

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

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

**Case Tracking Number:** 111225DSP-Milw-172      **Agency:** Bureau of Milwaukee Child Welfare

### Scope of DSP Review of Incident

- No Review. The information contained in this report was provided by the agency.  
 90-Day Review

### Child Information (at time of incident)

Age: 10 years      Gender:  Female  Male  
Age: 5 years      Gender:  Female  Male

Race or Ethnicity: African American

Special Needs: None known

**Date of Incident:** 12/26/11

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

On January 3rd, the agency received a report from a social worker at Children's Hospital following a 2am car accident in which the mother had been driving while intoxicated. The 10-year-old died at the scene; her 5-year-old sister was in critical condition. The mother hit a parked semi-truck with the car. Bystanders called 911 for assistance. The mother was arrested on 12/30/11 and has since been released; she is being charged with four felony counts: Homicide by Intoxicated Use of Vehicle, Homicide by Use of Vehicle with PAC, Injury by Intoxicated Use/Vehicle, Injury by Use of Vehicle with PAC, and one misdemeanor, Knowingly Operating While Suspended and Cause Great Bodily Harm, as a result of the incident.

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

The 1/3/12 referral alleging neglect to the 10-year-old and 5-year-old children by the mother was screened in and assessed. The allegations of neglect to both children by the mother were substantiated. The mother's actions caused the death of her 10-year-old daughter and significant injury to her 5-year-old daughter. The mother has been charged with four felony counts: Homicide by Intoxicated Use of Vehicle, Homicide by Use of Vehicle with PAC, Injury by Intoxicated Use/Vehicle, Injury by Use of Vehicle with PAC, and one misdemeanor, Knowingly Operating While Suspended and Cause Great Bodily Harm, as a result of the incident.

**Child's residence at the time of incident:**  In-home  Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

#### A. Children residing at home at the time of the incident:

**Description of the child's family** (includes household members, noncustodial parent and other children that have visitation with the child and/or in the child's family home):

Prior to the incident, the deceased child resided with her mother, 5-year-old sister and maternal great-grandmother.

Yes  No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's 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:**

N/A

**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:** (Does not include the current incident.)

None

**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.** (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable belief of maltreatment or threatened harm are not required to be screened in for an initial assessment, and no further action is required by the agency.)

None

**Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 or ch. 938 and any services provided to the child and child's family since the date of the incident:**

The agency screened in and assessed the allegations of neglect by the mother to these children. The agency substantiated the allegations of neglect to both children by the mother, as her actions caused the death of one child and significant injury to the other. The family has utilized community supports, the mother and 5-year-old are currently living with the maternal grandmother, and the case has been closed with the BMCW.

**B. Children residing 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 any actions taken by agency in response to the incident:** (Check all that apply.)

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report  | <input type="checkbox"/> Attempted or successful reunification   |
| <input type="checkbox"/> Protective plan implemented  | <input checked="" type="checkbox"/> Referral to services   |
| <input checked="" type="checkbox"/> Initial assessment conducted                                      | <input type="checkbox"/> Transportation assistance   |
| <input type="checkbox"/> Safety plan implemented  | <input type="checkbox"/> Collaboration with law enforcement  |
| <input type="checkbox"/> Temporary physical custody of child  | <input type="checkbox"/> Collaboration with medical professionals                                      |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation   |
| <input type="checkbox"/> Placement into foster home   | <input type="checkbox"/> Case remains open for services  |
| <input type="checkbox"/> Placement with relatives   | <input checked="" type="checkbox"/> Case closed by agency  |
| <input type="checkbox"/> Ongoing Services case management   | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
|   | <input type="checkbox"/> Other (describe):   |

**FOR DSP COMPLETION ONLY:**

**Summary of policy or practice changes to address issues identified during the review of the incident:**

None - No review

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

None - No review

Yes  No  Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) review of this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

The agency must submit an electronic copy of the completed 90-Day Summary Report to [PaulaL.Brown@wisconsin.gov](mailto:PaulaL.Brown@wisconsin.gov)