

Case Presentation Form

Social

Worker : Bree Adams Date: 2/20/2020 Agency: DFCS at Catoosa County

Client Data:

Client DJ Age: 10 Gender: Male Race: White Referral Foster Date of March
Initials: Source: Care intake: 2019
case

Referral Reason: Failure to protect and control – family could not control or protect other children in the home from violent behaviors

Presenting Problem
Indicators: 1. Extremely Violent Episodes (hurts himself, others and property) 2. Constantly disrupting placement 3. Families home is not acceptable for DJ to return home

Background information: Has severe behavioral issues, past history of pyromania, killing animals, attacking other humans (stabbing, beating, attempting to cut off body parts), threatening to harm others (very descriptive in threats of raping others, cutting off body parts), destroying property (breaking windows, TV's). Very behind in school, tests at a first-grade level. Good at manipulating others. Has pending criminal charges. Lower IQ (74)

Client Strengths /
Protective Factors: 50-60% of time really sweet, good at sports and enjoys sports (basketball, soccer), easy to redirect majority of time.

ACE Score/
Trauma information 4. Instances of neglect as a child, BFA has anger issues and possible substance abuse

Risk Factors Behind in school, not getting proper education because of violent behaviors. Concern if behaviors cannot be controlled he will end up hurting himself/others and ending up being incarcerated. Lower IQ (74)

Treatment Goals:

1. Stabilizing and controlling violent episodes
2. Getting him to a place where he understands his behavior
3. Stabilizing constant placement

Services Offered:

Individual Counseling Group Case management, referral services, investigations, foster care
 Family Counseling Other

What is the desired outcome from the client, family, & referral source?

Being able to have him be a stable productive member of society

Him being able to live with his family

What interventions have been already attempted? What were the outcomes?

10 months in PTRF (long-term mental hospital with intensive treatment) has been out for 4 weeks and

Have not been able to stabilize placement anywhere since then due to behaviors. Med management and Mental health services have been referred, but only initial visits have been done due to moving placements. IFI services (wrap around home services, counselors and parent aids in home) In home counseling, however they refused to continue working with him because he scared them. Individual and family counseling

Reason for Staffing:

Brainstorm ideas and intervention methods that can help stabilize behaviors and placement

Staffing Recommendations (Evidenced-based practice suggestions):

Social Worker Signature / Credentials _____