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Commissioner

# A Review of Department of Family and Protective Services Involvement Child Fatality

On January 14, 2016, during an open Child Protective Services (CPS) alternative response case, Jada Blackshear died due to suspicions of a drug overdose as a result of accidental ingestion of Methadone. At the time of Jada's death, she was residing with her mother, sibling, maternal grandparents, adopted maternal uncle and maternal aunt. Although Jada's mother has never had any CPS involvement as an alleged perpetrator, Jada's grandmother has extensive history of CPS investigations and an open alternative response case involving the adopted child the grandmother obtained custody of several years ago.

The Office of Child Safety completed a review of all current and past CPS involvement concerning Jada Blackshear and her family. This report presents the Office of Child Safety's findings, summary of CPS involvement and actions taken, assessment of strengths in casework practice, and areas for improvement that merit further examination.

## **Family Composition**

Region 3- Dallas County

Name or Relationship to Jada Blackshear	Age at time of incident
Jada Blackshear	1 year old
Mother	20 years old
Sibling	3 years old
Maternal Grandfather	55 years old
Maternal Grandmother	28 years old
Adopted Uncle	12 years old
Maternal Aunt	16 years old

## **Summary of APS History on Mother of Jada Blackshear**

 On June 28, 2013, APS received a report alleging physical neglect and physical abuse of Jada Blackshear's mother. This investigation was closed without findings.

## Detailed Account of History on Family of Jada Blackshear

On **July 2, 2005**, the maternal grandparents of Jada Blackshear became legal guardians of a child (herein after referred to as the adopted uncle) through CPS court proceedings. The agency granted the grandparents permanent managing conservatorship of Jada's uncle on September 15, 2005.

The maternal grandparents had been involved in multiple CPS investigations as a result of having the adopted uncle in their home. Most of the CPS history involving the maternal grandparents is related to the behaviors of the uncle and his biological mother and siblings. At the time of Jada's death, CPS had an open alternative response case involving the maternal grandparents and the adoptive uncle, in order to assist the grandparents in handling the child's behavior problems. In several of the previous investigations, there were concerns regarding the grandparents' properly supervising the adopted uncle during his visitation with his biological mother. The agency had not taken any action on the concerns in

those investigations, including the child reporting exposure to drug use, medical neglect and physical abuse.

On **June 28, 2013**, APS received a report alleging physical neglect of Jada's mother and physical abuse of Jada's mother by her paramour. The report indicated that Jada's mother had Asperger's syndrome and Autism. The report alleged that Jada's mother left her home with Jada's sibling and there was a concern for the mother's ability to perform her activities of daily living. The report also alleged that Jada's mother had been physically assaulted by her boyfriend while she was holding her child.

During the investigation the maternal grandmother was contacted and reported the mother had Asperger's Syndrome and Bi-Polar disorder. The grandmother reported the mother was not taking her mental health medications and she was concerned about the mother's present status and her ability to care for her child.

The APS investigation was closed without any findings as the mother reportedly moved out of state and was unable to locate.

#### **OCS Assessment:**

 At the time of the intake, CPS report should have been generated due to concerns of mother not being able to care for child, the mother's untreated mental health conditions and concerns of domestic violence. When the APS investigator spoke with credible collaterals who expressed concerns with the mother's mental health and domestic violence, a new report to the abuse and neglect hotline regarding the safety concerns of the child in the home should have been called in.

On October 25, 2016, an alternative response case was opened due to ongoing concerns for the adopted uncle's behaviors and health needs and that the maternal grandparents were unable or unwilling to continue caring for him. During the Alternative Response case, the caseworker noted that Jada would be in the home on occasion and the family explained that they were just watching her for the afternoon. Jada was reported to have two separate bruises on her head within the two months prior to her death. There were also two playpens observed in the home being utilized as cribs. The playpens were full of blankets and bedding which would not have been appropriate sleeping arrangements. On, **January 14**, **2016**, during the open alternative response case, an additional referral was received alleging neglectful supervision of Jada Blackshear. Jada had been living with the maternal grandparents throughout the alternative response case. Jada was found unresponsive by the maternal grandmother. An autopsy revealed Jada had a significant amount of Methadone in her system, possibly a fatal amount. The autopsy also revealed Jada had hemorrhaging in her eyes which is a common symptom in suffocation. During the fatality investigation, it was determined the maternal grandmother and maternal grandfather were taking methadone and hydrocodone for pain management. The family alleged all the medications were kept in a locked safe.

### **OCS Assessment**:

- Contact with the family was not made for 21 days after the date of the intake in the alternative response case.
- There was a minimal assessment of child safety on all the children in the home.
- Based on the history of the maternal grandparents and their verbal request to remove their
  adoptive child from the home, the alternative response case was eligible to be upgraded to a
  traditional investigation. The grandparents were granted permanent managing conservatorship of
  the child in 2005 and continuously reported behavior problems and concerns for their ability to
  care for the child.

## **Overall Case Review Findings and Recommendations**

Texas Department of Family and Protective Services had multiple encounters with Jada Blackshear's family members through Child Protective Services (CPS) and Adult Protective Services (APS). Although Jada's mother never had direct involvement with CPS prior to Jada's death, there were multiple caseworkers from CPS who had made contact with Jada and her mother and concerns surrounding the mother. At the time of Jada's death, she was residing in the home of her maternal grandparents who had an open alternative response case and recent investigations in which more detailed information should have been obtained regarding the prescription medication use of the adult household members. There were also concerns regarding the grandparents inappropriately dispensing medication to an unrelated child. It appears Jada was able to access the prescription narcotic medication which was a contributing factor to her death.

During the review of a child fatality, certain areas of improvement may be identified including individual training needs, statewide trainings, policy revisions, updates to best practice guidance, and/or revisions to state statutes.

Child Protective Services is implementing an overarching practice model designed to ensure that safety and case plans rigorously attend to the day to day dangers and risks to children. The practice model includes specific tools and strategies designed to engage children and families in an effort to obtain a rigorous assessment and motivate them to follow the plans that are co-constructed between the caseworker and family. Safety and case plans are ultimately designed to help caregivers achieve sustainable behavior changes that directly mitigate the danger and risks to the child and will keep children safe now and in the future. This change involves the worker organizing a safety network of informal and formal supports around the family who help hold caregivers accountable to their plans and are directly involved in ensuring the daily safety of children.