Office of Children and Family Services

# Child Fatality Report

## Report Identification Number: AL-18-005

## Prepared by: New York State Office of Children & Family Services

## Issue Date: Nov 19, 2018

This report, prepared pursuant to section 20(5) of the Social Services Law (SSL), concerns:

☒ A report made to the New York Statewide Central Register of Child Abuse and Maltreatment (SCR) involving the death of a child.

☒ The death of a child for whom child protective services has an open case.

☐ The death of a child whose care and custody or custody and guardianship has been transferred to an authorized agency.

☐ The death of a child for whom the local department of social services has an open preventive service case.

The Office of Children and Family Services (OCFS) is mandated by section 20 of the SSL to investigate or cause for the investigation of the cause and circumstances surrounding the death, review such investigation, and prepare and issue a fatality report in regard to the categories of deaths noted above involving a child, except where a local or regional fatality review team issues a report, as authorized by law.

Such report must include: the cause of death; the identification of child protective or other services provided or actions taken regard to such child and child's family; any extraordinary or pertinent information concerning the circumstances of the child's death; whether the child or the child's family received assistance, care or services from the social services district prior to the child's death; any action or further investigation undertaken by OCFS or the social services district since the child's death; and as appropriate, recommendations for local or state administrative or policy changes.

This report contains no information that would identify the deceased child, his or her siblings, the parent, parents, or other persons legally responsible for the child, and any members of the deceased child's household.

By statute, this report will be forwarded to the social services district, chief county executive officer, chairperson of the local legislative body of the county where the child died and the social services district that had legal custody of the child, if different. Notice of the issuance of this report will be sent to the Speaker of the Assembly and the Temporary President of the Senate of the State of New York.

This report may **only** be disclosed to the public by OCFS pursuant to section 20(5) of the SSL. **It may be released by OCFS only after OCFS has determined that such disclosure is not contrary to the best interests of the deceased child's siblings or other children in the household.**

OCFS' review included an examination of actions taken by individual caseworkers and supervisors within the social services district and agencies under contract with the social services district. The observations and recommendations contained in this report reflect OCFS' assessment and the performance of these agencies.

## Abbreviations

| | | |
|---|---|---|
| **Relationships** | | |
| BM-Biological Mother | SM-Subject Mother | SC-Subject Child |
| BF-Biological Father | SF-Subject Father | OC-Other Child |
| MGM-Maternal Grand Mother | MGF-Maternal Grand Father | FF-Foster Father |
| PGM-Paternal Grand Mother | PGF-Paternal Grand Father | DCP-Day Care Provider |
| MGGM-Maternal Great Grand Mother | MGGF-Maternal Great Grand Father | PGGF-Paternal Great Grand Father |
| PGGM-Paternal Great Grand Mother | MA/MU-Maternal Aunt/Maternal Uncle | PA/PU-Paternal Aunt/Paternal Uncle |
| FM-Foster Mother | SS-Surviving Sibling | PS-Parent Sub |
| CH/CHN-Child/Children | OA-Other Adult | |
| **Contacts** | | |
| LE-Law Enforcement | CW-Case Worker | CP-Case Planner |
| Dr.-Doctor | ME-Medical Examiner | EMS-Emergency Medical Services |
| DC-Day Care | FD-Fire Department | BM-Biological Mother |
| CPS-Child Protective Services | | |
| **Allegations** | | |
| FX-Fractures | II-Internal Injuries | L/B/W-Lacerations/Bruises/Welts |
| S/D/S-Swelling/Dislocation/Sprains | C/T/S-Choking/Twisting/Shaking | B/S-Burns/Scalding |
| P/Nx-Poisoning/ Noxious Substance | XCP-Excessive Corporal Punishment | PD/AM-Parent's Drug Alcohol Misuse |
| CD/A-Child's Drug/Alcohol Use | LMC-Lack of Medical Care | EdN-Educational Neglect |
| EN-Emotional Neglect | SA-Sexual Abuse | M/FTTH-Malnutrition/Failure-to-thrive |
| IF/C/S-Inadequate Food/ Clothing/ Shelter | IG-Inadequate Guardianship | LS-Lack of Supervision |
| Ab-Abandonment | OTH/COI-Other | |
| **Miscellaneous** | | |
| IND-Indicated | UNF-Unfounded | SO-Sexual Offender |
| Sub-Substantiated | Unsub-Unsubstantiated | DV-Domestic Violence |
| LDSS-Local Department of Social Service | ACS-Administration for Children's Services | NYPD-New York City Police Department |
| PPRS-Purchased Preventive Rehabilitative Services | TANF-Temporary Assistance to Needy Families | FC-Foster Care |
| MH-Mental Health | ER-Emergency Room | COS-Court Ordered Services |
| OP-Order of Protection | RAP-Risk Assessment Profile | FASP-Family Assessment Plan |
| FAR-Family Assessment Response | Hx-History | Tx-Treatment |
| CAC-Child Advocacy Center | PIP-Program Improvement Plan | yo- year(s) old |
| CPR-Cardiopulmonary Resuscitation | | |

## Case Information

**Report Type:** Child Deceased
**Age:** 0 day(s)
**Jurisdiction:** Columbia
**Gender:** Female
**Date of Death:** 06/01/2018
**Initial Date OCFS Notified:** 06/04/2018

### Presenting Information

An SCR report was received stating the mother gave birth to the baby on the 6/1/18, at home. The mother reported she did not know she was pregnant and received no prenatal care. The mother believed the baby was stillborn and removed the umbilcal cord from the child without clamping it. The baby was alive and when EMS arrived she was hypothermic and blue in color. The baby did not cry and was intubated for 8 minutes after EMS arrived at the home. The baby was born with omphalocele (a birth defect of the abdominal wall, causing the intestines and organs to grow outside of the abdomen in a sac). The child had surgery to address the birth defect, but died as the result of complications.

### Executive Summary

This report concerns the death of a newborn, who lived approximately 3 hours after her birth. On 6/2/18, Columbia County Department of Social Services (CCDSS) received an SCR report regarding the death of the baby. CCDSS had an open CPS investigation from an SCR report received on 6/1/18 in regard to the birth and subsequent hospitalization of the child. There were concerns the mother did not seek proper assistance and medical attention for the child upon her birth and obvious medical condition.

CCDSS learned the mother had been residing with an adult friend (OA1)for the month preceding the fatality. On 6/1/18, the mother was visiting the friend's son (OA2) and daughter-in-law(OA3), when she gave birth to the baby in their bathroom. The mother said she did not know she was pregnant and had been abusing illicit and prescription drugs throughout her pregnancy and the day the child was born. The baby was born with a birth defect that caused her bowels to grow on the outside of her body. Approximately 3 hours later, after the other adults present learned of the baby's birth, 911 was called by one of the adults and EMS responded. The child was taken to the ER and despite medical interventions, she did not survive.

The ME was notified and performed an autopsy. The manner of death was natural causes and the cause of death was ruled as omphalocele (a birth defect). The autopsy report summarized that there was no evidence of postnatal trauma and other than the large omphalocele, there were no other congenital abnormalities identified. The report summary also stated the cause of death was most likely related to late in utero compression of umbilical vessels by large omphalocele.

LE investigated and had not yet concluded their investigation at the time of this writing. LE was still discussing the case with the DA, but thought it was unlikely criminal charges would be pursued against the mother.

The mother was residing in the home of a friend at the time of the baby's birth and there were no other children residing in the home. The child had two siblings, ages 12 and 7. Each of the siblings resided in the home of their fathers and had only supervised contact with the mother. CCDSS interviewed both the fathers and the siblings and assessed their homes to be safe. Their schools were contacted and had no concerns. The fathers went to court to amend their custody petitions and further limit the mother's supervised contact with the siblings.

CCDSS spoke with all adults present at the home the day of the fatal incident and interviewed the mother multiple times. CCDSS reviewed medical records and contacted appropriate collaterals, including the siblings' schools and pediatricians. CCDSS offered the mother's friend, and the other two adults present during the baby's birth services, including financial assistance and bereavement services after the baby's death. The mother was offered services for burial assistance, MH and substance abuse. The mother was also offered Preventive Services.

The mother left the area after the death of the child. The CPS investigation remained open and no determination regarding the allegations had been made. The case record does not contain information regarding why the determination has not yet been made. CCDSS added allegations against the mother regarding the two SS to the open investigation. CCDSS was actively discussing filing a neglect petition against the SM in Family Court at the time this report was written, but were stalled because the mother's whereabouts were unknown.

**PIP Requirement**

CCDSS will submit a PIP to the Albany Regional Office within 30 days of receipt of this report. The PIP will identify action(s) CCDSS has taken, or will take, to address the cited issue(s). For issues where a PIP is currently implemented, CCDSS will review the plan and revise as needed to address ongoing concerns.

## Findings Related to the CPS Investigation of the Fatality

**Safety Assessment:**

- **Was sufficient information gathered to make the decision recorded on the:**
  - **Approved Initial Safety Assessment?** Yes
  - **Safety assessment due at the time of determination?** Unable to Determine
- **Was the safety decision on the approved Initial Safety Assessment appropriate?** Yes

**Determination:**

- **Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation?** The CPS report had not yet been determined at the time this Fatality report was issued.
- **Was the determination made by the district to unfound or indicate appropriate?** Unable to Determine

**Explain:**

The CPS Investigation remained open at the time of this writing.

**Was the decision to close the case appropriate?** N/A

**Was casework activity commensurate with appropriate and relevant statutory or regulatory requirements?** Yes

**Was there sufficient documentation of supervisory consultation?** Yes, the case record has detail of the consultation.

**Explain:**

The CPS Investigation and a Preventive Services case remained open at the time of this writing.

## Required Actions Related to the Fatality

**Are there Required Actions related to the compliance issue(s)?** ☒Yes ☐No

| | |
|---|---|
| **Issue:** | Timely/Adequate Seven Day Assessment |
| **Summary:** | There was no 7-Day Safety Assessment completed for the fatality investigation. |
| **Legal Reference:** | SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c) |
| **Action:** | Within seven days of receiving a report, CCDSS will conduct a preliminary assessment of safety to determine whether the child named in the report and any other children in the household may be in immediate danger of serious harm. |
| | |
| **Issue:** | Failure to provide notice of report |
| **Summary:** | The notice of existence letters were not generated and sent in a timely fashion within regulatory timeframe. |
| **Legal Reference:** | 18 NYCRR 432.2(b)(3)(ii)(f) |
| **Action:** | CCDSS will notify the subjects and other adults named in a report, as well as absent biological parents, in writing, no later than seven days after receipt of the oral report. |
| | |

## Fatality-Related Information and Investigative Activities

### Incident Information

**Date of Death:** 06/01/2018 **Time of Death:** 06:03 PM

**Time of fatal incident, if different than time of death:** Unknown

**County where fatality incident occurred:** Columbia
**Was 911 or local emergency number called?** Yes
**Time of Call:** Unknown
**Did EMS respond to the scene?** Yes
**At time of incident leading to death, had child used alcohol or drugs?** No
**Child's activity at time of incident:**

☐ Sleeping ☐ Working ☐ Driving / Vehicle occupant
☐ Playing ☐ Eating ☐ Unknown
☒ Other: birth

**Did child have supervision at time of incident leading to death?** Unable to determine

**Total number of deaths at incident event:**
**Children ages 0-18:** 1
**Adults:** 0

### Household Composition at time of Fatality

| Household | Relationship | Role | Gender | Age |
|---|---|---|---|---|
| Deceased Child's Household | Deceased Child | Alleged Victim | Female | 0 Day(s) |

| | | | | |
|---|---|---|---|---|
| Deceased Child's Household | Mother | Alleged Perpetrator | Female | 38 Year(s) |
| Deceased Child's Household | Other Adult - Unrelated home member | No Role | Female | 59 Year(s) |
| Other Household 1 | Other Adult - BF of 12yo SS | No Role | Male | 42 Year(s) |
| Other Household 1 | Sibling | Alleged Victim | Male | 12 Year(s) |
| Other Household 2 | Other Adult - BF of 7yo SS | No Role | Male | 41 Year(s) |
| Other Household 2 | Sibling | Alleged Victim | Male | 7 Year(s) |

## LDSS Response

CCDSS began their investigation into the birth, hospitalization and death of the baby on 6/1/18 after receiving an initial SCR report. CCDSS continued their investigation on 6/2/18, when they received an SCR report regarding the fatality. CCDSS contacted the source, LE, hospital staff, and checked CPS history. After learning the baby had two siblings, CCDSS located them and visited them at each of their homes. The SS were assessed to be safe in the care of their fathers. There were no children residing in the mother's home or the home where she gave birth to the baby.

CCDSS met with the mother at the hospital. She stated she did not know she was pregnant as she had been menstruating with irregularity for the past year. The mother stated on the morning of 6/1/18 she was at her neighbor's home and had an upset stomach, headache and heartburn. The SM attributed her physical symptoms to stress in her life. She denied getting any prenatal care, but did report having an appointment with an Women's Health Doctor that she had not attended. The SM told CCDSS she had contacted an adoption agency a couple of months ago because others were commenting that she appeared pregnant, but she did not want another child. The SM took a pregnancy test in January and stated it was negative. The mother initially denied using drugs, but later admitted that she used drugs regularly.

The adults present were interviewed regarding the birth of the SC. They all denied knowledge of the mother's pregnancy. OA3 stated that the mother was at her home and reported not feeling well, and the SM went into the bathroom to take a bath. About 3 hours later the mother called for OA3 to come in the bathroom and stated she was bleeding. OA2 had used cocaine with the SM the evening of 5/30/18 and stated the mother had also used heroin on 6/1/18. He reported he was in and out of the apartment throughout the day, and called 911 after he discovered the SM had the baby. The mother's friend was not at the home, but arrived at her son's apartment after he called her to report what happened. The mother's friend found her sitting on the toilet in the bathroom and the child lying in a drained bath tub, gasping for air and cold to the touch. The SM did not make an effort to help the baby. The friend picked up the child, tied off her umbilical cord and performed CPR. The baby spit out water and the friend wrapped her in a towel and the baby opened her eyes. EMS arrived and took over life saving measures before transporting the child to the ER.

Hospital staff informed CCDSS that the child had arrived there via ambulance, after being born at home. The baby had hypothermia upon her admission to the ER. The baby was born with a birth defect that caused her bowels to be outside of her body and she suffered a significant loss of blood due to a severed umbilical cord. The baby was intubated and had surgery to remedy the birth defect, but did not survive. The hospital social worker reported the mother also told her she did not know she was pregnant. The SM told the social worker she thought the baby was stillborn. Hospital staff stated the SM tested positive for cocaine and opiates upon her admission to the hospital, and also disclosed a history of MH issues.

The mother was unable to positively identify the BF of the SC, but did offer a name. CCDSS followed up with the man the SM named and he did not believe he was the father and had no intentions of establishing paternity. The fathers of the siblings reported they live close to each other and the kids saw each other regularly, but did not see the mother often. The 7yo had last seen the SM in November of 2017 and the 12yo saw her in May of 2018. The contact the mother had with the SS was supervised by their fathers. The SS had no knowledge of the mother's pregnancy or birth of the baby.

LE confirmed the SM contacted the adoption agency on 4/19/18 with proof of pregnancy and had received money from the agency.

## Official Manner and Cause of Death

**Official Manner:** Natural
**Primary Cause of Death:** From a medical cause
**Person Declaring Official Manner and Cause of Death:** Medical Examiner

## Multidisciplinary Investigation/Review

**Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?**Yes

**Was the fatality reviewed by an OCFS approved Child Fatality Review Team?**Yes

## SCR Fatality Report Summary

| Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome |
|---|---|---|---|
| 048125 - Deceased Child, Female, 0 Days | 048126 - Mother, Female, 38 Year(s) | Parents Drug / Alcohol Misuse | Pending |
| 048125 - Deceased Child, Female, 0 Days | 048126 - Mother, Female, 38 Year(s) | Inadequate Guardianship | Pending |
| 048125 - Deceased Child, Female, 0 Days | 048126 - Mother, Female, 38 Year(s) | DOA / Fatality | Pending |
| 048133 - Sibling, Male, 12 Year(s) | 048126 - Mother, Female, 38 Year(s) | Inadequate Guardianship | Pending |
| 048134 - Sibling, Male, 7 Year(s) | 048126 - Mother, Female, 38 Year(s) | Inadequate Guardianship | Pending |

## CPS Fatality Casework/Investigative Activities

| | Yes | No | N/A | Unable to Determine |
|---|---|---|---|---|
| **All children observed?** | ☒ | ☐ | ☐ | ☐ |
| **When appropriate, children were interviewed?** | ☒ | ☐ | ☐ | ☐ |
| **Alleged subject(s) interviewed face-to-face?** | ☒ | ☐ | ☐ | ☐ |
| **All 'other persons named' interviewed face-to-face?** | ☒ | ☐ | ☐ | ☐ |
| **Contact with source?** | ☒ | ☐ | ☐ | ☐ |
| **All appropriate Collaterals contacted?** | ☐ | ☒ | ☐ | ☐ |
| First Responders | ☐ | ☒ | ☐ | ☐ |
| **Was a death-scene investigation performed?** | ☒ | ☐ | ☐ | ☐ |
| **Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?** | ☒ | ☐ | ☐ | ☐ |

| | | | | |
|---|---|---|---|---|
| **Coordination of investigation with law enforcement?** | ☒ | ☐ | ☐ | ☐ |
| **Was there timely entry of progress notes and other required documentation?** | ☒ | ☐ | ☐ | ☐ |

**Additional information:**
There is no documentation in the case record that CCDSS contacted EMS personnel that responded to the 911 call.

**Fatality Safety Assessment Activities**

| | Yes | No | N/A | Unable to Determine |
|---|---|---|---|---|
| **Were there any surviving siblings or other children in the household?** | ☒ | ☐ | ☐ | ☐ |
| **Was there an adequate assessment of impending or immediate danger to surviving siblings/other children in the household named in the report:** | | | | |
| **Within 24 hours?** | ☒ | ☐ | ☐ | ☐ |
| **At 7 days?** | ☐ | ☒ | ☐ | ☐ |
| **At 30 days?** | ☒ | ☐ | ☐ | ☐ |
| **Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?** | ☒ | ☐ | ☐ | ☐ |
| **Are there any safety issues that need to be referred back to the local district?** | ☐ | ☒ | ☐ | ☐ |

| | | | | |
|---|---|---|---|---|
| **When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including parent/caretaker actions adequate?** | ☒ | ☐ | ☐ | ☐ |
| **Explain:**<br>There was no safety assessment completed at 7 days in the fatality investigation. | | | | |

**Fatality Risk Assessment / Risk Assessment Profile**

| | Yes | No | N/A | Unable to Determine |
|---|---|---|---|---|
| **Was the risk assessment/RAP adequate in this case?** | ☒ | ☐ | ☐ | ☐ |
| **During the course of the investigation, was sufficient information gathered to assess risk to all surviving siblings/other children in the household?** | ☒ | ☐ | ☐ | ☐ |
| **Was there an adequate assessment of the family's need for services?** | ☒ | ☐ | ☐ | ☐ |
| **Did the protective factors in this case require the LDSS to file a petition in Family Court at any time during or after the investigation?** | ☐ | ☐ | ☐ | ☒ |
| **Were appropriate/needed services offered in this case** | ☒ | ☐ | ☐ | ☐ |

**Explain:**
The SM agreed to MH counseling but declined substance abuse treatment. CCDSS had discussions regarding whether or not they had a legal basis to file a neglect petition, and the discussions were ongoing at the time of this writing.

## Placement Activities in Response to the Fatality Investigation

| | Yes | No | N/A | Unable to Determine |
|---|---|---|---|---|
| **Did the safety factors in the case show the need for the surviving siblings/other children in the household be removed or placed in foster care at any time during this fatality investigation?** | ☐ | ☒ | ☐ | ☐ |
| **Were there surviving children in the household that were removed either as a result of this fatality report / investigation or for reasons unrelated to this fatality?** | ☐ | ☒ | ☐ | ☐ |

**Explain as necessary:**
The two SS were in the custody of their fathers at the time of the fatality. The SS had only supervised contact with the SM.

## Legal Activity Related to the Fatality

**Was there legal activity as a result of the fatality investigation?** There was no legal activity.

## Services Provided to the Family in Response to the Fatality

| Services | Provided After Death | Offered, but Refused | Offered, Unknown if Used | Not Offered | Needed but Unavailable | N/A | CDR Lead to Referral |
|---|---|---|---|---|---|---|---|
| **Bereavement counseling** | ☒ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **Economic support** | ☐ | ☐ | ☒ | ☐ | ☐ | ☐ | ☐ |
| **Funeral arrangements** | ☐ | ☐ | ☒ | ☐ | ☐ | ☐ | ☐ |
| **Housing assistance** | ☐ | ☐ | ☒ | ☐ | ☐ | ☐ | ☐ |
| **Mental health services** | ☒ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **Foster care** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Health care** | ☒ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **Legal services** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Family planning** | ☐ | ☐ | ☐ | ☒ | ☐ | ☐ | ☐ |
| **Homemaking Services** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Parenting Skills** | ☐ | ☐ | ☐ | ☒ | ☐ | ☐ | ☐ |
| **Domestic Violence Services** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Early Intervention** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Alcohol/Substance abuse** | ☐ | ☒ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **Child Care** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Intensive case management** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Family or others as safety resources** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |
| **Other** | ☐ | ☐ | ☐ | ☐ | ☐ | ☒ | ☐ |

**Were services provided to siblings or other children in the household to address any immediate needs and support their well-being in response to the fatality?** No
**Explain:**
The SS were not aware the SM was pregnant and had no knowledge of the SC's birth. Both SS resided with their respective fathers.

**Were services provided to parent(s) and other care givers to address any immediate needs related to the fatality?** Yes
**Explain:**
The SM was offered multiple services. The other adults (unrelated to the SM or SC) who were present at the time of the SC's home birth were also offered services.

## History Prior to the Fatality

### Child Information

**Did the child have a history of alleged child abuse/maltreatment?** No
**Was there an open CPS case with this child at the time of death?** No
**Was the child ever placed outside of the home prior to the death?** No
**Were there any siblings ever placed outside of the home prior to this child's death?** Yes
**Was the child acutely ill during the two weeks before death?** No

### Infants Under One Year Old

**During pregnancy, mother:**

- ☐ Had medical complications / infections
- ☒ Misused over-the-counter or prescription drugs
- ☐ Experienced domestic violence
- ☐ Was not noted in the case record to have any of the issues listed
- ☐ Had heavy alcohol use
- ☒ Smoked tobacco
- ☒ Used illicit drugs

**Infant was born:**

- ☐ Drug exposed
- ☒ With neither of the issues listed noted in case record
- ☐ With fetal alcohol effects or syndrome

## CPS - Investigative History Three Years Prior to the Fatality

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome | Compliance Issue(s) |
|---|---|---|---|---|---|
| 06/01/2018 | Deceased Child, Female, 3 Hours | Mother, Female, 38 Years | Inadequate Guardianship | Pending | Yes |
| | Sibling, Male, 7 Years | Mother, Female, 38 Years | Inadequate Guardianship | Pending | |
| | Sibling, Male, 12 Years | Mother, Female, 38 Years | Inadequate Guardianship | Pending | |
| | Deceased Child, Female, 3 Hours | Mother, Female, 38 Years | Parents Drug / Alcohol Misuse | Pending | |

**Report Summary:**
An SCR report was received stating the SM gave birth to the SC and the SM was under the influence of cocaine and heroin during the child birth. The SM had abused drugs throughout her pregnancy.

**Report Determination:** Undetermined

**OCFS Review Results:**
The casework was commensurate with the case circumstances. The SC died the same day the report was received and CCDSS received a subsequent report regarding the fatality.

**Are there Required Actions related to the compliance issue(s)?** ☒Yes ☐No

**Issue:**
Failure to provide notice of report

**Summary:**
One of the fathers of the surviving sibling was not provided written notification of the SCR report although he was listed on the report .

**Legal Reference:**
18 NYCRR 432.2(b)(3)(ii)(f)

**Action:**
CCDSS will notify the subjects and other adults named in a report, as well as absent biological parents, in writing, no later than seven days after receipt of the oral report.

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome | Compliance Issue(s) |
|---|---|---|---|---|---|
| 03/19/2017 | Sibling, Male, 11 Years | Mother, Female, 37 Years | Inadequate Guardianship | Unsubstantiated | No |
| | Sibling, Male, 6 Years | Mother, Female, 37 Years | Inadequate Guardianship | Unsubstantiated | |

**Report Summary:**
An SCR report was received that alleged the SM left the two SS alone with the MGF, who was unable to care for them due to his physical incapacities. The SM left the children with the MGF for several hours on several different occasions. There was also concern that the MGF's home was filled with garbage.

**Report Determination:** Unfounded **Date of Determination:** 05/05/2017

**Basis for Determination:**
The SM denied the allegations and stated the SS were left with the MGF for short periods during the day, so she could run errands for the MGF. The SM also denied the MGF was legally blind and stated he was fine with her leaving the SS with him for short periods of time. The fathers were contacted and had various concerns regarding the SM using drugs and they addressed these issues in Family Court. The SM was prescribed medication for an ongoing condition and when

drug tested she tested positive for only prescribed medications. The SM declined Preventive Services and the SS were found to be safe in her care, in addition to the care of the BFs at the conclusion of the investigation.

**OCFS Review Results:**
The casework was commensurate with the case circumstances. CCDSS interviewed the SS and their fathers, as well as school staff and other collaterals with information pertinent to the investigation. CCDSS appropriately offered the SM ongoing services, which she declined.

**Are there Required Actions related to the compliance issue(s)?** ☐Yes ☒No

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Status/Outcome | Compliance Issue(s) |
|---|---|---|---|---|---|
| 05/09/2016 | Sibling, Male, 10 Years | Mother, Female, 36 Years | Educational Neglect | Far-Closed | Yes |

**Report Summary:**
An SCR report was received alleging the eldest SS had excessive absences and tardiness throughout the school year, and the SM was aware and failed to meet his educational needs.

**OCFS Review Results:**
The SS had passing grades and his attendance and tardiness improved at the conclusion of the investigation. CCDSS tried multiple times to reconnect with the SM throughout the investigation to offer her services, but she would not return contact. The FLAG and safety assessments were completed timely and accurately. The fathers of the SS were not provided with a Notification of Existence of FAR.

**Are there Required Actions related to the compliance issue(s)?** ☒Yes ☐No

**Issue:**
FAR-Failure to Provide Notice of Report

**Summary:**
CCDSS did not provide the fathers a notice of existence of FAR.

**Legal Reference:**
18 NYCRR 432.13 (e)(2)(i)(a)-(d)

**Action:**
No later than seven days after receiving a report that has been assigned to the FAR track, CPS must provide written notification of the report to every parent, guardian, or person legally responsible for the care of the children named in the report.

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome | Compliance Issue(s) |
|---|---|---|---|---|---|
| 11/30/2015 | Sibling, Male, 10 Years | Mother, Female, 36 Years | Educational Neglect | Unsubstantiated | No |
| | Sibling, Male, 10 Years | Mother, Female, 36 Years | Inadequate Guardianship | Unsubstantiated | |

**Report Summary:**
An SCR report alleged the eldest SS had a history of chronic absences from school and the absences had continued in the next school year. As a result of the absences, the SS was lagging behind academically and although the SM was aware, she failed to remedy the situation. The SM also was late to pick up the SS from school on several occasions and made no alternate plan for his care during those times.

**Report Determination:** Unfounded | **Date of Determination:** 02/05/2016

**Basis for Determination:**
CCDSS found that the SS was tardy and absent from school and missing work assignments. The SM and SS changed residences in the middle of the investigation, as they were previously struggling financially and the SM did not have help

with the SS. The SS teachers worked with the SS to make up missed assignments and he did pass all his classes. The SS also started attending school regularly and was no longer tardy once the family moved.

**OCFS Review Results:**
The casework was commensurate with the case circumstances.

**Are there Required Actions related to the compliance issue(s)?** ☐Yes ☒No

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome | Compliance Issue(s) |
|---|---|---|---|---|---|
| 09/23/2015 | Sibling, Male, 4 Years | Mother, Female, 35 Years | Inadequate Guardianship | Unsubstantiated | Yes |
| | Sibling, Male, 9 Years | Mother, Female, 35 Years | Inadequate Guardianship | Unsubstantiated | |
| | Sibling, Male, 4 Years | Other Adult - Parent Substitute, Male, 37 Years | Inadequate Guardianship | Unsubstantiated | |
| | Sibling, Male, 9 Years | Other Adult - Parent Substitute, Male, 37 Years | Inadequate Guardianship | Unsubstantiated | |
| | Sibling, Male, 4 Years | Mother, Female, 35 Years | Parents Drug / Alcohol Misuse | Unsubstantiated | |
| | Sibling, Male, 9 Years | Mother, Female, 35 Years | Parents Drug / Alcohol Misuse | Unsubstantiated | |

**Report Summary:**
An SCR report was received alleging that on 9/22/15, the SM picked up the SS from school and was impaired by an unknown substance. The SM put the SS in the car with the intention to drive them home, despite her visible impairment. The SM's boyfriend at the time was also present and was allowing her to drive the children while her ability was impaired.

**Report Determination:** Unfounded **Date of Determination:** 11/20/2015

**Basis for Determination:**
There was no credible evidence found that the SM was intoxicated or impaired when picking the SS up from school, as the report suggested. The SM reported she was taking antibiotics and exhausted on that day. The SS denied any alcohol or drug use by the SM. The school and pediatrician had no concerns for the care of the SS. The SM stopped contact with her ex-boyfriend as there was an OP in place regarding the SS and he was not to be around them. The SM stated he was in the car the day of the report because he was driving her to help her, due to her illness on that day.

**OCFS Review Results:**
All safety assessments were completed timely and accurately, collaterals were appropriately contacted and the allegations discussed with the SM. Attempts were made to interview the Parent Substitute, but were unsuccessful.

**Are there Required Actions related to the compliance issue(s)?** ☒Yes ☐No

**Issue:**
Failure to provide notice of report

**Summary:**
The BF of one of the SS was not provided a Notice of Existence letter to notify him of the SCR report involving the SS.

**Legal Reference:**
18 NYCRR 432.2(b)(3)(ii)(f)

**Action:**
CCDSS will notify the subjects and other adults named in a report, as well as absent biological parents, in writing, no later than seven days after receipt of the oral report.

[redacted]

## CPS - Investigative History More Than Three Years Prior to the Fatality

An SCR report was received in 11/2011 with an allegation of inadequate guardianship, and was unsubstantiated against the SM in regard to the two SS.

An SCR report was received in 8/2014 with allegations of inadequate guardianship and lack of supervision against the SM regarding the two SS. This investigation was tracked FAR.

An SCR report was received in 12/2014 with allegations of parent's drug and alcohol misuse, lack of supervision, inadequate guardianship and educational neglect and, was unsubstantiated against the SM regarding the two SS.

An SCR report was received in 4/2015 with an allegation of inadequate guardianship, and was substantiated against an unrelated adult in regard to the two SS.

## Known CPS History Outside of NYS

There is no known CPS history outside of New York State.

## Legal History Within Three Years Prior to the Fatality

**Was there any legal activity within three years prior to the fatality investigation?** There was no legal activity

## Recommended Action(s)

**Are there any recommended actions for local or state administrative or policy changes?** ☐Yes ☒No

**Are there any recommended prevention activities resulting from the review?** ☐Yes ☒No