



pennsylvania
DEPARTMENT OF HUMAN SERVICES

REPORT ON THE NEAR FATALITY OF:

[REDACTED]

BORN: June 8, 2006

DATE OF INCIDENT: January 1, 2013 to June 6, 2014

DATE OF ORAL REPORT: June 6, 2014

FAMILY WAS KNOWN TO:

Mercer County Children and Youth Services

REPORT FINALIZED ON:

6/23/15

This report is confidential under the provisions of the Child Protective Services Law and cannot be released.

(23 Pa. C.S. Section 6340)

Unauthorized release is prohibited under penalty of law.

(23 Pa. C.S. 6349 (b))

Reason for Review:

Senate Bill 1147, Printer's Number 2159 was signed into law on July 3, 2008. The bill became effective on December 30, 2008 and is known as Act 33 of 2008. As part of Act 33 of 2008, DHS must conduct a review and provide a written report of all cases of suspected child abuse that result in a child fatality or near fatality. This written report must be completed as soon as possible but no later than six months after the date the report was registered with ChildLine for investigation.

Act 33 of 2008 also requires that county children and youth agencies convene a review when a report of child abuse involving a child fatality or near fatality is indicated or when a status determination has not been made regarding the report within 30 days of the oral report to ChildLine. Mercer County did not convene a review team in accordance with Act 33 of 2008 related to this report.

Family Constellation:

<u>Name:</u>	<u>Relationship:</u>	<u>Date of Birth:</u>
[REDACTED]	Victim Child	06/08/06
[REDACTED]	Mother	[REDACTED]/86
* [REDACTED]	Father	[REDACTED]/87
[REDACTED]	Natural father of [REDACTED]	[REDACTED]/73
* [REDACTED]	Father of [REDACTED]	[REDACTED]/82
* [REDACTED]	Father of [REDACTED]	[REDACTED]/62
[REDACTED]	Half- Sister	[REDACTED]/03
[REDACTED]	Half -Brother	[REDACTED]/05
[REDACTED]	Sister	[REDACTED]/09
[REDACTED]	Sister	[REDACTED]/14
[REDACTED]	Maternal Grandmother	[REDACTED]/66
[REDACTED]	Maternal Step-Grandfather	[REDACTED]/55

*indicates that these individuals did not reside in the same residence as the victim child.

Notification of Child (Near) Fatality:

Mercer County Children and Youth Services (MCCYS) initially received a General Protective Services (GPS) referral on 06/06/2014 regarding a child who was described as a "walking skeleton". The agency instructed the mother to take the child to University of Pittsburgh Medical Center Hospital in Greenville, Pennsylvania. The hospital described that the child looked like a "Holocaust victim" and he was transported via ambulance to Children's Hospital of Pittsburgh (CHP). He was admitted to the CHP. The mother claimed the child had a metabolic condition which was found to be untrue. While the child was hospitalized he gained 5 pounds. The child [REDACTED] on 06/13/2014. The treating physician, from Children's Hospital [REDACTED] that the child was within 2 weeks of dying, and that he would

have died had he not received any care. The treating physician certified that the child suffered serious bodily injury as a result of starvation. A supplemental report was initiated to upgrade the Child Protective Services (CPS) to a near fatality on June 18, 2014.

Summary of DHS Child Near Fatality Review Activities:

The Western Region Office of Children, Youth and Families (WROCYF) obtained and reviewed all current records pertaining to the family. Follow up interviews were conducted with the Supervisor and the Agency Director. The WROCYF Human Services Program Representative made a mistake and informed the county that they did not need to conduct a Multi-Disciplinary Team meeting due to the county completing the CY-48 within 30 days of the date of the oral report. This was incorrect information due to the report being INDICATED. The County will be conducting a meeting on April 8, 2015.

Children and Youth Involvement prior to Incident:

MCCYS received a GPS referral on 2/22/2008 due to the poor home conditions. The report pertained to the mother, the child and his half-brother. The home was in no condition for the children to continue to live there until it was cleaned. The mother made arrangements for them to go and stay at the maternal grandmother's home. The county completed the necessary checks for the children to go stay there. The agency obtained the children's medical records. The records reflected that the two boys were not up to date on their immunizations. The case was opened and accepted for services and referrals were made for parenting and homemaking services. The mother was not very cooperative in meeting with the providers at first but eventually she made herself accessible to the service providers. The family moved from one town to another town within the county, the services remained in place after the move. The worker went to the home for a final visit. The home was clean and all children were up to date with the medical immunizations. The case was closed on 2/5/09.

The County received another referral on 5/2/2012 stating that the child has a learning disorder. The maternal grandmother (MGM) reportedly calls the child names like retard and stupid S.O.B. The MGM hits the child, and said she was going to smash the child's head into the wall. The child is kept in his room all the time when not in school. The child can only come out to use the toilet and eat. The MGM came back from 2 days out drinking. The maternal grandfather smokes weed. The mother does not say anything about the discipline. The referral source believes that the child has [REDACTED] developmentally slow. He plays with small kid's toys and seeks out younger kids to play with. The agency found that there was no merit to the allegations. However, after further assessment and receipt of the medical records it was noted that the child had not made it to the doctors in quite some time. The mother reported she owed money to the doctor and did not have any money to pay the bill. Alternate ways to pay the bill were discussed and she stated she would make an appointment. The home conditions were fine and there were no concerns for safety hazards in the home and plenty of food was noted. The children were all interviewed at

school and no issues were noted. It was determined that until all medical information is received and reviewed the case would remain open in assessment. The caseworker stated she sent out releases to the schools and doctor for the children. The caseworker stated there were no child abuse or neglect concerns with the children in school. The child's school report details concerns with his eating habits and low weight. The caseworker stated she suggested mother communicate with the school as much as possible so they understand his unknown condition and the measures she is taking to try to help him. Caseworker stated she received additional medical information and there were no concerns for medical neglect.

The agency received another referral on December 12, 2012 the report states that the child is locked in a room with a dog and is only fed beans and hot sauce. Reportedly, the dog goes to the bathroom in the room and the dog bites the child. The father cannot see the children because of a Protection from Abuse order. All of the children were interviewed at the school and it was determined that there was some validity to the report. The home visit occurred and the conditions of the child's room were cleaned and the dog was no longer living in the home but in the garage. There was an assessment completed on the child concerning his eating disorder and it was determined that it was not a mental health issue. There were no other concerns and the case was closed on 1/05/2013.

The caseworker contacted the child's elementary school and learned that child had been having regular weight checks and appeared to be appropriately gaining weight while attending school. However, the child and his two half-siblings were withdrawn from the school in August of 2013 and started to be home schooled [REDACTED] Cyber School for the 2013-2014 school year. Weight checks did not occur while [REDACTED] was attending Cyber School.

Circumstances of Child Near Fatality and Related Case Activity:

On June 6, 2014, the Agency received a referral alleging that on the previous evening, an individual observed two children, both appearing to be well nourished, playing outside of their residence. The referral source had seen these two children playing outside on multiple occasions. The referral source observed a third child playing outside who they had never seen before. This individual stated that the child was a "walking skeleton" and looked to be about five-years-old. The referral source was unable to provide any names, but did give the address. She informed the caseworker that they contacted the [REDACTED] Police Department on June 5, 2014. The Agency contacted the [REDACTED] Police Department in an attempt to gather more information about the referral. The caseworker informed the [REDACTED] Police that the family's last name was unknown, but that an address was provided and the referral source also informed the caseworker that they contacted the police on the evening of June 5, 2014. The [REDACTED] Police informed the caseworker that an officer was sent out to the residence on June 5, 2014, but it appeared that no one was home. The police did not have any other information regarding the family. The case was assigned to an intake worker to go and investigate. The caseworker accompanied by another caseworker went to the home unannounced, when they knocked on the door, the caseworkers heard footsteps running down the inside stairs, however no

one came to the door. The caseworker knocked several times on the front door and on a side door for 5-10 minutes. It was not until the mention of the Police being called did someone answer the door.

It was reported that upon entering the residence the caseworker asked to see the children and initially observed three healthy looking children. After requesting to speak with the mother, the caseworker observed the child being brought downstairs and he appeared to be emaciated and sickly. The mother reported that the child had a [REDACTED] and had been seeing [REDACTED] at Children's Hospital of Pittsburgh but had not done so in approximately one year due to a change in insurance. She advised the children recently changed pediatricians and denied the children had been seen recently. The mother indicated she had been getting "the run around from doctors." The mother reported that the child began to experience diarrhea in May 2014 and this was when he started to lose weight. She also stated that the child made himself sick by sticking his fingers down his throat to induce vomiting and that he ate constantly. The mother admitted she had not sought medical treatment for the child. The child stated that he ate three meals a day and his stomach was "not feeling well."

During the home visit, the caseworker contacted both pediatrician offices that the mother said that she took the children too. It had been reported that the child had [REDACTED] in 2011. This doctor's office stated that as of June 6, 2014, the child was last seen in June 2013, for [REDACTED]. Prior to this visit he had been seen in May 2013 for [REDACTED]. The child's last recorded weight was on November 1, 2012 and he weighed 36 pounds.

The second doctor's office confirmed that the children were transferred to her care from the previous pediatrician. As of June 6, 2014, the child was last seen by this pediatrician on September 12, 2013 and weighed 33 pounds and was 42 inches in height. It was reported by the mother that the child eats "strange things" and has eaten out of the garbage. The office nurse reported that the child's sister and brother were also seen in September 2013 when the mother requested a [REDACTED] for the child's half-brother because he had been snoring and his half-sister had a cat bite. The child's sister had not received medical care.

After speaking to the doctors, the caseworker drove the child and his mother to a local hospital due the child's condition. Upon exam the child weighed 25 pounds. The [REDACTED] found the child was "so emaciated he looks like a Holocaust survivor." He had "multiple skin abrasions", not characteristic of abuse, but not well cared for. The [REDACTED] advised MCCYS that the fact that the child would be turning 8 years old on June 8, 2014 and weighed 25 pounds "**constitutes medical neglect.**" There were [REDACTED] The child's laboratory results [REDACTED] stated that in her opinion, "**this young man is a product of severe neglect if not abuse.**" The child was transferred to Children's Hospital of Pittsburgh via ambulance for further medical care. The child was admitted to Children's Hospital of Pittsburgh. [REDACTED]

██████████ at this hospital stated that she had never seen a case like this in her 26 years of practicing medicine. She stated that the child had not been to the dentist since he was a toddler and the doctor could not tell if he had adult teeth or baby teeth. She stated that he weighed 36 pounds in September 2013 and his mother was not alarmed that he lost 1/3 of his body weight since that time.

The caseworker requested that the family transport the other children to the ██████████ ██████████ local hospital to be seen which the family did do. The other children appeared to be healthy, although, there were concerns with the child's brother's size. It was suggested that he follow up with his pediatrician in one week to evaluate his growth.

██████████ After the worker contacted her Supervisor and discussed the case it was determined that a more thorough investigation at the home was necessary, another caseworker went with the ██████████ Police to go through the home. It was then determined that the removal of the other 3 children was necessary due to the Agency unsure of who the perpetrators were that starved the child. All 3 children were removed and placed in a private provider foster home.

June 18, 2014:

The report of abuse was called into ChildLine listing the mother as the perpetrator of abuse, and a supplemental report was called in later that evening outlining the medical condition of the child.

The Agency contacted Children's Hospital of Pittsburgh. It was reported that the child was a victim of **medical neglect and profusely under-nourished**. The child gained 1 kilogram (2.2 pounds) from the time he was admitted to CHP on June 6, 2014. ██████████

██████████ The Agency made contact with the father and he stated he has not seen his children in 8 months and wants what's best for them. He stated where he lives right now does not have enough space for all of the children and that he would like his mother to care for them.

Children's Hospital of Pittsburgh reported to MCCYS that the child had ██████████ ██████████, the child would be able to demonstrate more caloric intake. ██████████ physician stated that there were multiple factors as to why the child was in his severe condition and that not being fed was a major contributor. She further stated that his condition was a result of medical neglect. ██████████ physician stated that the child will experience long term short brain development and will take years to catch up to where he is supposed to be and his physical growth would be affected, as well. She stated that this was "child abuse by medical neglect." ██████████ physician stated that this has been over approximately one year that he has become so emaciated. She believes that he was doing well until he was pulled from school and reported that child could not have become this emaciated in one

month. The child had gained 3.5lbs since his admission. He weighed 30lbs 10oz on June 9, 2014. [REDACTED] physician stated that this was "egregious behavior" from any adult to see a child in this state and not report it or seek medical treatment. She stated that this was "reprehensible." She was going to call ChildLine to certify this as a Near Fatality due to the child being within a few weeks of going into cardiac Arrest and dying. [REDACTED] physician recommended that the child [REDACTED] should not be placed with his siblings due to the potential display of troubling behaviors.

The child [REDACTED] to an agency foster home. A referral to the [REDACTED] and an appointment for him to see his Primary Care Physician in 1 week was made. He was scheduled for a [REDACTED] interview in approximately 1 month. He was also scheduled for an [REDACTED] appointment in 4/6 months.

The Mercer County District Attorney's Office Detective stated that mother, grandmother and step grandfather were being charged with false imprisonment of a minor, unlawful restraint of a minor, aggravated assault, endangering the welfare of a child and conspiracy to all charges

[REDACTED]

[REDACTED] A supplemental report was called into ChildLine listing the maternal grandparents as Alleged Perpetrators of Physical Abuse. [REDACTED]

[REDACTED]

On June 26, 2014 the child did have a forensic interview at the Children's Hospital [REDACTED]. During this interview, he provided some information pertaining to his treatment but did not go into full detail about the abuse.

The Child Protective Service Investigation Report was completed on 7/2/14. The finding was INDICATED on the mother, maternal grandmother and the maternal grandfather.

Current Case Status:

[REDACTED]

At the end of August 2014, the child was moved from his original foster home to another foster home due to the health conditions of the original foster parents. Upon moving into

the new foster home, the child started the second grade at a local elementary school, he was tested and the test placed him in the 2nd grade. A team meeting was held with the agency, the child's [REDACTED] and the school to ensure that the child's needs were being met.

The child's foster mother reported that while in the car talking with the child; he told her that he hated his mom and especially his grandma because they are very mean.. He then asked if he could tell her a secret. The child said that when he was five he broke his leg and told the doctor that he broke it by sitting on the window sill looking at the birds and falling off but that was not really what happened. The child said what really happened was his grandmother was mad at him, so she just kept kicking his leg until it broke. The Agency reported this information to the investigating detective of the Mercer County District Attorney's Office.

[REDACTED]
[REDACTED] Visitation between the child and his father could begin, and that all of the children could start visitation with their natural fathers. [REDACTED]
[REDACTED], as his health stabilized and his weight was at 52.6 pounds. MCCYS reported that the child and his father were having contact during therapy sessions. The child had also started visitation with his sister.

December 2014:

The mother completed a [REDACTED]
[REDACTED]
[REDACTED]

[REDACTED] there was no reason that MCCYS should not proceed with its efforts to reunify the father with his children. She reported that [REDACTED]
[REDACTED] that the reunification should precede slowly over a six month period.

The child attended an appointment with the [REDACTED] at Children's Hospital of Pittsburgh who stated that the child's weight had dramatically improved. The child should continue to have a daily supplement of Vitamin D and a follow-up appointment should be scheduled in 4 months. The child also had a follow-up visit at the [REDACTED]
[REDACTED], Children's Hospital of Pittsburgh. [REDACTED] The recommendation from this appointment was that the child did not need medications or treatments at this time. A follow-up should be scheduled in one year.

[REDACTED]

February 6, 2015

The natural mother pled guilty pursuant to a plea agreement to count seven being a felony of the first degree and Aggravated Assault on a seven-year-old child in violation of 18 P.S. Section 2702 (a) (9).

The grandmother, pled guilty pursuant to a plea agreement to Aggravated Assault, as well.

The grandfather, pled guilty to Endangering the Welfare of a Child.

The sentencing will take place sometime in April of 2015.

The long term plan for the child and his sister is reunification with father and concurrent goal of adoption. His two half-siblings also have a current goal of reunification with a concurrent goal of adoption. MCCYS will [REDACTED] for all of the children involved in the case. The child's foster parents and his [REDACTED] are working with him on the victim impact statement for him to present during the sentencing hearing for his Perpetrators of Abuse. The child's half-brother's father states he is not in a position to take custody of him at this time. The child's half-sister's [REDACTED]; the plan of the county is that her current foster mother will adopt her.

The Agency will also continue to monitor the child's health and progress.

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

Act 33 of 2008 also requires that county children and youth agencies convene a review when a report of child abuse involving a child fatality or near fatality is indicated or when a status determination has not been made regarding the report within 30 days of the oral report to ChildLine. Mercer County has not convened a review team in accordance with Act 33 of 2008 related to this report. The regional HSPR made a mistake and informed the county that they did not need to conduct a MDT meeting due to the county completing the CY-48 within 30 days. This was incorrect due to the report being INDICATED. The County will be conducting a meeting on April 8, 2015.

- Strengths: N/A
- Deficiencies: N/A
- Recommendations for Change at the Local Level: N/A
- Recommendations for Change at the State Level: N/A

Department Review of County Internal Report:

No report has been received from the County at this time; there will be one after they completed the Act 33 meeting. The regional HSPR made a mistake and informed the county that they did not need to conduct a MDT meeting due to the county completing the CY-48 within 30 days. This was incorrect due to the report being INDICATED. The County will be conducting a meeting on April 8, 2015.

Department of Human Services Findings:

- County Strengths: The County immediately responded to a referral concerning a child that looked like a “walking skeleton”. The county assigned this referral and contacted the local police department in the area since they only had an address and no family name. Upon arriving at the home the worker knocked on the front door and then the side door for over 5-10 minutes. The worker heard a noise coming from the inside and spoke to the other caseworker with her and stated she was calling the police, at this time the mother opened the door. The caseworker then transported the child and the mother to a local hospital in order for the child to receive medical care. The worker’s persistence saved the child’s life. MMCYS worked cooperatively with the hospitals, law enforcement, contracted and private agencies to ensure that the children received the services that they needed. Foster homes were found for the children in a timely manner. The agency found the children’s respective fathers and engaged them to work on planning for their children. The agency has participated in team meetings to ensure that the child receives the services that he needs. MCCYS completed all the required case documentation in a timely manner.
- County Weaknesses: none
- Statutory and Regulatory Areas of Non-Compliance:

No areas of non-compliance

Department of Human Services Recommendations:

The agency needs to continue to be persistent in ensuring safety of children. The caseworker heard a noise within the home and continued to attempt to get an individual to open the door. In addition, the caseworker continued to asked questions regarding the child’s health and verified the information that was being relayed. This shows best practice and should be used as an example for all new caseworkers.