



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**REPORT ON THE NEAR FATALITY OF:**

[REDACTED]

**BORN: 10/13/2013**

**DATE OF INCIDENT: 02/27/14**

**DATE OF ORAL REPORT: 02/27/14**

**FAMILY KNOWN TO:**

*Allegheny County Department of Human Services  
Office of Children, Youth and Families*

**REPORT FINALIZED ON:**

August 20, 2015

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, DHS 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. Allegheny County has convened a review team in accordance with Act 33 of 2008 related to this report.

**Family Constellation:****Household Members**

[REDACTED]

**Relationship:**

Victim Child  
Mother  
Maternal Grandmother

**Date of Birth:**

10/13/2013  
[REDACTED] 1986  
[REDACTED] 1966

**Non-Household Members:**

[REDACTED]

**Relationship:**

Father  
Father's Paramour/[REDACTED] Mother  
Half-Sister

**Date of Birth:**

[REDACTED] 1990  
[REDACTED] 1991  
[REDACTED] 2012

**Notification of Child (Near) Fatality:**

Allegheny County Office of Children, Youth and Families (CYF) received notification of the near fatality on February 27, 2014. According to the report, the child was brought to Children's Hospital of Pittsburgh (CHP) on February 27, 2014 because he was fussy, had a fever, and was not eating well. The child received [REDACTED] and was diagnosed with a [REDACTED], but neither parent could explain how the child may have been injured. The parents live separately but both care for the child. The child was admitted to [REDACTED] due to his injuries. A physician at CHP certified the report as a near-fatality.

**Summary of DHS Child (Near) Fatality Review Activities:**

The agency had no prior history with the family, so no previous case record existed. However, Western Region Office of Children, Youth and Families (WROCYF) reviewed the child protective services (CPS) investigation documentation, as well as the documentation related to the agency's activities with the family. The WROCYF participated in the agency's Act 33 meeting, which was held on May 15, 2014.

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

The family was not previously known to Allegheny County Children, Youth and Families (CYF).

**Circumstances of Child (Near) Fatality and Related Case Activity:**

Allegheny County CYF received a report of suspected child abuse on February 27, 2014. The victim child was brought to Children's Hospital of Pittsburgh (CHP) by his mother because he had a fever and mother was concerned for dehydration. While at CHP, the child was found to have a [REDACTED], which was highly suspicious of abuse and considered life threatening.

The parents of the child split custody, so he stays at both parents' homes on a regular basis. According to the report, the child was with his father from the evening of February 25, 2014 until the next day, February 26<sup>th</sup>, when he returned to his mother. The mother said that the child was fine at that time. The child went back to his father's on the 26<sup>th</sup> and the mother picked him up at father's on the 27<sup>th</sup>. When the mother picked up the child, she felt that something may have been wrong with the child. After waiting a little while for reasons not known, she took the child to CHP.

Allegheny County CYF contacted the [REDACTED] Police to advise them of the report and that a caseworker would be going to the hospital to see the child. A detective was unable to meet the caseworker, so the caseworker made face to face contact with the child at 11:45 PM on February 27, 2015. Upon arriving at the hospital, the worker found both parents present and interviewed both regarding the allegations.

The father was interviewed first. He reviewed the schedule for when he has the child. The father cares for the child every Tuesday, Wednesday, and Thursday from 8 PM until 8 AM the next morning while the mother works. The father stated that on Tuesday, February 25<sup>th</sup> the child had a slight cold but seemed normal otherwise. When the mother dropped him off on Wednesday the 26<sup>th</sup>, the child had a slight fever, which the mother stated she already had assessed by the doctor. The father stated the child drank a bottle before bed and was up once "for a time" but went back to sleep. The father then said that around 2 AM, the child awoke and was "fussy" for the rest of the night. He reported telling the mother about the child's restless night when she picked him up the next day.

The caseworker asked the father if anything happened that week that was different from the other weeks. The father said that while she was visiting, the child's 14 month old half-sister struck the child on the head when the father removed the older child's pacifier. The father didn't think anything of the incident because he said the blow seemed "slight."

In her interview, the mother began by confirming the father's childcare schedule that he provided. The father watches the child while she works. She expressed no concerns for his parenting. The mother also confirmed that the child did have a cold on Tuesday and she did take him to the doctor on Wednesday. The doctor had no other concerns for the child at that time.

After picking the child up on Wednesday, February 26<sup>th</sup>, 2014, mother said that the child slept for a while and only ate a little bit of food. The mother gave the child Tylenol, but he immediately threw up. When this happened, she immediately took the child to the doctor, but was then sent to CHP for further examination. The mother denied anything happening while the child was solely in her care.

After speaking with both parents, the worker spoke with the doctor, who said child was stable but would undergo further testing the next day, including a full skeletal survey and [REDACTED] for possible evidence of shaken baby syndrome. The doctor also reported that the child's half-sister was examined by the emergency department and there were no concerns. That sibling was [REDACTED] her mother's care.

The worker photographed the victim child and discussed safety with the parents. The caseworker "asked the father to avoid unsupervised contact" with the child's half-sibling until the investigation was complete. The parents spent the night at the hospital with the child.

Although they were unable to respond on February 27<sup>th</sup>, the [REDACTED] Police interviewed the father on February 28<sup>th</sup> and then contacted the caseworker to advise the agency that the father confessed to assaulting the child and they were at headquarters, where father was going to give a videotaped confession. The worker was given an opportunity to interview the father after he completed his confession, so the worker went to county police headquarters.

Prior to interviewing the father, the caseworker advised him of his rights. The father agreed to speak with the caseworker and disclosed the following. In the early morning of February 26<sup>th</sup>, approximately 2:00 AM, the child woke up and would only sleep for no more than 45 minutes at a time. The father tried to comfort the child, but that did not work. The father said that he was "bouncing" the child and demonstrated it by holding the child away from his body. He also said that he did this "harder than is appropriate" and the father believed that is what caused the injuries. After speaking with the father, the caseworker watched the video confession, which showed the father demonstrating his actions with the child by using a doll. The detective informed the caseworker that the father was going to be arrested and charged with Aggravated Assault, Endangering the Welfare of a Child, and Reckless Endangerment of another Person. He was transported to [REDACTED] Jail immediately after his interviews.

On February 28<sup>th</sup>, the agency received the physician's report from the Child Advocacy Center (CAC) for the child. The child's injuries were an [REDACTED]

[REDACTED] The doctor was in agreement with the [REDACTED] concerns of child abuse.

The father was released from jail on March 1, 2014. On March 3<sup>rd</sup>, the rest of the child's testing came back. The skeletal survey was negative, however, the child was found to

have [REDACTED] [REDACTED] were described as "diagnostic of abuse." The child's condition had improved and he was [REDACTED] later that day. Since the child was [REDACTED], the caseworker went back to the hospital to see the child and mother.

The mother said that as soon as the worker left the hospital that first night, the police arrived at the hospital and told her that they were going to the father's apartment to interview him. The police later called her to tell that the father admitted to shaking the child. The paternal uncle contacted the mother and told her that the father was released from jail and that the mother of his other child moved out of his home and went to live with family in Butler County. Allegheny County subsequently contacted Butler County Children and Youth Services to request a safety check on this child, which they did and her safety was assured. The mother advised the caseworker that her relationship with the father was over and she will not permit him to visit the child. The mother also reported that she was planning on taking the child and moving to Mifflin County to live with her mother. Although she was moving some distance from [REDACTED], the mother committed to bringing the child back for any necessary medical follow-up. Later that same afternoon, the worker made a required home visit to the mother's residence, where she obtained the maternal grandmother's address. The mother and child moved to the maternal grandmother's home on March 5, 2014.

On March 6, 2014, the Allegheny County CYF caseworker contacted Mifflin County Children and Youth Services to request an assessment of the grandmother's home and provided the Mifflin County worker with case information. A visit was completed by Mifflin County and the home was reported to be safe.

The mother returned [REDACTED] on March 13<sup>th</sup> for follow-up medical appointments for the child. The mother informed the caseworker that she was going to stay in Mifflin County permanently, but would like the father to have a relationship in the future, but not have unsupervised contact while he is young, as she does not believe the father can "cope" with an infant. She stated she was going to see what outcome came from the court proceedings and follow those recommendations. The mother would also seek legal custody of child if necessary to protect him.

On March 18<sup>th</sup>, the mother called the worker to report that the child had to be [REDACTED] [REDACTED]. The child was doing well and [REDACTED]. The worker was proactive and contacted the physician that consulted for the child abuse case. The doctor advised that there were no concerns of re-injury; rather this complication was related to the initial incident.

On March 19<sup>th</sup>, the worker conducted a phone interview with the father's most recent paramour, who is also the mother of his other child. She denied having any direct knowledge of the incident and claimed she was asleep both nights the child was with them during his last visit. She was informed by the mother that the father shook the victim child.

The child remained hospitalized on March 21<sup>st</sup> and the mother was temporarily staying with her aunt while the child continued to have medical issues. Her apartment lease ended on March 31<sup>st</sup> so she would be returning to her mother's home at that time and would contact Mifflin County CYS when she returns there. Both mother and maternal grandmother are adamant that the father will have no unsupervised contact with the child.

The county completed their investigation on March 24, 2014 by submitting the CY-48 with an indicated status naming the father as the perpetrator.

According to the case record, the mother and child moved back to Mifflin County at the end of March after the child's [REDACTED] the hospital. Mifflin County completed a home visit with the mother and child the first week of April 2014. The Mifflin County worker provided the mother with a list of local resources and determined that at that time, no further involvement with the family was necessary. After learning this information, Allegheny County CYF closed their involvement with the family on April 4, 2014.

#### **Current Case Status:**

The family's case was closed on April 4, 2014 when the mother moved to Mifflin County. Mifflin County CYS completed an assessment of the family situation and deemed no services were required.

The father was charged with one count of Aggravated Assault, one count of Recklessly Endangering another Person, and one count of Endangering the Welfare of Children. He pled guilty to all three counts on December 4, 2014 and is awaiting sentencing scheduled for April 10<sup>th</sup>, 2015.

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

- **Strengths:**  
The county listed the following as strengths: CYF responded immediately to this report, conducted a thorough investigation, assessed the safety of both children, and supported mother in ensuring the safety of the injured child.
- **Deficiencies:**  
There were no deficiencies identified.
- **Recommendations for Change at the Local Level:**  
Because the father expressed remorse, a recommendation was made for the child protection systems to learn more about the dynamics of perpetrators as they relate to remorse and the potential for future harm.
- **Recommendations for Change at the State Level:**  
A recommendation was made for the PA DHS to address delays in communication between counties when referrals are made for courtesy

assessments. However, there was nothing in the case notes to indicate that there was an issue.

#### **Department Review of County Internal Report:**

The county held their internal review on April 29, 2014. The report accurately reflected the case and met the requirements of the bulletin. The county received a draft version of their County Internal Report on February 5, 2015.

#### **Department of Human Services Findings:**

- County Strengths:

The county responded immediately to the report and involved law enforcement from the start. The assigned worker gathered the necessary information to make a determination by interviewing anyone that may have had information related to the allegations. The worker also confirmed the child's second hospitalization was due to complications from the original incident and not a new injury. The worker maintained contact with the mother throughout, even though she was commuting from a county that was some distance away. Referrals to two other counties were made so that the safety of both of the father's children could be assessed in the new counties. The worker also waited until hearing back from the CYS agency in the mother's new county before closing their involvement.

In addition, the county's process to conduct these meetings is seamless. They are always well attended and informative.

- County Weaknesses:

There were no weaknesses identified in this investigation.

- Statutory and Regulatory Areas of Non-Compliance:

There were no areas of non-compliance identified.

#### **Department of Human Services Recommendations:**

Allegheny County CYF should continue to utilize their current process for conducting these meetings.