## **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: 110517DSP-Clark-108	Agency:	Clark County Dept. of Social Services
Child Information: Age: 2 months		Gender: X Female Male
Race or Ethnicity: Caucasi	an	
Special needs: None		
Child's Residence:  In-home  Out-of-home	care placement	
Date of Incident: 5/17/11		
Description of the incident, including the suspect	ed cause of deatl	h. injury or egregious abuse or neglect:
baby pale and unresponsive. She called 911, and fracture to her left rib and three brain bleeds of oparents initially had no explanation for the injurarms when he attempted to retrieve her pacifier. which they believed to be nonaccidental. The padropped the child or handled her too roughly, but filed in connection with the child's injuries. The Findings by agency, including material circumsta. The agency substantiated physical abuse to the cunsafe in the care of her parents and removed frattention for their child when needed. They described too hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to hard on the back by her parents we have a substantial to have a substantial	d the baby was to differing ages, in ies. Then the fat Medical staff in arents then attemnt indicated they excriminal investion mees leading to inchild by both parom their care. To cribed situations when she was cho	
Additional information for children in home:		
Description of the child's family: The child lives with her mother and father. visits with the mother and her current family		s two other children that live with their father and have regula
		n. 48 or ch. 938 being provided to the child, family or alleged maltreater gency or reports being investigated at time of incident?
If "Yes", briefly describe the type of services, person(s) receiving those services: $N/A$	date(s) of last co	ontact between agency and recipient(s) of those services, and the

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

Please see following section.

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 2006, Lincoln Co. DSS screened in and investigated two CPS Reports on the mother's family, which included her, her then husband (i.e., not the injured child's father) and their two children. Both reports were unsubstantiated, and no further services were provided.

In 2007, Lincoln Co. DSS screened in a report for child welfare rather than child protective services. The agency attempted to reach the family, who did not respond. The case was closed.

Summary of any investigation conducted under ch. 48 or ch. 938 and any services provided to the family since the date of the DCF-F-2476-E (R. 12/2010)

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### incident:

The agency substantiated physical abuse to the child by both parents and by an unknown maltreater. The child was determined unsafe with her parents and placed in foster care upon discharge from the hospital. She was then moved to placement with a relative. The infant's injuries were considered nonaccidental. The parents presented as very caring but lacking proper infant care skills. The parents have been referred to and are receiving services from the agency and other community resources. The parents' visits with the child are supervised, and the parents are assisted with her care. The case remains open with the agency for Ongoing Services case management.

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 report of injuries to the infant, collaborating with law enforcement during the investigation. Physical abuse to the infant by her parents and an unknown maltreater was substantiated. The initial assessment found the child unsafe in her parents' care. The agency placed the infant into a foster home and moved her to a relative's home after identifying and assessing the relative. The agency is assisting the family with services. The case remains open for Ongoing Services.

\*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:

The agency is exploring mandated reporter training for Emergency Medical Technicians.

Statement of Completion	nt of Completion:
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<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.