

Critical Incident Review Team Final Report



A Critical Incident Review Team is convened by the Department Director when the Department becomes aware of a critical incident resulting in a child fatality that was reasonably believed to be the result of abuse and the child, child’s sibling or another child living in the household with the child has had contact with the Department (DHS). The reviews are called by the Department Director to quickly analyze DHS actions in relation to the critical incident and to ensure the safety and well-being of all children within the custody of DHS or during a child protective services assessment. The CIRT must complete a final report which serves to provide an overview of the critical incident, relevant Department history, and may include recommendations regarding actions that should be implemented to increase child safety. Reports must not contain any confidential information or records that may not be disclosed to members of the public. Versions of all final reports are posted on DHS’ website.

CIRT ID: HRZWBU79FY		
Date of critical incident: January 17, 2020	Date Department became aware of the fatality: January 21, 2020	
Date Department caused an investigation to be made: January 17, 2020	Date of child protective services (CPS) assessment disposition: May 18, 2020	
Date CIRT assigned: January 22, 2020	Date Final Report submitted: April 28, 2020	
Date of CIRT meetings: February 13, 2020 March 31, 2020 April 29, 2020	Number of participants: 12 17 17	Members of the public? No Yes Yes

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Description of the critical incident and Department contacts regarding the critical incident:

Date of report:	Allegation(s):	Disposition:
01/17/2020 Assignment decision: Assign: 24 Hours	Neglect by Mother Neglect by temporary caregiver	FOUNDED

On January 17, 2020 the Department received a report of neglect after the thirteen-year-old child was found unresponsive and was transported to the hospital. It was reported the child's heart stopped briefly but the child was in stable condition. It was unknown what caused the child's condition. According to the report, the mother had left the child and the child's eight-year-old sibling with a family friend two weeks prior and had not resumed care. The whereabouts of the child's seventeen-year-old sibling and another eight-year-old sibling were unknown. The mother could not be located, and the family friend reported being unable to further care for the child and the sibling.

The Department responded immediately to the hospital to make initial contact, but the child died shortly before the caseworker arrived. An additional report was received at the hotline after the child's death. The child died from diabetic ketoacidosis. It was reported that the child's condition was preventable, and the child would have been showing signs of distress, such as being thirsty and sleepy in the days leading up to the child's death. The mother was reportedly contacted via phone and stated she was not aware of the child's condition and there had been no previous diagnosis. The family friend stated they did not have any paperwork from the mother authorizing them to consent to medical care on behalf of the child. It was believed the children had been separated as the family had recently been evicted and may have been homeless.

The caseworker made contact with the child's three surviving siblings and the mother on the day child died. One of the child's eight year-old siblings expressed concerns about living with the mother and also noted the sibling was aware the child hadn't been feeling well because the sibling had seen the child sleeping in the hallway at school earlier in the week. The mother denied substance use aside from marijuana. She reported the children had only been staying with friends for a short time while she sought alternate housing for the family. She did not know the family friend well, but believed they were a safe caregiver. A protective action was put in place for the children to stay with a different family friend due to concerns the mother was unable to provide safe care at the time. The protective action remained in place until January 25, 2020 when the children's fathers assumed care of them.

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An interview with the child's other eight-year-old sibling, who was staying in the same home with the child in the weeks prior shared that the child had been in significant distress in the days leading up to the child's death. The sibling described in detail the child's condition, including the child reporting back pain, thirst and lack of appetite, and asking for the mother. The sibling reported giving the child Kool-Aid to try and balance the child's blood sugar. Adults in the family friend's home were telling the child to stop making noises. The child's symptoms were reported to have started nearly two weeks prior to the child's death.

The caseworker learned that the child had been attending school during the week leading up to the child's death and on more than one occasion the child had been found sleeping during the day at school. This information was corroborated by one of the child's eight-year-old siblings, who attended the same school. The child had complained at school of being tired and hungry. School staff were unable to reach the child's mother or the family friend who the child was staying with, so the child was provided snacks and allowed to rest.

The day prior to the child's death, the family friend who was caring for the child called law enforcement because of the child's behaviors, which included some verbal defiance. Law enforcement suggested to the family friend that if the child's reported behavior was an issue of discipline, then to address at home, but if it was due to a medical issue, to seek medical treatment for the child. The family friend also contacted the mother the day prior to the child's death. When interviewed, the mother said she spoke with the child and the child did not sound well but answered questions so she believed the child must have been okay. She did not have transportation to pick up the child and the family friend refused to make arrangements to bring the child to town for a medical check-up. The following day a friend of the caregiver found the child unresponsive after the child had been alone in a bedroom for approximately three hours. The friend suggested the child needed immediate medical care and encouraged the family friend with whom the child was staying to contact emergency medical response. The family friend did so, and the child was transported to the hospital by ambulance. No one accompanied the child in the ambulance and the child was admitted without anyone knowing the child's name.

During the CPS assessment, the mother noted a family history of diabetes and stated she had checked the child's blood sugar in the past but was more concerned for the child's eight-year-old sibling who was also staying with the family friend. It was unclear how recently the mother had checked the child's blood sugar and if she shared her concerns with the family friend when the child fell ill. During the assessment, the sibling was determined to be pre-diabetic. That information was provided to the sibling's father for follow-up.

The family friend with whom the child and his sibling had been staying had recent child welfare involvement due to concerns of abuse of their own children. One of the family

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friend's children ultimately left the home due to allegations of ongoing mental injury and did not return.

This assessment was closed with a founded disposition for neglect of the child by both the mother and the family friend with whom the child had been staying.

Description of relevant prior Department reports:

Date of report: 06/27/2002 Assignment decision: Assign: 5 Days	Allegation(s): Neglect by Mother	Disposition: No Allegation of Abuse/Neglect
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On June 27, 2002 the Department received a report alleging that the child's older sibling, who was two-months-old, was not being fed or bathed regularly and was placed in a swing for most of the day. It was also reported the mother was breastfeeding while taking several medications.

It was determined by the local office the report did not meet criteria for an assessment and it was closed without contact being made.

Date of report: 01/06/2004 Assignment decision: Assign: 24 Hours	Allegation(s): Threat of Harm by Mother Physical Abuse by Mother	Disposition: Unfounded Unfounded
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On January 6, 2004 the Department received a report alleging physical abuse and threat of harm of the child's older sibling, who was 21 months old, by the mother. The reporter said they witnessed the mother spank the sibling very hard and on one occasion the spanking left a bruise on the sibling's right leg. Additionally, it was reported the sibling was recently observed with a bruised and swollen torso. The mother's roommate stated the child had fallen off a coffee table.

A CPS caseworker was assigned and contacted the family. The home was observed to be cluttered, but no safety concerns were identified. The mother denied the allegations and reported the sibling had no injuries. The sibling was present and had no visible

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injuries. The sibling was noted in the documentation to be clean, happy and healthy. The mother denied any form of physical discipline and described her discipline approaches to be timeout, sitting on the couch or standing in the corner. The mother believed the report to be a form of retaliation due to a family dispute. The father was in the military at the time of this assessment and was not contacted.

The Department determined the allegation was unfounded for physical abuse and threat of harm.

Date of report:	Allegation(s):	Disposition:
07/06/2004	Threat of Harm by Unknown Perpetrator	Unfounded
Assignment decision: Assign: 24 Hours	Sexual Abuse by Unknown Perpetrator	Unfounded

On July 6, 2004 the Department received a report of sexual abuse and threat of harm to the child's older sibling, who was two years old, by an unknown perpetrator. The sibling was reported to have an injury to their genital area and surrounding area and had been at the mother's home. It was reported that these injuries were not present when the sibling was dropped off at the mother's home by the father three days earlier.

Initial contact occurred with the assistance of law enforcement at the father's home. A relative had been changing the sibling's diaper and noticed the injuries. The father reported that when he picked up the sibling from the mother, the sibling had dried feces up their back, their diaper was full, and they had a diaper rash. The caseworker and law enforcement observed the sibling and did not see any injuries. The sibling was noted to be clean and physically healthy. The father was advised to contact a doctor.

The mother was contacted and reported the sibling had been constipated but there were no injuries on the sibling that the mother observed. During this contact the Department identified the mother's boyfriend, who was residing in the home, as an unsafe individual. The mother was informed of this and advised that if he were to continue to reside in the home, there would be safety concerns for the sibling. The mother was upset but agreed to have her boyfriend leave the home.

The Department closed the assessment as unfounded as there were no physical signs of abuse and no disclosures made by the sibling.

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Date of report: 07/20/2004 Assignment decision: Closed at Screening	Allegation(s): Sexual Abuse by Third Party	Disposition: Not Applicable
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On July 20, 2004, the Department received a report that the child's older sibling, who was two years old, may have been sexually abused by the mother's boyfriend. There were no further details given. The 7/6/04 assessment was pending at the time of this report.

The report was closed at screening. The screening decision narrative indicated there was no identified safety threat and no disclosures by the child. The assigned CPS caseworker was consulted and stated there was no evidence of sexual abuse.

Date of report: 09/03/2010 Assignment decision: Closed at Screening	Allegation(s): Threat of Harm by Third Party	Disposition: Not Applicable
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On September 3, 2010, the Department received a report alleging the child's older sibling, who was eight years old, was being cared for by unsafe individuals while the sibling's father was working. It was reported the father was previously informed that these individuals were not safe, and that these individuals had their own children removed from their care.

The report was closed at screening with the decision it did not meet criteria for assignment.

Date of report: 11/28/2010 Assignment decision: Assign: 24 Hours	Allegation(s): Threat of Harm by Mother Neglect by Mother	Disposition: Unfounded Unfounded
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On November 28, 2010 the Department received a report alleging neglect and threat of harm by the mother. According to the report, the mother was diagnosed with Bi-Polar Disorder but was not on medication due to the financial cost. Instead, she was smoking marijuana to control her symptoms. She was reported to have some good days where she treated the children well, but on her bad days she would close herself in her bedroom, tell the children to leave her alone and spend the entire evening smoking marijuana and listening to music. It was reported she smoked marijuana in front of the children and there had been times the children were not regularly fed or provided with adequate supervision due to the mother's condition. The home condition was reported to be very concerning, with feces and trash everywhere.

Initial contact occurred with the child's older, eight-year-old sibling at school. The sibling provided significant detail about their day-to-day life and reported spending time between both parents' houses. The sibling reported that the mother made dinner regularly and all the children had normal, regular bedtimes. The sibling stated the mother went to her room sometimes and told the children not to bother her, because she needed some time to herself, but that the sibling could interrupt if needed. The sibling did not know what marijuana or alcohol were. The caseworker observed the mother's home to be adequate with no safety hazards present. The mother denied smoking marijuana but reported her ex-boyfriend did. The mother reported she had a restraining order against the ex-boyfriend due to his behavior towards the children, as well as some physical violence toward her. The mother showed the caseworker the medication for her mental health diagnoses. The mother stated she recently found out she was pregnant, so she was working with her doctor to find appropriate and safe medication.

During the home visit, the child, who was four years old, and the child's other sibling, who was two years old, were observed. The child refused to speak with the caseworker. The child was observed to be healthy, clean and attached to the mother. The caseworker attempted contact via phone and mail with the fathers for the children as well as the mother's ex-boyfriend but was unsuccessful.

The assessment was closed as unfounded and the children were determined to be safe.

Date of report: 07/10/2019	Allegation(s): Neglect by Mother	Disposition: Unfounded
Assignment decision: Assign: 24 Hours		

On July 10, 2019 the Department received a report alleging neglect. The reporter had recently been to the home looking for an unrelated teenager and found the child home

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alone. The child was confrontational and did not want to answer any questions when asked to get an adult. There were several cots observed in the garage and it appeared individuals were living in it. The reporter believed the mother was using methamphetamine and prescription medications. A second reporter informed the Department that the mother's children were the ones living in the garage, while another family was residing in the home.

Initial contact occurred at the home with the mother and all of the children. The home did not have any obvious health or safety hazards. The mother refused to allow the caseworker to interview any of the children but did allow the caseworker into the home to see them. The children were observed to be clean and physically healthy and got along well with one another. The mother denied all allegations in the report. The worker noted concerns about the mother's appearance possibly being consistent with methamphetamine use. When asked, the mother said that she had a medical issue, which accounted for her appearance, not methamphetamine use. She reported two other adults, as well as her own mother lived in the home. The mother would not provide contact information for the two other adults and did not want them involved in the assessment. The mother confirmed she and the children were residing in the garage and showed the caseworker the area, stating they would soon be moving into their own residence.

Collateral contact occurred with the maternal grandmother, who was also residing in the home. She voiced no concerns for the safety of the children nor any of the mother's behaviors. The maternal grandmother denied ever seeing any drugs in the home and did not suspect the mother of using drugs. She denied the children were ever left alone, as multiple adults were always in the home. Contact with the fathers and the mother's ex-boyfriend was attempted but was not successful.

The mother believed the allegations stemmed from the sibling's romantic partner's mother. The mother stated that the other mother was upset with her because she allowed the romantic partner to stay the night at the home one time. The mother was very upset the Department was involved in her family.

This assessment was completed using the abbreviated assessment protocol and closed as unfounded.

Date of report: 08/26/2019	Allegation(s): Threat of Harm by Child	Disposition: Unable to be Determine
Assignment decision: Assign: 24 Hours	Neglect by Mother	Unfounded

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On August 26, 2019, the Department received a report concerning neglect and threat of harm to the children. The family was living with the maternal grandmother, as well as another family. During a recent assessment on the other family in the home, that family's four-year-old child disclosed sexual abuse by the child, who was thirteen years old. The mother was notified of this disclosure and was forced out of the home by the maternal grandmother. The mother and the children's whereabouts were unknown.

The assigned caseworker was able to find an address for the family and contacted the mother and the children. The mother informed the caseworker she was working on getting the child into counseling immediately. The mother acknowledged she was on medication for her mental health and stated that she was a very different person when not taking her medication.

In the companion case, the child was found to be a perpetrator of sexual abuse against the unrelated four-year-old. None of the child's siblings made any disclosures of sexual abuse occurring by the child nor did the unrelated child living in the new household. The child did not admit to the sexual abuse allegations but made several concerning statements about the incidents when interviewed. No charges were filed regarding the abuse, but it was recommended the child be actively engaged in counseling.

The Department was unable to determine if the child was a threat of harm to the siblings in the home. Although the child was found to be the perpetrator of sexual abuse to an unrelated child, there were no disclosures of inappropriate sexual behaviors by any other child in the home. The mother agreed to get the child into counseling immediately.

The Department determined the mother did not neglect the children. She was unaware of any sexual behaviors by the child until informed by the unrelated child's mother. The mother presented as appropriately concerned and set up rules in the home to ensure adequate supervision and child safety.

Description of concerns regarding actions taken or not taken by the Department or law enforcement agencies in response to the critical incident or events that led to the critical incident:

The CIRT did not have concerns regarding actions taken or not taken by the Department or law enforcement. Contact with the family was sporadic over a period of 17 years and there had been no previous concerns regarding the children's health or medical care.



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Recommendations for improvement in the administration and oversight of the child welfare system that are specific to the critical incident and any historical information reviewed by the team:

The CIRT did not have any recommendations.