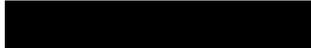




pennsylvania
DEPARTMENT OF PUBLIC WELFARE

REPORT ON THE NEAR FATALITY OF:



Date of Birth: 3/30/13
Date of Incident: 10/15/13
Date of Oral Report: 10/16/13

FAMILY KNOWN TO:

Berks County Children and Youth Services

REPORT FINALIZED ON:
03/16/2015

Unredacted reports are confidential under the provisions of the Child Protective Services Law and cannot be released to the public.
(23 Pa. C.S. Section 6340)

Unauthorized release is prohibited under penalty of law.
(23 Pa. C.S. 6349 (b))

Children and Youth Involvement prior to Incident:

On 05/07/13, Berks County Children and Youth Services received a report regarding the VC's medical care. On 05/06/13, the VC's pediatrician [REDACTED] and recommended that the mother bring the VC in for a follow-up appointment. On 05/07/13, the mother had not made the follow-up appointment. The case worker then saw the mother and VC on 05/07/13. The mother made the appointment and took the VC to the doctor on 05/08/13. Berks County staff investigated, and the case was closed on 05/29/13.

Circumstances of Child Near Fatality and Related Case Activity:

- On 10/15/13, the VC was admitted to St. Joseph's Hospital in Reading because both of her arms and her left leg were paralyzed. She was then transferred to the Lehigh Valley Hospital, where she received a complete workup. [REDACTED]
- On 10/16/13, a report was called into ChildLine, stating that the VC's injuries appeared to be the result of abuse or neglect. She was later found to have [REDACTED].
[REDACTED] There is no medical consensus regarding the cause of the [REDACTED], as the doctors at Lehigh Valley Hospital felt that the disease occurred naturally, and the medical team [REDACTED] felt that abuse could not be ruled out as a cause. Further, some medical professionals involved in the VC's care have questioned if she should be [REDACTED].
[REDACTED]
- On 10/28/13, the VC was transferred to the Good Shepherd [REDACTED].
- On 10/30/13, the Berks County Children and Youth Case Worker was informed that the VC had been transferred to the Good Shepherd [REDACTED].
- On 12/13/13, a CY 48 form, documenting that the investigation was unfounded, was completed by the Berks County Children and Youth Case Worker, [REDACTED].
[REDACTED]
- On 12/16/13, the family was accepted for in-home services while the VC was in the hospital.
- On 02/04/14, the VC [REDACTED] to a kinship resource, [REDACTED].
[REDACTED] The Berks County Children and Youth worker has had difficulty contacting the mother by phone or in person. These difficulties in contacting the mother have made coordination [REDACTED] problematic. The mother has not been available to participate in the VC's [REDACTED].
[REDACTED] The mother has not had a stable living situation where she could care for the VC that the county could evaluate. The mother was not cooperative with efforts

to obtain her address. [REDACTED]

Current Case Status:

- The mother's phone numbers have changed frequently, so case coordination has been difficult. The mother, [REDACTED], gave her own mother's address as her address. The current worker has had difficulty contacting the mother by phone and at her address.
- The mother had brought a friend who was not approved by BCCYS to a visit with the VC.
- The mother's FSP goals have been to improve her parenting skills; address the VC's medical needs; address mother's own [REDACTED]. Her compliance has been inconsistent.
- For reunification to occur the mother would need to receive training, which would involve discussing the VC's medical needs and how to support the VC's delicate needs – [REDACTED]. The child also needs to be monitored to ensure that she is not doing things to make her condition worse.
- Visits were being supervised by a case aide and the kinship foster parent. Previously, visits were supervised by [REDACTED] staff for two hours, but their staff allowed a gentleman to visit the VC, even though he was not authorized to visit her. The [REDACTED] staff involved in that visit was removed from the case and the kinship foster parent and the case aide are now responsible for supervising visits. It has been requested that the mother attend the VC's [REDACTED] and the worker is attempting to schedule weekly visits outside of the appointments.
- The father is incarcerated in Florida. It is the caseworker's understanding from speaking with the paternal family that the father may be released in July 2014.
- The VC's Paternal Aunt is in the process of arranging to come and visit the VC from Florida.
- The paramour went to jail on a probation violation, possibly because he may not have been reporting or paying fines, and he was released on 4/8/14. The county had difficulty contacting the paramour regarding the investigation, as he did not appear to have a working phone number, and he was no longer living with the mother.

The VC is thriving in the kinship foster home, [REDACTED]

- [REDACTED]
- The VC will likely have a limp, but medical professionals believe that she will be able to walk at some point.

- [REDACTED]
- The paternal aunt has called Berks County Children and Youth Services regularly regarding the VC's permanency plan. The kinship provider has also stated that she is interested in adopting the VC if she is given the opportunity.
 - The wrist fracture injury was [REDACTED] because the cause of the injury was unknown.

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

- **Strengths:**
The Act 33 report cited strengths, including [REDACTED] exams of the child, the mother's employment status, supports available to mother, the collaboration between Berks County Children and Youth Services, Berks Probation and Parole, and the [REDACTED] Police Department.
- **Deficiencies:**
The Act 33 report cited deficiencies, including conflicting medical documentation, the difficulty in obtaining documentation from the original doctor who certified the case as a near-fatality, and the fact that the case was certified as a near-fatality even though the cause of the serious injuries appears to have been medical.
- **Recommendations for Change at the Local Level:**
None identified.
- **Recommendations for Change at the State Level:**
None identified.

Department Review of County Internal Report:

The Act 33 report was received on 01/28/14. It was not clear when the Act 33 report was completed, as the report itself was not dated. Due to difficulties in communicating with the doctor who certified the report as a near-fatality, the Act 33 report and meeting were delayed. The Act 33 meeting was further delayed due to inclement weather. The Department concurs with the information in the Act 33 report, however, there were areas identified during the Act 33 meeting and the Act 33 report that could have been addressed as recommendations in the Act 33 report.

Department of Public Welfare Findings:

- County Strengths:
The county has conducted a thorough investigation.
- County Weaknesses:
As noted by the county, some coordination issues have been noted, as the VC was moved [REDACTED] without informing the county case worker and [REDACTED] was not aware that the mother was not permitted to see the VC unsupervised.

There was some confusion regarding the status of the certification of the case as a near-fatality, as the VC's serious injuries were found to be caused by a medical condition and not by abuse. The county attempted to have the case de-certified as a near-fatality, but the doctor who originally certified the case could not be located. Medical professionals were not able to agree on a definitive cause of the child's injuries.

- Statutory and Regulatory Areas of Non-Compliance:
None.

Department of Public Welfare Recommendations:

The Regional Office of Children, Youth and Families is available for technical assistance throughout the fatality and near-fatality process.

During the Act 33 meeting, team members suggested that a qualified child protection team at Lehigh Valley Hospital would benefit the children and families of the county, as well as assist case workers in making decisions more smoothly. A child protection team would improve collaboration between children and youth staff and medical professionals regarding visitation, discharge planning, and follow-up medical care.

Berks County Children and Youth staff should meet with area hospitals to discuss the importance of notifying Berks County Children and Youth staff when a child under the care or investigation of Berks County Children and Youth is being discharged from the hospital, to facilitate safety planning by any discharge resources, including other facilities who might be responsible for the care of the child.