



Report Identification Number: NY-20-108

Prepared by: New York City Regional Office

Issue Date: Jun 01, 2021

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: 30 day(s)

Jurisdiction: Kings
Gender: Female

Date of Death: 11/30/2020
Initial Date OCFS Notified: 11/30/2020

Presenting Information

The SCR report received on 11/30/20 alleged the subject child died on 11/30/20, while in the care of her paternal grandmother. The child had been living with her paternal grandmother and paternal aunt since birth. At an unknown time in the evening of 11/29/20, the subject was acting "fussy". The paternal grandmother called a medical professional and was informed it could be gas. At an unknown time in the morning of 11/30/20, the subject child awoke and drank half of a bottle of formula before the paternal grandmother noticed the subject child was in distress and suddenly went limp. The paternal grandmother called 911. NYPD and EMS arrived in the home and transported the subject child to the hospital. She was later transferred to another hospital where all efforts to revive her failed. The medical staff pronounced the subject child dead at 4:15PM. The subject child was an otherwise healthy child and the paternal grandmother did not provide any explanation for her death. It was unknown if the paternal aunt was present in the home at the time of the subject child's death.

Executive Summary

This report concerns a one-month-old female child who died on 11/30/20. The subject child had been in the care of the paternal grandmother after being placed with the paternal grandmother since birth. The two-year-old surviving sibling was released to his godmother due to concerns regarding the mother's parenting ability and lack of judgement. The mother also had underlying clinical health conditions that she did not fully address. At the time of the fatality, the paternal grandmother, subject child, paternal aunt, and the paternal aunt's five-year-old daughter resided in a two-bedroom apartment in Brooklyn.

The autopsy results were pending; however, the ME's preliminary findings did not reflect any signs of abuse or maltreatment of the subject child.

On 11/30/2020, ACS commenced the fatality investigation within the mandated timeframe. ACS obtained information from the family and relevant collaterals such as the hospital staff, the ME, law enforcement, and agency staff. The information obtained did not reveal the paternal grandmother's actions or inactions caused the subject child's death. Law enforcement did not suspect any criminality, and no arrests were made. Throughout the investigation, ACS assessed the surviving sibling through home and virtual visits, interviews with the godmother, and agency staff, and deemed him safe. Additionally, ACS did not document any concerns for the paternal aunt's daughter.

According to ACS' case documentation, the paternal grandmother reported the subject child was not feeling well over the Thanksgiving Holiday weekend. During the evening of 11/29/20, the subject child showed signs of distress and the paternal grandmother sought pediatric emergency room assistance via phone due to COVID-19 restrictions. The emergency room staff advised the paternal grandmother not to bring the subject child to the emergency room; instead, she should soothe the child and make her comfortable. The subject child appeared fine afterwards. Sometime in the morning of 11/30/20, the subject child appeared to have trouble breathing and the paternal grandmother called 911. EMS arrived at the home and transported the subject child to the area hospital where she was revived. The subject child was later transferred to another hospital for a higher level of care. The child died at the second hospital at 4:15PM on 11/30/2020.

On 1/29/2021, ACS substantiated the allegations Inadequate Guardianship, and Lack of Medical Care of the subject child by the paternal grandmother on the basis of some credible evidence. ACS documented the paternal grandmother did not attempt to provide the subject child with medical attention during the subject child's previous episode of distress.



However, case notes indicated on the night of 11/29/20, the paternal grandmother contacted the pediatric ER when she noticed the child appeared to be in distress and was directed by hospital staff not to take the child to the hospital due to COVID-19 concerns. ACS was not successful in their attempts to confirm this information. Additionally, the paternal grandmother called 911 in the morning of 11/30/20 when the subject child again displayed distress. OCFS NYCRO discussed with ACS the inconsistency between the case documentation and decision to substantiate the allegation of Inadequate Guardianship.

ACS unsubstantiated the allegation DOA/Fatality of the subject child by the paternal grandmother on the basis of a lack of credible evidence. ACS based its decision on the preliminary autopsy findings which indicated there were no signs of abuse to the subject child. The ME also reported the paternal grandmother’s actions did not cause the subject child’s death.

The SS remains in the care of the godmother and continues to receive court ordered services and agency supervised visits with the mother. There are no reported concerns.

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?** No

Explain:

Sufficient information was gathered to make determination for the allegations in the report.

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:

The surviving sibling remained in the care of the godmother and there were no reported concerns for him. The paternal



aunt's daughter was observed to be healthy and happy. The paternal aunt did not report any behavioral concerns for the child.

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: 11/30/2020

Time of Death: 04:15 PM

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

04:51 PM

County where fatality incident occurred:

Bronx

Was 911 or local emergency number called?

Yes

Time of Call:

10:28 AM

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

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

At time of incident was supervisor impaired? Not impaired.

At time of incident supervisor was:

Distracted

Absent

Asleep

Other: Unknown

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	Aunt/Uncle	No Role	Female	30 Year(s)
Deceased Child's Household	Deceased Child	Alleged Victim	Female	30 Day(s)
Deceased Child's Household	Father	No Role	Male	26 Year(s)
Deceased Child's Household	Grandparent	Alleged Perpetrator	Female	52 Year(s)
Other Household 1	Mother	No Role	Female	21 Year(s)



LDSS Response

Upon receipt of the SCR report, ACS initiated the investigation by contacting relevant collaterals including the hospital and law enforcement. ACS also contacted the family.

On 11/30/2020, the paternal grandmother and the paternal aunt reported the subject child began to show signs of discomfort just after the Thanksgiving holiday. The family sought medical advice and they were told by medical staff to monitor and comfort the subject child. On 11/30/2020, when they noticed the subject child was having difficulty breathing, they called 911. The subject child was taken to the hospital by ambulance. The paternal grandmother stated on 11/19/2020, she had taken the subject child to the doctor; however, no concerns were noted upon examination and testing. Law enforcement did not suspect any criminality regarding the subject child's death, and the autopsy was pending. ACS assessed the paternal aunt's child and she was not deemed to be in immediate danger of harm.

On 12/1/2020, ACS assessed the surviving sibling in the godmother's home; the child was deemed safe. There were no safety hazards in the home. ACS discussed Safe Sleep positions for infants with the family. ACS returned to the home on 12/4/2020 and reassessed the surviving sibling. ACS did not observe any suspicious marks on the sibling. ACS advised against bringing the surviving sibling to the subject child's funeral as requested by the mother, as she would be in violation of the court order. ACS advised the godmother to comply with the court order.

On 12/1/2020, the father declined an interview with ACS, but stated he believed the subject child was discharged from the hospital too early.

On 12/3/2020, the paternal great grandmother confirmed the family visited her home for the Thanksgiving holiday. She did not report any concerns for the subject child or the family. ACS re-interviewed the paternal great grandmother on 12/4/2020 and learned the family had practiced social distancing during their visit to her home. The paternal great grandmother said the subject child displayed episodes of being "cranky" on 11/28/20, and had difficulty sleeping. The subject child was soothed, and on 11/29/20, she appeared fine and healthy.

On 12/4/2020, ACS contacted EMS and learned there were no signs of trauma to the subject child. EMS technicians reported the subject child was warm, dry, and "unremarkable" when they arrived on the scene.

On 12/4/2020, the paternal grandfather denied childcare responsibility for the subject child. He reported the subject child was healthy and well.

On 12/7/2020, the responding law enforcement officer reported the subject child was observed to be gasping for air. Law enforcement did not perform CPR on the subject child. EMS arrived on the scene and administered oxygen. Lifesaving efforts continued during transport to the hospital. Upon arrival at the hospital the child became unconscious and had to be revived twice. She was stabilized and then transferred to another hospital for specialized care. The child later died at the second hospital.

On 12/7/2020, the ME reported there were no concerns of heart or kidney issues for the subject child. She was negative for COVID-19. According to the ME, the autopsy was pending. The ME interviewed the paternal grandmother and determined her actions did not impact the SC's well-care and/or death.

On 12/29/2020, ACS visited the paternal grandmother's home and observed the family. ACS documented the family was doing well.

Between 1/11/2021 and 1/28/2021, ACS conducted biweekly virtual visits to the case address and the godmother's home. There was no new information regarding the fatality. ACS assessed the surviving sibling and the other child in the



household during the visits and deemed them safe. The surviving sibling continued to be monitored by ACS's Family Services Unit. The PA's child was fully engaged in remote learning.

On 1/29/2021, ACS unsubstantiated the allegation DOA/Fatality and Lack of Medical Care of the subject child by the paternal grandmother. However, in the case notes, ACS documented the allegation of Lack of Medical Care was substantiated.

According to case notes ACS substantiated the allegations Inadequate Guardianship of the subject child by the paternal grandmother.

Official Manner and Cause of Death

Official Manner: Pending

Primary Cause of Death: Pending

Person Declaring Official Manner and Cause of Death: Medical Examiner

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? No

Comments: There is no OCFS approved Child Fatality Review Team in the New York City region.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
055803 - Deceased Child, Female, 30 Days	055804 - Grandparent, Female, 52 Year(s)	DOA / Fatality	Unsubstantiated
055803 - Deceased Child, Female, 30 Days	055804 - Grandparent, Female, 52 Year(s)	Inadequate Guardianship	Substantiated
055803 - Deceased Child, Female, 30 Days	055804 - Grandparent, Female, 52 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatrician	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Child Fatality Report

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"/>
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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including parent/caretaker actions adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Explain:
ACS did not complete a 30-Day Safety Assessment document.

Fatality Risk Assessment / Risk Assessment Profile

	Yes	No	N/A	Unable to Determine
Was the risk assessment/RAP adequate in this case?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
During the course of the investigation, was sufficient information gathered to assess risk to all surviving siblings/other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an adequate assessment of the family's need for services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the protective factors in this case require the LDSS to file a petition in Family Court at any time during or after the investigation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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



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

Explain:

The paternal grandmother did not have any other children in her care. The paternal aunt declined services for herself and her daughter.

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? Yes

Was the child acutely ill during the two weeks before death? No

Infants Under One Year Old

During pregnancy, mother:

- Had medical complications / infections
- Misused over-the-counter or prescription drugs
- Experienced domestic violence
- Was not noted in the case record to have any of the issues listed
- Had heavy alcohol use
- Smoked tobacco
- Used illicit drugs

Infant was born:

- Drug exposed
- With neither of the issues listed noted in case record
- With fetal alcohol effects or syndrome

CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
09/22/2020	Sibling, Male, 2 Years	Mother, Female, 21 Years	Inadequate Guardianship	Substantiated	No
	Deceased Child, Female, 1 Days	Mother, Female, 21 Years	Inadequate Guardianship	Substantiated	

Report Summary:

On 9/22/20, the mother had a physical and verbal altercation with the father of the then unborn (now deceased subject child). They both threw hand sanitizer bottles at each other. The incident occurred before an agency supervised visit with the two-year-old child. The two-year-old child was present but was not harmed. The godmother who accompanied the child to the visit hid the child's head on her shoulder.

On 11/1/20, the SCR registered a duplicate report that alleged on 10/31/20, the mother gave birth to the now deceased subject child. The mother's two-year-old child was yet to be returned to her care. The mother was unable to appropriately care and provide for the newborn subject child.



Report Determination: Indicated	Date of Determination: 11/19/2020
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Basis for Determination:

On 11/2/2020, ACS added the subject child to the existing Article 10 Petition. The mother had a history of verbal and physical aggression. She also had a history of clinical health conditions. ACS determined that the mother had not been consistent with her mandated services. ACS also added the father as a respondent in the petition. The Court granted a remand for the subject child. She was placed with the paternal grandmother, who was being explored as a kinship foster parent. The two-year-old child continued to be in the care of his godmother with supervised visits with the mother.

OCFS Review Results:

ACS initiated the investigation in a timely manner and made the appropriate collateral contacts. There was evidence of contact with the provider agency, and evidence of supervisory input at critical decision making points during the investigation. ACS learned the mother was seven months pregnant at the time of the incident.

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)
12/07/2019	Sibling, Male, 1 Years	Mother, Female, 20 Years	Inadequate Guardianship	Substantiated	No

Report Summary:

On 12/7/19, while awaiting placement at the Department of Homeless Services, the mother complained to another client about the client's child running around in the waiting area. The mother then decided to ram the stroller with her one-year-old son in it into the child, slap the child on the head, and throw the child to the ground.

Report Determination: Indicated	Date of Determination: 02/05/2020
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Basis for Determination:

ACS indicated the report on the basis the child was in the stroller when the mother used him as a weapon to hit another child who fell onto the floor and sustained an injury. The mother then hit the child's mother. The mother was arrested and charged with Assault in the 3rd Degree and Endangering the Welfare of a Child. The child was removed and placed in the home of his godmother. ACS kept the case open for services.

OCFS Review Results:

Based on the information in the case records, ACS decision to substantiate the allegation of Inadequate Guardianship against the mother was appropriate. Consequently, ACS filed an Article 10 Petition in Family Court against the respondent mother. The now two-year-old surviving sibling was placed with his godmother. The Court granted the mother agency supervised visits with the surviving sibling.

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)
02/09/2019	Sibling, Male, 10 Months	Mother, Female, 20 Years	Inadequate Guardianship	Unsubstantiated	No
	Sibling, Male, 10 Months	Other - Sibling's Father, Male, 22 Years	Inadequate Guardianship	Substantiated	

Report Summary:

On 2/9/19, the parents of their then 10-month-old child were involved an altercation. The father forcefully removed the child from his stroller. The mother then physically attacked the father and attempted to tug the child away from him. The mother was mentally unstable and had threatened to harm herself and the child.

On 2/23/19, the SCR registered a duplicate report alleging the mother got into a physical altercation with another adult



Child Fatality Report

female in the presence of her son in the cafeteria of the shelter where they lived. The mother was out of control. She was jumping on the cafeteria tables and could not be calmed.

Report Determination: Indicated

Date of Determination: 04/10/2019

Basis for Determination:

ACS substantiated the allegation on the basis of some credible evidence and documented the father got into verbal and physical altercation with the mother in the presence of the child. The father's actions placed the child at risk of harm. The father was arrested and charged with Endangering the Welfare of a Child, as the cameras located in the shelter had recorded him tugging the child from the stroller, making him the first person to make a physical response to the situation.

OCFS Review Results:

The report was initiated in a timely manner. ACS made the appropriate collateral contacts with law enforcement shelter staff and relatives. There was evidence of supervisory contact during the investigation. The determination was appropriate.

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

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

There was no CPS history three years prior to the fatality.

Known CPS History Outside of NYS

The family did not have any known CPS history outside of New York State.

Family Assessment and Service Plan (FASP)

	Yes	No	N/A	Unable to Determine
Was the most recent FASP approved on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>

Preventive Services History

On 12/16/19, a Family Services Stage was opened for the mother; however, ACS was unable to confirm that the mother was actively engaged in recommended services. The mother accepted services with a local provider agency and was supposed to start services in March 2020.

Foster Care at the Time of the Fatality

The deceased child(ren) were in foster care at the time of the fatality? Yes

Date deceased child(ren) was placed in care: 11/02/2020

Date of placement with most recent caregiver? 11/02/2020

How did the child(ren) enter placement? Court Order

Review of Foster Care When Child was in Foster Care at the time of the Fatality



	Yes	No	N/A	Unable to Determine
Does the case record document that sufficient steps were taken to safeguard this child's safety while in this placement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the placement comply with the appropriateness of placement standards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the most recent placement stable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the agency comply with sibling placement standards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the child AWOL at the time of death?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Visitation

	Yes	No	N/A	Unable to Determine
Was the visitation plan appropriate for the child?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was visitation facilitated in accordance with the regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there supervision of visits as required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Casework Contacts

	Yes	No	N/A	Unable to Determine
Were face-to-face contacts with the child in the child's placement location made with the required frequency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were face-to-face contacts with the parent/relative/discharge resource made with required frequency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were face-to-face contacts with the parent/relative/discharge resource in the parent/relative/discharge resource's home made with required frequency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were all of the casework contact requirements for contacts with the caretakers made, including requirements for contact at the child's placement location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Provider Oversight/Training

	Yes	No	N/A	Unable to Determine
Did the agency provide the foster parents with required information regarding the child's health, handicaps, and behavioral issues?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Did the provider comply with discipline standards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were the foster parents receiving enhanced levels of foster care payments because of child need?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



If yes, was foster parent provided a training program approved by OCFS that prepared the foster parent with appropriate knowledge and skills to meet the needs of the child?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the certification/approval for the placement current?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a Criminal History check conducted? Date: 10/30/2020	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a check completed through the State Central Register? Date: 10/30/2020	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a check completed through the Staff Exclusion List? Date:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional information, if necessary:
 The surviving sibling remained in the care of the godmother and continued to receive services. He continued to have agency supervised visits with the mother and there were no reported concerns. ACS closed the Family Services Stage since the paternal grandmother no longer had any children in her care.

Foster Care Placement History

On 12/7/19, the mother assaulted a co-resident and the resident's 2-yo child at a New York City Department of Homeless Services Center. The mother was arrested and charged with Assault in the 3rd Degree and Endangering the Welfare of a Child. On 12/9/2019, ACS filed an Article 10 Petition in Family Court. The mother was the respondent in the petition. The court granted a remand for the mother's then one-year-old child. ACS initially placed the child in the care of the paternal grandmother. On 12/16/19, the mother requested for the child to be placed with an alternative resource, as she was concerned about the child being in the care of the paternal family.

On 12/20/19, the Court approved that the child be placed with the godmother. The Court approved the supervised visitation for the father, and approved resource supervised visitation for the mother.

On 10/31/20, the mother gave birth to the now deceased subject child. ACS determined the mother had not been consistent with her mandated services. ACS added the subject child to the existing Article 10 Petition and requested Court Ordered Supervision. ACS also added the BF as a respondent in the petition because he did not have any provisions for the newborn subject child. The court granted a remand for the subject child and she was placed with the paternal grandmother.

The surviving sibling remained safe in the care of the godmother and continued to be monitored by ACS. He continued to have agency supervised visits with the mother, and there were no reported concerns.

Legal History Within Three Years Prior to the Fatality

Was there any legal activity within three years prior to the fatality investigation?
 Family Court Criminal Court Order of Protection

Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
12/09/2019	There was not a fact finding	There was not a disposition
Respondent:	055807 Mother Female 21 Year(s)	



Comments: On 12/9/2019, ACS filed an Article 10 Petition in family court. The mother was the respondent in the petition. The Court granted a remand for the child. ACS initially placed the child in the care of the paternal grandmother. On 12/16/19, the mother requested for the child to be placed with an alternative resource as she was concerned about the child being in the care of the paternal family.

On 12/20/19, the Court approved that the child be placed with the godmother on the condition that the GM did not leave the child alone with her brother who had a prior arrest. The court granted agency and approved supervised visitation for the father; agency and approved resource supervised visitation for the mother which could be at the godmother's home with the schedule agreed upon by both parties and provided in advance to ACS.

Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
11/02/2020	There was not a fact finding	There was not a disposition
Respondent:	055805 Father Male 26 Year(s)	
Comments:	<p>Following the birth of the subject child, ACS added the subject to the existing Article 10 Petition and requested COS as it was determined that the mother had not been consistent with her mandated services.</p> <p>ACS also filed an Article 10 Petition against the father on behalf of subject child as he did not avail himself as a discharge resource, and did not have any provisions for the newborn SC. The Court granted a remand for the subject child and she was placed with the paternal grandmother, who was to be explored as a kinship foster parent.</p>	

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