

## 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:** 120525DSP-Mara-211      **Agency:** Marathon County Department of Social Services

**Child Information** (at time of incident)

Age: 9 months      Gender:  Female  Male

Race or Ethnicity: Hispanic

Special Needs: None

**Date of Incident:** 5/25/12

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

On 5/25/12, the agency received a report of possible physical abuse to a 9-month-old child. The child presented at a local medical clinic with a sore and swollen upper left arm. Medical testing and scans determined that the child had a humerus fracture on his left arm, which was described as a spiral fracture. The child was also found to have a fracture to his right ulna, which was described as an impact fracture. The medical professionals determined that these injuries were in the same stage of healing and appeared to be approximately two weeks old. Further review of the child's scans found another fracture to the child's left fibula and a healing fracture to his rib. These additional fractures were in different stages of healing. Law enforcement completed an investigation into the injuries to the child. Law enforcement has referred the case to the District Attorney's Office for charges of Physical Abuse to a Child and Child Neglect against the father. A criminal charge is merely an allegation and a defendant is presumed innocent until and unless proven guilty.

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

The agency screened in and assessed the allegation of physical abuse to the child. The agency collaborated with law enforcement and medical professionals during the assessment. The agency substantiated physical abuse to the child by the father. The child was ultimately found to have four fractures that were in different stages of healing. The assessment conducted by the agency and law enforcement found that several individuals had concerns regarding the care of the child by the father. During the course of the law enforcement investigation, the father left the area and his whereabouts are unknown at this time. The child was determined safe in the care of his mother and the agency referred the mother and child to community services.

Yes  No Criminal investigation pending or completed?

Yes  No Criminal charges filed? If yes, against whom? Charges are pending at this time.

**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):

The child was living with his mother, father, two maternal aunts, the boyfriend of one aunt and a 2-year-old cousin.

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.** (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 suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an initial assessment, and no further action is required by the agency.)

A 3/22/06 report regarding possible sexual abuse by the mother to her niece was assessed and unsubstantiated.

**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 the child. The assessment was completed in collaboration with law enforcement and the agency substantiated physical abuse the child by the father. The father's whereabouts are currently unknown and law enforcement has referred the case to the District Attorney's Office for possible charges against the father. The child was determined safe in the care of this mother. The agency has referred the mother and child to community services and has closed the case.

**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 checked="" 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 checked="" type="checkbox"/> Collaboration with law enforcement                                 |
| <input type="checkbox"/> Temporary physical custody of child  | <input checked="" 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:**

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's practice in each case reported under the Act. The DSP did not identify practice issues during the review of the incident.

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

None

- 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 [Tara.Muender@wisconsin.gov](mailto:Tara.Muender@wisconsin.gov)