

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: 130924DSP-Outag-366 **Agency:** Outagamie Health and Human Services Department

Child Information (at time of incident)

Age: 5 Months Gender: Female Male

Race or Ethnicity: Unknown

Special Needs: None

Date of Incident: September 24, 2013

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

On September 24, 2013, the agency received a report regarding a five-month-old infant brought to the hospital with life threatening injuries. Medical professionals who examined the infant suspected head trauma due to the infant's presenting symptoms, so the infant was transported to a children's hospital. Law enforcement was contacted and initiated a criminal investigation regarding the child's suspicious injuries.

The mother's partner reported she provided care for the infant that day. The mother's partner initially stated the infant rolled off the bed onto a carpeted floor. The mother's partner changed her account of events several times and ultimately stated the infant fell off the kitchen counter when the mother's partner stepped away. The mother's partner indicated after the infant fell from the counter the infant went limp, so she tried to wake the infant by shaking her while supporting her head. The mother's partner stated she drove the infant to the hospital as she thought it would be quicker than calling 911. Medical personnel diagnosed the infant with Physical Abuse-Abusive Head Trauma. It was determined the infant sustained a head injury and bruising to her buttocks. Medical professionals indicated with reasonable medical certainty that the infant's head injury resulted from forces which occur when an infant is shaken, and the explanations given by the mother's partner were not consistent with the infant's injuries. No criminal charges have been filed in this case.

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

The agency collaborated with law enforcement and medical personnel to complete the assessment. The Initial Assessment completed by the county agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the infant by the mother's partner. Medical professionals determined the infant sustained injuries most likely the result of being shaken by a caregiver, and diagnosed the infant with Abusive Head Trauma. The infant was deemed unsafe by the agency. The mother moved out of her partner's home. The infant remained with her mother. A Child in Need of Protection or Services petition was filed and the case remained open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?
 Yes No Criminal charges filed? If yes, against whom?

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):

At the time of the incident, the infant resided with her mother and the mother's partner. The infant's father was not yet adjudicated.

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.)

N/A

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.)

N/A

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 collaborated with law enforcement and medical personnel to complete the assessment. Based on the information gathered, the Initial Assessment completed by the county agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the infant by the mother's partner. Medical professionals determined the infant sustained injuries most likely the result of being shaken by a caregiver, and diagnosed the infant with Abusive Head Trauma. The infant was deemed unsafe by the agency. The mother moved out of her partner's home. The agency assessed the mother as protective so the infant remained with the mother. A Child in Need of Protection or Services petition was filed and the case remained open to provide ongoing case management services.

B. Children residing in out-of-home care (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 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 checked="" 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 checked="" type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input checked="" 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 checked="" 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:

N/A

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.