



Report Identification Number: SV-16-029

Prepared by: Spring Valley Regional Office

Issue Date: 1/23/2017

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	

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
CPR-Cardio-pulmonary Resuscitation		

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-Others	

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	



Case Information

Report Type: Child Deceased
Age: 10 month(s)

Jurisdiction: Ulster
Gender: Female

Date of Death: 07/08/2016
Initial Date OCFS Notified: 07/08/2016

Presenting Information

A report was made to the New York Statewide Central Register of Child Abuse and Maltreatment on 7/8/2016 listing allegations of DOA/Fatality, Lack of Supervision and Inadequate Guardianship regarding the mother on behalf of the 10-month-old female subject child. The report alleged the mother left the subject child unsupervised in the bathtub for an undetermined amount of time while she attended to her other child. The report stated that the father found the subject child at approximately 7:30 PM when he came home from work. The subject child required medical attention, and died at 8:13 PM.

Executive Summary

The investigation revealed that on 7/8/2016, the mother was at the home with the 10-month-old female subject child, and the 6-year-old surviving male half-sibling. The maternal grandmother was also in the home, however was in her bedroom asleep at the time of the incident. The mother was also looking after a neighbor's dog while the neighbor was at work with the biological father. At approximately 7:00-7:15 PM, the subject child had soiled her diaper and the mother could not find the baby wipes to clean her. As a result, the mother placed the subject child in the bathtub to clean her and began to fill the bathtub with water. The half-sibling, who was playing video games in the living room of the home, began to "freak out," and the mother left the subject child in the bathtub while she went to the living room to tend to the half-sibling. The case notes reflected that he is a special needs child. While with the half-sibling, the mother observed the door was open and the neighbor's dog was out on the front porch of the home and went out to get the dog back inside. When she came back inside, she went into her bedroom and began to message the father on a social media site regarding where he was as she indicated to him she wanted to smoke marijuana. The father arrived home at approximately 7:30 PM, and went into the bathroom where he found the subject child face-down in the water in the bathtub. The father removed the subject child from the bathtub and attempted CPR. EMS was called to the scene and the subject child was taken to a local hospital, she never regained a heartbeat, and was pronounced dead at 8:13PM. The mother disclosed that she had forgotten all about the subject child in the bathtub. Drug paraphernalia was found in the home.

An autopsy was performed on the subject child. The mother was arrested and charged with Criminally Negligent Homicide on 7/9/2016, and was held in Ulster County jail in lieu of \$100,000 bail where she remained at the closure of the investigation.

The safety and well-being of the 6-year-old surviving male half-sibling was assessed and contact with him was maintained. All required collateral contacts were made. The father withdrew consent for the department to contact the school.

All of the allegations listed on the report were determined to have been substantiated regarding the mother on behalf of the subject child. The mother became distracted while the subject child was in the bathtub and neglected to check on her for an undetermined amount of time. The surviving half-siblings father was given custody of the half-sibling and they were referred to the Child Advocacy Center for services as the half-sibling witnessed the events in the home



following the incident. Appropriate service referrals were offered to the father and extended family as well. The CPS investigation was closed on 9/07/2016. The case remained open for court ordered services.

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? No
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:

The decision was made based on all of the information obtained at the time of case closure. Based on the known facts at the time, it was appropriate to close the case.

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 decision to close the case was appropriate as the half-sibling was in the care and custody of his father with a presumed order of protection in place. The mother remained incarcerated at the time of case closure.

Required Actions Related to the Fatality

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

Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 07/08/2016

Time of Death: 08:13 PM

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



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County where fatality incident occurred: ULSTER
 Was 911 or local emergency number called? Yes
 Time of Call: Unknown
 Did EMS to 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: Bathing

Did child have supervision at time of incident leading to death? No - but needed

At time of incident supervisor was: Unknown if they were impaired.

Total number of deaths at incident event:

Children ages 0-18: 1

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Aunt/Uncle	No Role	Female	18 Year(s)
Deceased Child's Household	Deceased Child	Alleged Victim	Female	10 Month(s)
Deceased Child's Household	Father	No Role	Male	25 Year(s)
Deceased Child's Household	Grandparent	No Role	Female	50 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	25 Year(s)
Other Household 1	Other Adult	No Role	Male	28 Year(s)
Other Household 1	Sibling	No Role	Male	6 Year(s)

LDSS Response

Ulster County Department of Social Services, (UCDSS), conducted an investigation into the allegations listed on the report. UCDSS made appropriate collateral contacts including the local law enforcement officials, relatives, and community resources. All subjects were interviewed and observed, and the allegations were discussed. Appropriate service referrals were offered to the family.

There was a 6-year-old male surviving half-sibling that was present in the home with the incident occurred. The safety and well-being of the half-sibling was assessed, and contact with him was maintained. UCDSS completed all safety assessments and the risk assessment profile (RAP) accordingly, and in a timely manner. The case notes were contemporaneous.

As per the medical records received from the hospital, the subject child was pronounced dead at 8:13PM following



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continuous failed resuscitative efforts by the family, EMS and hospital personnel. No indication of any trauma or other injury indicative of abuse or neglect were noted at the hospital. No concerns by the subject child’s pediatrician were noted in the case notes.

Local law enforcement officials questioned the mother regarding the incident at the hospital where she was subsequently arrested. She was charged with Criminally Negligent Homicide and remained in Ulster County jail in lieu of \$100,000 bail at the time the CPS investigation was closed.

There was documentation of supervisory conferences noted in which the circumstances of the case were discussed and directives were provided.

The CPS investigation was closed on 9/06/2016 and the allegations on the report were determined to have been substantiated regarding the mother on behalf of the subject child for Inadequate Guardianship, Lack of Supervision and DOA/Fatality. Family Court petitions and an order of protection were filed on behalf of the half-sibling and custody of the half-sibling was granted to his father. The case notes provide no further details in regard to family court action. Appropriate service referrals were provided to the family for a trauma specialist, family advocate and financial aid for funeral expenses. The father began speaking with a private grief counselor. The case remained open for services and family court action.

Official Manner and Cause of Death

Official Manner: Accident

Primary Cause of Death: From an injury - external cause

Person Declaring Official Manner and Cause of Death: Hospital physician

Multidisciplinary Investigation/Review

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

Comments: The fatality investigation was conducted by an MDT team.

Was the fatality reviewed by an OCFS approved Child Fatality Review Team?No

Comments: Ulster County Department of Social Services does not have an OCFS approved Child Fatality Review Team.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
031142 - Deceased Child, Female, 10 Mons	031144 - Mother, Female, 25 Year(s)	Inadequate Guardianship	Substantiated
031142 - Deceased Child, Female, 10 Mons	031144 - Mother, Female, 25 Year(s)	DOA / Fatality	Substantiated



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031142 - Deceased Child, Female, 10 Mons	031144 - Mother, Female, 25 Year(s)	Lack of Supervision	Substantiated
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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"/>
School	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information:

The father withdrew consent for the LDSS to contact the school.

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



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district?				
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When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including parent/caretaker actions adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Fatality Risk Assessment / Risk Assessment Profile

	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were there surviving siblings/other children in the household removed as a result of this fatality report/investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain as necessary:
 The surviving half-sibling was residing with his father, although he was present in the home when the incident occurred. The Caseworker encouraged the father to file a petition in family court seeking full custody of the half-sibling. A family advocate from the Child Advocacy Center aided the father in filing the 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



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Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
	There was not a fact finding	There was not a disposition
Respondent:	031144 Mother Female 25 Year(s)	
Comments:	It is unclear when the family court petition was filed. The case notes indicated the Family Court Judge was going to be proceeding with the abuse/neglect petition and had granted full custody of the half-sibling to his father "under the V-Docket." There is also documentation in the current system of record indicating that the Caseworker explained to the mother that "the department would be filing petitions in regards to the passing of her daughter." There is no further documentation explaining this.	

Criminal Charge: Criminally negligent homicide Degree: NA			
Date Charges Filed:	Against Whom?	Date of Disposition:	Disposition:
07/09/2016	The Mother	Unknown	unknown
Comments:	The mother was arrested and charged with Criminally Negligent Homicide, and was being held in Ulster County Jail in lieu of \$100,000 bail. She is expected back in court in late October.		

Have any Orders of Protection been issued? Yes	
From: Unknown	To: Unknown
Explain:	
The case notes state that the "V-Docket O/P will remain in effect," listed in a note with the location being "Court." The date 8/4/2016, was selected as the estimated date the order began as there is no prior mention of the order of protection being in place. There is no further mention of the order as well. The provisions of the order and the persons involved are also unclear.	

Services Provided to the Family in Response to the Fatality
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Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Needed but not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input checked="" type="checkbox"/>	<input 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 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Other, specify: Family Advocate

Additional information, if necessary:

The family was offered the aid of a trauma specialist, a family advocate and the Crime Victims Board in regard to financial assistance with funeral expenses. The funeral costs, as per the father, have already been covered and he was going to be speaking with a grief counselor.

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? Yes

Explain: The family was referred to the Child Advocacy Center to work with a family advocate and engage in therapy.

Were services provided to parent(s) and other care givers to address any immediate needs related to the fatality? Yes

Explain: The family was referred to the Child Advocacy Center to work with a family advocate and engage in therapy.

History Prior to the Fatality

Child Information

- Did the child have a history of alleged child abuse/maltreatment? No
- Was there an open CPS case with this child at the time of death? No
- Was the child ever placed outside of the home prior to the death? No
- Were there any siblings ever placed outside of the home prior to this child's death? No
- Was the child acutely ill during the two weeks before death? No



Infants Under One Year Old

During pregnancy, mother:

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

Infant was born:

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

CPS - Investigative History Three Years Prior to the Fatality

There is no CPS investigative history in NYS within three years prior to the fatality.

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

There is no known CPS history for the family.

Known CPS History Outside of NYS

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

Required Action(s)

Are there Required Actions related to compliance issues for provisions of CPS or Preventive services ?

- Yes No

Preventive Services History

There is no record of Preventive Services History provided to the deceased child, the deceased child's siblings, and/or the other children residing in the deceased child's household at the time of the fatality.

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



Additional Local District Comments

There are no additional local district comments.

Recommended Action(s)

Are there any recommended actions for local or state administrative or policy changes? Yes No

Action:	The Investigation Determination safety assessment is listed as Alleged Child Fatality safety assessment. While this appears to have been recorded erroneously, there is no Investigation Determination safety assessment listed, which is required. Please ensure all safety assessments are completed timely and accurately.
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Are there any recommended prevention activities resulting from the review? Yes No