



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

OFFICE OF CHILDREN, YOUTH AND FAMILIES

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REPORT ON THE NEAR FATALITY OF:

██████████

BORN: ██████/2010

Date of Near Fatality: 9/23/2011

FAMILY KNOWN TO: No Prior Agency Involvement

REPORT FINALIZED ON:

This report is confidential under the provisions of the Child Protective Services Law and cannot be released.

(23 Pa. C.S. Section 6340)

Unauthorized release is prohibited under penalty of law.

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

Reason for Review:

Senate Bill 1147, Printer's Number 2159 was signed into law on July 3, 2008. The bill became effective on December 30, 2008 and is known as Act 33 of 2008. As part of Act 33 of 2008, DPW must conduct a review and provide a written report of all cases of suspected child abuse that result in a child 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.

Act 33 of 2008 also requires that county children and youth agencies convene a review when a report of child abuse involving a child fatality or near fatality is indicated or when a status determination has not been made regarding the report within 30 days of the oral report to ChildLine. Act 33 review did not occur; the county completed the [REDACTED]

Family Constellation:

<u>Name:</u>	<u>Relationship:</u>	<u>Date of Birth:</u>
[REDACTED]	Child	[REDACTED]/2010
[REDACTED]	Mother	[REDACTED]/1988
[REDACTED]	Maternal Uncle	[REDACTED]/1985
[REDACTED]	Maternal Grandmother	[REDACTED]/1966
[REDACTED]*	Maternal Grandfather	Adult
[REDACTED]	Brother	Adult
[REDACTED]	Friend	Adult
[REDACTED]	Friend	Adult

*Not household members

Notification of Child Near Fatality:

On 9/23/11 Bucks County received a call from [REDACTED] concerning an 11 month old Caucasian female, [REDACTED]. The reporting source stated that [REDACTED] was taken to St. Luke's Hospital in Quakertown by [REDACTED]. It was reported that she had swelling on the right side of her head, and had right parietal skull fracture and area of cranial bleeding that is subdermal, and could be epidermal bleeding. Mother stated that child was well all day long, mother left the home around 6pm to visit her mom at the hospital. [REDACTED], the mother's brother, said he would watch [REDACTED]. A friend of [REDACTED]'s ([REDACTED]) was also present in the home when the accident occurred.

[REDACTED], a friend of the mother's, came over and found [REDACTED] crying in the crib around 7pm. [REDACTED] picked [REDACTED] up to try and calm her down, [REDACTED] also gave child a bath, and then noticed shininess on side of [REDACTED]'s head. [REDACTED] stated "The swelling grew right in front of my eyes" When [REDACTED] came over; [REDACTED] was in another room of the home. It was unknown who or what caused the injury. Mother reported to the physician at St. Luke's Hospital that the child fell back into the crib while trying to walk on 9/17/11,

unsure of what caused the injury. Reporting Source stated that mother is suspicious of the abuse.

Summary of DPW Child Near Fatality Review Activities:

The Southeast Region Office of Children, Youth and Families obtained and reviewed all current and past case records pertaining to [REDACTED]. Follow up telephone contacts were conducted with the Caseworker, [REDACTED], Supervisor, [REDACTED], on 9/23/11 to obtain initial information on the [REDACTED]/near fatality report. Follow up telephone contact was made with [REDACTED] on 9/26/11 to request an update on the investigation and status of [REDACTED] and to caseworker, [REDACTED] on 9/27/11. Request for all documents related to the [REDACTED] of the near fatality. Documents received and reviewed included: Safety Assessments, Risk Assessments, Interviews conducted by the Quakertown Borough Police Department and Bucks County, Staff interviews, Medical Records Obtained from St. Christopher's Hospital, Safety Plans, Form 104, Initial Letters [REDACTED], [REDACTED]. Act 33 review did not occur; the county completed the [REDACTED] before the 31st day.

Summary of Services to Family:

The family has not received services from children and youth; however, the county case file indicates that the family has history with the Quakertown Borough Police Department. Bucks County maintained ongoing contact with Officer [REDACTED] at the police department. They were informed that [REDACTED] would be transferred to St. Christopher's Hospital in Philadelphia. The case was then assigned to [REDACTED] of Quakertown Police. Officer [REDACTED] met the case worker, [REDACTED], and supervisor, [REDACTED] at St. Christopher's Hospital

Police reports (JNet) were obtained for everyone in the home on 9/23/11; [REDACTED], [REDACTED]. Interviews were also conducted with the individuals listed above on 9/23/11 at the Quakertown Police Department. No arrest was made as the police determined the injury to be accidental.

Children and Youth Involvement prior to Incident:

The family was not known to the county children and youth prior to this recent [REDACTED]/Near Fatality report

Circumstances of Child Near Fatality and Related Case Activity:

[REDACTED] was taken to the hospital for swelling on the right side of her head, right parietal skull fracture and areas of cranial bleeding that were sub dermal and could be epidural bleeding. Mother stated that [REDACTED] was well all day long. The mother left the home

around 6pm to visit her mom at the hospital. The uncle, [REDACTED], said he would watch [REDACTED] friend ([REDACTED]) was also present in the home. [REDACTED] came and found [REDACTED] crying in her crib her around 7pm, [REDACTED] picked up [REDACTED] to try and calm her down, [REDACTED] also gave [REDACTED] a bath, noticed shininess on side of [REDACTED]'s head, [REDACTED] stated "The swelling grew right in front of my eyes" It is unknown who or what caused the injury. Mother reported that [REDACTED] fell back into the crib while trying to walk on 9/17/11. Mother was suspected of abuse. Physicians have since indicated that the swelling could have occurred days later.

[REDACTED] was transferred to St Christopher's Hospital, reported to be in critical condition, had fever and respiratory infection unrelated to injury. According to the mother, [REDACTED] was kicked out of the house due to ongoing conflicts with the grandfather, but remained there. Incident was reported to [REDACTED] at Bucks County Children and Youth.

[REDACTED] and her daughter, [REDACTED], reside at [REDACTED], PA 18951; the apartment is in her mother's name and has three bedrooms and an attic. In the home are her mother, [REDACTED], uncle, [REDACTED], brother, [REDACTED], and friend, [REDACTED]. There are several other individuals that also live in the home, [REDACTED]; all three are homeless. They live in the attic and the shed. [REDACTED] share a bedroom, and [REDACTED] sleeps in the crib; her brother [REDACTED] has a bedroom and so does her mother. [REDACTED] works the 11pm – 7am shift at the [REDACTED] as a CNA worker. [REDACTED] usually watch [REDACTED] at night when [REDACTED] is at work.

[REDACTED] has infrequent contacts with her biological father and he visits infrequently. [REDACTED]'s history with the biological father, [REDACTED], was domestically violent, and she currently does not want anything to do with him. [REDACTED] also stated that she does not want to receive any [REDACTED] on other matters at this time.

The incident was reported with [REDACTED], there were several other household members that resided in the home where the incident took place. Other household members were [REDACTED].

[REDACTED] had agreed to be responsible, and babysat [REDACTED] until the biological mother returned home from visiting her mother at the Penn Foundation Rehab Hospital; she left around 6:30pm. When the biological mother left the home, [REDACTED] was on the living room floor playing with [REDACTED]

Around 8:30pm, [REDACTED] texted the biological mother to ask if it was OK to bath and feed [REDACTED], and get her ready for bed. The biological mother agreed that would be a good idea. The biological mother had been spending time with her godmother after visiting her own mother at the hospital.

Before the biological mother could return home, she received a text message at 8:30pm from [REDACTED] informing her that [REDACTED] had a huge lump on her head and she was taking her to the St. Luke's Hospital in Quakertown, Pennsylvania. There she was diagnosed with a parietal skull fracture and epidural hemorrhage. [REDACTED] was transported to St. Christopher's Hospital around 3:30am on 9/23/11. The biological mother and [REDACTED] were both at the hospital. The biological mother could not explain how [REDACTED] received the injury, [REDACTED] reported that when she was preparing [REDACTED] for a bath, she noticed and saw the lump on [REDACTED]'s head and that it grew right before her eyes.

The attending physician at St. Christopher's Hospital was [REDACTED]. The worker spoke with the doctor to receive an updated report, she was informed [REDACTED] was transferred to the Intensive Care Unit. The worker explained to the doctor that [REDACTED]'s mother and all other family members would need to be supervised during all visits.

Nurse [REDACTED] met with the caseworker and supervisor; she informed them that [REDACTED] arrived at St. Christopher's Hospital at approximately 5:30am. [REDACTED]'s case was referred to the protective unit and examined by [REDACTED]. Nurse [REDACTED] stated that [REDACTED] would be okay, and would be medically discharged in the next 2 days. Test results were reported as negative (CT and full skeletal). [REDACTED] was also examined by the neurosurgeon and reported that everything appeared okay, as well as the blood work. Surgery was not required. Final report from [REDACTED] at St Christopher's Hospital stated [REDACTED] has soft tissue swelling, a linear skull fracture, with a small area of bleeding underneath the fracture. She stated the fracture could have happened from an accidental fall and would not have required a tremendous amount of force. [REDACTED] should be seen for follow up appointment in two weeks to ensure that the fracture is healing. [REDACTED] was discharged from St. Christopher's Hospital on 9/24/11.

Arrangements were made to implement the plan of safety until the [REDACTED] was completed. [REDACTED], the godmother to the biological mother, would transport [REDACTED] along with her mother to [REDACTED]'s home.

[REDACTED] is the maternal grandfather of the biological mother and lives in [REDACTED] Sullivan County, PA. The biological mother and [REDACTED] would be staying with him until [REDACTED] was completed.

The [REDACTED] was conducted by Bucks County. The [REDACTED]; the child's injury was a result of an accident.

Current Case Status:

The family ([REDACTED]) currently receives services from Tabor Family Preservation Program. [REDACTED], biological mother is on the waiting list for the Bridge Housing Program. She will receive assistance via the Family Preservation Program. Goals for Family Preservation to focus on include: following up with medical appointments for [REDACTED], obtaining housing, medical assistance, and [REDACTED] for the mother. Bucks

County will monitor and provide services via the [REDACTED] Unit. Services provided were housing assistance, monitoring of medical follow up, and [REDACTED]

Bucks County [REDACTED] closed this case as of 2/1/2012 Family Preservation Services have been completed as of 2/1/2012. [REDACTED] a returned to [REDACTED], PA., she lives there with her mother, brother and uncle. [REDACTED] employed as a certified nursing assistant

[REDACTED] decided not to move away from her current residence, she has rescinded her application with Bridge Housing Program.

No criminal arrests were made during the police investigation.

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

Act 33 of 2008 also requires that county children and youth agencies convene a review when a report of child abuse involving a child fatality or near fatality is indicated or when a status determination has not been made regarding the report within 30 days of the oral report to ChildLine. Act 33 review did not occur; the county completed the [REDACTED]

Department Review of County Internal Report:

The county [REDACTED] before the 31st day so the case did not require a county review.

Department of Public Welfare Findings:

County Strengths:

Bucks County caseworker and supervisor worked effectively and efficiently, coordinated and followed up with essential staff at the St Luke's Hospital, St Christopher's Hospital for Children and with the Quakertown Borough Police Department.

Bucks County [REDACTED] Unit coordinated appropriate services for the family to receive Family Preservation Services. They maintained communication with the family to ensure that medical appointments for [REDACTED] were followed up with.

Bucks County worked very quickly on this case along with the constant collaboration with the Quakertown Police Dept to obtain facts and information that led to the final outcome of this [REDACTED]. There were many individuals involved; all were interviewed by the Bucks County case worker, supervisor and police officer.

All required documents were completed and done within specific time lines. Each document was forward to the OCYF/SER soon after the [REDACTED] was completed. Buck County followed up with request made by OCYF/SER.

Compliance with the [REDACTED] including Safety Assessment and Plan, photograph taken of [REDACTED], timely completion of [REDACTED], collaboration with Quakertown Borough Police

County Weaknesses:

None.

Statutory and Regulatory Areas of Non-Compliance:

None.

Department of Public Welfare Recommendations:

No Recommendations at this time.