

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

Case Tracking Number: 100330DSP-PN-11 Agency: Bureau of Milwaukee Child Welfare

Child Information: Age: 12 ½ years Gender:  Female  Male  
Race or Ethnicity: African American  
Special needs: Behavioral and emotional needs

Child's Residence:  In-home  Out-of-home care placement

Date of Incident: 3/30/10

### Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

The youth died by hanging himself from the bedroom closet rod. On the evening of 3-30-10 the treatment foster care providers restricted his privileges of television and video games due to an in-school suspension he received on this date. The youth was sent to his room where he could be heard crying. After 10-15 minutes the youth calmed down, left his bedroom to use the bathroom and then returned to his room. Approximately 10-15 minutes later the youth's sibling went to the room and found his brother hanging and unconscious. Emergency services were called and CPR was used in attempt to revive the him. He was taken to the local hospital where he was pronounced dead at 9:12 PM.

### Findings by agency, including material circumstances leading to incident:

The Bureau of Milwaukee Child Welfare (BMCW) screened out this report as there was no child maltreatment reported or alleged. The youth committed suicide with no apparent caregiver negligence or other direct involvement in the youth's death.

### Additional information for children in home:

#### Description of the child's family:

Yes  No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

Summary of all involvement in services under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years:

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family or alleged maltreater:

Summary of any investigation conducted under ch. 48 or ch. 938 and any services provided to the family since the date of the incident:

### 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:

The youth was placed in this treatment foster home in January 2009. This was determined to be an appropriate placement for this youth because the providers are experienced (i.e., licensed for approximately 8 years) in fostering youth with special needs. The foster parents also demonstrated that they would work closely with the youths' services team.

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

This married couple was providing treatment foster home services to four male teenagers prior to this child's death. The

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three surviving youths, one of whom is a sibling to the deceased child, still reside in the home. There are no other residents.

**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.

In 2002 the provider was licensed for approximately three months as a general foster home prior to becoming licensed as a treatment foster home and have been licensed as such since 2002. The provider has not had any licensing violations.

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

Because no maltreatment was suspected in the child's death, the report was screened out and services were not required. However, the BMCW did provide support, including grief counseling and funeral arrangements to the family, foster parents and children in the foster home immediately following the incident. The agency also maintained contact with law enforcement regarding its investigation of the incident.

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

None

**\*Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues:**

None

**Statement of Completion:**

Yes  No This 90-day summary report completes the Division of Safety and Permanence (DSP) review 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.