

*This opinion is nonprecedential except as provided by  
Minn. R. Civ. App. P. 136.01, subd. 1(c).*

**STATE OF MINNESOTA  
IN COURT OF APPEALS  
A24-1142**

In re the Matter of the Welfare of the Child of:  
C. B. H. and R. V. S., Parents.

**Filed January 13, 2025  
Affirmed  
Bentley, Judge**

Chisago County District Court  
File No. 13-JV-24-96

MacKenzie Guptil, Pine City, Minnesota (for appellant mother C.B.H.)

Janet Reiter, Chisago County Attorney, Rändi A. Setter, Assistant County Attorney, Center City, Minnesota (for respondent Chisago County Health and Human Services)

Kayla Boettcher, Stillwater, Minnesota (guardian ad litem)

Considered and decided by Bentley, Presiding Judge; Worke, Judge; and Slieter, Judge.

**NONPRECEDENTIAL OPINION**

**BENTLEY**, Judge

On appeal from the district court's termination of appellant's parental rights, appellant argues that the record does not support the district court's determinations that (a) the county made reasonable efforts to reunite the family, (b) a statutory ground for termination exists, and (c) it is in the child's best interests to terminate parental rights. We discern no basis to disturb the district court's conclusions and, therefore, affirm.

## FACTS

This case involves the welfare of J.D.H., the child of appellant C.B.H. (mother) and R.V.S. (father). Because of concerns about J.D.H.'s wellbeing, respondent Chisago County Health and Human Services (the county) intervened in the family and, ultimately, petitioned to terminate mother's and father's parental rights. Father consented to the termination of his parental rights because he was incarcerated and, by his admission, would be unable to parent for the foreseeable future. Mother did not consent, and the district court held a bench trial on the county's petition in June 2024. At trial, the district court heard testimony from nine witnesses and received 56 exhibits.

### **A. Circumstances Leading to Petition for Termination**

In May 2023, the county received a report that, J.D.H., then four years old, would wander around his apartment building every day, telling neighbors that he was hungry, and asking for food. Someone reported that JDH was frequently alone in the apartment hallways and, when brought back to mother's apartment, it would take mother several minutes before she would answer the door. Mother had told the person who made a report that she "struggles with drug addiction," and the county had received "multiple reports regarding concern for [mother's] drug use" in the past. Concerned that mother's substance use was impacting her ability to provide for J.D.H.'s basic needs, the county investigated.

A few days later, a social worker with the county and a detective visited mother's home unannounced. The social worker noticed that mother's speech was "very slow" and "a little bit on the slurred side," and her affect was "kind of lethargic . . . like she was struggling to keep herself awake." Mother reported that she was taking prescribed

medications and had used illegal substances “within the last few weeks.” Mother declined to take a urinalysis, stating that she “would do one when it was . . . ‘better.’” The detective noticed that there was food in the home, but “[i]t wasn’t something readily accessible to a child of [J.D.H.’s] age.” At the end of the visit, the detective placed J.D.H. on a 72-hour hold. Two days later, the social worker met with mother again. Mother agreed to take a drug test, which came back positive for fentanyl.

Later that week, the county sought emergency protective custody of J.D.H. and filed a petition alleging that he was a child in need of protection or services (CHIPS). The district court granted the county emergency protective custody, and J.D.H. was placed with nonrelative foster parents. At a well-child check soon after his placement, J.D.H. was found to be “in the 25 percentile based on his weight and height.” He gained five or six pounds within three months in placement.

When the district court held a hearing on the CHIPS petition, mother did not attend. The district court proceeded by default, adjudicated J.D.H. a child in need of protection or services, and adopted an out-of-home placement plan.

The out-of-home placement plan required mother to (1) obtain stable housing, (2) complete a substance use disorder assessment and psychological evaluation and follow recommendations from her treatment providers, (3) remain sober from nonprescribed controlled substances and submit to random drug testing, (4) attend all visits with J.D.H., and (5) demonstrate behavioral changes and insight into the issues leading to J.D.H.’s removal. The plan also committed the county to support mother in complying with the plan

requirements. We address the district court’s findings of fact relevant to each of the five case-plan requirements, in turn.

***Stable-housing requirement.*** Shortly after the plan was adopted, mother experienced housing instability. In July 2023, mother was evicted from her apartment. In response, mother’s county case manager and another county employee tried to help mother find housing. They located apartments and shelters, helped mother fill out applications, and discussed the option of outpatient treatment with lodging or residential treatment. But mother opted to move to Wisconsin and live with her grandfather because she wanted her adult son to be able to live with her. She lived there until January 2024, when she moved back to Minnesota and into a four-bedroom house in Minneapolis with three housemates. The housemates operate an “intentional community” that sets rules for itself, and after mother moved in, they agreed that no one is allowed to be drunk or high. The district court found that the home is “a supportive environment for Mother.”

***Substance-use and mental-health treatment requirements.*** When mother moved to Wisconsin, she lost access to services that were tied to her Minnesota residency or to her Minnesota-based health insurance, including a mental-health case worker through the county, a psychiatrist for medication management, an individual therapist, an Adult Rehabilitative Mental Health Services (ARMHS) worker,<sup>1</sup> and parenting support. She also

---

<sup>1</sup> An ARMHS worker helps individuals who are diagnosed with a severe and persistent mental-health condition to attend to daily tasks, coordinate a calendar, and follow through with commitments.

did not move forward with an outpatient treatment program where she had completed an intake prior to her eviction.

While mother was in Wisconsin, her case manager tried to connect her with services to comply with the plan. The case manager met with mother several times, provided brochures for mental-health services in her area, and made phone calls with mother to try to identify a local therapist. The case manager also contacted the local Wisconsin county to set up adult mental-health case-management services but was told that mother would have to call herself.

After two months in Wisconsin, mother completed a chemical-health assessment from a local provider, as the plan required. The assessment recommended chemical-health and mental-health treatment about once per week, and the plan required her to follow that recommendation. Mother did not complete those services, reporting concerns of not having gas to get there and getting the days mixed up. But that account somewhat conflicted with the case manager's testimony about efforts the case manager made to connect mother with services. For example, the case manager called the provider "several times to try to be used as a collateral [contact]," called mother to remind her of appointments, provided gas cards, and met with mother to help her keep track of her obligations. During their meetings, the case manager made sure that mother wrote her obligations down in her planner, provided a form with dates and times of things she needed to do, and helped mother put alarms on her cell phone as a reminder. Mother still did not attend appointments consistently.

Around the same time as the chemical-health assessment, mother complied with the case-plan requirement that she undergo a psychological evaluation. She was diagnosed

with generalized anxiety disorder, major depressive disorder, posttraumatic stress disorder, opioid use disorder, and unspecified schizophrenia spectrum and other psychotic disorder. The evaluation recommended that mother complete substance-use treatment, work with a psychiatrist to monitor her medication, engage in a parenting program, participate in individual therapy, resume ARMHS services, maintain sobriety for at least six months, and work with a vocational counselor to find job opportunities “once the chemical health and mental health services were in place.” Mother continued to work with a psychiatrist for medication management, but she did not follow through with any of the other recommended services.

Although the psychiatrist was managing mother’s medications, the case manager was concerned that mother was misusing her prescription drugs, which included Xanax and Adderall. The case manager noticed that mother often appeared “under the influence of some sort of substances”: she slurred her words and struggled to keep her eyes open, had difficulty keeping a schedule and tracking conversations, and “[o]ften didn’t remember things after meeting even just two days later.” Other times, mother seemed to be in withdrawal: she was shaky, sweaty, had watery eyes, and on one occasion reported flu-like symptoms from forgetting to take a medication. When the case manager attempted to discuss her observations with the prescribing psychiatrist, she never received a call back. But the case manager did share her concerns with mother’s psychologist.

After mother moved back to Minnesota, the case manager met with her several times to set up her Minnesota health insurance so that services could resume. At the time of trial, mother “still needed to provide some additional financial verifications to Hennepin

County” for her health insurance to be approved. As a result, mother was not receiving any mental-health therapy or treatment, other than seeing a psychiatrist for medication management and participating in a suboxone program. Mother reported participating in Narcotics Anonymous or Alcoholics Anonymous from her phone, but she did not provide verification to the county.

***Sobriety and drug-testing requirement.*** Mother started the drug-testing requirement in June 2023 using sweat patch tests, and the first result was positive for methamphetamine, cocaine, and fentanyl. Mother then opted for urinalysis testing instead. But after mother moved to Wisconsin, that method required that she commute from Wisconsin to Chisago County for testing, and mother missed five urinalysis appointments between August and September 2023. Mother switched back to semi-monthly sweat patch testing, and she tested positive for methamphetamine on three occasions: October 2023, January 2024, and April 2024. In all, mother tested positive for nonprescribed substances in 4 of the 16 tests conducted over a period of 10 months. Mother disputes some of the positive tests and testified that she had been sober for 13 months.

***Visitation requirement.*** Mother was scheduled to visit with J.D.H. in the community on weekdays two times per week, in addition to weekly phone calls. This visitation plan continued while mother lived in Wisconsin, but the county moved the visits from a weekday to a weekend day to accommodate J.D.H.’s school schedule and mother’s travel. After mother still missed the first three weekend visits, the visits were changed back to weekdays. Mother’s attendance remained inconsistent. In total, mother attended slightly over half of the 69 visits that were scheduled. Mother was also inconsistent in making the

weekly phone calls; the case manager estimated that she made fewer than half of them since January 2024. When mother did attend visits, the results were mixed. Sometimes, mother was engaged with J.D.H. Other times, mother slurred her words, nodded off, or was unable to keep her eyes open, resulting in J.D.H. “asking her to wake up.” On one occasion in October 2023, mother was “unable to interact” for most of the visit. About half of the visits that the case manager supervised involved healthy interactions between mother and J.D.H.

**B. Petition for Termination of Parental Rights**

In March 2024, eight months after the plan was adopted, the county petitioned to terminate mother’s parental rights, alleging that mother “made minimal progress on her case plan goals” and “continue[d] to struggle with maintaining consistency with services, her sobriety, and visitation with [J.D.H.]” The case manager testified that mother was “very dismissive” and demonstrated “minimal insight into what the concerns are and the reasons for [the county’s] involvement.” Likewise, the psychologist testified that mother denied the concerns from the original report and that there needed to be “accountability and insight . . . before we would expect that there would be significant changes.”

The petition also detailed mother’s prior involvement with the child welfare system. In 2013, the Scott County District Court permanently transferred legal and physical custody of mother’s oldest son to a relative because of concerns about mother’s substance use. Between July 2019 and February 2021, Burnett County Child Protective Services received five reports concerning mother’s care for J.D.H. and conducted an assessment for two of the reports: that mother was breastfeeding while taking unsafe medications and that mother



overdosed at her apartment, leaving J.D.H. to wander the building. Neither of the assessments substantiated the reports. And between May 2021 and June 2022, Chisago County Child Protection received four reports, including that mother had recently relapsed on “oxys” and got in a car accident on her way to pick up J.D.H.

Around the same time that the petition was filed, J.D.H. was placed with a maternal relative who responded to relative search letters from the county. The relative was described by the district court as a “permanency option for [J.D.H.]” The guardian ad litem testified that J.D.H. was comfortable in the foster home and benefited from the structure and consistency.

After a two-day trial, the district court determined that the county proved by clear and convincing evidence that there were three statutory bases for termination of mother’s parental rights, that the county had made reasonable efforts to reunite the family, and that termination was in J.D.H.’s best interests. Accordingly, the district court terminated mother’s parental rights to J.D.H. and granted legal custody to the county until adoption is finalized.

Mother appeals.

## **DECISION**

“A district court may terminate parental rights if (1) at least one statutory ground for termination is supported by clear and convincing evidence, (2) the county made reasonable efforts to reunite the family,” or those efforts were not required, “and (3) termination is in the child’s best interests.” *In re Welfare of Child of J.H.*, 968 N.W.2d 593, 600 (Minn. App. 2021), *rev. denied* (Minn. Dec. 6, 2021); *see* Minn. Stat.

§ 260.012(a) (2022) (identifying circumstances when reasonable efforts to reunite the family are not required). Mother challenges each of these factors on appeal.

Before we turn to the merits of those arguments, we briefly address our standard of review. With respect to the district court’s fact-findings, appellate courts review them only for “clear error.” *Id.* That means we (1) view the evidence in the light most favorable to the findings, (2) do not find our own facts, (3) do not reweigh the evidence, and (4) do not reconcile conflicting evidence. *In re Civ. Commitment of Kenney*, 963 N.W.2d 214, 221-22 (Minn. 2021); *see J.H.*, 968 N.W.2d at 601 n.6 (applying *Kenney* in reviewing a juvenile-protection order). Thus, we “need not go into an extended discussion of the evidence to prove or demonstrate the correctness of the findings of the [district] court.” *Kenney*, 963 N.W.2d at 222 (quotation omitted). “[A]n appellate court’s duty is fully performed after it has fairly considered all the evidence and has determined that the evidence reasonably supports the decision.” *Id.* (quotation omitted).

With respect to the district court’s determinations that a statutory ground for termination exists and that termination is in the child’s best interests, we review them for an “abuse of discretion.” *J.H.*, 968 N.W.2d at 600. That means we reverse only if the district court “makes findings of fact that lack evidentiary support, misapplies the law, or resolves discretionary matters in a manner contrary to logic and facts on record.” *In re Welfare of Child of T.M.A.*, 11 N.W.3d 346, 355 (Minn. App. 2024).

With those standards in mind, we address mother’s arguments. We first consider mother’s challenges to the second factor in the termination-of-parental-rights analysis, whether the county made reasonable efforts to reunite the family, because mother disagrees

with the district court’s factual findings that underpin the decision. We next address mother’s arguments as to the first factor, whether a statutory ground for termination exists. And finally, we consider mother’s arguments regarding the third factor, whether termination is in the best interests of J.D.H.

## I

Generally, before a district court may terminate a parent’s parental rights, it must ensure that the social services agency made “reasonable efforts . . . to reunite the child with the child’s family at the earliest possible time.” Minn. Stat. § 260.012(a); *J.H.*, 968 N.W.2d at 600. To determine whether reasonable efforts have been made, the district court considers whether services to the child and family were:

- (1) selected in collaboration with the child’s family and, if appropriate, the child;
- (2) tailored to the individualized needs of the child and child’s family;
- (3) relevant to the safety, protection, and well-being of the child;
- (4) adequate to meet the individualized needs of the child and family;
- (5) culturally appropriate;
- (6) available and accessible;
- (7) consistent and timely; and
- (8) realistic under the circumstances.

Minn. Stat. § 260.012(h) (2022). “[T]he nature of services which constitute reasonable efforts depends on the problem presented.” *In re Children of T.R.*, 750 N.W.2d 656, 664 (Minn. 2008) (quotation omitted).

The district court found that the county made reasonable efforts to reunite mother and J.D.H. based on the provision of the following services:

- a. Case planning;
- b. Uber cards and other transportation assistance;
- c. Coordination of supervised visits and phone calls;
- d. Drug screening;
- e. Coordinating services; and
- f. Monthly face-to-face meetings with Mother.

The district court also found that “[m]other never followed the recommendations of the psychological evaluation, despite the Agency’s efforts to assist her in setting up recommended services.”

Mother challenges three factual findings that the district court relied on in its reasonable-efforts determination. We are not persuaded that the district court clearly erred with respect to any of them.

First, mother challenges the district court’s finding that the county coordinated services for mother. Her argument specifically relates to the case manager’s efforts to communicate with mother’s psychiatrist about the case manager’s concern that mother was misusing her prescription medication. Mother asserts that the case manager’s attempts to contact the psychiatrist were “minimal.” The district court found, however, that the case manager “attempted to communicate with [the psychiatrist] . . . a number of times,” and the psychiatrist never returned her calls. That finding was supported by the case manager’s testimony that she called the psychiatrist’s office every other month or so, about three or four times in total, so that she could discuss her concerns about mother’s prescription medication use. The case manager also testified that she left voicemails and sent emails, but she never heard back from the psychiatrist. And she separately raised her concerns with

mother's psychologist.<sup>2</sup> Based on our review of the record, we conclude that the district court did not clearly err in finding that the county coordinated services for mother, despite the fact that the case manager was unable to connect with mother's psychiatrist.

Second, mother argues that the district court clearly erred by finding that the county assisted with transportation costs. Mother points to the case manager's testimony that the county does not cover the full cost of travel for visits and urinalysis appointments. But mother does not offer any support for the position that the county has an obligation to cover full travel costs. And there is ample evidence in the record that the county assisted with travel costs and made efforts to reduce travel when possible. For example, the county provided mother with gas cards every other week worth between \$20 and \$60. And to reduce mother's need to travel from Wisconsin to Chisago County for urinalysis appointments, the county offered her long-term sweat-patch testing. When mother opted out of sweat-patch testing, the county cautioned that urinalysis could be difficult because it required driving and calling a testing center every morning. Mother still opted for

---

<sup>2</sup> Relatedly, mother argues that the district court should not have relied on the case manager's "opinion regarding abuse of prescribed medication despite [the case manager's] own admission that she was neither a chemical assessor nor a medical professional." But the district court found only that the case manager "had concerns" about medication misuse. These concerns were based on the case manager's personal observation of mother slurring her words, operating slowly, and consistently struggling to remember conversations about visitation schedules, even when mother had taken only prescribed medications. Thus, the case manager's concerns were "rationally based on the perception of the witness," which is permissible lay opinion testimony under the rules of evidence. Minn. R. Evid. 701; see *Trail v. Village of Elk River*, 175 N.W.2d 916, 922 (Minn. 1970) (holding that "nonexperts can give their opinion concerning another's intoxication" if the nonexpert observed the intoxicated person). The district court's finding about the case manager's concern was not clearly erroneous or otherwise improperly considered.

urinalysis. Moreover, mother testified that when she missed appointments, it was not because of gas but because “[i]t was hard for [her] to remember to call[,]” and she had “anxiety about driving.” Viewing the record as a whole, we conclude that the record supports the district court’s finding that the county assisted with transportation costs.

Third, mother argues that it was clear error for the district court to find that the county “extensively assisted [mother] in following through with the recommendations from [the] psychological evaluation” because the case manager only reminded mother about a recommended parenting program once. We understand this argument to be a challenge to the district court’s finding that “[m]other’s progress on the case plan was minimal. . . . [She] never followed the recommendations of the psychological evaluation, despite the [county’s] efforts to assist her in setting up recommended services.” That finding is supported by the record. The county employees testified extensively regarding their efforts helping mother access services in Minnesota and Wisconsin. The case manager testified that she made phone calls with mother, checked in on services, and independently spoke with county employees about getting ARMHS services after mother moved to Wisconsin. When mother returned to Minnesota, the case manager met with mother “multiple times a month from February until May . . . to try to get her insurance in place so that she could get services set up.” In light of this testimony, which relates to a wide array of coordination efforts, we cannot conclude that the district court clearly erred in finding that the county made efforts to help her set up services that were recommended in the psychological evaluation.

In sum, based on a careful review of the record, we discern no clear error in the challenged factual findings that support the district court’s determination that the county made reasonable efforts to reunite J.D.H. with his family.

## II

Mother next challenges the district court’s determination that there are statutory grounds to terminate her parental rights under Minnesota Statutes section 260C.301 (2022). To satisfy the statutory-basis prong of the termination of parental rights test, the district court needs to conclude that only one statutory ground exists, *J.H.*, 968 N.W.2d at 600; but here, it identified three. We address mother’s arguments relating to two of those grounds: neglecting parental duties under section 260C.301, subdivision 1(b)(2), and failure to correct conditions leading to the child’s out-of-home placement under section 260C.301, subdivision 1(b)(5). Because our consideration of those grounds is dispositive of this factor of the termination analysis, we do not reach the district court’s determination that a third ground for termination exists under section 260C.301, subdivision 1(b)(4), which relates to palpable unfitness.

## A

Minnesota Statutes section 260C.301, subdivision 1(b)(2), allows for termination if, among other things, “reasonable efforts by the social services agency have failed to correct the conditions that formed the basis of the petition” and “the parent has substantially, continuously, or repeatedly refused or neglected to comply with the duties imposed . . . by the parent and child relationship.” Those duties include providing food, shelter, and “other care and control necessary for the child’s physical, mental, or emotional health and

development,” Minn. Stat. § 260C.301, subd. 1(b)(2), and the neglect of those duties must be found to “continue for a prolonged, indeterminate period,” *In re Welfare of Child of J.K.T.*, 814 N.W.2d 76, 90 (Minn. App. 2012) (quotation omitted).

The district court determined that this ground for termination was proved by mother’s prolonged inattention to J.D.H.’s needs and her failure to demonstrate that her parenting will change in the future:

The history of child protection reports, along with the report that formed the basis for the Petition in this case, demonstrate that Mother has continuously neglected [J.D.H.’s] needs for food, shelter, and supervision.

. . . .

Mother never demonstrated insight into the child protection concerns and did not make progress on the elements of the case plan that would improve her ability to meet [J.D.H.’s] needs in the future. Mother’s lack of consistency in attending visits and participating in phone calls with [J.D.H.] demonstrates her overall instability and inability to meet [J.D.H.’s] needs.

Mother argues that the district court abused its discretion by determining that mother refused or neglected to comply with parental duties because the district court “put too much focus on the history . . . and discounted the recent progress and track she was on[,]” including that she “now has consistent housing and . . . a stable support system.” But even if mother has made recent progress, that does not negate the relevance of her history of parenting. To the contrary, consideration of history is appropriate so that the district court may determine whether a parent has “continuously” or “repeatedly” neglected parental duties. Minn. Stat. § 260C.301, subd. 1(b)(2). The record of child-protection intervention



supports the district court's determination that mother continuously neglected J.D.H.'s needs while he was under her care. And although the district court recognized that mother was now living in a supportive environment, it found that mother has not demonstrated insight into the child-protection concerns that resulted in the initial removal of J.D.H. from her care. The district court also determined that mother has not demonstrated a present-day ability to care for J.D.H., as evidenced by mother's frequent lack of attendance or lack of engagement at scheduled visitations and her failure to obtain recommended chemical and mental-health treatment. Ultimately, the district court considered both mother's parenting history and her current ability to care for J.D.H., and we discern no abuse of discretion in the district court's determination that this ground for termination is satisfied by clear and convincing evidence.

## **B**

A district court may also terminate parental rights if it determines, among other things, "that following the child's placement out of the home, reasonable efforts, under the direction of the court, have failed to correct the conditions leading to the child's placement." Minn. Stat. § 260C.301 subd. 1(b)(5). There is a presumption that reasonable efforts failed if the petitioner shows: (1) the child under the age of eight "has resided out of the parental home under court order for six months," (2) "the court has approved the out-of-home placement plan," (3) the "conditions leading to the out-of-home placement have not been corrected," and (4) "reasonable efforts have been made by the social services agency to rehabilitate the parent and reunite the family." *Id.* The presumption does not

apply if the parent has been in regular contact with the child and the parent is complying with an out-of-home placement plan. *Id.*

In determining that termination was warranted under this subdivision, the district court explained:

Mother's progress on the case plan was minimal. She never completed the outpatient chemical dependency treatment program as recommended and is not engaged in chemical dependency services. She continues to test positive for non-prescribed substances, as recently as April 2024. Mother never followed the recommendations of the psychological evaluation, despite the Agency's efforts to assist her in setting up recommended services. Mother only inconsistently participated in visits with [J.D.H.]

Mother first argues that the district court did not adequately consider the periods of negative drug tests and that it erred by considering a positive April 2024 sweat patch test. Mother denies that she used methamphetamine at that time and argues that the test was not properly authenticated. But even setting aside that test result, other unchallenged facts sufficiently support the district court's determination that the "conditions leading to the out-of-home placement have not been corrected," *id.*, including mother's failure to complete chemical-dependency treatment, follow the recommendations of her psychological evaluation, and consistently participate in visits with J.D.H.

Mother next challenges that "reasonable efforts have been made by the social services agency to rehabilitate the parent and reunite the family." *Id.* She argues that the district court "discounted the significant difficulty in navigating the insurance issues" that mother faced in obtaining appropriate services. But the case manager testified that mother "did get insurance quickly in Wisconsin," and the district court found that the case manager

“attempted to assist [m]other in setting up . . . services in Wisconsin,” including by making phone calls to locate an individual therapist and independently contacting Polk County, Wisconsin, about setting up mental-health case management and AHRMS services. Once mother was back in Minnesota, “[the case manager] met with [mother] multiple times per month to assist her in getting Medical Assistance so her services could begin again.” The district court noted that, at the time of trial, mother “still needed to provide some additional financial verifications to Hennepin County so that Medical Assistance would be approved.” And finally, the case manager testified that she presented housing options—including apartments and residential outpatient treatment—that would allow mother to stay in Minnesota and comply with the case plan more easily, but mother’s rental application to an apartment was denied and mother declined to move to a residential treatment facility or outpatient treatment facility with lodging. There is clear and convincing evidence supporting the district court’s determination that the county provided reasonable efforts to rehabilitate and reunite the family and, despite those efforts, mother has failed to correct the conditions leading to J.D.H.’s placement.

### III

Mother’s final challenge is to the district court’s determination that termination was in J.D.H.’s best interests. If there is a statutory basis to terminate parental rights, the paramount consideration in determining whether parental rights should be terminated is the child’s best interests. Minn. Stat. § 260C.301, subd. 7. “The ‘best interests of the child’ means all relevant factors to be considered and evaluated,” including the impact on “the relationship between the child and relatives.” Minn. Stat. § 260C.511 (2022). The district

court must explain its rationale for determining that termination is in the child's best interests after balancing three factors: "(1) the child's interest in preserving the parent-child relationship; (2) the parent's interest in preserving the parent-child relationship; and (3) any competing interest of the child." *In re Welfare of R.T.B.*, 492 N.W.2d 1, 4 (Minn. App. 1992); see Minn. R. Juv. Prot. P. 58.04(c)(2)(ii) (enumerating the best-interests factors outlined in *R.T.B.*). "Where the interests of parent and child conflict, the interests of the child are paramount." Minn. Stat. § 260C.301, subd. 7.

Mother argues that the district court erred by determining that termination was in J.D.H.'s best interests because it "placed minimal weight on other familial relationships that would be severed," specifically her own relationship with J.D.H. and J.D.H.'s relationship with his brother.

The district court acknowledged that J.D.H. "has a relationship with his adult brother" and that termination of mother's parental rights may impact that relationship, but it concluded that "[J.D.H.'s] interest in having his needs met and being in a safe, stable home outweigh the interest in preserving the relationship with" his brother. Likewise, the district court concluded that J.D.H.'s interests in safety and stability outweigh "the interest in preserving the parent-child relationship." The district court considered J.D.H.'s need to access services such as speech and individual therapy, as well as mother's inability to meet J.D.H.'s needs, in part, because of her inability to manage her own chemical and mental health. And as to J.D.H.'s placement, the guardian ad litem observed J.D.H. in his foster placement and explained that he has "really opened up," that he "fits in really well" there, and that he "gets along really well with the other children in the home." Given the record

evidence that supports the district court’s best-interests conclusions and the “considerable deference” afforded to district courts in conducting a best-interests analysis, *J.K.T.*, 814 N.W.2d at 92, we conclude that the district court did not abuse its discretion.

**Affirmed.**