DEPARTMENT OF CHILDREN AND FAMILIES

Case Tracking Number: <u>1102</u>07DSP-Clark-76

Division of Safety and Permanence

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Agency: Clark County Dept. of Social Services

Child Information:	Age: 7 months	Gender: ⊠ Female ☐ Male
	Race or Ethnicity: Hispanic	
	Special needs: None prior to incid	lent
Child's Residence:	☐ In-home ☐ Out-of-home care place	ement
Date of Incident: _2	2/7/11	
On February 9, 201 while in the care of fracture, subdural h relative caring for t child in the home p consistent with a w	11 the agency was notified that 2 days f a relative, the child was in a swing unhematoma, and paralysis on one side. the child reportedly found her lying or placed the baby in the swing, but didn'	e of death, injury or egregious abuse or neglect: a earlier a child was taken by ambulance to the hospital. Reportedly, insupervised and fell. The child suffered severe brain trauma, a skull Part of the skull cap was removed due to swelling of the brain. A in the floor beneath a baby swing. The relative believes that a young of tasten the restraining harness. Medical opinion is that the injuries are ad trauma (shaken baby), and are not consistent with a fall from a low ongoing.
The agency substanthe parents and rela Reportedly, after chof the injuries. Repdevices. The relative	atives residing with the family. The clanging the baby's diaper, the relative portedly, the young child carried the b	an unknown maltreater. The child was determined unsafe in the care of hild was being cared for by relatives while the parents were working. It handed the baby to a 3 ½-year-old relative also in the home at the time baby and placed her into a metal swing, but did not secure the safety on the floor. Also on the floor under the swing was a case of water
Additional informati	ion for children in home:	
The child resid	the child's family: ded with her mother, father, two adult the father's wife in another communit	relatives and two children of the relatives. The child has a half-sibling
		under ch. 48 or ch. 938 being provided to the child, family or alleged maltreater by the agency or reports being investigated at time of incident?
	describe the type of services, date(s) over the date (s) over the	of last contact between agency and recipient(s) of those services, and the
Summary of all previous five ye None		er ch. 48 or ch. 938 by child's parents or alleged maltreater in the
the child, any m 18 years or olde	nember of the child's family living in thi	, including any investigation of a report or referrals to services involving is household and the child's parents and alleged maltreater at the age of
None		
Summary of any incident:	y investigation conducted under ch. 48	or ch. 938 and any services provided to the family since the date of the

The agency collaborated with law enforcement, the District Attorney and medical professionals during the invstigation. The agency substantiated physical abuse to the child by an unknown maltreater. The injured child was placed into foster care upon discharge from the hospital. The child was subsequently reunified with her parents with several court ordered

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not been determined how the child sustained these injuries. The child continues to receive medical services. The child and family members have been referred to other services and are receiving Ongoing Services from the agency.

Additional information for children in out-of-home (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

Description of all other persons residing in the OHC placement home:

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee that constitutes a substantial failure to protect and promote the welfare of the child.

* Summary of actions taken by agency in response to the incident:

The agency screened in and investigated the allegation of injuries to the child, collaborating with law enforcement, the District Attorney and medical professionals. The agency substantiated physical abuse to the child by an unknown maltreater. The child was removed from her parents care and placed into foster care. She was later reunified with her parents contingent upon several conditions. The child and parents have been referred to services. The agency accompanies the family to all medical appointments and provides other services, including unannounced home visits. The case remains open with the agency for Ongoing Services case management.

*Summary of policy or practice changes to address identified issues:

The Initial Assessment is not in compliance with the CPS Access and Initial Assessment Standards and the Safety Intervention Standards. The DSP is working with the agency regarding practice issues identified during this case review.

*Recommendations fo	or further change	s in policies,	practices, ru	ules or statutes	needed to add	ress identified i	ssues:
None							

Statement	of	Comp	letion:

7 Y29	This 90-day summ	ary report complet	es the Division	of Safety and Perm	nanence (DSP) revi	iew of this case

^{*} If a full report including agency actions, changes in policies or practices and recommendations for further changes was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.