



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

OFFICE OF CHILDREN, YOUTH AND FAMILIES

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REPORT ON THE NEAR FATALITY OF



BORN: March 23, 2010
NEAR FATALITY: April 9, 2011

FAMILY NOT KNOWN TO:

Beaver County CYS

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, January 4, 2009. 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 review and provide a written report on any child fatality or near fatality where child abuse is suspected.¹

1. Family Constellation:

| <u>Name</u> | <u>Relationship</u> | <u>Date of Birth</u> |
|-------------|---------------------|----------------------|
| [REDACTED] | Victim Child | 03/23/10 |
| [REDACTED] | Mother | [REDACTED]92 |

Notification of Fatality / Near Fatality:

The date of incident is April 9, 2011. The mother reports that she was getting ready for bed and heard the child scream in her crib. Mother went over to pick the child up and noticed two large bumps on the back of child's head. Mother called her friend, [REDACTED] and he accompanied the mother and child to [REDACTED]. The child was transported via ambulance to the hospital. A head CT was performed, which showed the child had [REDACTED]. Treating physician, [REDACTED], suspects non-accidental trauma. The mother's only explanation was that she thinks child hit her head on the crib, which medically does not explain the injuries.

Referral source [REDACTED] had concerns about mother's friend [REDACTED] as he was acting very strange and seemed disconnected. The mother claims they were only friends, but the referral source believed there was more to it than that. The mother was interacting fine with the child until the reporting source told her he was [REDACTED], at which point she broke down but wouldn't tell the reporting source why. Mother kept stating, "You hear things" but wouldn't explain what that meant. Per [REDACTED], the child is considered to be in serious or critical condition as a result of suspected abuse. The child was admitted and did not appear fearful of the mother. The mother has no family support, as the maternal grandfather lives in Maryland and the maternal grandmother is homeless.

Summary of DPW Near Fatality Review Activities:

For this review the Department of Public Welfare, Western Regional Office of Children, Youth and Families reviewed the active family file from Beaver County Children and Youth Services. A Child Fatality/Near Fatality review meeting was not held, in compliance with the bulletin, which notes that if a determination is made within 30 days of the report, a meeting shall not be required.

¹ 23 Pa. C.S. 6343 (c) (1)-(2).

Case Chronology:

On April 9, 2011, the mother reports that she was getting ready for bed and heard the child scream in her crib. Mother went over to pick the child up and noticed two large bumps on the back of child's head. Mother called her friend, [REDACTED] and he accompanied the mother and child to [REDACTED]. A head CT was performed, which showed the child had [REDACTED]. Treating physician, [REDACTED] at [REDACTED], suspects non-accidental trauma. The mother's only explanation was that she thinks child hit her head on the crib, which medically does not explain the injuries.

Referral source [REDACTED] had concerns about mother's friend [REDACTED] as he was acting very strange and seemed disconnected. The mother claims they were only friends, but the referral source believed there was more to it than that. The mother was interacting fine with the child until the reporting source told her he was [REDACTED], at which point she broke down but wouldn't tell the reporting source why. Mother kept stating, "You hear things" but wouldn't explain what that meant. Per [REDACTED] the child is considered to be in serious or critical condition as a result of suspected abuse. The child was admitted and did not appear fearful of the mother. The mother has no family support, as the maternal grandfather lives in Maryland and the maternal grandmother is homeless.

[REDACTED], advised the county worker it appears the "near fatal" report is inaccurate. She stated [REDACTED] of the [REDACTED], was now stating the injuries were consistent with an accident and do not appear to be serious or indicative of alleged abuse. According to the [REDACTED] it appeared the child will be [REDACTED] at some point because all tests indicated she was doing fine. The caseworker spoke with [REDACTED] at this time. According to [REDACTED], it appears the "near fatal" report is inaccurate. She stated, after reviewing all of the child's test results, x-rays, CT scans and other information, that the child's injuries were accidental and not the result of alleged abuse. She said the injuries were "soft tissue" and typical for the child's age, and do not involve bone fractures. She stated she feels "beyond a doubt the injuries are not the result of abuse." She said the injuries were "real minor" and most parents probably would not have sought out any medical care. She felt the mother responded very appropriately. She said the child may have actually bumped her head a couple days ago but until today the bruise did not hurt, so the mother would not have noticed it until now, all of which is typical and appropriate for the age. [REDACTED] stated she believed the injury was minor and is definitely not the result of alleged abuse and is not a "near fatal" report.

Beaver County Children and Youth Services intake worker went to the hospital to see the child on April 10, 2011 and met with the attending doctor. The caseworker was informed that the injuries are very typical for a child of this age and does not feel that the child was abused. The mother was informed based on the findings of the doctor that she would be able to take her child home. The worker spoke to the mother, and the mother stated that she put the child down for bed and about 10-20 minutes later she heard her daughter screaming. She checked on her and that is when she noticed the 2 bumps on the back of her head. The mother stated she was not aware of how this happened. The [REDACTED] informed the intake worker that the report of this incident being a near fatality was incorrect. After review of the tests conducted, the doctor felt that beyond a doubt that the injuries are not a result of abuse. The [REDACTED] reported that the child would be [REDACTED] that day to the mother's care due to the results of the test.

On April 12, 2011, the intake worker met with the mother and daughter in their home. There were no safety issues within the home, the child appeared to be well cared for and the mother reviewed the discharge paper work with the worker. The worker completed all required safety and risk assessments of the home. The worker closed the case on the family the following day.

Previous CY involvement:

There is no previous involvement with this child and/or family.

Circumstances of Child's Fatality or Near Fatality:

On April 9, 2011, the mother reports that she was getting ready for bed and heard the child scream in her crib. Mother went over to pick the child up and noticed two large bumps on the back of child's head. Mother called her friend, [REDACTED] and he accompanied the mother and child to [REDACTED]. A head CT was performed, which showed the child had [REDACTED]. Treating physician, [REDACTED] suspects non-accidental trauma. The mother's only explanation was that she thinks child hit her head on the crib, which medically does not explain the injuries.

Referral source [REDACTED] had concerns about mother's friend [REDACTED] as he was acting very strange and seemed disconnected. The mother claims they were only friends, but the referral source believed there was more to it than that. The mother was interacting fine with the child until the reporting source told her he was [REDACTED] at which point she broke down but wouldn't tell the reporting source why. Mother kept stating, "You hear things" but wouldn't explain what that meant. Per [REDACTED], the child is considered to be in serious or critical condition as a result of suspected abuse. The child was admitted and did not appear fearful of the mother. The mother has no family

support, as the maternal grandfather lives in Maryland and the maternal grandmother is homeless.

██████████, advised the county worker it appears the "near fatal" report is inaccurate. She stated ██████████ of the ██████████ ██████████, was now stating the injuries were consistent with an accident and do not appear to be serious or indicative of alleged abuse. According to the ██████████, it appeared the child will be discharged at some point because all tests indicated she was doing fine. The caseworker spoke with ██████████ at this time. According to ██████████ it appears the "near fatal" report is inaccurate. She stated, after reviewing all of the child's test results, x-rays, CT scans and other information, that the child's injuries were accidental and not the result of alleged abuse. She said the injuries were "soft tissue" and typical for the child's age, and do not involve bone fractures. She stated she feels "beyond a doubt the injuries are not the result of abuse." She said the injuries were "real minor" and most parents probably would not have sought out any medical care. She felt the mother responded very appropriately. She said the child may have actually bumped her head a couple days ago but until today the bruise did not hurt, so the mother would not have noticed it until now, all of which is typical and appropriate for the age. ██████████ stated she believed the injury was minor and is definitely not the result of alleged abuse and is not a "near fatal" report.

Beaver County Children and Youth Services intake worker went to the hospital to see the child on April 10, 2011 and met with the attending doctor. The caseworker was informed that the injuries are very typical for a child of this age and does not feel that the child was abused. The mother was informed based on the findings of the doctor that she would be able to take her child home. The worker spoke to the mother, and the mother stated that she put the child down for bed and about 10-20 minutes later she heard her daughter screaming. She check on her and that is when she noticed the 2 bumps on the back of her head. The mother stated she was not aware of how this happened. The ██████████ ██████████ informed the intake worker that the report of this incident being a near fatality was incorrect. After review of the tests conducted, the doctor felt that beyond a doubt that the injuries are not a result of abuse. The ██████████ reported that the child would be ██████████ that day to the mother's care due to the results of the test.

Current / most recent status of case:

The mother resides in the home with her daughter. The mother has no family supports, as the maternal grandfather lives in an unknown location in Maryland, and the maternal grandmother is homeless.

The father, [REDACTED], has not had any contact with the mother since her pregnancy. The agency has no contact information for [REDACTED]. He has never seen his child.

The caseworker met with the mother and her daughter at the home on April 12, 2011. The caseworker reported that the residence was neat, clean and maintained well above minimum standards. The child appeared clean, dressed appropriately and well cared for. The caseworker observed the [REDACTED] instructions from [REDACTED] which stated that the mother is to call [REDACTED] and provide an update on the child. According to the mother, she would call this morning and advise them her daughter is doing fine and that the swelling had almost dissipated.

At the time of the home visit the caseworker reported that child appeared comfortable and bonded to her mother. The child was responsive to the caseworker while being appropriately cautious with a stranger. The caseworker reported that the child had a well furnished bedroom, adequate clothing and food available. The mother signed the necessary releases of information to allow the caseworker to obtain all routine pediatric records and the records from [REDACTED]

Beaver County submitted their report on the investigation of the Child Protective Services referral on April 13, 2011 as unfounded, based on the report [REDACTED] which determined the child's injuries were accidental and not the result of abuse. [REDACTED] stated the child's test results; x-rays and CT scan indicated the injury is a "soft tissue" injury and not a bone fracture. According to [REDACTED] this is a minor injury and typical for the child's age and is not consistent with abuse. The case was closed.

Beaver County CY5 completed their investigation on April 12, 2011. The worker completed the CY48 determining the case as unfounded on April 13, 2011. At that time, a letter was sent to the mother closing the case.

Services to children and families:

None

County Strengths and Deficiencies as identified by the County's Near Fatality Report:

Strengths - None

Deficiencies - None

County Recommendations for changes at the Local (County or State) Levels as identified by way of County's Near Fatality Report:

None

WERO Findings:

County Strengths - The County conducted its investigation in a timely manner once they were informed of the near fatality. The County used collateral contacts and subject matter experts to assist in the determination of the child abuse investigation. The County also completed all safety and risk assessments, as well as reports in a timely manner.

Deficiencies - NONE

Statutory and Regulatory Compliance issues:

There were no statutory and/or regulatory compliance issues noted during this child near fatality investigation.