



February 19, 2021

Michael Queensland
Senate Chief Clerk
State Capitol, B20 SE
Madison, WI 53707

Kay Inabnet
Assistant Assembly Chief Clerk
Risser Justice Center
17 West Main Street, Suite 401
Madison, WI 53708

Dear Senate Chief Clerk Queensland and Assistant Assembly Chief Clerk Inabnet:

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 February 19, 2021. The following report(s), by report identification number, are included with this cover letter:

- 90 Day Report for 200919DSP-Milw-1021
- 90 Day Report for 150824DSP-Sauk-1022
- 90 Day Report for 200922DSP-Iowa-1023
- 90 Day Report for 200925DSP-Racin-1024
- 90 Day Report for 201105DSP-Mara-1029
- 90 Day Report for 201112DSP-Linc-1030

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 that reads "Nadya Pérez-Reyes".

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: 150824DSP-Sauk-1022 **Agency:** Sauk County Department of Human Services

Child Information (at time of incident)

Age: 1 month Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 8/24/15

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

On September 18, 2020, the agency received a report regarding a 1-month-old infant who was found unresponsive in her home and later pronounced deceased at a hospital on August 24, 2015. At the time of infant's death, law enforcement was contacted and initiated a criminal investigation. The Coroner noted no signs of trauma to the infant. No criminal charges have been filed in this case 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 to the infant by the mother. The Coroner noted no signs of trauma to the infant. The agency determined the infant's siblings safe and they remained with their 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 infant lived with her mother, her father, her 2-year-old half-brother, her 5-year-old half-sister, her 8-year-old half-sister, her 9-year-old half-brother, her 10-year-old half-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:

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 to the infant by the mother. The Coroner noted no signs of trauma to the infant. The agency determined the infant's siblings safe and they remained with their 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:

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: 200919DSP-Milw-1021 **Agency:** Division of Milwaukee Child Protective Services

Child Information (at time of incident)

Age: 15 years Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 09/19/20

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

On September 19, 2020, the agency received a report regarding a 15-year-old child who was found deceased. Law enforcement was contacted and initiated a criminal investigation. The Medical Examiner's Office determined the death to be accidental. 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 sexual abuse of the child by an unknown maltreater. The Medical Examiner's Office determined the death to be accidental. The agency determined the child's 6-year-old sibling safe and the sibling remained with the mother. The family 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):

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 15-year-old child was under a temporary physical custody order issued on September 14, 2020, due to concerns relating to neglect. At the time of the TPC order, the child was missing. The TPC order indicated the child would be placed in an approved licensed placement once located.

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 type="checkbox"/> Case remains open for services |
| <input type="checkbox"/> Placement with relatives | <input checked="" type="checkbox"/> Case closed by agency |
| <input checked="" type="checkbox"/> Ongoing Services case management | <input checked="" 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: 200922DSP-Iowa-1023 **Agency:** Iowa County Department of Social Services

Child Information (at time of incident)

Age: 3 months Gender: Female Male

Race or Ethnicity: White

Special Needs: None

Date of Incident: 9/22/20

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

On September 23, 2020, the agency received a report regarding a 3-month-old infant who was brought to the hospital on September 22, 2020. The infant was subsequently pronounced deceased on September 24, 2020. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the death to be accidental. 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 infant by an unknown maltreater. Medical professionals determined the death to be accidental. 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 infant resided with her mother and her 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.)

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 infant by an unknown maltreater. Medical professionals determined the death to be accidental. 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: 200925DSP-Racin-1024 **Agency:** Racine County Human Services Department

Child Information (at time of incident)

Age: 3 months Gender: Female Male

Race or Ethnicity: African American

Special Needs: None

Date of Incident: 09/25/20

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

On September 25, 2020, the agency received a report regarding a 3-month-old infant who was brought to the hospital, where she was later pronounced deceased. Law enforcement was contacted and initiated a criminal investigation. The Medical Examiner's Office noted no signs of trauma to the infant; toxicology 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 neglect of the infant by the mother. The Medical Examiner's Office noted no signs of trauma to the infant. The agency determined the infant's siblings safe and they remained with their mother. 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 infant resided with her mother, her 2-year-old half-brother, her 10-year-old half-brother, and her mother's boyfriend. The infant has a 9-year old half-brother, 6-year-old half-sister, and a 5-year-old half-sister who live out of state with their 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.)

On December 1, 2019, the agency screened-in a CPS Report for Alternative Response alleging abuse to the then unborn infant by the mother. An assessment was completed by the agency with the determination of services not needed. The case was closed upon completion of the Initial Assessment.

On March 22, 2018, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant's now 9-year-old half sibling and 10-year-old half sibling by the mother, the mother's sister, and the mother's 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.

On March 8, 2017, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant's now 5-year-old half sibling by the mother. 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 December 1, 2019, the agency screened-in a CPS Report for Alternative Response alleging abuse to the then unborn infant. An assessment was completed by the agency with the determination of services not needed. The case was closed upon completion of the Initial Assessment.

On September 14, 2018, the agency screened-in a CPS Report alleging sexual abuse to the infant's then 7-year-old half-sibling by an unknown maltreater. An assessment was completed by the agency with the determination of unable to locate source. The case was closed upon completion of the Initial Assessment.

On March 22, 2018, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant's then 6-year-old half sibling and 7-year-old half sibling by the mother, the mother's sister, and the mother's 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.

On January 4, 2018, the agency screened-out a CPS Report.

On March 29, 2017, the agency screened-out a CPS Report.

On March 8, 2017, the agency screened-in a CPS Report for Alternative Response alleging neglect to the infant's then 2-year-old half sibling by the mother. An assessment was completed by the agency with the determination of services not needed. The case was closed upon completion of the Initial Assessment.

On September 9, 2016, the agency screened-out a CPS Report.

On February 2, 2016, the agency screened-out a CPS Report.

On December 2, 2015, 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 insufficient evidence to substantiate neglect of the infant by the mother. The Medical Examiner's Office noted no signs of trauma to the infant. The agency determined the infant's siblings safe and they remained with their mother. 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: 201105DSP-Mara-1029 **Agency:** Marathon County Department of Social Services

Child Information (at time of incident)

Age: 2 months Gender: Female Male

Race or Ethnicity: White/Caucasian

Special Needs: None

Date of Incident: 11/05/2020

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

On November 6, 2020, the agency received a report regarding a 2-month-old infant brought to the hospital with head injuries thought to be sustained on November 5, 2020. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the injuries were consistent with non-accidental head trauma. 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 evidence to substantiate maltreatment of physical abuse to the infant by an unknown maltreater. Medical professionals determined the infant sustained injuries consistent with non-accidental head trauma. The agency deemed the infant unsafe and she was taken into Temporary Physical Custody. Upon discharge from the hospital, the infant was placed in a non-relative foster home. 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. Paternity had not been established for the infant, but the alleged father had regular visitation in the home of the mother and infant. The infant's 3-year-old brother, 5-year-old brother, and 8-year-old brother were residing in a non-relative foster home at the time of the incident.

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 infant's three siblings were under a Child in Need of Protection or Services Order related to the November 26, 2018 CPS Report. The last contact by the agency was a home visit with the mother and infant on November 4, 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 November 26, 2018, another agency screened-in a CPS Report alleging neglect to the infant's now 3-year-old brother, now 5-year-old brother, and now 8-year-old brother by the mother. An assessment was completed by the agency and the allegation of neglect was substantiated. Petitions for Protection or Services were filed on February 13, 2019. The case remains open to provide ongoing case management services.

On November 11, 2016, another agency screened-in a CPS Report alleging neglect to the infant's now 5-year-old brother by the mother. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. 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 November 29, 2017, 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 an unknown maltreater. Medical professionals determined the infant sustained injuries consistent with non-accidental head trauma. The agency deemed the infant unsafe and she was taken into Temporary Physical Custody. Upon discharge from the hospital, the infant was placed in a non-relative foster home. 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 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 checked="" 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: 201112DSP-Linc-1030 **Agency:** Lincoln 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: 11/12/2020

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

On November 12, 2020, the agency received a report regarding a 1-year-old infant found non-responsive in the home with multiple injuries. The infant was pronounced deceased at the hospital. Law enforcement was contacted and initiated a criminal investigation. Medical professionals determined the injuries were non-accidental in nature; the Medical Examiner's report and toxicology 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 to the 1-year-old infant by an unknown maltreater, and found a preponderance of the evidence to substantiate maltreatment of neglect to the 1-year-old infant and his 3-year-old and 4-year-old siblings by the mother and the father. The child's siblings were deemed unsafe, taken into Temporary Physical Custody, and placed in a non-relative foster home. 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?

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 lived with his mother, father, 4-year-old sibling, and 3-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:

At the time of the incident, the three children were under in-home Child in Need of Protection or Services Orders related to the July 15, 2019, CPS Report. The last contact by the agency was a home visit with the mother and the three children on November 11, 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 July 15, 2019, the agency screened-in a CPS Report alleging neglect against the infant and his now 3-year-old and now 4-year-old siblings by the mother and the father. An assessment was completed by the agency and the allegation of neglect was substantiated. Petitions for Protection or Services were filed on July 22, 2019, and the case remains open to provide ongoing case management services.

On January 10, 2019, the agency screened-in a CPS Report alleging neglect to the infant's now 3-year old sibling by the mother. An assessment was unable to be completed as the family was unable to be located. The case was closed due to not locating the family.

On November 2, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 3-year-old sibling by the mother and father. An assessment was completed by the agency and the allegation of neglect was unsubstantiated. 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 July 22, 2019, the agency screened-out a CPS Report.

On July 15, 2019, the agency screened-in a CPS Report alleging neglect against the infant and his now 3-year-old and now 4-year-old siblings by the mother and the father. An assessment was completed by the agency and the allegation of neglect was substantiated. Petitions for Protection or Services were filed on July 22, 2019, and the case remains open to provide ongoing case management services.

On January 10, 2019, the agency screened-in a CPS Report alleging neglect to the infant's now 3-year old sibling by the mother. An assessment was unable to be completed as the family was unable to be located. The case was closed due to not locating the family.

On November 2, 2017, the agency screened-in a CPS Report alleging neglect to the infant's now 3-year-old sibling by the mother and father. An assessment was completed by the agency and the allegation of neglect 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 insufficient evidence to substantiate physical abuse to the 1-year-old infant by an unknown maltreater, and found a preponderance of the evidence to substantiate maltreatment of neglect to the 1-year-old infant and his 3-year-old and 4-year-old siblings by the mother and the father. The child's siblings were deemed unsafe, taken into Temporary Physical Custody, and placed in a non-relative foster home. 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 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 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.