

# **David Clement**

## **Mock Case**

Prepared by JBS International, Inc.  
for the Children's Bureau  
February 2015

Period Under Review: **4-1-11 to 10-1-12**

**State Policy Submission Form  
Mock State  
Department of Youth and Family Services**

**Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment**

Summary of State Policy Requirements	Location of Related Information in Case File
<p><b>Requirements for Initiation</b></p> <ul style="list-style-type: none"> <li>• Priority 1 reports are initiated within 24 hours of receipt of the report.</li> <li>• Priority 2 reports are initiated within 72 hours of receipt of the report.</li> <li>• Initiation is defined as face-to-face contact with the alleged child victim(s).</li> </ul>	<p>Hotline reports Caseworker narratives</p>

**Item 17: Physical Health of the Child**

Summary of State Policy Requirements	Location of Related Information in Case File
<p>Each child in foster care is assigned a primary care physician (PCP) within 30 days of coming into care. To the extent practical, the caseworker ensures continuity of care by maintaining the PCP caring for the child prior to entering foster care and in the event of change of placements. Management of any prescription medication, including psychotropic medication, is coordinated through the child's PCP.</p> <p>Each child in foster care completes a physical examination within 30 days of entry into foster care unless the child's most recent physical was within the last 60 days. Children in foster care follow the Medicaid Early and Periodic Screening, Diagnosis and Treatment (EPSDT) schedule. This child health program in Medicaid helps children with physical, mental, and developmental health needs.</p> <p>The caseworker maintains a record of any medication required to treat chronic conditions, for example, asthma, diabetes, etc. The caseworker encourages the PCP to use electronic medical records where they are available.</p> <p>Each child in foster care completes a dental examination within 90 days of entering care unless the child's last dental examination was completed within 90 days. Children in foster care have dental examinations annually and 6-month cleanings.</p>	<p>Case file</p>

**Item 18: Mental/Behavioral Health of the Child**

Summary of State Policy Requirements	Location of Related Information in Case File
<p>Each child in foster care participates in a mental/behavioral screening within 30 days of coming into care to identify need for services.</p>	<p>Case file</p>

Summary of State Policy Requirements	Location of Related Information in Case File
<p><b>Consent for Use of Psychotropic Medication and Medication Management</b></p> <p>Mock State Department of Youth and Family Services contracts with Town Center Psychiatric Associates for review, consultation, and consent for the use of psychotropic medication for children in foster care. Consultations are conducted by a panel of psychiatrists and/or pediatricians. At a minimum, the panel must include two physicians. Consultations occur as follows:</p> <ul style="list-style-type: none"> <li>• Urgent requests are reviewed within 24 hours of the request.</li> <li>• Medications used in an emergency situation are reviewed within 24 hours.</li> <li>• Non-urgent requests are reviewed within 48 hours.</li> </ul> <p>The case worker completes the <i>Psychotropic Medication Consent Tracking Form</i> to request a consultation and submits it electronically to the panel. The panel schedules the consultation within the required timeframes. The caseworker and/or supervisor must attend the consultation along with the prescribing doctor and primary doctor or qualified representative from their respective offices. The child, if over the age of 12, is invited to attend. The child's caretakers and parents are invited to attend.</p> <p>Consultation must include a review of the following:</p> <ul style="list-style-type: none"> <li>• Clinical presentation, including diagnosis, symptoms, severity, and duration</li> <li>• Alternatives attempted and/or considered and ruled out</li> <li>• Family history</li> <li>• Physical health of the child to include how medication may impact any existing conditions</li> <li>• Risks, including adverse reactions and side effects</li> <li>• Medication and dosage; if medication and/or dosage are outside of formulary, include rationale for not following</li> <li>• Descriptions of any discussions with child and whether the child consents</li> <li>• Description of how medications will be administered and managed</li> <li>• Projected length of time medication will be used and prognosis</li> </ul> <p>Children 16 years of age and older must consent to use of medication except under emergency situations as defined by state statute, Mock State Mental Health Code, Section 36-1-1 et seq. MSSA 1970.</p> <p>The panel documents the results of the consultation on the <i>Psychotropic Medication Consent Tracking Form</i> and returns it to caseworker for inclusion in the child's case record.</p> <p>The caseworker notifies the panel of any changes, including discontinuation of medication and/or addition of medication(s). The panel reviews and may elect to schedule an additional consultation.</p>	

**Department of Youth and Family Services  
Child Abuse and Neglect Hotline Intake**

Name of Hotline Worker:	Andrea Ford
Date Complaint Taken:	March 19, 2007
Time Complaint Taken:	12:30 p.m.
Name of Reporter:	Courtney Harris
Relationship to Alleged Perpetrator:	Madison Elementary School counselor
Telephone Number of Reporter:	209-555-0101
Name of Birth Mother:	Jennifer Clement
Race/Ethnicity:	White, Non-Hispanic
Telephone Number:	209-555-7378
Address:	900 West Grace Street, Apt. A, Madison, Mock State 12006
Name of Birth Father:	Collin Clement
Race/Ethnicity:	White, Non-Hispanic
Telephone Number:	209-555-0198
Address:	900 West Grace Street, Apt. A, Madison, Mock State 12006

Name of Children	Date of Birth	Race/Ethnicity	Caregiver	Residential Address	Current Whereabouts
David Clement	08/01/2001	White, Non-Hispanic	Collin Clement	900 West Grace Street, Apt. A, Madison, Mock State 12006	Madison Elementary School

Other Household Member(s)	Date of Birth	Race/Ethnicity	Role	Current Whereabouts
NA				

**Reason for Complaint/Details of Allegation:**

According to the caller, Courtney Harris, Madison Elementary School Counselor, David came to school this morning with poor hygiene and dirty clothing. Ms. Harris stated that his clothes smell like urine. This has happened on several occasions, even after the school addressed it with the David's parents, Collin and Jennifer Clement. The parents were asked to provide a change of clothes and never sent any to school with David.

**Internal Use Only:**

Number of Previous Complaints: 0		Case Status at time of intake: NA	
Dates of Previous Complaints: NA			
Assigned for Investigation to: Cory Bright		Priority Level: 2	
Date Case Assigned: March 19, 2007		Time Case Assigned: 2:00 p.m.	
Date of Investigation Decision: March 23, 2007		Investigation Decision: Unsubstantiated Physical Neglect	

**Department of Youth and Family Services  
Child Abuse and Neglect Hotline Intake**

Name of Hotline Worker:	Richard Forde
Date Complaint Taken:	April 4, 2011
Time Complaint Taken:	9:00 a.m.
Name of Reporter:	Felicia Robinson
Relationship to Alleged Perpetrator:	St. Vincent's Hospital Emergency Room Nurse
Telephone Number of Reporter:	209-555-5432
Name of Birth Mother:	Jennifer Clement
Race/Ethnicity:	White, Non-Hispanic
Telephone Number:	209-555-7378
Address:	568 Oak Ct., Madison, Mock State 12006
Name of Birth Father:	Collin Clement
Race/Ethnicity:	White, Non-Hispanic
Telephone Number:	209-555-0198
Address:	1235 Belleflower Drive, Madison, Mock State 12006

Name of Children	Date of Birth	Race/Ethnicity	Caregiver	Residential Address	Current Whereabouts
David Clement	08/01/2001	White, Non-Hispanic	Collin Clement	1235 Belleflower Drive Madison Mock State 12006	St. Vincent's Hospital

Other Household Member(s)	Date of Birth	Race/Ethnicity	Role	Current Whereabouts
Louise Clement	01/02/1956	White, Non-Hispanic	Paternal Grandmother	1235 Belleflower Drive Madison Mock State 12006

**Reason for Complaint/Details of Allegation:**

According to the caller, [209-555-9876] Felicia Robinson, St. Vincent's Hospital Emergency Room Nurse, Collin Clement brought his son, David, into the emergency room with a broken arm and bruising on left side of his torso. Father stated that on the previous day his brother and his children were visiting. David was wrestling with his cousins, fell and broke his arm. Mr. Clement appeared nervous and became defensive when the Emergency Room Doctor asked for more information about how he fell. Examination and x-rays revealed a spiral fracture inconsistent with a fall and swelling of the arm indicative of an injury that did not happen yesterday.

**Internal Use Only:**

Number of Previous Complaints:	1	Case Status at time of intake:	Closed
Dates of Previous Complaints:	March 19, 2007, Unsubstantiated Neglect		
Assigned for Investigation to: Michael Stout	Priority Level: 1		
Date Case Assigned: 4/4/2011	Time Case Assigned:	9:30 a.m.	
Date of Investigation Decision: 4/19/2011	Investigation Decision:	Substantiated Physical Abuse and Medical Neglect	

Supervisor: Sarah Niles  
 Social Worker: Michael Stout

**Case Notes**

T/C=telephone call

O/V=office visit

H/V=home visit

C/C=collateral contact

Date of Contact	Type of Contact	Notes
4/4/2011	-----	Case assigned to this worker for investigation.
4/4/2011	O/V	<p>This worker responded to the investigation at St. Vincent's Emergency Room. I saw David Clement in the exam room. I observed David's left arm was swollen, bruising to forearm and wrist. I also observed bruising on his left side. David told me he was in a lot of pain until a nurse gave him a shot. I asked David to tell me how he broke his arm. David stated, "I was fooling around with my cousins and fell." David stated one cousin is as old as he is, and the other two are younger. I asked David if they live in town. David stated they live out of town and went home yesterday. David shared that he lives with his father and grandmother. He said that his Grandma is old and sick and that the family has been coming to visit. Hospital staff came in and told David that the doctor looked at his x-rays and ordered a CT scan to take a better look at his arm. Staff took David for the CT scan, and our interview ended.</p>
4/4/2011	C/C	<p>This worker met with nurse, Felicia Robinson, at the ER nurse's station. Nurse Robinson first saw David and his father when they arrived at the ER. David was in immense pain and said he fell when fooling around with cousins. Nurse Robinson stated that as she prepped David for exam and x-ray, she asked him more and learned his cousins were not older than he was. David changed his story about how he was injured when he met with the doctor. David told the doctor that he and cousins were in the back of his Dad's truck, and he fell off. The father was present and was snappy with David. He interrupted David several times to provide information and gave David stern looks. The father was visibly irritated and made no attempts to comfort David. Nurse Robinson stated the x-rays show a spiral fracture consistent with intense twisting of the arm. The x-rays showed bone splintering, and the doctor ordered a CT scan to get a better look. She stated, "The x-rays show the fracture is not consistent with a fall." Nurse Robinson</p>

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		<p>explained the humerus is the bone that extends from the shoulder to the elbow, and most fractures of the humerus are caused by a direct blow to the upper arm. She said spiral fractures usually have bone fragmentation that makes realignment and casting unfeasible. The CT scan will determine if surgery to pin the humerus is necessary and will also give us some information about possible nerve damage. Ideally, Nurse Robinson stated, "Treatment for a break like this should begin immediately."</p>
4/4/2011	C/C	<p>This worker met with ER doctor, Bob Sykes. Dr. Sykes stated David's fracture is not consistent with accounts of what happened. Dr. Sykes said that the injury did not happen yesterday. He stated he tried to explain this to the father, and he became defensive and argumentative. The bruising and x-ray indicate the injury is several days old. Dr. Sykes stated he ordered a CT scan to inform next steps for treatment. He stated, "Dad's lack of timely medical attention may mean he cannot be casted now and may require surgery."</p>
4/4/2011	O/V	<p>This worker met with Collin Clement, father, in a hospital consultation room. Mr. Clement stated he and David live with his mother, Louise Clement. He stated his mother is in her 50s and suffers from diabetes, high blood pressure, neuropathy, and circulation issues. He takes her to doctor appointments and to get medications. She is on so many medications that he helps her keep it all straight. Mr. Clement stated he has a sister, Jackie, who also helps out. Lately, his mom has not been doing well, and a constant stream of family is coming to visit. Mr. Clement says this causes a lot of stress in the house because he doesn't get along with some family members. There have been accusations made that he is taking advantage of his mom, and there have been arguments.</p> <p>Mr. Clement stated he lives with his mother because his job doesn't pay enough for him to pay rent and</p>

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		<p>utilities. He receives public assistance for food. Mr. Clement stated he works for a contractor for cash, and work depends on the weather and if he is called to work. He helps his mother with utilities and supports his son with no help from David's mother, Jennifer. Mr. Clement said that he and Jennifer were married for a few years before David was born. After David was born, Jennifer was diagnosed with postpartum depression. It got so bad that she moved in with her parents across town. At first, Jennifer took David with her. Quickly, Jennifer's mother said it was too much for her to work and focus on both Jennifer and David, so David came to live with him and his mother. Jennifer has chronic depression. When she starts feeling good, she quits taking her meds and cycles right back down. She does make efforts to talk with David on the phone and comes to visit him. Jennifer's dad usually brings her over. He'll stay a little while and then go run errands. When David was smaller, the visits were more frequent, and they'd watch TV together. Now that David is older, he likes seeing his mom, but gets bored. Jennifer's dad isn't much of a grandpa to David. Mr. Clement said that they had not heard much from Jennifer recently, and he assumed it was because she was having a bad spell. He provided me with Jennifer's phone number and address.</p> <p>Mr. Clement said his son is a handful, and he can be hard to manage. He stated, "I have to set him straight time and again." I asked Mr. Clement what he meant by set him straight. He responded, "I have to yell a whole lot and, from time to time, have to get his attention with a whack." He said, "David's grandmother has undermined his child raising. David has learned to manipulate the whole situation." Mr. Clement asked what this was all about, and I again explained my responsibility for investigating alleged child maltreatment. Mr. Clement said that there was no child maltreatment here, and he didn't need some social worker messing around in his life.</p>

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		I asked Mr. Clement to help me understand how David's arm was broken. He stated his brother came to visit yesterday with his three boys The boys were all playing outside and were told repeatedly to stop rough housing because someone was going to get hurt. "David fell and ended up with a broken arm". I told Mr. Clement that x-rays revealed the arm sustained a spiral fracture that is inconsistent with a fall, and x-rays tell the injury is days old. I also asked Mr. Clement about the other bruises on David's torso. Mr. Clement became irritated and said, "I told you all what happened; David must have gotten those when he fell."
4/4/2011	T/C	Called the number Mr. Clement provided for Jennifer twice. There was no answer and no answering machine to leave a message.
4/4/2011	O/V	Went back to meet with Mr. Clement. He was pacing. I explained to Mr. Clement that I was concerned for David's safety as he had a significant injury and other bruising on his body, and the explanation just was not matching up with the medical reports. I told Mr. Clement that the Department would like to offer services to him and his family so that David would be safe. Mr. Clement became visibly agitated. I asked Mr. Clement if he would be willing to provide names of relatives that might be able to care for David temporarily while services were put into place. He said that he didn't want or need any services and didn't want the Department in his life. He just wanted to get David and leave.
4/4/2011	O/V	This worker met with Dr. Sykes and Officer Charles Blake of the Madison Police Department. Dr. Sykes stated the left arm has a spiral fracture that's about 3 or 4 days old. There is also some bruising to the left torso that is concerning. He stated the CT scan shows bone fragmentation that will not allow for casting. David will need surgery to realign the bone. There may also be some nerve damage that will

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		<p>require continued treatment to include physical therapy. He expressed concern about father's interaction with his son. Dr. Sykes observed sharp, tense interaction between father and son. He understands the father and child live with grandmother, who is in poor health. Dr. Sykes stated that in spite of providing definitive medical information to Dad about the injury, he would not shift from the original explanation for the injury. I described my conversations with the father and his refusal to accept assistance from the Department and that I was not able to contact the child's mother. Officer Blake advised he was taking David into emergency custody and placing with the Department.</p>
4/4/2011	O/V	<p>This worker met with Officer Blake and Collin Clement. Officer Blake advised that he was giving emergency custody of David to the Department to ensure his safety. Officer Blake told Mr. Clement that the 48-hour hold will give the Department time to sort through the medical information and inconsistent explanations while making sure David is safe. Mr. Clement said, "There ain't no inconsistent nothing here. David fell and broke his arm." I asked Mr. Clement if David was a member of or eligible for membership in a federally recognized Indian Tribe; and he replied no. Officer Blake also asked Mr. Clement for contact information for Jennifer Clement, and Mr. Clement reluctantly provided the same phone number and address he had given me.</p> <p>I gave a Notice of Custody to Mr. Clement and told him the department makes every effort to place children in care with relatives when appropriate. I asked Mr. Clement if there were maternal or paternal relatives that could provide relative placement for David. Mr. Clement was upset and asked how long his son would be taken away. He stated, "How can you just take him like that?" Mr. Clement said, "Here's my mom's number, talk to her about my sister, Jackie Wright, and her husband, Mark. I let Mr. Clement know that I would make a home visit tomorrow to</p>

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		<p>speak with his mother. I explained to Mr. Clement that a family team meeting (FTM) would be scheduled in the next couple of days to develop a plan for providing services to the family. I let him know that I would be in touch with him as quickly as possible to schedule the FTM. Mr. Clement became belligerent and said, "I don't see what you think you'll accomplish with a family team meeting." Mr. Clement had to be escorted out of the hospital by Officer Blake and security.</p>
4/4/2011	T/C	<p>Spoke with Louise Clement and obtained contact information for Jackie and Mark Wright, paternal aunt and uncle, for purposes of possible relative placement. I also asked Ms. Clement if she knew any relatives on the mother's side of the family. Ms. Clement stated she knows Jennifer has a brother, and he's a fireman. She didn't have any other information.</p>
4/4/2011	T/C	<p>This worker called Sarah Niles, Supervisor, to advise the Department had just obtained emergency custody of David Clement due to physical abuse and medical neglect. Ms. Niles will be in touch with Mark Rogers, placement worker, to give him a heads up on the Wright family and the need for a home visit for initial assessment and approval of relative placement.</p>
4/4/2011	T/C	<p>I contacted Jackie Wright, paternal aunt, by phone and explained the Department has emergency custody of David due to physical abuse and medical neglect. Ms. Wright stated she has been pretty busy with their twins who have asthma. She said she is working night shift right now at a nursing home. I asked if she and her husband would consider relative placement, and she responded they would step up and provide care for David.</p> <p>Ms. Wright advised that David has a maternal uncle, Sam Kolbe, that David is close to. I asked Ms. Wright for contact information, and she said she'd get the information for me, but did not have it on hand. I let</p>

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		her know my colleague, Mark Rogers, placement worker, would be going by to make a home visit and determine if placement can proceed. I advised Ms. Wright that David and I would likely be here at the hospital for another hour or so.
4/4/2011	T/C	I again attempted to contact Jennifer Clement by phone, and there was no answer.
4/4/2011	T/C	Mark Rogers, placement worker, called me for a briefing on the investigation. I briefed him and gave him contact information for the Wright family. Mr. Rogers will run a police records check and go to the Wright home to determine possibility of initial approval of relative placement.
4/4/2011	T/C	Mark Rogers called with initial approval of the Wright home for placement of David. Mark has completed the visit at the home, and the Wrights have passed the local/state criminal records and safety checks. He ran an agency central clearance, and the Wrights do not have a record. He has collected reference information and explained to the Wrights that they will be required to attend foster parent training to be licensed. The Wrights indicated they hadn't had a physical in over a year. Mark advised them that they will have to get physicals completed.
4/4/2011	O/V	Officer Blake and I met with David. Officer Blake let David know that he is in emergency department custody. I let David know that I was working to place him with his Aunt Jackie and Uncle Mark. David asked if his dad was ticked and left. He asked how long he'd have to stay with his Aunt Jackie. I let David know that his Dad left the hospital, and I would be taking him to his aunt's home. I also let David know that his Uncle Mark will be going to get a few of his things from his house to make it more comfortable. David asked for his X-Box and games.
4/4/2011	C/C	I met with Nurse Robinson and David to review the discharge plan. David is being discharged with a

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		<p>temporary splint/air cast. She provided name and contact information for the orthopedic surgeon, Dr. Land, scheduled to see David on 4/6/2011 at 9:00 a.m. She explained to David and me that David had a complete fracture with multiple fragments. The surgery will reattach the bone together with wires or pins. Nurse Robinson gave me two doses of pain medication for David and explained how they should be administered and possible side effects. She stated the pain medication David received in the emergency room will be wearing off by early evening and suggested the prescription for pain medication be filled to avoid discomfort.</p>
4/4/2011	H/V	<p>David and I visited on our ride to his aunt's home. David said he didn't want to talk about how he got hurt. David was tired and said he couldn't believe his dad just took off without even a word. He asked if his mom knew about all this, and I let him know I tried calling her and would keep trying. I let David know it's been a long day for everyone, and I would make every effort for him to see his dad soon.</p> <p>I also discussed the abuse incident with David and asked him how he felt about having a visit with his dad. David indicated that he wanted to see his dad and was not afraid of him, but did not want to talk about the situation with him right now. I assured David that a plan would be worked out to have the visits at the agency first so that he would be okay. I let him know that I would help to find a counselor for him and his father to talk to separately. David appeared to be fine with that plan and reiterated that he was not afraid of this father.</p> <p>I placed David with Jackie and Mark Wright. Jackie and David hugged David when we walked in. The Wrights' twin girls, age 3, lit up the moment David went over to greet them. Jackie and the girls took David to the extra room to settle him in. Mr. Wright let David know he was going to grandma's house to get his things, including the X-Box, games, and backpack</p>

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		for school. David said to say hi to his grandma and to let his grandma know he was going to be okay. I told David that I would follow up with him soon.
4/4/2011	T/C	Contacted Madison Elementary School. Notified the school that David Clement came into foster care yesterday. Jackie and Mark Wright are already listed as emergency contacts for David, and the school had all necessary information. School counselor will inform David's teacher. David is an average student. He is not receiving special education services. The counselor reports that he hasn't had any reports of serious issues about David, but does know the teacher has challenges with his behavior. The teacher reports David's behavior is disruptive in the classroom at times, and it takes him an extended amount of time to complete assignments. David does not have any attendance issues.
4/5/2011	H/V	I attempted to make a home visit with Jennifer Clement this morning at her parent's home. No one answered the door after my repeated knocks. Left copy of Notice of Custody in the mailbox on the porch.
4/5/2011	H/V	I visited with Louise Clement at her home. Collin Clement was at work. Ms. Clement is 55 years old and the mother of four grown children. Ms. Clement was a single parent and raised her children alone and with little support from fathers. Her adult children all live in town. She said that she relies on Collin the most, but that her daughter, Jackie, is a help as well. She says she has suffered with diabetes for the past 10 years. She also has high blood pressure and neuropathy makes it hard for her to do much due to pain and the tremor she has developed. Ms. Clement stated sometimes it is stressful listening to Collin and David bickering. At times she stated she used to intervene and side for David, but she doesn't have the strength anymore. I asked Ms. Clement to tell me about David's injury. Ms. Clement stated she really

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		<p>didn't know what happened because she spent most of the weekend in bed. She said, "I know a few days ago, Collin was mad at David because of a call from the school that he was acting up and not doing his work. Collin and David have their squabbles."</p> <p>Ms. Clement stated, "Collin and David have lived here for quite some time. David's mom is a sweet gal, but she suffers depression. David loves his mom, and I am glad Collin doesn't bad mouth her. It is a sad situation, but we do the best we can."</p>
4/5/2011	T/C	<p>I spoke with David's teacher. Ms. Lopez stated David is an average student. She said he is everyone's friend, and no one's close friend. She has challenges with his behavior. He can be easily distracted and distracts others, so she sends him to the principal's office several times a week. Lately, David has had difficulties completing tasks assigned, and she isn't sure if it is related to things at home. He can be hyperactive at times and have a difficult time focusing, possibly because of his high energy level. David also leaves books or materials at home needed to complete assignments at school. Ms. Lopez knows David lives at home with his dad and grandma. Ms. Lopez overheard David telling a classmate he thinks his grandma might be dying. Ms. Lopez says that she suspects that David is doing his best to maintain at school, but is really struggling with his behavior and work. She shared her concerns with the school counselor earlier in the school year and suggested an evaluation for an IEP to assess David's needs for learning supports.</p> <p>Mom and dad both attended the most recent parent/teacher conference together. Mom's affect was flat, and she said very little, but David was happy his mom attended. She has observed dad being rather harsh in his interaction with David when he picks him up after school. David often dilly dallies and keeps dad waiting.</p>

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4/5/2011	O/V	Legal Staffing: Affidavit and petition prepared. Emergency petition filed at 3:30 PM and within 2-day time period prior to expiration of emergency hold. Judge signed ex parte order and set hearing for 4/11/11 at 1:00 PM
4/5/2011	mail	Sent letters to Collin and Jennifer Clement advising them of continued custody and upcoming initial custody hearing scheduled for 4/11/11 at 1 p.m.
4/5/2011	T/C	Telephone calls with Collin Clement and Jackie Wright to let them know the FTM is scheduled for 4/11/2011 at 9 a.m. I also let them know the District Court Judge signed an ex parte order, and the hearing is scheduled for 4/12/11 at 1 p.m. Collin is scheduled to visit with David at the Department today at 4 p.m., and this worker will supervise.
4/5/2011	O/V	Collin visited with David at the Department. This worker supervised the visit. David did not attend school today. David and his dad interacted minimally. They watched some videos on Dad's phone and laughed. David asked when he could have a phone, and Dad did not respond.  I let Collin and David know that we'd be having a FTM on 4/11/11 in the morning and that we'd have an initial custody hearing next day in the afternoon. David asked about his grandma, and Collin let him know that she was ok. David said he wanted to see his grandma and asked if I got ahold of his mom yet. I let David know that I would work on making arrangements for him to see his grandma. I also let him know that I had not been able to contact his mother.
4/6/2011	T/C	I spoke with Jackie Wright. Ms. Wright worked graveyard shift last night, but made it a point to take David for his orthopedic appointment. Dr. Land examined the x-rays and CT scan and took a look at David's arm. Swelling has come down considerably, and Dr. Land will be scheduling surgery for tomorrow

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		or Thursday. He will likely reattach the bone with both wires and pins and indicated David would need physical therapy for what appears to be some nerve damage associated with the fracture. She will let me know when appointment for surgery is confirmed.
4/6/2011	T/C	Ms. Wright phoned to confirm that David's surgery is scheduled for tomorrow, 4/7/2011, at 1 p.m. Mr. Wright will be taking David for surgery because she will be taking the girls for follow-up appointments for asthma. She asked if I could be in touch with Collin to share this information, and I let her know I'd phone him. I let her know that I would be at the appointment if Collin would be there.
4/6/2011	T/C	Spoke to Dr. Land's office. Notified the office that David Clement was in the custody of the state. I let the office know that I would be present tomorrow to complete required paperwork.
4/6/2011	T/C	I spoke with Collin Clement to advise him about David's scheduled surgery. Collin said he was scheduled to work and would not be able to be there.
4/6/2011	T/C	I attempted phone contact with Jennifer Clement again today, and maternal grandfather answered. I asked Mr. Kolbe to please have Jennifer be in contact with me as soon as possible about her son. He indicated his daughter was not doing very well with her depression, and he would give her the message.
4/6/2011	mail	Sent letters to Collin and Jennifer Clement inviting them to FTM at Department on 4/11/11 at 9 a.m. Letters ask that they bring any family, etc., that will be of support to them in planning services.
4/7/2011	O/V	I went to the hospital and met with Mr. Wright and David to assist with completion of intake for surgery. David was nervous, and Mr. Wright made efforts to make David feel comfortable. The intake was completed, and David was prepped and taken in for surgery. While waiting, Mr. Wright shared that it's

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		<p>been an adjustment having David with them. He stated, "David is a tall order, but we love him. We may need some help with transportation for appointments. It just so happened that I was able to take off today, but that's not always going to happen, and Jackie usually sleeps some because she works nights now." David's surgery went well, and he was discharged with a follow-up appointment scheduled for tomorrow, 4/8/2011, at 2 p.m.</p>
4/7/2011	T/C	<p>Spoke with School Counselor to advise that David had surgery today. I asked for assistance in getting David's school work together so that I might pick it up for his completion at home. David will not be attending school for the rest of this week. School Counselor advised that David had a dental screening at school and follow-up appointments need to be scheduled with his dentist for three fillings. School Counselor also confirmed that David's teacher, Ms. Lopez, raised concerns about his behavior and proposed an evaluation to determine if David would benefit from an IEP. I told her that the agency would support their decision to have David evaluated for an IEP because of concerns about his performance in school.</p>
4/7/2011	T/C	<p>Spoke with Collin Clement to advise him that surgery went well for David today. I shared that it was day surgery, and the bone has been both wired and pinned, and the arm is in a cast. A follow-up appointment is scheduled for tomorrow at 2 p.m. Mr. Clement asked if he could visit his son tomorrow about 4:30 when he finished work. I confirmed a visit for father and son at the Department. Mr. Clement said that he missed his son and could not wait to see him. I attempted to discuss the incident involving David with him, but he stated that he wanted to work things out with a counselor. Mr. Clement acknowledged that "something" happened in anger and he definitely regretted it. He assured me that he understood why his visits would be supervised until</p>

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		he can get some help with his temper.
4/8/2011	T/C	Attempted phone contact with Jennifer Clement. Maternal grandpa said he gave Jennifer last message. He stated she showed him the letter about FTM and confirmed he will be attending and bringing her. He said he will also take her to court hearing. I asked Mr. Kolbe about relatives for purposes of possible placement and to make sure David stays connected to maternal family. Mr. Kolbe stated that his son, Sam, is Jennifer's only sibling, and he's got a pretty demanding job.
4/8/2011	T/C	Jackie Wright called to brief me on David's follow-up appointment this afternoon. Collin did not show up for the appointment. Dr. Land says David can go back to school on Monday. Stitches are scheduled to be removed on 4/22/11, at 3:30 p.m., and they will replace the cast at that time. After casting is complete, Dr. Land will be recommending physical therapy. Ms. Wright stated they will definitely need assistance with remaining appointments for David because it will be difficult to juggle his appointments with the appointments she has for the twins along with work. I told Ms. Wright that I would begin working on a plan for support with transportation. I also let Ms. Wright know that the upcoming FTM scheduled for 4/11/11 at 9 a.m. will be a good time for this discussion. Ms. Wright confirmed that she and Mark will both be attending the FTM.
4/8/2011	O/V	Father and son visited at the Department. Dad teased son about being bionic now with pins in his arm. David snickered. Dad asked David if he was doing schoolwork at home. He told him he better be treating his aunt and uncle and the girls right. David seemed to disregard the statement and said he was going to do some schoolwork this evening. Dad told David he was sorry he couldn't be there for his surgery and appointments as he had to work. He knew Aunt Jackie would be there for him. This worker met with

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		David following the visit to talk about case planning and the upcoming FTM. I asked David if he had ideas about he'd like to see happen for himself and his family. David stated he wants to go home and get along better with his dad. He wants to do better in school and he'd like to be in sports. David also said he'd like to spend more time with his mom.
4/10/2011	O/V	Investigation substantiated. Risk and safety assessments were completed 4/4/11 showing the child at high risk and unsafe. Filed to retain custody and hearing is scheduled for 4/12/2011 at 1 p.m. Met with supervisor to plan for FTM that is scheduled for tomorrow at 9 a.m. Case will transfer to foster care services at completion of FTM.
4/10/2011	Supervisory staffing	This worker completed Initial Assessment and draft Initial Assessment Case Plan for FTM and court hearing. Reviewed with supervisor.
4/11/2011	FTM	Family team meeting held this date. In attendance: David Clement, child; Collin Clement, father; Jennifer Clement, mother; Sam Kolbe, maternal grandfather, Sam Kolbe, Jr., maternal uncle; Louise Clement, paternal grandmother; Phil Clement, paternal uncle; Jackie and Mark Wright, paternal aunt and uncle/relative placement; Michael Stout, Investigation Worker; Sarah Niles, Investigation Supervisor; Timothy Riggs, Foster Care Worker; and Sara Perry, Foster Care Supervisor. This worker facilitated discussion centered on moving forward with next steps for visitation, ameliorating risk, and enhancing safety and next steps to focus on reunification of David with his father. Discussed current placement and explored whether other relatives might be available if needed. Sam Kolbe, Jr., indicated he'd love to be able to provide care for David, but he is single and a fireman and often stays at the fire station. He asked if he might have visitation. This worker asked about other maternal relatives. Mr. Kolbe, Jr., shared that he is Jennifer's only sibling. I

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		<p>asked about other extended maternal family. Mr. Kolbe, Sr., stated the only other family they have do not live in town. He has two sisters that live in other states and that they had been close when the children were little, but drifted apart as the kids grew and moves occurred. He also stated that his kids really did not form relationships with cousins that lasted past childhood due to the distance. Mr. Kolbe shared that on his wife's side of the family, her three siblings have passed away. Maternal relatives will not be a viable placement option. Phil Clement said he is unable to provide care for David because he and his wife have their hands full with their own children. He, too, wants to maintain contact with David. See Initial Assessment Plan in case record. Informed family that case would transfer to Timothy Riggs and his supervisor, Sara Perry, after the initial custody hearing.</p>
4/12/2011	Initial Custody Hearing	<p>Initial custody hearing before Judge Gene Sanchez. Mother did not appear, but was represented by her court-appointed attorney. Collin Clement attended and was represented by his court-appointed counsel. David's GAL, Nancy Richards, was present. Court granted continued custody to the Department. The Initial Assessment Case Plan was ordered and signed by parties. Mother's attorney signed for mother. Adjudication and disposition hearing scheduled for June 3, 2011. Collin Clement was court ordered to complete a psychosocial assessment. Jennifer Clement was ordered to complete a psychological evaluation. David Clement was ordered to complete a behavioral health assessment. All parties were ordered to follow up on recommendations. The Department was ordered to facilitate all court-ordered items for the family.</p>
4/12/2011	New Worker Assigned-----	<p>Case assigned to Timothy Riggs, worker for ongoing foster care services.</p>

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4/12/2011	O/V	David had vision exam. 20/20 vision and no treatment required.
4/13/2011	T/C	Attempted phone contact with Jennifer Clement. Left a voicemail asking to meet her in the office or her home on April 15th.
4/14/2011	T/C	Jennifer Clement left this worker a voicemail to confirm that she is available to meet in the office tomorrow afternoon.
4/15/2011	O/V	Supervised visit between David and his father. Scheduled a time for visitation for next week. We had also scheduled a visit for David and his mother on this date; however, Jennifer failed to show for the visit.
4/15/2011	O/V	Jennifer Clement did not show up for her meeting today. This worker followed up with her by telephone an hour after the scheduled meeting. Ms. Clement stated that she overslept and would call back to reschedule their meeting. She also stated that she missed her son and wanted to work out a plan to visit him soon.
4/20/2011	T/C	Attempted to phone contact Jennifer Clement to schedule a meeting. Left a message with her father, Sam Kolbe. He assured that Jennifer would get the message. Mr. Kolbe mentioned that his daughter was tired and appeared to be "sad" all the time.
4/21/2011	O/V	Supervised visit between David and his father.
4/22/2011	T/C	Mark Wright, relative placement, called to request removal of David. Mr. Wright stated that in addition to the impact of having David living with them, they found the process for licensure overwhelming and cannot commit to the classes, physicals, and home study process. Mr. Wright stated he and his wife have talked it over, and they really hoped David would have been returned to Collin at the initial custody

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		<p>hearing. Work demands continue for Jackie, and their main focus right now needs to be on their twins. I told Mr. Wright that I had transportation supports in place that would help with their schedules. Mr. Wright stated, "It isn't just transportation; David is really testing us, and we're just not up for the challenge of keeping him until that June hearing or even longer." Mr. Wright took David to his follow-up appointment, and stitches are out. David was really acting out on the way to the appointment and embarrassed him with rude backtalk during the appointment. The doctor did say that it was healing nicely and scheduled a visit in 2 weeks to check progress. He stated he will give me all information so that it gets taken care. He apologized and said it is important for them to continue to have contact with David. He shared that he and Jackie have already had a conversation with David about him going to another home. I asked if they'd be comfortable with removal on Monday, and Mr. Wright agreed.</p>
4/25/2011	H/V	<p>I visited the Wright family and David at the home after school today. David was all packed for new placement. When I entered the home, he stood up and said, "I'm all set, let's get going." David then grabbed his duffel bag and walked out onto the porch. Jackie Wright went after him and gave him a hug and said she hoped he would agree to stay in touch with them and to visit them. She explained the girls needed a lot of attention, and work was hard for her. David nodded and walked to my car with bag in hand. Mr. Wright carried a box with other belongings to the car and said goodbye to David. On the way to the Thompson foster home, David stated that he wants to visit with his aunt and uncle even though it was too hard for them to keep him.</p>
4/25/2011	H/V	<p>David was placed Maria and Daniel Thompson, licensed foster parents. The Thompsons have no other children in the home. They showed David to his room and began settling him in. I let the Thompsons</p>

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		know there is no school tomorrow for David due to an in-service training for school staff. David has an appointment for his behavioral health assessment tomorrow at 9:30 a.m. at Town Center Psychiatric Associates (TCPA). I will meet them there for the appointment to assist with the intake. David will remain in his same school, and I will meet David and the Thompsons at the school on Wednesday so that they might meet his teacher and the counselor. I shared a calendar with Maria Thompson detailing David's physical therapy appointments and schedule of visitation with parents.
4/26/2011		David completed the behavioral health assessment today. TCPA will send the report with recommendations to me in the next week or so. David also completed a physical today with no issues to address other than those for his arm.
4/28/2011	O/V	Supervised visit between David and his father. Mr. Clement showed genuine concern for David and asked about how it was at the new foster home for him. At the end of the visit, I was able to introduce Mr. Clement to David's foster family. The Thompsons and Mr. Clement talked for a quite a bit, and Mr. Clement was able to share with them some of David's likes and dislikes. Mr. Clement asked the Thompsons to good care of David until he could get David back home.
4/29/2011	H/V	I attempted an unannounced home visit with Jennifer Clement, but there was no answer. Left a note and contact information in an envelope for Ms. Clement.
5/2/2011	T/C	Received call from TCPA letting me know that Jennifer Clement completed a court-ordered psychological evaluation today at their facility. TCPA will send the report with recommendations.
5/3/2011	T/C	Call from TCPA with verbal report on David Clement's behavioral health assessment. Assessment showed that David is successfully managing trauma related to

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		<p>his entry into care. However, he has been diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). This diagnosis is in line with David's difficulty staying focused and paying attention, difficulty controlling behavior, and hyperactivity (over-activity). David has a combined type of ADHD, wherein he is hyperactive, impulsive, and with some inattentiveness.</p> <p>Recommendation is for David to begin a minimum dose medication regimen of Quillivant XR. Report recommends close monitoring to establish whether this stimulant medication regimen is effective for David. TCPA has called this prescription into the pharmacy for pick-up so that David can begin taking medication today. A med-review appointment is scheduled for 5/17/2011, and it is recommended that foster parents keep a journal noting David's behavior, appetite, mood and sleep. It is recommended that David attend 3-6 sessions of individual counseling to explore his relationship with his father, to be followed by a parent coaching program as appropriate and needed with his father.</p>
5/3/2011	T/C	<p>This worker spoke with Maria Thompson to share David's behavioral assessment findings and recommendations. Ms. Thompson will pick up the prescription so that David can start taking it. She confirmed that she will keep a journal starting today to note any physical differences in appetite and sleep patterns along with behavior and mood changes. She has the 5/17/2011 appointment on her calendar. Ms. Thompson will let David's teacher know about medication and ask her to note any differences.</p>
5/4/2011	T/C	<p>Call from TCPA confirming that Collin Clement completed his court-ordered psychosocial assessment today at facility. TCPA will send the report with recommendations.</p>
5/4/2011	H/V	<p>I picked David up at school after a brief visit with his teacher, and we drove to Dairy Queen for ice cream. I asked David how placement was going, and he said it</p>

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		<p>was OK. He said, "It's kinda weird getting used to a new place where I am not related." I asked him about school, and he didn't offer much information. We continued our visit at the office, and David asked me if the meds he is taking will zonk him out like his Mom. I assured David that his medication is not like what his mom has taken. I explained his diagnosis to him, and he seemed to be all right with continued meds to see if there would be a difference in his behavior. I talked with David about the case plan. David asked if the meds will help him with his school work, and I let him know that we would all be monitoring it and hope it will help him focus more easily on tasks. David seemed pleased and said he really wants to get into the spelling bee and there's a science project he has ideas about. David stated he wants to go home and get along good with his dad. I explained to David that the evaluations completed will help his family get services so that he can go home and be safe.</p> <p>We arrived back at the Thompson home, and the four of us met together. Mr. Thompson asked David if he might be interested in joining baseball. David said he always wanted to join baseball, but he didn't want to bug his Dad for the money. He asked if his arm will be healed and out of the cast by the time summer baseball starts. Mr. Thompson said they will talk with the doctor when they go for the follow up on Monday.</p>
5/6/2011	T/C	<p>Maria Thompson phoned to share that they are hopeful they will see a difference in David. The nurse that gave her the script at TCPA said we'd likely see differences in about 2 weeks, but he already seems more focused and less flustered with limits set for him. Yesterday he was assigned a weekend science project, and that will be a test regarding his ability to stay on track. His appetite and sleep don't appear any different. Ms. Thompson will follow up with TCPA to schedule David's first counseling session.</p>
5/9/2011	T/C	<p>Call from Mr. Thompson. Had follow-up with surgeon.</p>

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		<p>Removed old cast and x-rayed. Arm healing nicely. Re-casted. Mr. Thompson said that David will need to have cast 2 more weeks and then should be done. Doctor recommended physical therapy to start after out of cast. David was thrilled that doctor said that he didn't see a problem with David participating in baseball summer league in June. Mr. Thompson will be taking David to register for the summer league later this week.</p>
5/10/2011	T/C	<p>Phone call with TCPA following David's first individual counseling session. Foster parent, Maria Thompson, sat in on first portion of the session to provide intake information. Counselor was pleased to hear that David will be involved in baseball. Items discussed in session with both David and foster parent included:</p> <ol style="list-style-type: none"> <li>1. Setting fair, clear, and consistent expectations, direction, and limits</li> <li>2. Following a regular (while not rigid) schedule and limiting distractions</li> <li>3. Acknowledging success and positive behavioral choices</li> <li>4. Creating a home system to help David stay on schedule with regard to school work and projects</li> <li>5. Establishing a regular feedback loop with David's teacher</li> <li>6. Discussing how David and foster parents can stay calm during disagreements</li> </ol> <p>Next session scheduled for 5/16/2011.</p>
5/11/2011	T/C	<p>Jennifer Clement called this worker and stated that she can visit this afternoon. I offered Ms. Clement assistance with transportation, and Ms. Clement declined. Ms. Clement will come to the office for the meeting.</p>
5/12/2011		<p>Jennifer Clement did not show up for the meeting yesterday afternoon. She left a message to apologize</p>

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		and stated that her transportation plans fell through.
5/17/2011	T/C	<p>Spoke with Maria Thompson. Individual counseling session for David held yesterday, but she was not a part of today's session. David reported to her afterward that they played a game about feelings. Next session scheduled for 5/24/2011. Discussed David's medication review appointment at TCPA. This medication and current minimum dosage seems to be working for David, so TCPA is prescribing a Quillivant XR patch for time-released dosage.</p> <p>Ms. Thompson has been in touch with the school, and teacher has seen improvements in his ability to focus. He is now responding positively to her classroom system of rewards and consequences. This was previously very frustrating for David.</p>
5/24/2011		<p>Received Jennifer Clement psychological evaluation. Ms. Clement has a diagnosis of major depressive disorder. Ms. Clement has received TCPA services intermittently for years. Previous treatment included Prozac regimen and individual counseling. Ms. Clement's compliance with meds and counseling were sporadic at best. This evaluation/report recommends combination therapy in the form of a prescription for Symbyax. This medication has been effective with treatment-resistant depression. Since TCPA is familiar with Ms. Clement, report recommends an in-home monitoring component to ensure medication compliance and consistent counseling sessions. TCPA has a new in-home monitoring program, and she is a good candidate.</p>
5/24/2011	T/C	<p>Maria Thompson called to say David had an individual session after school today at TCPA. The counselor told her that David's individual sessions are over, and he and his Dad will begin the parent coaching program on Monday, May 30, 2011.</p>
5/25/2011	T/C	<p>Called Jennifer Clement and left message re: scheduling a home visit. Ms. Clement returned call</p>

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		and left a voicemail to say that she will be home for a visit on May 27 <sup>th</sup> in the evening.
5/26/2011		Received psychosocial assessment report on Collin Clement. He disclosed that he had physically abused his son. Mr. Clement is enduring chronic stress as the result of family- and job-related events and demands. He admits this chronic stress results in anxiety. He eats poorly and has gained weight, has digestive problems and sleep problems, and admits to memory and concentration impairment. Mr. Clement would benefit from assistance in reducing stresses associated with caring for his mother. The report recommends short-term therapy, an intensive and structured parent coaching program with his son, and time for exercise and/or socialization. The next wave of their parent coaching program begins on May 30, 2011.
5/26/2011	O/V	<p>Collin Clement came by office this afternoon to review results of psychosocial assessment. Mr. Clement stated, "By now you've heard that I hurt David." I let Mr. Clement know that the report discussed the injury and his chronic high level of stress. We spoke at length about the physical abuse incident. He stated that he had found himself at the end of his rope and expressed deep regret about hurting David. Mr. Clement was choked up and said, "I can't even believe what I did. I feel so bad." He went on to say he had never hurt David like this before. He said he typically yelled a lot at David and would swat him. Mr. Clement shared the major stressors in his life, citing his mother's health, work and finance issues, single parenting, and sadness about Jennifer Clement's inability to be there for David. Along with disclosure of the abuse, Mr. Clement said he recognizes he needs help and that he is ready to do "whatever it takes to get David back."</p> <p>I told Mr. Clement that I looked forward to helping him reduce some of the stressors in the home. I asked if he and his mom may be open to the idea of a home</p>

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		<p>health program that she could access with her Medicare. I also suggested Meals on Wheels and the Senior Center for Ms. Clement to help make sure she is eating well and engage her in some activity. Mr. Clement stated, "All that sounds good and might even give me some time to hit the track or something and work on my own weight. I hope you don't hold it against me that I hurt my son." I assured Mr. Clement that we will move forward with services so that David can return home.</p>
5/27/2011	H/V	<p>I visited with Jennifer Clement at her home. I thanked her for following through with the psychological evaluation. She said she hoped this new psychological evaluation would get her back on track. She talked about previous attempts with meds and counseling and how difficult it is to concentrate. Ms. Clement says she feels sad most days. She wants to be in touch with David. She is thin, and when I asked about her diet, she stated she often doesn't feel like eating. She says she suffers from insomnia and has little energy during the day. Ms. Clement says she has felt worthless and guilty for a long time and wants to get better. I reviewed the evaluation recommendations with her, and she is amenable to begin a new course of treatment.</p> <p>We then shifted our discussion to David. I explained to Ms. Clement that because of her circumstances, the Department will be focusing work to reunify David with his father. I clarified that it is important to David, the Department, and the court that services be provided that will strengthen her ability to be a parent to David even though he does not live with her. We talked about visits with David, and she said she just feels ashamed asking her dad for rides. I told her I would look into bus passes, and she thanked me. Ms. Clement stated she understood that she hasn't been in any position to bring up David, and she wants to get better so she can be a mom to him. I let Ms. Clement know that I would work with TCPA to arrange for services for her. Ms. Clement stated that</p>

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		<p>she wants to follow through with TCPA this time. I then shifted the discussion and asked Ms. Clement if she was a member of or eligible for membership in a federally recognized Indian Tribe, and she replied no. I also asked Ms. Clement about maternal relatives. Ms. Clement said Sam Kolbe, Jr., is her only brother, and he practically lives at the fire station. She mentioned that when she was a child, she was close to one of her dad's sisters, but lost touch when the aunt moved away, I asked Ms. Clement if she was close to any cousins or any other extended family, and she indicated she was not. Ms. Clement asked me to please see about David visiting with his Uncle Sam because "he's a good, strong example for David." I told Ms. Clement that once her visits were happening regularly, we could look at inviting Sam to some of the visits. Ms. Clement said she liked that idea.</p>
5/30/11	T/C	<p>Call from TCPA to confirm that David and Collin Clement attended the first session of their structured parent coaching program. Sessions will be held approximately every 2 weeks with homework in between.</p>
6/1/2011	Case Planning Meeting	<p>Case planning meeting held with mother, father, and David in attendance. Supervisor Sara Perry was also in attendance. Reviewed Initial Assessment Plan and noted mom has completed psychological evaluation. Dad has completed his psychosocial assessment. Visitation for Dad has occurred as per plan. Dad visits once a week at the Department. Visitation for mother has not occurred. Mom has missed all scheduled visits as she says transportation has been an issue. I has now provided her with bus passes. This worker, the parents, and David developed the case plan together. Supervisor approved the plan for presentation to the court.</p>
6/1/2011	H/V	<p>I visited with Maria Thompson and David at the foster home. David's GAL, Nancy Richards, came by to visit</p>

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		<p>earlier in the day. I met with David alone in his room. David said it was kind of cool to know he had an attorney, and he likes talking to Nancy Richards. He shared that he told Ms. Richards he wants to go home and live with his dad and grandma. I asked David if he felt safe visiting with his dad. David stated that even if his visits were not at the Department or with someone watching, he is not scared of his dad. David said his dad "lost it" the day he broke his arm, but that doesn't mean he is scared of him. David said he wants to see his mom more now that she is back on her meds. He wants to do better in school and shared that there's a tutor program his teacher wants him to get into that happens during the lunch hour. Ms. Richards visited with Ms. Thompson briefly to get a sense of how the placement is going. David showed me that Ms. Richards gave him a business card in case he ever wants to talk with her. I asked David how it was going living with the Thompsons. He replied, "Maria and Daniel are cool." I asked him if he felt safe, and, without hesitation, he said, "Sure I feel safe; they are good people, and I am used to being an only child."</p>
6/3/2011	Adj/Disp	<p>Adjudicatory and Dispositional Hearing held this date. Mother attended and was represented by counsel. Collin Clement attended and was represented by counsel. David was present in the courtroom and represented by his GAL, Nancy Richards. Mother and father both stipulated. The Department will focus on reunification efforts between Collin and David Clement. The Department will also focus on providing services to the mother to strengthen her relationship with David. David Clement was adjudicated abused and neglected. Parties agreed to case plan and signed at hearing. Safety and risk assessments were completed in anticipation of the hearing. Please see file. Court report and case plan reviewed and adopted by court.</p>
6/6/2011	T/C	<p>TCPA staff called to confirm that Jennifer Clement</p>

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		completed her intake process today. Jennifer was administered Symbyax. Her individual sessions are set to begin on 6/20/11. The in-home monitoring program begins tomorrow, and she will be administered medication daily with documentation of how the meds seem to be working for her.
6/6/2011	H/V	I visited with David in the foster home. In conversation, I reviewed the case plan with David, and he said he really hoped his mom could get better. We talked about the parent coaching program, and David liked the idea of doing the sessions with his father. David seemed eager about the parent coaching program and said he wants to work on acting better so it can be all good when he goes home.
6/13/2011	T/C	TCPA staff called to confirm that David and Collin Clement attended second session of parent coaching program. Father and son are working on formulating their own goals that focus on dad's practical strategies to help with parenting and gaining more enjoyment in parenting. This program helps parents discover their own answers while providing family support and guidance. David liked the ideas presented about helping his dad slow down and enjoying time together more. David asked if his dad could come to his upcoming baseball games, and TCPA staff advised they'd relay the request to the Department. I learned that TCPA will also be recommending increasing visits consistent with father and son participation in the program. TCPA can provide supervision for additional visits and gradually adjust the amount of supervision during visits based on progress in the parent coaching program. TCPA will provide verbal and written documentation of visitation. I let TCPA staff know that Mr. Clement could attend David's baseball games.
6/13/2011	Supervisory Staffing	I staffed the case with my supervisor to share information from TCPA about the parenting coaching

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		program and visitation. Supervisor concurred with father attending David's upcoming baseball games and also approved additional visitation at TCPA. Visitation between father and son will increase gradually to include visits at the Department and visitation at TCPA that will increase commensurate with progress in the parent coaching program.
6/19/2011	T/C	I spoke with Jennifer Clement today in anticipation of her first counseling session tomorrow. I asked her how the in-home monitoring was going, and she responded, "So far, so good." I offered her transportation to go to the session, and she indicated the program would be picking her up for the session.
6/20/2011	T/C	TCPA called to confirm that Jennifer Clement attended individual counseling today. Next session scheduled for July 7, 2011. TCPA staff stated that their focus in today's session was in formulating goals with Ms. Clement. Ms. Clement expressed that she wants individual counseling to concentrate on addressing her depression in order to strengthen her relationship with her son. She appears committed to the medication therapy and accompanying, in-home monitoring program. She expressed that she is hopeful with this new monitoring component because this was never offered in past treatment.
7/5/2011	T/C	I visited with David at the foster home this morning. He shared that 4 <sup>th</sup> of July was a fun day spent at the park with Thompson family. I let David know that I thought it was a good idea for his dad to attend his baseball games and would get the schedule from Mr. Thompson and share it with his dad. David appeared happy and upbeat.
7/6/2011		Jennifer Clement and her father visited with David today at the Department. Grandpa brought some dice, and they played Farkle and ate popcorn. Ms. Clement made visible efforts to be attentive to David. She told David that she is in counseling again. She also told him she knows he will be going home with

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		his dad, and she wants to be a better mom and be there more for him. David hugged his mom and said, "I love you, Mom."
7/7/2011		TCPA called to report that Jennifer Clement was not home when in-home monitor went by to administer meds and give her ride to today's session.
7/8/2011	T/C	I spoke with Jennifer Clement. She explained that yesterday she went with her dad to an eye appointment, and it took longer than they anticipated. I asked if she had followed up to make a new appointment, and she said she would do that today. She thanked me for the recent visit with David. I let her know I could arrange for another visit on 7/20/11, and she said she would try a bus pass for that day.
7/11/2011	T/C	TCPA called to report that Jennifer Clement attended individual counseling today. In-home monitoring program is continuing. Ms. Clement inquired about the possibility of parenting sessions once she makes enough progress with individual counseling. TCPA shared information with Ms. Clement about the positive parenting program and other groups currently underway.
7/2/2011	T/C	I spoke with Jennifer Clement. I shared that TCPA is reporting progress in the monitoring program, as well as counseling sessions. Ms. Clement stated that in the past when she began feeling better with meds, she would begin not taking them resulting in sliding back into depression. She expressed that she is hopeful about the in-home monitoring component and that she likes the woman, Paula, assigned to her. She provides the medication to her and then spends time tracking feelings, reviewing her goal to be a better mom, and they have even begun working on a vision board. I encouraged Ms. Clement to continue with the program and scheduled another visit for her with David. I also encouraged her to call David at the Thompsons as another way to stay in touch.

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
7/13/2011	H/V	I visited with Collin Clement at his home this afternoon. We talked about visitation, and he asked how the visit between David and his mom went. I let him know it went well. Mr. Clement stated he knows David needs his mother, and he hopes she continues with the meds and counseling for David's sake. Mr. Clement and I talked about the parent coaching program. He really likes the information about how to enjoy his son.
7/20/2011	O/V	Jennifer Clement and David visited today. She brought David potato chips and coke. They found a puzzle on the bookshelf in the visitation room and worked together to complete the puzzle while talking about the heat and baseball. After the visit, David asked me if he could possibly see his mom more. I let him know I would work with his mom so they could see one another more often. I also shared that his mom might also see about bringing his Uncle Sam to visits. David said he sure would like that.
7/25/2011	O/V	I attended the last portion of the parent coaching session with David and Collin Clement today. The session centered on Mr. Clement practicing new skills for managing David's behavior when he doesn't accomplish tasks. David seemed to enjoy role-modeling situations where he was not doing what he was told. Father shared that it feels a little artificial using new skills. The coach reinforced both father and son and said that with time and practice it would come automatically. Mr. Clement shared that he notices a change in David now that he is on meds. Mr. Clement shared he really enjoyed going to David's game. TCPA staff provided supervision for an hour visitation following this session.
7/27/2011	T/C	TCPA called to report continued progress for Jennifer Clement today. Following her individual counseling session today, Ms. Clement attended an informal parent group get-together. Ms. Clement is making marked progress as the result of the in-home

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		monitoring component.
8/1/2011	H/V	I facilitated a visit for David's birthday. Collin Clement, Louise Clement, the Thompsons, David, and I met at Pizza Hut. I gave David a birthday card from his mother. I visited with David and the Thompsons in the home afterwards. I also spoke with David alone in his room. He was upbeat. He likes the parent coaching meetings, and he is happy with baseball.
8/2/2011	T/C	Maria Thompson called to share that Jennifer Clement called David last night to wish him happy birthday. David also spoke with his grandparents and his Uncle Sam. David thanked his mom for the card and was happy to talk with her on the phone. David is looking forward to seeing her later in the week.
8/8/2011	T/C	TCPA called to confirm that Collin Clement and David attended parent coaching session. Father and son visited following the session with TCPA staff supervising. Visit was for an hour and half.
8/10/2011	T/C	Attempted a telephone contact with Jennifer Clement to schedule a meeting and visit with David. Left a voicemail message requesting Ms. Clement return my telephone call.
8/29/2011	T/C	Maria Thompson called to share that David attended parent coaching session at TCPA today. She also reported that Mr. Clement attended David's game. They sat with one another in the stands, and all went well. Wednesday, August 31 <sup>st</sup> , is the last game. Ms. Thompson says they've planted the seed with David about signing up for soccer because she feels physical activity makes a big difference.
8/30/2011	T/C	Left voicemail messages for Collin Clement and Jennifer Clement to provide details about back-to-school night on September 7 <sup>th</sup> at David's school. I encouraged both parents to attend as it would be a great opportunity to connect with David's teachers

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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		and to learn about his classroom experience.
9/8/2011	T/C	Teacher called to report parents and foster parents attended back-to-school night with David. David enjoyed the science activities at different tables and the ice cream. David, Mr. Clement, and Mr. Thompson enjoyed the gravity science demonstration.
9/9/2011	H/V	Home visit with David today. I brought David a new backpack and supplies, and he was thankful. He likes his teacher. David was happy that both mom and dad went to school last night. David shared that the parent coaching program is fun because his dad is trying out different ways of talking with him, and sometimes they laugh a lot in the session. I asked David if he felt safe with his dad. David reiterated that he was never scared of his father. He said, "Now that we're in this program, my dad is cool. He told me in a visit one day that he really felt bad about my arm, and he was super stressed out." David said he and his dad like the coaching program, and his father tells him things will be good when he goes home. David and I talked about school, his view on visits with his parents, his ADHD meds, and generally how he is getting along at school with peers and when things don't go his way. David stated that he never thought he had needed meds, but he feels like the med patch has been a change for the better. He stated, "Sometimes kids at school would call me a jerk, and I probably was kinda a jerk. Now I can think a little instead of saying or doing stupid stuff." I asked David if he felt like he was getting along better at school, and he said, "Shoot, that's easy! I'm way better at school, and I have friends."
9/12/2011	T/C	TCPA called to confirm that Collin and David Clement attended the parent coaching session. The pair is doing well, and the coach has asked if they'd like to be mentors for a newly forming group that will begin in October. Mr. Clement stated he was interested.

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

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		TCPA staff intermittently supervised the visit following the session. TCPA recommends that all further visitation at TCPA be lightly monitored as there are no observed needs for supervised visitation.
9/20/2011	T/C	Spoke briefly to Jennifer Clement to schedule a visit. Ms. Clement is available to meet at TCPA after her counseling session with her therapist. I agreed to meet her there and confirmed a time.
9/22/2011	O/V	This worker met with Jennifer Clement at TCPA following her individual counseling session. TCPA therapist, Anthony Gonzales, Ms. Clement, and I spoke about her progress in treatment. Mr. Gonzales shared that Ms. Clement has made significant progress in addressing her depression. This headway, due largely to Ms. Clement's commitment to the in-home monitoring component, is now allowing for the space to address how she can strengthen her relationship with David. Ms. Clement recently joined an informal, positive parenting group and is interested in continuing conversations with others who face similar challenges. Ms. Clement stated that she previously felt isolated and embarrassed about her depression. She went on to say it gave her energy to see and talk with others that have similar issues. I encouraged Ms. Clement to continue working on her goal to strengthen her relationship with David.
10/3/2011	O/V	I visited with Mr. Clement in my office. Mr. Clement thanked me for making the connection for home health, Meals on Wheels, and Senior Citizen days with transportation for his mom. He shared that his mom likes the home health aide, and "It sure is a relief to have someone to help take care of her. She seems to like the food, and it's a good support for me to know that she's getting a meal when I am working." She doesn't so much like the idea of leaving home because it is so hard for her to get around, but she did share that recently she saw an old friend there, and they played Bingo.

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		<p>I let him know that TCPA confirmed his attendance at the parent coaching session last Friday. Mr. Clement shared that he likes the idea of being a mentor for the new group. He also shared that the videotaping allows him to see that he actually looks normal using the new skills because he still feels kind of uncomfortable with some of the strategies. Mr. Clement shared that he really did enjoy it when he was attending community college. He regrets that he couldn't continue with school and that so many things went bad for him. He said, "There's nothing I can do about all that now, and I just need to focus on this program and my life ahead. Maybe one day I can do some online school again."</p>
10/19/2011	H/V	<p>I visited with David in the foster home today after school. We met in his room, and he showed me some entries in a journal he was keeping for an English assignment. David has good writing skills. We talked about progress in the parent coaching program, and he says it is fun.</p>
10/24/2011	O/V	<p>I met with TCPA coach today to review the Clements' progress in the program. Coach Blea stated that David and Collin Clement have come a long way. What used to be very negative interaction is now replaced by a more comfortable interaction. He continued to share that he believes a melding of the program and David's medication for ADHD have proven to be good for their relationship. There are only two more sessions for the pair before successful completion. Coach Blea stated his report will reflect the gains made, and he looks forward to Mr. Clements' participation as a mentor for the next group. Kickoff for the new group will be on Wednesday night.</p>
11/14/2011	T/C	<p>TCPA called to share that Mr. Clement phoned to say he couldn't attend the parent coaching session today due to car trouble. Coach Blea met briefly with David and Maria Thompson. Jennifer Clement was also at</p>

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		TCPA and had just completed an individual session. She, David, and Maria Thompson visited briefly.
11/17/2011	H/V	I visited with David in the foster home today. We reviewed the case plan for the upcoming hearing. David asked when he would go home. I let David know that he and his dad were making good progress, and his return home could be discussed soon. I also let David know that based on positive progress, we were looking at his starting extended visits at his home. David said he really wants to go home, and he is glad he gets to talk with his grandma on the phone. He is excited to be able to go home and be with his grandma and his dad. He asked how soon he could start visiting at home, and I let him know we would be asking the court to approve these visits at the next court hearing. In addition to visits, we discussed school and generally how he felt as the result of his medication for ADHD. David stated that he feels like the meds "cool him down." He said, "I can chill out easier, and school work doesn't seem as hard as it used to be." David shared that before meds he felt like everything was coming at him at once. David seemed pleased to say his grades are better. He talked about having a friend he feels he can count on now.
11/25/2011	Case Planning Meeting	Case planning meeting held this date. Presented the updated case plan and reviewed court report with father and mother.
11/29/2011	Court Hearing	Judicial Review Hearing held this date. Based on progress, the District Judge approved the Department's plan to begin overnight visits in the father's home. The Department submitted a plan for full-day visits at the family home on December 10 and December 18, 2011. This worker will check in at random with the Clements on both these dates. On December 21, Mr. Clement will pick David up after school, and he will be on an extended visit until December 26. The Department will make random

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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Date of Contact	Type of Contact	Notes
		visits to the home during this time. The Thompsons will pick David up at the Clement home on December 26. He will remain with the Thompsons on December 26 and 27, 2011. I will take David to the Clement home on December 28, and he will visit until Sunday, January 1, 2012. David returns to school on January 3, 2012. If all goes well with trial home visits, David will be returned home on January 4, 2012.
12/5/2011	O/V	Attended the last session of parent coaching program with David and Collin Clement. We viewed a montage of videotaping that showed clear gains in Mr. Clement's ability to demonstrate a wide range of skills for managing David's behavior. Most notable in the review was a significant change in how the two interacted with one another. Father displayed an ability to have fun with David, and, when correction was needed, he showed new skills in being able to discipline David without yelling. After the video review, they gave each other a high five, and Mr. Clement said, "I think we nailed this, son." Collin and David Clement successfully completed the parent coaching program. Father and son continued with a 2-hour visitation at TCPA. They played ping pong and video games.
12/10/2011	H/V	I picked up David at the Thompson home and transported him to his home for day-long visit. Mr. Clement was waiting for David, and grandma made sure he knew his favorite cookies were on the kitchen table. I made an unannounced visit to the home mid-afternoon, and David was helping his Dad move furniture around so they could begin to think about getting a Christmas tree.
12/18/2011	H/V	I picked up David at the foster home for his day visit with dad and grandma. When I arrived, Jackie and Mark Wright and the twins were there. It was a little awkward at first for them since they had not seen each other since David's removal, but quickly they fell into easy conversation. David began playing with the

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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		girls, and Ms. Wright was beginning to make a crockpot stew for later in the day. I visited mid-morning, and David was outside with Collin and Mark. Collin was showing David how to change the oil on their vehicle.
12/19/2011	O/V	Supervisory staffing to review day visits at the home. Based on observed interaction and individual discussions with Collin and David Clement, this worker recommends that the extended visit proceed as planned. Supervisor approved.
12/21/2011	T/C	Collin Clement called me to confirm that he picked David up after school. They drove to the Thompson residence and got his clothing, X-Box, and games. I let him know that I would make random visits.
12/21/2011	T/C	Phone call from Maria Thompson to let me know that David and Collin Clement came by for clothing, etc. David was excited to be with his dad. They do not have plans during this visitation period and can be available if need be for any needs.
12/22/2011	T/C	Maria Thompson called to share that David called her. He said he was having a good time. She also spoke with Mr. Clement. He asked Ms. Thompson if they could continue to be in touch once the case was closed. She told him that she and Mr. Thompson would really like to stay in touch and see David.
12/23/2011	H/V	Dropped by Clement home with gifts and a food basket for the Clement family. David showed me a gift under the tree with his name on it. Grandma has not been well for the past 2 days and was in bed. Mr. Clement said her blood levels have been pretty high, and the doctor recommended an increase in insulin with a follow-up visit scheduled for December 26.
12/26/2011	T/C	Mr. Clement called to say he was taking his mom to doctor appointment, and David would be going with him. He contacted Maria Thompson, and they've

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

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Date of Contact	Type of Contact	Notes
		arranged for David to be picked up at 4 p.m. today.
12/27/2011	O/V	This worker arranged for Jennifer Clement, Sam Kolbe, Jr., Sam Kolbe, Sr., and David to visit at TCPA. The family had gifts for David and brought Christmas cookies and juice. Ms. Clement told David she was happy he had been at home for a few days. David talked about the visit and said he was looking forward to going home. He told his mother he wanted to continue to see her at the house when he went home for good. Ms. Clement told David she looked forward to that. David played ping pong with his Uncle Sam and grandfather. Maria Thompson came to pick David up and visited briefly with the family before taking David home.
12/28/2011	H/V	I transported David from the Thompson home to his home for visit. David was excited to go back home. He said he was going to miss the Thompsons and asked if he could stay in touch with them somehow.
1/1/2012	T/C	Call from Mr. Thompson to let me know he picked David up from Clement home. It seems they had another good visit, and David is settling in and will be going back to school Tuesday.
1/2/2012	Legal Staffing	This worker, supervisor, and children's court attorney met. Based on progress and successful extended visits, CCA will circulate an order of dismissal and take it to the District Court for signature and filing.
1/4/2012	O/V	CCA advised this worker that all attorneys have signed off on order of dismissal, and she will advise when order is signed. David will be reunified today, and case will be closed.
1/4/2012	H/V	I picked David up at school, and we drove to the Thompson home. I let the Thompsons know that the dismissal order has been signed, and the case is dismissed. Maria and Daniel Thompson hugged David and told him how happy they were for him. The Thompsons let David know that they'd be in touch

**Supervisor:** Sarah Niles  
**Social Worker:** Timothy Riggs

**Case Notes**

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contact

<b>Date of Contact</b>	<b>Type of Contact</b>	<b>Notes</b>
		with his Dad so that they could visit with him.

Initial Assessment  
April 10, 2011

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***Case Summary***

Client Name: Collin Clement

**Reason(s) for Removal from Home:** Child was removed on an emergency basis at St. Vincent's Hospital Emergency Room due to a spiral fracture with fragmented bone. The injury was inconsistent with accounts of how it happened. The fracture to his left arm and bruising to his left torso were days old at the time of treatment. Father refused services to protect his child and prevent removal. Birth mother has a history of depression and does not live with the child.

**Child's Perception of Situation:** David recognizes that he and his father would benefit from services that would help them get along better.

**Child(ren) Information**

**Physical Health**

David Clement is current on immunizations and appears to be in overall good health. He had a physical examination on April 26, 2011. David saw a dentist at a school-based clinic prior to coming into custody and needs to have three teeth filled.

**Mental/Behavioral**

David presented as hyperactive, inattentive, and impulsive at initial placement into foster care. He does not appear to have problems sleeping or with appetite. David will participate in a mental/behavioral health screening assessment.

**Education**

David is in the fifth grade at Madison Elementary School. He is an average student and is not receiving special education services. Placement into foster care did not result in a change of school. The school was notified of his placement into relative care.

**Social/Emotional Development**

David Clement appears to be developmentally on target. He is described as being able to get along with peers, but does not have any close friends. Further assessment may be required in this area.

## Initial Assessment

April 10, 2011

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### Placement

#### **Relative as Placement Resource**

Child is currently placed with paternal aunt and uncle, Jackie and Mark Wright. David Clement has an ongoing relationship with his aunt and uncle, and this is the least restrictive placement option as the home is near Louise Clement's home, where David lived prior to placement. The Wrights have 3-year-old twin daughters. The foster care placement is considered stable.

#### **Needs of Foster Parents:**

As relative care providers, the Wrights are well aware of David's background information. They have been provided with a Medicaid card to secure health care services for David. They have previously helped with routine medical appointments and know David's primary care provider. The Wrights will receive monthly foster care maintenance and will be reimbursed for transportation costs. The Department will assist with transportation when necessary. They will receive ongoing regular contact with the social worker for ongoing needs assessments.

#### **Visitation**

Collin Clement will visit with his son once a week at the Department. The social worker will schedule visitation for Jennifer Clement to see David. Phone contact is approved and foster parents will monitor.

### Safety and Risk Assessment

Safety threats include:

- No adult in the home is performing basic parenting duties and responsibilities that ensure child safety.
- One or both parents/caregivers will not/cannot control their behavior.
- One parent is acting dangerously, and the other parent does not live in the home, suffers from depression, and does not provide support.
- One or both parents lack parenting knowledge, skills, or motivation necessary to ensure a child's safety.

Risk level: High

Mock State  
Department of Youth and Family Services  
Madison District Office

Case Name:  
Clement  
Child(ren):  
David

Initial Assessment  
April 10, 2011

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Permanency Plan

Reunification

Signatures		
Social Worker: Timothy Riggs	<i>Timothy Riggs</i>	Date: 4/10/11
Social Work Supervisor: Sara Perry	<i>Sara Perry</i>	Date: 4/10/11

### Case Plan

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April 10, 2011

1. The Department shall arrange for David Clement to have a physical examination, shall follow up with any recommendations made, and provide for routine health care.
2. The Department shall arrange for David Clement to receive recommended dental care consistent with a recent dental examination, shall follow up with any other recommendations made, and provide for routine dental care.
3. The Department shall ensure that David Clement maintains enrollment in school and shall ensure that any educational assistance and support required by the child is provided.
4. The Department shall arrange for David Clement to have a behavioral health assessment to include screening for challenges associated with classroom learning. The Department shall follow recommendations of the assessment.
5. The Department shall meet individually with David Clement to further identify important connections shared during family team meeting and shall provide support to preserve those connections.
6. The Department shall arrange for supervised visitation between David Clement and Collin Clement.
7. The Department shall provide supervised visitation between David Clement and Jennifer Clement.
8. The Department shall provide supervised visitation between David Clement and Louise Clement.
9. Collin Clement shall participate in a psychosocial assessment and follow through with recommendations.
10. Jennifer Clement shall participate in a psychological evaluation and follow through with recommendations.

<u>Timothy Riggs</u> Social Worker	<u>04/10/11</u> Date	<u>Collin Clement</u> Parent	<u>04/10/11</u> Date
<u>Sara Perry</u> Social Worker Supervisor	<u>04/10/11</u> Date	<u>Jennifer Clement</u> Parent	<u>04/10/11</u> Date
<u>John Smith</u> Respondent's Attorney-Mother	<u>04/10/11</u> Date	<u>David Clement</u> Child	<u>04/10/11</u> Date
<u>George Webb</u> Children's Court Attorney	<u>04/10/11</u> Date	<u>Nancy Richards</u> Guardian ad Litem	<u>04/10/11</u> Date
<u>Ray Garley</u> Respondent's Attorney-Father	<u>04/10/11</u> Date		

# Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement      **Date of Birth:** 8/01/2001      **Date of Assessment:** 3/20/2007

**Parent:** Collin Clement      **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement      **Date of Birth:** 10/30/1981

## Safety Assessment and Safety Conclusion

**A. Safety Threats:** Are negative family conditions and/or circumstances, and/or caregiver behaviors, emotions, attitudes, and perceptions that are out of control in the presence of a vulnerable child and therefore likely to have severe effects on a child at any time in the near future.

- **Out-of-Control:** refers to family behavior, condition, or situations which are unrestrained, resulting in an unpredictable and possibly chaotic family environment not subject to the family's influence, manipulation, or ability to control. Such out-of-control family conditions pose a danger.
- **Severity:** refers to the effects of maltreatment that have already occurred and/or potential for harsh effects.
- **Imminent:** refers to the belief that dangerous family behaviors, conditions, or situations will remain active or become active within the next several days to within a month. This is consistent with a degree of certainty that, barring intervention, danger and severe harm are possible or even inevitable outcomes.
- **Observable:** refers to family behaviors, conditions, or situations representing a danger to a child that are specific, definite, real, can be seen and understood, and are subject to being reported and proven.
- **Vulnerable Child:** refers to a child who is dependent on others for protection and exposed to circumstances that she or he is powerless to manage and is susceptible, accessible, or available to a threatening person and/or persons in authority over them. Vulnerability is judged according to age, physical and emotional development, ability to communicate needs, degree of mobility, size, and level of dependence and susceptibility. This definition also applies to all young children ages 0 to 6 and older children who, for whatever reason, are not able to protect themselves or seek help from protective others.

### Safety Threats

1. No adult in the home is performing basic parenting duties and responsibilities that assure child safety.  
YES       NO
2. One or both parents/caregivers are violent and/or acting dangerously.  
YES       NO
3. One or both parents/caregivers will not/cannot control their behavior.  
YES       NO

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 8/01/2001    **Date of Assessment:** 3/20/2007

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

4. One or both parents/caregivers perceive a child in extremely negative terms.  
YES     NO
5. The family does not have or use resources necessary to assure child's safety.  
YES     NO
6. One or both parents/caregivers are threatening to severely harm a child or are fearful they will maltreat a child and/or request placement.  
YES     NO
7. One or both parents/caregivers intend(ed) to seriously hurt a child.  
YES     NO
8. One or both parents/caregivers lack parenting knowledge, skills, or motivation necessary to assure a child's safety.  
YES     NO
9. A child has exceptional needs that affect his/her safety which parents/caregivers are not meeting, cannot meet, or will not meet the child's needs.  
YES     NO
10. Living arrangements seriously endanger a child's physical health.  
YES     NO

**B. Safety Assessment:** Answer the following based on the safety threats identified and proceed as instructed.

1. One or more safety threats are identified.    YES     NO
2. If Yes to the above, proceed to C below.
3. If No to the above, proceed to E below.

**C. Child Vulnerability**

YES     NO

Explain how each child is vulnerable to the identified safety threats:

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement      **Date of Birth:** 8/01/2001      **Date of Assessment:** 3/20/2007

**Parent:** Collin Clement      **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement      **Date of Birth:** 10/30/1981

**D. Protective Capacity Evaluation of Non-Maltreating Caregiver:** Indicate below whether or not the non-maltreating parent or other adults residing in the home can/will protect the child.

- Can and Will Protect (Provide justification below)
- Cannot/Will Not Protect (Proceed to E)
- N/A – no other caregiver in home or no non-maltreating caregiver

State the basis for your professional judgment if your conclusion is that a non-maltreating parent/caregiver can and will protect the child. Describe protective capacities and how the parent/caregiver has protected the child in the past.

*Mother and father are receptive to CPS intervention and preventative services to ensure the well-being of their son. Mother and father accept the responsibility of their son's hygiene and agreed to send an extra set of clothes to David's school in case he may need to change clothes. Father and mother can meet the basic needs for clothing and will do laundry at paternal relatives' house as needed.*

**E. Case Opening or Closing:**

- The case will remain open.
  - There is an unsafe child (safety threat, vulnerable child, and non-protective parents). If the case will remain open, complete F and G.
  - The risk level is High.
- The case can be closed. There is no unsafe child, and the risk level is low or moderate. Indicate reasons, and move to signature section:

**F. Impending Danger Description:** Describe how impending danger is currently manifested in the family. Include how each threat is occurring, when and how often, and under what circumstances. Include whether others are involved, whether all five safety threshold criteria apply, and the inability of the family to control the threat to child safety.

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 8/01/2001    **Date of Assessment:** 3/20/2007

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

*Parents are responsible for child's hygiene and agreed to bathe their son more often. Parents use the resources available to them to wash their son's clothes and agreed to do laundry more often to ensure that David has clean clothes to wear.*

**G. Analysis for In-Home Safety Plan:** Complete to determine if an In-Home Safety Plan is appropriate.

1. Are the parent/caregivers residing in the home?  
YES     NO
2. Is the home calm/consistent enough to allow for safety services to come into the home?  
YES     NO
3. Are parent/caregivers willing to allow and/or participate with an in-home safety plan?  
YES     NO
4. Are services/resources available to participate with an in-home safety plan?  
YES     NO

If **NO** to any of the above, an in-home safety plan is not appropriate.

### Signature and Approval

Cory Bright

Worker

3/20/2007

Date

Amie Hicks

Supervisor

3/20/2007

Date

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement      **Date of Birth:** 8/01/2001      **Date of Assessment:** 4/04/2011

**Parent:** Collin Clement      **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement      **Date of Birth:** 10/30/1981

### Safety Assessment and Safety Conclusion

**A. Safety Threats:** Are negative family conditions and/or circumstances, and/or caregiver behaviors, emotions, attitudes, and perceptions that are out of control in the presence of a vulnerable child and therefore likely to have severe effects on a child at any time in the near future.

- **Out-of-Control:** refers to family behavior, condition, or situations which are unrestrained, resulting in an unpredictable and possibly chaotic family environment not subject to the family's influence, manipulation, or ability to control. Such out-of-control family conditions pose a danger.
- **Severity:** refers to the effects of maltreatment that have already occurred and/or potential for harsh effects.
- **Imminent:** refers to the belief that dangerous family behaviors, conditions, or situations will remain active or become active within the next several days to within a month. This is consistent with a degree of certainty that, barring intervention, danger and severe harm are possible or even inevitable outcomes.
- **Observable:** refers to family behaviors, conditions, or situations representing a danger to a child that are specific, definite, real, can be seen and understood, and are subject to being reported and proven.
- **Vulnerable Child:** refers to a child who is dependent on others for protection and exposed to circumstances that she or he is powerless to manage and is susceptible, accessible, or available to a threatening person and/or persons in authority over them. Vulnerability is judged according to age, physical and emotional development, ability to communicate needs, degree of mobility, size, and level of dependence and susceptibility. This definition also applies to all young children ages 0 to 6 and older children who, for whatever reason, are not able to protect themselves or seek help from protective others.

#### Safety Threats

1. No adult in the home is performing basic parenting duties and responsibilities that assure child safety.  
YES       NO
2. One or both parents/caregivers are violent and/or acting dangerously.  
YES       NO
3. One or both parents/caregivers will not/cannot control their behavior.  
YES       NO

## Mock State Safety Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 8/01/2001    **Date of Assessment:** 4/04/2011

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

4. One or both parents/caregivers perceive a child in extremely negative terms. YES  NO
5. The family does not have or use resources necessary to assure child's safety. YES  NO
6. One or both parents/caregivers are threatening to severely harm a child or are fearful they will maltreat a child and/or request placement. YES  NO
7. One or both parents/caregivers intend(ed) to seriously hurt a child. YES  NO
8. One or both parents/caregivers lack parenting knowledge, skills or motivation necessary to assure a child's safety. YES  NO
9. A child has exceptional needs that affect his/her safety which parents/caregivers are not meeting, cannot meet or will not meet the child's needs. YES  NO
10. Living arrangements seriously endanger a child's physical health. YES  NO

**B. Safety Assessment:** Answer the following based on the safety threats identified and proceed as instructed.

1. One or more safety threats are identified. YES  NO
2. If Yes to the above, proceed to C below.
3. If No to the above, proceed to E below.

**C. Child Vulnerability**

YES  NO

Explain how each child is vulnerable to the identified safety threats:

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement      **Date of Birth:** 8/01/2001      **Date of Assessment:** 4/04/2011

**Parent:** Collin Clement      **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement      **Date of Birth:** 10/30/1981

Father is the primary caregiver, and his violent action caused a severe injury, spiral fracture-safety threat #2. The father's injury to the child was inconsistent with his explanation. The father cannot control his behavior and lost his temper when attempting to discipline his son. He does not show remorse for injuring his son-safety threat #3. The child is vulnerable to safety threat #5 because the family does not have the resources necessary to assure the child's safety as the mother does not reside in the home or contribute to parenting David. The mother's alleged mental illness, depression, affects her ability to protect David. Father lacks support. David is vulnerable to safety threat #8 as his father lacks the knowledge to use other alternatives to hitting and injuring him for dealing with issues such as lying and being disrespectful. David and his father live with the paternal grandmother, who has diabetes, high blood pressure, and neuropathy and cannot physically intervene to ensure his safety-safety threat #10.

**D. Protective Capacity Evaluation of Non-Maltreating Caregiver:** Indicate below whether or not the non-maltreating parent or other adults residing in the home can/will protect the child.

- Can and Will Protect (Provide justification below)
- Cannot/Will Not Protect (Proceed to E)
- N/A – no other caregiver in home or no non-maltreating caregiver

State the basis for your professional judgment if your conclusion is that a non-maltreating parent/caregiver can and will protect the child. Describe protective capacities and how the parent/caregiver has protected the child in the past.

**E. Case Opening or Closing:**

- The case will remain open.
  - There is an unsafe child (safety threat, vulnerable child, and non-protective parents). If the case will remain open, complete F and G.
  - The risk level is High.
- The case can be closed. There is no unsafe child and the risk level is low or moderate. Indicate reasons and move to signature section:

**F. Impending Danger Description:** Describe how impending danger is currently manifested in the family. Include how each threat is occurring, when and how often, and under what circumstances. Include whether others are involved, whether all five safety threshold criteria apply, and the inability of the family to control the threat to child safety.

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement      **Date of Birth:** 8/01/2001      **Date of Assessment:** 4/04/2011

**Parent:** Collin Clement      **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement      **Date of Birth:** 10/30/1981

David, 9 years old, sustained a spiral fracture by his father during an altercation. The father did not seek immediate medical attention and brought David to the emergency room several days later. The father's explanation of David's injury is inconsistent with the exam and x-ray results. The father is the primary caretaker and admits that David's behavior is difficult to control, and he often loses his temper around his son. The father lacks support from extended family members and admits to feeling overwhelmed as a single parent. Without an immediate intervention, the father does not demonstrate the ability to prevent any future injury to David. The non-custodial mother's whereabouts are not known, and she is not actively involved in David's care.

**G. Analysis for In-Home Safety Plan:** Complete to determine if an In-Home Safety Plan is appropriate.

- Are the parent/caregivers residing in the home?  
YES       NO
- Is the home calm/consistent enough to allow for safety services to come into the home?  
YES       NO
- Are parent/caregivers willing to allow and/or participate with an in-home safety plan?  
YES       NO
- Are services/resources available to participate with an in-home safety plan?  
YES       NO

If **NO** to any of the above, an in-home safety plan is not appropriate.

### Signature and Approval

\_\_\_\_\_  
Michael Stout

Worker

\_\_\_\_\_  
4/4/2011

Date

\_\_\_\_\_  
Sarah Niles

Supervisor

\_\_\_\_\_  
4/4/2011

Date

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 06/03/2011

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

### Safety Assessment and Safety Conclusion

**A. Safety Threats:** Are negative family conditions and/or circumstances, and/or caregiver behaviors, emotions, attitudes, and perceptions that are out of control in the presence of a vulnerable child and therefore likely to have severe effects on a child at any time in the near future.

- **Out-of-Control:** refers to family behavior, condition, or situations which are unrestrained, resulting in an unpredictable and possibly chaotic family environment not subject to the family's influence, manipulation, or ability to control. Such out-of-control family conditions pose a danger.
- **Severity:** refers to the effects of maltreatment that have already occurred and/or potential for harsh effects.
- **Imminent:** refers to the belief that dangerous family behaviors, conditions, or situations will remain active or become active within the next several days to within a month. This is consistent with a degree of certainty that, barring intervention, danger and severe harm are possible or even inevitable outcomes.
- **Observable:** refers to family behaviors, conditions, or situations representing a danger to a child that are specific, definite, real, can be seen and understood, and are subject to being reported and proven.
- **Vulnerable Child:** refers to a child who is dependent on others for protection and exposed to circumstances that she or he is powerless to manage and is susceptible, accessible, or available to a threatening person and/or persons in authority over them. Vulnerability is judged according to age, physical and emotional development, ability to communicate needs, degree of mobility, size, and level of dependence and susceptibility. This definition also applies to all young children ages 0 to 6 and older children who, for whatever reason, are not able to protect themselves or seek help from protective others.

#### Safety Threats

1. No adult in the home is performing basic parenting duties and responsibilities that assure child safety.  
YES       NO
2. One or both parents/caregivers are violent and/or acting dangerously.  
YES       NO
3. One or both parents/caregivers will not/cannot control their behavior.  
YES       NO

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 06/03/2011

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

4. One or both parents/caregivers perceive a child in extremely negative terms.  
YES     NO
5. The family does not have or use resources necessary to assure child's safety.  
YES     NO
6. One or both parents/caregivers are threatening to severely harm a child or are fearful they will maltreat a child and/or request placement.  
YES     NO
7. One or both parents/caregivers intend(ed) to seriously hurt a child.  
YES     NO
8. One or both parents/caregivers lack parenting knowledge, skills or motivation necessary to assure a child's safety.  
YES     NO
9. A child has exceptional needs that affect his/her safety which parents/caregivers are not meeting, cannot meet or will not meet the child's needs.  
YES     NO
10. Living arrangements seriously endanger a child's physical health.  
YES     NO

**B. Safety Assessment:** Answer the following based on the safety threats identified and proceed as instructed.

1. One or more safety threats are identified.    YES     NO
2. If Yes to the above, proceed to C below.
3. If No to the above, proceed to E below.

**C. Child Vulnerability**

YES     NO

Explain how each child is vulnerable to the identified safety threats:

## Mock State Safety Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 06/03/2011

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

David cannot protect himself and suffered a serious physical injury as a result of his father's violent actions—safety threat #2. The father's injury to the child was inconsistent with his explanation. Father cannot control his behavior and lacks knowledge and skills to use appropriate discipline when his use misbehaves—safety threats #3 and #8. The child is vulnerable to safety threat #5 because the family does not have the resources necessary to assure the child's safety as the mother does not reside in the home or contribute to parenting David. Mother cannot protect David until she addresses mental health concerns. David's paternal grandmother is not in a position to provide protection due to several medical conditions. The father lives with his mother, David's grandmother—safety threat #10.

**D. Protective Capacity Evaluation of Non-Maltreating Caregiver:** Indicate below whether or not the non-maltreating parent or other adults residing in the home can/will protect the child.

- Can and Will Protect (Provide justification below)
- Cannot/Will Not Protect (Proceed to E)
- N/A – no other caregiver in home or no non-maltreating caregiver

State the basis for your professional judgment if your conclusion is that a non-maltreating parent/caregiver can and will protect the child. Describe protective capacities and how the parent/caregiver has protected the child in the past.

**E. Case Opening or Closing:**

- The case will remain open.
  - There is an unsafe child (safety threat, vulnerable child, and non-protective parents). If the case will remain open, complete F and G.
  - The risk level is High.
- The case can be closed. There is no unsafe child and the risk level is low or moderate. Indicate reasons and move to signature section:

**F. Impending Danger Description:** Describe how impending danger is currently manifested in the family. Include how each threat is occurring, when and how often, and under what

## Mock State Safety Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 06/03/2011

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

circumstances. Include whether others are involved, whether all five safety threshold criteria apply, and the inability of the family to control the threat to child safety.

David, 9 years old, sustained a spiral fracture by his father during an altercation. The father did not seek immediate medical attention and brought David to the emergency room several days later. The father's explanation of David's injury is inconsistent with the exam and x-ray results. The father is the primary caretaker and admits that David's behavior is difficult to control, and he lost his temper. No evidence of protective capacity. The mother is not actively involved in David's care.

**G. Analysis for In-Home Safety Plan:** Complete to determine if an In-Home Safety Plan is appropriate.

1. Are the parent/caregivers residing in the home?  
YES     NO
2. Is the home calm/consistent enough to allow for safety services to come into the home?  
YES     NO
3. Are parent/caregivers willing to allow and/or participate with an in-home safety plan?  
YES     NO
4. Are services/resources available to participate with an in-home safety plan?  
YES     NO

If **NO** to any of the above, an in-home safety plan is not appropriate.

### Signature and Approval

Timothy Riggs

Worker

6/3/2011

Date

Sara Perry

Supervisor

6/3/2011

Date

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 1/4/2012

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

### Safety Assessment and Safety Conclusion

**A. Safety Threats:** Are negative family conditions and/or circumstances, and/or caregiver behaviors, emotions, attitudes, and perceptions that are out of control in the presence of a vulnerable child and therefore likely to have severe effects on a child at any time in the near future.

- **Out-of-Control:** refers to family behavior, condition, or situations which are unrestrained, resulting in an unpredictable and possibly chaotic family environment not subject to the family's influence, manipulation, or ability to control. Such out-of-control family conditions pose a danger.
- **Severity:** refers to the effects of maltreatment that have already occurred and/or potential for harsh effects.
- **Imminent:** refers to the belief that dangerous family behaviors, conditions, or situations will remain active or become active within the next several days to within a month. This is consistent with a degree of certainty that, barring intervention, danger and severe harm are possible or even inevitable outcomes.
- **Observable:** refers to family behaviors, conditions, or situations representing a danger to a child that are specific, definite, real, can be seen and understood, and are subject to being reported and proven.
- **Vulnerable Child:** refers to a child who is dependent on others for protection and exposed to circumstances that she or he is powerless to manage and is susceptible, accessible, or available to a threatening person and/or persons in authority over them. Vulnerability is judged according to age, physical and emotional development, ability to communicate needs, degree of mobility, size, and level of dependence and susceptibility. This definition also applies to all young children ages 0 to 6 and older children who, for whatever reason, are not able to protect themselves or seek help from protective others.

#### Safety Threats

1. No adult in the home is performing basic parenting duties and responsibilities that assure child safety.  
YES       NO
2. One or both parents/caregivers are violent and/or acting dangerously.  
YES       NO
3. One or both parents/caregivers will not/cannot control their behavior.  
YES       NO

## Mock State Safety Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 1/4/2012

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

4. One or both parents/caregivers perceive a child in extremely negative terms.  
YES     NO
5. The family does not have or use resources necessary to assure child's safety.  
YES     NO
6. One or both parents/caregivers are threatening to severely harm a child or are fearful they will maltreat a child and/or request placement.  
YES     NO
7. One or both parents/caregivers intend(ed) to seriously hurt a child.  
YES     NO
8. One or both parents/caregivers lack parenting knowledge, skills or motivation necessary to assure a child's safety.  
YES     NO
9. A child has exceptional needs that affect his/her safety which parents/caregivers are not meeting, cannot meet or will not meet the child's needs.  
YES     NO
10. Living arrangements seriously endanger a child's physical health.  
YES     NO

**B. Safety Assessment:** Answer the following based on the safety threats identified and proceed as instructed.

1. One or more safety threats are identified.    YES     NO
2. If Yes to the above, proceed to C below.
3. If No to the above, proceed to E below.

**C. Child Vulnerability**

YES     NO

Explain how each child is vulnerable to the identified safety threats:

## Mock State Safety Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 1/4/2012

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

**D. Protective Capacity Evaluation of Non-Maltreating Caregiver:** Indicate below whether or not the non-maltreating parent or other adults residing in the home can/will protect the child.

- Can and Will Protect (Provide justification below)
- Cannot/Will Not Protect (Proceed to E)
- N/A – no other caregiver in home or no non-maltreating caregiver

State the basis for your professional judgment if your conclusion is that a non-maltreating parent/caregiver can and will protect the child. Describe protective capacities and how the parent/caregiver has protected the child in the past.

The father has successfully completed the parenting coaching program. He is now demonstrating new skills in disciplining his son with harm or injury. Observations of the child and father are appropriate. Safety concerns of the child have been ameliorated. The father accepts and demonstrates the ability to nurture and provide for the well-being of the child. Father shows remorse and desire to prevent any future injury to child.

**E. Case Opening or Closing:**

- The case will remain open.
  - There is an unsafe child (safety threat, vulnerable child, and non-protective parents). If the case will remain open, complete F and G.
  - The risk level is High.
- The case can be closed. There is no unsafe child and the risk level is low or moderate. Indicate reasons and move to signature section:

**F. Impending Danger Description:** Describe how impending danger is currently manifested in the family. Include how each threat is occurring, when and how often, and under what circumstances. Include whether others are involved, whether all five safety threshold criteria apply, and the inability of the family to control the threat to child safety.

Although risk remains high, parent is demonstrating sufficient protective capacities to address any safety issues and will continue with services and resources required to address risk.

**G. Analysis for In-Home Safety Plan:** Complete to determine if an In-Home Safety Plan is appropriate

## Mock State Safety Assessment

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**Case Name:** Clement

**Child(ren):** David Clement    **Date of Birth:** 08/01/2001    **Date of Assessment:** 1/4/2012

**Parent:** Collin Clement    **Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement    **Date of Birth:** 10/30/1981

1. Are the parent/caregivers residing in the home?  
YES       NO
2. Is the home calm/consistent enough to allow for safety services to come into the home?  
YES       NO
3. Are parent/caregivers willing to allow and/or participate with an in-home safety plan?  
YES       NO
4. Are services/resources available to participate with an in-home safety plan?  
YES       NO

If **NO** to any of the above, an in-home safety plan is not appropriate.

### Signature and Approval

Timothy Riggs

Worker

1/4/2012

Date

Sara Perry

Supervisor

1/4/2012

Date

## Mock State Risk Assessment

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**Case Name:**

**Child(ren):** David Clement

**Date of Birth:** 8/01/2001

**Date of Assessment:** 3/20/2007

**Parent:** Collin Clement

**Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement

**Date of Birth:** 10/30/1981

### Neglect Scale

N1. Current report is for neglect.

No (0)

Yes(1)

N2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

N3. Household has previously received child protective services.

No (0)

Yes (1)

N4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

N5. Age of youngest child in the home

Two or older (0)

Under two (1)

N6. Characteristics of children in household (*add for score*)

Not applicable (0)

One or more present (*mark all applicable & add*)

Developmental, learning, or physical disability (1)

Medically fragile or failure to thrive (1)

Mental health or behavioral problem (1)

N7. Primary caregiver physical care of the child

Consistent with child needs (0)

Inconsistent with child needs (1)

N8. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

N9. Primary caregiver has/had a mental health problem.

None/not applicable (0)

Current or prior mental health problem (1)

# Mock State Risk Assessment

**Case Name:**

**Child(ren):** David Clement

**Date of Birth:** 8/01/2001

**Date of Assessment:** 3/20/2007

**Parent:** Collin Clement

**Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement

**Date of Birth:** 10/30/1981

N10. Primary caregiver has/had an alcohol and/or drug problem.

None/not applicable..... 0

One or more apply (*mark all applicable*) (2)

\_\_Alcohol (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Drugs (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Marijuana \_\_Methamphetamine \_\_Heroin \_\_Cocaine

\_\_Other:

N11. Primary caregiver has criminal arrest history.

No (0)

Yes (1)

If yes, check either or both:

\_\_Arrests \_\_Conviction

N12. Current housing

Not applicable..... 0

One or more apply ..... 1

Physically unsafe AND/OR

Family homeless

**TOTAL NEGLECT SCALE RISK SCORE = 0**

**ABUSE Score**

A1. Current report is for physical abuse.

No (0)

Yes(1)

A2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

A3. Household has previously received child protective services.

No (0)

Yes (1)

A4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

# Mock State Risk Assessment

**Case Name:**

**Child(ren):** David Clement

**Date of Birth:** 8/01/2001

**Date of Assessment:** 3/20/2007

**Parent:** Collin Clement

**Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement

**Date of Birth:** 10/30/1981

A5. Prior physical injury to a child resulting from child abuse/neglect or prior substantiated physical abuse to a child

None/not applicable (0)

One or more of the following apply (1)

Prior physical injury to a child resulting from CA/N

Prior substantiated physical abuse of a child

A6. Characteristics of children in household (*score 1 if any present*)

Not applicable (0)  One or more present (*mark all applicable*) (1)

Delinquency history

Developmental disability

Learning disability

Mental health or behavioral problem

A7. Domestic violence in the household in the past year

No (0)

Yes (1)

A8. Primary caregiver employs excessive/inappropriate discipline.

No (0)

Yes (1)

A9. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

A10. Primary caregiver has/had a mental health problem.

No (0)

One or more apply (1)

During the last 12 months

Prior to the last 12 months

**TOTAL ABUSE SCALE SCORE: -1**

**SCORED RISK LEVEL.** Assign the family's scored risk level based on the highest score on either the neglect or abuse indices, using the following chart:

Neglect Score

-1-1

2-5

6-8

9+

Abuse Score

-1-0

1-3

4-5

6+

Scored Risk Level

Low

Moderate

High

Very High

## Mock State Risk Assessment

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**Case Name:**

**Child(ren):** David Clement

**Date of Birth:** 8/01/2001

**Date of Assessment:** 3/20/2007

**Parent:** Collin Clement

**Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement

**Date of Birth:** 10/30/1981

**POLICY OVERRIDES.** Check the box if a condition shown below is applicable. If any condition is applicable, override the final risk level to very high.

- Sexual abuse AND the perpetrator is likely to have access to the child/ victim.
- Non-accidental injury to a child under age 2
- Severe non-accidental injury
- Caregiver action or inaction resulted in the death of a child due to abuse or neglect (previous or current).

**DISCRETIONARY OVERRIDE:** If yes, override risk level (mark one):

- Moderate
- High
- Very High

*Discretionary override reason:*

**FINAL RISK LEVEL** (mark final level assigned):

- Low
- Moderate
- High
- Very High

**Signature and Approval**

Cory Bright

Worker

3/20/2007

Date

Amie Hicks

Supervisor

3/20/2007

Date

# Mock State Risk Assessment

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**Case Name: Clement**

**Child(ren): David Clement**

**Date of Birth: 8/01/2001**

**Date of Assessment: 4/04/2011**

**Parent: Collin Clement**

**Date of Birth: 3/27/1979**

**Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981**

## Neglect Scale

N1. Current report is for neglect.

No (0)

Yes(1)

N2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

N3. Household has previously received child protective services.

No (0)

Yes (1)

N4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

N5. Age of youngest child in the home

Two or older (0)

Under two (1)

N6. Characteristics of children in household (*add for score*)

Not applicable (0)

One or more present (*mark all applicable & add*)

Developmental, learning, or physical disability (1)

Medically fragile or failure to thrive (1)

Mental health or behavioral problem (1)

N7. Primary caregiver physical care of the child

Consistent with child needs (0)

Inconsistent with child needs (1)

N8. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

N9. Primary caregiver has/had a mental health problem.

None/not applicable (0)

Current or prior mental health problem (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 4/04/2011

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

N10. Primary caregiver has/had an alcohol and/or drug problem.

None/not applicable..... 0

One or more apply (*mark all applicable*) (2)

\_\_Alcohol (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Drugs (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Marijuana \_\_Methamphetamine \_\_Heroin \_\_Cocaine

\_\_Other:

N11. Primary caregiver has criminal arrest history.

No (0)

Yes (1)

If yes, check either or both:

\_\_Arrests \_\_Conviction

N12. Current housing

Not applicable..... 0

One or more apply ..... 1

Physically unsafe; AND/OR

Family homeless

**TOTAL NEGLECT SCALE RISK SCORE = 4**

## ABUSE Score

A1. Current report is for physical abuse.

No (0)

Yes(1)

A2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

A3. Household has previously received child protective services.

No (0)

Yes (1)

A4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 4/04/2011

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

A5. Prior physical injury to a child resulting from child abuse/neglect or prior substantiated physical abuse to a child

None/not applicable (0)

One or more of the following apply (1)

Prior physical injury to a child resulting from CA/N

Prior substantiated physical abuse of a child

A6. Characteristics of children in household (score 1 if any present)

Not applicable (0)

One or more present (mark all applicable) (1)

Delinquency history

Developmental disability

Learning disability

Mental health or behavioral problem

A7. Domestic violence in the household in the past year

No (0)

Yes (1)

A8. Primary caregiver employs excessive/inappropriate discipline.

No (0)

Yes (1)

A9. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

A10. Primary caregiver has/had a mental health problem.

No (0)

One or more apply (1)

During the last 12 months

Prior to the last 12 months

**TOTAL ABUSE SCALE SCORE: 4**

**SCORED RISK LEVEL.** Assign the family's scored risk level based on the highest score on either the neglect or abuse indices, using the following chart:

Neglect Score

-1-1

2-5

6-8

9 +

Abuse Score

-1-0

1-3

4-5

6 +

Scored Risk Level

Low

Moderate

High

Very High

# Mock State Risk Assessment

---

**Case Name:** Clement

**Child(ren):** David Clement

**Date of Birth:** 8/01/2001

**Date of Assessment:** 4/04/2011

**Parent:** Collin Clement

**Date of Birth:** 3/27/1979

**Parent:** Jennifer Clement (not in home) **Date of Birth:** 10/30/1981

**POLICY OVERRIDES.** Check the box if a condition shown below is applicable. If any condition is applicable, override the final risk level to very high.

- Sexual abuse AND the perpetrator is likely to have access to the child/ victim.
- Non-accidental injury to a child under age 2
- Severe non-accidental injury
- Caregiver action or inaction resulted in the death of a child due to abuse or neglect (previous or current).

**DISCRETIONARY OVERRIDE:** If yes, override risk level (mark one):

- Moderate
- High
- Very High

*Discretionary override reason:*

**FINAL RISK LEVEL** (mark final level assigned):

- Low
- Moderate
- High
- Very High

## Signature and Approval

Michael Stout

Worker

4/04/2011

Date

Sarah Stiles

Supervisor

4/04/2011

Date

## Mock State Risk Assessment

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**Case Name: Clement**

**Child(ren): David Clement**

**Date of Birth: 8/01/2001**

**Date of Assessment: 6/03/2011**

**Parent: Collin Clement**

**Date of Birth: 3/27/1979**

**Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981**

### Neglect Scale

N1. Current report is for neglect.

No (0)

Yes(1)

N2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

N3. Household has previously received child protective services.

No (0)

Yes (1)

N4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

N5. Age of youngest child in the home

Two or older (0)

Under two (1)

N6. Characteristics of children in household (*add for score*)

Not applicable (0)

One or more present (*mark all applicable & add*)

Developmental, learning, or physical disability (1)

Medically fragile or failure to thrive (1)

Mental health or behavioral problem (1)

N7. Primary caregiver physical care of the child

Consistent with child needs (0)

Inconsistent with child needs (1)

N8. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

N9. Primary caregiver has/had a mental health problem.

None/not applicable (0)

Current or prior mental health problem (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 6/03/2011

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

N10. Primary caregiver has/had an alcohol and/or drug problem.

None/not applicable..... 0

One or more apply (*mark all applicable*) (2)

\_\_Alcohol (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Drugs (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Marijuana \_\_Methamphetamine \_\_Heroin \_\_Cocaine

\_\_Other:

N11. Primary caregiver has criminal arrest history.

No (0)

Yes (1)

If yes, check either or both:

\_\_Arrests \_\_Conviction

N12. Current housing

Not applicable..... 0

One or more apply ..... 1

Physically unsafe; AND/OR

Family homeless

**TOTAL NEGLECT SCALE RISK SCORE = 4**

## ABUSE Score

A1. Current report is for physical abuse.

No (0)

Yes(1)

A2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

A3. Household has previously received child protective services.

No (0)

Yes (1)

A4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 6/03/2011

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

A5. Prior physical injury to a child resulting from child abuse/neglect or prior substantiated physical abuse to a child

None/not applicable (0)

One or more of the following apply (1)

Prior physical injury to a child resulting from CA/N

Prior substantiated physical abuse of a child

A6. Characteristics of children in household (score 1 if any present)

Not applicable (0)

One or more present (mark all applicable) (1)

Delinquency history

Developmental disability

Learning disability

Mental health or behavioral problem

A7. Domestic violence in the household in the past year

No (0)

Yes (1)

A8. Primary caregiver employs excessive/inappropriate discipline.

No (0)

Yes (1)

A9. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

A10. Primary caregiver has/had a mental health problem.

No (0)

One or more apply (1)

During the last 12 months

Prior to the last 12 months

**TOTAL ABUSE SCALE SCORE: 4**

**SCORED RISK LEVEL.** Assign the family's scored risk level based on the highest score on either the neglect or abuse indices, using the following chart:

Neglect Score

-1-1

2-5

6-8

9 +

Abuse Score

-1-0

1-3

4-5

6 +

Scored Risk Level

Low

Moderate

High

Very High

# Mock State Risk Assessment

---

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 6/03/2011

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

**POLICY OVERRIDES.** Check the box if a condition shown below is applicable. If any condition is applicable, override the final risk level to very high.

- Sexual abuse AND the perpetrator is likely to have access to the child/ victim.
- Non-accidental injury to a child under age 2
- Severe non-accidental injury
- Caregiver action or inaction resulted in the death of a child due to abuse or neglect (previous or current).

**DISCRETIONARY OVERRIDE:** If yes, override risk level (mark one):

- Moderate
- High
- Very High

*Discretionary override reason:*

**FINAL RISK LEVEL** (mark final level assigned):

- Low
- Moderate
- High
- Very High

## Signature and Approval

Timothy Riggs

Worker

6/03/2011

Date

Sara Perry

Supervisor

6/03/2011

Date

## Mock State Risk Assessment

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**Case Name: Clement**

**Child(ren): David Clement**

**Date of Birth: 8/01/2001**

**Date of Assessment: 1/4/2012**

**Parent: Collin Clement**

**Date of Birth: 3/27/1979**

**Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981**

### Neglect Scale

N1. Current report is for neglect.

No (0)

Yes(1)

N2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

N3. Household has previously received child protective services.

No (0)

Yes (1)

N4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

N5. Age of youngest child in the home

Two or older (0)

Under two (1)

N6. Characteristics of children in household (*add for score*)

Not applicable (0)

One or more present (*mark all applicable & add*)

Developmental, learning, or physical disability (1)

Medically fragile or failure to thrive (1)

Mental health or behavioral problem (1)

N7. Primary caregiver physical care of the child

Consistent with child needs (0)

Inconsistent with child needs (1)

N8. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

N9. Primary caregiver has/had a mental health problem.

None/not applicable (0)

Current or prior mental health problem (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 1/4/2012

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

N10. Primary caregiver has/had an alcohol and/or drug problem.

None/not applicable..... 0

One or more apply (*mark all applicable*) (2)

\_\_Alcohol (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Drugs (\_\_Last 12 months and/or \_\_Prior to the last 12 months)

\_\_Marijuana \_\_Methamphetamine \_\_Heroin \_\_Cocaine

\_\_Other:

N11. Primary caregiver has criminal arrest history.

No (0)

Yes (1)

If yes, check either or both:

\_\_Arrests \_\_Conviction

N12. Current housing

Not applicable..... 0

One or more apply ..... 1

Physically unsafe AND/OR

Family homeless

**TOTAL NEGLECT SCALE RISK SCORE = 3**

## ABUSE Score

A1. Current report is for physical abuse.

No (0)

Yes(1)

A2. Prior assessments (*assign highest score that applies*)

None (-1)

One or more, abuse only (1)

One or two for neglect (2)

Three or more for neglect (3)

A3. Household has previously received child protective services.

No (0)

Yes (1)

A4. Number of children involved in the child abuse/neglect incident

One, two, or three (0)

Four or more (1)

# Mock State Risk Assessment

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 1/4/2012

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

A5. Prior physical injury to a child resulting from child abuse/neglect or prior substantiated physical abuse to a child

None/not applicable (0)

One or more of the following apply (1)

Prior physical injury to a child resulting from CA/N

Prior substantiated physical abuse of a child

A6. Characteristics of children in household (score 1 if any present)

Not applicable (0)

One or more present (mark all applicable) (1)

Delinquency history

Developmental disability

Learning disability

Mental health or behavioral problem

A7. Domestic violence in the household in the past year

No (0)

Yes (1)

A8. Primary caregiver employs excessive/inappropriate discipline.

No (0)

Yes (1)

A9. Primary caregiver has a history of abuse or neglect as a child.

No (0)

Yes (1)

A10. Primary caregiver has/had a mental health problem.

No (0)

One or more apply (1)

During the last 12 months

Prior to the last 12 months

**TOTAL ABUSE SCALE SCORE: 3**

**SCORED RISK LEVEL.** Assign the family's scored risk level based on the highest score on either the neglect or abuse indices, using the following chart:

Neglect Score

-1-1

2-5

6-8

9 +

Abuse Score

-1-0

1-3

4-5

6 +

Scored Risk Level

Low

Moderate

High

Very High

## Mock State Risk Assessment

---

Case Name: Clement

Child(ren): David Clement

Date of Birth: 8/01/2001

Date of Assessment: 1/4/2012

Parent: Collin Clement

Date of Birth: 3/27/1979

Parent: Jennifer Clement (not in home) Date of Birth: 10/30/1981

**POLICY OVERRIDES.** Check the box if a condition shown below is applicable. If any condition is applicable, override the final risk level to very high.

- Sexual abuse AND the perpetrator is likely to have access to the child/ victim.
- Non-accidental injury to a child under age 2
- Severe non-accidental injury
- Caregiver action or inaction resulted in the death of a child due to abuse or neglect (previous or current).

**DISCRETIONARY OVERRIDE:** If yes, override risk level (mark one):

- Moderate
- High
- Very High

*Discretionary override reason:*

**FINAL RISK LEVEL** (mark final level assigned):

- Low
- Moderate
- High
- Very High

### Signature and Approval

Timothy Riggs

Worker

1/4/2012

Date

Sara Perry

Supervisor

1/4/2012

Date

IN THE MATTER OF  
David Clement, CHILD

AND CONCERNING

Collin and Jennifer Clement, RESPONDENTS

IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE

FIFTH JUDICIAL DISTRICT

**AFFIDAVIT IN SUPPORT OF EMERGENCY REMOVAL  
AND PETITION FOR PROTECTIVE SERVICES**

I, Michael Stout, Social Worker of the Mock State Department of Youth and Family Services (DYFS) with the responsibility for this case, affirm that the facts and allegations stated in this affidavit are within my personal knowledge and are true and correct.

The following facts show necessity for an order of emergency removal, ongoing temporary custody, and provision of protective services.

**1. CHILD(REN)**

**Name: David Clement**

**DOB: August 1, 2001**

**2. PARENTS**

**Name: Collin Clement**

**Relationship: Father**

**DOB: March 27, 1979**

**Name: Jennifer Clement**

**Relationship: Mother**

**DOB: October 30, 1981**

**3. ALLEGATIONS**

On April 4, 2011, Nurse Felicia Robinson, St. Vincent's Hospital Emergency Room (ER), called Mock State DYFS to report physical abuse and medical neglect of David Clement. Collin Clement brought his 9 year old son, David Clement, into the ER with intense pain, a broken left arm, and bruising on the left side of his torso.

On 4/4/11, Michael Stout, Social Worker, met with Nurse Felicia Robinson. Nurse Robinson was the first nurse to see David and his father when they arrived at the ER. David was in intense pain and said he fell when fooling around with cousins. David changed his story about how he was injured when he met with the ER doctor, Bob Sykes. Collin Clement, father, was unsympathetic and interrupted David several times to provide information. X-rays showed a spiral fracture with bone splintering inconsistent with a fall. The bruising and swelling of the arm disclosed an injury that was days old.

On 4/4/2011, Michael Stout, Social Worker, met with Dr. Sykes. Dr. Sykes stated David sustained a spiral fracture with bone fragmentation, and the injury was about 3-4 days old. Dr. Sykes stated David would require surgery to realign the bone. Dr. Sykes met with Collin Clement to review examination results, and he became defensive and argumentative. Dr. Sykes stated that in spite of providing definitive medical information to Mr. Clement about the injury, he would not shift from the original explanation for the injury.

On 4/4/2011, Michael Stout, Social Worker, met with Collin Clement at the ER. Collin Clement and his son, David Clement, live with Louise Clement, paternal grandmother. Due to advanced age and failing health, Louise Clement is unable to care for David. Mr. Stout explained to Mr. Clement that he was concerned for David's safety as he had a significant injury and other bruising on his body, and the explanation was inconsistent with the medical reports. Mr. Stout told Mr. Clement that the Department would like to offer services to him and his family so that David would be safe. Mr. Stout asked Mr. Clement about other relatives that might be able to care for David and offered services once again. Mr. Clement became visibly agitated. He shared contact information for David's mother, Jennifer Clement, and said she is unable to care for him due to depression. He said that he did not want or need any services, and shared Louise Clement's (paternal grandmother) phone number. Mr. Clement stated he did not want the Department in his life; he just wanted to get David and leave.

Michael Stout, Social Worker, made attempts to contact the child's mother, Jennifer Clement, and was unable to do so. Officer Blake of the Madison Police Department took David into emergency custody due to Mr. Clement's refusal to accept assistance and the Department's inability to locate the mother. David Clement was placed with DYFS. Mr. Stout contacted Louise Clement, paternal grandmother, by telephone. She provided contact information for David's paternal aunt and uncle.

*Michael Stout*

**Michael Stout**

Social Worker

Madison Department of Youth and Family Services

Affiant

SWORN TO AND SUBSCRIBED before me, the undersigned Notary Public on this 5th day of April 2011.

**Elaine Torres**

NOTARY PUBLIC in and for the

STATE OF MOCK STATE

**IN THE MATTER OF  
David Clement, CHILD  
AND CONCERNING**

**Collin and Jennifer Clement, RESPONDENTS**

**IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE  
FIFTH JUDICIAL DISTRICT**

**EX PARTE CUSTODY ORDER**

This matter came before the Court on the 5th day of April 2011. The following are named as parties:

Jennifer Clement Mother

DOB: October 30, 1981

568 Oak Court

Madison, Mock State 12006

Collin Clement, Father

DOB: March 27, 1979

1235 Belleflower Drive

Madison, Mock State 12006

Madison Department of Youth and Family Services

Madison County, Mock State

**THE COURT FINDS:**

1. The court has jurisdiction over this matter.
2. The child, David Clement, is currently without proper parental care and supervision, and continued placement of the child in the home is contrary to the child's welfare.
3. Madison Department of Youth and Family Services made reasonable efforts to prevent the placement of David Clement into foster care by offering Collin Clement services. Collin Clement refused services and refused to provide relatives contact information. Madison Department of Youth and Family Services made attempts to locate Jennifer Clement, and she could not be located.
4. The child is not subject to provisions of the Indian Child Welfare Act.

**THE COURT ORDERS:**

1. David Clement remain in the custody of Madison Department of Youth and Family Services.
2. The Department of Youth and Family Services continue efforts to locate Jennifer Clement, mother. Once Jennifer Clement has been located, she will be served notice of these proceedings.
3. John Smith, Esquire, is appointed to represent Jennifer Clement.
4. Ray Garley, Esquire, is appointed to represent Collin Clement.
5. Nancy Richards, Esquire, is appointed as Guardian ad Litem for David Clement.

**NEXT HEARING:** The Custody Hearing is scheduled for the 12th day of April, 2011, at 1:00 p.m., before District Court Judge Gene Sanchez.

**This is a final order for purposes of appeal.**

Gene Sanchez

Gene Sanchez  
District Court Judge

April 5, 2011

April 5, 2011

**CAUSE NO: J0812**

**IN THE MATTER OF  
David Clement, CHILD  
AND CONCERNING  
Collin and Jennifer Clement, RESPONDENTS**

**IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE  
FIFTH JUDICIAL DISTRICT**

**CUSTODY ORDER**

This matter came before the Court on the 12th day of April, 2011. The following are named as parties:

Jennifer Clement, Mother  
DOB: October 30, 1981  
568 Oak Court  
Madison, Mock State 12006

Collin Clement, Father  
DOB: March 27, 1979  
1235 Belleflower Drive  
Madison, Mock State 12006

Madison Department of Youth and Family Services  
Madison County, Mock State

**THE COURT FINDS:**

1. The court has jurisdiction over this matter.
2. The child, David Clement, continues to remain without proper parental care and supervision, and reunification with Collin Clement, father, with placement of the child in the home is contrary to the child's welfare.
3. The mother, Jennifer Clement, has been located, and reasonable efforts to reunify the child with his mother have not been possible due to mother's mental health issues.
4. The child is not subject to provisions of the Indian Child Welfare Act.

**THE COURT ORDERS:**

1. David Clement to remain in the custody of Madison Department of Youth and Family Services, which is responsible for his care and supervision and placement of the child in foster care.
2. The assessment case plan, attached to this order and presented by the Department, shall be adopted.
3. John Smith, Esquire, is appointed to continue to represent Jennifer Clement.
4. Ray Garley, Esquire, is appointed to continue to represent Collin Clement.
5. Nancy Richards, Esquire, is appointed to continue as Guardian ad Litem for David Clement.

**NEXT HEARING:** The Adjudication and Disposition Hearings are scheduled for the 3rd day of June, 2011, at 1:00 p.m. before District Court Judge Gene Sanchez.

**This is a final order for purposes of appeal.**

Gene Sanchez

Gene Sanchez  
District Court Judge

April 12, 2011

April 12, 2011

**Mock State**

**Department of Youth and Family Services**

**Madison District Office**

**Case Name:  
Clement**

**Child(ren):  
David**

**Report to the Court**

**June 3, 2011**

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**Case Summary**

The Clement family first came to the attention of the Department on March 20, 2007, when the school referred David Clement for physical neglect due to hygiene issues. The case was unsubstantiated, and a referral was made for prevention services. On Monday, April 4, 2011, St. Vincent's Hospital Emergency Room (ER) staff called Statewide Central Intake to report that Collin Clement brought his son, David, into the emergency room with a fractured left arm and bruising to the left torso. DCYF responded and saw David and Collin Clement at St. Vincent's ER. David's left arm was swollen with bruising to the forearm and wrist, along with left torso. David was administered pain medication due to intense level of pain. David stated, "I was fooling around with my cousins and fell." David changed his story about how he was injured when he met with the doctor, saying he and cousins were in the back of his Dad's truck, and he fell off. Collin Clement, father, was present and interrupted David several times to provide information. The father was visibly irritated and made no attempts to comfort David. X-rays revealed a days-old spiral fracture consistent with intense twisting of the arm. The x-rays showed bone splintering, and a CT scan determined surgery would be required due to bone fragmentation. There were also concerns about possible nerve damage.

This worker met with Collin Clement, father, in a hospital consultation room. Mr. Clement stated he and David live with his mother, Louise Clement. He stated his mother is in her 80s and suffers from diabetes, high blood pressure, neuropathy, and circulation issues. He takes her to doctor appointments and to get medications. Mr. Clement has a sister, Jackie Wright, who also helps with Louise's care. David and Collin Clement live with Louise Clement because Mr. Clement is underemployed. He receives public assistance for food. Mr. Clement is the oldest of four children and his father left his mother after his youngest brother was born. Collin Clement describes himself as stepping up to be "the man of the house," and he kept things going at home while his mother worked. Mr. Clement worked at a very young age to help his mother provide for the household. He graduated from high school and started to attend community college. He met Jennifer Kolbe, and they married and established their own household. He was working and attending night online classes when Ms. Clement became pregnant. His construction job suffered as the result of the housing bubble burst, and, soon after David was born, Ms. Clement suffered from postpartum depression that became so serious that she required medication and ultimately moved in with her parents. Mr. Clement and David moved in with Louise Clement.

Mr. Clement's psychosocial assessment revealed an intelligent, capable father with chronic, high-level stress that would benefit from a reduction of stressors in the home environment and a structured, intensive parent coaching program. Mr. Clement disclosed physical abuse to his son. Mr. Clement is enduring chronic stress as the result of family and job-related events and demands. He admits this chronic stress results in anxiety. He eats poorly and has gained weight, has digestive and sleep problems, and admits to memory and concentration impairment. Mr. Clement would benefit from assistance in reducing stresses associated with caring for his mother. The report recommends short-term therapy, an intensive and structured parent coaching program with his son, and time for exercise and/or socialization.

Jennifer Clement has a diagnosis of major depressive disorder. Ms. Clement has received services intermittently for years. Previous treatment included a Prozac regimen and individual counseling. Her compliance with meds and counseling have been sporadic at best. Ms. Clement's evaluation

Mock State

Department of Youth and Family Services

Madison District Office

Case Name:  
Clement

Child(ren):  
David

## Report to the Court

June 3, 2011

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recommended combination prescription therapy, an in-home monitoring component to ensure medication compliance, and consistent counseling sessions.

David Clement had a behavioral health assessment and was diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). This diagnosis is in line with David's difficulty staying focused and paying attention, difficulty controlling behavior, and hyperactivity (over-activity). David has a combined type of ADHD, wherein he is hyperactive, impulsive, and with some inattentiveness. David is now on a minimum dose medication regimen of Quillivant XR. The assessment recommended close monitoring with regular medication reviews. It was recommended that David attend 3-6 sessions of individual counseling before beginning the parent coaching program with his father.

### Reason(s) for Continued Removal from Home:

Psychosocial assessment, psychological evaluation, and behavioral assessments have been completed, and the family will benefit from actively entering into the recommended therapies to ensure David's safety before returning home.

### Child's Perception of Situation:

David understands and recognizes the stress the family was in and the need for change before he can safely return home.

### Child(ren) Information

#### Physical Health

David Clement is in good overall physical health, and immunizations are up to date. David has also received dental screening and requires three fillings. David has received medical care recommended for his arm fracture.

#### Mental/Behavioral Health

David Clement presented initially as inattentive and hyperactive, and his father and teacher both described challenging behavior due to hyperactivity. David was diagnosed with ADHD and is benefitting from medication therapy.

#### Education

David Clement is in the 5<sup>th</sup> grade at Madison Elementary School. David is an average student. His performance in the classroom has benefitted from medication to address his ADHD.

**Mock State**

**Department of Youth and Family Services**

**Madison District Office**

**Case Name:  
Clement**

**Child(ren):  
David**

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**June 3, 2011**

---

**Social/Emotional Development**

David Clement's teacher initially described him as everyone's friend and no one's close friend. ADHD medication has allowed David to regulate his behavior, and the teacher and foster parents both report it is easier for David to interact with peers. David is also involved in summer baseball and is enjoying this team activity.

**Placement**

**Relative as Placement Resource**

At the time of removal, David Clement was placed with his paternal aunt and uncle, Jackie and Mark Wright. On 4/25/11, he was removed from this home at the foster parent's request. The Wrights indicated they had hoped for a short-term placement and wanted to remain in contact with David.

**Description of Current Placement**

**Placement Type and Description:**

On 4/25/11, David Clement was placed in the home of Maria and Daniel Thompson, licensed foster parents. The Thompsons have been licensed foster parents for years and have no other children in the home.

**Needs of Foster Parents:**

Foster parents have been provided with known background information on David and his family and have been actively involved in case planning. They have been provided with a Medicaid card to secure health care services for David and have been provided with the name of his primary care provider. The foster parents have also been involved in counseling and obtain information about the administration and monitoring of David's medication. Foster parents receive monthly foster care maintenance and are reimbursed for transportation costs. Foster parents will receive ongoing regular contact with social worker for ongoing needs assessments.

**Safety and Risk Assessment**

Safety threats include:

- 1) Father is the primary caregiver, and his violent action caused a severe injury, spiral fracture to David Clement. The father's injury to the child was inconsistent with his explanation.
- 2) The father was not able to control his behavior and lost his temper when attempting to discipline his son. Father lacks the knowledge to use other alternatives to hitting and injuring child.
- 3) David and his father live with the paternal grandmother who is advanced in age and suffers from diabetes, high blood pressure, and neuropathy and cannot physically intervene to ensure his safety.

Mock State

Department of Youth and Family Services

Madison District Office

Case Name:  
Clement

Child(ren):  
David

Report to the Court

June 3, 2011

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**Permanency Plan**

Reunification

Signatures		
Social Worker: Timothy Riggs	<i>Timothy Riggs</i>	Date: 06-03-2011
Social Work Supervisor: Sara Perry	<i>Sara Perry</i>	Date: 06-03-2011

**CAUSE NO: J0812**

**IN THE MATTER OF  
David Clement, CHILD**

**AND CONCERNING**

**Collin and Jennifer Clement, RESPONDENTS**

**IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE**

**FIFTH JUDICIAL DISTRICT**

**ADJUDICATION AND DISPOSITIONAL ORDER**

This matter came before the Court on the 3rd day of June, 2011. The following are named as parties:

Jennifer Clement, Mother

DOB: October 30, 1981

568 Oak Court

Madison, Mock State 12006

Collin Clement, Father

DOB: March 27, 1979

1235 Belleflower Drive

Madison, Mock State 12006

Madison Department of Youth and Family Services

Madison County, Mock State

**THE COURT FINDS:**

1. The court has jurisdiction over this matter.
2. The parties stipulate that the child, David Clement, is adjudicated as an abused and neglected child as defined in Madison State Family Code, Section 32A-1-1, et seq. MSSA 1970.
3. The Department has made the following reasonable efforts to reunify David Clement with his father, Collin Clement:
  - Arranged for the following services to address the causes and conditions that resulted in the abuse and neglect of the child:
    - a) Psychosocial evaluation for Collin Clement;
    - b) Psychological evaluation for Jennifer Clement;
    - c) Individual counseling, medication, and medication monitoring program for Jennifer Clement;
    - d) Short-term therapy as precursor to structured parent coaching program for Collin Clement; and
    - e) Services to assist with caretaking for Louise Clement, paternal grandmother, to alleviate stress for Collin Clement.
4. Arranged for and provided visitation between David Clement and Collin and Jennifer Clement.

5. Arranged for behavioral assessment and services for David Clement to determine diagnosis of ADHD and arranged for counseling as a precursor for his participation in structured parent coaching program with his father.
6. Despite the reasonable efforts made by the Department, reunification of the child with his parent is not in the child's best interest at this time and is contrary to the welfare of the child as Mr. Clement still requires full participation and completion in the intensive and structured parent coaching program in order for reunification to occur.
7. The Department has exercised reasonable care in providing for David Clement's physical health, behavioral health, and educational needs. The child is safe in the current placement. The child's placement is in the least restrictive setting possible, given the child's needs, and is in close proximity to his parents. The placement has allowed for the child to maintain his educational placement setting.
8. The child has no siblings in foster care.

**THE COURT ORDERS:**

1. David Clement to remain in the custody of the Department of Youth and Family Services, which is responsible for his care and supervision and placement of the child in foster care for an indeterminate period of time not to exceed 6 months from the date of this order.
2. A permanency plan goal of reunification is adopted.
3. That the case plan, attached to this order that was developed by the parties and presented by the Department, shall be adopted.
4. John Smith, Esquire, is appointed to continue to represent Jennifer Clement.
5. Ray Garley, Esquire, is appointed to continue to represent Collin Clement.
6. Nancy Richards, Esquire, is appointed to continue as Guardian ad Litem for David Clement

**NEXT HEARING:** The Periodic Review Hearing is scheduled for the 29<sup>th</sup> day of November, 2011, at 4:00 p.m. before Judge Sanchez.

**This is a final order for purposes of appeal.**

Gene Sanchez

Gene Sanchez

District Court Judge

June 3, 2011

June 3, 2011

**Mock State**

**Department of Youth and Family Services**

**Madison District Office**

**Case Name:  
Clement**

**Child(ren):**

**David**

**Report to the Court**

**November 29, 2011**

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**Case Summary**

The Clement family first came to the attention of the Department on March 20, 2007, when the school referred David Clement for physical neglect due to hygiene issues. The case was unsubstantiated, and a referral was made for prevention services. On Monday, April 4, 2011, St. Vincent's Hospital Emergency Room (ER) staff called Statewide Central Intake to report that Collin Clement brought his son, David, into the emergency room with a fractured left arm and bruising to the left torso. DCYF responded and saw David and Collin Clement at St. Vincent's ER. David's left arm was swollen with bruising to the forearm and wrist, along with left torso. David was administered pain medication due to intense level of pain. David stated, "I was fooling around with my cousins and fell." David changed his story about how he was injured when he met with the doctor, saying he and cousins were in the back of his Dad's truck, and he fell off. Collin Clement, father, was present and interrupted David several times to provide information. The father was visibly irritated and made no attempts to comfort David. X-rays revealed a days-old spiral fracture consistent with intense twisting of the arm. The x-rays showed bone splintering, and a CT scan determined surgery would be required due to bone fragmentation. There were also concerns about possible nerve damage.

This worker met with Collin Clement, father, in a hospital consultation room. Mr. Clement stated he and David live with his mother, Louise Clement. He stated his mother is in her 80s and suffers from diabetes, high blood pressure, neuropathy, and circulation issues. He takes her to doctor appointments and to get medications. Mr. Clement has a sister, Jackie Wright, who also helps with Louise's care. David and Collin Clement live with Louise Clement because Mr. Clement is underemployed. He receives public assistance for food. Mr. Clement is the oldest of four children and his father left his mother after his youngest brother was born. Collin Clement describes himself as stepping up to be "the man of the house," and he kept things going at home while his mother worked. Mr. Clement worked at a very young age to help his mother provide for the household. He graduated from high school and started to attend community college. He met Jennifer Kolbe, and they married and established their own household. He was working and attending night online classes when Ms. Clement became pregnant. His construction job suffered as the result of the housing bubble burst, and, soon after David was born, Ms. Clement suffered from postpartum depression that became so serious that she required medication and ultimately moved in with her parents. Mr. Clement and David moved in with Louise Clement.

Mr. Clement's psychosocial assessment revealed an intelligent, capable father with chronic, high-level stress that would benefit from a reduction of stressors in the home environment and a structured, intensive parent coaching program. Mr. Clement disclosed physical abuse to his son. Mr. Clement is enduring chronic stress as the result of family and job-related events and demands. He admits this chronic stress results in anxiety. He eats poorly and has gained weight, has digestive and sleep problems, and admits to memory and concentration impairment. Mr. Clement would benefit from assistance in reducing stresses associated with caring for his mother. The report recommends short-term therapy, an intensive and structured parent coaching program with his son, and time for exercise and/or socialization. Mr. Clement has successfully engaged in the recommended parent coaching program with his son. Mr. Clement has benefitted from the ancillary supports the agency facilitated for his mother that allow Mr. Clement focused time for positive activities aimed at stress reduction.

**Mock State**

**Department of Youth and Family Services**

**Madison District Office**

**Case Name:  
Clement**

**Child(ren):**

**David**

**Report to the Court**

**November 29, 2011**

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Jennifer Clement has a diagnosis of major depressive disorder. Ms. Clement has received services intermittently for years. Previous treatment included a Prozac regimen and individual counseling. Her compliance with meds and counseling have been sporadic at best. Ms. Clement's evaluation recommended combination prescription therapy, an in-home monitoring component to ensure medication compliance, and consistent counseling sessions. Ms. Clement has engaged in counseling sessions, the recommended combination prescription therapy and in-home medication monitoring.

David Clement had a behavioral health assessment and was diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). This diagnosis is in line with David's difficulty staying focused and paying attention, difficulty controlling behavior, and hyperactivity (over-activity). David has a combined type of ADHD, wherein he is hyperactive, impulsive, and with some inattentiveness. David is now on a minimum dose medication regimen of Quillivant XR. Foster parents are monitoring his medication and have facilitated regular medication reviews. David attended individual counseling before beginning the parent coaching program with his father. David's foster parent, Maria Thompson, benefitted from listening to individual session summaries at the end of sessions and reports she is seeing positive behavior changes. Some areas addressed have been how to set fair, clear, and consistent expectations, direction, and limits; following a regular schedule and limiting distractions; acknowledging success and positive behavioral choices; creating a home system to help David stay on schedule with regard to schoolwork and projects; establishing a regular feedback loop with David's teacher; and discussing how David and his foster parents can stay calm during disagreements. David successfully engaged in the parent coaching program, and TCPA reports that father and son are learning new skills aimed at positive parenting and strengthening their relationship.

Collin and David Clement require continued participation and successful completion of the intensive, structured parent coaching program in order to achieve reunification.

**Child's Perception of Situation:**

David is enjoying learning new ways to relate with his father. He expresses that he enjoys the parent coaching program and sees a difference in the way they get along. David understands that completing the parent coaching program is important.

**Child(ren) Information**

**Physical Health**

David Clement is in good overall physical health and immunizations are up to date. David has received dental screening and requires three fillings. David has received medical care recommended for his arm fracture.

**Mental/Behavioral Health**

David Clement presented initially as inattentive and hyperactive, and his father and teacher both described challenging behavior due to hyperactivity. David was diagnosed with ADHD and continues to benefit from medication therapy. Maria Thompson, foster parent, monitors his medication to ensure that if side effects occur, they will be addressed immediately. David Clement has not exhibited any side effects of the medication and is more focused in the classroom and at home.

**Report to the Court**  
**November 29, 2011**

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**Education**

David Clement is in the 5th grade at Madison Elementary School. David is an average student. His performance in the classroom has benefitted from medication to address his ADHD.

**Social/Emotional Development**

David Clement's teacher initially described him as everyone's friend and no one's close friend. ADHD medication has allowed for David to regulate his behavior, and the teacher and foster parents both continue to that report it is easier for David to interact with peers. David is also involved in summer baseball and is enjoying this team activity.

**Placement**

**Relative as Placement Resource**

At the time of removal, David Clement was placed with his paternal aunt and uncle, Jackie and Mark Wright. On 4/25/11, was removed from this home at the foster parent's request. The Wrights indicated they had hoped for a short-term placement and wanted to remain in contact with David.

**Description of Current Placement**

**Placement Type and Description:** On 4/25/11, David Clement continues in placement with Maria and Daniel Thompson, licensed foster parents. The Thompsons ensure that David attends all medical and behavioral health appointments, as well as parent coaching sessions.

**Visitation**

Collin Clement and David Clement visit once a week at the Department. Mr. Clement also attends David's baseball games, and foster parents have monitored other visitation opportunities. Father and son are actively involved in the parent coaching program once a week. These sessions are providing concentrated quality time that is improving their relationship. TCPA is recommending extended visits begin for father and son. T Jennifer and David Clement have also visited and the Department will continue these visitation efforts.

**Safety and Risk Assessment**

Safety threats include:

1) Father is the primary caregiver, and previous violent actions caused a severe injury. Father's successful completion of the parent coaching program with his son will allow him to perform basic parenting duties and responsibilities that ensure child safety.

Mock State  
Department of Youth and Family Services  
Madison District Office

Case Name:  
Clement  
Child(ren):  
David

**Report to the Court**  
**November 29, 2011**

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- 2) Father is actively engaged in services to increase his parenting knowledge, skills or motivation necessary to assure a child's safety.
- 3) Mother is not actively involved in the child's care and does not have protective capacity.

Risk level: Moderate

**Permanency Plan**

Reunification

Signatures		
Social Worker: Timothy Riggs	<i>Timothy Riggs</i>	Date: 11/29/11
Social Work Supervisor: Sara Perry	<i>Sara Perry</i>	Date: 11/29/11

**CAUSE NO: J0812**

**IN THE MATTER OF  
David Clement, CHILD**

**AND CONCERNING**

**Collin and Jennifer Clement, RESPONDENTS**

**IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE**

**FIFTH JUDICIAL DISTRICT**

**JUDICIAL REVIEW ORDER**

This matter came before the Court on the 29th day of November, 2011. The following are named as parties:

Jennifer Clement, Mother

DOB: October 30, 1981

568 Oak Court

Madison, Mock State 12006

Collin Clement, Father

DOB: March 27, 1979

1235 Belleflower Drive

Madison, Mock State 12006

Madison Department of Youth and Family Services

Madison County, Mock State

**THE COURT FINDS:**

1. The court has jurisdiction over this matter.
2. David Clement, is adjudicated as an abused and neglected child as defined in Madison State Family Code, Section 32A-1-1, et seq. MSSA 1970.
3. The Department has made the following reasonable efforts to reunify David Clement with Collin Clement:

Arranged for the following services to address the causes and conditions that resulted in the abuse and neglect of the child:

- a. Psychosocial assessment for Collin Clement and facilitated arrangements for him and David to participate in an intensive, structured, parent coaching program
- b. Provided support to Collin Clement by arranging for ancillary services for his mother, Louise Clement
- c. Arranged for and provided visitation between David Clement and Collin Clement
- d. Arranged for and provided visitation between David Clement and Jennifer Clement
- e. Arranged for behavioral assessment, medication therapy, and counseling services for David Clement to address issues related to his behavior

- f. Arranged for David Clement to participate in the structured parent coaching program with his father
4. By reports of and testimony received from treatment providers, Collin Clement has made considerable progress in addressing the causes and conditions that resulted in the abuse and neglect of David Clement.
5. Despite the reasonable efforts made by the Department, reunification of the child with his parent is not in the child's best interest at this time and is contrary to the welfare of the child. Collin Clement and David Clement still require continued participation in the parent coaching program.
6. The Department has exercised reasonable care in providing for David Clement's physical health, behavioral health, and educational needs. The child is safe in the current placement. The child's placement is in the least restrictive setting possible given the child's needs and is in close proximity to his parent. The placement has allowed for the child to maintain his educational placement setting.
7. The child has no siblings in foster care.

**THE COURT ORDERS:**

1. David Clement to remain in the custody of the Department of Youth and Family Services, who is responsible for his care and supervision.
2. A permanency plan goal of reunification is adopted.
3. David and Collin Clement will continue to attend and successfully participate in the structured parent coaching program.
4. Jennifer Clement will continue to participate in individual counseling, medication therapy, and in home monitoring of medication therapy.
5. The Department will facilitate and monitor extended visits between David Clement and his father, Collin Clement, on December 10, 18, 21-26, and 28-January 3, 2012, for purposes of beginning the reunification process.
6. John Smith, Esquire, is appointed to continue to represent Jennifer Clement.
7. Ray Garley, Esquire, is appointed to continue to represent Collin Clement.
8. Nancy Richards, Esquire, is appointed to continue as Guardian ad Litem for David Clement

**This is a final order for purposes of appeal.**

Gene Sanchez

Gene Sanchez  
District Court Judge

November 29, 2011

November 29, 2011

**CAUSE NO: J0812**

**IN THE MATTER OF  
David Clement, CHILD  
AND CONCERNING  
Collin and Jennifer Clement, RESPONDENTS**

**IN THE DISTRICT COURT OF  
Madison COUNTY, MOCK STATE  
FIFTH JUDICIAL DISTRICT**

**DISMISSAL ORDER**

This matter came before the Court on the 4th day of January, 2012. The following are named as parties:

Jennifer Clement, Mother  
DOB: October 30, 1981  
568 Oak Court  
Madison, Mock State 12006

Collin Clement, Father  
DOB: March 27, 1979  
1235 Belleflower Drive  
Madison, Mock State 12006

Madison Department of Youth and Family Services  
Madison County, Mock State

**THE COURT FINDS:**

1. The court has jurisdiction over this matter.
2. David Clement, is adjudicated as an abused and neglected child as defined in Madison State Family Code, Section 32A-1-1, et seq. MSSA 1970.
3. The Department has made the following reasonable efforts to reunify David Clement with Collin Clement:  
  
Arranged for the following services to address the causes and conditions that resulted in the abuse and neglect of the child:

- a. Individual counseling, medication therapy, and medication monitoring for Jennifer Clement;
  - b. Ongoing medication and monitoring for David Clement following diagnosis of ADHD;
  - c. David's participation in, and successful completion of, both individual counseling focused on his behavior and the parent coaching program with his father;
  - d. Collin Clement's successful completion of the intensive, structured, parent coaching program with David Clement;
  - e. Support to Collin Clement by arranging for ancillary services for Louise Clement, paternal grandmother;
  - f. Visitation between David Clement and his parents, Collin Clement and Jennifer Clement.
4. By the social worker's report and testimony received from treatment providers, Collin Clement has made considerable progress in addressing the causes and conditions that resulted in the abuse and neglect of David Clement.
  5. The causes and conditions that resulted in the abuse and neglect of David Clement by Collin Clement have been remediated or mitigated, and therefore, it is no longer in the child's best interest at this time to remain outside the home, and there is no justifiable cause to prevent the return of custody of David Clement to his father.

**THE COURT ORDERS:**

1. That full custody of David Clement be returned to Collin Clement.

**This is a final order for purposes of appeal.**

Gene Sanchez

Gene Sanchez

District Court Judge

January 4, 2012

January 4, 2012

Madison Elementary School  
6 Schoolhouse Drive  
Madison, Mock State 12006  
209-555-2834

Grade 4

Report Card for David Clement  
January 2010 – June 2010

<b><i>Subject</i></b>	Mid Semester	Final
<b><i>Math</i></b>	B	B+
<b><i>Science</i></b>	C	C
<b><i>Physical Education</i></b>	B	B
<b><i>History/World Studies</i></b>	B-	C+
<b><i>Music</i></b>	C-	B

Report Card for David Clement  
September 2010 – December 2010

<b><i>Subject</i></b>	Mid Semester	Final
<b><i>Math</i></b>	B	C-
<b><i>Science</i></b>	C	B
<b><i>Physical Education</i></b>	B+	A
<b><i>History/World Studies</i></b>	C	D
<b><i>Music</i></b>	B	C



Are they (he/she) cooperative with the school?       Yes    No

If No, please explain.

8. Does this child have any disability?

Yes       No

If "Yes," please explain.

9. What is the child's personal appearance (clean, dressed appropriately for weather conditions, rested, etc.)?

*David's physical hygiene was maintained at home and he dressed appropriately for the spring. Since placement in foster care, he appears to be well rested because he has to follow a routine, which includes a designated bed-time.*

Comments    *Please contact the school should you need additional information about David. His education is paramount, and we want to provide the best learning experience for him.*

Paul Bratcher

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(Name – Please Print)

*Paul Bratcher*

April 8 2011

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(Signature)

(Date)

Counselor

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(Position)

Madison Elementary School

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(School)

# ***Physical Health Care Clinic, Inc.***

123 Wellness Blvd.

Madison, Mock State 12006

## **Summary of Physical Examination**

The child listed below is a patient at our facility and has been seen in our center for comprehensive services. This document is a summary of evaluations and examinations and should serve as an official record for school acceptance.

**David Clement**

**Born 08/01/2001**

Dr. Shaunta Jensen

Last physical: April 26, 2011

Well exam. No follow up needed

Next scheduled for: October 14, 2011

Immunizations are current and documented in the clinic's electronic medical records file. Child is at 80<sup>th</sup> percentile for weight and 90<sup>th</sup> percentile for height.

Barbra Adams, Certified Nurse Practitioner

May 6, 2011

Signature of person completing summary

Date

# Madison Vision, Inc.

140 Wellness Blvd.  
Review City, Mock State 12006

## Summary of Examination

The child listed below is a patient at our facility and has been seen in our center for comprehensive services. This document is a summary of evaluations and examinations and should serve as an official record for school acceptance.

**David Clement**

**Born 08/01/2001**

Dr. Anthony Wilson

Last examination: April 12, 2011

Next scheduled: Not yet scheduled

Child has 20/20 vision. No treatment required.

Tina Parker, Office Administrator

April 20, 2011

Person Completing Form

Date

## PSYCHOTROPIC MEDICATION CONSENT TRACKING FORM

**Name:** David Clement  
**DOB:** 8/1/2001  
**LINK Person ID#:** 5456  
**Legal Status:** Custody with Department, parental rights intact

**Worker:** Timothy Riggs  
**Contact:** triggs@dcyf.com

**Supervisor:** Sara Perry  
**Contact:** sperry@dcyf.com

**Date of Request:** 4/26/2011

- Urgent  
 Review of medications used to treat in emergency  
 For normal processing

### Summary:

David Clement is a 9-year-old male child in the custody of the Department. Child was experiencing inattentiveness and an inability to focus on schoolwork and tasks at home and exhibiting hyperactive and impulsive behavior along with frequent lack of concentration. These symptoms interfered with daily functioning. Prescribing doctor is recommending Quillivant XR in a low dose with close monitoring for side effects, which may include insomnia, changes in appetite, and resulting fluctuation in weight. Doctor recommends individual counseling sessions as a precursor to his participation in the structured parent coaching program that he is slated to participate in with his father.

### Panel Determination:

- Consent granted  
 Consent denied

Date: 4/26/2011

Additional Recommendations: Medication review appointment on 5/17/2011 to review dosage, any side effects, and efficacy of medication.

**Department of Youth and Family Services  
Madison District Office  
900 State Street  
Madison, Mock State 12006  
1 888-777-2000**

April 4, 2011

Ms. Jennifer Clement  
568 Oak Ct.  
Madison, Mock State 12006

Dear Ms. Clement:

On April 4, 2011, David Clement was removed from Collin Clement's care by the Madison Police Department and placed into the custody of the Department of Youth and Family Services. He was placed into a relative foster home.

This authority is time limited. If a petition to extend custody is granted by the District Court, there will be an emergency court hearing scheduled. You will be notified of the date and time of the hearing. There will be a judicial determination as to whether the child will remain in foster care.

You are entitled to representation by an attorney. An attorney will be appointed for you for the initial hearing. If you cannot afford an attorney, you may contact the Office of the Public Defender at 1-888-888-8000 and request continued appointment.

If you have questions, please contact me at 1-888-777-2000, ext. 789.

Sincerely,

*Michael Stout*  
Michael Stout, BSW  
Social Worker

**Mailed to Residence**

**Department of Youth and Family Services  
Madison District Office  
900 State Street  
Madison, Mock State 12006  
1 888-777-2000**

April 4, 2011

Ms. Jennifer Clement  
568 Oak Ct.  
Madison, Mock State 12006

Dear Ms. Clement:

This letter is written to invite you to attend a family team meeting on April 11, 2011, at 9:00 a.m. The meeting will be held at the Department of Youth and Family Services office, 900 State Street, Madison, Mock State 12006. The purpose of this meeting is to bring together family and other interested people committed to working together to strengthen the family. We will learn what the family hopes to accomplish, set realistic and important goals, recognize and encourage the family's strengths, identify what the family needs, find solutions that build on the family's strengths and lead to necessary changes, make a plan for who will do what and when it will be done, and agree on the next steps. The purpose of family team meetings is to keep children safe, promote children's well-being, and support families.

Additionally, the District Court has granted the Department continued custody. An initial custody hearing is scheduled for April 12, 2011, at 1 p.m. This hearing will be to determine whether David will remain in foster care.

If you have questions, or if you need transportation to attend the hearing, please feel free to contact me at 1 888-777-2000, ext. 789.

Sincerely,

*Michael Stout*  
Michael Stout, BSW  
Social Worker

**Mailed to Residence**