## **DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

## 6-Month Final 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 Tr	acking Nu	ımber:	121201DS	P-Oconto-282	Agency:	Oconto County Department of Health and Human Services
	formation 2 years	(at time	of incident)	Gender: 🛚	Female 🔲 I	Male
Race or	Ethnicity:	Cauca	sian			_
Special	Needs: _ ]	Hypoxic	-Ischemic E	Encephalopathy	at birth. Chi	ild has a feeding tube.
Date of	Incident:	12/01/	′12			
Descrip	tion of the	inciden	t, including t	the suspected ca	use of death	n, injury or egregious abuse or neglect:
child ha of heali explana child w injuries medical	as special ng. The rations wer as evaluat ; however	needs and the plausified by a r, the event.	nd is not mo provided sev ble explanat geneticist to aluation fou	bile. Upon furtheral explanation ions. In addition determine if a not no evidence to	her examina as for the chi n, this is the medical con- to support th	child admitted to the hospital because of a broken femur. The tion, a bone scan indicated an old wrist fracture, in the process ld's injuries; however, medical personnel stated none of the second incident involving bone fractures to this child. The dition exists which could have caused or contributed to the his assertion. The injuries were ruled non-accidental by the the cause of the injuries. No criminal charges have been
The age by an u medical year-old	ency colla nknown n l condition	borated naltreaten. The pwere det	with law en er was substa parents were termined uns	forcement and nantiated. The che unable to provi	nedical perse ild's injurie de a plausib	terial circumstances leading to incident: onnel to complete the assessment. Physical abuse to the child s were determined non-accidental and not caused by any le explanation for the injuries to the child. The child and her 7- me care. A Child in Need of Protection or Services petition
				pending or comple If yes, against v		
Child's	residence	at the ti	me of incide	nt: 🛛 In-home	Out-of-ho	ome care placement
•		•	•	on (A. or B. based		s residence at the time of the incident).
chil	d and / or i	in the chi	ld's family ho			noncustodial parent and other children that have visitation with the
☐ <sup>·</sup> fam	Yes 🛭 No	o State	ment of Serv	rices: Were servi	ces under ch.	48 or ch. 938 being provided to the child, any member of the child's varieties received by the agency or reports being investigated at time
	son(s) rec		ibe the type nose services		(s) of last co	ntact between agency and recipient(s) of those services, and the
				rvices as adults ude the current in		or ch. 938 by child's parents or alleged maltreater in the

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.)

The family received ongoing case management services under a Child in Need of Protection or Services Consent Decree

from April 2011 until May 2012. Voluntary services continued until August 2012.

(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.) On 10/30/07, the agency screened out a services report. Information was referred to the Sheriff's Department for review. On 8/13/10, the agency screened in a CPS report. The agency was unable to locate the family and maltreatment was unsubstantiated.

On 4/5/11, the agency screened in a CPS report. Physical abuse by an unknown maltreater was substantiated. The children were removed from the home and the family received ongoing case management services until August 2012.

On 2/16/12, the agency screened out a CPS report.

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. Physical abuse to the child by an unknown maltreater was substantiated. The child and her 7-year-old brother were determined unsafe and placed in out-of-home care. The agency filed a Child in Need of Protection or Services petition in juvenile court and the family continues to receive ongoing case management services.

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.

Sum	mary of any actions taken by agency in response to the incident:	ck all that apply.)	
$\boxtimes$	Screening of Access report		Attempted or successful reunification
	Protective plan implemented		Referral to services
$\boxtimes$	Initial assessment conducted	$\boxtimes$	Transportation assistance
	Safety plan implemented	$\boxtimes$	Collaboration with law enforcement
$\boxtimes$	Temporary physical custody of child	$\boxtimes$	Collaboration with medical professionals
$\boxtimes$	Petitioned for court order / CHIPS (child in need of	$\boxtimes$	Supervised visitation
	protection or services	$\boxtimes$	Case remains open for services
$\boxtimes$	Placement into foster home		Case closed by agency
$\boxtimes$	Placement with relatives		Initiated efforts to address or enhance community
$\boxtimes$	Ongoing Services case management		collaboration on CA/N cases
			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. In accordance with the DCF memo Series 2010-13, dated December 7, 2010 pertaining to the Child Welfare Case Review Protocol, the DSP completed an on-site review in case # PN 121201DSP-Ocon-282. A Child Protective Services (CPS) Report from 2012 was screened out in error, the report indicated a serious injury to a child, and no Serious Incident Notification was sent by the agency within two business days as required by statute. The Initial Assessment and safety determinations completed were not in accordance with the Wisconsin Child Protective Services Safety Intervention Standards.

The Quality Improvement plan implemented by the agency included training for all workers completing the access function for the agency, all afterhours workers are required to complete the necessary training pertaining to Access and Initial Assessment before placement on the work schedule, the CPS Supervisor discusses proper documentation for Initial Assessments for employees performing this function, and CPS Supervisors will participate in the Supervisor as Safety Decision Maker training provided by the state.

Recommendati None	ions for further chan	ges in policies, practices, rules or statutes needed to address identified issues:
⊠ Yes □ No	☐ Not Applicable	This 6-month summary report completes the Division of Safety and Permanence (DSP) re

view of this

case.

The agency must submit an electronic copy of the completed 90-Day Summary Report to <a href="mailto:RobertB.Williams@wisconsin.gov">RobertB.Williams@wisconsin.gov</a>