



TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES

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

On February 1, 2015, during an open Child Protective Services (CPS) investigation, Kylee died due to physical abuse, allegedly caused by her father. Since Kylee's birth on June 3, 2010, CPS conducted three investigations into allegations that Kylee Forrest had been abused or neglected.

The Office of Child Safety (OCS) completed a review of all current and past CPS investigations concerning Kylee's family. This report presents the Office of Child Safety's findings, summary of CPS investigations, assessment of strengths in casework practice, and areas for improvement. This report describes the timeline and actions taken by CPS as well as issues found during the review of CPS' involvement with Kylee Forrest's family and the tragic death of Kylee that merit further examination.

Family Composition

Region 1 - Lubbock County

Name or Relationship to Justice	Age at time of incident
Kylee Forrest	4
Father	29
Mother	21
Aunt	38

Summary of CPS History on Kylee Forrest / Family of Kylee Forrest

- On November 1, 2010, CPS received the first report regarding Kylee. The allegations were of neglectful supervision. The allegations were ruled out and the investigation was closed on January 28, 2011.
- On September 24, 2014, CPS received a second report of neglectful supervision. The allegations were ruled out and the investigation was closed on October 29, 2014.
- On January 9, 2015, CPS received a third report alleging sexual abuse. During this investigation Kylee died due to alleged physical abuse by her father.

Detailed Account of CPS History on Family of Kylee Forrest

On **November 1, 2010**, Kylee's presumed father was investigated for neglectful supervision of Kylee. There was concern that the presumed father left Kylee locked in a car while inside of a store. Law enforcement was alerted and responded to the scene.

The allegation was determined to be ruled out, as it was cited to be an isolated incident with no indication that the presumed father placed Kylee in a situation that could have resulted in harm.

During the investigation, the family completed paternity testing which concluded that Kyle's presumed father was her biological father. The biological father was contacted during the investigation. Kylee's mother and great aunt, with whom Kylee and her mother were residing, reported that they were supervising all contact between Kylee and her biological father. It was reported that Kylee's great aunt had legal guardianship of Kylee's mother. Kylee's mother was drug tested due to a history of using illegal substances. The drug test results were negative.

OCS Assessment:

- Staff identified that substance abuse may be a safety concern and referred Kylee's mother to complete a hair strand drug test upon learning of her substance abuse history.
- Risk Assessment documentation states there are no indications of any person in the home with a mental illness, physical illness, or developmental disability (diagnosed or indicated); however neither Kylee's mother, great aunt, nor biological father were questioned regarding their mental health.
- A criminal history check was not completed on the biological father which would have provided staff with additional information about potential safety concerns.

On **September 24, 2014**, concerns of neglectful supervision were investigated, as allegations stated Kylee's behaviors were abnormal when she was being helped to use the restroom. Kylee also appeared to have a rash centrally located to her vaginal area, unlike a typical diaper rash.

The allegation was determined to be ruled out. Kylee was observed by CPS staff to be developmentally delayed and incapable of an interview. Kylee's great aunt took Kylee for a medical appointment due to the allegations and provided results to CPS staff, indicating that Kylee had a slightly elevated white cell count and prescribed antibiotics. Kylee was residing with her great aunt, as her mother was incarcerated and her father stated to staff he was incapable of caring for Kylee at the time. Legal paperwork obtained by staff confirmed that the parents previously named the great aunt as Sole Managing Conservator of Kylee with both parents listed as Joint Possessory Conservators. During the investigation Kylee's great aunt stated that Kylee's father sees Kylee.

OCS Assessment:

- Kylee was seen by staff within 72 hours of receiving the Priority 2 report.
- Staff confirmed each parent and caretaker's conservatorship to Kylee by obtaining court documents.
- Staff recommended that Kylee's great aunt schedule a medical examination due to the reported concerns and utilized the findings to support the disposition of ruled out.
- CPS staff interviewed Kylee's great aunt and father over the phone versus in person. CPS handbook policy 2393.1 Parents or Primary Caretakers in the Home states that unless an investigation is administratively closed, the caseworker must conduct a face-to-face interview with one or more of the parents or primary caretakers living in the home of the alleged victim.
- There was no clarification from Kylee's great aunt if the contact between Kylee and her father was unsupervised or only under observation of the great aunt. In the previous investigation, the mother and great aunt both stated that his visits were supervised.
- Kylee's mother had been released from incarceration during the investigation. There were minimal attempts to contact her during the investigation. Per CPS Handbook Policy 2364.3. Time Frames Related to Notice of Interview or Examination states the caseworker makes a reasonable effort to notify each parent and guardian within 24 hours of an interview with or an examination of a child. If the caseworker is unable to

notify the parent and guardian within that time, the caseworker continues attempting to notify throughout the investigation and for up to 15 days after the investigation is closed, or 30 days if law enforcement requests a delay.

- A criminal history check was performed on Kylee's father; however staff did not discuss concerns from the results with him or assess how it may impact Kylee's safety if left unsupervised with her father.

On **January 9, 2015**, concerns of sexual abuse were reported due to observed redness in Kylee's vaginal area. Kylee was reported to be verbally limited and diagnosed with non-categorical early childhood and speech impairment. It was reported that there was not a formal diagnosis as professionals were still unsure of her diagnosis.

CPS staff appropriately made contact with Kylee and her great aunt on the same day as the report was received. Kylee's great aunt still had custody of Kylee, as Kylee's mother was incarcerated. It was learned that Kylee was diagnosed with having a mild case of Cerebral Palsy at a young age. Due to Kylee's delays, a formal interview could not be completed. Kylee's great aunt was appropriately concerned and agreed to have Kylee taken to a sexual abuse exam by a medical team. During the medical exam, there were no indications of sexual abuse.

During the investigation, Kylee's great aunt informed staff that Kylee's father spends time with Kylee almost every day after Kylee returns from school on the bus while the great aunt is working. She stated that she has no concerns with his contact around Kylee and did not feel he would do anything to her. She reported that he is schizophrenic but as long as he takes his medication he is fine. As far as she knew, he was taking his medication and stated that she can tell when he is not taking them because he says odd things and is not himself. The case was approved to be closed with a determined disposition of ruled out after staff completed outstanding investigative tasks.

Prior to case closure, on February 1, 2015, Kylee died due to physical abuse. Kylee's father confessed to killing her and was arrested. The investigation has been completed and Kylee's death was found to be caused by physical abuse.

OCS Assessment:

- Kylee was seen by staff within 24 hours of receiving the Priority 1 report.
- Staff recommended that Kylee's great aunt schedule a sexual abuse examination due to the reported allegation.
- There was an initial attempt to contact Kylee's father at the start of the investigation on January 9, 2015 via telephone, however no other attempts were made. There were no attempts to have Kylee's mother interviewed while incarcerated. Per CPS Handbook Policy 2364.3 Time Frames Related to Notice of Interview or Examination states the caseworker makes a reasonable effort to notify each parent and guardian within 24 hours of an interview with or an examination of a child. If the caseworker is unable to notify the parent and guardian within that time, the caseworker continues attempting to notify throughout the investigation and for up to 15 days after the investigation is closed, or 30 days if law enforcement requests a delay. In addition, Per CPS Handbook Policy 2393.1 Parents or Primary Caretakers in the Home states unless an investigation is administratively closed, the caseworker must conduct a face-to-face interview with one or more of the parents or primary caretakers living in

the home of the alleged victim. The face-to-face interview must take place in accordance with the type of investigation that is being conducted.

Overall Case Review Findings and Recommendations

Child Protective Services (CPS) received three reports and conducted three investigations into allegations that Kylee Forrest had been abused or neglected. In the first investigation, staff assessed risk concerns adequately and requested a hair strand drug test for Kylee's mother upon learning of her substance abuse history. In the second investigation, staff obtained legal paperwork to confirm each parent and caretaker's conservatorship. In both subsequent investigations, Kylee was seen by staff within required time frames designated by the level of concern reported. Staff also appropriately recommended that Kylee complete medical examinations for further professional opinion, as her developmental delays restricted staff's ability to interview her for abuse and neglect concerns.

Although it was known that Kylee's father had contact with her throughout the investigations, CPS never made face-to-face contact with him to assess his ability to protect Kylee and ensure her safety. Once CPS learned that Kylee's father had a mental health diagnosis, staff did not adequately follow up with her father in regards to his diagnosis and any medical interventions needed to address his mental health needs and address Kylee's safety.

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.

The Office of Child Safety recommends the following:

- Training needs: CPS staff be reminded that parents of children involved with CPS should be contacted within 24 hours of their child being observed or interviewed. Parents should also be interviewed face-to-face.
- Training needs: CPS staff be reminded that as part of the investigation, they are to assess risk factors, to include mental health of the parents and caregivers.

CPS is currently implementing a new practice model and developing practice guidelines to provide ongoing training for all staff. Training surrounding notification and involvement of parents, caregivers, and support networks are included in the practice guidelines. Additionally, CPS is implementing new safety assessment and an actuarial-based risk assessment. Both assessments require a caseworker to assess the entire household and all primary and secondary caregivers in making safety and risk determinations. During the design and delivery of these trainings, it is important to include the recommended training themes.

Additionally, Child Protective Services has recently hired a subject matter specialist for mental health services. This position is designed to help field staff utilize resources to meet the needs of parents, youth, and children who need support to address their mental health needs.