



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**REPORT ON THE NEAR FATALITY OF:**



**Date of Birth: 1/21/2006**  
**Date of Incident: 3/9/2012**  
**Date of Oral Report: 3/13/2012**

**FAMILY NOT KNOWN TO:**

Any Public or Private Child Welfare Agency

**REPORT FINALIZED ON: 05/06/2013**

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. Montgomery County convened a review team on April 13, 2012 in accordance with Act 33 of 2008 related to this report. The family was not known to the Office of Children and Youth (OCY) in the past, and there was no open case or agency involvement at the time of this report. The investigation was determined to be Indicated 4/18/12 for medical neglect.

**Family Constellation:**

<u>Name:</u>	<u>Relationship:</u>	<u>Date of Birth:</u>
[REDACTED]	Victim Child	1/21/2006
[REDACTED]	Mother	[REDACTED]/1975
[REDACTED]	Father	[REDACTED]/1964
[REDACTED]	Sibling	[REDACTED]1995

**Non-Household Members:**

[REDACTED] Maternal Grandmother (MGM) Adult

**Notification of Child Near Fatality:**

The child was taken, by his parents, to [REDACTED] AI DuPont Hospital in Wilmington, Delaware on 3/9/12. (The child was [REDACTED] 4 years previously to have [REDACTED], in Patterson NJ.) The parents were told the child needed to be examined. At that time, [REDACTED] the parents the child had [REDACTED]

[REDACTED]. The parents said they were using a local herbalist, having lost faith in traditional medicine, and [REDACTED] was not to eat wheat, meat or gluten. The parents had strong beliefs that the child's diet was going to cure the child.

As per the record, the parents stated they were going to take [REDACTED] to see their doctor on 3/9/12. The doctor believed the child's [REDACTED] may have been a result of the child's diet or another [REDACTED] the parents the child was [REDACTED]

[REDACTED]. The doctors and the treatment

team at the hospital determined that the family needs conventional medicine, and the child needs immediate diagnosis and treatment.

Dr. [REDACTED] was unable to say that the child's condition worsened due to medical neglect, [REDACTED] due to the diet the parents believe in.

Dr. [REDACTED]. The child was 6 years old, and the size of a 3 year old. The family had been referred to Dr. [REDACTED] in King of Prussia, Pa, by Dr. [REDACTED], at the time of their visit on 3/9/12. Over several months, the family had several appointments, but cancelled and was never seen by Dr. [REDACTED].

An initial report was made to [REDACTED] on 3/13/2012; a supplemental report was made [REDACTED] on 3/21/2012 certifying this child to be in critical or serious condition as a result of severe failure to thrive. At this time, it was certified as a near fatality,

As of 5/30/12, the child remained [REDACTED] at CHOP, since his admission in March. The doctors and the treatment team determined [REDACTED]. He was scheduled to see an [REDACTED] to determine a diagnosis and treatment which is currently unknown.

#### **Summary of DPW Child Near Fatality Review Activities:**

The Southeast Region Office of Children, Youth and Families obtained and reviewed all current case records pertaining to the family. Follow up interviews were conducted with the investigation caseworker. The Act 33 review for this near fatality was on 4/13/12.

#### **Summary of Services to Family:**

#### **Children and Youth Involvement prior to Incident:**

The family had no contact with Montgomery County CYS prior to this incident.

#### **Circumstances of Child Near Fatality.**

Six-year-old [REDACTED] had been [REDACTED] at age 2. Because the parents had a negative experience with a medical doctor, they were trying to manage [REDACTED] on their own using an herbalist and a special diet. [REDACTED]

[REDACTED] condition had worsened in the month prior the parent's bringing [REDACTED] to DuPont Hospital on 3/09/2012. The physician at DuPont reported that the child had [REDACTED]

[REDACTED] The parents reported that the child was not fed wheat, meat or gluten, and the family uses an herbalist. The physician suspected that the child's [REDACTED] may have been related to his diet or [REDACTED], and the child needed immediate treatment.

Dr. [REDACTED] of King of Prussia was identified as the child's physician, but he reported that the family had cancelled a few times and they have never seen him. Child was certified to be in critical condition.

The older sibling, 17 year old [REDACTED], was seen by family physician at the time of this incident. No safety threats were identified for victim child or his sister. The parents were able to visit the victim child without supervision. The safety visit by the county agency determined that the family had sufficient and appropriate food in the home.

Medical services were provided to [REDACTED], which included to [REDACTED]  
[REDACTED]

#### Current Case Status:

The report was [REDACTED] of Dupont Hospital in Delaware told the parents that [REDACTED] was [REDACTED]. The child was 6 years old, and the size of a 3 year old. The parents said they were using a local herbalist, having lost faith in traditional medicine, and [REDACTED] was not to eat wheat, meat or gluten. The parents had strong beliefs that the child's diet was going to cure the child. [REDACTED] was sent home with his parents after a lengthy meeting and phone conference with CHOP, the parents, and OCY. The caseworker, an Intensive Service Specialist and SCOH worker (Services to Children in their Own Home) were already working closely with the family to make sure all medical appointments were scheduled and attended.

- [REDACTED] to his parents' care on 6/1/12. He had been [REDACTED]. He received [REDACTED] and had weekly [REDACTED] done. A nurse from CHOP and [REDACTED] are available to the family as needed. [REDACTED] received feeding [REDACTED] every evening and ate food by mouth during the day.
- Montgomery County OCY and Law Enforcement Officials investigated this case. It was determined, based on additional medical evidence, that the child's condition was not accidental. On 6/20/2012, both mother and father were arrested and charged with Aggravated Assault, Simple Assault, Recklessly Endangering Another Person, Endangering the Welfare of Children and Conspiracy – Endangering the Welfare of Children. They were released on their own recognizance (ROR) under specific bail release conditions, which included a No Contact Order. Maternal grandmother came from New York to provide care for [REDACTED] and his 17 year old sister, [REDACTED]. On 6/21/12 maternal grandmother attended and completed classes at the [REDACTED] regarding [REDACTED].
- On 6/20/12 a Safety Assessment was completed and determined [REDACTED] to be Safe With a Comprehensive Plan.
- On 6/20/12, The Safety Plan was implemented that stated maternal grandmother would provide around the clock care for her grandson, [REDACTED]. Maternal grandmother was to attend all medical appointments with [REDACTED] and provide for his ongoing medical needs. Maternal grandmother would not allow the parents to have contact with their son due to the No Contact Order.

- Mother and father were released on their own recognizance, but due to the No Contact Order, mother and father resided in a motel while maternal grandmother resided in their home and cared for [REDACTED] and his 17 year old sister [REDACTED].
- As of June 28, 2012, court ordered bail release conditions allowed for the parents to have supervised visits with [REDACTED]. Supervision was to be provided by a Montgomery County Agency through the Montgomery County Office of Children and Youth and approved by the Montgomery County Child Advocacy Project.
- Maternal grandmother remained in the home until October 2012.
- The bail order was lifted on 10/15/12 and the parents were then able to return home.
- A Safety Assessment was done on 10/15/12 and there were no safety threats identified, and no safety threats have been identified after that date.
- [REDACTED] continues to have [REDACTED] monitoring, along with being monitored by an [REDACTED]. A Nurse from CHOP and [REDACTED] are available as needed.
- Contracted In Home Services were successfully terminated, as per Montgomery County.
- FSP goals relate to parents' consistent contact and appointments with all medical and dental providers and specialists. They also must maintain housing with utilities and ongoing cooperation with OCY and SCOH.

**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. Montgomery County convened a review team in accordance with Act 33 of 2008 related to this report. The investigation was determined to be Indicated within 30 days of receipt of the report, on 4/18/12.

**Department of Public Welfare Findings:**

County Strengths:

- Collaboration with the medical team and child abuse team at A.I. DuPont Hospital for Children.
- Collaboration with the medical team at Children's Hospital of Philadelphia regarding training for maternal grandmother for [REDACTED].

County Weaknesses:

- There are none identified

Statutory and Regulatory Areas of Non-Compliance:

- There are none identified

**Department of Public Welfare Recommendation:**

- The medical community can provide educational material to parents at the hospital when children are born, regarding nutrition, nourishment, development and growth. Pamphlets and materials can also be distributed at health food stores and with herbalists.
- Montgomery County could benefit from increased usage of the Nurse Family Partnership, to help educate parents regarding providing care for their infants.