

Eleven-Month-Old Billy

The hospital social worker just called the Kansas Protection Report Center to report that an 11-month-old African-American child named Billy was brought to the emergency room at noon, today by his grandmother, Pauline Hamilton. Her 21-year-old son had left Billy with her the previous evening and said he would be back in a few hours. She hadn't seen or heard from him since. Mrs. Hamilton reported that Billy had been crying almost constantly since his father left him. She noticed bruises on his upper back when she bathed him. His left arm and hand were swollen and beginning to look bruised as well, and he was not using them. The neighbor who brought Mrs. Hamilton to the hospital confirms that Billy arrived the previous evening.

X-rays indicate a spiral fracture of the left arm that is three-to-four-days old and previous fractures of the upper left arm and ribs. According to the doctor, the injuries are strongly suggestive of abuse. Billy is also low weight for his age and is developmentally delayed. He has been clinging to his grandmother and was very resistive during the examination and x-rays.

Mrs. Hamilton is 66, nearly blind due to diabetes and has a severe case of rheumatoid arthritis. She is moving to the nursing home at the end of the month where her husband now resides. Their only source of income is Social Security benefits.

Billy visits Mrs. Hamilton often. She would like to care for him but cannot provide the attention he needs. Her son has cared for Billy since his girlfriend, Billy's mother, left him several months ago. She has paranoid schizophrenia and did not respond to medication or counseling. Her whereabouts are unknown. Mrs. Hamilton knows of no other family members who can care for Billy.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods often with Billy. She worries that Billy is being exposed to "bad elements" and is not getting proper care.

Billy has been placed in Kansas Department for Children and Families (DCF) custody and referred to your agency for foster care services. You are Billy's case manager and are planning his placement. Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his prospective caregivers and his family for the move?
- How would you place Billy to minimize stress to all parties?

Three-Year-Old Billy

The hospital social worker just called the Kansas Protection Report Center to report that a three-year-old African-American child named Billy was brought to the emergency room at noon, today by his grandmother, Pauline Hamilton. Her 24-year-old son had left Billy with her last night and said he would be back in a few hours. She hadn't seen or heard from him since.

Mrs. Hamilton reported that Billy had been crying almost constantly since his father left him. She noticed bruises on his upper back when she bathed him. His left arm and hand were swollen and beginning to look bruised as well, and he was not using them. When Mrs. Hamilton touched the arm, Billy began crying, "Hurts, hurts!"

The neighbor who drove the grandmother to the hospital confirms that Billy arrived last night.

X-rays indicate a spiral fracture of the left arm and previous fractures of the upper left arm and ribs. According to the doctor, the injuries are strongly suggestive of abuse. Billy is small for his age and has limited speech. He has been clinging to his grandmother and was very resistive during the examination and x-rays.

Mrs. Hamilton is 69, is nearly blind because of diabetes, and her hands are crippled due to rheumatoid arthritis. She is moving to a nursing home at the end of the month where her husband currently resides. She and her disabled husband live on Social Security benefits.

Billy visits her often. She would like to care for him, but cannot lift him or provide the attention he needs. Her son cared for Billy since his girlfriend, Billy's mother, left 10 months ago. Billy's mom has paranoid schizophrenia and did not respond to medication or counseling. Her whereabouts are unknown. Mrs. Hamilton knows of no other family members.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods, often with Billy. She worries that Billy is being exposed to "bad elements" and is not getting the proper care.

Billy has been placed in Kansas Department for Children and Families (DCF) custody and was referred to your agency for foster care services. You are Billy's case manager and are planning his placement.

Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his potential caregivers and his family for the move?
- How would you place Billy to minimize stress for all parties?

Nine-Year-Old Billy

Police call the Kansas Protection Report Center to report the following:

Billy came home from school to find his grandmother slumped in the chair. He called 911 and when the police arrived, they asked Billy if he lived with his grandmother. Billy told him that he was only staying with his grandmother for a couple of days until his father returned. Billy indicated he did not know where his father was and that he hadn't seen his mother in many months.

The neighbor indicated she could help Mrs. Hamilton by keeping Billy for a couple of days.

When the Kansas Department for Children and Families (DCF) worker interviewed Billy, a nine-year-old African-American child, she noticed bruises on his face and upper arm. When asked about the marks, he said, "Dad found out I ditched school last week, and let me have it". In addition, Billy states there isn't much food in the house; sometimes he's alone overnight and doesn't know where his father is. When his father is home, Billy frequently stays home from school to run "errands" for his father.

The hospital social worker just called you to report that Mrs. Hamilton, age 74, is nearly blind due to diabetes and can no longer manage her injections. She is a recent widow, has no one to care for her and will be moving directly to the nursing home from the hospital. Her 29-year-old son had left Billy with her and said he would be back in a few hours. That was four days ago.

Billy visits Mrs. Hamilton often. She would like to care for him but cannot due to her poor health. Her son cared for Billy since his girlfriend, Billy's mother, left 10 months ago. Billy's mom has paranoid schizophrenia and did not respond to medication or counseling. Her whereabouts are unknown. Mrs. Hamilton knows of no other family members who can care for Billy.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods, often with Billy. She worries that Billy is being exposed to "bad elements" and is not getting proper care.

Billy has been placed in DCF custody and referred to your agency for foster care services. You are Billy's case manager and are planning his placement.

Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his prospective caregivers and his family for the move?
- How would you place Billy to minimize stress for all parties?

Eleven-Year-Old Billy

Police call the Kansas Protection Report Center to report the following:

Billy came home from school to find his grandmother slumped in the chair. He called 911, and when the police arrived, they asked Billy if he lived with his grandmother. Billy told him that he was only staying with his grandmother for a couple of days until his father returned. Billy indicated he did not know where his father was and that he hadn't seen his mother in many months.

The neighbor indicated she could help Mrs. Hamilton by keeping Billy for a couple of days.

When the Kansas Department for Children and Families (DCF) worker interviewed Billy, an 11-year-old African-American child, she noticed bruises on his face and upper arm. When asked about the marks, he said, "Dad found out I ditched school last week, and let me have it". In addition, Billy states there isn't much food in the house; sometimes he's alone overnight and doesn't know where his father is. When his father is home, Billy frequently stays home from school to run "errands" for his father.

The hospital social worker just called your agency to report that Mrs. Hamilton, age 76, is nearly blind due to diabetes and can no longer manage her injections. She is a recent widow, has no one to care for her and will be moving directly to the nursing home from the hospital. Her 31-year-old son had left Billy with her and said he would be back in a few hours. That was four days ago.

Billy visits Mrs. Hamilton often. She would like to care for him, but cannot due to her poor health. Her son cared for Billy since his girlfriend, Billy's mother, left 10 months ago. Billy's mom has paranoid schizophrenia and did not respond to medication or counseling. Her whereabouts are unknown. Mrs. Hamilton knows of no other family members who can care for Billy.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods, often with Billy. She worries that Billy is being exposed to "bad elements" and fears he is being used as a "drug runner" by his father's friends.

Billy has been placed in DCF custody and was referred to your agency for foster care services. You are Billy's case manager and are planning his placement.

Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his potential caregivers and his family for the move?
- How would you place Billy to minimize stress to all parties?

Fourteen-Year-Old Billy

Billy was staying with his grandmother, Mrs. Pauline Hamilton, while being suspended from school. He went to the store, and when he returned he found his grandmother slumped in the chair. He called 911. When the police came, Billy told them he didn't know where his parents were; he was only staying with his grandmother for a couple of days.

When the Kansas Department for Children and Families (DCF) worker interviewed Billy, a 14-year-old African-American youth, she noticed bruises on his face and upper arm. When asked about the marks, he said, "Dad found out I ditched school last week, and let me have it". In addition, Billy states there isn't much food in the house; sometimes he's alone for several days and doesn't know where his father is. When his father is home, Billy frequently stays home from school to run "errands" for his father.

Billy will stay with a friend for the weekend.

The hospital social worker states that Mrs. Hamilton was in diabetic shock and is no longer able to manage her injections. She will be moving to the nursing home from the hospital. Her husband recently passed away.

Mrs. Hamilton is 79, nearly blind due to diabetes and has a severe case of rheumatoid arthritis. She reports that her 34-year-old son had left Billy with her and said he would be back in a couple of days; that was four days ago. She hadn't seen or heard from him since. Her son cared for Billy since his girlfriend, Billy's mother, left 10 months ago. The whereabouts of Billy's mother are unknown. Billy's mom has paranoid schizophrenia and did not respond to medication or counseling. Mrs. Hamilton knows of no other family members who can care for Billy.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods, often leaving Billy home alone. She worries that Billy is being exposed to "bad elements" and is becoming actively involved in the drug culture.

Billy has been placed in DCF custody and was referred to your agency for foster care services. You are Billy's case manager and are planning his placement.

Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his prospective caregivers and his family for the move?
- How would you place Billy to minimize stress for all parties?

Seventeen-Year-Old Billy

Billy was staying with his grandmother, Mrs. Pauline Hamilton, while being suspended from school. He went to the store, and when he returned, he found his grandmother slumped in the chair. He called 911. When the police came, Billy told them he didn't know where his parents were; he was only staying with his grandmother for a couple of days.

When the Kansas Department for Children and Families (DCF) worker interviewed Billy, a 17-year-old African-American youth, she noticed bruises on his face and upper arm. When asked about the marks, he said, "Dad got mad when I refused to run errands for him, and he let me have it". In addition, Billy states there isn't much food in the house; sometimes he's alone for several days and doesn't know where his father is. When his father is home, Billy frequently stays home from school to run "errands" for his father.

Billy will stay with a friend for the weekend.

The hospital social worker reports Mrs. Hamilton was in diabetic shock and is no longer able to manage her injections. She will be moving to the nursing home from the hospital. Her husband recently passed away.

Mrs. Hamilton is 82, nearly blind due to diabetes and has a severe case of rheumatoid arthritis. She reports that her 37-year-old son had left Billy with her and said he would be back in a couple of days; that was four days ago. She hadn't seen or heard from him since. Her son cared for Billy since his girlfriend, Billy's mother, left 10 months ago. The whereabouts of Billy's mother are unknown. Billy's mom has paranoid schizophrenia and did not respond to medication or counseling. Mrs. Hamilton knows of no other family members who can care for Billy.

Mrs. Hamilton thinks her son is involved in the drug culture. He disappears for long periods, often leaving Billy home alone. She worries that Billy is being exposed to "bad elements" and is becoming actively involved in the drug culture.

Billy has been placed in DCF custody and was referred to your agency for foster care services. You are Billy's case manager and are planning his placement.

Consider the following:

- What tasks would you perform to prepare Billy, his grandmother, his prospective caregivers and his family for the move?
- How would you place Billy to minimize stress to all parties?