



**Report Identification Number: NY-24-036**

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

**Issue Date: Jun 10, 2024**

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 had an open investigation or a CPS monitored services 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**

<b>Relationships</b>		
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	
<b>Contacts</b>		
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	DA-District Attorney	
<b>Allegations</b>		
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	SXTF-Sex Trafficking
<b>Miscellaneous</b>		
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:** 17 year(s)

**Jurisdiction:** New York  
**Gender:** Female

**Date of Death:** 04/10/2024  
**Initial Date OCFS Notified:** 04/17/2024

## Presenting Information

An OCFS-7065 Agency Reporting Form was received on 4/17/24 regarding the death of the 17-year-old subject child. The form reflected that the child died on 4/10/24 from a suspected drug overdose. The mother had last seen the child asleep on the couch on 4/9/24. When the mother woke up on 4/10/24, the child was no longer in the home. The mother received a telephone call from a hospital physician regarding the fatal incident.

## Executive Summary

This report concerns the death of the 17-year-old subject child. At the time of her death, the family was receiving Advocates Preventive-Only (ADVPO) preventive services through a voluntary agency contracted with the Administration for Children’s Services (ACS). The family had been receiving services since May 2023. The voluntary agency was made aware of the child’s death on 4/15/24 and completed the required notifications. At the time of the child’s death, she resided with her mother.

Due to previously established documentation requirements, ADVPO records are maintained outside the CONNECTIONS system and were not available for this review. Information regarding casework activity was gathered from assessments completed following the child’s death.

On 4/15/24, the mother contacted the voluntary agency and informed the agency the child had passed away on 4/10/24. It was reported the child had died from a suspected drug overdose, though the contributing substances were unknown. The mother reported she had last seen the child on 4/9/24, asleep on the couch. The child was not home when the mother woke on 4/10/24. The mother was notified by a hospital physician of the incident, and the mother then notified the voluntary agency a few days later. The mother obtained a copy of law enforcement’s report of the incident and was informed no foul play was suspected.

The OCFS-7065 Agency Reporting Form, as well as available external agency reports reflected an autopsy was completed. It was unknown if the final autopsy report was received or what the cause and manner of death were. Law enforcement was involved as evidenced by the mother obtaining a police report regarding the incident; however, the content of the report was not available for review.

Available records indicated the voluntary agency reached out to the mother to offer condolences and expressed intent to obtain additional records from the mother. It was unknown if such records were obtained. Available documentation did not reflect the mother was provided with fatality-related services, such as bereavement counseling or funeral assistance.

### PIP Requirement

For citations identified in historical cases, ACS will submit a PIP to the New York City Regional Office within 45 days of receipt of this report. The PIP will identify action(s) ACS has taken, or will take, to address the cited issue(s). For issues where a PIP is currently implemented, ACS will review the plan and revise as needed to address ongoing concerns.

## Findings Related to the CPS Investigation of the Fatality

**Safety Assessment:**

- Was sufficient information gathered to make the decision recorded on the:
  - Safety assessment due at the time of determination? N/A

**Determination:**

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

**Explain:**

This was not an SCR reported fatality, therefore, a determination of allegations was not required.

- Was the decision to close the case appropriate? N/A
- Was casework activity commensurate with appropriate and relevant statutory or regulatory requirements? Yes
- Was there sufficient documentation of supervisory consultation? No

**Explain:**

ADVPO records are not maintained in Connections, and therefore were not available for this review. The ADVPO case remained open at the time this report was written.

**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:** 04/10/2024 **Time of Death:** Unknown

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

**County where fatality incident occurred:** Bronx

**Was 911 or local emergency number called?** Unknown

**Did EMS respond to the scene?** Unknown

**At time of incident leading to death, had child used and/or ingested alcohol or drugs?** Yes

**Child's activity at time of incident:**

- |                                   |                                  |   |
|-----------------------------------|----------------------------------|---|
| <input type="checkbox"/> Sleeping | <input type="checkbox"/> Working | <input type="checkbox"/> Driving / Vehicle occupant |
| <input type="checkbox"/> Playing  | <input type="checkbox"/> Eating  | <input checked="" type="checkbox"/> Unknown         |
| <input type="checkbox"/> Other    |                                  |   |

**Total number of deaths at incident event:**

Children ages 0-18: 1

Adults: 0

**Household Composition at time of Fatality**

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	No Role	Female	17 Year(s)
Deceased Child's Household	Mother	No Role	Female	48 Year(s)

**LDSS Response**

On 4/15/24, the ADVPO agency was notified by the mother of the child's death, which had occurred on 4/10/24. The agency notified the New York City Regional Office and completed the required OCFS-7065 Agency Reporting Form, reporting the death of the child in an open preventive services case.

The mother reported to the agency that the child died of a suspected drug overdose. The substance used was not documented. The mother had last seen the child on 4/9/24, but when the mother awoke on 4/10/24, the child was not in the home. The mother was notified of the incident by a hospital physician. It was reported to the agency that the child had willingly left the home with her boyfriend, without the knowledge or permission of the mother. The agency planned to obtain additional information, such as law enforcement records and emergency medical services records to confirm the mother's account of the death.

**Official Manner and Cause of Death**

**Official Manner:** Unknown

**Primary Cause of Death:** Unknown

**Person Declaring Official Manner and Cause of Death:** Unknown

**Multidisciplinary Investigation/Review**

**Was the fatality referred to an OCFS approved Child Fatality Review Team?**No

**CPS Fatality Casework/Investigative Activities**

	Yes	No	N/A	Unable to Determine
All children observed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First Responders	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Room Personnel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Child Fatality Report

Law Enforcement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Examiner / Coroner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Was a death-scene investigation performed?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Coordination of investigation with law enforcement?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Was there timely entry of progress notes and other required documentation?</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
<b>Were there any surviving siblings or other children in the household?</b>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 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"/>



# Child Fatality Report

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"/>

## History Prior to the Fatality

### Child Information

Did the child have a history of alleged child abuse/maltreatment? Yes  
 Was the child acutely ill during the two weeks before death? No

## CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
02/14/2023	Deceased Child, Female, 16 Years	Mother, Female, 47 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Deceased Child, Female, 16 Years	Mother, Female, 47 Years	Lack of Medical Care	Unsubstantiated	
	Deceased Child, Female, 16 Years	Mother, Female, 47 Years	Lack of Supervision	Unsubstantiated	

### Report Summary:

On 2/14/23, an SCR report was received which alleged the mother was aware the subject child required a very high level of supervision. The mother was aware of the child's probation status and mental health diagnoses, which required medication. The mother was not providing the child her medication. The child was not engaged in services to address her mental health needs and the mother was unable to control the child, who was running the streets.

**Report Determination:** Unfounded **Date of Determination:** 04/12/2023

### Basis for Determination:

All allegations against the mother were unsubstantiated. Despite the mother not having control over the child, the mother made efforts to ensure the child received appropriate medical care by taking the child to her appointments. The mother had attended court proceedings and expressed concern regarding the child's behaviors. The mother made efforts to stop the child from leaving the residence and advocated for a higher level of treatment for the child.

### OCFS Review Results:

Although there were no immediate safety concerns at case closing due to the child's placement in non-secure detention, there was a pattern of the child being released back to the mother and the mother failing to follow through with placing the child in higher levels of care when presented the opportunity. Court proceedings were ongoing regarding the child's placement and a discharge date was unknown. The patterns of not contacting the child's father continued during this investigation.

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

### Issue:

Timely/Adequate Seven Day Assessment

### Summary:

The Seven Day Safety Assessment was not documented and approved timely. The Safety Assessment was completed on



2/28/23, seven days late.

**Legal Reference:**

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

**Action:**

ACS will document and approve all safety assessments within the required timeframes.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
09/30/2022	Deceased Child, Female, 15 Years	Mother, Female, 46 Years	Childs Drug / Alcohol Use	Unsubstantiated	No
	Deceased Child, Female, 15 Years	Mother, Female, 46 Years	Inadequate Guardianship	Unsubstantiated	

**Report Summary:**

An SCR report received on 9/30/22 alleged the mother was unable to control the subject child. The child was involved with gang members who had assaulted her, but the mother did not intervene to stop the child from communicating with the gang members. The child had assaulted officers and was placed on probation. The child ran away from the home frequently and did not follow orders. The child was abusing marijuana to the point of impairment and the mother had been unable to address the use.

**Report Determination:** Unfounded

**Date of Determination:** 11/28/2022

**Basis for Determination:**

The allegations against the mother were unsubstantiated. Service providers, specifically mental health and probation, reported the mother and child were compliant with services and the mother had made meaningful efforts to seek services for the family. Due to ongoing service needs, an FSS was opened and further follow-up with services was recorded in that stage. The child denied drug use, and no evidence of drug paraphernalia was observed in the home. The allegation in the SCR report regarding the child's substance use was brought to the attention of service providers for ongoing monitoring.

**OCFS Review Results:**

Collateral contacts revealed the family was compliant with services. The progress notes did not thoroughly document the mother's hospitalization and child's subsequent temporary placement; therefore, specific dates were unclear. Multiple agencies (mental health, probation, legal, trafficking prevention) were involved with the family and services remained ongoing at the time the investigation was closed. Despite supervisory guidance, the father's contact information was not obtained. Had the father been added to the case and had his demographics been updated in historical cases, his contact information would have been available.

**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)
03/06/2022	Deceased Child, Female, 15 Years	Mother, Female, 46 Years	Inadequate Guardianship	Substantiated	Yes
	Deceased Child, Female, 15 Years	Mother, Female, 46 Years	Lacerations / Bruises / Welts	Unsubstantiated	

**Report Summary:**

A report dated 3/6/22 alleged the subject child had run away twice in less than one week and the mother had not appropriately notified authorities until days later. There was concern the mother was not capable of adequately caring for the child. A subsequent report received on 3/10/22 alleged the mother and child had engaged in verbal and physical





altercations for years, with the most recent incident being two weeks prior to the report. The mother would lock the child out of the home, threaten the child with abandonment, and failed to plan for care of the child. The child witnessed the mother engage in verbal and physical altercations with the adult sibling in the home.

**Report Determination:** Indicated

**Date of Determination:** 05/03/2022

**Basis for Determination:**

The allegation of Inadequate Guardianship was substantiated as it was reported by numerous service providers that the mother was not in compliance with the child's services. The mother did not fully participate in services and refused placement options for the child. The mother was not making adequate efforts to address the child's mental health concerns. The allegation of Lacerations/Bruises/Welts was unsubstantiated as the child accidentally cut herself while the mother was attempting to take a knife from the child, and the mother sought medical attention to address the injury.

**OCFS Review Results:**

Numerous service providers were contacted, and it was learned the family was not compliant with services. Family-based therapy, respite, and skill building had been offered to the family. The mother declined therapy and preventive services through a Diversion program as well. During the investigation, the child was arrested and placed in non-secure detention and remained there at case closing. The RAP did not reflect historical foster care placement, and while prior RAPs subject to this review also did not reflect this risk element, during this investigation, the inaccurate score generated an inaccurate risk rating.

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

**Issue:**

Adequacy of face-to-face contacts with the child and/or child's parents or guardians

**Summary:**

The mother provided contact information for the father; however, contact was not attempted. As the father resided out of the country, telephone contact should have been tried.

**Legal Reference:**

18 NYCRR 432.1 (o)

**Action:**

A full Child Protective investigation shall include face-to-face interviews with subjects of the report and family members of such subjects, including children named in the report. Such interviews or reasons why an interview was not possible should be documented in progress notes.

**Issue:**

Adequacy of Risk Assessment Profile (RAP)

**Summary:**

The RAP was scored without the risk element of the subject child having been in the care of substitute caregivers, despite prior placement. Had this been scored accurately, the risk rating would have reflected High, rather than Moderate.

**Legal Reference:**

18 NYCRR 432.2(d)

**Action:**

ACS will consider all risk elements identified throughout the course of the investigation and accurately document such elements into the Risk Assessment Profile.

**Issue:**

Case record contains information that is relevant, useful, factual and objective

**Summary:**

The father's information and demographics were never added or updated in CONNECTIONS for this investigation. Multiple names had been provided for the father, and recorded in historical investigations; however, the name previously associated with the father did not match either name provided by the mother.

**Legal Reference:**



18 NYCRR 428.1(a) and 18 NYCRR 428.1(b)(1)

**Action:**

ACS records must contain information that is relevant, useful, factual and objective to best reflect accuracy throughout documentation. Such information is pertinent to investigations and the review of service needs.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
11/04/2021	Deceased Child, Female, 15 Years	Mother, Female, 45 Years	Inadequate Guardianship	Unsubstantiated	Yes

**Report Summary:**

An SCR report received on 11/4/21 alleged the mother was unable to adequately control the subject child’s behaviors. As a result, the child would come and go from the home as she pleased, would run away for 2-3 days at a time, and was physically aggressive toward the mother. A subsequent report was received on 11/16/21, which added information that the child often had unexplained money, the child was not attending school or engaging in her treatment plan, and on 11/16/21, the child attempted to choke the mother and stabbed the mother in the leg and hip with a knife. The mother was unable to control the child’s behavior or provide her with the level of care she required.

**Report Determination:** Unfounded

**Date of Determination:** 01/03/2022

**Basis for Determination:**

The Investigation Conclusion Narrative stated the allegation of Inadequate Guardianship against the mother was unsubstantiated; the investigation had been completed and there was no evidence found that the mother failed to exercise a minimum degree of care. The child was defiant and did not adhere to rules, causing law enforcement intervention. The conclusion stated there was no information to support the allegation. The narrative did not describe how the evidence gathered did not support a finding of Inadequate Guardianship.

**OCFS Review Results:**

It was noted the mother’s plan was for the child to return to the father’s care outside of the country; however, a timeline for this transition was not clarified, nor was the father contacted to confirm the plan. The mother reported the respite worker and therapist were working with the family and things were going well. This contradicted the therapist’s statements made days prior, and this discrepancy was not clarified. During the investigation, court placements and hospitalizations occurred, but were not detailed in the record. The mother requested the voluntary placement of the child due to the child’s behaviors; however, turned the placement option down and opted to continue in-home services.

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

**Issue:**

Contact/Information From Reporting/Collateral Source

**Summary:**

Probation was not asked what services the child missed due to the mother ending placement; the father was not conferred regarding the child residing with him; it was not confirmed prior to closing that the child was engaged in family therapy services.

**Legal Reference:**

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

**Action:**

ACS will make diligent efforts to contact collaterals to attempt to gather relevant information as it pertains to safety, risk, and a determination of the allegations.

**Issue:**

Appropriateness of allegation determination

**Summary:**

The allegation of IG was unsubstantiated; however, the mother’s refusal to accept a higher level of treatment for the



child, as evidenced by taking her out of the detention setting, and refusing the voluntary placement showed an inability to protect the child by not meeting her service needs.

**Legal Reference:**

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

**Action:**

ACS will refer to the CPS Program Manual when determining the appropriateness of allegations and will consult with the New York City Regional Office if further guidance is needed.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
09/18/2021	Deceased Child, Female, 14 Years	Mother, Female, 45 Years	Inadequate Guardianship	Unsubstantiated	No

**Report Summary:**

On 9/18/21, an SCR report was made which alleged the child's behaviors were out of control. The child had a history of coming and going from the home as she pleased. The child had threatened the mother with a knife and pushed the mother. The mother was unable to control the child's behaviors. A subsequent report was received on 10/10/21, which further alleged the child was using drugs, and the mother was unwilling to care for the child or make an alternative plan for the child by refusing to pick her up from a psychiatric evaluation.

**Report Determination:** Unfounded

**Date of Determination:** 11/17/2021

**Basis for Determination:**

The Investigation Conclusion Narrative stated there was no evidence found to support the allegation, that there were no observations that proved the mother did not provide care that met societal norms. The narrative stated the child was defiant and did not want to follow rules.

**OCFS Review Results:**

Throughout the investigation, multiple collateral sources cited the child's noncompliance as a barrier to receiving appropriate services. A residential treatment placement had been arranged but the child refused to go. The child was hospitalized multiple times due to her aggressive behavior and the mother would state she would not pick the child up, but eventually did. The father was contacted but not added and resided out of the country. The father denied he was a resource for the child. The mother repeatedly used derogatory names when referring to the child, but this was not captured in the safety assessments. The family agreed to a referral for a family-based therapy intervention program.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
06/21/2021	Deceased Child, Female, 14 Years	Mother, Female, 45 Years	Inadequate Guardianship	Unsubstantiated	No
	Deceased Child, Female, 14 Years	Mother, Female, 45 Years	Lack of Medical Care	Unsubstantiated	
	Deceased Child, Female, 14 Years	Sibling, Female, 25 Years	Inadequate Guardianship	Unsubstantiated	

**Report Summary:**

An SCR report received on 6/21/21 alleged the mother and adult sibling were unable to care for and supervise the subject child. The mother failed to follow through on treatment recommendations for the child, and as a result, the child was out of control and became physical with the mother and sibling, and the mother sustained injuries. The child was engaging in high-risk behaviors with an adult male and the child was a risk to herself in the home and community.



**Report Determination:** Unfounded **Date of Determination:** 08/17/2021

**Basis for Determination:**  
During the investigation it was learned the adult sibling moved out of the home and it was determined the sibling did not have a caretaking role to the subject child, therefore, the allegations against the sibling were unsubstantiated. The allegations against the mother were unsubstantiated. It was determined the mother had made attempts to ensure the child attended school, took her medication, and participated in therapy; however, at times the child refused participation. At the close of the investigation, the child was taking her medication and the family was involved in multiple community-based services. The mother was working with providers on a residential treatment referral.

**OCFS Review Results:**  
Collateral contacts were made with law enforcement regarding the alleged relationship between the child and adult male; however, no disclosures were made. Collateral contacts with service providers were made and referrals were in process for therapeutic services and residential treatment.

**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)
05/25/2021	Deceased Child, Female, 14 Years	Mother, Female, 45 Years	Inadequate Guardianship	Unsubstantiated	No

**Report Summary:**  
An SCR report received on 5/25/21 alleged that on 5/24/21, the mother and subject child engaged in a verbal altercation, which escalated when the two engaged in a physical fight. The mother punched the child and pulled her hair. The child did not sustain any injuries. As a result of the altercation, the child required mental health intervention. The mother refused to take the child home when the child was cleared to return home.

**Report Determination:** Unfounded **Date of Determination:** 07/23/2021

**Basis for Determination:**  
The Investigation Conclusion Narrative stated the allegation of Inadequate Guardianship was unsubstantiated due to lack of credible evidence. On 5/25/21, the mother and child engaged in an argument that became physical. As a result, the child was admitted to the hospital for a mental health evaluation. The mother agreed to participate in services to address the child's behavioral and mental health concerns.

**OCFS Review Results:**  
The investigation was initiated during an open FAR case, which subsequently closed. A subsequent investigation was initiated during the open investigation and remained ongoing at the time this investigation was determined and closed. It was confirmed with the hospital the child did not meet criteria for admission and was discharged home to the mother. The mother agreed to pick up the child from the hospital. Disputes between the mother and child remained ongoing. Community-based services were put in place.

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

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

The family had extensive investigative history with ACS, dating back to 2007. The mother had nine additional indicated reports for allegations of Educational Neglect, Lack of Supervision, Inadequate Guardianship, and Lack of Medical Care regarding the subject child and now adult siblings. There were additional unfounded reports also with similar allegations to the indicated reports. The family had a common theme of violence in the home and in the presence of the subject child. The now adult siblings had been arrested for engaging in physical altercations with the subject child and in the presence of the subject child. The mother had also been arrested at one point for engaging in an altercation in the presence of the subject child and a sibling. The mother's failure to adequately address the subject child's mental health needs was a common substantiated allegation. The child was often treated on an emergency basis, rather than through regular treatment



and medication management. The mother routinely was found to be unable to control the child’s behavior in the home and community. Unfounded reports centered around the children’s unstable and aggressive behaviors toward the mother or toward one another. During the times the subject child was engaged in services and the mother was seeking assistance, the investigations were unfounded. There were over 20 investigations into the family prior to the subject child’s death.

### Known CPS History Outside of NYS

There was no known history outside of NYS.

### Services Open at the Time of the Fatality

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

**Date the preventive services case was opened: 06/05/2023**

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

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

### Casework Contacts

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

### Services Provided

	Yes	No	N/A	Unable to Determine
Were services provided to siblings or other children in the household to address any immediate needs and support their well-being in response to the fatality?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Were services provided to parents as necessary to achieve safety, permanency, and well-being?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Family Assessment and Service Plan (FASP)



	Yes	No	N/A	Unable to Determine
<b>Was the most recent FASP approved on time?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Was there a current Risk Assessment Profile/Risk Assessment in the most recent FASP?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

### Provider

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

**Additional information, if necessary:**  
 According to a review of available documentation, the ADVPO agency began their work with the family in May 2023. At case initiation, the child had a JD case in family court due to a violation of probation. The child was remanded to a non-secure detention facility. Initially, mental health services were recommended for the child, and she was engaged in group counseling as of June 2023. By July 2023; however, the child began missing appointments, and the mother was reluctant to attend appointments with the child. It was learned in August 2023 that the child was using marijuana 2-3 times per week. Also at that time, probation services ended. The child was unwilling to participate in substance use services or drug screens. Educational needs became the focus at the start of the 2023-24 school year and the preventive agency collaborated with other service providers to explore available interventions for the child, which included alternative education placement, discussing attendance issues with the family, and escorting the child to school. The mother and child continued to struggle with engagement in mental health services, therefore telehealth options were explored. An intake was completed in November 2023 and the child intermittently missed appointments throughout the remainder of the case.

Available records reflected the agency had met with the family on a consistent basis since opening, with the last contact with the child occurring on 4/4/24.

### Preventive Services History

12/3/07 – 3/7/08 Services were offered to the mother and an adult sibling; however, the case closed due to the mother’s noncompliance. A legal consult was held, and it was determined there was no grounds to file in family court.

4/6/09 – 3/2/17 Services opened with the mother and adult sibling, as the sibling was removed on 4/2/09. A trial discharge was unsuccessful and the sibling re-entered care on 6/15/11. It was noted the mother and sibling had arguments that turned physical, and the mother was unable to ensure the sibling attended required appointments. Upon the siblings return home in December 2013, the sibling received B2H services. During that time, the subject child was added to the case on 5/27/16 but did not receive services. A neglect finding was made in 2010 against the mother.

4/21/16 – 10/10/19 The aggression between the subject child and sibling was becoming increasingly violent and the mother had experienced DV. Preventive services were offered to address the subject child’s mental health, DV, family therapy, and housing assistance. Court ordered supervision was requested and therapeutic services were provided. The subject child was placed in foster care during the services case. A neglect finding was made in 2017 against the mother. At the time the case was closed, the child was participating in B2H, individual, and family therapy. It was noted the mother had met the conditions of the court order and the adult sibling was no longer residing in the home.



4/22/19 – 11/29/19 A services case was opened to refer the subject child to therapy. The case record also noted the child’s excessive absenteeism from school. The services case dates overlapped a prior case that had no casework activity. A Child Safety Conference was held on 7/19/19 at which time the mother requested the voluntary placement of the child. The record reflected the child was placed in a residential program and the case closed.

11/3/22 – 4/18/23 A services case was opened as the subject child was on probation and there was an order of supervision for a period of 12 months. During the case, the child was remanded to detention for violating the terms of probation.

### Foster Care Placement History

A now adult sibling was in foster care on and off from 4/2/09 to 12/20/13. The original reason for placement was due to the sibling being dropped off home from school by the bus, and there being no suitable caretaker available for the sibling. Throughout the case, there were concerns with the mother’s ability to consistently follow through with the sibling’s treatment plan.

3/24/17 – 10/30/18 The subject child was placed into foster care due to the mother’s unwillingness to remove an adult sibling from the home to protect the subject child. The child’s aggressive behavior during placement led to disrupted placements and the child experienced hospitalizations and left placement for a period of approximately six months. During the period of trial discharge, the mother demonstrated the ability to ensure the child’s participation in mental health services, including seeking hospitalization when necessary. The child was returned home with B2H services, counseling, and was attending school.

10/19/22 – 4/22/23 The subject child was placed in a juvenile justice detention center.

### 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