2015 2nd Quarter Fatalities/Near Fatalities
April 1 – June 30, 2015

Fatalities

Delaware County

1. On February 3, 2015, a 2-year-old male child died as a result of physical abuse. Delaware County Children and Youth Services (DCCYS) indicated the report on April 2, naming the mother and her paramour as the perpetrators. On the day of the incident, the mother’s paramour was caring for the child while the mother was at work downstairs at a physician’s office. The child was reportedly left in a bathtub unattended and was found face down by the mother’s paramour. The paramour took the unresponsive child downstairs to the physician’s office and emergency medical services were contacted.

The child was taken to Taylor Hospital, where he was pronounced dead. The child had injuries that prompted suspicions of physical abuse, including: bruises on all his extremities in various stages of healing; older bruises on his head and both the left and right torso; and fresh bruising on the perirectal. The cause and manner of the child’s death is still under review, and the final autopsy is pending. At the time of the incident, DCCYS was investigating a previous incident of physical abuse to the child by the mother’s paramour, which was received in January 2015. DCCYS had put a plan in place with the mother to ensure the safety of the child and his sibling; the paramour was not allowed to be in the home or around the children. The mother’s paramour acknowledged that DCCYS was at the home the day before the child’s death and he did not let the worker in because the worker would have seen the injuries to the child. The mother reported that she had moved the paramour back into the home about two weeks prior and failed to notify DCCYS. During the investigation, DCCYS was informed that the child had an injury to his face the week preceding his death. No explanation was provided for the injuries to the child.

The child’s 6-year-old sibling is residing with his biological father, who filed for and was granted emergency custody. The sibling had a physical examination and there were no signs of abuse or neglect. The family was provided General Protective Services (GPS) by DCCYS to assist the family with the funeral and setting up grief counseling. The family was known to DCCYS prior to the January 2015 investigation. DCCYS received a GPS referral in September 2014 alleging concerns for substance abuse by the mother. DCCYS was unable to validate these concerns and ended their services with the family. A second referral was received in October 2014 alleging the same concerns. DCCYS did not reopen an investigation as these concerns were addressed in the previous referral. The mother and her paramour were arrested on February 24, 2015, and charged with endangering the welfare of a child and recklessly endangering another person. Both remain incarcerated and awaiting trial.

Lehigh County

2. On May 9, 2015, a 1-year-old male child died as a result of physical abuse. Lehigh County Office of Children and Youth Services (LCOCYS) indicated the report on June 30, naming the child’s mother as the perpetrator. On May 3, 2015, the
mother threw the child from the Hamilton Street Bridge in Allentown into the river. She then jumped into the river. The child was placed on life support at a local medical facility after being rescued from the river. The child’s mother was treated and released from medical care. On May 9, the child was taken off life support and subsequently died from injuries sustained when he was thrown from the bridge. The child had no siblings. The family had no previous involvement with LCOCYS, but the child’s mother had involvement with Chester County Department of Children, Youth and Families as a child. She was reportedly in specialized foster care for several years prior to aging out of the child welfare system at the age of 18. The mother is incarcerated at Lehigh County Prison awaiting trial. She has been charged with homicide.

Lycoming County

3. A 1-year-old male child died on May 5, 2015, as a result of physical abuse. Lycoming County Children and Youth Services (LCCYS) indicated the report on June 17, naming the mother’s paramour as the perpetrator.

On the day of the incident, the child was taken to Jersey Shore Hospital by the paramour, who reported that he had dropped the child, causing him to hit his head and become unresponsive. The child was sent by helicopter to Geisinger Medical Center. The child died later that night in the pediatric intensive care unit after undergoing surgery to try to relieve the compression on his brain from a large subdural hematoma. The child suffered severe cranial and spinal cord injuries, which were bilateral and a result of a significant level of force. The attending physician determined the child’s death to be a non-accidental trauma. This determination was made as the medical findings did not coincide with the explanation of the injuries. Later autopsy findings showed internal bruising and bleeding in the child’s mid-section, particularly the liver and pancreas.

The mother was at work when the incident occurred. She noted that her paramour would often care for the child while she was working and she did not believe that he would intentionally harm the child. The mother’s paramour provided various different accounts of what happened to the child, which included: tossing the child in the air and not catching him; and performing wrestling moves with the child by attempting to slam him onto the bed, but missing the bed. The mother’s paramour’s sister, her paramour, and her three children were also living in the home with the family. The sister’s paramour was in the shower at the time of the incident and did not witness what happened, but tried to resuscitate the unresponsive child when the child was brought to his attention. He then drove the child and the mother’s paramour to the hospital. Neither the child’s mother nor the mother’s paramour had any other children residing in the home. LCCYS was able to ensure the safety of the mother’s paramour’s sister’s three children and the children were able to remain with their caregivers in the home. The mother was offered supportive services and was able to secure counseling. This family was known to LCCYS. In July 2014, a General Protective Services (GPS) referral was received regarding unsanitary and unsafe home conditions. These allegations were not able to be validated, so LCCYS ended its involvement with the family. Another
GPS referral was received in January 2015 regarding similar concerns for the condition of the home and that the mother was not feeding the child. LCCYS made numerous attempts to meet with the family and discovered that they had relocated to Clinton County. A referral was made to Clinton County Children and Youth Services (CCCYS). CCCYS was not able to validate the concerns and closed the case in mid-February. The mother’s paramour is incarcerated in Lycoming County Prison on charges that include involuntary manslaughter, aggravated assault, and reckless endangerment. He is awaiting trial.

Northampton County

4. A 1-year-old female died on February 24, 2015, as a result of physical abuse. Northampton County Children, Youth and Families Division (NCCYFD) indicated the report, naming the mother’s paramour as the perpetrator. On February 24, paramedics responded to a call that the child was choking on a hot dog. The child was rushed to Palmerton Hospital, where she was pronounced dead. The child presented with other medical issues that indicated possible neglect. The child had an injury to the tip of her thumb, a healing injury on her chin that may have needed stitches, and she appeared to be underweight. Paramedics and hospital staff reported no evidence that the child had choked on a hot dog. The coroner reported that the child had a skull fracture to the back of her head from right to left and there was massive hemorrhaging. The apparent cause of death was blunt force trauma.

NCCYFD worked collaboratively with law enforcement to investigate the incident. The mother reported that her paramour had moved in with the family about a week before the incident and had been assisting her by watching the children while she went to work. On the day of the incident, the mother reported that the child was fine when she left for work. The mother’s paramour was then left to care for the children. He reported that the child was in her highchair eating and he left the room to go assist the other children. He said when he returned to the room, he found the child slumped in her chair appearing to be asleep. The mother’s paramour stated he took the child out of the highchair and she appeared to be foaming at the mouth and was unable to stand. The mother’s paramour reported that he was unable to find the child’s heartbeat and contacted 911. The child’s 2-month old and 3-year-old siblings and the paramour’s 4-year-old son were also residing in the home at the time of the incident. NCCYFD noted safety concerns in the family’s residence and took protective custody of all three children. The children also received medical exams. The 2-month-old sibling was diagnosed with a skull fracture, femur fracture, frenulum tears, and failure to thrive. The mother and her paramour were indicated as perpetrators for causing bodily injury to this sibling. The older sibling was evaluated and is receiving services for a speech delay. The paramour’s child was treated for severe tooth decay and numerous cavities. The child’s siblings are in foster care while the paramour’s child is in placement with kin. The mother and her paramour are receiving parenting education services and visitation facilitation. The mother and her children were not known to NCCYFD, but the mother’s paramour and his son were known to Monroe County Children and Youth Services (MCCYS). In July 2012, MCCYS received a report regarding the mother’s paramour’s wife. The
report alleged that the paramour’s wife had substance abuse issues and that she was not appropriately caring for their child. MCCYS did not provide any services to the family. The case was referred to custody court, where the issues were resolved. A criminal investigation is pending.

Northumberland County

5. On October 13, 2014, a 9-year-old male child died due to ingestion of drugs and alcohol. Northumberland County Children and Youth Services (NCCYS) indicated the report on May 29, 2015, naming the child’s mother as a perpetrator for failure to act and the child’s babysitter as a perpetrator for the act of providing drugs and alcohol to the child.

The child and his 13-year-old brother were spending the night with the caretaker on October 12, 2014. The child was found deceased on the morning of October 13. An autopsy was completed and the child was found to have alcohol and a high level of oxycodone in his system. NCCYS became aware of the final autopsy findings, triggering the fatality investigation in late March 2015, when the caretaker was charged and arraigned on felony counts of involuntary manslaughter, drug delivery resulting in death, aggravated assault, and recklessly endangering another person. During the investigation, NCCYS received information that the caretaker had previously given the child and his brother drugs and alcohol and the children’s mother had been aware of this. The caretaker, who was incarcerated at the time of the investigation due to previous charges, refused to meet with NCCYS to discuss the incident. NCCYS was able to interview the mother, who denied having any knowledge that the caretaker was providing drugs or alcohol to her children, but did state that she was aware of the caretaker having a long criminal history reportedly dating back to the 1970s, including charges for serving alcohol to minors. In December 2014, concerns that the caretaker had sexually abused the child and his brother were indicated. The child’s sibling continues to receive services from NCCYS and is in the legal custody of his paternal grandmother. He is receiving services to address mental health needs and behavioral concerns. NCCYS first became involved with the family in 2004. There were allegations that the child’s father was physically aggressive with the brother. The brother’s behaviors were very difficult to manage and the family was opened for services. The case was closed in 2005. From 2005 to 2007, the agency received eight referrals regarding inappropriate discipline and parent-child relationship issues regarding the child’s sibling. The reports were unsubstantiated. The family received services from NCCYS in 2007 due to concerns of domestic violence. NCCYS involvement ended after the family completed recommended services. The family was again reopened with NCCYS for services in 2009 due to the mother not being able to manage the sibling’s behaviors. The sibling was placed in foster care from September 2010 through January 2011. In-home services were provided to the family and the sibling was receiving individual services, so NCCYS ended its involvement with the family. In spring 2012, three referrals of inappropriate discipline were reported, but all were unsubstantiated and closed without services. There were no additional referrals until the victim child’s death in October 2014. The mother was charged with child endangerment in December 2014. The mother and caretaker are pending criminal court.
6. A 3-month-old female child died on May 12, 2015, as a result of physical abuse. Philadelphia Department of Human Services (DHS) indicated the case on June 9, 2015, naming the child’s father as the perpetrator. On April 25, 2015, the child was transported by emergency medical services to St. Christopher’s Hospital. The child was unresponsive and needed to be intubated. Imaging of the child’s head showed that she had multiple subdural hematomas. Physicians at the hospital reported that the child’s prognosis was poor and that she had very little brain activity. The child’s injuries were reported to be consistent with shaking. The child remained in the hospital on life support until May 12, when life support was removed, and the child died. On the day of the incident, the mother had fed the child prior to leaving the home for an appointment. The mother reported that the father was not tired or agitated when she left the home. The father stated that at approximately 7:00 PM, he had heard the child choking and went to check on her. After the father cleaned some vomit off the child’s face, he laid her back down to change her, but she began choking again. At this time, the father noticed that the child was not breathing and contacted 911. The father admitted that he had shaken the child to try to get a response from her, but denied that he had shaken her hard. The child’s uncle was in the home at the time, but did not witness the incident. He contacted the child’s mother while the father was on the phone with emergency response personnel. When the mother returned home, the child was lying on the floor lifeless and the mother commenced CPR. The child’s 3-year-old sibling also resided in the home with the family. The sibling received a medical evaluation at the hospital and there were no medical concerns noted. The sibling was able to remain in the care of his mother, grandmother, and uncle. The child’s father is no longer in the home. He has participated in a parenting evaluation and also completed CPR classes. Turning Points for Children is providing services to the family. The family had no involvement with DHS prior to this incident. The Philadelphia Police Department is still investigating this case.

7. A 7-year-old male child died on May 11, 2015, as a result of not receiving needed medical treatment. Philadelphia Department of Human Services (DHS) indicated the case on June 30, naming the child’s father and great aunt as the perpetrators. The child was brought to Kindred Hospital on May 11 by the father and great aunt. The father was carrying the child, who was unresponsive and not breathing. Police believe that the child had already been deceased for about an hour before being seen at the hospital, as rigor mortis was already beginning to set in. The child was diagnosed with cerebral palsy, seizures, asthma, and failure to thrive. He was receiving in-home nursing services. The child’s great aunt was assigned as the child’s nurse through her employer. On the evening of May 10, when the child returned home after being out with his father, he was observed to have a fever of 104° F. The father reported that the child had also had a fever earlier in the day. The child was unable to eat anything without vomiting. The great aunt gave the child Motrin for his fever and Pedialyte to keep him hydrated. The child continued to have a fever throughout the night and the next morning. The great aunt and father
continued to treat the child’s fever with Motrin and to monitor his condition. On the
day of the child’s death, the great aunt made an appointment at the doctor’s office.
The father reported that he saw the child was having tremors that morning. The
child was breathing heavily, but then his breathing began to slow. The father then
grabbed the child and the pair transported him to the hospital. The great aunt
admitted to not providing the child with six out of his eight prescribed medications
because she was concerned about other side effects they would have on the child’s
body. A doctor had not been consulted regarding these changes in medication. The
great aunt had also failed to follow the child’s home health plan, stating that a
physician would need to be called whenever the child was ill. There were no other
children residing in the home at the time of the incident. The child had four siblings
who were in the care of their mother.

During this investigation, DHS receive a General Protective Services (GPS) referral
on the mother and siblings regarding concerns that the family was residing in a
hotel, the mother was abusing substances, and the children had not been in school
for more than a year. DHS was able to validate these concerns. Three of the
siblings ages 13, 9, and 4 are residing in the same foster home, while the child’s
12-year-old sibling is placed at a facility that can meet her treatment needs. The
siblings are receiving case management and behavioral health services. The child’s
mother has been referred to a housing program to assist her in finding a more
suitable home. She has also been referred for substance abuse services and has
court-ordered supervised visits twice per week with the children. Case management
services are available for the father and great aunt, but they have not been
participating in these services. The family has an extensive history of involvement
with DHS. From April 1998 through September 2011 DHS received numerous GPS
referrals on the family alleging similar concerns regarding: the children being dirty
and not clothed appropriately, the mother abusing substances, the children not
being enrolled in or attending a school, the children not being adequately
supervised, and the family not having food in the home. During this period, DHS
was not able to validate all of the allegations, however other referrals were able to
be validated and the family received different periods of in-home protective
services, family stabilization services, and other community based services. In
September 2011, DHS received a Child Protective Services (CPS) referral. This
report stated that the mother was not following the prescribed diet for the child and
he was diagnosed with failure to thrive. In addition, the mother was not getting the
child needed dental treatment. This report was indicated and named the child’s
mother as a perpetrator of medical neglect. The child was placed in medical foster
care from September 2011 through December 2014. The father and child received
reunification services and the child was returned to his father’s care in January
2015. During the time that the child was in placement, DHS continued to get GPS
referrals regarding the siblings in the care of their mother. These referrals included
concerns of: unsafe living conditions, inadequate supervision, no food for the
children, the mother abusing substances, and the children not attending school.
DHS was unable to locate the family to assess these concerns prior to the CPS
report following the child’s death. The Philadelphia Police Department is still
investigating the circumstances surrounding the death of the child.
Berks County

8. On April 14, 2015, a 2-year-old male child died as a result of injuries from physical abuse. On June 4, 2015, Southeast Region Office of Children, Youth and Families (SERO) indicated the foster mother and foster father as perpetrators of abuse.

On April 7, 2015, emergency medical services (EMS) responded to a report that a child fell down the steps. They transported the unresponsive child to a local hospital, where he was intubated and a computerized tomography (CT) scan was done. The child was transferred to Penn State Hershey Children’s Hospital, where an examination determined he had suffered severe traumatic brain injuries, extensive retinal hemorrhaging and bruising to his right ear; the top, back, and side areas of his head; and lower back. The treating physician stated these injuries are inconsistent with a fall down carpeted steps and suspected abuse. The child subsequently died from his injuries.

On the morning of the incident, after getting her two daughters on the school bus, the foster mother was in the kitchen preparing breakfast and called her son and the victim child down to eat. The son came down first and then the foster mother heard “two booms.” She ran to see the child convulsing at the bottom of the steps, so she stabilized his head and neck, called 911 and her husband, and then opened the door to await the arrival of the ambulance. Her husband arrived just as the ambulance was leaving for the hospital. It was reported that the child had gait problems and had previously fallen down a portion of the same steps, yet was offered no assistance or supervision to go down the stairs on the date of incident. On January 27, 2015, the child and his sibling were placed into foster care, following concerns about the father’s living conditions alleging that the children were sleeping on the basement floor on blankets, there was a car seat growing mold, the victim child’s infant sister was being fed evaporated milk, and she also had a severe diaper rash and a rash on her neck. It was also alleged that the father was abusing synthetic marijuana. The family had prior involvement with Northumberland County Children and Youth Services for reports of abuse and neglect. The family received services from August 2013 until December 2014. During this period, two older siblings were removed from the home and placed with kinship caregivers where they remain. Law enforcement is involved, but to date they are awaiting the medical examiner’s report and no arrest has been made.

Near Fatalities

Chester County

1. A 4-month-old male child nearly died on May 4, 2015, as a result of physical abuse. Chester County Department of Children, Youth and Families (CCDCYF) indicated the report, saying the perpetrator is unknown. The child was seen by his pediatrician for a check-up on April 30, 2015, and a significant increase in the child’s head circumference was noted. On May 4, the child was seen for an ultrasound, which revealed bleeding on the brain. The child was admitted to the Children’s Hospital of
Philadelphia (CHOP). A full examination was performed upon admission and no other physical injuries were discovered. The child required surgery to drain the fluid from his head. Medical staff noted that the child’s head circumference was growing normally until his two-month checkup, when his head had grown considerably. This is when they believe that the child’s first bleed occurred. The child’s head had also increased in size at his next checkup, which lead to the referral for further testing. The parents and child’s caregivers were interviewed. Though the mother provided information regarding possible events that could have resulted in head trauma, none of these explanations were consistent with the medical findings and no other explanations were offered for the injuries by either parent or any of the child’s caregivers.

The events as reported by the child’s mother included:
- An incident in December 2014 when she was attacked by an unknown assailant, causing her to go into premature labor with the child
- In March 2015 the child was diagnosed with pneumonia after having problems breathing at the baby sitter’s home
- A few days later the child was admitted to Nemours/Alfred I. DuPont Hospital for Children with a stomach virus. Medical personnel found a bruise on his cheek, which was reportedly caused by the child being dropped six inches into the crib and his face landing on the baby monitor
- More recently the child was hit on the head by a can of beans that accidentally rolled off the counter at the local grocery store, causing a bruise on the child’s forehead.

The child has two older siblings who were residing in the family’s home at the time of the incident. CCDCYF assessed the siblings at their home and had them examined by a physician. There were no concerns for the health or safety of the child’s siblings, and they were able to remain in the family’s home. The child was discharged from the hospital on May 14, and went to reside with a friend of the family in order to ensure his safety. The parents were only permitted to have supervised contact with the child. The child was moved to foster care on May 22, when the family friend was no longer able to care for the child. CCDCYF continues to provide services to the family and is scheduling the parents for assessments to assist in developing a plan for services. The family did have involvement with CCDCYF prior to this report. In July 2010 a referral was received reporting the child’s 18-month-old sibling had been outside without supervision. The sibling was being watched by his grandmother and went outside while she was doing laundry. The mother added latches to the doors so that the sibling would not be able to open the doors and stated that she would not allow the grandmother to provide childcare anymore and the case was closed out by CCDCYF. A second referral was received in March 2015 noting that the home environment was unsanitary and contained more than 20 pets. CCDCYF observed the home and was unable to substantiate these concerns. No charges have been filed.
Crawford County

2. A 4-month-old male child nearly died on April 30, 2015, due to serious physical neglect. On June 25, Crawford County Children and Youth Services (CCCYS) indicated the father and mother as perpetrators of abuse for failure to provide the child with nutrition and hydration and failure to provide medical treatment and care. On April 30, the child was taken to Meadville Medical Center due to concerns about the child’s weight and a rash covering the child’s face. The physician who examined the child noted he was severely dehydrated, suffering from malnutrition, and had impetigo over most of his body. The child was transferred to Children’s Hospital of Pittsburgh (CHP), where he admitted and a verbal order to place the child in out of home care was obtained. On May 5 the child was released from CHP and placed in a foster home, where he remains with a goal to return home and a concurrent goal of adoption. There are no other children in the household. Services are being provided. The mother and father both had previous involvement with multiple child welfare agencies in Pennsylvania dating back to 1999 for various General Protective Services concerns, some of which led to termination of parental rights of other children. No criminal charges have been filed in this case.

3. A 1-month-old female child nearly died on March 17, 2015, as a result of physical abuse. Crawford County Children and Youth Services (CCCYS) indicated the report on May 14, naming the mother as the perpetrator.

On March 17, CCCYS received a referral from a local hospital that a child had been brought in by ambulance for an alleged bump on the head. A computerized tomography (CT) scan showed the child had a subdural hematoma and skull fractures, multiple fractures at the skull vertex, and old bruises on her face. The local police department interviewed the mother at the hospital. She initially admitted to dropping the child, but then changed her story and said that she accidentally hit the victim’s head on the edge of a bathtub. The treating physician stated that her story could explain the subdural hematoma, but not the fractures. The physician did not believe the injuries were consistent with the explanation. The mother had no explanation for the bruises to the child’s face. The child was transported by medical helicopter to Children’s Hospital of Pittsburgh (CHP) for further evaluation and treatment. Findings from CHP concerning the child’s injuries included evidence of flax subdural hematomas at the skull vertex anteriorly and posteriorly as well as superiorly. There were also hemorrhagic contusions within the anterior superior aspects of both frontal lobes and a comminuted fracture at the skull vertex with a slight overlap of fragments. Bone scans were completed and found that the child had a healing fracture of her leg above her ankle that was approximately one week old. The child also had bruising on both sides of her face that are consisted with pinch marks. CHP’s treating physician noted that the skull fractures were from two major impacts to the child’s head. There was also evidence of a healing left distal tibia corner fracture, first metatarsal buckle fracture, distal femoral bucket handle fracture, and a proximal tibia corner fracture. These fractures were approximately one week old and were caused by a shearing or twisting, and are not typically seen by an impact.
A trauma follow-up exam on April 3 also showed a healing left third posterior rib fracture. These findings were consistent with multiple incidents of abuse. The child was released from CHP on March 23, and into the kinship care of the maternal grandmother. The child lived with her mother, legal father (not biological), and sibling. The sibling now resides with his biological father. This mother received services from July 3, 2014, to January 23, 2015, as a result of a General Protective Services (GPS) referral regarding a lack of housing and alleged drug use. CCCYS was not aware the mother was pregnant at that time. A second GPS referral was received by CCCYS on March 9, 2015, alleging the mother had given birth to a child on February 14, 2015, and was missing well baby visits. The case was opened for assessment when this referral was received. The mother was arrested on May 5, 2015, and charged with four felony counts of aggravated assault and one felony count of endangering the welfare of children. The mother was incarcerated at the Crawford County Jail on May 5 and was released on a $25,000 bond on May 29. The criminal trial is pending.

Cumberland County

4. On April 22, 2015, a 2-year-old male child nearly died as a result of physical abuse. Cumberland County Children and Youth Services (CCCYS) indicated the report in June, naming the child's babysitter as the perpetrator. On the date of the incident, the child was being watched by the babysitter, who lived across the street from the family. The mother allegedly heard the child screaming from across the street. She went over and saw that the child’s hands were burned. The parents took the child to PinnacleHealth Harrisburg Hospital. He was transferred to Lehigh Valley Hospital Cedar Crest Burn Unit. The child had partial thickness second degree burns on his left hand and first degree burns on his right hand. By the time child arrived at Lehigh Valley, multiple bruises and petechiae became evident and were observed on the child's upper body as well. The child also had a thin red line across his neck. There was a concern for high velocity slaps or strangulation based on the pattern of the petechial bruising. The child was discharged to the care of his parents on April 27, after having multiple surgeries to graft the skin on his hands. He will continue to receive follow-up care for the burns and to assess the impact of the MRI findings. The child does have a younger sibling who was only a few weeks old at the time of the incident. CCCYS assessed the safety of the children with their parents and found that the parents were meeting the children’s needs. The family had no prior involvement with CCCYS. Lower Allen Police are investigating this incident. No criminal charges have been filed.

Fayette County

5. A 4-year-old male child nearly died on April 25, 2015, due to serious physical neglect. On June 1 Fayette County Children and Youth Services (FCCYS) indicated the mother and father as perpetrators of the abuse. On April 25 the child was transported by ambulance to Uniontown Hospital due to possibly ingesting pills. The paramedics reported he was hypothermic and unable to be roused. He also had low blood pressure, low heart rate and low respiration rate.
The parents did not tell physicians at Uniontown Hospital how many or what types of pills the child may have taken. The child was transferred to Children’s Hospital of Pittsburgh (CHP) via helicopter. The child’s hygiene was very poor; he was covered in dirt and was foul smelling. Paramedics reported the home was in deplorable conditions and the family was heating the home with the oven. The child was treated at CHP and released to his parents on April 26. Two siblings were present at the time of incident and there was concern that they may have given him the medication. A younger sibling was thought to have taken the medication as well, but the toxicology screen was negative. The younger sibling had extremely low blood sugar and was transferred from Uniontown Hospital to CHP by ambulance. Doctors attributed the sibling’s low blood sugar to lack of food. The other children in the home at the time of the incident were interviewed and claimed the medications were in a lock box that the older sibling got open with her finger. The mother claimed she and the father were sleeping at the time of the incident, however the father claimed he was sleeping and that the mother was awake. The child and four siblings were placed with a family friend who became a kinship care provider. The child’s oldest sister was receiving treatment outside the home at the time of the placement of the other siblings and was later placed in same kinship home as her siblings.

On May 15, six of the children were adjudicated dependent and all were court ordered to remain with the family friend. The oldest sibling was not adjudicated and lives with his parents because he is able to care for himself. Ongoing services are in place and visitation is occurring. The family’s prior involvement with FCCYS included reports of failure to thrive for the victim child, poor housing conditions, medical neglect, truancy, housing concerns, lack of food in the home, and parenting concerns. One General Protective Services (GPS) report was not validated and one GPS report was assessed and opened for services to provide support regarding housing, truancy, lack of food, and parenting. Both the mother and father were perpetrators in an indicated Child Protective Services report for medical neglect. The case was accepted for services. The oldest half-sibling and the oldest sibling remained with the parents while arrangements were made for the victim and his four other siblings to live with a family friend. The parents attended all scheduled medical appointments and successfully completed the requirements of the family service plan. The children were returned to their parents and the case was closed. A law enforcement investigation is ongoing. No criminal charges have been filed.

Greene County

6. A 2-year-old male child nearly died on February 26, 2015, as a result of neglect. Greene County Children and Youth Services (GCCYS) indicated the report in April, naming the child’s father and his paramour as the perpetrators.

On the date of the incident, emergency medical services were called to the father’s residence due to the child ingesting six tablets of a medication prescribed to another child in the home. The child was taken to Ruby Memorial Hospital to be treated. The father and his paramour were both in the home at the time. The paramour reported that she was in the living room while the father was in the
bathroom. The child stated that he was thirsty and wanted some milk. The paramour reported that she heard a chair moving in the kitchen and just assumed that the child was drinking his milk. After a couple of minutes of not hearing from the child, she went to check on him and found him with a pill bottle and pills in his hand. The paramour reported that the child started to act like he was really sleepy. She then called for the father and they contacted 911. The medication was on top of the microwave on a counter in the family’s kitchen and it was reported that the child had climbed up on the counter to gain access to the medication. The child’s sibling and the paramour’s two children also resided in the home at the time. GCCYS met with the family to assess the safety of these children. Arrangements were made for the child’s sibling to stay with an aunt and the paramour’s children went to stay with their grandmother. When the child was discharged from the hospital on February 28, he went to stay with his sibling at the aunt’s home. GCCYS worked with the father and his paramour to ensure that all medications would be kept in a safer location in the future. Both caregivers also participated in a medication safety course. The father’s paramour also enrolled in counseling and registered for a parenting class. The family was previously known to GCCYS. At the time of the incident, the family was receiving ongoing General Protective Services (GPS) from GCCYS. The agency had received a report in September 2014 with allegations that the child had a non-accidental burn on his finger. GCCYS could not find enough evidence to substantiate this report, but had continued concerns related to disputes between the parents. GCCYS assisted the family in getting the children enrolled in Head Start. Prior to this report, GCCYS had received five other GPS reports dating back to March 2013. Concerns noted in these reports included: unamicable custody disputes between the parents, lack of food in the mother’s home, inadequate supervision in the mother’s home, the children not receiving necessary medical treatment, and the children demonstrating sexualized behaviors. None of these reports were substantiated, so the family did not receive services. Local State Police were made aware of the incident, but no criminal charges have been filed.

Lancaster County

7. On March 15, 2015, a 3-month-old female child nearly died as a result of physical abuse. Lancaster County Children and Youth Social Services Agency (LCCYSSA) indicated the report on May 2, 2015, naming the child’s father as the perpetrator.

The child’s mother dropped her off at her father’s for a weekend visit on March 13. The child was reported to be healthy prior to being dropped off. The child was taken to Lancaster General Hospital on March 16, due to bruising on her face, right ear, and upper eyelid. She was transferred to Penn State Hershey Children’s Hospital (PSHCH) that day for treatment and evaluation. Further testing discovered the child had a skull fracture, hemorrhaging of all hemispheres of the brain, and multilayered retinal hemorrhage of her right eye. The child was in serious condition. She was having seizures and stopped breathing, so she was placed on a breathing tube and a feeding tube. The child was discharged from PSHCH on March 20. At this time, LCCYSSA filed for custody of the child and was placed into agency foster care. The father reported that on March 15 the child was sleeping on his chest while he was
lying on the couch. He would wake up approximately every hour or so to make sure the baby was fine. At around 7:30 AM the father mentioned he felt the baby moving and clawing his chest area with her nails. He felt the child fall off his chest and he attempted to catch the child, but stated that in doing so he may have accidently knocked her down. The father reported picking up the child, who was lying on the floor face down and crying. Law enforcement notes reference the height of the couch to be approximately 18 inches from the carpeted floor. The father’s account of the events was suspicious based on the child’s injuries. The agency worked with Delaware County Children and Youth Services (DCCYS) and was able to approve the child’s grandmother as a kinship resource for the child. The child’s mother also moved in with the grandmother and the family’s case was transferred to DCCYS for ongoing General Protective Services. Neither parent has any other children in their care. LCCYSSA had no prior involvement with the family. The father was charged with two counts of aggravated assault, two counts of reckless endangerment, and two counts of endangering the welfare of a child. He was incarcerated, but subsequently released on $25,000 bail. Criminal proceedings have not been scheduled.

8. On May 6, 2015, a 2-year-old male child nearly died as a result of physical abuse. Lancaster County Children and Youth Social Services Agency (LCCYSSA) indicated the report, naming the mother’s former paramour as the perpetrator.

Police were called to respond to an incident where shots were fired in the city. The child was in a car with his mother, a sibling, and a cousin when the incident occurred. When police arrived on the scene, the mother was holding the child, who had suffered a single gunshot wound to his left foot. The police took the child to Lancaster General Hospital, where he was treated and discharged on May 7 to his mother’s care. The mother informed authorities that her ex-paramour caused the child’s injuries. She reported that she had recently ended their relationship and the former paramour came after her. The mother reported that multiple shots were fired into the car. The child and his three older half-siblings were determined able to remain safely in their mother’s care. The mother’s former paramour does not have any contact with the family, and the mother was assessed by LCCYSSA to be capable to meet the children’s needs to have the supports to do so. The family was referred to Head Start for services for two of the child’s half-siblings. Prior to this incident, the family did have some involvement with LCCYSSA. In July 2014 the agency received concerns that an 8-year-old neighborhood boy was inappropriately touching the child’s sibling. LCCYSSA met with both the children’s parents and ensured that the children would not be allowed to be unsupervised together. This referral was closed without further involvement by the agency. In December 2014 the agency received a Child Protective Services report alleging that one of the child’s siblings was physically abused by the mother. LCCYSSA was unable to substantiate this report, and the family’s case was not opened for services. The former paramour was captured on August 7, 2015, and is in Lancaster County Prison awaiting criminal trial. He is charged with seven counts of attempted homicide, aggravated assault, reckless endangerment, discharging a weapon into an occupied structure, burglary, and terroristic threats.
Luzerne

9. A 1-year-old female child nearly died on March 21, 2015, as a result of physical abuse. Luzerne County Children and Youth Agency (LCCYA) indicated this case, naming the child’s mother as the perpetrator. On the day of the incident, emergency medical services responded to a call regarding the child being unresponsive. The child was originally transported to Hazleton General Hospital, but was later flown to Lehigh Valley Hospital Cedar Crest after it was determined that she had a lacerated liver and spleen. The adults in the home could not provide a plausible explanation for the injuries. The mother stated that the child’s 3-year-old sibling caused the injuries by jumping on the child’s stomach. This explanation was not supported by medical evidence. During the child’s hospitalization, which lasted until March 27, it was learned that the child also had a fractured clavicle and a spiral fracture of the upper arm. Adults in the household again had no explanation for these injuries. During the investigation, LCCYA received information that the mother would hit the child’s sibling regularly. The mother then admitted to hitting the sibling hard when she was angry. The child and her sibling are in the custody of LCCYA and are residing in a kinship home with their aunt and uncle. The child’s sibling has been referred for early intervention services. The child has recovered from her injuries and is doing well. The family had no previous involvement with LCCYA, but was known to child welfare system in Massachusetts. No further information regarding this involvement is known. The mother is in prison awaiting trial on charges of aggravated assault, simple assault, endangering the welfare of a child, and recklessly endangering another person.

10. A 10-year-old male child nearly died on March 20, 2015, as a result of being provided with drugs. Luzerne County Children and Youth Agency (LCCYA) indicated this case, naming the child’s uncle as the perpetrator. Emergency medical services were called to the family’s home in the early morning on March 20, and found the child to be unconscious. The child’s uncle admitted that he had given the child two Vicodin the night before because the child was complaining of leg pain. The child was taken to Hazleton General Hospital Emergency Room, where he was given Narcan to counteract the opiates. He was flown to Lehigh Valley Hospital Cedar Crest, where he regained consciousness. LCCYA initially sought to take custody of the child and his two siblings, but custody of the child and his full sibling was given to their father. The child went to stay with his father upon his release from the hospital on March 23. The child’s half-sibling stayed with his grandmother until late April when he was returned to the custody of his mother. The mother was compliant with participating in required evaluations. The family was known to LCCYA. A General Protective Services referral was received in April 2012 regarding concerns that the mother had bitten the child’s older sibling. The mother reported needing help because she having behavioral issues with the child’s sibling and that he was physically abusive towards the mother and his brother. The family was referred to mental health and family enrichment services. LCCYA discontinued working with the family in June 2012. LCCYA also received several referrals regarding the father and his three older children from a prior relationship. These referrals were received by the agency between 2004 and January 2013. The referrals included: the father using inappropriate discipline, parent/child conflict,
and drug use by the father and his paramour. The allegations were all assessed and no child abuse or neglect was indicated. The family was referred to local services to further assist them. The child’s uncle was arrested and charged with endangering the welfare of children, recklessly endangering another person, sale of controlled substance, and aggravated assault – victim less than 13 and defendant 18 or older. All charges were held over for court. He is out on bail awaiting trial.

Lycoming County

11. A 2-year-old male child nearly died on March 26, 2015, as a result of neglect. Lycoming County Children and Youth Services (LCCYS) indicated the report, naming the child’s mother and her paramour as perpetrators of abuse. On the day of the incident, the child was reportedly downstairs watching cartoons while the mother and her paramour were upstairs taking a shower. While the caregivers were showering, the child went upstairs to the mother's bedroom where her paramour had a loaded 45-caliber handgun on the floor next to the bed. The child took the handgun downstairs to the living and sat on the couch, where the gun went off, shooting the child in the leg. The child went into shock while at the home. He was initially transported to Williamsport Regional Medical Center, then transferred by ambulance to Geisinger Medical Center, where he underwent emergency surgery. The child had numerous internal injuries, and the bullet remained lodged in his leg. The child had two more surgeries in the next two days to repair the damage. The child was transferred to Penn State Hershey Children’s Hospital for rehabilitation services on April 13, and was released April 23 to the care of his father. The parents maintain 50-50 custody at this time, but the child’s father has filed for primary custody. The child was able to walk independently and continues to make progress in his mobility. The mother’s paramour was unwilling to be interviewed by LCCYS. The mother did participate in an interview. Both the mother and her paramour have permits to carry a concealed weapon. The mother’s paramour usually places his weapon on the floor beside the bed at night and in the bathroom sink or above the bathroom cabinet while showering. The mother’s firearm is usually locked in the glove compartment of her vehicle. The home does have a large gun safe with a digital lock that has ample storage. When police entered the home on the date of incident, other firearms were found unsecured in the home. Ammunition was left out within reach of the victim. The child’s 5-month-old half sibling was residing in the home at the time of the incident. LCCYS assured the safety of the sibling. Her paternal and maternal grandparents shared the responsibility of supervising her. The mother has since moved into her mother’s home in Northumberland County, and the child’s half-sibling has shared visitation between her mother and father. LCCYS referred the mother to Northumberland County Children and Youth Services (NCCYS) to determine whether services were needed for the mother and half-sibling. The mother’s paramour is residing with his parents in Lycoming County. LCCYS is providing ongoing General Protective Services to the father regarding parenting education and home safety guidance. The family was also provided with a family group conference. The mother and her paramour maintain a relationship and are both actively participating in services with LCCYS, although the mother’s formal residence is in another county. The family had no prior involvement with children and youth services. Montoursville Police
Department filed charges against both the mother and her paramour on April 8. The mother was charged with endangering the welfare of a child. Her paramour was charged with aggravated assault, simple assault, reckless endangerment, and endangering the welfare of the child. Both were released on supervised bail. Criminal proceedings are pending.

Mercer County

12. On May 14, 2015, a 15-year-old male child nearly died as a result of serious physical neglect. Mercer County Children and Youth Services (MCCYS) indicated the mother as the perpetrator on June 16, due to her failure to provide necessary medical treatment. The mother took the child to Children’s Hospital of Pittsburgh (CHP) because he was complaining of back and ankle pain for approximately two weeks. On May 14, the child was admitted to CHP, where he received an emergency blood transfusion. As a result of testing and evaluation, he was diagnosed with kidney failure and a referral was made to MCCYS. This child is a kidney transplant recipient with a long-standing history of medical non-compliance as documented by numerous missed appointments. He has been brought to appointments and has not been seen, leaving without notice. In the last year, despite certified letters and several attempts to accommodate care, the child has not had required monthly lab work since September 2014. As a result, he will require frequent lab studies and probable hemodialysis three times per week as a life-saving modality. Due to medical non-compliance, he is not a kidney transplant candidate at this time. The child was discharged from CHP into foster care, but within days he was placed with his maternal great aunt who was being studied as a kinship caregiver. At the time of the incident the child lived with his mother and half-sibling. The half-sibling is living with his biological father, grandmother, and step grandfather. MCCYS was involved with the family from 2000 to 2003, at which time the child was adjudicated dependent and went to stay with the maternal great aunt for the next six years. At that time, he required 10 hours of dialysis per day, and his mother was not able to provide stability or the level of care he required. In 2009, without updating the court order, the maternal great aunt returned the child to his mother as she was better able to care for her son. There was no involvement with the family from 2009 until the time of this report. No criminal charges have been filed.

Monroe County

13. A 4-month-old male child nearly died on March 2, 2015, as a result of physical abuse. On April 21, Monroe County Children and Youth Services (MCCYS) indicated the report, naming the child’s father as the perpetrator. The child was taken to Pocono Medical Center on March 3, due to being in cardiac arrest, and was transferred to Lehigh Valley Hospital (LVH) that day. Testing showed that the child had a bulge on his head, bleeding on his brain, seizures, and bi-lateral retinal hemorrhages. The child was seen at his pediatrician’s office 10 days prior to the incident with concerns that the child had been vomiting for weeks. The pediatrician felt that this was due to the child being overfed. The parents also reported that the child’s tongue had been quivering for a few weeks and he was fussy. Medical staff
at LVH reported that these symptoms are suggestive of head trauma. The parents were unable to provide an explanation of how the child received the injuries that matched the medical findings. The mother offered suggestions that the child’s injuries were a result of vaccinations or Hepatitis C. The mother and father denied that either of them had abused the child. The father reported that the day of the incident he had fed the child and that the child was having difficulty burping. The father reported that the child was red and his head rolled back and then front. The child’s body got stiff and his tongue rolled inside his mouth. The father denied shaking the child and stated that the child’s head had previously rolled back and forth about a month prior to this incident. MCCYS received information during the investigation that the father had a tendency to play rough with the child by bopping him on the head. The child’s long-term prognosis is reported to be poor. On March 19, he was transferred from the hospital to Good Shepherd Rehab, where they worked with him on speech therapy, physical therapy, and bottle feeding. The child remains in the custody of MCCYS, and the agency continues to offer services to the mother to work towards reunifying her with the child. The mother has not been consistently participating in the recommended services or parenting classes. The child has no siblings. The mother was known to MCCYS as a child. In April 2008 the agency received a report regarding the mother’s sibling having a bruise on his face. The bruise was explained by accidental trauma. MCCYS was unable to substantiate the case. The father is incarcerated at Monroe County Correctional Facility and is awaiting trial. He is charged with aggravated assault, reckless endangerment, endangering the welfare of a child, and simple assault. His bail is set at $250,000.

Philadelphia County

14. On April 17, 2015, a 2-month-old male child nearly died as a result of physical abuse. Philadelphia Department of Human Services (DHS) indicated the reported on May 8, naming both the child’s mother and father as perpetrators. On the day of the incident, emergency medical personnel responded to the home regarding a report that a child had fallen. The mother refused to allow the medical personnel to access the home, but instead brought the child out to meet them in a car seat. The child was taken to St. Christopher’s Hospital, where tests revealed both old and new intracranial injuries, subdural hematomas, and retinal hemorrhages. The mother reported that she and the father had been arguing. She claimed that when the father hit her, she dropped the child on the bed to protect him, but then fell on top of him after being hit by the father. The mother also reported that on March 28 the child had been injured and was treated at Children’s Hospital of Philadelphia. No further details were provided. The father refuses to speak with DHS or the police at the advice of his attorney. The child has an older sibling who was also residing in the home at the time of the incident. DHS immediately assessed the safety of the child and his sibling. Concerns for the safety of both children were identified and initially a family friend was identified as a placement resource for the child’s sibling. After several days, the family friend stated that she could no longer care for the sibling so she was placed in a foster home. Upon the child’s discharge from the hospital, he was placed in a medical foster home. The children continue to reside in separate foster homes, but have weekly visits with one another. DHS is working on moving the child and his sibling into the same foster home. The parents have
separate supervised visits with the children per a court order. Visits have been moved to a more secure location due to the parents being disruptive and aggressive. The child continues to receive follow-up medical care at St. Christopher’s Hospital and required an additional surgery in June to help drain fluid from his brain. Additional surgeries may be required as the child’s head continues to grow. The child also suffers from full blindness in his right eye. He is receiving early intervention services. The child’s sibling is being evaluated to determine her treatment needs and is receiving early intervention services. DHS had involvement with the family in June 2011. A referral was received alleging that the family had no electricity for several days, the father had anger management problems, and the child’s sibling, who was an infant at the time, was sleeping in a car seat. DHS was unable to substantiate any of the concerns and the case was closed with no services provided. The criminal investigation continues and no charges have been filed.

15. A 14-year-old female child nearly died on April 3, 2015, due to medical neglect. Philadelphia Department of Human Services (DHS) indicated the report on May 4, naming the child’s biological father as the perpetrator. The child left her mother’s home to move to Philadelphia with her father to have access to better medical facilities. The child is diagnosed with a neurological condition known as Myasthenia Gravis, which causes weakness and rapid fatigue of the muscles under voluntary control. The child presented to the hospital with respiratory failure at the time of this incident. She was admitted to the intensive care unit, was intubated, and needed a ventilator to assist with her breathing. The child had been prescribed several medications to treat her condition. The doctor suspected that the child had not been receiving her medications, which would have contributed to her condition. During the investigation the father admitted to DHS that he replaced the child’s medications with herbal remedies. The child has two biological siblings who live with the mother and her current husband in Luzerne County. The child was released from the hospital to the mother’s care. The father was not arrested and no criminal charges are pending.

Venango County

16. On December 6, 2014, a 2-year-old male child nearly died as a result of physical abuse. Venango County Children and Youth Services (VCCYS) indicated the report on April 21, with an unknown perpetrator. The child was taken to the University of Pittsburgh Medical Center Northwest emergency room by his parents at approximately 5:00 PM on December 6, 2014. He was pale, vomiting, and slow to respond. Testing revealed a subdural hematoma with an acute hemorrhage over-lining the majority of the left cerebral hemisphere with midline shift. Due to the severity of the injuries, the child was flown to Children’s Hospital of Pittsburgh (CHP). At the emergency room, the mother reported the child had fallen off a coffee table and hit his head, then also stated that she came downstairs and saw the child standing beside the table. During the flight to CHP, the mother told the flight crew that she was at the bottom of the steps when she saw the child get up with a red mark across his upper shoulder area. She later told the VCCYS caseworker that his face turned red and she thought he was choking and that perhaps he hit his head on the entertainment center. When interviewed, the father claimed no knowledge of
the child’s injuries. The physician treating the child stated this type of injury is unlikely to be from a simple fall. The maternal grandmother was identified as a safety resource and is where the child’s 4-year-old sibling was staying. On December 10, 2014, the child was discharged from the hospital to the care of his maternal grandmother. The parents are allowed supervised visitation. The father was involved in a prior General Protective Services (GPS) report from 2002 involving his then paramour and two of her children. He was reported to be their biological father. The referral was regarding his violent behavior and allegedly beating one of the children. As a result of his inconsistent involvement with the family, the report could not be substantiated. A Child Protective Services referral was received in 2007 regarding the same child from the 2002 GPS report. The father was indicated for physical abuse. It is unclear whether the mother of this current victim child knew of the prior child abuse reports. This family was known to VCCYS from a GPS report in 2011 for parental substance abuse, which was deemed invalid. Law enforcement continues to investigate this case. No charges have been filed.