killing herself or just leaving him in a grocery store. She said it felt like he didn't love her. She said it feels like no one really loves her.

Lena started taking anti-depressants after Brody was born but admits she does not take them consistently.

Participant: Brandon Jones

DOB: 3/27/2005

Adult Functioning:

Brandon is a 19-year-old male. It is unclear if ICWA applies as neither he nor his parents are willing to complete the 1270/ICWA form. Brandon did not graduate from High School and quit his 8th grade year to help his Dad out on their property. He is the biological and legal father to Brody. His name is on Brody's birth certificate. He has not been paying child support but has been giving Lena money when he has a job. He states he and Lena are not in a relationship, they used to be, but now he just stays with her sometimes to help with Brody.

Brandon has 3 siblings and he was raised by his parents, grandparents and an aunt. He said his parents and grandparents live on the same piece of property that has been in his family for 50 years. He said he did spend some time in foster care when he was little because his mom and dad fought a lot and he got hurt when his Dad threw a fire poker at his mom. He said that around this time his grandpa also shot and killed his uncle because his uncle was drunk and was hitting his grandmother. He said the cops said it was self defense and his grandpa did not go to prison. He said he saw his grandpa shoot his uncle when he was 3 years old. He said it is strange, but he remembers it like it was yesterday and he still has dreams about it.

Brandon said when he was in foster care he remembers feeling scared and not being treated very well. He said he thought he was in 3 or 4 foster homes. He eventually went to live with his aunt after a couple of years in foster care. Then his Dad quit drinking so much and he went back to live with his parents. He said his Dad "isn't as bad as he used to be." He did not want to elaborate on this issue and was unwilling to keep talking about his parents.

He said he has been working odd jobs, mostly mechanical and timber type jobs since he was 13. He said that he does not read so well, and this prevents him from applying for other jobs.

He met Lena when he was 17 and things were good in the beginning but then she got "weird" and always accused him of cheating. He said her mom is "crazy" and he does not like her and she does not like him. He said Lena is messed up because of her mom.

Brandon states that Lena always thinks she is fat and ugly and dresses in revealing clothes to get men to look at her. He said he doesn't get it. He said his parents don't like her.

Brandon denied having any mental health issues or depression. He said he has never been on any type of mental health medication.

He said he started drinking and smoking pot when he was about 9 or 10. One of his uncles gave it to him. He said his Dad would also let him have a few beers after they worked all day. He said he doesn't smoke marijuana all of the time because he can't always afford it. He said he thinks he does need to drink less, but not stop all of the way, just less.

He denied ever hitting or hurting Lena. He said that they have both pushed each other, but she has never fell down or gotten hurt. He said he would not do that because he saw his Dad do that to his mother. He said she filed the restraining order against him because he broke her TV and she was mad that he was talking to other girls.

Parental Practices

Participant: Lena Clark	DOB: 1/25/2005
Disciplinary Practices/Knowledge: Lena stated that she really doesn't discipline Brody. She said sometimes when he annoys her she leaves him in his crib to cry or leaves him strapped in his car seat while she goes outside to smoke.	
Parenting Practices/Knowledge: Lena states that she loves being a mother, but sometimes she feels really stressed and alone and doesn't know what to do. She said she wishes she had someone to tell her how to be a good mother. She said that some days she just wants to hide from Brody and pretend that she does not have a baby.	

Participant: Brandon Jones	DOB: 3/27/2005
Disciplinary Practices/Knowledge: Brandon said that he doesn't really feel he disciplines Brody, that is Lena's job. He said he just likes to hold him and snuggle with him.	
Parenting Practices/Knowledge: Brandon said that he was excited to become a Dad. He said that Brody is "rad" and he thinks they will be close when he gets older.	

Extend of the Child Abuse:

On 8/28/2024 at the end of the day the agency received a report of neglect to 11-month-old, Brody Jones by his mother, Lena Clark and his father, Brandon Jones. Concerns were regarding the child's low weight, at the 3rd percentile due to neglect caused by the mother. There were also indicators that the mother may be experiencing mental health issues or other cognitive impairments. There is an active restraining order between mother and father, filed against father, and father has recently received a DUII.

On 8/29/2024 I reviewed 307 information, as well as information I could gather about both parent's history as children. Had SSA request the hard files for both parents. Requested SSA collect child's medical records and any LEA responses to the home for issues of domestic violence or drug and alcohol issues. Also asked SSA to contact Home Health to see what additional information they have about the mother's post-partum depression. Requested the police report for father's DUII.

Noted: A call of concern came in during mother's pregnancy due to lack of pre-natal care and concerns of domestic violence during pregnancy.

Father has juvenile criminal history involving minor in possession of alcohol, theft, and failure to comply with juvenile probation guidelines.

Father has an active restraining order filed against him by mother on 5/27/2024.

Attempted to contact reporting party, left voicemail.

Left voicemail for child's pediatrician.

Home visit to mother's residence with ART worker, Joy Bell. We arrived around 8:30 am. There was a truck in the driveway. Had to knock on the door for quite a while. A young man answered the door in his boxers. He identified himself as Brandon. We explained who we were he willingly invited us into the home. He left to wake the mother and child. Once all 3 were in the home I explained the reasoning for our contact. Both parents were very defensive and said the Home Health staff person was overreacting. I asked why they did not make the doctor's appointment and they said their truck was broken down. I asked if there was someone else they could have called, and they said that Lena's mother is a "nut bar" and Brandon's parents live about 40 minutes away and had issues with their own car.

I spoke to both parents for some time to gather background information and parenting practices. Please see Parental Practices and Functioning above. It appears that neither parent has any type of familial support. A maternal grandfather resides in California and he may be a resource, but he and mother are estranged. Father's parents "have their own issues" according to father. They may have an adult family friend that can sometimes be a family support.

Based on the severity of the concerns I explained to both parents that we would need to take Brody to Urgent Care and that I would like to accompany them, by following in my car. Helped them make arrangements for the family friend to come pick them up.

As we were waiting father agreed to provide a UA to Joy. He stated it would be positive for marijuana and there may be some alcohol from the night before.

Rose Gold, family friend came to pick up the parents and child. Joy and I followed them.

Brody was seen by Dr. Nohm at Urgent Care. The parents allowed me to be in the exam room. Dr. Nohm voiced serious concerns for Brody's low weight and lethargy. He noted that Brody was also very dehydrated. Dr. Nohm stated that he would like to admit Brody to the hospital for IVs and observation. The mother became quite upset and started crying. Father got angry and began to blame her for being a "shitty mother" and a "ho." The nurse and I had to intervene to prevent the situation between the parents from getting heated.

Brody was admitted to the hospital.

Called supervisor to staff. She indicated that as long as the child is in the hospital we would not file for custody, but to convey to hospital staff that if parents try to leave with the child, to please notify us. Will attempt to develop a safety plan while continuing to assess.

Talked to Rose Gold in the hospital parking lot. She has known Lena since she was a child. She was previously her mother's neighbor. She indicated that Lena's mother has significant mental health issues and was "terrible" to Lena when she was a teen. She said that Lena was emotionally and mentally abused by her mother and that her mother also physically abused her. Her mother had a "turn table" of boyfriends in and out of the house. She said that Lena's father kidnapped Lena from the mother when Lena was little but when Lena turned 14 she found her mother and her father allowed her to return to her mother. Asked Rose if she could be a safety service provider for Lena and Brody. She said she was not able as she works full time and cares for her ailing mother. Inquired about other possible safety service providers. She said that Lena does not have any real supports in her life and seems to burn through friends.

Upon arrival back at the CWP office I reviewed the following information: Child's pediatric records, parent's CWP files as children, father's police report for DUII, restraining order form completed by mother. All documents saved in Orkids and scanned for discovery.

Important to note:

PARENTAL CHILDHOOD HISTORY

- **Father (Brandon)** was in CWP custody from age 3-5. He experienced physical abuse by his father, exposure to domestic violence between his mother and father, the death of an uncle by his grandfather, physical abuse by his grandfather, neglect by both parents (rotten teeth, lack of medical care, lack of supervision.)

- **Father (Brandon)** was placed in an aunt's care and she obtained guardianship, but it appears he was returned to his parent's care at a later time. Subsequent calls to CWP indicate father ceased attending school in the 8th grade. He had significantly poor attendance prior to dropping out. Several reports to CWP made by school personnel due to his lack of hygiene, not receiving appropriate nutrition and reports of potential physical abuse by his father. There was an allegation that Brandon was sexually abused by an older male cousin. This and additional reports ended in UNFOUNDED dispositions as Brandon did not ever make any disclosures of abuse.

- **Mother (Lena)** was allegedly kidnapped by her father when she was 5 years old. Unable to verify if this was addressed by law enforcement. Parents went through conflictual divorce resulting in split custody. Father moved to California and then he had Lena living with him from age 5-14 in California.

- **Mother (Lena)** returns to Oregon at age 14 to reside with her mother and the reports to CWP begin shortly after. Reports concerning her mother's refusal to access mental health treatment for her daughter's suicidal ideation and

cutting. Report of sexually inappropriate behavior by one of mother's boyfriends. Exposure to adult sexual activity. Her mother withholding food from her as a form of weight management. Two reports alleging neglect and mental injury to mother were coded as UNFOUNDED. One report alleging sexual abuse was coded as UNABLE TO DETERMINE. Lena made a disclosure of a consensual sexual relationship with one of her mother's adult boyfriends at age 16 but later recanted. This report also indicates she became pregnant from this relationship and had an abortion. Unable to confirm.

PEDIATRIC RECORDS

-Child has missed all but 2 appointments. Doctor had ongoing concerns regarding mother's functioning which led to his referral to Home Health Services. Father has never attended a medical appointment. Mother made disparaging remarks about father at the two appointments she did attend. Brody was in the 75th percentile for weight at birth. Continued decrease in his weight percentile noted at both appointments. Concern noted about child's hygiene.

- Notes also indicate that mother has previously been on anti-depressants but is not consistent in taking her medication. Doctor noted concern.

FATHER'S DUII ARREST REPORT:

Father pulled over at 2:00 am due to swerving. He had several other underage individuals in the cab of his pickup. Father did not have a legal driver's license. Marijuana found in the car. All individuals in the car were believed to be intoxicated. Father was initially somewhat combative, but later calmed down. He blew a 0.162 which the officer noted would be roughly 9 drinks for a male his weight and is more than double the legal limit. The officer indicted he was "significantly impaired." On the drive to the jail father told the officer he knew he had a problem. He said he needs alcohol to be happy. He relayed that the only time his old man was happy was when he was drunk, but when he got real drunk that is when he got mean.

RESTRAINING ORDER:

In the paperwork Lena filed to obtain the RO she indicated that she and Brandon's relationship has always been domestically violent. They have been together roughly 2 ½ years. Mother reports that Brandon would only "be mean" when he got really drunk. He would tell her she was crazy like her mother and she should just kill herself. She previously caught him with another woman, and he became enraged and broke two windows in her apartment. He has also reportedly broken a window in her car, shoved her down when she was pregnant and pushed her shoulder while she was holding Brody when Brody was one month old. The incident that led to her filing a restraining order involved her finding messages from other women on his phone and confronting him about it. He threw his phone at the TV which smashed the TV and his phone and shoved her to the ground, causing an injury to her hip when she hit the couch on the way to the floor. She indicated that she believed he had a problem with alcohol and marijuana and noted that he possesses firearms. Father did not show up to the restraining order hearing and it was automatically granted by the Judge. His firearms were removed by LE when the RO was granted.

8/30/2024 – Received information that Brody was ready to be discharged. Asked if the hospital could give me until 4:00 pm to work on a possible in-home plan with the mother. Nurse voiced concerns. She said the mother had not been very attentive while staying in the hospital with the child. Was continually on her phone and took far too many smoke breaks. Father had been there for a short time last night, but he and mother got into an argument and he stormed out of the hospital.

Made multiple phone calls to mother, father and family friend, Rose Gold. Unable to locate a safety service provider willing to provide 24/7 supervision.

Talked to maternal grandmother via phone. She is unable to be a placement resource. She said Lena got herself into this mess and she needs to deal with it. She spent a substantial amount of time talking very negatively about Lena and about how she had no business being a mother. She also said Brandon was a "white trash loser." She said Lena has not figured out that all men are worthless.

Attempted to reach paternal grandparents. Unable to contact them via phone. Due to their prior FOUNDED allegations with CWP and both of their criminal histories they would be unable to be a resource. Brandon also said he had a sister that would be a resource. She has two children and provides daycare out of her home. Unable to contact her. Left a message.

Staffed with supervisor. Due to inability to develop a safety plan we have no choice to place Brody in resource care. Called Brandon and Lena and asked them to meet me at the hospital. Met both parents at the hospital at 3:00 pm. Notified them that we would need to take Brody into protective custody. Lena's response and affect were strangely flat. She tried to leave the room so she could go get his things from the car. Brandon got angry and told me this was "Total bullshit." He said that this was Lena's fault and he should be able to keep his son. I attempted to explain the agency's concerns about his history of domestic violence around his son and alcohol abuse. He said that Lena was a liar and he has never been arrested. He asked why we believed her over him? He also said he recognizes he has a drinking problem and he is working on that. Gave both parents required paperwork and asked them to complete 1270/ICWA paperwork and to complete Father's Questionnaire. Lena completed the paperwork, Brandon refused. Notified them of court the next day at 1:15 and told them how to apply for court appointed counsel.

Placed Brody in a resource home.

8/31/2024 – Temporary custody hearing. Neither parent asked for a hearing. Both parent's appointed attorneys, as well as an attorney appointed to Brody. See attorney appointment in Orkids,

Met with Lena and her attorney, Ms. Mellon, after court. She asked about an in-home plan. I explained that we did not have adequate safety service providers. Ms. Mellon said that Lena may have a few more names and she will get them to me. She said that she expected an in home to be developed within the next 30 days and if not, she would be filing a placement hearing.

Reviewed the Conditions for Return and in-home criteria for all cases of children in substitute care. Lena would need to have the following:

1. There is a home-like setting where the mother and child can live: Mother needs a home like setting that is sustainable.
2. There are no barriers in the home to allowing safety service providers and activities to occur: Things do not need to be perfect, but activities must be able to occur to keep Brody safe.
3. At least one parent is willing to cooperate with in-home plan: Lena must be cooperative with CWP and the safety service providers entering the home to manage the in-home safety plan.
4. The necessary safety activities and resources are available to implement an in-home plan: Necessary safety activities (such as home health care or parent mentor visits) and resources (such as individuals who could serve as safety service providers to provide supervision for Brody) need to be available to implement an in-home plan.

I wrote the above information down on a piece of paper for Lena and told her and Ms. Mellon that we would be reviewing these requirements at the Family Engagement Meeting (FEM) within the next 60 days. Ms. Mellon told me she was certain that Brody would be home by then, so we would not really need the meeting.

Circumstances Surrounding the Child Abuse:

Brody Jones was found to be seriously malnourished due to lack of nutrition being provided to him by either parent. Home Health Services had previously offered support and services to the mother and assisted in making a medical appointment and both parents failed to take him to this appointment. Both parents seemed to lack the knowledge, skill and understanding as to the seriousness of an 11-month-old child being seriously underweight and dehydrated.

Additionally, the child was exposed to domestic violence when the father assaulted the mother and broke items in the home/vehicle. The father admits to ongoing alcohol abuse that has led to his violent behavior in the presence of his child. The parents lack a support system that is needed for them to ensure their child's basic needs are met, such as taking their child to a medical appointment.

SAFETY THREAT IDENTIFICATION

Impending Danger Safety Threat:	One or both parents' or caregivers' behavior is impulsive or they will not/cannot control their behavior.
Threat Identified:	Yes

Vulnerable Child(ren):	Brody Jones
Narrative:	

Impending Danger Safety Threat:	A situation, attitudes, and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills, and motivation necessary to assure a child's safety.
Threat Identified:	Yes
Vulnerable Child(ren):	Brody Jones
Narrative:	

CPS ASSESSMENT CONCLUSION

Assessment Allegations:

Alleged Victim	Alleged Perpetrator	AP Relationship to Victim	Allegation	Disposition	Karly's Law	Medical Neglect	Fatality
Brody Jones	Lena Clark Brandon Jones	Mother Father	Neglect and Threat of Harm	Founded			

Justification for the Disposition:

This assessment is FOUNDED for Neglect of Brody Jones by his father, Brandon Jones and his mother, Lena Clark. Brody Jones was found to be seriously underweight, malnourished and dehydrated during a home visit with a Home Health Staff person. The HHS person told the parents that his low weight was serious and that he needed to be seen by a doctor right away. She made an appointment for them and they failed to take their child to the appointment. The next day CWP insisted the child be taken to Urgent Care. At this appointment the child was admitted to the hospital for dehydration and being malnourished. His parents had been his only care providers up to this point.

This assessment is also being coded as FOUNDED for Threat of Harm due to the child's exposure to domestic violence against his mother by his father.

Service Application Signed: ☐

Child Safety Decision:

Child	DOB	Child Safety Decision
Brody Jones	9/27/2023	Unsafe
Basis for Child Safety Decision: Safety threats #3 and #8 best fit the family conditions. At the conclusion of this assessment, Brody was placed in non-relative resource care.		

Moderate to High Needs Service Determination:

Moderate to High Needs Present?	No	Services Offered?	No	Services Accepted?	No
Explain:					

Assessment Approval & Timelines:

Assessment Completed By: Sue Smith	Local Office: Salem, OR
Original Due Date: 8/29/2024	Final Assessment Due Date: 8/29/2024
Approved By: Eric Christianson	Approved On: 8/31/2024

Extension Requested:	Date Extension Granted:
Extension Granted By:	
Reason:	

CASE PARTICIPANTS

Child Case Participant(s):

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Language	Whereabouts
Brody Jones (000000)	M	9/27/2023	11 months	White		Child - Biological	English	Substitute Care

Parent/Caregiver Case Participant(s):

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Language	Whereabouts
Lena Clark (000000)	F	1/25/2005	19	White		Mother	English	
Brandon Jones (000000)	M	3/27/2005	19	White		Father - Legal	English	

Other Case Participant(s):

Name / ID	Gender	DOB	Age	Race/Ethnicity	Tribe	Relationship	Language	Whereabouts