



REPORT ON THE NEAR FATALITY OF:

[REDACTED]

Date of Birth: 02/04/2004
Date of Incident: 09/25/2015
Date of Report to ChildLine: 09/25/2015
CWIS Referral ID: [REDACTED]

FAMILY KNOWN TO COUNTY CHILDREN AND YOUTH AGENCY AT TIME OF INCIDENT:

Philadelphia Department of Human Services

REPORT FINALIZED ON:
3/15/2016

Unredacted reports are confidential under the provisions of the Child Protective Services Law and cannot be released to the public.

(23 Pa. C.S. Section 6340)

Unauthorized release is prohibited under penalty of law.

(23 Pa. C.S. Section 6349 (b))

Reason for Review:

Pursuant to the Child Protective Services Law, the Department, through OCYF, must conduct a review and provide a written report of all cases of suspected child abuse that result in a fatality or near fatality. This written report must be completed as soon as possible but no later than six months after the date the report was registered with ChildLine for investigation.

The Child Protective Services Law also requires that county children and youth agencies convene a review when a report of child abuse involving a fatality or near fatality is substantiated or when a status determination has not been made regarding the report within 30 days of the report to ChildLine.

Philadelphia County has not convened a review team in accordance with the Child Protective Services Law related to this report. The county review team was not convened due to the fact that the Child Protective Services (CPS) investigation was determined to not be abuse; therefore the report was Unfounded within 30 days of the receipt of the investigation.

Family Constellation:

<u>First and Last Name:</u>	<u>Relationship:</u>	<u>Date of Birth</u>
[REDACTED]	victim child	02/04/2004
[REDACTED]	Sibling	[REDACTED]/1998
[REDACTED]	sibling	[REDACTED]/2002
[REDACTED]	Sibling	[REDACTED]/2006
[REDACTED]	mother	[REDACTED]/1975

Summary of OCYF Child Near Fatality Review Activities:

The Southeastern Region Office of Children, Youth and Families (SERO) obtained and reviewed all current case records pertaining to the [REDACTED] family, including the initial referral, all medical records, and safety assessment and supporting documentation.

Children and Youth Involvement prior to Incident:

Prior involvement with the child:

- March 18, 2014 - GPS report alleging Lack of Shelter/Unsafe Shelter and Physical Harm/Inappropriate Discipline (report was determined Invalid)
- July 15, 2004 – CPS report alleging physical abuse to a sibling; CPS report was indicated [REDACTED]; Case was opened from July 19, 2004 to January 11, 2008. Child received SCOH services through Pathways PA, Inc. from October 8, 2004 to January 11, 2008, and then [REDACTED] from April 21, 2009 to June 19, 2009.
- Family previously known:
- March 1, 2001 – GPS report alleging Child Endangerment, Lack of Education and Lack of Food; report was determined invalid

- September 1, 1995 – GPS report alleging Physical Harm/Inappropriate Discipline; report was determined invalid
- Additional [REDACTED]

Circumstances of Child Near Fatality and Related Case Activity:

Philadelphia Department of Human Services (DHS) received a Child Protective Services (CPS) report from [REDACTED] at 1:22 PM stating that the victim child was admitted for undiagnosed [REDACTED], being lethargic, and severely dehydrated. The child also [REDACTED]

[REDACTED] The reporting source stated this is suspicious of sexual abuse because of where the wound is located. The reporting source also stated it is possible that the child [REDACTED]

[REDACTED]. It looks like the [REDACTED] and is very infected, "festering". The mother said she was not aware of the wound or that child was sexually abused. The reporting source stated that he has not been able to talk to the child about what happened due to the child's medical state. The child was dehydrated when she came in. She was in serious condition but is now stable.

Upon receipt of the CPS report, a DHS social worker visited St. Christopher's Hospital at approximately 7:00 PM, to assess the safety and well-being of the child. The social worker met with [REDACTED] who informed the worker that there was no immediate plan to discharge the child. The county social worker also met with the [REDACTED] who reported that the child recently returned [REDACTED] said that the child [REDACTED] and would not be able to fully participate in a conversation with the worker. [REDACTED] reported that upon the child's admission, the mother reported that the child fainted in the shower and that is when the mother noticed the "rash" on the child's genital area. The mother further reported that the child has been tired and "out of it" in the days leading to her hospital admission. The RN reported that the mother was present at the hospital during the day. [REDACTED] reported that the mother stated she was unaware that the child had diabetes until she was admitted into the hospital, and mother denies any knowledge of child being sexually abused. [REDACTED] reports that the child [REDACTED]. The child is also reported [REDACTED] that need to be addressed, as well as [REDACTED]. [REDACTED] reported that one of the child's [REDACTED]. The county social worker informed medical staff that the child is under DHS hold, and is not to be released to anyone without clearing it with DHS first.

At approximately 8:00 PM, on September 25, 2015, the county social worker met with the mother and the victim child's other two siblings to assess safety. Once again, the mother restated that she was not aware that her child had [REDACTED], nor was she aware of any sexual abuse to the child. The mother stated that when the child fell-out from fainting, that is when she became aware of child's [REDACTED], and was horrified. The mother reports that hospital physicians told her

that [REDACTED]. After the victim child was admitted to St. Christopher's hospital, the mother complained about the way in which her child was being cared for by medical staff. The mother reports that the child was instructed to urinate and defecate in a diaper, despite the raw condition of her genital area. The mother also stated that she complained after she observed the nurse harshly wiping an abscess on the child's buttocks. The mother stated that the child did not verbalize her pain [REDACTED], but there were tears streaming from her eyes. The mother inquired about having her child transferred to CHOP [REDACTED]. The mother stated that on September 19, 2015, the child was taken to the Frankford hospital's emergency room (ER) for what she believed the child had the flu. [REDACTED] The mother also reports that the child had a well visit in May or June of 2015. At the time, the child weighed 175lbs. Since then, the child has lost 35lbs [REDACTED]. The mother noticed a growth on the back of the child's neck over the past few months and [REDACTED]. The mother said she learned that her child [REDACTED] when she was approximately 7 years old, but was never told that [REDACTED] during any of her visits with the PCP. The remaining children in the home were determined safe.

September 28, 2015 @ 4:00 PM, the county social worker met with the victim child. The child said she remembers being hospitalized because she passed out. The child stated that she does not remember how she felt prior to passing out. The child recalls being sent home from school on a Tuesday, for vomiting and did not attend school on Friday due to illness. The child confirmed that her mother took her to Frankford hospital's ER in which they [REDACTED]. The child said she attempted to take the medication but spilled it on the floor. The child said her mother found her sitting on the toilet with her head on the sink, complaining of trouble with her breathing, and the mother called 911. The child cannot remember if her private area was itchy or bothering her prior to being hospitalized. The child said she recalls a little cut in the crack of her buttocks, but denies that the wound or tear was large in size. The child reports that no one touched her private area (with the exception of a male physician at the hospital), who stuck his finger all the way in her butt. The child stated that she would immediately tell her mother if anyone had touched her inappropriately, [REDACTED] before entering the hospital. The child is now learning [REDACTED]. The child reports that [REDACTED] on duty reports that the child is progressing nicely. [REDACTED]

September 29, 2015, the county social worker made outreach to the victim child's medical team to receive an update regarding the child's prognosis, [REDACTED]

September 30, 2015, the county social worker received confirmation from St. Christopher's medical team, that the child is medically cleared for discharge. The hospital staff confirmed that the child was seen at Frankford ER for [REDACTED]

County Weaknesses:

- There was no outreach to the child's biological father mentioned. Perhaps gaining information regarding the bio-father's health history can be helpful to the child.

Department of Human Services Recommendations:

The agency performed the investigation in a timely manner, and ensured that the victim child and her siblings were safe. The child has received a proper medical diagnosis and is now being closely monitored by a physician and her mother, [REDACTED]. The only recommendation at this time is further outreach and engagement to the child's biological father needs to be explored.