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**REPORT ON THE NEAR FATALITY OF**



**BORN: 6/5/07**  
**DATE OF NEAR FATALITY: 4/24/10**

**FAMILY KNOWN TO:**  
Northampton County Department of Human Services, Children, Youth and Families Division

**8/27/10**

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 No. 1147, now known as Act 33 was signed on July 3, 2008 and went into effect 180 days from that date, December 30, 2008. This Act amends the Child Protective Services Law (CPSL) and sets standards for reviewing and reporting child fatality and near child fatality as a result of suspected child abuse. DPW must conduct child fatality and near fatality reviews and provide a written report on any child fatality or near fatality where child abuse is suspected.

**Family Constellation:**

<u>Name</u>	<u>Relationship</u>	<u>Date of Birth</u>
[REDACTED]	Child	6/5/07
[REDACTED]	Mother	[REDACTED]
[REDACTED]	Sibling	[REDACTED]
[REDACTED]	Sibling	[REDACTED]
[REDACTED]	Sibling	[REDACTED]
[REDACTED]	Mother's paramour	[REDACTED]
[REDACTED]	Household member	[REDACTED]

**Notification of Fatality / Near Fatality:**

On 4/8/10 [REDACTED]  
[REDACTED]  
that [REDACTED] and her 4 siblings [REDACTED]  
[REDACTED]  
[REDACTED] having dizzy spells, trouble walking and constantly falls. [REDACTED]  
[REDACTED] she fell and hit her shoulder on a ledge in the house causing  
swelling. [REDACTED]  
[REDACTED]  
[REDACTED] has patches of hair that are  
falling out, [REDACTED]. She has eaten her feces  
and smeared it on her face [REDACTED] is trying to get additional  
[REDACTED] bruises easily [REDACTED] food  
in her room and eats so fast at meal time that she chokes and vomits after eating her  
meals. [REDACTED]  
[REDACTED]  
[REDACTED] and her  
siblings were only allowed to drink pink Nesquick milk while living with their mother and  
her paramour. [REDACTED] The children were  
fed one meal a night and they had to fight for the food. The older children got more than

the younger children. [REDACTED] has gained 4.5 pounds [REDACTED] is non-verbal, has poor social skills and no eye-contact.

On 4/24/10 Northampton County Department of Human Services, Children, Youth and Families Division contacted ChildLine and stated that [REDACTED] was certified to be in serious/critical condition [REDACTED]

[REDACTED] The child is expected to live. [REDACTED]

**Documents Reviewed and Individuals Interviewed:**

The NERO investigation consisted of a review of the [REDACTED] file, interviews with Northampton County Department of Human Services, Children and Youth Division staff and participation in several internal agency meetings regarding [REDACTED]

**Children and Youth involvement prior to Incident:**

On April 6, 2010 the child was taken to [REDACTED] hospital [REDACTED] due to falling. [REDACTED] fell because she was unbalanced. [REDACTED]

[REDACTED] the child hoards food and stuffs her mouth until choking. [REDACTED] the child smearing feces on her face and eating it. [REDACTED]

[REDACTED] that the child is non verbal and has developmental delays. [REDACTED] the child receives scheduled well balance meals and vitamins. [REDACTED]

[REDACTED] wear her right arm in a sling and become educated on vitamin supplements. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

On April 13, 2010 child [REDACTED] Hospital [REDACTED] due to the caseworker noticing a foul odor and noticed bleeding coming from the child's left ear. [REDACTED] The child was [REDACTED]

examined [REDACTED]

On April 14, 2010 the caseworker interviewed [REDACTED]

[REDACTED] the [REDACTED] was used to purchase food for the family. [REDACTED] the children ate 3 meals a day. [REDACTED]

[REDACTED] the child's male sibling drinks lactate milk. The child and her older female sibling drink juicy juice instead of milk. [REDACTED] the children ate whenever they wanted to and had access to the refrigerator to get food if they wanted to. [REDACTED] the children were active. [REDACTED] children to the park for recreation. He [REDACTED] played games with the children while indoors.

On April 14, 2010 the caseworker interviewed [REDACTED] she is a Wiccan and doesn't believe in modern medicine [REDACTED]

[REDACTED] children ate three meals a day and snacks in between [REDACTED] the child did not drink milk because she is lactose intolerant so she drank juicy juice instead. [REDACTED] the other children drank watered down milk [REDACTED]

[REDACTED] the children watched movies and played games indoors. [REDACTED]

[REDACTED] the family would catch the bus to Wal-Mart. [REDACTED]

[REDACTED] the child saw her primary care physician in December of 2009 and she insisted that the child wasn't eating or gaining weight appropriately and the physician stated that the child was fine. [REDACTED] the child has ear problems. [REDACTED] the child was born deaf. [REDACTED]

On April 24, 2010, the child was [REDACTED] Hospital [REDACTED]. The child was covered in bruises on her face and her scalp. The child appeared lethargic and there was a red mark on her eye. Her lips were cut and bleeding. Her leg was wrapped. [REDACTED]

[REDACTED] her organs were shutting down and weren't working due to lack of food. The child also had excessive vomiting due to the child not being able to process food. [REDACTED]

[REDACTED] The attending physician [REDACTED] hospital indicated that [REDACTED] was in serious condition. The child was transferred to [REDACTED] Hospital.

On April 26, 2010 the caseworker visited the child at [REDACTED]

[REDACTED] the child is withdrawn and wouldn't interact with anyone. The child didn't want to be touched and was refusing to eat. [REDACTED]

On April 27, 2010, a multidisciplinary team meeting occurred. Present were representatives from adult probation, Valley Youth House, St. Luke's Hospital, Visiting Nurses, District Attorney Office, Turning Point, Concern foster vendors and agency staff. Discussion occurred regarding the investigative interviews and findings and the

[REDACTED] from the April 1st [REDACTED]

[REDACTED] parenting education, and supervised visitation.

On April 28, 2010 the caseworker visited the child at [REDACTED] [REDACTED] The [REDACTED] keep a food diary to document what the child eats.

[REDACTED] ear. The child continued to be withdrawn but became more sociable while playing [REDACTED]

[REDACTED]

On April 30, 2010 the caseworker visited the child and took her older female sibling along. [REDACTED]

[REDACTED]

**Current Case Status:**

[REDACTED]

[REDACTED]

[REDACTED]

On May 3, 2010 the child went to an appointment [REDACTED]

On May 11, 2010 the agency held a staffing on the case.

[REDACTED]

On May 18, 2010 the [REDACTED] the child has been very thirsty, urinating frequently, and vomiting water since [REDACTED] May 2, 2010. The child's caseworker witnessed the child projectile vomit [REDACTED]. She was lethargic and reported had a 104 fever that morning. She has also been self-injurious: digging in the back of her mouth with her fingers causing open sores near her throat, picking at her lips, picking at her left heel, pinching her cheeks, and smacking herself in the head. The child arrived [REDACTED] with socks on her hands. [REDACTED] have had to stay up at night with the child due to these behaviors, not able to leave her alone. [REDACTED]

[REDACTED]

[REDACTED]

On May 19, 2010 the caseworker and the [REDACTED] to visit the child. [REDACTED] the child doesn't sleep in a normal bed because she [REDACTED] the child would fall and hurt herself. [REDACTED] child wakes up all night screaming and crying. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

On May 24, 2010 the caseworker visited the child at [REDACTED]. The child interacted with the caseworker. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

**Previous Children and Youth Involvement:**

Northampton County Department of Human Services Division of Children, Youth and Families became aware of the family in June 2007. [REDACTED]

[REDACTED]

The case was referred to Northampton County CYC in September 2009 [REDACTED]

[REDACTED]

**Circumstances of the Child's Near Fatality:**

[REDACTED] The child is having dizzy spells, difficulty walking, constantly falls. The child fell hit her shoulder on a ledge, has and has a [REDACTED]. [REDACTED] Child has patches of hair falling out, child has eaten own feces and smeared it on her face [REDACTED] Child bruises easily, hordes food, eats so fast she vomits. [REDACTED]

**Current / Most Recent Status of Case**

[REDACTED]

Criminal action is pending.

**Services to Family:**

The parents [REDACTED] participate in [REDACTED] parenting education [REDACTED]

**Statutory and Regulatory Compliance**

As a result of the DPW review of the circumstances surrounding the child's near fatality incident including the [REDACTED] file and corresponding family file, it was determined that the Northampton County Department of Human Services Children and Youth Division conducted safety assessments and risk assessments accurately. Initially the agency did not implement a safety plan; [REDACTED]

[REDACTED] the mother and her paramour were compliant [REDACTED] The child was determined to be safe each time she was assessed [REDACTED] The caseworker made frequent visits to [REDACTED] assess the safety of the child [REDACTED]

**Findings:**

- The family was known to Northampton County Department of Human Services Children and Youth Division at the time of the child's Near fatality

█ The agency assessed the safety and risk of the children as required. █  
█

█ The caseworker conducted announced and unannounced visits █  
█  
█

**Recommendations:**

█  
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