



## Report Identification Number: RO-19-044

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

Issue Date: Apr 24, 2020

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	ASTO-Allowing Sex Abuse to Occur	



## Case Information

**Report Type:** Child Deceased  
**Age:** 11 year(s)

**Jurisdiction:** Schuyler  
**Gender:** Male

**Date of Death:** 11/23/2019  
**Initial Date OCFS Notified:** 11/27/2019

## Presenting Information

On the night of 11/23/19, the subject child was struck by a car and died as a result of the injuries he sustained. The accident occurred in the State of Florida and no other details were known to Schuyler County Department of Social Services.

## Executive Summary

On 11/24/19, via a phone call, SCDSS learned the subject child was hit by a car and died as a result on 11/23/19. On 11/27/19, Schuyler County Department of Social Services (SCDSS) notified OCFS of the subject child's death through the required 7065 Agency Reporting Form. SCDSS had an open Preventive Services case with the mother, the subject child and three surviving siblings (ages 9, 7, and 3 years old) from 10/25/18 until the subject child's death. SCDSS opened a Preventive Services case with the family due to the mother's inability to provide stable and safe housing, adequate supervision and ongoing hygiene concerns for the children. In December of 2018 SCDSS had filed an Article 10 Neglect Petition in Family Court seeking court ordered services. A one-year Order of Supervision was granted in Family Court 2/5/19. The mother was subject to this order until 11/12/19, when SCDSS obtained an Order of Release from the court. SCDSS was aware the mother had moved to Florida on 8/27/19. SCDSS spoke with the mother on 8/28/19 and she stated that they had made it to Florida and provided SCDSS with the address of her relative. The mother, the subject child and surviving siblings were residing with a relative in Florida and would not be returning to New York State. SCDSS after numerous calls made contact with Florida CPS and they visited the mother and the children at the relative's home and had no concerns for the care of the children. The last contact received from Florida CPS was on 10/25/19. SCDSS consulted with their legal department and filed for an Order releasing them from the Order of Supervision on 11/8/19, and obtained relief from the court on 11/12/19 as stated above.

Prior to notifying OCFS of the child's death, SCDSS closed their case on 11/25/19. SCDSS called and spoke with the mother in Florida and learned the subject child had been walking to the store with a relative and after exiting the store the subject child crossed the street while the light was still green and was struck by a car. The subject child died at the scene. The mother was not with the subject child when the accident occurred, and she refused to provide SCDSS with the name of the relative that was with the subject child. The mother informed SCDSS that there was no law enforcement investigation pending. It was ruled an accident as the light was green when the subject child walked in front of the car. The mother said the 9 and 7-year-old surviving siblings were working with a school therapist and she was seeing a therapist on her own. SCDSS attempted to contact grandfather in New York but were unsuccessful. SCDSS made no attempts to contact law enforcement to learn further details as they had already closed their case. It was unknown if an autopsy was performed. There were no further details provided in the case record.

SCDSS did not meet all NYS regulations and requirements pertaining to casework contacts and the provision of services. Many progress notes were more than 1 month late and some as many as 10 months late. All Family Assessment and Service Plans (FASPS) were completed; however, several were completed late.

### PIP Requirement

This review resulted in a citation related to casework practice. In response, SCDSS will submit a PIP to the Rochester Regional Office within 30 days of receipt of this report. The PIP will identify what action(s) the SCDSS has taken, or will take, to address the cited issue(s). For citations where a PIP is currently implemented, SCDSS will review the plan(s) and revise as needed.



## 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? N/A

### Determination:

- Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation? N/A
- Was the determination made by the district to unfound or indicate appropriate? N/A

### Explain:

The mother moved to Florida with her children to live on 8/27/19. After verifying the mother would be staying in Florida and CPS in Florida had no concerns, SCDSS filed and was granted relief in Family Court on 11/12/19. The preventive services case had not yet closed at the time of the child's death on 11/23/19. SCDSS closed their case on 11/25/19.

- 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:

This was not an SCR reported fatality. The subject child died during an open services case.

## Required Actions Related to the Fatality

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

## Fatality-Related Information and Investigative Activities

### Incident Information

**Date of Death:** 11/23/2019 **Time of Death:** Unknown

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

**County where fatality incident occurred:** Out Of State

**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: walking to a store when hit by a car

**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	No Role	Male	11 Year(s)
Deceased Child's Household	Mother	No Role	Female	30 Year(s)
Deceased Child's Household	Sibling	No Role	Female	9 Year(s)
Deceased Child's Household	Sibling	No Role	Male	7 Year(s)
Deceased Child's Household	Sibling	No Role	Female	3 Year(s)
Other Household 1	Father	No Role	Male	42 Year(s)
Other Household 2	Father	No Role	Male	32 Year(s)
Other Household 3	Father	No Role	Male	31 Year(s)

**LDSS Response**

On 11/24/19, SCDSS was notified of the death of the 11-year-old subject child. The subject was hit by a car in the state of Florida, where he was residing with his mother and 3 surviving siblings. There were no allegations reported as a result of the death. SCDSS had not gathered any information about the death of the subject child prior to closing their case on 11/25/19 and submitting the required 7065 form to OCFS on 11/27/19. After the case was closed SCDSS obtained further details about the subject child's death from the mother.

The subject child was struck by a car and killed on 11/23/19. According to the mother he had gone to the store with a relative and when he was leaving the store, he crossed the street while the light was still green, and walked into oncoming traffic. The mother stated there was not a pending law enforcement investigation as the driver was not at fault. No further details were provided.

**Official Manner and Cause of Death**

**Official Manner:** Accident  
**Primary Cause of Death:** From an injury - external cause  
**Person Declaring Official Manner and Cause of Death:** Unknown

**Multidisciplinary Investigation/Review**

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



**Comments:** SCDSS does not have an OCFS approved CFRT.

### CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
<b>All children observed?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>When appropriate, children were interviewed?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Contact with source?</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>All appropriate Collaterals contacted?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Examiner / Coroner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Was a death-scene investigation performed?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Coordination of investigation with law enforcement?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Was there timely entry of progress notes and other required documentation?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Fatality Safety Assessment Activities

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

<b>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?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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**Explain:**  
 The family had moved to Florida in August of 2019. SCDSS consulted with legal and obtained an Order to Release from Family Court which was granted on 11/8/19. On 11/23/19 SCDSS received a call that the subject child was hit by a car while crossing the street in Florida. SCDSS closed their case on 11/25/19.



### Fatality Risk Assessment / Risk Assessment Profile

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

### 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"/>
<b>Explain as necessary:</b> The surviving siblings remained in their mother's care in Florida.				

### 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	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Economic support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Funeral arrangements	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Housing assistance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Mental health services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Foster care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Health care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				



# Child Fatality Report

Legal services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Family planning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Homemaking Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Parenting Skills	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Domestic Violence Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Early Intervention	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Alcohol/Substance abuse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Child Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Intensive case management	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Family or others as safety resources	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Other	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				

**Additional information, if necessary:**

The mother had moved to Florida with her children in August of 2019. SCDSS spoke with the mother who stated she was seeing a therapist to assist her in coping with the death of her son and the surviving siblings were receiving counseling through their school therapist.

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

**Explain:**

The family moved to Florida.

## History Prior to the Fatality

### Child Information

- Did the child have a history of alleged child abuse/maltreatment?** Yes
- Was the child ever placed outside of the home prior to the death?** Yes
- 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

## 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)
08/23/2019	Sibling, Male, 11 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	No
	Sibling, Male, 11 Years	Mother, Female, 30 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 8 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	



Sibling, Female, 8 Years	Mother, Female, 30 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 7 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Male, 7 Years	Mother, Female, 30 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 3 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 3 Years	Mother, Female, 30 Years	Inadequate Guardianship	Unsubstantiated

**Report Summary:**

The SCR report alleged the mother had a history of homelessness. Recently, she and her four young children were living in a van. The mother and the children had been kicked out of numerous hotels due to noise and for being dirty. The mother and the children were kicked out of a hotel on 8/23/19 and they had no place to go.

**Report Determination:** Unfounded

**Date of Determination:** 09/12/2019

**Basis for Determination:**

Chemung County DSS unsubstantiated the allegations of IG and IF/C/S against the mother for the surviving siblings. CCDSS learned the mother, the subject child and the surviving siblings had left the State on 8/24/19 to move to Florida. CCDSS verified the mother and the children were staying with a relative in Florida. CCDSS spoke with Schuyler County DSS who had an open case in there county where Court Ordered services were being provided to the family. SCDSS and CPS in Florida had been in contact about the next steps. CCDSS unfounded and closed the case.

**OCFS Review Results:**

CCDSS gathered sufficient information in their case to make a determination.

**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)
10/10/2018	Deceased Child, Male, 10 Years	Mother, Female, 29 Years	Inadequate Food / Clothing / Shelter	Substantiated	Yes
	Deceased Child, Male, 10 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	
	Mother, Female, 7 Years	Mother, Female, 29 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Mother, Female, 7 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 6 Years	Mother, Female, 29 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Male, 6 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 2 Years	Mother, Female, 29 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Female, 2 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	

**Report Summary:**

The SCR report alleged the home in which the family resided was filthy. There was garbage, dirty clothing and debris



strewn throughout the home. The furniture was in disarray. The bathroom and kitchen sinks were filled with dirty water that had been sitting there for days. The refrigerator had been left open for days with rotten food sitting inside. The toilets were filled with fecal matter. The home had an extremely foul odor. The unsanitary living conditions placed the children at risk.

**Report Determination:** Indicated **Date of Determination:** 10/30/2018

**Basis for Determination:**  
 This report was a subsequent report to an open investigation with similar allegations. The home had garbage and dirty clothing strewn throughout. SCDSS gathered information from law enforcement, a babysitter, and children's teachers who had numerous concerns about the care the mother was providing the children. On two separate occasions two of the surviving siblings were found wandering outside the home, unsupervised while the mother was sleeping. SCDSS provided services such as mental health, parent educator, and preventive services. The allegations of IG and IF/C/S were substantiated against the mother for the subject child and the surviving. The case was indicated and opened.

**OCFS Review Results:**  
 SCDSS did not add the father of the subject child to the report, or provide him with the required notice of existence letter. SCDSS did not provide notification letters within the 7 day required time frame as per regulation. SCDSS did gather sufficient information to make a determination.

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

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

**Summary:**  
 SCDSS did not provide the notice of report to the subject child's father. SCDSS did not provide the notice of the report to the other adults listed within the 7 day required time frame as per regulation.

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

**Action:**  
 SCDSS will provide the notice of existence within the 7 day required time frame as per regulation.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
07/24/2018	Deceased Child, Male, 9 Years	Mother, Female, 28 Years	Inadequate Food / Clothing / Shelter	Substantiated	No
	Deceased Child, Male, 9 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Male, 9 Years	Mother, Female, 28 Years	Lack of Supervision	Substantiated	
	Deceased Child, Male, 9 Years	Grandparent, Male, 59 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Male, 9 Years	Grandparent, Female, 66 Years	Inadequate Guardianship	Substantiated	



Sibling, Female, 7 Years	Mother, Female, 28 Years	Inadequate Food / Clothing / Shelter	Substantiated
Sibling, Female, 7 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated
Sibling, Female, 7 Years	Mother, Female, 28 Years	Lack of Supervision	Substantiated
Sibling, Female, 7 Years	Grandparent, Male, 59 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 7 Years	Grandparent, Female, 66 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 6 Years	Mother, Female, 28 Years	Inadequate Food / Clothing / Shelter	Substantiated
Sibling, Male, 6 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated
Sibling, Male, 6 Years	Mother, Female, 28 Years	Lack of Supervision	Substantiated
Sibling, Male, 6 Years	Father, Male, 41 Years	Inadequate Guardianship	Substantiated
Sibling, Male, 6 Years	Grandparent, Male, 59 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 6 Years	Grandparent, Female, 66 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 6 Years	Father's Partner, Female, 24 Years	Excessive Corporal Punishment	Substantiated
Sibling, Male, 6 Years	Father's Partner, Female, 24 Years	Inadequate Guardianship	Substantiated
Sibling, Male, 6 Years	Father's Partner, Female, 24 Years	Lacerations / Bruises / Welts	Substantiated
Sibling, Female, 23 Months	Mother, Female, 28 Years	Inadequate Food / Clothing / Shelter	Substantiated
Sibling, Female, 23 Months	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated
Sibling, Female, 23 Months	Mother, Female, 28 Years	Lack of Supervision	Substantiated
Other Child - PS and Father 1 child, Male, 2 Years	Father, Male, 41 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Sibling, Female, 23 Months	Father's Partner, Female, 24 Years	Inadequate Guardianship	Substantiated
Sibling, Female, 23 Months	Father's Partner, Female, 24 Years	Lacerations / Bruises / Welts	Substantiated
Other Child - PS and Father 1 child, Male, 2 Years	Father, Male, 41 Years	Inadequate Guardianship	Unsubstantiated
Other Child - PS and Father 1 child, Male, 7 Months	Father, Male, 41 Years	Inadequate Guardianship	Unsubstantiated
Other Child - PS and Father 1 child, Male, 7 Months	Father, Male, 41 Years	Parents Drug / Alcohol Misuse	Unsubstantiated



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Other Child - PS and Father 1 child, Male, 2 Years	Father's Partner, Female, 24 Years	Inadequate Guardianship	Unsubstantiated
Other Child - PS and Father 1 child, Male, 2 Years	Father's Partner, Female, 24 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Other Child - PS and Father 1 child, Male, 7 Months	Father's Partner, Female, 24 Years	Inadequate Guardianship	Unsubstantiated
Other Child - PS and Father 1 child, Male, 7 Months	Father's Partner, Female, 24 Years	Parents Drug / Alcohol Misuse	Unsubstantiated

**Report Summary:**

An SCR report received four reports that were merged and closed as duplicates with similar allegations. The allegations of LS, IG and IF/C/S against the mother for the siblings and the subject child. The allegations of IG and XCP against the PS for the surviving siblings. The allegations of PD/AM against the PS and the Father for the surviving siblings. Reports against the mother for the children were regarding unsanitary living conditions and the mother leaving the children with inappropriate caregivers or unsupervised for extended periods of time. The children were found wandering outside alone. The report concerning the PS alleged she hit the surviving sibling leaving marks.

**Report Determination:** Indicated

**Date of Determination:** 10/30/2018

**Basis for Determination:**

SCDSS substantiated the allegations against the mother of the subject child and the surviving siblings for IG, LS and IF/C/S. The allegations of XCP, L/B/W and IG for the surviving sibling were substantiated against the PS. The allegation of IG was substantiated against the father for the surviving sibling. SCDSS based their determination on interviews, collateral contacts and home visits. The case was indicated and opened for services with the mother for the subject child and the surviving siblings. Visits with the PS and the father were suspended.

**OCFS Review Results:**

SCDSS gathered sufficient information to make a determination.

**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)
02/17/2018	Sibling, Female, 16 Months	Father, Male, 30 Years	Inadequate Guardianship	Substantiated	No
	Sibling, Female, 16 Months	Father, Male, 30 Years	Lack of Supervision	Substantiated	
	Sibling, Female, 16 Months	Father, Male, 30 Years	Parents Drug / Alcohol Misuse	Substantiated	
	Sibling, Female, 16 Months	Father's Partner, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 16 Months	Father's Partner, Female, 31 Years	Lack of Supervision	Substantiated	
	Sibling, Female, 16 Months	Father's Partner, Female, 31 Years	Parents Drug / Alcohol Misuse	Substantiated	

**Report Summary:**

The SCR report alleged the father of the then 1-year-old surviving sibling was a known registered sex offender and as a result had supervised visits only. The father had a visit with the surviving sibling and his partner was to supervise. The partner was high on marijuana and suboxone when police were called to the home for a domestic incident. When the police arrived to the home for the second time that day, they found the partner and the father smoking marijuana in the back bedroom. The 1-year-old surviving sibling was crying in her play pen, unattended in the living room.

**Report Determination:** Indicated**Date of Determination:** 04/17/2018**Basis for Determination:**

SCDSS contacted and obtained information from multiple collaterals. The mother of the 1-year-old came and got the child when called by the police about the situation. The mother filed a petition in Family Court and stopped visits with the father. The father's partner was in a treatment program but tested positive for drugs several times during the investigation. The father tested positive for marijuana. The father failed to provide a minimum degree of care. SCDSS substantiated the allegations of IG, LS and PD/AM for the father and the partner for the surviving sibling. The case was indicated and closed. Referrals were made for community based services.

**OCFS Review Results:**

SCDSS contacted multiple collateral, made home visits, gathered records from law enforcement, treatment providers and mental health professionals. SCDSS completed all regulatory requirements within the required time frames.

**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)
06/23/2017	Deceased Child, Male, 8 Years	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	No
	Deceased Child, Male, 8 Years	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 6 Years	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Female, 6 Years	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 5 Years	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 5 Years	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 10 Months	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Female, 10 Months	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	

**Report Summary:**

The SCR report and duplicate report alleged inadequate food, clothing and shelter against the mother for this subject child and the surviving siblings. The report alleged the family residence was a safety hazard for the children. The family residence had holes in the bathroom floor or no floor at all. The children could have fallen through the floor. At the time the report was made there was only plywood on the bathroom floor. There had been no running water for several days; therefore there was no way to shower or use the bathroom. The mother had continued to remain in the home with the children.

**Report Determination:** Unfounded**Date of Determination:** 09/29/2017**Basis for Determination:**

SCDSS found there was a bathroom upstairs that the family could use and the mother had bottled water to use for cooking. The children spent most of their day, at the babysitter's home, when the mother was working. There was running water outside and the children would shower at friends or relatives homes. The mother would use that when needed. The landlord was making repairs to the bathroom. The mother was staying with friends and the friends just left and did not tell her about the repairs the landlord would be making. The mother found an appropriate apartment for her and the children during the investigation. The allegations were Unsubstantiated and the case was unfounded and closed.

**OCFS Review Results:**

SCDSS gathered sufficient information to make a determination in this case,

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

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

From 2011-2015, the mother and the father for the subject child and the surviving siblings were involved in multiple CPS investigations with common allegations of IG, PD/AM, LS, and L/B/W. Three of the cases were indicated against mother, and three were indicated against the father for the subject child and the surviving siblings. There were three unfounded cases with similar allegations against the mother for the surviving children.

**Known CPS History Outside of NYS**

The mother left the state of NY during her open preventive services case sometime at the end of 8/27/19. The mother the subject child and the surviving siblings moved in with a relative and the mother did not plan to return to NY. SCDSS made referral to Florida CPS and had follow up correspondence with Florida CPS about the mother, the subject child and the surviving siblings.

**Services Open at the Time of the Fatality**

Was the deceased child(ren) involved in an open preventive services case at the time of the fatality? Yes

Date the preventive services case was opened: 10/25/2018

Was the deceased child(ren) involved in an open Child Protective Services case at the time of the fatality? Yes

Date the Child Protective Services case was opened: 10/25/2018

**Evaluative Review of Services that were Open at the Time of the Fatality**

	Yes	No	N/A	Unable to Determine
Did the service provider(s) comply with the timeliness and content requirements for progress notes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the services provided meet the service needs as outlined in the case record?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did all service providers comply with mandated reporter requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there information in the case record that indicated the existence of behaviors or conditions that placed the children in the case in danger or increased their risk of harm?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Casework Contacts**

	Yes	No	N/A	Unable to Determine
Did the service provider comply with case work contacts, including face-to-face contact as required by regulations pertaining to the program choice?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Services Provided**



	Yes	No	N/A	Unable to Determine
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were services provided to parents as necessary to achieve safety, permanency, and well-being?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Family Assessment and Service Plan (FASP)

	Yes	No	N/A	Unable to Determine
Was the most recent FASP approved on time?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If not, how many days was it overdue? The most recent FASP was completed 35 days late.				
Was there a current Risk Assessment Profile/Risk Assessment in the most recent FASP?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the FASP consistent with the case circumstances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Closing

	Yes	No	N/A	Unable to Determine
Was the decision to close the Services case appropriate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Provider

	Yes	No	N/A	Unable to Determine
Were Services provided by a provider other than the Local Department of Social Services?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional information, if necessary: N/A				

### Required Action(s)

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

Yes  No

<b>Issue:</b>	Timely/Adequate Case Recording/Progress Notes
<b>Summary:</b>	Many of the progress notes were more than 30 days late and some as many as 10 months after the event date. There was limited information in the case notes which made it difficult to determine what activity was occurring in the case.
<b>Legal Reference:</b>	18 NYCRR 428.5



<b>Action:</b>	Progress notes must be made as contemporaneously as possible with the occurrence of the event or the receipt of the information which is to be recorded.
<b>Issue:</b>	Timeliness of completion of FASP
<b>Summary:</b>	Several of the FASPs in this case were completed late and the most recent FASP was 35 days late.
<b>Legal Reference:</b>	18 NYCRR428.3(f)
<b>Action:</b>	SCDSS will complete timely and accurate FASPs.

### Preventive Services History

On 12/17/2012, Yates County DSS filed an Article 10 Neglect petition in Family Court against the mother for the subject child and the surviving siblings. The children were placed in a non-LDSS relative/resource placement with the paternal grandparents due to the mother's on going mental health issues. Mandated preventive services were ordered due to mother's noncompliance with services. The grandparents were awarded Article 6 custody on 1/29/15 via Family Court and the mother agreed. The mother continued her mental health services. The case was open from 2012 to 3/27/2015, when the case was closed with no further services needed.

On 10/30/18, SCDSS opened a preventive services case due to mother's inability to provide stable housing and proper supervision for the children. The case was opened and on 12/4/18 after an Article 10 neglect petition was filed in Family Court, resulting in a 1yr order of supervision which was ordered on 2/4/20. The mother was in counseling for her mental health, completed a parenting class, and obtaining housing. The mother moved to Florida with her children to live with a relative 8/27/19. SCDSS consulted legal and obtained an Order of Release from Family Court on 11/12/19. The subject child was hit by a car while crossing the street in Florida and died. The preventive services case had not yet closed at the time of the child's death on 11/23/19.

### 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