



Report Identification Number: NY-18-111

Prepared by: New York City Regional Office

Issue Date: Apr 25, 2019

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: 2 month(s)

Jurisdiction: Bronx
Gender: Male

Date of Death: 10/31/2018
Initial Date OCFS Notified: 10/31/2018

Presenting Information

The 10/31/18 SCR report alleged on 10/31/18, the SC was found unresponsive and cyanotic, in his crib. The SC was not breathing and was pronounced dead at the hospital. The report also alleged the SM put the SC to bed at 10:00 PM on 10/30/18. When the SC did not cry to be fed, the SM went into the bedroom to check him and found him unresponsive. The SC was an otherwise healthy CH; therefore, the SM and adult sibling were considered the alleged subjects of this report.

Executive Summary

The 2-month-old male infant (SC) died on 10/31/18. As of 4/25/19, OCFS had not yet received a copy of the autopsy report.

The 10/31/18 SCR report included allegations of DOA/Fatality and IG of the SC by the SM and an adult SS.

ACS learned that during the night of 10/30/18, the SM laid the SC on his back to sleep in the crib. The SM, adult SS, 14-yo SS, and 8-yo SS were in the home. The SC usually awoke between the hours of 4:00 AM and 6:00 AM. On 10/31/18, the SM observed the SC seemed bluish and when she touched him she found his body was cold. The adult SS contacted 911 for assistance. The SM followed the instructions provided by the 911 operator. The SM said she placed the SC to sleep in the crib in which there were clothing items. She said the clothing items were in one end, and the SC slept in the other end of the crib. The SM said she received safe sleep practice education.

LE said the SM stated the SC was found uncovered on his back. However, the SM demonstrated she placed the SC face down. ACS learned that the SC had blood pooling in the face indicating the SC likely slept in the face down position. The SM reported finding the SC catatonic with gray blue skin color.

On 11/2/18, ACS filed an Article Ten Neglect petition in Bronx County Family Court (BXCFC) naming the SM and adult SS as respondents. The 14-yo and 8-yo SS were released to the care of the SM under ACS supervision.

On 11/2/18, the ME said the preliminary findings revealed the SC had CPR related injuries which were not suspicious. The autopsy found frontal blood pooling of the body which was the result of the SC being positioned on his stomach. According to the findings, the SC was too young to turn himself over, and it was believed the SC was placed on his stomach.

On 12/10/18, ACS held a conference with the SM and discussed homemaking services, Family Preservation Program (FPP), and PPRS. The SM decided not to return to her home, and the family temporarily resided with the MGM in a different borough. The SM felt she no longer needed homemaking services as the MGM assisted with supervision of the SS.

On 4/18/19, ACS unsubstantiated the allegations of DOA/Fatality and IG of the SC by the adult SS and DOA/Fatality by the SM. ACS based the determination on a finding no credible evidence. The adult SS was not a caretaker for the SC.

ACS added to the report the allegations of EdN and IG of the 8-yo SS by the SM and adult SS, and PD/AM of the 8-yo SS by the adult SS. ACS Sub the allegations of EdN and IG of the 8-yo and by the SM and adult SS, the allegation of PD/AM



of the 8-yo by the adult SS, and IG of the SC by the SM. ACS explained that the 8-yo SS did not receive the required therapeutic services in school. The SM was the legal guardian for the 8-yo SS and the adult SS was a person legally responsible (PLR) for the 8-yo SS. Regarding the allegation of IG of the SC by the SM, ACS added that the SM received safe sleep practice education and was aware of the danger of co-sleeping with your CH. The SM said she co-slept most of the time with the SC and the SM admitted to putting the SC to sleep in the crib that included clothing items.

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?** Yes
- **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?** Yes, sufficient information was gathered to determine all allegations.
- **Was the determination made by the district to unfound or indicate appropriate?** Yes

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:

ACS opened a preventive services case on 10/31/18.

Required Actions Related to the Fatality

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

Issue:	Timely/Adequate Case Recording/Progress Notes
Summary:	The Investigation Progress Notes were not entered contemporaneously. There were events that occurred on 11/13/18, but were not entered until 12/28/18.
Legal Reference:	18 NYCRR 428.5
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.



Issue:	Timely/Adequate 24 Hour Assessment
Summary:	The 11/1/18 Safety Assessment document was inadequate. The document included comments regarding the adult sibling's marijuana use although ACS did not clarify the impact of the marijuana use on any of the caretakers' ability to care for the SS.
Legal Reference:	SSL 424(6);18 NYCRR 432.2(b)(3)(i)
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 10/31/2018

Time of Death: 08:10 AM

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

Unknown

County where fatality incident occurred:

Bronx

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?

N/A

Child's activity at time of incident:

- Sleeping
- Playing
- Other

- Working
- Eating

- Driving / Vehicle occupant
- Unknown

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

At time of incident supervisor was: Not impaired.

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	Male	2 Month(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	40 Year(s)
Deceased Child's Household	Sibling	Alleged Perpetrator	Female	20 Year(s)
Deceased Child's Household	Sibling	No Role	Female	14 Year(s)



Deceased Child's Household	Sibling	Alleged Victim	Female	8 Year(s)
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LDSS Response

On 10/31/18, the hospital staff said the SM admitted to oversleeping as she awoke at 7:00 AM. The SM said upon awakening, she checked the SC and found the SC face down in the crib. She then turned him over and observed he was blue.

ACS contacted LE and learned that the SM clothed the SC in a onesie and placed a cover over the SC to sleep.

On 10/31/18, ACS visited the home of the MGM where the SM and family temporarily resided after the SC died. ACS interviewed the SM who said the SC was born healthy with no medical conditions. According to the SM's account, she laid the SC on his back when she placed him in the crib to sleep. When she awoke, she observed the SC in the crib, the SC seemed bluish in color and when she touched him he was cold. She did not get a response from the SC. The SM said the adult SS contacted 911. The SM denied she misused drugs or alcohol.

The adult SS said she contacted 911 after she overheard the SM's cry of distress. She stated she assisted with supervision of the 8-yo SS. The 8-yo SS was unable to effectively communicate with ACS. ACS observed this SS and noted she engaged all her family members. The 14-yo SS said she did not want to speak with ACS alone and wanted the SM present. The 14-yo SS said she observed the SC at approximately 9:30 PM on 10/30/18, and at the time the SC was alert. During the interview with ACS, the BF said the SM told him that she awoke on 10/31/18, touched the SC and found the SC was cold. The SM had explained that she laid the SC on his back to sleep.

Through LE, ACS obtained and reviewed pictures of the home. The documentation reflected the crib was cluttered with baby clothing, diapers, and a comforter. During the reenactment with the Medical Legal Investigator and LE, the SM said the SC was placed on his back at bedtime and on the morning of 10/31/18, he was found lying on his back unresponsive. ACS addressed the information about the SC's sleep position with the attending Dr. On 11/1/18, the attending Dr. said the SM stated that on the night of 10/30/18, she placed the SC to sleep on his side but when she awoke, she found the SC was face down. The Dr. said it is possible that some children at two months old can wiggle themselves until they turn over, but they are unable to turn themselves back to their original position.

On 11/1/18, the school staff said the 8-yo SS needed services in school. ACS learned that the SS missed numerous days of school and as a result, the SS did not receive some of the therapeutic services. There were concerns about her well-being.

ACS referred the family to the FPP. On 11/2/18, the adult SS submitted to a drug test. On 11/5/18, ACS was informed that the drug test was positive for marijuana.

On 11/4/18, ACS visited the family in the home of the MGM. ACS observed the 8-yo SS in the home. The SM said the 14-yo SS was with the MA. On the following day, ACS interviewed the SM and adult SS. During the interview, the SM refused ACS offer for bereavement counseling. The SM opted to seek services with a community based organization. ACS discussed the result of the adult SS's drug test that was positive for marijuana. The adult SS acknowledged she used marijuana on 10/31/18. ACS provided the adult SS with referral information for CASAC. The documentation reflected the adult SS met with the CASAC on 11/7/18, and CASAC assessment reflected the adult SS had a history of marijuana, ecstasy and cocaine misuse.

On 11/13/18, ACS informed the SM that the family received approval for homemaking.

Official Manner and Cause of Death



Official Manner: Pending

Primary Cause of Death: Unknown

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review

Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?No

Comments: The investigation adhered to previously approved protocols for joint investigations.

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

Comments: There is no OCFS approved Child Fatality Review Team in NYC.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
049437 - Deceased Child, Male, 2 Mons	049439 - Sibling, Female, 20 Year(s)	DOA / Fatality	Unsubstantiated
049437 - Deceased Child, Male, 2 Mons	049438 - Mother, Female, 40 Year(s)	DOA / Fatality	Unsubstantiated
049437 - Deceased Child, Male, 2 Mons	049439 - Sibling, Female, 20 Year(s)	Inadequate Guardianship	Unsubstantiated
049437 - Deceased Child, Male, 2 Mons	049438 - Mother, Female, 40 Year(s)	Inadequate Guardianship	Substantiated
049441 - Sibling, Female, 8 Year(s)	049438 - Mother, Female, 40 Year(s)	Inadequate Guardianship	Substantiated
049441 - Sibling, Female, 8 Year(s)	049439 - Sibling, Female, 20 Year(s)	Educational Neglect	Substantiated
049441 - Sibling, Female, 8 Year(s)	049439 - Sibling, Female, 20 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
049441 - Sibling, Female, 8 Year(s)	049438 - Mother, Female, 40 Year(s)	Educational Neglect	Substantiated
049441 - Sibling, Female, 8 Year(s)	049439 - Sibling, Female, 20 Year(s)	Inadequate Guardianship	Substantiated

CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatrician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the investigation adhere to established protocols for a joint investigation?	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information:

The Investigation Progress Notes were not entered contemporaneously. Some of the events occurred on 11/13/18, but were not entered until 12/28/18.

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 7 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 30 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Fatality Risk Assessment / Risk Assessment Profile

	Yes	No	N/A	Unable to Determine
Was the risk assessment/RAP adequate in this case?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



During the course of the investigation, was sufficient information gathered to assess risk to all surviving siblings/other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an adequate assessment of the family's need for services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain:
The SM was approved for homemaking services. The adult sibling met with the CASAC on 10/7/18.

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain as necessary:
On 11/2/18, ACS filed an Article Ten Neglect petition in Bronx County Family Court (BXFC) naming the SM and adult SS as the respondents. The 14-yo and 8-yo SS were released to the care of the SM under ACS supervision.

Legal Activity Related to the Fatality

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

- Family Court Criminal Court Order of Protection

Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
11/02/2018	There was not a fact finding	There was not a disposition
Respondent:	049438 Mother Female 40 Year(s)	
Comments:	On 11/2/18, ACS filed an Article Ten Neglect Petition in BXCFC naming the SM and adult SS as the respondents. In the petition, ACS requested that the 14-yo and 8-yo SS be released to the SM under ACS supervision. ACS included the following conditions: respondent SM comply with ACS supervision including announced and unannounced visits, SM comply with reasonable referrals, SM and respondent SS submit to random drug tests and test negative; if positive, submit to CASAC and adhere to recommendations, SM make best efforts to ensure the SS attend school regularly and on time, the SM comply with homemaking services and SM engage in Family Preservation Program (FPP). The BXCFC granted all of the above requests with the exception of the SM submitting to drug screening. The BXCFC did not grant the request as there was no indication the SM misused drugs. The 14-yo and 8-yo SS were released to the care of the SM under ACS supervision.	



Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
11/02/2018	There was not a fact finding	There was not a disposition
Respondent:	049439 Sibling Female 20 Year(s)	
Comments:	On 11/2/18, ACS filed an Article Ten Neglect Petition in BXCFC naming the SM and adult SS as the respondents. In the petition, ACS requested that the 14-yo and 8-yo SS be released to the SM under ACS supervision. ACS included the following conditions: respondent SM comply with ACS supervision including announced and unannounced visits, SM comply with reasonable referrals, SM and respondent SS submit to random drug tests and test negative; if positive, submit to CASAC and adhere to recommendations, SM make best efforts to ensure the SS attend school regularly and on time, the SM comply with homemaking services and SM engage in Family Preservation Program (FPP). The BXCFC granted all of the above requests with the exception of the SM submitting to drug screening. The BXCFC did not grant the request as there was no indication the SM misused drugs. The 14-yo and 8-yo SS were released to the care of the SM under ACS supervision.	

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	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Other, specify: Family Preservation Program

Additional information, if necessary:

ACS referred the family to the Family Preservation Program (FPP).

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? Yes

Explain:

ACS provided the family with homemaking services.

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

Explain:

ACS provided the family with homemaking 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? 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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
03/07/2016	Sibling, Female, 12 Years	Mother, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	Yes
	Sibling, Female, 12 Years	Mother, Female, 38 Years	Inadequate Guardianship	Unsubstantiated	



Sibling, Female, 12 Years	Mother, Female, 38 Years	Lack of Supervision	Unsubstantiated
Sibling, Female, 12 Years	Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Sibling, Female, 6 Years	Sibling, Female, 19 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 6 Years	Mother, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 6 Years	Mother, Female, 38 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 6 Years	Mother, Female, 38 Years	Lack of Supervision	Unsubstantiated
Sibling, Female, 6 Years	Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Sibling, Female, 12 Years	Sibling, Female, 19 Years	Inadequate Guardianship	Unsubstantiated

Report Summary:

The 3/7/16 SCR report alleged on 3/7/16, the SM and adult SS, had a physical altercation in the presence of a 6-year-old SS. During the altercation, the SM slapped the adult SS. The altercation ended up in the hallway outside of the apartment and LE responded. The report also alleged that on a daily basis, the SM abused drugs including marijuana and alcohol to the extent that she was unable to safely care for the SS. The 12-yo SS asked others for food because the SM did not provide the SS with food. The SM spent household money on drugs.

Report Determination: Unfounded

Date of Determination: 05/05/2016

Basis for Determination:

The adult SS was not a caretaker for the other SS and not responsible for them. It was reported there was a physical altercation in the SS's presence, but the adult SS and SM reported the other SS were in school. There was no Domestic Incident Report (DIR) pertaining to the incident. The SM said she did not leave the SS home alone. The 17-yo and 12-yo SS denied the 6-yo SS was left alone or in the 12-yo SS's care. The SM reported she closely monitored the 6-yo SS ensuring adequate supervision. The SM denied drug use and admitted to social alcohol use. The SS denied the SM used drugs. The home was observably neat and clean, and the family had an adequate supply of food.

OCFS Review Results:

ACS began the investigation in a timely manner. The SM reported she had an argument with the adult SS. The SM said she slapped the adult SS in the face. The other SS were not in the home; they were in school. The adult SS contacted LE, but no one was arrested. The SM denied marijuana and alcohol misuse. The SM required services to address the 6-yo SS's developmental needs. The 12-yo and 17-yo SS said they were not in the home during the incident. The 17-yo SS denied the SM used marijuana.

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

Issue:

Timely/Adequate Seven Day Assessment

Summary:

The 3/14/16 Safety Assessment document was inadequate as it included comments that did not support the selected safety factors. The associated comment did not support the selected safety factor that stated the SM used alcohol to the extent that there was a negative impact on her ability to supervise, protect and/or care for the SS.

Legal Reference:

SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)

Action:



ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

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

The adult SS was not known to the SCR and ACS as a subject, but was known as a child.

The SM was known as a subject in a SCR report dated 5/13/14. The allegations of the 5/13/14 report were EdN and IG of the 16-year-old SS by the SM. On 6/12/14, ACS Unsub the allegations of the report. ACS closed the case with no services required.

Known CPS History Outside of NYS

There was no known history outside of NYS.

Preventive Services History

The family received preventive services beginning on 8/14/14. The Queens County Family Court judge placed the 16-year-old SS, in the care and custody of ACS on 8/13/14. The 7/9/15 FASP reflected this SS's behavior was exceptional at Boys Town New York Inc. Family and Youth program. On 2/2/15, the SS was discharged to the SM. Between February and July 2015, the SS received after care services. The case was closed on 8/12/15.

During the 3/7/16 investigation, ACS found the family needed services to address child care, and the CHN's behavioral, developmental and educational needs. ACS opened a preventive services case on 3/10/16. The service plan included: casework counseling, clinical services, education and training, respite and child care. ACS did not complete the required FASPs and the Family Services Progress Notes did not reflect ACS provided services to the family. ACS referred the family to community based services. ACS closed the preventive services case on 5/5/16.

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