Comprehensive Family Evaluation – Narrative sections

This is an example of the information contained in the narrative sections of the initial CFE for this family, once the assigned worker had a chance to document and summarize the findings from her work. It would be completed during the first several weeks after case assignment.

Under the General Tab:

1. Describe the family's composition and cultural factors

This is a blended family. The mother to all three children, Elizabeth Calhoun, identifies as Caucasian, as does the father of the two youngest children, Fred Calhoun. The Calhoun's are married and parent 5 year old Sherrie, 3 year old Bobby and 2 year old Tabitha. Sherrie's father, Harry Goodman, identifies as African American. Mr. Goodman also parents Sherrie when she visits with him.

The Calhoun's do not identify religious culture to be hugely significant to them though they report that they celebrate Christian holidays and have, at times, participated within church or other Christian communities. Mr. Goodman states he is a Christian and would like his daughter to attend church more often.

When asked what values were most important to them or to their family, Mrs. Calhoun said that she wants her children to "always know they are loved and special." She further stated that families should respect each member and "support each other without judging." Mr. Calhoun stated that he wants his kids to be independent and to "think for themselves." Mr. Goodman stated that hard work and independence are important values he would like to instill in Sherrie.

Under the Family Situation Tab:

2. <u>Describe the nature and extent of the maltreatment or family situation.</u>

A neighbor had called 911 at 3:30 pm on May 28, 2013 after hearing loud crying from the apartment for at least an hour and getting no response when they knocked on the door. When the police arrived they found the children alone. The parents arrived home fifteen minutes later and law enforcement officers noticed they were both visibly impaired. The children were placed into protective custody.

This situation appears to have become a more of an ongoing and significant concern about a year ago. There are two prior intakes with similar concerns (care of the children and adequate supervision related to substance use). One was received ten months ago and one three months ago. Neither resulted in ongoing involvement with the family.

3. Describe the everyday life tasks that contribute to the maltreatment

Supervision is the predominant, ongoing problem for this family. Extended family members, as well as neighbors, have confirmed that the children have been left unsupervised on several occasions. Neighbors report that the two older children have been found wandering the halls at various times, and that often when the parents were home there was a lot of traffic in and out of the apartment. Family members

have also reported that, due to the parent's use of drugs and alcohol, there times that they are unable to supervise their children adequately even though they are physically present with them.

The family is in agreement that a new plan for adequately supervising the children needs to be developed and followed and they are in the process of developing that plan with provider this time.

4. <u>Sequence of events: Describe the surrounding circumstances accompanying the maltreatment</u> or situation

Mr. and Mrs. Calhoun reported that, on the day the children were placed, they noticed they did not have any drugs (their drug of choice is methamphetamines). Mr. Calhoun stated that he was first aware of this after he woke up for the day around 9:30 am. Mrs. Calhoun reported that they went about their morning as best they could, but they were getting more anxious and "edgy" as time passed. At 12:15 pm, Mr. Calhoun took Sherrie to the school bus stop. At the same time, Mrs. Calhoun was putting the other two children down for a nap. Around 1:00 pm, with the two youngest children asleep and Sherrie at school, they were craving to the extent that they decided the best action would be to go to a nearby home and buy some meth. After arriving, they began using instead of returning home as they had planned, and lost track of time. When they did return home they were under the influence and found the police there.

Under the Family Functioning Tab:

5. <u>Describe how each parent/caregiver disciplines the children</u>

All parents in this blended family report attempting to use time outs to discipline their children to varying degrees of success. All three parents also state that they have resorted to spanking at times. There are no reported concerns of physical abuse. All three parents have now agreed to work with a provider to develop and implement a plan for discipline and behavior management (as the youngest children don't require as much "discipline" as safe and consistent redirection). There is an agreement that timeouts, and removing privileges will be the preferred methods of discipline, and that there should be consistency in when and how discipline happens between both households.

6. What are the overall parenting practices used by the parent/caregiver?

All parents involved seem to have a basic understanding of the developmental stages and needs of their children, and do not appear to have inappropriate expectations of them in terms of behavior or skills. During supervised visitation, the Calhoun's have consistently demonstrated that they know their children well, and enjoy being with them. They have shown basic awareness of age appropriate child safety and basic ability to manage behaviors in this controlled context.

While it's a strength that this family seems to have a solid foundation of parenting and emotional skills, it's clear that over the last year or so the Calhoun's level of involvement in basic parenting duties and attentiveness to their children's needs has deteriorated significantly. They appear to be becoming more aware of how this has occurred, within the context of their addictions, and say they are committed to

restoring their ability to properly nurture and meet emotional needs of their children, as well as addressing the impact of their drug use on general parenting and supervision.

Mr. Goodman has agreed to become more involved in Sherries schooling, as well as being a resource for the Calhoun's when they need help with her day-to-day care. It has been determined that Sherrie will continue to have weekend visits with her father as his schedule permits, and that he will be responsible for her basic care those times.

7. Describe what the parent has done to keep the children safe in the past and resources used.

In the past, the Calhoun's have used the children's maternal grandparents to supervise the children when they were not able to be there. However, the relationship between the Calhoun's and the grandparents has become strained over the last year due to the frequency of the parent's drug use and their concerns about their ability to care for their children. The Calhouns, at times, have used individuals within their apartment complex to supervise their children, but did not identify anyone they had a significant relationship with for the initial FTDM or a subsequent shared planning meeting.

The parents have a strong desire to keep the younger children out of daycare, as a close family friend had a child who experienced abuse in a daycare setting. They do have some interest in pre-school programs, and in cooperative style daycare in which a parent attends with the child/children. These are options that would increase the children's socialization and development, the parents' connection to other healthy parents, and to allow another option for supervision.

8. Describe the family's support system

As stated above, Mrs. Calhoun's parents have been a support for her and the children. The children are currently placed with their maternal grandparents.

Mr. and Mrs. Calhoun have also initiated involvement in a 12 step program and are currently seeking sponsors.

Mr. Calhoun's sister and her husband can be occasional resources, although they are quite busy caring for her father who is reported to suffer with dementia.

Mr. Goodman seems to have support from his current girlfriend, Crystal.

FAMILY LEVEL OBJECTIVE:

The family will use their "Watch the Kids" plan to make sure that their children are safe and supervised at all times.

Tasks:

- 1. The Calhouns will develop the "Watch the Kids" plan to make sure the children are supervised safely with the assistance of the service provider. CA Social Worker will make a referral to Family Connections by Friday June 7, 2013.
- 2. The Calhouns will share their "Watch the Kids" plan within 7 days of completion with the assigned Social Worker and family attorney. Social Worker will assist the family in sharing this plan with their identified support team, court personnel, and others that are connected

- to the children, to ensure they are informed and notice the changes occurring.
- 3. The Calhouns will document and celebrate the success of the "Watch the Kids" plan with the help of Social Worker, maternal grandparents, service provider, and others. Their progress will be documented through visitation reports, a family supervision chart, provider reports, and Social Worker observations. Progress will be documented monthly by Social Worker.
- 4. The family will continue to follow the activities outlined in the Out-of-Home safety plan.

Secondary Family Level Objective:

The family will support their children while in out-of-home care.

Tasks:

- 1. All family members will sign all needed releases
- 2. All Parents will attend all visitations with their children, coming prepared to have safe and appropriate interaction and activities with them.
- 3. All family members and team members included in the safety plan will keep the social worker informed of any and all changes to the safety plan and contact information.

9. <u>Identify and describe caregiver responsibilities</u>

The children are currently placed together with their maternal grandparents. Whoever cares for the children will need to provide them with consistent and appropriate care and supervision. Sherrie needs appropriate support to attend school and to complete homework and participate in any remedial services recommended to get her on-track educationally and developmentally. Bobby and Tabitha need age appropriate, safe opportunities to develop across developmental domains. Bobby requires continued support towards full potty training, as will Tabitha in the coming months. The caregivers must ensure the children receive all needed and recommended medical, dental, vision, and therapeutic care. Lastly, while the children remain in out of home care, they must be supported in a continued and positive relationship with their parents, including attending visitations per the court order.

The youngest two children are eligible for WIC services based on their age and their status in out of home care. The placement has been provided information on connecting to WIC services, which will help supplement the financial cost of caring for the children.

10. <u>Describe when and how the parent(s) were notified of placement changes that occurred during this period</u>. Describe the parent(s) perspective.

All parents attended an initial FTDM that recommended placement with the maternal grandparents. No placement changes have occurred since that time.

11. When and how was the parent(s) notified of visitation changes that occurred during this period?

N/A – the visitation schedule was solidified a few weeks ago and has remained consistent since that time.

Under the Parent/Caregiver Functioning Tab:

12. How does the parent/caregiver manage his/her own life on a daily basis? Describe the parent(s)/caregiver(s) behavior or condition that may impact the child(ren)'s safety and adequate care.

Both parents acknowledge that drug and alcohol use, specifically meth use, has impacted their ability to parent and that this is not the only time that they have left children alone in order to acquire drugs. They also acknowledge that it was unsafe to have left the children alone and state that they will not do so in the future. This SW believes that they will need significant support around addressing their abuse of drugs and alcohol to be able to be relied upon to consistently and competently supervise their children in the future.

More information about how both Mr. and Mrs. Calhoun what triggers them to use drugs, their early build up how they think about using, and late buildup of how their body actually responds to craving for drugs will need to be explored with their individual chemical dependency provider.

Mr. and Mrs. Calhoun have both experienced significant impacts to their lives as a result of drug use and abuse. Mr. Calhoun appears to have struggled with abuse since his teens, but has also experienced times where he was functioning fairly well, employed, and either abstaining or using in a more low-risk way. Mrs. Calhoun appears to be struggling with addiction for the first time after a history of occasional abuse that she was able to manage reasonably well. Both have completed substance abuse evaluations and the recommendations are pending as of this writing.

Neither Mr. nor Mrs. Calhoun is currently employed. They receive TANF, food stamps and subsidized housing, as well as child support from Mr. Goodman. Their benefits have been extended for six months, as the plan remains reunification as quickly as is safely possible. They appear to have managed money and participation in various support programs (TANF, etc) successfully enough that access to basic needs has never become an issue, though the maternal grandparents have provided emergency assistance to the family at times.

Mr. Goodman has regular employment at a local restaurant as a cook and works graveyard and weekends. He has a girlfriend who has been living with him for nearly a year.

INDIVIDUAL LEVEL OBJECTIVES:

ILO for Mr. Calhoun

Mr. Calhoun will use his relapse prevention plan to make sure that drug and alcohol use does not impact his ability to keep his children safe and supervised.

Tasks:

- 1. Mr. Calhoun will develop a specific relapse prevention plan to assist him in to make sure drugs and alcohol do not get in the way of keeping their children safe and supervised with the assistance of the chemical dependency provider. CA Social Worker will make a referral for a D/A Assessment to LifeLine Services by (DATE). Social Worker will request to provider that a plan be developed to assist Mr. Calhoun with avoiding, coping, and escaping high risk situations that lead to drug use.
- 2. Mr. Calhoun will share his relapse prevention Plan with the assigned Social Worker within 7 days of completion. Social Worker will assist Mr. Calhoun in sharing this plan with court personnel, team members, and others to ensure they are informed and notice the changes occurring.

3. Mr. Calhoun will document & celebrate the success of his relapse prevention plan with the help of his Social Worker, provider, and other team members.

ILO for Mrs. Calhoun

Mrs. Calhoun will use her individual plan to make sure that drug and alcohol use does not impact her ability to keep her children safe and supervised.

Tasks:

- 1. Mrs. Calhoun will develop a specific action plan to make sure drugs and alcohol do not get in the way of keeping their children safe and supervised with the assistance of the chemical dependency provider. CA Social Worker will make a referral for a D/A Assessment to LifeLine Services by (DATE). Social Worker will request to provider that a plan be developed to assist Mrs. Calhoun with avoiding, coping, and escaping high risk situations that lead to drug use.
- 2. Mrs. Calhoun will share her specific action plan with her Social Worker within 7 days of completion. Social Worker will assist Mrs. Calhoun in sharing this plan with court personnel, team members, and others to ensure they are informed and notice the changes occurring
- 1. 3. Mrs. Calhoun will document & celebrate the success of her action plan with the help of her Social Worker, provider, and other team members.

Under the Child Functioning Tab

13. <u>Describe how the child functions on a daily basis</u>

The initial health screen did not find any medical concerns for any of the children. A well child exam and dental exam have also been completed. The two younger children were behind on immunizations but have been brought up to date. Tabitha had not seen a dentist before and Bobby had only once. Bobby and Sherrie had cavities that need to be filled, and an appointment has been made for this to occur. A CHET screen has been completed. It identified that Sherrie is slightly behind academically and has more difficulty with attention and externalizing behaviors than is typical, though she is not so elevated that follow up is immediately necessary. A wait and see approach is being followed given that, with extra support and consistency, she may make up the ground academically and see some reduction in attention/externalizing concerns. Her teacher reports that within the last week or two she has seen some increased attentiveness and decreased behaviors of concern from Sherrie, and reports that she generally seems to do very well.

The CHET screen also revealed language delays for Tabitha, who speaks very few words. A follow up appointment will need to be made with the local Birth to Three provider for evaluation and treatment.

Bobby, who is approaching 3 ½, has begun toilet training since being placed with his grandparents. He has had some initial success but is still working towards being completely potty trained. They report that

Tabitha is extremely interested in this and that they will work towards potty training with her when Bobby seems to have mastered this skill.

The two younger children are recommended to be enrolled in early education programs during the day. The Calhoun's, the maternal grandparents, and this sw will work together to identify a program that is high quality and responsive, that the Calhoun's and maternal grandparents feel comfortable with, and that will allow for continued participation of the children when they are able to safely return to their parents' care.

OBJECTIVES:

Under the Recommendation Tab:

14. <u>Assessment Summary</u>

This blended family came to the attention of the department when the mother, Ms. Calhoun, and the father of the two youngest children, Mr. Calhoun, left their 5, 3, and 2 year old alone in their apartment to seek out and use methamphetamines. The children were left unattended for at least 2 hours, and reports from family and neighbors identify that lack of appropriate supervision (leaving the children alone, allowing the children to wander away from the apartment, or supervising them while intoxicated) has been an ongoing issue of concern. The Calhoun's have agreed to a general case plan identifying the need for them to create a plan for adequate supervision as the family level objective, and a plan to manage substance use as their individual level objectives. They have begun work towards resuming safe care of their children by attending meetings with the social worker, visits with their children, and by attending a chemical dependency evaluation. They will need to continue this pattern of behavior — participating in recommended chemical dependency treatment and ultimately creating a plan to manage their substance use, as well as working with a recommended provider to create a plan to adequately supervise the children, and continuing to attend visitation regularly.

Mr. Goodman, the father of Sherrie, has worked with the social worker and attended meetings to participate in planning for his daughter. He has maintained his commitment to parenting Sherrie part time, as his work schedule allows. He has stated his willingness to work with this social worker and the Calhouns on ensuring both consistent and adequate supervision of Sherrie and a consistent discipline plan across households.

The children are doing fairly well, and more information about the few identified concerns can be found in the **Child Functioning** section.

Work with this family has just begun, as the department has only been involved with them for 7 weeks. Already good progress is being made on ensuring the children's stability and well-being in out of home care, maintaining their relationship with their parents through visitation, and on work with the parents to address the safety threats and have the children returned home as soon as safely possible. There is

much reason to be optimistic about efforts to support and monitor thei	t the future of this family and the department will continue to mak ir progress.