



Report Identification Number: BU-14-035

Prepared by: Buffalo Regional Office

Issue Date: 11/19/2015

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
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
CPR-Cardio-pulmonary Resuscitation		
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	MN-Medical Neglect	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-Others	
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		

Case Information



NYS Office of Children and Family Services - Child Fatality Report

Report Type: Child Deceased
Age: 6 month(s)

Jurisdiction: Erie
Gender: Male

Date of Death: 12/14/2014
Initial Date OCFS Notified: 12/17/2014

Presenting Information

On Sunday December 14, 2014, subject child (six months old) was on a visitation with subject father and subject grandmother. During visitation, the subject child died as a result of injuries to the brain from an external source. It is believed the child was shaken. Both subject father and subject grandmother are being made alleged subjects as they were the subject child's sole caretaker during the time of his death. The subject mother has an unknown role.

Executive Summary

CW's from Erie and Genesee Counties appropriately initiated the investigation 12/17/14 reviewing case history, making contact with the source, alleged subjects, and collaterals. Genesee CW conducted interviews of SF and SGM and coordinated with Batavia PD as this is where subjects resided and where fatality occurred. Pediatrician reported SC was up-to-date on all medical needs and had no concerns.

Batavia PD reported making a welfare check on SC 12/13/14 per SM's request due to SF reporting SC's lip had been busted and tooth broken during the transport to Batavia for the visitation. SC's injury was reported as a self-injury accident by SF, but this was not consistent with the injuries. Police Ok'd SC staying with SF and SGM for the visitation despite SM's request to return the child to her. No report was made to the SCR.

SF reported on 12/14/14 at 6am, he brought SC from his bedroom to SGM asking her to care for SC while he got some sleep. He later returned and called 911 at 9:51AM after discovering SC was nonresponsive. EMS reported upon their arrival SC was unresponsive, resuscitation efforts provided no success, and SC was transported to hospital where efforts were continued and SC was pronounced deceased.

SGM reported hearing SC crying loudly while upstairs with SF prior to his bringing SC downstairs, but SC was not crying and appeared in a deep sleep when SF brought SC to her. SGM noted hearing SF say "now you want to sleep you little bastard?" She acknowledged SC appeared in medical distress, but she did not seek medical attention and had sat by him and "puttered around the house". SGM reported when SF later found SC as deceased he exclaimed "Mom we are fucked, the kid is dead." She reported he then asked her to lie and say she was with them both the entire time instead of the child being alone with SF in his bedroom.

SF was told by SM that he was the father of SC, but it was later found that he was not the father per DNA results of 12/08/14 obtained by SM. It was also found that SM had sought finances from SF and two other males as part of a scam for money. SF was not aware he was not SC's father at time of SC's death.

SF was arrested 12/18/14 for manslaughter 2 and attempted suicide while incarcerated. He later succumbed to injuries stemming from the suicide attempt. SGM was charged with endangering the welfare of a child on 1/17/15 due to her acknowledgment that she was aware SC required medical attention, but did not take action to obtain medical care. SF's charges were dismissed upon his death. SGM's Court Hearing is pending.

The Monroe Co, Medical Examiner determined SC's manner of death as homicide and cause of death as closed head



injury. SF reported he had fallen down the stairs with SC, but his explanation was not consistent with SC's injuries.

On 2/13/15, the allegations of DOA/Fatality, IG, Ch/Tw/Sh, and Internal Injuries against SF were INDICATED. Basis of determination is preliminary autopsy report that SC died from traumatic brain injury and bleeding around the brain and also had bruising around his face. The explanation given by SF, whom was caring for SC at the time, was not consistent with SC's injuries stating he fell down the stairs with SC. It is believed SF became frustrated with SC's crying and shook SC. Allegations of DOA and IG were also INDICATED against SGM. Basis of determination is SGM was aware SC was in medical distress for several hours and did not seek medical assistance. Allegations of Internal Injuries and Ch/Tw/Sh were UNFOUNDED against SGM. Allegations of IG were INDICATED against SM. Basis of determination is SM was seeking financial assistance from several males telling them they were SC's father. She sent SC to SF for a visitation despite being aware that SF did not have adequate sleeping accommodations and was most likely not SC's father despite her telling him he was. There are no other children in the home. No services necessary

Findings Related to the CPS Investigation of the Fatality

Safety Assessment:

- Was sufficient information gathered to make the decision recorded on the:
 - Safety assessment due at the time of determination? 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? Yes, sufficient information was gathered to determine all allegations.
- Was the determination made by the district to unfound or indicate appropriate? Yes

Explain:

This was a high profile case with a lot of media attention. Caseworkers activities were thorough and commensurate with a high profile fatality case.

Was the decision to close the case appropriate? Yes

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:

N/A

Required Actions Related to the Fatality

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

Fatality-Related Information and Investigative Activities



NYS Office of Children and Family Services - Child Fatality Report

Incident Information

Date of Death: 12/14/2014

Time of Death: Unknown

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

County where fatality incident occurred:

GENESEE

Was 911 or local emergency number called?

Yes

Time of Call:

09:51 AM

Did EMS to 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

Did child have supervision at time of incident leading to death? Yes

Is the caretaker listed in the Household Composition? Yes - Caregiver

2

At time of incident supervisor was: Unknown if they were impaired.

Total number of deaths at incident event:

Children ages 0-18: 1

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Male	6 Month(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	21 Year(s)
Other Household 1	Father	Alleged Perpetrator	Male	28 Year(s)
Other Household 1	Grandparent	Alleged Perpetrator	Female	63 Year(s)

LDSS Response

CW's from Erie and Genesee initiated the investigation 12/17/14 reviewing case history, making contact with source, alleged subjects, and collaterals. Genesee CW conducted interviews of SF and SGM and coordinated with Batavia PD as this is where subjects resided and fatality occurred. Erie CW interviewed SM and made collateral contacts in Erie County. Pediatrician reported SC was up-to-date on all medical needs and had no concerns.

Batavia PD reported making a welfare check SC 12/13/14 per SM's request due to SF reporting SC's lip had been busted



and tooth broken during the transport to Batavia for the visitation. SC's injury was reported as a self-injury by SC hitting himself with a toy, but this was not consistent with the injuries. SGM had stopped for gas and was in a store with SF alone in the car when these injuries to SC occurred. Despite the lack of an adequate explanation, Police made no report to the SCR and upheld SC staying with SF and SGM for the visitation against SM's request for return of the child to her.

SF reported on 12/14/14 at 6am, he brought SC from his bedroom to SGM downstairs asking her to care for SC while he got some sleep. He later returned and called 911 at 9:51AM after discovering SC was nonresponsive. EMS reported upon their arrival SC was unresponsive, resuscitation efforts provided no success, and SC was transported to the hospital where efforts were continued and SC was later pronounced deceased. This visitation was the first visit SC had alone with SF and SGM.

The Monroe Co, Medical Examiner determined SC's manner of death as homicide and cause of death as closed head injury. SC was found to have bruising around his face, multiple body abrasions, and acute hemorrhaging around the spinal nerve and optic nerves. SF reported he had fallen down the stairs with SC, but his explanation was not consistent with SC's injuries.

SGM reported hearing SC crying loudly while upstairs with SF in his bedroom, but SC was not crying and appeared in a deep sleep when SF brought SC to her. SGM noted over-hearing SF say "now you want to sleep you little bastard?" She initially stated she thought SC was sleeping, but later acknowledged SC appeared in medical distress, did not seek medical assistance, and instead sat by him and "puttered around the house". SGM reported when SF later returned and found SC as deceased, he yelled "Mom we are fucked, the kid is dead." She reported SF asked her to lie and say she was with them the entire time instead of SC being alone with SF in his bedroom. SGM also reported no knowledge of SF falling on stairs with SC and noted she would have heard this as her bedroom is adjacent to the stairway.

SF had been told by SM that he was the father of SC, but it was later found that he was not the father per DNA results of 12/08/14 obtained by SM. It was also found that SM had sought child support from multiple males as part of a scam for money. SF was not aware he was not SC's father at the time of SC's death.

SM acknowledged sending SC for visitation knowing SF/SGM did not have adequate sleeping accommodations for SC. SF was arrested 12/18/14 for manslaughter 2. He attempted suicide while incarcerated. SF later succumbed to injuries stemming from the suicide attempt. SGM was charged with endangering the welfare of a child on 1/17/15 due to her reporting she was aware SC required medical attention, but did not take action to obtain medical care. SF's charges were dismissed upon his death. It is believed SF became frustrated and shook SC. SF made no admissions prior to his death. SGM's Court Hearing is pending.

On 2/13/15, the allegations of DOA/Fatality, IG, Ch/Tw/Sh, and Internal Injuries against SF were INDICATED. Allegations of DOA and IG were also INDICATED against SGM. Allegations of Internal Injuries and Ch/Tw/Sh were UNFOUNDED against SGM. Allegations of IG were INDICATED against SM. No other children in the home. No services necessary.

Official Manner and Cause of Death

Official Manner: Homicide

Primary Cause of Death: From an injury - external cause

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review



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

Comments: The investigation was conducted by Erie County's Multi-disciplinary team including the assigned Genesee County CW and Police from the City of Batavia.

Was the fatality reviewed by an OCFS approved Child Fatality Review Team? No

Comments: Erie County does not have an OCFS approved Child Fatality Review team, but the case was reviewed by Erie County's child fatality review team and the secondary assigned Genesee County CW participated in this review.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
020321 - Deceased Child, Male, 6 Mons	020882 - Grandparent, Female, 63 Year(s)	Choking / Twisting / Shaking	Unsubstantiated
020321 - Deceased Child, Male, 6 Mons	020882 - Grandparent, Female, 63 Year(s)	Internal Injuries	Unsubstantiated
020321 - Deceased Child, Male, 6 Mons	020325 - Mother, Female, 21 Year(s)	Inadequate Guardianship	Substantiated
020321 - Deceased Child, Male, 6 Mons	020882 - Grandparent, Female, 63 Year(s)	DOA / Fatality	Substantiated
020321 - Deceased Child, Male, 6 Mons	020882 - Grandparent, Female, 63 Year(s)	Inadequate Guardianship	Substantiated
020321 - Deceased Child, Male, 6 Mons	020881 - Father, Male, 28 Year(s)	Inadequate Guardianship	Substantiated
020321 - Deceased Child, Male, 6 Mons	020881 - Father, Male, 28 Year(s)	DOA / Fatality	Substantiated
020321 - Deceased Child, Male, 6 Mons	020881 - Father, Male, 28 Year(s)	Choking / Twisting / Shaking	Substantiated
020321 - Deceased Child, Male, 6 Mons	020881 - Father, Male, 28 Year(s)	Internal Injuries	Substantiated

CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alleged subject(s) interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All 'other persons named' interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Legal Activity Related to the Fatality

Was there legal activity as a result of the fatality investigation?

Family Court

Criminal Court

Order of Protection

Criminal Charge: Manslaughter **Degree:** 2

Date Charges Filed:	Against Whom?	Date of Disposition:	Disposition:
12/18/2014	subject father/ mother's boyfriend	12/28/2014	Charges dropped due to death from suicide.
Comments:	Criminal charges against subject father/mother's boyfriend were dropped once he died from self-inflicted injuries resulting from his suicide attempt while incarcerated.		

Criminal Charge: Endangering the welfare of a child **Degree:** NA

Date Charges Filed:	Against Whom?	Date of Disposition:	Disposition:
09/14/2014	subject grandmother	Unknown	awaiting Court
Comments:	Criminal charges of Endangerment were made, due to subject grandmother's failure to act to provide medical care despite her knowing something was wrong with the subject child. This matter has not gone to Court yet for disposition.		



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Services Provided to the Family in Response to the Fatality

Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Needed but not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other, specify: Safe sleep and traumatic brain injury info.

Additional information, if necessary:

N/A

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? N/A

Explain:

There were no other siblings or other children in the household.

Were services provided to parent(s) and other care givers to address any immediate needs related to the fatality? Yes

Explain:



Subject mother was referred and participated in counseling. She also obtained a Doctor excuse for leave of work due to depression.

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? No
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

There is no CPS investigative history within three years prior to the fatality.

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

Prior CPS history involved the subject mother and subject father (mother's boyfriend) as children and did not involve the subject child. There is also two prior CPS indicated reports involving subject grandmother involving domestic violence with subject father as an MA child.

11/18/1996 INDICATED against subject grandmother involving domestic violence in the presence of the child. Subject father was an MA child in this report.

12/13/1996 INDICATED with adult grandmother having no role regarding domestic violence in presence of the child. Subject father was an MA child in this report.

Known CPS History Outside of NYS



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

Services Open at the Time of the Fatality

Required Action(s)

Are there Required Actions related to compliance issues for provisions of CPS or Preventive services ?

Yes No

Preventive Services History

There is no record of Preventive Services History provided to the deceased child, the deceased child’s siblings, and/or the other children residing in the deceased child’s household at the time of the fatality.

Required Action(s)

Are there Required Actions related to the compliance issues for provision of Foster Care Services?

Yes No

Foster Care Placement History

There is no record of foster care placement history provided to the deceased child, the deceased child’s siblings, and/or the other children residing in the deceased child’s household at the time of the fatality.

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

Additional Local District Comments

N/A

Recommended Action(s)

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

Action: The six-month-old subject child sustained a split lip and broken tooth the day before his death while in the care of the subject father and subject grandmother. Their explanation of the injuries did not match the child's limited developmental capabilities. The Batavia City Police were called and assessed the situation, but denied the subject mother's request to end the visit and return the child to her. No report was made to the SCR regarding this incident despite the injury and implausible explanation in a non-mobile child. Genesee County DSS has



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offered and provided mandated reporter training to the Batavia Police Department since this fatality occurred. It is recommended that Genesee County DSS provide ongoing support and technical assistance to the Batavia City Police Department in regard to appropriate reporting of suspected child abuse and maltreatment.”

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