



December 14, 2020

Jeffrey Renk
Senate Chief Clerk
State Capitol, B20 SE
P.O. Box 7882
Madison, WI 53707

Patrick E. Fuller
Assembly Chief Clerk
Risser Justice Center
17 West Main Street, Suite 401
P.O. Box 8952
Madison, WI 53708

Dear Chief Clerk Renk and Chief Clerk Fuller:

In compliance with 2009 Wisconsin Act 78, the Child Welfare Public Disclosure Act, please accept the attached summary reports prepared by the Department of Children and Families on December 14, 2020. The following report(s), by report identification number, are included with this cover letter:

Posted 12/1/20

- 90 Day Report for 200506DSP-Milw-997
- 90 Day Report for 191009DSP-Winn-1016
- 90 Day Report for 200825DSP-Lang-1018
- 90 Day Report for 200923DSP-Jack-1025

Posted 12/7/20

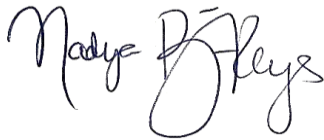
- 90 Day Report for 200620DSP-Port-1007
- 90 Day Report for 200710DSP-Craw-1009
- 90 Day Report for 200730DSP-Dane-1014
- 90 Day Report for 200831DSP-Wood-1019

Posted 12/10/20

- 90 Day Report for 200814DSP-LaCr-1015

In accordance with Wisconsin Statutes section 48.981(7) (cr) 3.b., the Department is required to "transmit to... the appropriate standing committees of the legislature under s 13.172(3)" summary reports prepared by the Department concerning incidents of death or serious injury to a child that results from suspected abuse or neglect or incidents of egregious abuse or neglect of a child. The summary reports are also made available to the public on the Department's [public website](#).

Sincerely,

A handwritten signature in black ink, reading "Nadya Pérez-Reyes". The signature is written in a cursive style with a large, looped "P" and "R".

Nadya Pérez-Reyes
Assistant Secretary

Attachments

cc: Governor Tony Evers

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 191009DSP-Winn-1016 **Agency:** Winnebago County Department of Human Services

Child Information (at time of incident)

Age: 5 years Gender: Female Male

Race or Ethnicity: African American/Black

Special Needs: None

Date of Incident: 10/09/2019

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On June 19, 2020, the agency received a report regarding a 5-year-old child brought to the hospital on October 9, 2019 with head injuries. Medical professionals did not provide the agency with a cause of injury. Law enforcement was contacted in October 2019 and did not initiate an investigation. No criminal charges were filed, and the case was closed.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency utilized information obtained in October 2019 from law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate the allegation of physical abuse to the 5-year-old child by the child's previous foster mother. At the time of the June 19, 2020 report, the child and her 5-year old sibling were residing in a different foster home and were deemed safe with their current foster parents. The case remains open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom?

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

Yes **No** **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

At the time of the incident, the child was residing in a licensed foster home. The child was originally placed in out-of-home care on February 20, 2017, after she was taken into Temporary Physical Custody due to neglect by her mother.

Description of all other persons residing in the OHC placement home:

At the time of the incident, the child resided with her foster mother, foster father, her 5-year-old sibling, and the foster parents' 3-year-old child.

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

The foster mother and foster father who the child was placed with at the time of the incident were licensed as a level 2 foster home on November 1, 2015. There is no history of licensing violations by the foster parents constituting a substantial failure to protect and promote the welfare of the child.

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input checked="" type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input type="checkbox"/> Case closed by agency |
| <input type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's practice in each case reported under the act. The DSP will conduct a further review in this case.

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

None at this time.

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200506DSP-Milw-997 **Agency:** Division of Milwaukee Child Protective Services

Child Information (at time of incident)

Age: 2 months Gender: Female Male

Race or Ethnicity: Black/African American

Special Needs: None

Date of Incident: 05/06/20

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On May 6, 2020, the agency received a report regarding an infant brought to the hospital unresponsive; the infant was resuscitated and admitted to the hospital for further monitoring. Subsequently, the infant passed away on June 5, 2020. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the infant's injuries were undetermined for child abuse. No criminal charges have been filed in this case, and the investigation remains open.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate neglect of the infant and the infant's 16-month-old sibling by the mother; the agency found insufficient evidence to substantiate the maltreatment of physical abuse to the infant by an unknown maltreater. Medical professionals determined the infant's injuries were undetermined for child abuse. The agency determined the infant and the infant's sibling were unsafe and they were taken into Temporary Physical Custody. The infant remained in the hospital and the infant's sibling was placed with a relative. A Petition for Protection or Services was filed, and the case remained open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?
 Yes No Criminal charges filed? If yes, against whom?

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the infant resided with her mother and her 16-month-old sibling. The infant's 9-year old half-sibling resided with his father in another state. Paternity had not been established for the infant.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

At the time of the incident, the agency was assessing the April 7, 2020 CPS Report. The last contact by the agency was a video conference with the mother on May 5, 2020.

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

On April 7, 2020, the agency screened-in a CPS Report alleging neglect to the infant, the infant's now 16-month-old sibling, and the infant's now 9-year-old sibling by the mother. An assessment of the allegation was completed by the agency and the allegation of neglect was unsubstantiated.

On March 27, 2020, the agency screened-in a CPS Report alleging neglect to the infant by the mother. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. The case was opened for voluntary ongoing services.

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On April 7, 2020, the agency screened-in a CPS Report alleging neglect to the infant, the infant's now 16-month-old sibling, and the infant's now 9-year-old sibling by the mother. The incident occurred during the assessment period and an additional report was made to the agency regarding the infant's injuries on May 6, 2020. An assessment of the allegation was completed by the agency and the initial allegation of neglect was unsubstantiated.

On March 27, 2020, the agency screened-in a CPS Report alleging neglect to the infant by the mother. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. The case was opened for voluntary ongoing services.

On August 28, 2019, the agency screened-out a CPS Report.

On June 24, 2018, the agency screened-out a CPS Report.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate neglect of the infant and the infant's 16-month-old sibling by the mother; the agency found insufficient evidence to substantiate the maltreatment of physical abuse to the infant by an unknown maltreater. Medical professionals determined the infant's injuries were undetermined for child abuse. The agency determined the infant and the infant's sibling were unsafe and they were taken into Temporary Physical Custody. The infant remained in the hospital and the infant's sibling was placed with a relative. A Petition for Protection or Services was filed, and the case remained open to provide ongoing case management services.

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input checked="" type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input checked="" type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input checked="" type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input checked="" type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input checked="" type="checkbox"/> Case remains open for services |
| <input checked="" type="checkbox"/> Placement with relatives | <input type="checkbox"/> Case closed by agency |
| <input checked="" type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's

practice in each case reported under the act. The DSP will conduct a further review in this case.

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

None at this time.

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200620DSP-Port-1007 **Agency:** Portage County Health and Human Services Department

Child Information (at time of incident)

Age: 7 months Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 06/20/2020

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On June 21, 2020, the agency received a report regarding a 7-month-old infant brought to the hospital on June 20, 2020, with head injuries. The infant was admitted to the hospital and pronounced dead on June 22, 2020. The Medical Examiner's Office determined the death to be non-accidental in nature. As a result of law enforcement's investigation, the mother's boyfriend was criminally charged with 1st Degree Reckless Homicide. A criminal charge is merely an allegation and a defendant is presumed innocent until and unless proven guilty.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the infant by the mother's boyfriend. The Medical Examiner's Office determined the death to be non-accidental in nature. The family was referred to community services and the agency closed the case upon the completion of the Initial Assessment.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom? The mother's boyfriend

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the infant resided with his mother and her boyfriend. The infant's 4-year-old half sibling resided with his father and had no contact with the mother. Paternity had not been established for the infant.

Yes **No** **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

At the time of the incident, the family was voluntarily working with the agency as a result of a January 30, 2020, Services Report. The last contact by the agency was a home visit with the mother, her boyfriend, and the infant on June 5, 2020.

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

On January 30, 2020, the agency screened-in a Services Report. The agency provided the family with voluntary case management services.

On April 25, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 4-year-old half sibling by the mother. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. The case remained open to provide ongoing case management services.

On February 13, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 4-year-old half sibling by the mother. An assessment was completed by the agency and the allegation of neglect was substantiated. A petition for

Protection or Services was filed on April 6, 2017, and the case remained open to provide ongoing case management services.

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On January 30, 2020, the agency screened-in a Services Report. The agency provided the family with voluntary case management services.

On April 25, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 4-year-old half sibling by the mother. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. The case remained open to provide ongoing case management services.

On February 13, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 4-year-old half sibling by the mother. An assessment was completed by the agency and the allegation of neglect was substantiated. A petition for Protection or Services was filed on April 6, 2017, and the case remained open to provide ongoing case management services.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the infant by the mother's boyfriend. The Medical Examiner's Office determined the death to be non-accidental in nature. The family was referred to community services and the agency closed the case upon the completion of the Initial Assessment.

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input checked="" type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input checked="" type="checkbox"/> Case closed by agency |
| <input type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

N/A

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the

record or on-site review:

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's practice in each case reported under the act. The DSP will conduct a further review in this case.

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200710DSP-CRAW-1009 **Agency:** Crawford County Human Services Department

Child Information (at time of incident)

Age: 3-year-old Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 7/10/2020

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On July 10, 2020, the agency received a report regarding a 3-year-old child pronounced deceased in his home. Law enforcement was contacted and initiated a criminal investigation. The Medical Examiner's Office determined the death to be non-accidental in nature. As a result of law enforcement's investigation, the mother's boyfriend was criminally charged with First Degree Reckless Homicide. A criminal charge is merely an allegation and a defendant is presumed innocent until and unless proven guilty.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the child by the mother's boyfriend and neglect to the child by the mother and her boyfriend. The Medical Examiner's Office determined the death to be non-accidental in nature. The child's siblings were deemed unsafe and taken into Temporary Physical Custody. The child's 11-year-old half-sister and 5-year-old half-sister were placed with their fathers and the child's 1-year-old half-brother was placed in a non-relative foster home and subsequently placed with relatives. Petitions for Protection or Services were filed, and the case remains open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom? The mother's boyfriend

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the child resided with his mother, his mother's boyfriend, his 11-year-old half-sister, his 5-year-old half-sister and his 1-year-old half-brother. The child's biological father had regular contact.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

At the time of the incident, the agency was assessing the May 28, 2020 CPS Report. The last contact by the agency was a home visit with the children and the mother on July 8, 2020.

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

On May 28, 2020, the agency screened-in a CPS Report alleging neglect to the child and the child's now 11-year-old half-sister and 5-year-old half-sister by the mother's boyfriend and neglect to the child's 1-year old half-brother by the mother. An assessment was completed by the agency and the allegations of neglect were unsubstantiated. The case was opened for voluntary services.

On May 23, 2018 the agency screened-in a Services Report. The family was referred to community services.

On April 25, 2016, the agency screened-in a Services Report. The family was referred to public health services.

On August 25, 2015, the agency screened-in a Services Report. The family was referred to community services.

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On May 28, 2020, the agency screened-in a CPS Report alleging neglect to the child and the child's now 11-year-old half-sister and 5-year-old half-sister by the mother's boyfriend and neglect to the child's 1-year old half-brother by the mother. An assessment was completed by the agency and the allegations of neglect were unsubstantiated. The case was opened for voluntary services.

On July 15, 2019, the agency screened-out a Services Report.

On May 23, 2018, the agency screened-out a CPS Report.

On May 23, 2018 the agency screened-in a Services Report. The family was referred to community services.

On April 25, 2016, the agency screened-in a Services Report. The family was referred to public health services.

On March 28, 2016, the agency screened-out a Services Report.

On August 25, 2015, the agency screened-in a Services Report. The family was referred to community services.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the child by the mother's boyfriend and neglect to the child by the mother and her boyfriend. The Medical Examiner's Office determined the death to be non-accidental in nature. The child's siblings were deemed unsafe and taken into Temporary Physical Custody. The child's 11-year-old half-sister and 5-year-old half-sister were placed with their fathers and the child's 1-year-old half-brother was placed with relatives. Petitions for Protection or Services were filed, and the case remains open to provide ongoing case management services.

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input checked="" type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input checked="" type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |

- Temporary physical custody of child
- Petitioned for court order / CHIPS (child in need of protection or services)
- Placement into foster home
- Placement with relatives
- Ongoing Services case management

- Collaboration with medical professionals
- Supervised visitation
- Case remains open for services
- Case closed by agency
- Initiated efforts to address or enhance community collaboration on CA/N cases
- Other (describe):

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's practice in each case reported under the act. The DSP will conduct a further review in this case.

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

None at this time.

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200730DSP-Dane-1014 **Agency:** Dane County Department of Human Services

Child Information (at time of incident)

Age: 13 years Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 07/30/20

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On August 4, 2020, the agency received a report regarding a 13-year-old child found deceased in her home on July 30, 2020. Law enforcement was contacted and initiated a criminal investigation. The Medical Examiner's preliminary findings indicated the child's death to be non-accidental; the final report is pending. As a result of law enforcement's investigation, the child's father was criminally charged with 1st degree intentional homicide (use of a dangerous weapon). A criminal charge is merely an allegation and a defendant is presumed innocent until and unless proven guilty.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of evidence to substantiate maltreatment of physical abuse to the child by the child's father. The Medical Examiner's preliminary findings indicated the child's death to be non-accidental; the final report is pending. The agency closed the case upon completion of the Initial Assessment and no service referrals were made.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom? The child's father

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the child resided with her mother and father.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

N/A

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

None

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On May 12, 2011, the agency screened-out a CPS Report.

On May 2, 2011, the agency screened-in a CPS Report alleging sexual abuse to the child's then 16-year-old half-sister by the

child's father. An assessment was completed by the agency and the allegation of sexual abuse was unsubstantiated. The case was closed upon completion of the Initial Assessment.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of evidence to substantiate maltreatment of physical abuse to the child by the child's father. The Medical Examiner's preliminary findings indicated the child's death to be non-accidental; the final report is pending. The agency closed the case upon completion of the Initial Assessment and no service referrals were made.

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input checked="" type="checkbox"/> Case closed by agency |
| <input type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

N/A

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

N/A

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200814-LaCr-1015 **Agency:** La Crosse County Human Services Department

Child Information (at time of incident)

Age: 1 year Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Age: 1 year Gender: Female Male

Race or Ethnicity: White/Caucasian

Date of Incident: 08/14/20

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On August 14, 2020, the agency received a report regarding two 1-year-old infants brought to the hospital with multiple injuries. The infants were in out-of-home placement and residing in a non-relative foster home. The injuries were reported to have occurred when the infants were on a visit with their family. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the injuries were non-accidental in nature. No criminal charges have been filed in this case, and the investigation remains open.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of the evidence to substantiate maltreatment of physical abuse to the infants by an unknown maltreater. Medical professionals determined the injuries were non-accidental in nature. The agency deemed the infants and their 5-year-old sibling unsafe with their mother and father and safe in their out-of-home placement. The infants and their 5-year-old sibling remained in the non-relative foster home. The case remains open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?
 Yes No Criminal charges filed? If yes, against whom?

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

At the time of the incident, the 1-year-old infants were residing in a licensed foster home. The infants were originally placed in out-of-home care on December 7, 2018, after they were taken into Temporary Physical Custody due to allegations of physical abuse by their mother.

Description of all other persons residing in the OHC placement home:

At the time of the incident, the infants resided with their foster mother, their foster father, their 5-year-old sibling and the foster parents' five biological children.

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

The foster mother and foster father have been licensed as a Level 2 Foster Home since May 2017. There is no history of licensing violations by the foster parents constituting a substantial failure to protect and promote the welfare of the child.

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input checked="" type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input checked="" type="checkbox"/> Placement into foster home | <input checked="" type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input type="checkbox"/> Case closed by agency |
| <input checked="" type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

Under the Child Welfare Disclosure Act (Section 48.981(7)(cr), Stats.), the DSP completes a 90-day review of the agency's practice in each case reported under the act. The DSP will conduct a further review in this case.

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

None at this time.

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200825DSP-Lang-1018 **Agency:** Langlade County Department of Social Services

Child Information (at time of incident)

Age: 1 year Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 08/25/20

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On August 25, 2020, the agency received a report regarding a 1-year-old infant brought to the hospital with multiple injuries. The infant was pronounced deceased on August 26, 2020. Law enforcement was contacted and initiated a criminal investigation. Medical professionals noted signs of trauma to the infant; the autopsy results are pending. No criminal charges have been filed in this case, and the investigation remains open.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate physical abuse of the infant by an unknown maltreater. Medical professionals noted signs of trauma to the infant; the autopsy results are pending. The mother was referred to community services and the agency closed the case upon completion of the Initial Assessment.

- Yes No Criminal investigation pending or completed?
 Yes No Criminal charges filed? If yes, against whom?

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the infant resided with her mother and the mother's boyfriend. The infant's father had visitation with the infant.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

On June 22, 2020, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant by her mother's ex-boyfriend. An assessment was completed by the agency with the determination of services not needed. The case was closed upon completion of the Initial Assessment.

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On June 22, 2020, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant by her mother's ex-boyfriend. An assessment was completed by the agency with the determination of services not needed. The case

was closed upon completion of the Initial Assessment.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate physical abuse of the infant by an unknown maltreater. Medical professionals noted signs of trauma to the infant; the autopsy results are pending. The mother was referred to community services and the agency closed the case upon completion of the Initial Assessment.

B. Children residing in out-of-home care (OHC) placement at time of incident:

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input checked="" type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input checked="" type="checkbox"/> Case closed by agency |
| <input type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

N/A

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

N/A

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200831DSP-Wood-1019 **Agency:** Wood County Human Services

Child Information (at time of incident)

Age: 3 months Gender: Female Male

Race or Ethnicity: Black/African American

Special Needs: None

Date of Incident: 08/31/20

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On September 3, 2020, the agency received a report of a 3-month-old infant brought to the hospital with a head injury that occurred on August 31, 2020. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the injuries were consistent with non-accidental head trauma. As a result of law enforcement's investigation, the infant's father was criminally charged with Child Abuse – Intentionally Cause Great Bodily Harm. A criminal charge is merely an allegation and a defendant is presumed innocent until and unless proven guilty.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of evidence to substantiate maltreatment of physical abuse to the infant by his father. Medical professionals determined the injuries were consistent with non-accidental head trauma. The infant and his 2-year-old brother were deemed unsafe, taken into Temporary Physical Custody and placed with a relative. Petitions for Protection or Services were filed, and the case remained open to provide ongoing case management services.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom? The infant's father

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the infant resided with his mother, his father, and his 2-year-old brother.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

N/A

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

None

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

On May 26, 2020, the agency screened-out a CPS Report.

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found a preponderance of evidence to substantiate maltreatment of physical abuse to the infant by his father. Medical professionals determined the injuries were consistent with non-accidental head trauma. The infant and his 2-year-old brother were deemed unsafe, taken into Temporary Physical Custody and placed with a relative. Petitions for Protection or Services were filed, and the case remained open to provide ongoing case management services.

B. Children residing in out-of-home care (OHC) placement at time of incident:

N/A

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input checked="" type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input checked="" type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input checked="" type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input checked="" type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input checked="" type="checkbox"/> Case remains open for services |
| <input checked="" type="checkbox"/> Placement with relatives | <input type="checkbox"/> Case closed by agency |
| <input checked="" type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

N/A

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

N/A

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.

90-Day Summary Report for Child Death, Serious Injury or Egregious Incident

Reports submitted to the Division of Safety and Permanence (DSP) that do not include all of the required information will be returned to the agency for proper completion. Do not identify individuals by name when completing this report. Individuals may be referenced by relationship or position; e.g., mother, father, child, sibling, physician, detective, etc.

Case Tracking Number: 200923DSP-Jack-1025 **Agency:** Jackson County Department of Health and Human Services

Child Information (at time of incident)

Age: 8 years Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 09/23/2020

Description of the incident, including the suspected cause of death, injury or egregious abuse or neglect:

On September 29, 2020, the agency received a report regarding an 8-year-old child brought to the hospital on September 23, 2020 with multiple injuries. The child was pronounced deceased at the hospital on September 23, 2020. Medical professionals determined the injuries were accidental in nature. Law enforcement was contacted, and a criminal investigation was completed. No criminal charges were filed and the case was closed.

Findings by agency, including maltreatment determination and material circumstances leading to incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate neglect of the child by his mother and father. Medical professionals determined the injuries were accidental in nature. The agency deemed the child's siblings safe and they remained with the mother and father. The agency closed the case upon completion of the Initial Assessment and no service referrals were made.

Yes No Criminal investigation pending or completed?

Yes No Criminal charges filed? If yes, against whom?

Child's residence at the time of incident: In-home Out-of-home care placement

Complete the appropriate following section (A. or B. based on the child's residence at the time of the incident).

A. Children residing at home at the time of the incident:

Description of the child's family (includes household members, noncustodial parent and other children that have visitation with the child and / or in the child's family home):

At the time of the incident, the child resided with his mother, father, 1-year-old sibling, 3-year-old sibling, 5-year-old sibling, 7-year-old sibling, 9-year-old sibling, 12-year-old sibling, and 13-year-old sibling.

Yes No **Statement of Services:** Were services under ch. 48 or ch. 938 being provided to the child, any member of the child's family or alleged maltreater at the time of the incident, including any referrals received by the agency or reports being investigated at time of incident?

If "Yes", briefly describe the type of services, date(s) of last contact between agency and recipient(s) of those services, and the person(s) receiving those services:

N/A

Summary of all involvement in services as adults under ch. 48 or ch. 938 by child's parents or alleged maltreater in the previous five years: (Does not include the current incident.)

None

Summary of actions taken by the agency under ch. 48, including any investigation of a report or referrals to services involving the child, any member of the child's family living in this household and the child's parents and alleged maltreater. (Does not include the current incident.)

(Note: Screened out reports listed in this section may include only the date of the report, screening decision, and if a referral to services occurred at Access. Reports that do not constitute a reasonable suspicion of maltreatment or a reason to believe that the child is threatened with harm are not required to be screened in for an Initial Assessment, and no further action is required by the agency.)

None

Summary of any investigation involving the child, any member of the child's family and alleged maltreater conducted under ch. 48 and any services provided to the child and child's family since the date of the incident:

The agency collaborated with law enforcement and medical professionals to complete the assessment. The Initial Assessment completed by the agency found insufficient evidence to substantiate neglect of the child by his mother and father. Medical professionals determined the injuries were accidental in nature. The agency deemed the child's siblings safe and they remained with the mother and father. The agency closed the case upon completion of the Initial Assessment and no service referrals were made.

B. Children residing in out-of-home care (OHC) placement at time of incident:

N/A

Description of the OHC placement and basis for decision to place child there:

N/A

Description of all other persons residing in the OHC placement home:

N/A

Licensing history: Including type of license, duration of license, summary of any violations by licensee or an employee of licensee or other actions that constitute a substantial failure to protect and promote the welfare of the child.

N/A

Summary of any actions taken by agency in response to the incident: (Check all that apply.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Screening of Access report | <input type="checkbox"/> Attempted or successful reunification |
| <input type="checkbox"/> Protective plan implemented | <input type="checkbox"/> Referral to services |
| <input checked="" type="checkbox"/> Initial assessment conducted | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Safety plan implemented | <input checked="" type="checkbox"/> Collaboration with law enforcement |
| <input type="checkbox"/> Temporary physical custody of child | <input checked="" type="checkbox"/> Collaboration with medical professionals |
| <input type="checkbox"/> Petitioned for court order / CHIPS (child in need of protection or services) | <input type="checkbox"/> Supervised visitation |
| <input type="checkbox"/> Placement into foster home | <input type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input checked="" type="checkbox"/> Case closed by agency |
| <input type="checkbox"/> Ongoing Services case management | <input type="checkbox"/> Initiated efforts to address or enhance community collaboration on CA/N cases |
| | <input type="checkbox"/> Other (describe): |

FOR DSP COMPLETION IF RECORD OR ON-SITE REVIEW WAS UNDERTAKEN:

Summary of policy or practice changes to address issues identified based on the record or on-site review of the incident:

N/A

Recommendations for further changes in policies, practices, rules or statutes needed to address identified issues based on the record or on-site review:

N/A

Yes No Not Applicable This 90-day summary report completes the Division of Safety and Permanence (DSP) action on this case.

If the case review was not completed within 90 days, the DSP will complete and submit the final summary report within 6 months.