

IN THE COURT OF APPEALS OF THE STATE OF WASHINGTON
DIVISION ONE

In the Matter of the Dependency of)	No. 67002-6-I
)	
S.N.C.-C.,)	
Minor Child.)	
)	
STATE OF WASHINGTON,)	
DEPARTMENT OF SOCIAL AND)	
HEALTH SERVICES,)	
)	
Respondent,)	
)	
v.)	
)	
ANTHONY CHAYTOR,)	UNPUBLISHED OPINION
)	
Appellant.)	FILED: April 23, 2012
)	

Ellington, J. — In this termination of parental rights case, Anthony Chaytor contends the Washington State Department of Social and Health Services (Department) failed to offer him necessary services capable of correcting his parental deficiencies and the juvenile court erroneously found there was little likelihood the deficiencies could be remedied in the near future, that continuation of the parent-child relationship would clearly diminish the prospects for his child’s early integration into a permanent and stable home, and that termination of his parental relationship was in the child’s best interests. Substantial evidence supports the court’s findings. We therefore

affirm.

BACKGROUND

Anthony Chaytor and Kathlena Corey are the biological parents of S.N.C.-C., who was born on December 15, 2006. They lived together with Corey's three older children.

Chaytor and Corey both had a history of substance abuse and domestic violence. The Department began receiving referrals about the violence between Chaytor and Corey in October 2007. In December of that year, Chaytor was arrested for assaulting Corey in front of the children and again for violating a no-contact order. Chaytor pleaded guilty and was ordered to participate in domestic violence treatment.

In May 2008, Chaytor enrolled in a domestic violence treatment program at Anger Control Treatment & Therapies (ACT&T). He admitted a criminal history including several drug convictions and a history of domestic abuse against Corey and the mother of his two adult children. He had been incarcerated multiple times. Chaytor also disclosed using marijuana and cocaine almost daily for 20 years. ACT&T diagnosed Chaytor with a chemical dependency.

In June 2008, the Department filed a dependency petition and removed all four of Corey's children because of concerns over her ongoing neglect. Chaytor appeared at the shelter care hearing for S.N.C.-C. and was ordered to comply with his probation requirements, obtain suitable housing, and follow the recommendations from his domestic violence evaluation, including continued treatment and abstinence from any mood-altering substances.

Chaytor entered into an agreed order of dependency in July 2008. He admitted he did not have suitable housing for a child and further acknowledged the need for services. The dispositional plan required Chaytor to follow all recommendations from his domestic violence/anger management treatment provider and remain drug and alcohol-free. The court allowed him weekly supervised visitation.

At the first permanency planning hearing in June 2009, the court identified a concurrent plan of adoption and return to home for S.N.C.-C. and her siblings. Chaytor was in compliance with court-ordered services and had recently found housing. The court ordered him to continue domestic violence/anger management treatment, abstain from drugs and alcohol, complete parenting classes, and have psychological testing to assess his cognitive abilities. He completed a parenting class later that month, and in August 2009, participated in a cognitive skills evaluation with Dr. Beverly Cartwright.

Dr. Cartwright concluded Chaytor has below-average cognitive and processing skills, with intellectual functioning in the borderline range of ability. She noted that Chaytor benefits “if information is presented in a concrete manner, in small, discrete sections,” and suggested ways to communicate with Chaytor to assist his “efforts to meet the challenges of daily living.”¹

Chaytor was to graduate from his domestic violence/anger management program in September 2009. As a final requirement of the year-long program, ACT&T asked Chaytor to produce a urine sample to rule out any drug or alcohol use. Chaytor took the sample cup, but never returned or contacted ACT&T. ACT&T terminated him for

¹ Ex. 63 at 7.

noncompliance.

The following day, Chaytor was arrested in Everett while under the influence of cocaine. He pleaded guilty to obstructing and possession of drug paraphernalia, and was ordered to complete drug and alcohol treatment.

Upon his release from jail, Chaytor obtained a drug and alcohol evaluation through Downtown Emergency Service Center (DESC). DESC is a state-certified program but not a Department-approved program. DESC determined that Chaytor met criteria for alcohol and cocaine dependency and enrolled him in an outpatient treatment program. Although DESC did not require urinalysis as part of its program, social workers requested urinalyses (UAs) from time to time.

In December 2009, the Department filed a petition for termination of the parent-child relationships for both Chaytor and Corey.² The Department alleged Chaytor's parenting deficiencies included "lack of parenting skills, domestic violence, and lack of a stable residence."³ It alleged Chaytor had been offered services including parenting classes, drug/alcohol evaluation, individual counseling, domestic violence treatment, psychological/cognitive testing, visitation and casework management. It further alleged that Chaytor "has failed to demonstrate the ability to safely parent the child [and] to obtain appropriate housing, was terminated from DV treatment, and incurred additional criminal charges in September 2009."⁴

² Corey was largely uninvolved with the dependency and termination proceedings, and is not a party to this appeal.

³ Clerk's Papers at 286.

⁴ Id.

At a dependency review hearing ten days later, the court found Chaytor had not complied with court-ordered services because he had been terminated from domestic violence treatment, failed to abstain from mood-altering substances, and had not obtained a suitable, drug and alcohol-free living environment. The court changed the long term plan for S.N.C.-C. from parallel plans for adoption and reunification to adoption only. In addition to previously ordered services, the court ordered Chaytor to participate in weekly self-help groups; provide random UAs as requested; provide documentation of participation in alcoholics anonymous/narcotics anonymous (AA/NA) meetings; and obtain a psychological evaluation with a parenting component.

At a permanency planning hearing in April 2010, Chaytor was found noncompliant with most of these court orders. The court found he had not completed domestic violence/anger management or drug and alcohol treatment, had not provided documentation of AA/NA participation, and had not obtained a safe and stable living environment.⁵

Social worker Candy Hamilton referred Chaytor for random UAs in August 2010. One sample tested positive for alcohol, despite having been diluted. He admitted to his substance abuse treatment provider that he had relapsed in August, but claimed sobriety since then. Chaytor missed a number of UAs in August and September. On one occasion, Chaytor refused to come in to provide a sample because his cousins were in town and he 'was trying to sit here and relax with my family."⁶ Based on

⁵ The court also found that Chaytor had not complied with the requirement to provide random UAs, but the record indicates that none were requested during this period.

Chaytor's admitted use and UA results, the Department sought a hair follicle test. But because Chaytor's head is shaved, that could not be done. No further drug testing has been provided.

Dr. Robin LaDue performed a psychological evaluation in August 2010.

Dr. LaDue diagnosed Chaytor with polysubstance abuse in early remission and antisocial personality disorder. She noted that Chaytor's "personality disorder and his drug and alcohol use are the major factors in his not being able to gain life stability and to parent [S.N.C.-C.] adequately and safely."⁷

Dr. LaDue disagreed with Cartwright's assessment of Chaytor's cognitive ability and testified that he did not have any significant cognitive or developmental disabilities in her opinion. Based on her clinical interviews, Dr. LaDue believed Chaytor had an IQ in at least the low-average range.

Citing his inability or unwillingness to abstain from drugs and alcohol during the period of dependency, Dr. LaDue did not believe Chaytor was able to put the child's needs above his own: "This is more based on his personality traits . . . than on his cognitive deficits."⁸ Dr. LaDue believed that Chaytor would have to maintain sobriety for a minimum of one year before reunification could even be considered. She was concerned that with relapse, "he is at increased risk for criminal behavior, loss of housing, and increased mental health problems."⁹

⁶ Report of Proceedings (RP) (Jan. 20, 2011) at 44.

⁷ Ex. 52 at 12.

⁸ Id. at 9.

⁹ Id. at 13.

Although she recommended against reunification, Dr. LaDue strongly endorsed continued contact between Chaytor and his daughter. She felt an appropriate frequency would be “a minimum of three visits a year,” but only if the father was not using drugs or alcohol.¹⁰ Though she had observed S.N.C.-C. for only one hour, she did not believe termination was in the child’s interests if it meant completely eliminating her contact with Chaytor.

A termination hearing was held in January, February, March and April 2011. The volunteer guardian ad litem (GAL) filed a report with the court recommending termination. She noted that while Chaytor was fairly consistent in attending visitations, his record of interaction with the child was mixed. He sometimes manifested “inappropriate expectations for a toddler” and “does not impose rules of behavior or limits on her,” which caused problems for the foster family.¹¹ According to the GAL, Chaytor demonstrated limited understanding of child behavior or development. In her assessment, Chaytor was not a suitable placement for S.N.C.-C. because “[h]e is 45, has a transient living situation, a drug and alcohol history, a police record, a potentially violent temper, and borderline intelligence.”¹²

Hamilton, the Department social worker, agreed that Chaytor was currently unfit. His parental deficiencies were his drug and alcohol use, instability, and possible anger management problems. She did not believe he would be able to fix those deficits within

¹⁰ RP (Jan. 19, 2011) at 87.

¹¹ Ex. 67 at 3.

¹² Id. at 4.

a reasonable amount of time. She believed that continuation of the parent-child relationship would interfere with the child's ability to integrate into a stable and permanent home. She testified that a stable and permanent bond was more important than the bond that Chaytor shared with the child. S.N.C.-C. has been with the same foster family with her brother since 2008, and the foster parents are ready and willing to adopt her. Accordingly, she believed termination was in the child's best interest.

The trial court found that all necessary services had been expressly and understandably offered to Chaytor, including parenting classes, drug/alcohol evaluation and treatment, individual counseling, domestic violence treatment, psychological/cognitive testing and further evaluation, and casework management. Finding that Chaytor "has often sought out his own services instead of waiting for referrals," the court noted that it was not incumbent on the Department to provide further referrals or require that he switch services.¹³ To the extent that there was a need for referrals, the court found the Department has attempted to make them.

The court found that Chaytor's major parenting deficiencies are drug/alcohol abuse and a history of domestic violence or anger control issues. The court found "an interrelationship between the father's drug abuse and violence," and that "[w]hen the father is using drugs, it is an extreme risk factor for violence."¹⁴ Accordingly, the court found that "[t]here can be no showing that the risk of violence by the father is mitigated until there is a significant long-term period showing that he has not been using drugs or

¹³ Clerk's Papers at 45.

¹⁴ Clerk's Papers at 46.

alcohol.”¹⁵ The court found Chaytor’s testimony about missed or positive UAs not credible. And given the history of relapse and missed or diluted UAs, “[t]he only thing this court can conclude from all these instances is that the father was using drugs or alcohol.”¹⁶

Despite Dr. Cartwright’s report, the court found that other evidence indicated that any cognitive deficits did not constitute a significant disability, and even if it did, “it is not what is causing the inability to remedy the parental deficiencies.”¹⁷ Noting that Chaytor was able to complete all sessions through ACT&T, the court found he failed not because he did not understand, but “because he was unable to maintain clean and sober.”¹⁸

The court further found there was little likelihood that Chaytor’s deficiencies would be remedied to allow him to parent in the near future. The court found “there would need to be a significant period of proven abstinence from alcohol and drugs before the father could be considered a fit parent. That is not in the near future for [S.N.C.-C.]”¹⁹

Finally, the court found that continuation of the parent-child relationship clearly diminishes the child’s prospect for early integration into a stable and permanent home, noting that she had been in foster care for two and a half of her four years, and it would

¹⁵ Clerk’s Papers at 46.

¹⁶ Clerk’s Papers at 47.

¹⁷ Clerk’s Papers at 48.

¹⁸ Clerk’s Papers at 48.

¹⁹ Clerk’s Papers at 50.

be another year at least before reunification could be considered. The court therefore concluded that termination of Chaytor's parental rights were in the child's best interests.

DISCUSSION

"An order terminating parental rights may be entered when the six statutory elements set forth in RCW 13.34.180 are established by clear, cogent, and convincing evidence, and the court finds that termination is in the best interests of the child."²⁰ Clear, cogent, and convincing evidence exists when the ultimate fact in issue is shown by the evidence to be highly probable.²¹ Great deference is paid to the trial judge's findings, which are not disturbed so long as substantial evidence supports them.²²

"Substantial evidence is evidence sufficient to persuade a fair-minded rational person of the truth of the declared premise. In this review, we do not make credibility determinations and we do not weigh the evidence."²³ Unchallenged findings of fact are verities on appeal.²⁴ Whether a termination order satisfies statutory requirements is a question of law, reviewed de novo.²⁵

Chaytor contends three of the six statutory termination criteria were not proven.²⁶

²⁰ In re Dependency of D.A., 124 Wn. App. 644, 650, 102 P.3d 847 (2004).

²¹ In re Dependency of K.R., 128 Wn.2d 129, 141, 904 P.2d 1132 (1995).

²² D.A., 124 Wn. App. at 650.

²³ In re Welfare of C.B., 134 Wn. App. 942, 953, 143 P.3d 846 (2006).

²⁴ In re Welfare of C.B., 134 Wn. App. 336, 349, 139 P.3d 1119 (2006).

²⁵ In re Dependency of K.N.J., 171 Wn.2d 568, 574, 257 P.3d 522 (2011).

²⁶ The three challenged criteria require the court to find the following: "(d) That the services ordered under RCW 13.34.136 have been expressly and understandably offered or provided and all necessary services, reasonably available, capable of

He also contends termination was not in S.N.C.-C.'s best interest.

Adequacy of Services

The Department must provide all court-ordered and necessary services and must tailor the services to each parent's needs.²⁷ In determining whether adequate services have been provided, "the court may consider any service received, from whatever source, bearing on the potential correction of parental deficiencies."²⁸

Chaytor contends the Department failed to offer necessary services, including a Department-approved drug and alcohol treatment program and vocational rehabilitation, and failed to timely offer housing assistance, a psychological evaluation, and urinalysis. He further contends the Department failed to offer services tailored to low-functioning parents in light of his cognitive deficits. The State responds that Chaytor obtained some of these services himself, refused others, did not require services tailored to low functioning parents, and in any event, cannot show that any service, if offered, would have corrected his parental deficiencies in the near future.²⁹

correcting the parental deficiencies within the foreseeable future have been expressly and understandably offered or provided; (e) That there is little likelihood that conditions will be remedied so that the child can be returned to the parent in the near future. A parent's failure to substantially improve parental deficiencies within twelve months following entry of the dispositional order shall give rise to a rebuttable presumption that there is little likelihood that conditions will be remedied so that the child can be returned to the parent in the near future. The presumption shall not arise unless the petitioner makes a showing that all necessary services reasonably capable of correcting the parental deficiencies within the foreseeable future have been clearly offered or provided. . . . (f) That continuation of the parent and child relationship clearly diminishes the child's prospects for early integration into a stable and permanent home." RCW 13.34.180(1).

²⁷ D.A., 124 Wn. App. at 651.

²⁸ Id. at 651-52.

Drug and Alcohol Treatment. Chaytor was ordered to complete drug and alcohol treatment as a result of his criminal conviction. To satisfy this requirement, and because he anticipated the dependency court would enter a similar order, Chaytor sought out drug and alcohol evaluation and treatment from DESC. He contends the Department failed to provide adequate services because it knew that DESC was not a DSHS-approved, abstinence-based program, but never referred him to another program.

First, Hamilton testified the treatment provided by DESC was appropriate, even though the program was not Department-approved. Further, Chaytor's failure to complete an approved substance abuse program was not the basis of the termination. Indeed, the court found that Chaytor "engaged in services that were reasonably available and capable of correcting these parental deficiencies."³⁰

Despite appropriate treatment and court orders requiring abstinence from mood-altering substances, Chaytor was unable to maintain sobriety. He does not explain how a different substance abuse program would have yielded success where DESC failed. And given his willingness to sacrifice completion of court-ordered domestic violence treatment by failing to remain sober, his two confirmed relapses, and his failure to report for UAs when asked, the evidence does not indicate that referral to a DSHS-approved, abstinence based program would have corrected Chaytor's parental

²⁹ See In re Dependency of T.R., 108 Wn. App. 149, 164, 29 P.3d 1275 (2001) ("even where the State inexcusably fails to offer a service to a willing parent, which is not the case here, termination is appropriate if the service would not have remedied the parent's deficiencies in the foreseeable future, which depends on the age of the child").

³⁰ Clerk's Papers at 47.

deficiencies.

Vocational Rehabilitation. Based upon Chaytor's self-reported information that he had not worked since 2007, Dr. LaDue recommended "vocational rehabilitation services."³¹ The Department never implemented this recommendation, and Chaytor contends it therefore failed to provide a necessary service. But contrary to his report to Dr. LaDue, Chaytor was in fact self-employed, working part time to earn \$15,000 to \$16,000 each year since 2008. He has a college degree in personal training, and offers those services as well as landscaping, moving and painting, by advertising on Craigslist. He manages his business without assistance from others. Vocational rehabilitation does not appear to be a necessary service.

Urinalysis. Chaytor also argues the Department failed to provide all necessary services because it did not offer urinalysis until Hamilton referred him for random UAs in August 2010. The record does not support the assertion. The evidence is that the court and two social workers prior to Hamilton did request UAs from him. His domestic violence/ anger management treatment provider also required a UA. Further, Chaytor refused a number of UAs and provided one that had been intentionally diluted. Where, as here, the parent refuses to participate in offered services, or where provision of services would have been futile, the Department's obligations are satisfied.³²

Psychological Evaluation. The Department provided a psychological evaluation

³¹ Ex. 52 at 14.

³² In re Welfare of M.R.H., 145 Wn. App. 10, 25-26, 188 P.3d 510 (1991); In re Interest of J.W., 111 Wn. App. 180, 187, 43 P.3d 1273 (2002); T.R., 108 Wn. App. at 163-64.

late in the process.³³ Chaytor suggests the evaluation was untimely and prevented him from making meaningful use of its recommendations. But other than the Department's failure to implement Dr. LaDue's vocational rehabilitation recommendation, Chaytor does not indicate how a timely psychological evaluation would have made a difference. Dr. LaDue's primary concerns were Chaytor's substance abuse and criminal activity.

³³ Though the court ordered the evaluation be conducted within 30 days of its December 2009 order, the Department made no referral until August 26, 2010.

Chaytor was already addressing these issues.

Housing. Instability and homelessness were identified as some of Chaytor's major parental deficiencies early in the process. DSHS was aware that Chaytor was ordered to obtain suitable housing, yet the Department did not offer assistance with housing until he specifically requested it, over two years after the dependency was established and only months before the termination hearing. Although the Department clearly could have done more, Chaytor was able to obtain housing without assistance. A permanency planning order in June 2009 indicates that he had "recently obtained housing."³⁴ And though he requested assistance in 2010, he was again able to find subsidized housing on his own. Further, termination of Chaytor's rights was not based on his failure to provide suitable housing. Though the court noted that "lack of a stable residence" was one of the parental deficiencies that led to the dependency, the only significant deficiencies at termination were "drug/alcohol abuse and a history of domestic violence or anger control issues."³⁵

Tailored Services. Chaytor argues the Department failed to provide services properly tailored to accommodate his cognitive deficits. He relies on In re Dependency of H.W.³⁶ and In re Dependency of T.L.G.³⁷

³⁴ Clerk's Papers at 48; see also Ex. 8 at 4 (noting that Chaytor "recently obtain[ed] his own housing, but it is unknown whether it is [a] safe, stable, suitable, and drug/alcohol free living environment").

³⁵ Clerk's Papers at 452.

³⁶ 92 Wn. App. 420, 961 P.2d 963 (1998).

³⁷ 126 Wn. App. 181, 108 P.3d 156 (2005).

In H.W., DSHS recognized the mother's developmental disabilities and attempted to tailor services to her special needs in some ways.³⁸ Among other things, the Department provided her one-on-one in-home training on housecleaning and parenting issues. The mother had earnestly engaged in the services the Department had provided and had made improvements, but her learning style proved a significant obstacle. Though the Division of Developmental Disabilities could have offered her parenting skills services in a more accessible manner, the Department did not refer her to the Division. Instead, it simply assumed that the mother lacked the ability to acquire and apply parenting information she needed. We reversed the termination because not all necessary services likely to correct her parental deficiencies had been provided.³⁹

Chaytor's case is not like H.W. because the record indicates that he did not require tailored services. Although Dr. Cartwright found Chaytor had borderline cognitive ability, Dr. LaDue disagreed with that assessment. Based on her clinical observations, she concluded that Chaytor had no significant cognitive or developmental disabilities and has an IQ in at least the low-average range. Social worker Hamilton testified it never appeared to her that he had any difficulty understanding what was being discussed. Chaytor's ability to obtain his GED, complete college level courses, operate his own business, and successfully obtain housing and other services on his own suggests he did not need specialized services. Further, Chaytor testified he had no difficulty understanding any of the service providers.

³⁸ 92 Wn. App. at 426.

³⁹ H.W., 92 Wn.App. at 429.

Chaytor's case is also not like T.L.G. There, the Department failed to identify specific parental deficiencies and to provide obviously needed mental health and anger management services to parents for over a year until they completed a psychological evaluation.⁴⁰ The issue was not whether services were appropriately tailored, but whether the necessary services were provided at all. Here, Chaytor participated in an array of services aimed at correcting his identified deficiencies, including parenting classes, domestic violence and anger management treatment, substance abuse treatment, mental health counseling, cognitive and psychological testing, and supervised visitation. As the trial court found, any cognitive deficit from which Chaytor may suffer has not significantly affected his ability to access, understand, comply with or benefit from services.

Likelihood of Remediating Conditions in the Near Future

Chaytor assigns error to the court's findings that "[t]here is little likelihood that conditions will be remedied so that the child can be returned to the parents in the near future," that he is "currently unfit to parent," and that he has not demonstrated and cannot in the near future demonstrate the "significant period of proven abstinence from alcohol and drugs" that would be necessary before he could be considered a fit parent.⁴¹

But Chaytor does not contend he was fit to parent the child at the time of the termination. Rather, he contends that he was not given a meaningful opportunity to

⁴⁰ T.L.G., 126 Wn.App. at 203.

⁴¹ Clerk's Papers at 49-50.

correct parental deficiencies because the Department failed to timely provide necessary services. As explained above, we disagree.

Further, “even where the State inexcusably fails to offer a service to a willing parent, which is not the case here, termination is appropriate if the service would not have remedied the parent’s deficiencies in the foreseeable future, which depends on the age of the child.”⁴²

Dr. LaDue testified that reunification would be inappropriate until Chaytor had maintained sobriety for at least one year. He has a twenty-year history of near daily drug use and a lengthy history of drug-related criminal activity. Despite treatment, he had been unable to change that pattern. During the pendency of this case, Chaytor had two confirmed relapses and a drug-related criminal conviction.

S.N.C.-C. was four years old at the time of trial and is now five. She has been in foster care for most of her life. The minimum of one year that Chaytor would need to be able to parent is not within her foreseeable future.⁴³

Effect of Parent-Child Relationship on Prospects for Early Integration

The trial court found that “[c]ontinuation of the parent-child relationship would prevent [S.N.C.-C.’s] integration into a stable and permanent home.”⁴⁴ Emphasizing

⁴² T.R., 108 Wn. App. at 164.

⁴³ See T.R., 108 Wn. App. at 165-66 (one year not “foreseeable” or “near” future for six-year-old child); In re Welfare of Hall, 99 Wn.2d 842, 851, 664 P.2d 1245 (1983) (eight months is not within the foreseeable future of a four-year-old child); In re Dependency of A.W., 53 Wn. App. 22, 32, 765 P.2d 307 (1988) (one year not in the near future of three-year-old child).

⁴⁴ Clerk’s Papers at 50.

the strong bond Dr. LaDue observed between him and his child, Chaytor contends this finding is not supported by clear, cogent, and convincing evidence. But a finding that the parental relationship will interfere with early integration into a stable and permanent home necessarily follows from a showing that there is little likelihood Chaytor can parent in the near future.⁴⁵

Best Interests of the Child

When the factors of RCW 13.34.180 are proven by clear, cogent, and convincing evidence, the trial court must determine whether the State proved by a preponderance of the evidence that termination is in the child's best interests.⁴⁶ The court found termination was in S.N.C.-C.'s best interests.

S.N.C.-C. has been a dependent child since she was 16 months old. At that point, she was placed into a stable, loving home with her older brother, to whom she is very attached. She has remained with this family ever since, and refers to her foster parents as "Mom Anita" and "Daddy Kevin."⁴⁷ The foster parents have successfully resolved several issues S.N.C.-C. brought with her, and are currently obtaining treatment for a medical condition afflicting the child. They wish to have both children permanently, and will be designated guardians of S.N.C.-C.'s brother. The GAL recommends that S.N.C.-C. "finally be released and allowed a permanent adoptive home."⁴⁸

⁴⁵ D.A., 124 Wn. App. at 657; T.R., 108 Wn. App. at 166.

⁴⁶ RCW 13.34.190(1)(b); K.N.J., 171 Wn.2d at 577.

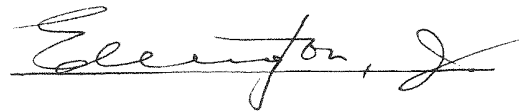
⁴⁷ Ex. 52 at 1.

⁴⁸ Ex. 67 at 4.

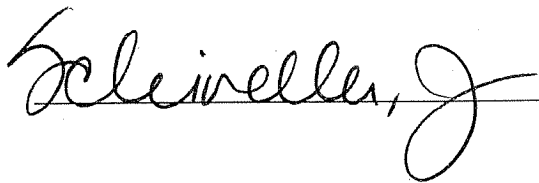
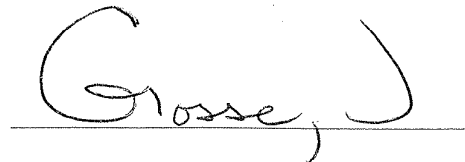
To counter this, Chaytor cites only his strong bond with his daughter and Dr. LaDue's testimony that continued contact with Chaytor was in S.N.C.-C.'s best interest. But LaDue's opinion was qualified. She felt contact need not be frequent—“a minimum of three visits at least a year”—and should be permitted only if Chaytor was sober and out of jail.⁴⁹ Unfortunately, Chaytor's history makes his ability to meet these conditions uncertain.

Though it is never easy to terminate parental rights when the parent cares for the child and desires to be a good parent, the overriding goal of a termination proceeding is to serve the child's best interests.⁵⁰ Substantial evidence supports the court's finding that S.N.C.-C.'s best interests were served by terminating Chaytor's rights.

Affirmed.

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WE CONCUR:

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⁴⁹ RP (Jan. 19, 2011) at 87.

⁵⁰ A.W., 53 Wn. App. at 33-34.