MEMORANDUM DECISION

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IN THE COURT OF APPEALS OF INDIANA

In the Matter of M.B. and C.V., Children Alleged to be Children in Need of Services;

K.V. (Mother),

Appellant-Respondent,

v.

Indiana Department of Child Services,

Appellee-Petitioner.

September 1, 2021

Court of Appeals Case No. 21A-JC-357

Appeal from the Marion Superior Court

The Honorable Mark A. Jones, Judge

The Honorable Rosanne T. Ang, Magistrate

Trial Court Cause No. 49D09-2008-JC-1843
49D09-2008-JC-1844

Najam, Judge.

Statement of the Case

[1] K.V. ("Mother") appeals the juvenile court's adjudication of her two minor children, M.B. and C.V. ("the Children"), as children in need of services ("CHINS"). Mother[1] raises three issues for our review, which we revise and restate as follows:

1. Whether the juvenile court had jurisdiction to adjudicate the Children to be CHINS and order Mother to participate in services given that Mother and the Children had moved to Florida.

2. Whether certain findings of fact by the juvenile court are supported by the evidence.

2. Whether the juvenile court clearly erred when it adjudicated the Children to be CHINS.

[2] We affirm.

Facts and Procedural History

[3] On January 10, 2018, Mother gave birth to M.B. At some point, Mother married E.V., and Mother became pregnant. On May 8, 2020, the Indiana Department of Child Services ("DCS") received a report that Mother was using cocaine while pregnant. DCS opened an investigation into the allegations.

[1] C.V.'s father does not participate in this appeal. The father of M.B. is unknown.

However, as of May 19, Mother had relocated to Florida. On June 19, Mother gave birth to C.V.

[4] The next day, authorities in Florida received an allegation that C.V.'s cord blood tested positive for cocaine and methadone. Jovanna Adams, a Florida Child Protective Investigator ("CPI"), went to the hospital to speak with Mother. Mother informed CPI Adams that she had been subject to an investigation in Indiana, but that that investigation had been "resolved." Tr. Vol 2 at 29. Mother also disclosed to CPI Adams that she had a "history of opiate abuse." *Id.* CPI Adams then requested the records from DCS. The records demonstrated that Mother had "misrepresented" that she had "in any way cooperated with Indiana DCS" and her reasons for moving to Florida. *Id.* at 32.

[5] Mother initially informed CPI Adams that she had relapsed following M.B.'s birth but that she had not used cocaine since. At that point, CPI Adams confronted Mother with the results of a toxicology report, and Mother admitted that she had relapsed while pregnant with C.V. Mother told CPI Adams that she was receiving treatment at a methadone clinic, but Mother did not provide any "supporting documentation." *Id.* at 46. C.V. ultimately remained in the hospital for several weeks in order to be treated for withdrawal symptoms.

[6] CPI Adams had received information regarding a possible incident of domestic violence between Mother and E.V. in January 2020, so she asked Mother about that relationship. Mother initially informed CPI Adams that E.V. "was not in

the picture." *Id*. at 35. However, CPI Adams learned that Mother had "misrepresented" her relationship with E.V. and that Mother "was very much still in contact" with him and "intended to continue" that relationship." *Id*. at 34-35.

[7] CPI Adams also had concerns regarding Mother's "protective capacities and parenting abilities." *Id*. at 37. Specifically, CPI Adams was concerned that Mother's methadone dose "was too high" as Mother had been observed "falling asleep very easily." *Id*. CPI Adams was also worried about Mother's ability to parent C.V. because he was "a very difficult baby" as a result of "how long he had spent withdrawing" from the drugs. *Id*. at 43. And CPI Adams observed Mother to be "frustrated" or "distracted" during her visits with C.V. in the hospital. *Id*. CPI Adam's concerns about Mother's ability to care for C.V. "extend[ed] to" M.B, and she was concerned that Mother "wouldn't be able to provide adequate supervision" to M.B. *Id*. at 45-46.

[8] CPI Adams discussed the concerns with Mother, but Mother denied them. CPI Adams then informed Mother that she believed the problems were "fixable" with in-home services. *Id*. at 39. Mother agreed to intensive in-home services, which included home visits, counseling, and drug screens, as well as a safety plan. However, within seventy-two hours of agreeing to those services, Mother "fled" back to Indiana. *Id*.

[9] On July 20, DCS received a report that the Children were victims of neglect. Specifically, the report indicated that Mother was using cocaine, that C.V. was

born "drug exposed," and that C.V. had spent several weeks in the hospital. Appellant's App. Vol. 2 at 35. DCS Family Case Manager ("FCM") Elaina Andrews conducted a home visit and assessed the family. Mother admitted to FCM Andrews that she has been addicted to cocaine since 2005. Mother further admitted that she had relapsed and used cocaine after M.B.'s birth and again three times in one week while pregnant with C.V. On July 21, Mother submitted to a drug screen, the results of which were positive for fentanyl and methadone. When FCM Andrews questioned Mother about the results of the drug test, Mother denied the use of fentanyl. That presented a "safety concern" for FCM Andrews. Tr. Vol. 2 at 123. Mother submitted to another drug test on August 3 and again tested positive for methadone. FCM Andrews was ultimately able to confirm that Mother was a patient at a methadone clinic.

[10] On August 18, DCS filed a petition alleging that the Children were CHINS because Mother had used cocaine following M.B.'s birth and again while pregnant with C.V., because C.V. had tested positive for cocaine and methadone following his birth, and because Mother had tested positive for fentanyl on July 21, 2020. The juvenile court held an initial hearing on DCS' petition. Following that hearing, the court ordered the Children to remain in Mother's care as long as Mother submitted to random drug screens and participated in family preservation services.

[11] At that point, the family preservation facilitator scheduled an initial meeting with Mother. However, at that meeting, Mother refused to sign the release forms, refused to allow the facilitator into her home, and declined to participate

in the service because it was not court ordered. Mother ultimately participated in a family preservation assessment on September 3. Mother then appeared for "safety virtual sessions" on September 8 and 24 but failed to appear at family preservation appointments on September 17, 18, and 25. Appellant's App. Vol. 2 at 86. In addition, Mother submitted to three additional drug screens, which were positive for buprenorphine and methadone. *Id*. at 126, 136, and 138.

[12] On September 28, FCM Teamer called Mother to remind her of a scheduled visit. But FCM Teamer discovered that Mother had relocated to Florida with the Children. FCM Teamer had "safety concerns" because Mother had not obtained sobriety and because DCS was not able to assess the needs of the family. Tr. Vol. 2 at 131. As a result of Mother's absence and missed appointments, DCS requested to remove the Children from Mother's care. The court granted DCS' motion the same day. DCS then worked with authorities in Florida to remove the Children from the home and ultimately placed them in foster care in Indiana.

[13] Thereafter, the court held a four-day fact-finding hearing. During the hearing, FCM Teamer testified that Mother had only "partially participated" in services and that she had submitted to "a few" drug screens. *Id*. at 130. In addition, Mother's mother, N.H., testified that she believed that Mother's methadone dose was "too high" because Mother would "fall asleep every few minutes." *Id*. at 205. John Hirschfeld, Mother's therapist, also testified. Hirschfeld initially testified that he believed Mother to be dedicated to her sobriety. But he later testified that Mother did not disclose to him that she had used fentanyl. And

Mother testified that, while she has a history of substance abuse, she had sought treatment at various facilities in both Indiana and Florida.

[14] Following the fact-finding hearing, the court found and concluded in relevant part as follows:

> 42. [Mother] has not been forthcoming regarding her illicit substance use. [Mother] did not disclose her use of cocaine to CPI Adams until confronted with information. [Mother] indicated to FCM Andrews that she had not used illicit substances since [C.V.'s] birth. [Mother] testified that she was sober for two years prior to relapsing while pregnant and relapsed for approximately one week. However, [Mother] informed CPI Adams that she had a history of opiate abuse since [M.B.'s] birth. [Mother's] testimony regarding a timeline for any methadone treatment was nearly incomprehensible during the fact-finding. However, [Mother] testified that she stopped taking methadone upon becoming pregnant. [Mother] informed CPI Adams that she was engaged in methadone treatment at the time of her interview due to experiencing cravings. [Mother's] statements contradict each other and are additionally controverted by the drug screens of July 21, 2020 and August 3, 2020.
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> 43. Regarding substance abuse treatment, [Mother] testified that she has sought treatment at New Vista, the Hamilton Center and the Indiana Comprehensive Center. [Mother] testified that she was engaged in treatment through the Indiana Comprehensive Center and was enrolled in psychiatry and counseling until her pregnancy with [C.V.] [Mother] testified that she is currently engaged in treatment [at] New Seasons, which includes drug prevention, counseling, methadone and drug screens. The only supporting evidence offered regarding [Mother's] substance abuse treatment was the testimony of John Hirschfeld, an individual who eventually testified that [Mother] did not inform him of her continued use of illicit substances.

44. Regarding her relationship with [E.V.], [Mother] was not forthcoming to CPI Adams regarding her continued involvement with [E.V.] until confronted. [Mother] informed [her family preservation facilitator] that [E.V.] did not reside in her home. [Mother] then testified that she, her children and her husband ([E.V.]) returned to Indiana to work on their marriage.

* * *

47. Based on the number of inconsistencies of the statements of both [Mother] and [E.V.], the Court does not find the testimony of either individual to be credible. Therefore, the Court does not find any probative value in their statements regarding their substance abuse, reasons for relocation or need for substance abuse treatment.

48. The Court notes that no evidence was presented to indicate that [Mother] had a valid prescription for methadone at the time she testified positive for this substance.

49. The Court further notes that the only evidence regarding [Mother's] substance abuse treatment was proffered through Mr. Hirschfeld, an individual from whom [Mother] withheld information regarding her substance abuse.

50. [M.B.] and [C.V.'s] physical or mental condition is seriously impaired or seriously endangered as a result of the inability, refusal, or neglect of the child[ren]'s parent, guardian, or custodian to supply the child[ren] with necessary food, clothing, shelter, medical care, education, or supervision. [Mother] used cocaine while being responsible for the care of [M.B.]. [Mother] also used methadone and fentanyl while being responsible for the care of [M.B.] and [C.V.]. . . . Upon her substance use being discovered by two different child welfare agencies, [Mother] fled the state with the children. . . . While the Court acknowledges

> that the children were not observed to have visible signs of abuse or neglect, the Court need not wait until harm occurs before acting. [M.B.] is three years of age. [C.V.] is six months old. Their mother uses methadone, cocaine and fentanyl and has not engaged in any honest substance abuse treatment since this case was filed. . . . The untreated substance abuse issues of [Mother] . . . endanger [M.B.] and [C.V.] by virtue of their young age and inability to provide themselves with adequate care, supervision and protection when their parents are unable to provide the same.
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> 51. [M.B.] and [C.V.] need care, treatment, or rehabilitation that the[y are] not receiving and is unlikely to be provided or accepted without the coercive intervention of the Court. [Mother] agreed to engage in treatment in Florida and fled with the children within three days. [Mother] was ordered to engage in treatment in Indiana, later denied the existence of said order, minimally engaged in services and fled with the children within one month. . . . While the Court finds it extremely unfortunate that [Mother is] separated from [her] children by such a great distance, this separation is a result of the actions of [Mother] and [E.V.]. These actions unquestionably support a finding that the coercive intervention of the Court is necessary to compel [Mother] and [E.V.'s] engagement in substance abuse treatment.

Appellant's App. Vol. 2 at 191-192. Accordingly, the court adjudicated the Children to be CHINS. Thereafter, the court issued a dispositional decree and ordered Mother to participate in services. And the court ordered DCS to "locate and pay for services" in Florida within forty-five days. *Id*. at 28. This appeal ensued.

Discussion and Decision

Issue One: Jurisdiction

[15] On appeal, Mother asserts that the juvenile court's order adjudicating Children to be CHINS and the court's dispositional order requiring Mother to participate in services "represent[] an[] extraordinary reach" by the juvenile court since Mother has resided in Florida since September 2020. Appellant's Br. at 25. While not framed as such, Mother's argument is essentially that the juvenile court lacked personal jurisdiction over her because she had moved out of Indiana.

[16] Personal jurisdiction is the court's power to bring a person into its adjudicative process and render a valid judgment over a person. *Keesling v. Winstead*, 858 N.E.2d 996, 1000 (Ind. Ct. App. 2006). The existence of personal jurisdiction over a defendant is a constitutional requirement to rendering a valid judgment, mandated by the Due Process Clause of the Fourteenth Amendment. *Id*. However, a "party can waive lack of personal jurisdiction and submit [herself] to the jurisdiction of the court if [s]he responds or appears and does not contest the lack of jurisdiction." *Heartland Resources, Inc. v. Bedel*, 903 N.E.2d 1004, 1007 (Ind. Ct. App. 2009).

[17] Here, we agree with DCS that Mother "submitted to" the jurisdiction of the juvenile court. Appellee's Br. at 25. DCS filed its CHINS petition on August 18, 2020, while Mother still resided in Indiana. The court held an initial hearing the next day, at which Mother appeared. Mother then moved to

Florida in September. Thereafter, the court held a four-day fact-finding hearing followed by a one-day dispositional hearing, and Mother appeared at each of those hearings. But at no point did Mother assert to the juvenile court that it lacked jurisdiction over her because she no longer resided in Indiana. Because Mother appeared at all of the hearings and did not contest the lack of jurisdiction, she has waived any argument that the court lacked personal jurisdiction over her.[2]

Issue Two: Findings of Fact

[18] Mother next contends that the evidence does not support several of the juvenile court's findings. As our Supreme Court has stated:

> When reviewing a trial court's CHINS determination, we do not reweigh evidence or judge witness credibility. *In re S.D.*, 2 N.E.3d 1283, 1286 (Ind. 2014). "Instead, we consider only the evidence that supports the trial court's decision and [the] reasonable inferences drawn therefrom." *Id.* at 1287 (citation, brackets, and internal quotation marks omitted). When a trial court supplements a CHINS judgment with findings of fact and conclusions of law, we apply a two-tiered standard of review. We consider, first, "whether the evidence supports the findings" and, second, "whether the findings support the judgment." *Id.* (citation omitted). We will reverse a CHINS determination only if it was clearly erroneous. *In re K.D.*, 962 N.E.2d 1249, 1253 (Ind. 2012). A decision is clearly erroneous if the record facts do not support the findings or "if it applies the wrong legal standard

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[2] Mother briefly contends that "Indiana is worse than just a *forum non conveniens* for all parties involved." Appellant's Br. at 28. To the extent that Mother attempts to assert that Indiana is an inconvenient forum for the CHINS proceeding, she has not supported that argument with cogent reasoning.

> to properly found facts." *Yanoff v. Muncy*, 688 N.E.2d 1259, 1262 (Ind. 1997) (citation omitted).

Gr. J. v. Ind. Dep't. of Child Servs. (In re D.J.), 68 N.E.3d 574, 577-78 (Ind. 2017) (alterations in original).

[19] On appeal, Mother asserts that several of the juvenile court's findings are not supported by the evidence. Mother first challenges finding number 7, in which the court found that authorities in Florida had received a report "that [C.V.] was born exposed to an unknown substance and was withdrawing." Appellant's App. Vol. 2 at 189. Mother contends that the contents of that report are "hearsay," never should have made "its way into" the court's findings, and "should not be considered on appeal." Appellant's Br. at 28.

[20] However, even if we were to agree with Mother that that finding is erroneous, any error was harmless. Findings, even if erroneous, do not warrant reversal if they amount to mere surplusage and add nothing to the trial court's decision. *Lasater v. Lasater*, 809 N.E.2d 380, 398 (Ind. Ct. App. 2004). Here, in addition to the finding regarding the Florida report, the court found that DCS had received a report in July 2020 that contained substantially similar information—that Mother had used cocaine while pregnant with C.V. and that C.V. had tested positive for cocaine following his birth. And Mother does not challenge that finding. Further, there is ample evidence in the record to demonstrate that Mother had used cocaine while pregnant with C.V., including Mother's own testimony. To the extent the court relied on the Florida report, any reliance was surplusage and, thus, harmless.

[21] Mother next challenges finding number 36, in which the court found that, following Mother's move to Florida, "remote services could not be offered and the children's safety could not be monitored due to the distance involved." Appellant's App. Vol. 2 at 191. Mother contends that that finding "disregards the past involvement of Florida authorities in an investigation following C.V.'s birth[.]" Appellant's Br. at 28. But Mother's contention on appeal ignores the testimony of the family preservation facilitator that she "would not be able to maintain" a DCS referral if the family "moved out of state." Tr. Vol. 2 at 91. Mother's argument is simply a request that we reweigh the evidence, which we cannot do.

[22] Mother also challenges finding number 42. In that finding, the juvenile court found that Mother "has not been forthcoming regarding her illicit substance abuse." Appellant's App. Vol. 2 at 191. Mother contends that "nearly all the evidence of substance abuse came from conversations [she] had with various state investigators." Appellant's Br. at 29. But, again, Mother's argument disregards the evidence favorable to the court's finding. CPI Adams testified that Mother initially stated that she had not relapsed since M.B.'s birth but that Mother ultimately admitted to having used cocaine while pregnant with C.V. after CPI Adams confronted her with a toxicology report. And Hirschfeld testified that Mother had not informed him of her fentanyl use. Thus, the evidence supports the trial court's findings that Mother was not upfront about her substance abuse.

[23] Finally, Mother challenges the portions of findings 48, 49, and 50 in which the court found that there was no evidence that Mother had a valid prescription for methadone and that she had failed to participate in honest substance abuse treatment. Mother maintains that those findings "ignore the common knowledge that Methadone is not a drug of abuse, but a medication administered specifically to blunt the effects of and alleviate craving for opiates."[3] Appellant's Br. at 29. But the only evidence that Mother presented that her methadone was being administered by a medical professional was her own testimony. And the court explicitly found Mother's testimony not to be credible. *See* Appellant's App. Vol. 2 at 192. Further, even though some of the service providers were able to confirm that Mother was enrolled as a patient at a methadone clinic at some point, CPI Adams and N.H. both testified that they believed Mother's methadone dose to be too high. The juvenile court was free to determine that, even if Mother were a patient at a clinic, she was not making a good-faith effort to treat her addiction. Again, Mother's request is simply a request that we reweigh the evidence. The juvenile court's findings are either supported by the evidence or harmless error.

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[3] In its brief on appeal, DCS relies on information gathered from a website to support its assertion that methadone is "subject to misuse and can be bought as a street drug, without a prescription." Appellee's Br. at 19. Mother has filed a motion to strike that portion of the Appellee's Brief because that information was not presented to the trial court. However, we need not rely on that information to resolve the issues presented by Mother. Because the challenged materials have no bearing on the dispositive issues herein, we have denied Mother's motion to strike in a separate order.

Issue Three: CHINS Adjudication

[24] Finally, Mother asserts that the trial court erred when it adjudicated the Children to be CHINS. As mentioned above, when reviewing a trial court's CHINS determination, we do not reweigh evidence or judge witness credibility. *In re D.J.*, 68 N.E.3d at 577-78 Instead, we consider only the evidence that supports the trial court's decision and the reasonable inferences drawn therefrom. *Id*. at 578.

[25] DCS alleged, and the trial court found, that the Children were CHINS pursuant to Indiana Code Section 31-34-1-1 (2021),[4] which provides that a child is a child in need of services if, before the child becomes eighteen years of age: (1) the child's physical or mental condition is seriously impaired or seriously endangered as a result of the inability, refusal, or neglect of the child's parent, guardian, or custodian to supply the child with necessary food, clothing, shelter, medical care, education, or supervision; and (2) the child needs care, treatment, or rehabilitation that: (A) the child is not receiving; and (B) is unlikely to be provided or accepted without the coercive intervention of the court.

[26] Our Supreme Court has interpreted that statute to require "three basic elements: that the parent's actions or inactions have *seriously endangered the child*, that the child's needs are unmet, and (perhaps most critically) that those needs are

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[4] DCS also alleged that C.V. was a CHINS pursuant to Indiana Code Sections 31-34-1-10 and -11. However, the court did not find C.V. to be a CHINS under either of those statutes.

unlikely to be met without State coercion." *In re S.D.*, 2 N.E.3d at 1287 (emphasis added). "A CHINS adjudication focuses on the condition of the child." *In re N.E.*, 919 N.E.2d at 105. And, when determining whether a child is a CHINS under Section 31-34-1-1, the juvenile court "should consider the family's condition not just when the case was filed, but also when it is heard." *In re S.D.*, 2 N.E.3d at 1290.

Serious Endangerment

[27] On this issue, Mother contends that DCS failed to demonstrate that her actions or inactions have seriously endangered the Children. Mother asserts that there is "no evidence or even discussion that either M.B. or C.V. ever lacked food, shelter, or medical care." Appellant's Br. at 21. Rather, Mother maintains that the evidence shows that the Children "were physically safe" with Mother and that neither child "appeared to have been harmed or neglected in any way" when they were removed from Mother's home. *Id.*

[28] But the evidence most favorable to the juvenile court's judgment demonstrates that Mother has been addicted to cocaine since 2005. And Mother does not dispute that she used cocaine following M.B.'s birth and again while pregnant with C.V. In addition, Mother's use of cocaine while she was pregnant with C.V. led to C.V. spending weeks in the hospital in order to be treated for withdrawal symptoms and caused C.V. to become "a very difficult baby," who is "fussy, inconsolable and a poor feeder." Tr. Vol. 2 at 43. And Mother tested positive for fentanyl on July 21 and did not provide any explanation for that positive drug test.

[29] Further, Mother tested positive for methadone on multiple occasions during the underlying proceedings. And Mother disregards the evidence that her methadone use causes her to fall asleep "every few minutes." *Id*. at 205. Further, CPI Adams testified that Mother would get "distracted" while visiting C.V. *Id*. at 43. And CPI Adams testified that she was concerned that Mother "wouldn't be able to provide adequate supervision" to M.B. because of her "high doses" of methadone. *Id*. at 46. That evidence demonstrates that Mother is not able to provide the constant supervision that the young Children need in order to stay safe. Contrary to Mother's assertions on appeal, the evidence demonstrates that Mother's actions or inactions have seriously endangered the Children.

Children's Needs

[30] Next, Mother contends that, "[b]ut for the very fact that [DCS] removed [Children] from their mother's care," there was "no evidence or even discussion in the record as to any care, treatment or rehabilitation that either M.B. or C.V. might require." Appellant's Br. at 23. Mother maintains that the court's adjudication of the Children as CHINS is "based on concerns for the future or upon a notion that [Mother's] history of substance abuse might be a 'cause for concern.'" *Id*. at 23-24.

[31] We acknowledge that "[s]peculation is not enough for a CHINS finding." *S.S. v. Ind. Dep't of Child Servs. (In re K.D.)*, 962 N.E.2d 1249, 1256. (Ind. 2012). However, the CHINS statutes "do not require that a trial court wait until a tragedy occurs to intervene." *N.P. v. Ind. Dep't of Child Servs. (In re R.P.)*, 949

N.E.2d 395, 401 (Ind. Ct. App. 2011). Rather, "a child is a CHINS when he or she is endangered by parental action or inaction." *Id*. And, as discussed above, the evidence demonstrates that Mother's history of drug use, her failure to seek honest treatment, and her current methadone use pose a danger to the Children.

[32] The Children are young, and they need constant supervision. Given Mother's history of drug use and her current use of methadone that causes her to get distracted and fall asleep often, Mother is not able to provide the supervision that the Children need. Accordingly, the juvenile court did not err when it concluded that the Children's needs are unmet as a result of Mother's actions.

State Coercion

[33] Finally, Mother contends that the court erred when it concluded that the Children's needs would not be met without the coercive intervention of the court. In particular, Mother asserts that, because the evidence "fails to show that either M.B. or C.V. was 'serious endangered' or 'seriously impaired' as the result of any lapse on the part of" Mother or that "either child required an[y] 'care, treatment or rehabilitation' he was not already receiving," it is "difficult to say why coercive intervention of the court would be required[.]" Appellant's Br. at 24. In other words, Mother's argument is premised on her assertion that the State failed to meet the first two prongs of the CHINS statute. However, as discussed above, the evidence demonstrates both that Mother's actions or inactions have seriously endangered the Children and that the Children's needs are unmet.

[34] In any event, the evidence readily demonstrates that Mother requires the coercive intervention of the court. After DCS had received the first report regarding Mother, Mother did not "in any way cooperate[]," but instead left the State and went to Florida. Tr. Vol. 2 at 32. Then, the authorities in Florida received a report about Mother's drug use. Mother initially agreed to participate in services but then "fled" Florida and returned to Indiana within seventy-two hours. *Id*. at 39. And, in Indiana, DCS received a second report and filed its CHINS petition. Following an initial hearing, the court allowed the Children to remain in Mother's care so long as Mother participated in family preservation services and random drug screens. But Mother initially refused to participate, claiming the services were not court ordered. Even after Mother ultimately agreed to participate, she only "partially participated." *Id*. at 130. Mother only attended two of five family preservation services and only submitted to a few drug screens before she ultimately left Indiana again. That evidence readily supports the court's conclusion that the coercive intervention of the court is needed. The juvenile court did not clearly err when it adjudicated the Children to be CHINS.

Conclusion

[35] In sum, Mother waived any argument regarding the juvenile court's lack of personal jurisdiction by appearing at every hearing without contesting the court's jurisdiction. Further, the findings challenged by Mother are either supported by the evidence or, if there were an error, any error would be

harmless. And the juvenile court did not err when it adjudicated the Children to be CHINS. We therefore affirm the juvenile court's order.

[36] Affirmed.

Riley, J., and Brown, J., concur.