



Report Identification Number: RO-20-018

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

Issue Date: Feb 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: 0 day(s)

Jurisdiction: Chemung
Gender: Female

Date of Death: 08/12/2020
Initial Date OCFS Notified: 08/12/2020

Presenting Information

An SCR report alleged the mother had a history of abusing methamphetamine. On 8/12/20, the mother abused methamphetamine to the point of impairment and she went into labor. While impaired, the mother was thrashing around, slurring her words, and unable to follow directions. The mother gave birth to the infant at 12:52 AM with low birth weight. The mother's amphetamine abuse caused the low birth weight and impairment at delivery, which caused the mother's inability to push properly and contributed to the death of the infant at 1:08 AM.

Executive Summary

On 8/12/20, the Chemung County Department of Social Services (CCDSS) received an SCR report regarding the death of the infant that occurred on the same date. The infant was pronounced deceased at the hospital at 1:08 AM, 16 minutes after birth via emergency c-section. CCDSS had an open CPS investigation at the time, which was received on 8/4/20, with concerns the mother was abusing methamphetamine during her pregnancy for the infant and while caring for the 2-year-old sibling.

Upon investigation, CCDSS learned that the 2-year-old sibling resided with the paternal great grandmother through an informal custody arrangement since he was 8 months of age, and the parents visited with the sibling daily. The great grandmother reported that the sibling resided with her due to the parents' sleeping patterns and their inability to wake up in the morning to care for the sibling. The mother did not have consistent prenatal care and she tested positive for amphetamines several times during her pregnancy. The mother's pregnancy was deemed high risk due to the mother and infant not gaining weight. The mother was scheduled to be induced at 39 weeks gestation on 8/7/20, and she delayed the infant's birth against medical advice. The father denied using drugs, although he had recently been charged with possession of a controlled substance.

On 8/12/20, around midnight, the mother arrived at the emergency department in active labor. The mother was under the influence of drugs and she was unable to cooperate with instructions to push. An emergency c-section needed to be performed and the infant was pronounced deceased 16 minutes after birth. The final autopsy results were not available at the time this report was written. The preliminary cause of death was hypoxia from prolapsed and nuchal umbilical cord at delivery. The law enforcement investigation closed with no criminal charges filed.

Following the infant's death, the paternal grandmother obtained Article 6 custody of the sibling and she agreed to not allow any unsupervised contact for the parents. The sibling was assessed to be safe in the grandmother's care. The grandmother engaged in counseling and the sibling enrolled in Early Intervention services. The grandmother declined Preventive Services.

The parents refused all services that were offered related to the fatality, as well as substance abuse treatment, mental health services and parenting skills. CCDSS substantiated the allegations against the mother and closed the case since the parents had no children in their custody.

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

Explain:

Safety Assessments were completed accurately and the allegations were appropriately substantiated.

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:

Casework activity was commensurate with best casework practice.

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: 08/12/2020

Time of Death: 01:08 AM

County where fatality incident occurred: Steuben

Was 911 or local emergency number called? No

Did EMS respond to the scene? No

At time of incident leading to death, had child used alcohol or drugs? N/A

Child's activity at time of incident:

- Sleeping Working Driving / Vehicle occupant



Playing

Eating

Unknown

Other: Hospitalized

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	0 Day(s)
Other Household 1	Father	No Role	Male	29 Year(s)
Other Household 1	Mother	Alleged Perpetrator	Female	23 Year(s)
Other Household 2	Grandparent	No Role	Female	71 Year(s)
Other Household 2	Sibling	No Role	Male	2 Year(s)

LDSS Response

CCDSS made diligent attempts to interview the parents face to face and assess their home following receipt of the SCR report on 8/4/20. The parents refused to meet with CCDSS and they obtained a lawyer. The sibling was assessed to be safe in the care of the paternal great grandmother. A safety plan was initiated that the sibling would remain in the great grandmother's care and the parents' contact with the sibling would be supervised.

CCDSS received notification of the infant's birth and death by hospital staff on 8/12/20, and an SCR report was received on the same date. CCDSS spoke to the source of the report and reviewed SCR history and the events of the open CPS investigation. CCDSS spoke to hospital staff and law enforcement and they met with the mother at the hospital.

The mother admitted to using methamphetamine throughout her last several months of pregnancy. She said she had a doctor's appointment on 8/11/20, and she was there for several hours. She started having contractions after she got home, and she called and told the doctor she was having cramps. She was instructed to monitor the cramps so she thought she would "wait it out" since she was scheduled to be induced the next day. She said she almost had the infant in the car on the way to the hospital. The mother said when she got to the hospital she was told to push, and the doctor had to do a C-section since she couldn't "push enough". She reported that the father, paternal grandmother and paternal great grandmother were unaware that she was using drugs. The mother did not provide an explanation as to why she refused to be induced on 8/7/20 as scheduled.

Hospital records showed the mother arrived at the hospital around midnight on 8/12/20, and she was in active labor and fully dilated. She appeared to be impaired from substances and she was rolling her eyes, slurring her words and thrashing around. Due to the mother's impaired state, she would not push, and the infant's heart rate dropped. An emergency c-section was performed, and the infant was born at 12:52 AM with a heart rate of 10. Chest compressions started and the infant was intubated. The infant's heart rate continued to drop until there was no heartbeat detected and she was pronounced deceased at 1:08 AM. The father was present at the hospital and he became violent when the infant passed away. When the mother woke up later in the day on 8/12/20, she did not recall the events of the infant's birth or death and hospital staff informed her of what had occurred. The mother's drug screen at the time of the infant's birth was positive for



amphetamines, methamphetamines and fentanyl. The infant was not tested.

The paternal grandmother reported that she forced the mother to go to the hospital and that she drove the mother there. She said the mother was acting strange and she heard hospital staff tell the mother she had to push, or she would lose the infant. She reported that she and the paternal great grandmother were caring for the sibling due to the parents' erratic sleep patterns and inability to meet his needs. She described the mother as having mental health concerns and paranoia since the sibling was born and the mother refused to attend counseling. Due to these concerns, the grandmother had the parents notarize a statement that the infant was to be placed in her custody following the infant's birth.

Following the mother's discharge from the hospital, the parents continued to be uncooperative. CCDSS made numerous additional attempts to interview the father face to face and to follow up with the mother and assess the home for safety.

In September 2020, the paternal grandmother applied for Article 6 custody of the sibling in lieu of CCDSS filing an Article 10 Neglect Petition. The grandmother was awarded Article 6 custody of the sibling in October 2020 and she agreed to continue to supervise the parents' contact with the sibling.

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? Yes

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
056101 - Deceased Child, Female, 0 Days	056102 - Mother, Female, 23 Year(s)	DOA / Fatality	Substantiated
056101 - Deceased Child, Female, 0 Days	056102 - Mother, Female, 23 Year(s)	Parents Drug / Alcohol Misuse	Substantiated

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?	<input type="checkbox"/>	<input checked="" 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"/>

Additional information:

Diligent attempts were made to interview the father face to face and to assess the parents' home and the parents would not cooperate with the investigation.

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

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



Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Explain:
 Risk was assessed and the parents were referred for the necessary services. The sibling was removed from the parents' custody and placed in the Article 6 custody of the paternal grandmother.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, court ordered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain as necessary:
 The paternal grandmother obtained Article 6 custody of the sibling in lieu of CCDSS filing an Article 10 Neglect Petition.

Legal Activity Related to the Fatality

Was there legal activity as a result of the fatality investigation?
 Family Court Criminal Court Order of Protection

Family Court Petition Type: Other Family Court (Including Article 6 Custody/Guardianship)		
Date Filed:	Fact Finding Description:	Disposition Description:
	There was not a fact finding	Custody/Guardianship assigned to relative or non-relative (Article 6 non-foster care)
Respondent:	None	
Comments:	The paternal grandmother applied for Article 6 custody of the sibling in September 2020 and she was awarded custody in October 2020.	

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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional information, if necessary:

The parents declined all services. The paternal grandmother engaged in counseling and the sibling received Early Intervention services.

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

Explain:
The parents declined all services related to the fatality, as well as mental health counseling, substance abuse treatment and parenting skills.

History Prior to the Fatality

Child Information

- Did the child have a history of alleged child abuse/maltreatment? 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? Yes

Infants Under One Year Old

During pregnancy, mother:

- Had medical complications / infections
- Misused over-the-counter or prescription drugs
- Experienced domestic violence
- Had heavy alcohol use
- Smoked tobacco
- Used illicit drugs



Was not noted in the case record to have any of the issues listed

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)
08/04/2020	Sibling, Male, 2 Years	Mother, Female, 23 Years	Inadequate Guardianship	Substantiated	No
	Sibling, Male, 2 Years	Mother, Female, 23 Years	Parents Drug / Alcohol Misuse	Substantiated	

Report Summary:

An SCR report alleged that the mother was abusing methamphetamine to impairment while caring for the sibling. The mother was pregnant with the infant and she tested positive for methamphetamine for the past three weekly visits.

Report Determination: Indicated

Date of Determination: 10/28/2020

Basis for Determination:

The sibling had been residing with the PGGM since he was an infant due to the parents' irregular sleep patterns and inability to care for him. The mother tested positive for amphetamines during several prenatal appointments for the infant. The parents would not cooperate with the investigation and they refused to be drug tested by CCDSS. The mother delayed being induced for labor, against medical advice, and she was under the influence of drugs when she presented to the hospital in active labor on 8/12/20. The mother was unable to push or cooperate with delivery and an emergency C-section needed to be performed. The infant passed away shortly after birth due to hypoxia.

OCFS Review Results:

Diligent attempts were made to meet with the parents throughout the investigation and they were uncooperative and obtained a lawyer. The parents were spoken to on the phone initially, then the mother was interviewed face to face after the infant was born. The sibling was assessed to be safe in the care of the PGGM and PGM and a safety plan was initiated that the parents would be supervised with the sibling and the sibling would reside with the PGGM and PGM. Safety assessments and the RAP were completed timely and accurately. CCDSS discussed custody options with the PGM and she obtained Article 6 custody of the sibling in lieu of an Article 10 Neglect Petition being filed.

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

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

An SCR report dated 6/14/13 was unsubstantiated on 9/10/13 for the allegations of Sexual Abuse and Inadequate Guardianship against the father regarding the mother as a child.

Known CPS History Outside of NYS

There was no known CPS history outside of New York State.



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