

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: 140221DSP-Ocon-419 **Agency:** Oconto County Health and Human Services Department

Child Information (at time of incident)

Age: 3 weeks Gender: Female Male

Race or Ethnicity: White, Hispanic/Latino

Special Needs: None

Date of Incident: February 21, 2014

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

On February 21, 2014, the agency received a report regarding a three-week-old infant seen in the Emergency Room with suspicious injuries. The parents reported the infant fell out of the father's lap while he was feeding the infant a bottle, and the mother woke up to the infant crying. Medical personnel who assessed the infant indicated the infant sustained injury suspicious for non-accidental trauma. The infant was transported to a larger children's hospital for further care and management. Law enforcement was contacted to initiate an investigation into the cause of the infant's injuries.

When interviewed, the mother stated the infant woke up hungry around 1:00AM so the parents prepared a bottle for him. The father began feeding the infant and she fell back asleep. The mother woke up again when she heard the infant crying. She stated the father accidentally dropped the infant on the floor after falling asleep while feeding the infant. The mother said they wanted to make sure the infant was unharmed so they took him to the hospital.

The father indicated he was sitting on the edge of the bed holding the infant in his arms while he was feeding him. He said he was so tired that he fell asleep and then dropped the infant. The father reported the infant landed on the floor and started crying. The father said he was very concerned because the infant is just a new baby and he would never intentionally do anything to hurt him.

Additional tests were completed to evaluate the infant's condition. Medical personnel determined there was no evidence the infant sustained the injuries originally reported and there was no indication of non-accidental trauma.

No criminal charges were filed as a result of law enforcement's investigation.

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

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate the allegation of physical abuse to the infant by the father. Further evaluation by medical personnel determined there was no evidence the infant sustained injury as originally reported and no indication of non-accidental trauma. The agency determined the infant safe in the care of his parents. The family was receiving nurse home visiting services since the infant's birth and no further service referrals were needed, so the agency closed the case.

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 his mother and his father.

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 professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate the allegation of physical abuse to the infant by the father. Further evaluation by medical personnel determined there was no evidence the infant sustained petechial hemorrhages as originally reported and no indication of non-accidental trauma. The agency determined the infant safe in the care of his parents. The family was receiving nurse home visiting services since the infant's birth and no further service referrals were needed, so the agency closed the case.

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 type="checkbox"/> Protective plan implemented | <input 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:

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.