



Report Identification Number: NY-18-091

Prepared by: New York City Regional Office

Issue Date: Mar 08, 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: 6 day(s)

Jurisdiction: Bronx
Gender: Female

Date of Death: 09/14/2018
Initial Date OCFS Notified: 09/14/2018

Presenting Information

The 9/14/18 SCR report alleged, on 9/14/18, the SC was in the care of the SM as the SF was out of the home. When the SF returned to the home, the SC was having respiratory issues. The SC was brought to the hospital at 11:03 AM and was pronounced dead on arrival. The SM and SF had no explanation for the death and had been uncooperative with the process. The SC had no history of medical issues and therefore, was a healthy infant who died.

Executive Summary

The 6-day-old female child (SC) died on 9/14/18. The autopsy listed the cause of death as Undetermined and the manner of death as Undetermined.

The allegations of the 9/14/18 report was DOA/Fatality and IG of the SC by the SM and SF. On 10/4/18, the SCR registered a subsequent report that included the allegations of DOA/Fatality, IG, and L/B/W of the SC by the SM and SF.

ACS investigated the SCR reports and found that on 9/14/18, when the SM awoke at 6:40 AM, the SC was in the bassinet. The SM checked the SC at 6:40 AM and she was well. The SF, 7-yo, and 4-yo CHN left the home at approximately 7:30 AM to go to the school. The SM said by 8:00 AM she breastfed the SC. At approximately 8:10 AM, she cleaned the SC and changed her clothing; she then placed the SC on her back in the bassinet to sleep. The SM stated that at approximately 10:30 AM, the SF returned to the home. The SM checked the SC, observed something was unusual, and alerted the SF who lifted the SC. The SM and SF observed the SC did not move and the SM called 911 for assistance. EMS provided instructions; the SF performed CPR on the SC until EMS arrived at the home and transported the SC to the hospital. The SM said the SC was cold.

The SC had seven SS. The 7-yo and 4-yo SS were in the care of the SM. The 13-yo and 14-yo male SS were in the care of their PGM and their father. The 12-yo female SS and 11-yo and 9-yo SS resided with the maternal great aunt (MGA) who had legal guardianship. The SF said the SC had adult SS who resided outside of the US.

On 9/17/18, ACS contacted the ME's office and discussed preliminary findings. ACS learned the death seemed natural.

On 9/17/18, ACS opened a preventive services case for the family. On 9/20/18, ACS held a conference with the family and offered bereavement counseling, homemaking and clinical health services, and rental assistance information. The SM informed ACS that she spoke with the SF and MGA regarding the conference. The SM told ACS she did not want services. ACS provided the family with a referral for a community based services.

On 11/9/18, ACS met with an Assistant District Attorney, the ME, Family Court Legal Service (FCLS), and Dr. The ME indicated the SC's death was declared as undetermined. The ME and Dr. had concerns regarding the superficial abrasions that were on the SC's arm. As a result, the participants determined that the two SS should be interviewed at the CAC. Later, the 4-yo and 7-yo SS were interviewed at the CAC. Neither SS disclosed information which would cause suspicion of abuse or maltreatment.

The 24-Hour safety assessment for the 9/14/18 report was not completed timely as it was not completed until 9/17/18.

On 12/26/18, ACS unsubstantiated the allegations of DOA/Fatality, IG and L/B/W of the SS by the SM and SF. ACS



UNF the 9/14/18 and 10/4/18 SCR reports. ACS based the decision on results of interviews with LE, medical staff and ME. ACS explained that there was no credible evidence to support the allegations or to support any child abuse/maltreatment of the SC. The ME listed the cause of death as undetermined and all tests that were performed on the SC returned with normal results. The SS were interviewed at the CAC regarding the SC's death and neither SS disclosed information to suggest that the SM and SF caused the SC's death.

ACS closed the preventive services case on 12/27/18.

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? 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:

On 11/9/18, a conference occurred. The participants included DA's office, FCLS, ME, and Dr. The ME indicated the death was declared as undetermined. The ME and Dr. had concerns regarding the superficial abrasions that were on the SC's arms. As a result, the 4-yo and 7-yo SS were interviewed at the CAC on 11/26/18.

Required Actions Related to the Fatality

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

Issue:	Timely/Adequate 24 Hour Assessment
Summary:	The 24-Hour safety assessment for the 9/14/18 report was not completed timely as it was not completed until 9/17/18.
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.
Issue:	A 24-hour Fatality Report is required to be completed in CONNECTIONS within 24 hours of receipt of a report alleging the death of a child as a result of abuse or maltreatment.
Summary:	The 24 Hour Child Fatality Summary Report was not completed in a timely manner as it was not completed until 9/17/18.
Legal Reference:	CPS Program Manual, Chapter 6, K-1
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:	Contact/Information From Reporting/Collateral Source
Summary:	The documentation did not reflect whether ACS interviewed the SF's cousin who rented a room in the home.
Legal Reference:	18 NYCRR 432.2(b)(3)(ii)(b)
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: 09/14/2018

Time of Death: 11:15 AM

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

10:30 AM

County where fatality incident occurred:

Bronx

Was 911 or local emergency number called?

Yes

Time of Call:

10:34 AM

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	Female	6 Day(s)
Deceased Child's Household	Father	Alleged Perpetrator	Male	46 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	35 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Year(s)
Deceased Child's Household	Sibling	No Role	Male	7 Year(s)
Other Household 1	Grandparent	No Role	Male	13 Year(s)
Other Household 1	Grandparent	No Role	Male	14 Year(s)
Other Household 2	Aunt/Uncle	No Role	Male	9 Year(s)
Other Household 2	Aunt/Uncle	No Role	Male	11 Year(s)
Other Household 2	Aunt/Uncle	No Role	Female	12 Year(s)

LDSS Response

On 9/14/18, ACS interviewed the SM who said that at approximately 10:30, she was in the home with the SF when she checked the SC, observed the SC seemed unusual, and alerted the SF. The SM said the SF lifted the SC and they observed the SC did not move. The SM contacted 911 for medical assistance. Later, ACS obtained additional information from the SM who clarified that at about 9:00 AM, she placed the SC on her back in the bassinet to sleep. She said she always placed the SC on her back to sleep and denied she slept alongside the SC in the bed. ACS observed the two SS who resided with the SM and SF in the home. The 4-yo SS did not want to speak with ACS. The 7-yo SS said the SC died and was not breathing. Prior to going to school, he observed the SC in her crib asleep. ACS addressed the methods of discipline in the home and the 7-yo SS said his parents hit him with a belt.

On 9/14/18, ACS interviewed the Dr. regarding the case circumstances. ACS learned that the SC had five abrasions on the right arm and the SM did not know how the SC sustained the abrasions. The Dr. said EMS could not have caused the bruises on the arm as EMS did not conduct interventions related to the arm. The Dr. stated EMS noted there was blood in the nose/mouth. According to the Dr., the SF said he left the home around 7:30 AM, accompanied the SS to school, completed other activities and returned home at approximately 10:30 AM.

On 9/14/18, ACS interviewed the PGM of the 14-yo and 13-yo SS by phone. This PGM said the 14-yo and 13-yo SS were in her care for 9-10 years. ACS interviewed the MGA who said the 12-yo, 11-yo and 9-yo SS were in her care for the past 10 years. The SS were in the care of the respective relatives through family arrangements.

On 9/14/18, ACS met with the hospital staff. ACS observed pictures of the SC's arm. The SC's right arm was observed to have a red bruise on the inside fold of the arm. The SC's forearm had faint marks that seemed to be hand marks.

On 9/18/18, LE reported the ME stated everything seemed normal and there was no foul play. The ME found breast milk in the SC's stomach. The SF's account of leaving the home in the morning was confirmed by videos.



On the same day, ACS observed the 11-yo, 9-yo and 12-yo SS in their respective schools. Later, ACS observed the 14-yo SS at school, and school staff stated there were no concerns regarding this SS. The 13-yo SS was observed at school and he said he was aware that the SC died.

On 10/4/18, ACS interviewed the Dr. who said the SC had six cuts on her right arm. The marks were linear and did not seem to be a nail mark or scratches that could have come from infants scratching themselves at six days old.

On the same day, the SM said she believed the SC was discharged from the hospital too soon as the SC had signs of respiratory distress after birth. The SM denied observing marks or bruises on the SC.

On 11/26/18, the 4-yo and 7-yo SS were interviewed at the CAC. ACS addressed concerns of discipline in the home as the 4-yo SS stated he might get hit with a belt as a form of discipline. The SM and SF denied they hit the SS.

Official Manner and Cause of Death

Official Manner: Undetermined

Primary Cause of Death: Undetermined if injury or medical cause

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review

Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?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
048988 - Deceased Child, Female, 6 Days	048990 - Father, Male, 46 Year(s)	Lacerations / Bruises / Welts	Unsubstantiated
048988 - Deceased Child, Female, 6 Days	048989 - Mother, Female, 35 Year(s)	DOA / Fatality	Unsubstantiated
048988 - Deceased Child, Female, 6 Days	048989 - Mother, Female, 35 Year(s)	Inadequate Guardianship	Unsubstantiated
048988 - Deceased Child, Female, 6 Days	048989 - Mother, Female, 35 Year(s)	Lacerations / Bruises / Welts	Unsubstantiated
048988 - Deceased Child, Female, 6 Days	048990 - Father, Male, 46 Year(s)	DOA / Fatality	Unsubstantiated
048988 - Deceased Child, Female, 6 Days	048990 - Father, Male, 46 Year(s)	Inadequate Guardianship	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information:

The documentation did not reflect an adult paternal cousin was interviewed.

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



Child Fatality Report

	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:
 ACS recommended homemaking services, bereavement counseling, Family Preservation Program for the family and a clinical health evaluation for the SM.

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"/>

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input checked="" 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:
The family refused ACS referral for services.

Were services provided to siblings or other children in the household to address any immediate needs and support their well-being in response to the fatality? No

Explain:
The family declined services.

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

Explain:
The family declined 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 fetal alcohol effects or syndrome

With neither of the issues listed noted in case record

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)
09/13/2017	Sibling, Male, 8 Years	Other Adult - maternal great aunt, Female, 48 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	Yes
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult daughter, Female, 21 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult son, Male, 18 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult daughter, Female, 23 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt, Female, 48 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult daughter, Female, 21 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult son, Male, 18 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 8 Years	Other Adult - maternal great aunt's adult daughter, Female, 23 Years	Inadequate Guardianship	Unsubstantiated	
	Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt, Female, 48 Years	Inadequate Guardianship	Unsubstantiated	
	Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt, Female, 48 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult daughter, Female, 21 Years	Inadequate Guardianship	Unsubstantiated	
	Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult daughter, Female, 21 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult son, Male, 18 Years	Inadequate Guardianship	Unsubstantiated	



Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult son, Male, 18 Years	Parents Drug / Alcohol Misuse	Unsubstantiated
Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult daughter, Female, 23 Years	Inadequate Guardianship	Unsubstantiated
Other Child - Unrelated Household Member, Male, 4 Years	Other Adult - maternal great aunt's adult daughter, Female, 23 Years	Parents Drug / Alcohol Misuse	Unsubstantiated

Report Summary:

The 9/13/17 SCR report alleged the MGA allowed her adult children to reside in an apartment that was overcrowded with other adults and to be the sole caregiver of the 8-yo SS, a 4-yo CH, and possibly other CHN. The adult siblings smoked marijuana and used alcohol and became intoxicated in the presence of the CHN. There was traffic in and out of the house and the conditions were unsanitary. There was concern for the care of the CHN.

Report Determination: Unfounded**Date of Determination:** 10/04/2017**Basis for Determination:**

During the investigation, the CHN received a reasonable minimal degree of care. There was no credible evidence to substantiate the allegations.

OCFS Review Results:

ACS began the investigation, completed the 7-day safety assessment and provided the Notice of Existence to the subjects of the report in a timely manner. ACS did not interview one of the individuals, who was an alleged subject of the 9/13/17 SCR report. ACS referred to the MGA as the mother. ACS interviewed the MGA, who denied the allegations of the report. The MGA informed ACS about an incident where the adult family members engaged in an argument about household activities. The 8-yo SS said he did not observe anyone in the home use marijuana or drink alcohol. He said the MGA cooked food daily. He said there was always food in the home.

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

Issue:

Face-to-Face Interview (Subject/Family)

Summary:

There were four subjects listed in the 9/13/17 report, but the documentation reflected ACS did not interview one of the subjects, the MGA's eldest daughter.

Legal Reference:

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

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 SF was not known to the SCR or ACS as a subject. Between 5/22/08 and 2/20/11, the SM was listed as a subject in six SCR reports dated 5/22/08, 6/4/08, 10/24/08, 8/25/09, 10/1/09, and 2/20/11. The 6/4/08 and 10/1/09 SCR reports were closed as duplicate reports.

The allegation of the 5/22/08 report was IG of the 14-yo, 13-yo and 11-yo male SS, and 12-yo female SS by the SM. ACS added the allegation of PD/AM by the SM to the 5/22/08 report. On 7/23/08, ACS IND the case.



The allegation of the 10/24/08 report was IG of the 14-yo, 13-yo, 11-yo and 9-yo male SS, and 12-yo-female SS by the SM and parent substitute. The report was UNF.

The allegation of the 8/25/09 report was IG of the 14-yo, 13-yo, 11-yo male SS by the SM and step-parent. ACS added the allegation of IF/C/S of the 14-yo and 13-yo SS to the 8/25/09. On 10/23/09, ACS UNF the report.

The allegation of the 2/20/11 report was IG of the 14-yo SS by the SM. On 4/19/11, ACS UNF the report.

On 7/9/10, Kings County Family Court (KCFC) ordered a COI. The maternal great aunt (MGA), who was the petitioner, sought guardianship of the 9-yo, 11-yo and 12-yo SS. The respondents for the case were the SM, father of the 9-yo and 11-yo SS, and father of the 12-yo SS. ACS submitted the COI to KCFC and no update report was requested.

Known CPS History Outside of NYS

There was no known CPS history outside of NYS.

Preventive Services History

On 11/15/06, the family began to receive Advocates Preventive Only (ADVPO) services as the SM requested respite services. The ADVPO case was closed on 12/14/06.

ACS opened a preventive services case on 12/14/06. The 12/11/08 FASP reflected the family was referred to Brooklyn Bureau of Community Service (BBCS) by a service provider agency. The documentation showed the family concerns included: family planning, parental skill development, and access to safe and affordable housing. At the time of the referral, the family resided in a shelter and needed permanent housing. The SM expressed feeling overwhelmed by the behavior of her CHN.

The 6/11/10 FASP reflected that after numerous family conferences, concerning the SM's cognitive ability to provide adequate supervision and care for her CHN, resource relatives decided to assist with care of the CHN. The 13-yo and 14-yo SS relocated to the home of the PGM. The 12-yo, 11-yo, and 9-yo SS relocated to the MGA's home. Guardianship was discussed with family members. Neither the PGM nor MGA planned to pursue legal guardianship. ACS closed the preventive services case on 10/5/10.

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