



REPORT ON THE NEAR FATALITY OF:

[REDACTED]

Date of Birth: 9/26/14
Date of Incident: 08/27/16
Date of Report to ChildLine: 08/27/16
CWIS Referral ID: [REDACTED]

**FAMILY KNOWN TO COUNTY CHILDREN AND YOUTH AGENCY AT TIME OF
INCIDENT OR WITHIN THE PRECEDING 16 MONTHS:**

Bradford County Children and Youth Services

**REPORT FINALIZED ON:
03/07/2017**

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.

Bradford County has convened a review team in accordance with the Child Protective Services Law related to this report. The county review team was convened on 09/20/16.

Family Constellation:

<u>First and Last Name:</u>	<u>Relationship:</u>	<u>Date of Birth</u>
[REDACTED]	Child Victim	09/26/14
	Half Sibling	[REDACTED]/10
	Mother	[REDACTED]/89
	Father	[REDACTED]/73

Summary of OCYF Child Near Fatality Review Activities:

The Northeast Regional Office of Children, Youth and Families (NERO/OCYF) had collateral contact with Bradford County Children and Youth Services on 08/ 27/ 2016 following receipt of the notification of the Near Fatality report concerning [REDACTED]. The circumstances and current safety issues relating to Child/Victim and Sibling of C/V were reviewed with the assigned supervisor at the county agency.

Bradford County Children and Youth coordinated service planning and safety assessment of the C/V and the sibling of the C/V with the investigating law enforcement agency. A safety plan was implemented on 09/26/2016 that included restricting AP access to C/V and sibling of C/V. The biological mother of C/V and sibling of C/V was identified as the primary caretaker for the children.

NERO/OCYF requested and secured preliminary case documentation from Bradford County Children and Youth Services on the family on 08/29/2016.

On 09/16/2016 NERO/OCYF program representative conducted site visit to Bradford County Children and Youth Services. Case file review was completed on this date. Interviews of various social service personnel at the county agency were completed as well. Current status of the CPS investigation was reviewed with the assigned CPS

caseworker and supervisor. Additionally, background data was secured regarding current status of the criminal investigation.

NERO/OCYF supervisor and assigned program representative participated in the Act 33 Review at Bradford County Children and Youth on 09/20/2016.

Bradford County Children and Youth Services completed the Child Protective Services investigation on 10/21/2016. The case was Indicated naming the biological father as the Perpetrator for causing serious physical neglect of a child Repeated, Prolonged or Egregious.

The completed CPS case file was reviewed by NERO/OCYF program representative on 10/22/2016 during a site review at the county agency.

Children and Youth Involvement prior to Incident:

The county agency has had prior involvement with the [REDACTED] family. There was activity at the GPS intake level on 6/11/2011 following allegations of alcohol use by the biological mother of the children. The family was engaged in Family Group Decision Making (FGDM) provided short term services and closed successfully in 2011.

The family was once again referred for GPS assessment on 04/04/2014. During the course of the intake assessment it was determined that there were allegations involving the possible sexual abuse of the sibling of the C/V by the maternal grandfather which occurred in New York State. The case was referred to Chemung County at that time. No other services were deemed to be needed at that juncture.

Bradford County Children and Youth Services' most recent case involvement with the [REDACTED] family occurred on 08/17/2015 following a home study request made by Chemung County New York Department of Human Services. Chemung County requested follow up with the family due to an open sexual abuse investigation of the sibling of the Child/Victim in New York State. Bradford County Children and Youth completed a home assessment and determined that the family was not in need of any ongoing protective services. The family was linked to community social services.

Bradford County Children and Youth case history also reflects that the biological mother was active with the child welfare agency during her adolescence.

Circumstances of Child Near Fatality and Related Case Activity:

On 08/27/2016 Bradford County Children and Youth were contacted by the [REDACTED] Police following an incident that occurred in a remote rural section of Bradford County involving a toddler and a six year old male child. The law enforcement agency responded to an emergency call placed by a resident of the area who was approached by a six year old child wandering after being left in a car alone. When police responded to the scene it was determined that the biological

father of the six year old was wandering in a wooded area with a younger sibling of the six year old. The toddler was observed to be draped over his father's shoulders naked and unconscious. The C/V was also observed to have multiple bruises on his body. The AP was also observed to be naked and in a non-communicative state. The C/V was initially treated at a local medical facility and subsequently life flighted to a medical facility in Montour County where he was diagnosed with a skull fracture and a swollen right eye. The C/V was admitted to the pediatric intensive care unit of the medical facility.

Immediately following the discovery of the C/V the [REDACTED] Police detained the AP and attempted to question him as to the circumstances surrounding the incident. The AP did not respond to any of the law enforcement inquiries. He was subsequently charged with endangering the welfare of a minor and remanded to the Bradford County Prison.

Bradford County Children and Youth Services conducted a safety assessment of the biological home of the C/V and the sibling of the C/V and determined that the biological mother of the children was able to provide for the needs of both children. The biological mother of the children cooperated fully with both the county child welfare agency and the investigating law enforcement agency from the onset.

During the intake assessment phase of Bradford County Children and Youth's involvement the agency assessed the family dynamics of the [REDACTED] family and determined that the parents have a history of securing the basic medical and physical needs of both their children. Agency review of family's pediatric medical records reflects consistent attendance and follow up with medical recommendations as well.

The Child/Victim has recovered from his injuries and is residing with his biological mother and sibling. There appear to be no longstanding adverse effects from the incident. The C/V is also receiving community based social services related to early intervention. The family continues to receive ongoing services from Bradford County Children and Youth and has cooperated fully with all the agency recommendations. In addition to the provision of ongoing child protective services the family is also receiving [REDACTED] issues related to the incident involving the C/V.

The primary issue that remains unresolved involves the circumstances and etiology of the Perpetrator's actions on the day of the incident. The biological mother of the children does not report any significant changes in personality or mental status of the Perpetrator. However, there was information secured by law enforcement and children and youth staff that suggested the Perpetrator intermittently dabbled in personal rites and activities that had cult like religious overlays. There is some speculation that the incident which involved the injuries to the C/V may have some religious components to it. However, the Perpetrator has not discussed any of the issues surrounding the incident and effectively remains non-communicative.

Presently, the Perpetrator remains at the Bradford County Prison. He has been charged with Aggravated Assault, 2 counts of Endangering the Welfare of Children, Simple Assault, and 2 counts of Recklessly Endangering Another person. The Perpetrator was arraigned on 11/03/2016.

Summary of County Strengths, Deficiencies and Recommendations for Change as Identified by the County's Child Near Fatality Report:

- Strengths in compliance with statutes, regulations and services to children and families;

DHS/NERO/OCYF review of all pertinent case file material and submissions reflect compliance with all statutory and regulatory provisions of the Child Protective Services Law.

DHS/NERO/OCYF also concurs with the deficiency outlined in the county agency Act 33 Report of 09/20/2016 noting that the referral from Chemung County in 2015 failed to address the extent of the agency's request. This was especially important as it related to concerns raised about the discipline standards of the biological father. A recommendation is therefore being made that the county agency evaluate all aspects of referrals being made. In those circumstances where caretakers are not readily available for assessment or are evasive the county agency shall endeavor to explore all avenues in assessing before closing a referral.

- Deficiencies in compliance with statutes, regulations and services to children and families;

During the course of the case presentation at the Act 33 Near Fatality Review information was presented that suggested the biological father of the C/V may have inappropriate disciplinary behaviors. These allegations were part of the Chemung County 2015 referral to Bradford County Children and Youth. Upon review of agency case file documentation this area was sufficiently addressed by the county agency at that time due to the biological father's lack of availability.

- Recommendations for changes at the state and local levels on reducing the likelihood of future child fatalities and near fatalities directly related to abuse;

There was discussion at the Near Fatality Review that the Perpetrator's presenting symptomology at the time of the incident may suggest some underlying [REDACTED] that have been hitherto unaddressed. A medical provider present for the review discussed the possibility of assessing individuals for possible undiagnosed complications regarding [REDACTED].

- Recommendations for changes at the state and local levels on monitoring and inspection of county agencies; and

None

- Recommendations for changes at the state and local levels on collaboration of community agencies and service providers to prevent child abuse.

DHS/NERO/OCYF recommends that the current collaborative involvement between law enforcement and the county child welfare agency be maintained.

Department Review of County Internal Report:

The Department of Human Services, Northeast Regional Office of Children, Youth and Families (DHS/NERO/OCYF) received a copy of the county near fatality report on 11/08/2016.

The county internal report accurately reflects the case material presented at the Act 33 Review on 09/20/2016. The report also accurately outlines the issues outstanding on this case.

Department of Human Services Findings:

- County Strengths:

Bradford County Children and Youth initiates and completes the Child Protective Services investigative process in a timely and thorough manner. Case documentation is timely and comprehensive.

Review of case file documentation and observations of the various agency interactions at the Act 33 Review suggests collegial relationships and cross sharing of data regarding the various aspects of the CPS investigative and provision of services process.

- County Weaknesses:

DHS/NERO/OCYF has determined that the county agency fully complied with the regulations and due process assurances relating to the investigation under the CPSL. However, as noted above the agency did not fully explore the totality of the referral request from Chemung County in 2015.

- Statutory and Regulatory Areas of Non-Compliance by the County Agency

None

Department of Human Services Recommendations:

DHS/NERO/OCYF recommends that Bradford County Children and Youth continue to investigate Child Protective Services cases in a timely and thorough manner as is evident in this case.

The collaborative relationship so evident in the attendance patterns and participation of the various law enforcement entities at the Act 33 Review is to be commended and encouraged to be sustained

DHS/NERO/OCYF is cognizant of the fact that Bradford County Children and Youth Services utilizes their legal counsel to varying degrees in reviewing case specifics and case specific agency decisions. These activities are often not formally recorded or captured in case records or process recordings. A recommendation is also being made that Bradford County Children and Youth administrative staff formalize documentary standards to ensure that the agency decisions that involve legal guidance are clearly documented in the case file. Often times the agency is constrained by issues that relate to due process assurances or complex case scenarios. When this information is explained and agency decisions are clearly documented in the case file, historical case process becomes much easier to follow and justify.

