



Report Identification Number: AL-19-035

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

Issue Date: Apr 23, 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: 2 year(s)

Jurisdiction: Washington
Gender: Female

Date of Death: 11/23/2019
Initial Date OCFS Notified: 12/04/2019

Presenting Information

An SCR report dated 12/4/19, stated that the 2-year-old child was in the care of her paternal grandmother. The parents visited the child at the grandmother’s home and noticed she had a cough and runny nose. The parents asked the grandmother to take the child to the doctor. The mother and father were unable to take the child to the doctor themselves for unknown reasons. The grandmother treated the child with over the counter medication. Around 3:30 AM on 11/23/19, the child was found unresponsive in her pack and play. The grandmother called 911 and the child was later pronounced deceased at the hospital. The child’s lungs were filled with fluid and the cause of death was determined to be pneumonia. A 7065 reporting form was completed on 11/27/19 after the child’s death was first reported to Washington County Department of Social Services.

Executive Summary

This fatality report concerns the death of a 2-year-old female child on 11/23/19. An SCR report was received on 12/4/19 identifying that the child has passed away while in the care of the paternal grandmother. The child had displayed signs of being ill for a few days and presented with a cough and cold symptoms.

Washington County Department of Social Services (WCDSS) became aware of the child’s passing on 11/26/19, reported the death to OCFS, and an investigation into how the child passed away began. As a result of the investigation, the decision to make an SCR report was made on 12/4/19, and the report was registered.

Washington County DSS interviewed the members of the family and appropriate collateral contacts. Through their investigation, WCDSS learned that the mother and the father of the child brought the child to stay with the paternal grandmother on 11/9/19. The mother and the father brought the child there due to their plan to abuse opiates after running out of maintenance medications and felt that they would not be able to adequately care for the child while using drugs.

The parents visited with the child on 11/21/19. During this visit they noticed that the child had a cough that sounded similar as to when she had croup and requested the grandmother take the child to the doctor. The mother and the father were unable to bring the child themselves due to being under the influence of opiates. The grandmother purchased over the counter medications and administered them to the child and planned to take the child to the doctor if her symptoms worsened.

The grandmother stated that the child did have a cough and a runny nose but was acting normal otherwise. The child did not have a fever, was active, and had no change in her appetite. The grandmother administered children’s Mucinex and used a Vick’s vapor rub roller on the child’s neck at 3:00 PM, then put the child to bed on 11/22/19 between 7:30-8:00 PM. The grandmother placed the child in her pack and play in the living room and slept on the couch next to her. Around 3:00AM on 11/23/19 the grandmother woke to the child calling for her. The grandmother’s husband was getting ready for work at the time and was in the room with them. The grandmother changed the child’s diaper, gave her apple juice in a bottle, and put her back in the pack and play. Approximately five minutes later, the grandmother was going to smoke a cigarette and bumped into the pack and play while moving past it. The grandmother thought it was odd the child did not wake as she was normally a light sleeper and checked on her. The grandmother noticed the child was sleeping in an odd position and went to move her into a more normal position and noticed she was not breathing. The grandmother yelled for her husband to call 911, which he immediately did. Police arrived on the scene within 3 minutes and started CPR. EMS arrived on scene and took over life saving measures and then transported the child to the hospital where she was later



pronounced deceased. An autopsy was performed. The results of the autopsy were not received by Washington County DSS prior to closing the case, however, preliminary results state the child had fluid in her lungs indicating pneumonia, and that she died from natural causes.

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

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:
WCDSS interviewed appropriate familial and collateral contacts and utilized an MDT approach to the investigation. The decision to Unfound the allegations and close the case were appropriate. The child appears to have passed away from natural causes. The final autopsy report was still pending at the time the case was closed.

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: 03:30 AM (Approximate)

County where fatality incident occurred:	Washington
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
- Playing
- Other

- Working
- Eating

- Driving / Vehicle occupant
- Unknown

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

How long before incident was the child last seen by caretaker? 5 Minutes

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	Female	2 Year(s)
Deceased Child's Household	Grandparent	Alleged Perpetrator	Female	61 Year(s)
Deceased Child's Household	Other Adult - Grandmother's husband	No Role	Male	57 Year(s)
Deceased Child's Household	Unrelated Home Member	No Role	Male	65 Year(s)
Other Household 1	Father	Alleged Perpetrator	Male	29 Year(s)
Other Household 1	Mother	Alleged Perpetrator	Female	32 Year(s)
Other Household 2	Other Adult - Grandparent to half siblings	No Role	Female	47 Year(s)
Other Household 2	Sibling	No Role	Female	10 Year(s)
Other Household 2	Sibling	No Role	Female	8 Year(s)

LDSS Response

Washington County Department of Social Services (WCDSS) became aware of the subject child's (SC) death while speaking with a relative of the surviving siblings. The fatality occurred in Warren County, where the child was staying. WCDSS submitted a 7065 form to notify OCFS of the child's death and began their investigation to find out how the child passed away. On 12/4/19, WCDSS and the OCFS Regional Office reviewed the case and decided a report needed to be made to the SCR. The report was registered, and information gathered between the date of the 7065 and the date of the report was used to assess for 24-Hour safety. The SC was the only child in the care of the PGM at the time of her death. The SF had two other children in the care of a relative who were safe at the time of the report. The SF had unsupervised weekend visitation with the surviving siblings.

WCDSS interviewed the PGM, the SF, and the SM, and other appropriate family members during the investigation. The PGM, her husband, and an unrelated home member were interviewed in their home, where the child passed away. The PGM identified that she had been caring for the child since 11/9/19. The SF and SM visited with the child in the home on 11/21/19 and noticed the SC had a cough. The SF and the SM identified to the PGM that the child had a cough and had a history of having croup. The PGM agreed to take the SC to the pediatrician if the symptoms worsened. The PGM identified that the child did not have a fever and presented with a cough and clear mucus coming from her nose. The PGM purchased and administered children's Mucinex and used a Vick's vapor rub roller on the SC's neck on 11/22/19, at 3:00 PM. The PGM then put the SC to bed on 11/22/19 between 7:30-8:00 PM. The PGM put the SC to sleep in a pack and



play in the living room area of the home. The PGM slept on the couch in the room with the SC. Around 3:30 AM, the PGM awoke to the SC calling for her. The PGM changed the SC's diaper, gave her a bottle of juice, and then put her back down in the pack and play. Approximately 5 minutes later, the PGM got up to smoke a cigarette. The PGM bumped into the pack and play and thought it was odd the SC did not wake up as she is normally a light sleeper. The PGM checked the child in the pack and play and noticed she was sleeping in an unusual position. The PGM went to move her into another position and then noticed that the child was not breathing and yelled for her husband to call 911. A call was made to 911 at 3:44 AM. LE arrived on the scene within a few minutes and began lifesaving interventions. EMS arrived at the home, took over lifesaving interventions, and transported the SC to the hospital where the SC was pronounced deceased. LE identified being unsure if the PGM began performing CPR prior to LE's arrival on scene and believed the PGM was receiving instructions over the phone on how to do so. EMS identified to WCDSS that they had a difficult time intubating the child.

During the investigation, WCDSS learned that the SF and the SM had been abusing opiates. Grief counseling services and drug abuse counseling services were offered to the SF and the SM and were declined. The SF stated that they preferred to cope with the death through drug use at this time.

The 10-year-old and 8-year-old surviving half-siblings were interviewed with their maternal grandmother. The SS's disclosed no knowledge of the SC's illness or death. Their maternal grandmother identified that she witnessed the SF at the funeral passed out in his vehicle with a needle in his leg. WCDSS offered drug abuse services to the SF and the SM and they were declined. The grandmother agreed with WCDSS that she would not allow visitation with the SF until he is engaged in treatment and sober.

The final autopsy report was not available at the time the case was closed. Preliminary reports show that the SC had fluid in her lungs, indicative of having pneumonia, and the death was being classified as natural.

Official Manner and Cause of Death

Official Manner: Natural

Primary Cause of Death: Unknown

Person Declaring Official Manner and Cause of Death: Unknown

Multidisciplinary Investigation/Review

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

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

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
053624 - Deceased Child, Female, 2 Yrs	053625 - Grandparent, Female, 61 Year(s)	DOA / Fatality	Unsubstantiated
053624 - Deceased Child, Female, 2 Yrs	053625 - Grandparent, Female, 61 Year(s)	Lack of Medical Care	Unsubstantiated
053624 - Deceased Child, Female, 2 Yrs	053628 - Mother, Female, 32 Year(s)	DOA / Fatality	Unsubstantiated
053624 - Deceased Child, Female, 2 Yrs	053628 - Mother, Female, 32 Year(s)	Lack of Medical Care	Unsubstantiated



Child Fatality Report

053624 - Deceased Child, Female, 2 Yrs	053629 - Father, Male, 29 Year(s)	DOA / Fatality	Unsubstantiated
053624 - Deceased Child, Female, 2 Yrs	053629 - Father, Male, 29 Year(s)	Lack of Medical Care	Unsubstantiated

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
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"/>

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 type="checkbox"/>	<input checked="" 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 SF and the SM were abusing opiate drugs at the time of the SC's death and continued to use to cope with the loss of their child. Treatment and grief counseling services were offered to the parents and all services were declined in preference to continue using drugs to cope with their emotions.

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

Additional information, if necessary:

The SF and the SM were abusing opiate drugs at the time of the SC's death and continued to use to cope with the loss of their child. Treatment and grief counseling services were offered to the parents and all services were declined in preference to continue using drugs to cope with their emotions. Other services were not offered due to the parent's refusal.

Were services provided to parent(s) and other care givers to address any immediate needs related to the fatality? No



Explain:

The SF and the SM were abusing opiate drugs at the time of the SC's death and continued to use to cope with the loss of their child. Treatment and grief counseling services were offered to the parents and all services were declined in preference to continue using drugs to cope with their emotions.

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? 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? Yes

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)
09/26/2019	Deceased Child, Female, 1 Years	Mother, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Sibling, Female, 8 Years	Mother, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Female, 1 Years	Father, Male, 29 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 8 Years	Father, Male, 29 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 8 Years	Other Adult - Maternal grandparent to Paternal siblings, Female, 47 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 8 Years	Other Adult - Maternal grandparent to Paternal siblings, Female, 47 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Female, 10 Years	Other Adult - Maternal grandparent to Paternal siblings, Female, 47 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 10 Years	Other Adult - Maternal grandparent to Paternal siblings, Female, 47 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	

Report Summary:

An SCR report alleged between 9/21/19-9/22/19 that the SF pointed a rifle with a laser scope at the children and the mother did not intervene. The 8-year-old child disclosed that the father was drinking, pointed a gun at the surviving siblings and expressed knowledge of drug use in the home. The SF and the SM denied having a gun as the SF is a convicted felon, and denied drug use. The SF and the SM identified that the gun in question was a paintball gun that was removed from the home.

Report Determination: Unfounded

Date of Determination: 12/19/2019

Basis for Determination:

The 8-year-old child gave a detailed account of the SF pointing a gun at the SC's head, shining the light in her eyes, being



made fearful by the SF pointing the gun, and purchasing and holding ammunition with the SF. The 8-year-old child also gave detailed descriptions of drug use, the SF being impaired in her presence, and another unknown male asking for a dollar and then going to the bathroom, leaving white powder behind. The SF and the SM denied the drug use and that there is a gun in the home, citing the SF is a felon and not allowed to own a gun.

OCFS Review Results:

WCDSS interviewed the 8-year-old child in and out of the presence of her maternal grandmother and the child was consistent in her disclosure. The child identified being fearful of her father and gave a detailed account of drug use in her presence. The SF identified that the gun in question was a paintball gun and that he had since gotten it out of the home. The SF and the SM also denied using drugs in the presence of the children. Following the death of the SC, the SF disclosed that he and the SM had been using opiates since early November. The detailed disclosure from the child constitutes the presence of some credible evidence as the child disclosed being fearful of the SF's actions.

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

Issue:

Appropriateness of allegation determination

Summary:

The 8-year-old child made a clear description of the SF being impaired and pointing a gun at she and the SC. The child disclosed being fearful for both herself and the SC due to the SF's actions. The SF and SM denied the incident occurred and stated that the only gun they were in possession of was a paintball gun. The child may not have been able to differentiate between a real gun and fake one.

Legal Reference:

FCA 1012 (e) & (f);18 NYCRR 432.2(b)(3)(iv)

Action:

WCDSS will refer to the CPS Program Manual and/or consult with the Albany Regional Office when determining the appropriateness of allegations, and will take into consideration all information when applying the circumstances to the definition(s). Due to the child's disclosures and being fearful of the father's actions, there was enough credible evidence to substantiate the allegation in the report.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
08/15/2018	Deceased Child, Female, 1 Years	Mother, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	Yes

Report Summary:

The SCR report alleged that the SM had left drug paraphernalia, specifically a syringe, accessible to the 1-year-old SC in the child's diaper bag.

Report Determination: Unfounded

Date of Determination: 12/27/2018

Basis for Determination:

The SM and the SF denied drug use and both identified being in drug treatment and prescribed suboxone. A roommate disclosed witnessing both the SM and the SF using drugs, however not leaving paraphernalia accessible to the child. Treatment programs for both parents were contacted and no concerns for drug use were present and there was a lack of credible evidence that there was a negative impact on the child.

OCFS Review Results:

Warren County Department of Social Services failed to contact all appropriate collateral contacts or familial contacts regarding the reported drug use. The SF and the SM both identified having other children that visit the home on weekends. The children and their guardians were not interviewed or made aware of the concerns for drug use in the home.

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



Issue:

Contact/Information From Reporting/Collateral Source

Summary:

There were missed opportunities to obtain collateral information from other children, and their guardians, that the SF and the SM identified visit the home on weekends.

Legal Reference:

18 NYCRR 432.2(b)(3)(ii)(b)

Action:

Warren County Department of Social Services will make diligent efforts to contact appropriate collaterals to attempt to gather relevant information as it pertains to safety, risk, and a determination of the allegations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
06/14/2017	Deceased Child, Female, 1 Years	Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	No
	Deceased Child, Female, 1 Years	Father, Male, 29 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Female, 1 Years	Father, Male, 29 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Father, Male, 29 Years	Inadequate Guardianship	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Father, Male, 29 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Deceased Child, Female, 1 Years	Mother, Female, 32 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Female, 1 Years	Mother, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Female, 1 Years	Mother, Female, 32 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Mother, Female, 32 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Mother, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Mother, Female, 32 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Deceased Child, Female, 1 Years	Grandparent, Female, 61 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Female, 1 Years	Grandparent, Female, 61 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Female, 1 Years	Grandparent, Female, 61 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Other - Cousin, Male, 9 Years	Grandparent, Female, 61 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	



Other - Cousin, Male, 9 Years	Grandparent, Female, 61 Years	Inadequate Guardianship	Unsubstantiated
Other - Cousin, Male, 9 Years	Grandparent, Female, 61 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Deceased Child, Female, 1 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Deceased Child, Female, 1 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Inadequate Guardianship	Unsubstantiated
Deceased Child, Female, 1 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Other - Cousin, Male, 9 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Other - Cousin, Male, 9 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Inadequate Guardianship	Unsubstantiated
Other - Cousin, Male, 9 Years	Other Adult - Grandmother's Spouse, Male, 57 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Deceased Child, Female, 1 Years	Aunt/Uncle, Female, 28 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Deceased Child, Female, 1 Years	Aunt/Uncle, Female, 28 Years	Inadequate Guardianship	Unsubstantiated
Deceased Child, Female, 1 Years	Aunt/Uncle, Female, 28 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Other - Cousin, Male, 9 Years	Aunt/Uncle, Female, 28 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Other - Cousin, Male, 9 Years	Aunt/Uncle, Female, 28 Years	Inadequate Guardianship	Unsubstantiated
Other - Cousin, Male, 9 Years	Aunt/Uncle, Female, 28 Years	Parents Drug / Alcohol Misuse	Unsubstantiated

Report Summary:

The SCR report alleged drug abuse by the SF, the SM, the PGM, the PGM's husband, and a PA regarding the SC and a paternal cousin. The report also identified concerns for the condition of the home the family was living in.

Report Determination: Unfounded

Date of Determination: 09/21/2017

Basis for Determination:

Warren County Department of Social Services interviewed the SM, the SF, and the PGM. All identified a history of drug abuse and denied current use. The SF and the SM identified having completed a rehab program and the PGM identified being sober for 17 years. Warren County Department of Social Services contacted appropriate collateral and familial contacts. There were no current concerns for drug use identified by providers, and no concerns identified for the children.

OCFS Review Results:

Warren County Department of Social Services made appropriate familial and collateral contacts during the course of the investigation. There was no credible evidence to substantiate the allegations in the report. The home was observed to meet minimal standards while in a state of repair. The adults were observed to be sober and coherent during interactions with Warren County Department of Social Services.

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

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



The SM has significant CPS history dating back to 2005. The SM was named as a subject in 8 substantiated cases. Each of the SM's 4 elder children were born with a positive toxicology and parental rights were eventually terminated. The SF also has a significant CPS history and was named as a subject in 3 substantiated reports related to his opiate abuse beginning in 2010. The SF was also named on two FAR reports as an adult. The PGM has a CPS history in which she was named as the subject on 8 substantiated reports dating from 1996-2011. The reports were substantiated in reference to educational neglect, lack of supervision, inadequate guardianship, and parents drug/alcohol misuse.

Known CPS History Outside of NYS

There is no known history outside of NYS.

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