### **DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

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

Case Tracking Number:	101123DSP-PN-65 Agency:	Eau Claire County Department of Human Services
Race	5 months or Ethnicity: African American al needs: none	Gender: 🛛 Female 🔲 Male
Child's Residence: 🛛 In-h	ome  Out-of-home care placement	
Date of Incident: 11/23/1	0	
The child's mother called shild was taken to the local traumatic brain injury, and child's father was caring for the couch. The mother inithroughout the night; however the father later advised la confessed that he shook the	911 in the early hours of the morning all hospital and later transported by Me occipital skull fracture, and subdural hor her while the mother was out. Whe stially denied leaving the child in the clever, she did not call for help until the w enforcement that while he was alon	stating that the child was in distress and not breathing. The edi Flight to another hospital. The child was diagnosed with hemorrhaging consistent with non-accidental trauma. The en the mother returned, he told her that the child had fallen off care of the father. She indicated that she checked on the child e child was blue and no longer breathing several hours later. He with the baby, she began to cry and he "freaked out." He in the bedroom. After the baby fell into her crib, he violently
The agency substantiated placeased while in the hosp Degree Reckless Homicid	pital. The child's one-year-old sibling	her and neglect by her mother. The child was pronounced was placed with a relative. The father has been charged with 1 <sup>st</sup> unts of Bail Jumping. The mother has been charged with
Additional information for o	children in home:	
Description of the child The child resided wit time in the home with	h her mother and one-year-old siblin	g. The father was reportedly not living in the home, but spent
		h. 48 or ch. 938 being provided to the child, family or alleged maltreater agency or reports being investigated at time of incident?
If "Yes", briefly described person(s) receiving the $N/A$		ontact between agency and recipient(s) of those services, and the
Summary of all involve	ment in services as adults under ch. 4	8 or ch. 938 by child's parents or alleged maltreater in the

previous five years:

Prior to the current incident, the agency screened in and investigated two CPS reports in 2010. Please see the following section for further information.

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 living in this household and the child's parents and alleged maltreater at the age of 18 years or older:

In July 2010 the agency received a CPS report alleging neglect to the child and her sibling by both parents, and physical and emotional abuse to the child's sibling by the mother. The report was screened in for an alternative response and an investigation was completed. A substantiation determination is not required for cases screened in for an alternative reponse. Prior to the completion of the investigation, another CPS report was received in August 2010. This report was screened in for a traditional response and investigated. An allegation of physical abuse was unsubstantiated and the children were found to be safe in the care of the mother. The case was closed after the family indicated they did not need

#### **DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

any services.

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

On 11/24/10 the agency received the report alleging physical abuse of the child. The report was screened in and investigated. Physical abuse of the child by the father and neglect of the child by the mother were substantiated. The child and her sibling were found to be unsafe. The child remained in the hospital until her death on 11/25/10. The child's sibling was removed from the care of the mother and placed with a relative. The father is incarcerated at the county jail due to the pending criminal charges against him. The family is receiving ongoing services from the agency, including supervised visitation for the mother and one-year-old.

After the one-year-old sibling was removed from the care of the parents on 11/24/10, a report was received by the agency later in the day alleging physical abuse to the sibling by the parents. This was alleged to have occurred while the sibling was still in the care of the parents. This report was screened in and an investigation was completed. The allegation was unsubstantiated. At the time of the second report, the child had already been determined to be unsafe in the care of her parents. The sibling remained in the care of the relative.

### 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:

N/A

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

N/A

**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.

N/A

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

The agency screened in the report of maltreatment and collaborated with law enforcement throughout the investigation. Physical abuse to the child by the father and neglect to the child by the mother was substantiated. The child died as a result of her injuries. The child's one-year-old sibling was determined to be unsafe in the care of her parents and the sibling was placed with a relative. The mother has supervised visitation with the sibling. The father is incarcerated at the county jail and has no contact with the sibling. The family is receiving ongoing services from the agency.

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

## Statement of Completion:

_ Y	es	imes No	This 90-day	summary repor	t completes th	e Division of S	Safety and Perm	nanence (DSP)	review of this cas	se
-----	----	---------	-------------	---------------	----------------	-----------------	-----------------	---------------	--------------------	----

<sup>\*</sup> 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.