

## 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:** 120203DSP-Milw-177      **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: 17 days      Gender:  Female    Male

Race or Ethnicity: African American

Special Needs: None known

**Date of Incident:** 2/3/12

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

On February 3rd, the agency received a report regarding a 17-day-old baby who had been pronounced dead at the hospital. Both parents were inconsistent in their accounts of the events leading up to the baby's death. They stated that she was put to bed in her pack and play at approximately 9:30pm, however, both the mother and father claim to have gotten up separately at approximately 3am to change the baby's diaper, attempt to feed her, and place her back in the pack and play. The father stated that he woke around 9am to find the baby in bed with him, the mother, the 3-year-old and the 1-year-old. The baby wasn't breathing and had blood coming from her nose. The paramedics were called and transported the baby to the hospital, where she was pronounced dead. Neither parent was able to explain how the baby ended up in bed with the family.

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

The 2/3/12 referral alleging physical abuse to the infant by an unknown maltreater was screened in and assessed. The allegation was unsubstantiated as there was no evidence to support that the baby had been physically abused. Due to concerns about unsafe sleeping practices, the family is currently participating with intensive in home services to ensure the safety of the 3 year old and 1 year old.

**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 infant lived with her mother, father, 3-year-old half brother, and 1-year-old half brother.

The family resided in a home with family friends. The additional household members were two adult females, an adult male, and a one-year-old girl.

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.)

Two CPS Reports on 12/11/11 and 12/19/11 were screened out.

An 8/20/11 referral alleging neglect by the mother to the 3-year-old and 1-year-old was screened in, and on 8/20/11 referrals alleging abuse and neglect by the mother to the 3-year-old and 1-year-old were screened in. The referrals were assessed together and unsubstantiated as there was no evidence of maltreatment.

A 5/2/11 referral alleging neglect by the mother to the 3-year-old and 1-year-old was screened in, assessed and unsubstantiated as there was no evidence of maltreatment.

A 5/11/10 referral alleging lack of supervision by the mother to the 2-year-old (now 3-year-old) was screened in, assessed and unsubstantiated as there was no evidence of maltreatment.

**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.)

See previous section

**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 allegation of physical abuse to this child by an unknown maltreater. The agency unsubstantiated the allegation as there was no preponderance of evidence. The other children continue to be placed in the home, and the family is currently participating in a safety plan through intensive in home services to ensure safe parenting skills and practices.

**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:**

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 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 checked="" type="checkbox"/> Safety plan implemented   | <input checked="" 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 checked="" type="checkbox"/> Case remains open for services                                     |
| <input type="checkbox"/> Placement with relatives   | <input 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 DSP Review

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

None - No DSP Review

**DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

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)