



Report Identification Number: SV-24-005

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

Issue Date: Jun 03, 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

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	DA-District Attorney	
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	SXTF-Sex Trafficking
Miscellaneous		
IND-Indicated	UNF-Unfounded	SO-Sexual Offender
Sub-Substantiated	Unsub-Unsubstantiated	DV-Domestic Violence
LDSS-Local Department of Social Service	ACS-Administration for Children's Services	NYPD-New York City Police Department
PPRS-Purchased Preventive Rehabilitative Services	TANF-Temporary Assistance to Needy Families	FC-Foster Care
MH-Mental Health	ER-Emergency Room	COS-Court Ordered Services
OP-Order of Protection	RAP-Risk Assessment Profile	FASP-Family Assessment Plan
FAR-Family Assessment Response	Hx-History	Tx-Treatment
CAC-Child Advocacy Center	PIP-Program Improvement Plan	yo- year(s) old
CPR-Cardiopulmonary Resuscitation		



Case Information

Report Type: Child Deceased
Age: 4 year(s)

Jurisdiction: Rockland
Gender: Female

Date of Death: 08/07/2023
Initial Date OCFS Notified: 01/02/2024

Presenting Information

On 1/2/2024, Rockland County Department of Social Services (RCDSS) received an SCR report concerning the death of a 4-year-old subject child which occurred in August of 2023. The SCR report alleged the subject child had significant medical issues and was left in the care of an unrelated minor while her caretakers (caretaker 1 and caretaker 2) went on vacation. The subject child became dehydrated and went unconscious. The unrelated minor contacted the caretakers who instructed her to contact 911. Emergency medical services responded to the home and transported the subject child to the hospital where she was pronounced deceased. There were 10 other children residing in the home and there were concerns that the caretakers were not adequately providing for those children's needs.

Executive Summary

This report concerns the death of a 4-year-old subject child which occurred on 8/7/2023. At the time of her death, the subject child resided with caretakers 1 and 2. Also residing in the home were the caretakers' 16, 14, 13, 11, and 9-year-old children, as well as 7, 7, 4, 2, and 2-year-old unrelated children. The unrelated children each had significant medical or developmental issues and resided with the caretakers as part of an informal agreement between their parents and the caretakers, so that the caretakers could provide for the children's needs. The biological parents of the deceased child resided outside of the country. RCDSS assessed the 10 surviving children to be safe with the caretakers.

The subject child was diagnosed with Mitochondrial Disease and had a history of severe dehydration and frequent hospitalizations before residing with the caretakers. On 08/06/2023, the subject child and 10 surviving children were home while the caretakers were away on vacation. During their absence, the caretakers had arranged for two of their adult children to stay in the home and hired a home care aid to look after the children with medical and developmental issues. Around 9:00 PM on the evening of 8/6/2023, the subject child started vomiting and the home care aid gave the child fluids, after which the child became unresponsive. The home care aid called the caretakers and the caretakers contacted emergency services at 12:29 AM on 8/7/2023.

Emergency medical services responded to the home and initiated life-saving measures. The subject child was transported to the hospital where life-saving measures continued; however, she was pronounced deceased at 3:02 AM. First responders, hospital staff, and the subject child's specialist doctor reported no concerns for the caretakers' ability to care for the subject child and no concerns that the death was the result of abuse or neglect.

An autopsy was refused due to cultural beliefs. The death certificate noted the attending hospital physician declared the manner of death was natural and the cause of death was Respiratory Failure due to Hypoglycemia due to Mitochondrial Disease. Law enforcement conducted an investigation, determined there was no criminal activity related to the death, and closed their investigation.

The allegations of Inadequate Guardianship and DOA / Fatality pertaining to the subject child and the allegations of Inadequate Guardianship, Inadequate Food / Clothing / Shelter, and Educational Neglect pertaining to the surviving children were unsubstantiated against the caretakers. The Investigation Conclusion Narrative detailed information gathered from familial and collateral sources and noted no fair preponderance of evidence was found to substantiate the allegations.

There were inconsistencies in the demographic information for multiple children and adults in the case composition,



resulting in an incomplete search of the household's CPS history.

Fatality related services were offered to the caretakers and their household but were declined.

PIP Requirement

RCDSS will submit a PIP to the Westchester Regional Office within 30 days of receipt of this report. The PIP will identify actions the RCDSS has taken, or will take, to address the cited issues. For issues where a PIP is currently implemented, RCDSS 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:**
 - **Approved Initial Safety Assessment?** Yes
 - **Safety assessment due at the time of determination?** Yes
- **Was the safety decision on the approved Initial Safety Assessment appropriate?** Yes

Determination:

- **Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation?** Yes, sufficient information was gathered to determine all allegations.
- **Was the determination made by the district to unfound or indicate appropriate?** Yes

Was the decision to close the case appropriate? Yes

Was casework activity commensurate with appropriate and relevant statutory or regulatory requirements? No

Was there sufficient documentation of supervisory consultation? Yes, the case record has detail of the consultation.

Explain:
The record reflected missing, erroneous, or unverified demographic information for multiple adults and children in the household which resulted in an incomplete review of the family's history.

Required Actions Related to the Fatality

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

Issue:	Review of CPS History
Summary:	The record reflected missing, erroneous, or unverified demographic information for multiple adults and children in the household which resulted in an incomplete review of the family's history.
Legal Reference:	18 NYCRR 432.2(b)(3)(i)



Action: Within the required timeframes, RCDSS will review and document all prior CPS history for members of the family.

Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 08/07/2023

Time of Death: 03:02 AM

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

Unknown

County where fatality incident occurred:

Rockland

Was 911 or local emergency number called?

Yes

Time of Call:

Unknown

Did EMS respond to the scene?

Yes

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

No

Child's activity at time of incident:

Sleeping

Working

Driving / Vehicle occupant

Playing

Eating

Unknown

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	Alleged Victim	Female	3 Year(s)
Deceased Child's Household	Other Adult - Caretaker 2	Alleged Perpetrator	Male	49 Year(s)
Deceased Child's Household	Other Adult - Caretaker 1	Alleged Perpetrator	Female	48 Year(s)
Deceased Child's Household	Other Child - Biological Child of the Caretakers	Alleged Victim	Female	16 Year(s)
Deceased Child's Household	Other Child - Unrelated Child	Alleged Victim	Female	7 Year(s)
Deceased Child's Household	Other Child - Unrelated Child	Alleged Victim	Male	2 Year(s)
Deceased Child's Household	Other Child - Unrelated Child	Alleged Victim	Female	7 Year(s)
Deceased Child's Household	Other Child - Unrelated Child	Alleged Victim	Male	4 Year(s)
Deceased Child's Household	Other Child - Unrelated Child	Alleged Victim	Female	2 Year(s)
Deceased Child's Household	Other Child - Biological Child of the Caretakers	No Role	Male	14 Year(s)
Deceased Child's Household	Other Child - Biological Child of the Caretakers	No Role	Male	13 Year(s)
Deceased Child's Household	Other Child - Biological Child of the Caretakers	No Role	Male	9 Year(s)
Deceased Child's Household	Other Child - Biological Child of the Caretakers	No Role	Female	11 Year(s)



LDSS Response

Immediately upon receipt of the SCR report, RCDSS visited the home, interviewed the caretakers face-to-face, contacted law enforcement, and conducted a search of the family’s CPS history. RCDSS gathered records and information from pertinent sources including the hospital, emergency medical services, the children’s pediatricians and medical specialists, the home care aid and other workers in the home, service providers, and the biological parents of the unrelated children.

Caretaker 1 and caretaker 2 were interviewed face-to-face. Both reported a similar timeline of events regarding the death of the subject child. The subject child resided with the caretakers since October of 2022. In early August of 2023, the caretakers were to be away from the home on vacation and arranged for two of their adult children and a home care aid to be at the home to care for the children. Around 12:00 AM on 8/7/2023, the home care aid contacted the caretakers to say the subject child was breathing heavy, throwing up, and lethargic. Caretaker 1 contacted emergency medical services immediately. The caretakers reported they had instructed the home care aid regarding what to do if the subject child was lethargic, dehydrated, or otherwise unwell.

The home care aid was interviewed and reported she was hired to stay at the home for a few days while the caretakers were out of town. The home care aid stated that around 3:00 PM on 8/6/2023, the subject child vomited but otherwise appeared well and continued to play and eat without issue. The home care aid stated she put the subject child to sleep around 9:00 PM and she appeared fine at that time. Around 11:30 PM, she heard that the subject child was having difficulty breathing and when she checked, she noticed the child’s eyes were open and unresponsive and the child was lethargic. The home care aid contacted the caretakers who contacted emergency services. The home care aid stated she was aware the subject child was a sick child and the caretakers had provided her with a book of instructions for caring for all the children in the home; however, she also stated she was unaware the subject child had an issue with dehydration.

RCDSS spoke with the parents of the subject child via telephone. The parents reported they sent the subject child to reside with the caretakers as they had heard through their community that the caretakers would take in sick children. The parents stated the subject child had experienced similar symptoms to those from which she passed away on six occasions prior to residing with the caretakers and on one of those occasions the subject child needed to be resuscitated by medical staff. The parents stated they had no concerns for the caretakers’ ability to care for the subject child.

RCDSS spoke with the parents or guardians of the five other unrelated children in the household, all of whom reported they had no concerns for the care their children received in the home of the caretakers.

RCDSS gathered information from the children’s schools, pediatricians, medical specialists, and care managers; all of whom reported no concerns for the children residing in the home with the caretakers.

Official Manner and Cause of Death

Official Manner: Natural

Primary Cause of Death: From a medical 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

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

Comments: Rockland County does not have an OCFS approved Child Fatality Review Team.



SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
067108 - Deceased Child, Female, 3 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	DOA / Fatality	Unsubstantiated
067108 - Deceased Child, Female, 3 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067108 - Deceased Child, Female, 3 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	DOA / Fatality	Unsubstantiated
067108 - Deceased Child, Female, 3 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067154 - Other Child - Biological Child of the Caretakers, Female, 16 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067154 - Other Child - Biological Child of the Caretakers, Female, 16 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067154 - Other Child - Biological Child of the Caretakers, Female, 16 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067154 - Other Child - Biological Child of the Caretakers, Female, 16 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Educational Neglect	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Educational Neglect	Unsubstantiated
067159 - Other Child - Unrelated Child, Female, 7 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067160 - Other Child - Unrelated Child, Female, 7 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067160 - Other Child - Unrelated Child, Female, 7 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067160 - Other Child - Unrelated Child, Female, 7 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067160 - Other Child - Unrelated Child, Female, 7 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067161 - Other Child - Unrelated Child, Male, 4 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067161 - Other Child - Unrelated Child, Male, 4 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067161 - Other Child - Unrelated Child, Male, 4 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated



Child Fatality Report

067161 - Other Child - Unrelated Child, Male, 4 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067162 - Other Child - Unrelated Child, Male, 2 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067162 - Other Child - Unrelated Child, Male, 2 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated
067162 - Other Child - Unrelated Child, Male, 2 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067162 - Other Child - Unrelated Child, Male, 2 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067163 - Other Child - Unrelated Child, Female, 2 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067163 - Other Child - Unrelated Child, Female, 2 Year(s)	067153 - Other Adult - Caretaker 2, Male, 49 Year(s)	Inadequate Guardianship	Unsubstantiated
067163 - Other Child - Unrelated Child, Female, 2 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
067163 - Other Child - Unrelated Child, Female, 2 Year(s)	067152 - Other Adult - Caretaker 1, Female, 48 Year(s)	Inadequate Guardianship	Unsubstantiated

CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alleged subject(s) interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All 'other persons named' interviewed face-to-face?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an adequate assessment of impending or immediate danger to surviving siblings/other children in the				



household named in the report:				
Within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 7 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 30 days?	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	-------------------------------------	--------------------------

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"/>

Placement Activities in Response to the Fatality Investigation

	Yes	No	N/A	Unable to Determine
Did the safety factors in the case show the need for the surviving siblings/other children in the household be removed or placed in foster care at any time during this fatality investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were there surviving children in the household that were removed as a result of information uncovered during the fatality investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Legal Activity Related to the Fatality

Was there legal activity as a result of the fatality investigation? There was no legal activity.

Services Provided to the Family in Response to the Fatality



Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Explain:

RCDSS offered services for the children and all services were declined by the caretakers.

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

Explain:

RCDSS offered service referrals but all services were declined by the caretakers. Services were not offered to the biological parents of the subject child who resided outside of the country.

History Prior to the Fatality

Child Information

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

No

Was the child acutely ill during the two weeks before death?

Yes



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)
10/13/2022	Other Child - unrelated child, Female, 6 Years	Other Adult - unrelated foster parent, Male, 66 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Other Child - unrelated child, Female, 6 Years	Other Adult - unrelated guardian, Male, 46 Years	Inadequate Guardianship	Unsubstantiated	

Report Summary:

An SCR report was made on 10/13/2022 and alleged the then 6-year-old unrelated child had multiple handicaps and could not walk or talk. The unrelated child had poor hygiene and her guardian (a person unrelated to the fatality investigation) was not properly addressing the issue. It was further alleged the guardian drove the unrelated child in the car without a car seat. As the unrelated child did not have the ability to sit up unrestrained, she rode curled up on the floor of the car.

Report Determination: Unfounded

Date of Determination: 12/01/2022

Basis for Determination:

The Investigation Determination Narrative noted the allegations of Inadequate Guardianship were unsubstantiated against the 6-year-old unrelated child's foster mother and father. The narrative noted it was the foster father, and not the unrelated child's guardian, who was driving with the child on the floor of the car. The foster father admitted he drove with the child on the floor of the car. RCDSS provided the family with a car seat and they agreed to follow proper safety procedure in the future.

OCFS Review Results:

Immediately upon receipt of the report, RCDSS interviewed the foster mother and father and observed the home and the unrelated child. RCDSS interviewed the unrelated child's uncle who reported he was the child's legal guardian and had made an agreement between the child's biological parents and the foster parents for the child to reside in Rockland County with the foster parents. The record reflected there was no contact or attempted contact with the biological parents of the unrelated child.

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 case record reflected no contact or attempted contact with the biological parents of the unrelated child.

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.

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

Caretakers 1 and 2 were the subjects of a FAR case in June 2016 regarding concerns for their then 5-year-old biological child as he had a history of starting fires and had access to matches, was able to walk the community unsupervised, and was being strapped to his bed overnight by caretaker 1. Caretaker 1 admitted she would strap her 5-year-old biological



child in a harness to his bed overnight so he could not leave and agreed to stop doing such at RCDSS's recommendation. RCDSS assisted the family in engaging the child in play therapy. The FAR case was closed after all objectives were met.

Caretaker 1 was the subject of an unfounded CPS investigation in January 2019 regarding a 3-year-old child unrelated to this report. The SCR report alleged the child required special care for medical issues and was left unattended in his crib which was badly soiled with his food. It was further alleged caretaker 1 was aware the child was seriously ill in the weeks prior to the SCR report and failed to seek proper medical attention. RCDSS received records from the children's pediatrician which noted the children were seen often at the practice with no concerns.

Known CPS History Outside of NYS

There was no known history outside of NYS.

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

The two adults and one child who had previous CPS history were listed in Connections with differently spelled names and different addresses resulting in alternate PIDS and were therefore overlooked in the Connections search.

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