



Report Identification Number: SY-21-003

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

Issue Date: Jul 08, 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: 1 month(s)

Jurisdiction: Onondaga
Gender: Female

Date of Death: 01/08/2021
Initial Date OCFS Notified: 01/08/2021

Presenting Information

An SCR report alleged that at approximately 9:00 PM on 1/7/21, the father fed the 1-month-old infant. When the father finished feeding the infant, he placed her on the far-left side of their shared bed at approximately 9:22 PM. The infant laid face-up in a pillow and covered with a blanket from the waist down. At 11:00 PM, the father laid down on the far-right side of the bed and the mother laid down in the middle of the bed and they fell asleep. The mother and father awoke at 2:00 AM on 1/8/21 to find the infant not breathing and unresponsive. The father called 911 and emergency responders administered CPR at the scene for an unknown amount of time. The infant was pronounced dead at 2:19 AM. The infant was an otherwise healthy child and the parents had no explanation for her death.

Executive Summary

On 1/8/21, the Onondaga County Department of Children and Family Services (OCDCFS) received an SCR report regarding the death of the 1-month-old female infant. OCDCFS had an open CPS investigation which was received on 11/13/20, following the birth of the infant. The report alleged that the parents were unable to safely care for the infant due to losing custody of their other children.

The parents each had three other children that were removed from their custody due to mental health concerns, drug abuse and unstable housing. The mother's 9 and 3-year-old children were in the custody of the maternal grandparents and her 6-year-old child was in the custody of the maternal aunt. The father's 15-year-old child was in the custody of her maternal grandmother, the father's 3-year-old child was in the paternal grandmother's custody, and his 2-year-old child was in Kinship Foster Care with the paternal grandmother. The parents had regular visitation with each of the siblings and the siblings were assessed to be safe in the care of relatives. Although their safety was assessed timely, a 30-Day Safety Assessment was not completed in Connections.

OCDCFS determined that the infant could be safely discharged from the hospital to the parents' care based on the parents' engagement in substance abuse treatment with no recent concerns for drug use, as well as their engagement in mental health counseling. Several home visits had been conducted, the parents appeared sober at all contacts and they had the proper infant supplies. Safe sleep guidelines were discussed with the parents at several home visits and a safe sleep environment was observed for the infant.

OCDCFS conducted a joint investigation with law enforcement and they learned that the mother, father, and infant co-slept in a queen-sized bed on the night of 1/7/21. The mother awoke around 2:00 AM and she discovered that the infant was unresponsive. The mother attempted to perform CPR while the father called 911. Fire department personnel performed CPR until EMS arrived. Based on the infant's condition, EMS declared the infant was deceased at the home at 2:19 AM.

An autopsy was performed, and the cause of death was sudden unexpected infant death (intrinsic and extrinsic factors identified) and the manner of death was undetermined. The autopsy report listed the intrinsic and extrinsic factors to be co-sleeping, nasopharyngeal swab positive for rhinovirus/enterovirus and pulmonary congestion. The report stated that "complete autopsy with extensive microscopic examination showed slight pulmonary vascular congestion but no evidence of acute bronchopneumonia, myocarditis or other evidence of bacterial superinfection or significant viral infection complications. Therefore, the significance of the intrinsic factor of a positive nasopharyngeal swab cannot be determined or completely excluded as contributing to the cause of death. The circumstances of death, including the extrinsic factor of



co-sleeping in unsafe bedding, raises the possibility of asphyxia as a cause of death, however this cannot be proven based on autopsy findings and investigation including re-enactment. Therefore, the cause and manner are best left as undetermined." Based on these findings, law enforcement closed their investigation with no charges filed.

OCDCFS substantiated the allegation of Inadequate Guardianship against the parents in the 11/13/20 investigation due to the unsafe sleep environment; however, OCDCFS unsubstantiated the allegations of DOA/Fatality and Inadequate Guardianship against the parents in this investigation based on the findings in the final autopsy report. The parents were provided with information on bereavement services and they remained engaged in substance abuse and mental health services. The relatives caring for the siblings were provided with information on bereavement services for the siblings. The case was closed on 5/5/21 since the parents had no children in their care.

PIP Requirement

OCDCFS will submit a PIP to the Syracuse Regional Office within 30 days of receipt of this report. The PIP will identify action(s) the OCDCFS has taken, or will take, to address the cited issue(s). For issues where a PIP is currently implemented, OCDCFS 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

Explain:

Safety of the siblings was adequately assessed and the information gathered supported the determination.

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 case circumstances. The case was closed as the parents did not have any children in their custody.

Required Actions Related to the Fatality

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

Issue:	Timely/Adequate 30-Day Safety Assessment
Summary:	The safety of the siblings was assessed timely however, a 30-Day Safety Assessment was not completed in Connections.
Legal Reference:	CPS Program Manual, Chapter 6, K-2
Action:	A Safety Assessment will be documented and approved by a supervisor within 30 days of receipt of a report that contains the allegation of DOA/Fatality, as required.

Fatality-Related Information and Investigative Activities**Incident Information**

Date of Death: 01/08/2021

Time of Death: 02:19 AM

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

Unknown

County where fatality incident occurred:

Onondaga

Was 911 or local emergency number called?

Yes

Time of Call:

02:09 AM

Did EMS respond to the scene?

Yes

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

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

How long before incident was the child last seen by caretaker? 3 Hours

At time of incident was supervisor impaired? Not impaired.

At time of incident supervisor was:

Distracted

Absent

Asleep

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	1 Month(s)
Deceased Child's Household	Father	Alleged Perpetrator	Male	36 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	29 Year(s)

LDSS Response

OCDCFS completed all investigative requirements upon receipt of the SCR report. They spoke to the source of the report, reviewed SCR history and provided notice of existence of the report to the parents. They spoke to the mother, father, six siblings, medical examiner, law enforcement, fire department staff, EMS, father’s probation officer, the parents’ substance abuse and mental health counselors, the pediatrician, and numerous family members.

During interviews with the parents, they reported that the infant had cold symptoms of sneezing and coughing for the week prior to the incident. The parents confirmed they were aware of safe sleep guidelines and they stated that the infant slept in the bassinet most of the time and occasionally she slept in bed with them. The parents reported that on 1/7/21, the father gave the infant a bottle at 9:30 PM. After the infant fell asleep, he placed her on her back on the left side of the bed, with her head on a pillow and a blanket covering her from the waist down. Around 11:00 PM, the mother fell asleep in the middle of the bed between the father and the infant, and the father slept on the right side of the bed. The mother woke at 2:00 AM, and she saw that the infant was still on her back, her head was tipped to the side, she had blood coming from the side of her mouth and she was turning blue and purple. The mother attempted to perform CPR while the father called 911. The mother denied that the infant’s airway was obstructed or that she had rolled over on the infant. The parents denied that they had used any drugs or alcohol the night of the incident.

The six siblings were all spoken to and they were assessed to be safe in the care of relatives. The siblings had no concerns for their care, and they had no information about the incident. The relatives caring for the siblings were provided with information on bereavement services and it was unknown if they utilize these services.

Law enforcement records stated that the infant was observed to have no visible injuries or trauma. Her body was in rigor mortis and she had most likely been deceased for several hours prior to 911 being called. The medical examiner's investigator reported there did not appear to be any indication the infant was suffocated or wedged in the bed. The infant was reclined on a pillow so it was possible the position of her neck could have impeded her breathing. The investigator further reported that there were no signs the parents were impaired by drugs or alcohol when the parents were interviewed following the incident. Pediatrician records showed that the infant was last seen on 12/29/20 and she was found to be healthy.

The OCDCFS caseworker assigned to the open services case involving the father and his 2-year-old son reported that they had last been in the parents’ home on 1/6/21. There were no concerns for the infant on that date. Safe sleep guidelines had been discussed with the parents on numerous occasions during the open investigation and services case. The parents’ substance abuse and mental health counselors reported that the parents regularly attended appointments and they had no concerns for recent drug use.

Official Manner and Cause of Death

Official Manner: Undetermined

Primary Cause of Death: From a medical cause

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
057461 - Deceased Child, Female, 1 Month(s)	057484 - Mother, Female, 29 Year(s)	DOA / Fatality	Unsubstantiated
057461 - Deceased Child, Female, 1 Month(s)	057484 - Mother, Female, 29 Year(s)	Inadequate Guardianship	Unsubstantiated
057461 - Deceased Child, Female, 1 Month(s)	057485 - Father, Male, 36 Year(s)	DOA / Fatality	Unsubstantiated
057461 - Deceased Child, Female, 1 Month(s)	057485 - Father, Male, 36 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including parent/caretaker actions adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain: Although the siblings' safety was adequately assessed within required timeframes, a 30-Safety Assessment was not completed in Connections.				

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"/>
Explain: Risk was adequately assessed and the parents were already engaged in the necessary services.				

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 either as a result of this fatality report / investigation or for reasons unrelated to this fatality?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Explain as necessary:

The six siblings were all in the care of relatives at the time of the fatality.

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 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input checked="" type="checkbox"/>	<input 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 checked="" 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 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 checked="" type="checkbox"/>	<input 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 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"/>

Additional information, if necessary:

The parents remained engaged in mental health and substance abuse services. It was not documented if funeral assistance or family planning were offered to the family.

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 provided with information on bereavement services for the siblings.



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

Explain:

The parents were engaged in mental health services at the time of the death.

History Prior to the Fatality

Child Information

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

Infants Under One Year Old

During pregnancy, mother:

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

Infant was born:

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

CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
11/13/2020	Deceased Child, Female, 1 Days	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	No
	Deceased Child, Female, 1 Days	Father, Male, 35 Years	Inadequate Guardianship	Substantiated	

Report Summary:

An SCR report alleged that on 11/12/20, the mother gave birth to the subject infant. The mother and father had all of their other children removed from their care due to neglect, and those children had not been returned to them.

Report Determination: Indicated

Date of Determination: 02/02/2021

Basis for Determination:

The parents were engaged in treatment, denied active drug use, and they were willing to accept services so the infant was discharged to their care. OCDCFS provided the parents with safe sleep education and advised them of the concerns of co-sleeping with the infant. The infant was found unresponsive on the morning of 1/8/21, after being placed to sleep on a



pillow in between the parents on the adult bed. Based on the unsafe sleep environment the allegation of Inadequate Guardianship was substantiated against both parents.

OCFS Review Results:

OCDCFS conducted home visits and assessed the safety of the infant throughout the case. The parents had the necessary infant supplies at each home visit and a safe sleep environment was observed. Safety Assessments and the RAP were completed timely and accurately. OCDCFS confirmed that the parents were engaged in substance abuse and mental health treatment and they were drug tested. Upon receipt of the report, OCDCFS documented that a Neglect Petition would be filed to obtain court ordered services. The record did not reflect the reason a petition had not yet been filed. Following the infant's death, the parents had no other children in their care.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
09/23/2019	Other Child - Cousin , Female, 13 Years	Aunt/Uncle, Female, 32 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	No
	Other Child - Cousin , Male, 7 Years	Aunt/Uncle, Female, 32 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Aunt/Uncle, Female, 32 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other Child - Cousin , Female, 13 Years	Aunt/Uncle, Male, 37 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other Child - Cousin , Male, 7 Years	Aunt/Uncle, Male, 37 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Aunt/Uncle, Male, 37 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other Child - Cousin , Female, 13 Years	Unrelated Home Member, Male, 36 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Other Child - Cousin , Male, 7 Years	Unrelated Home Member, Male, 36 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Unrelated Home Member, Male, 36 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Aunt/Uncle, Female, 32 Years	Inadequate Guardianship	Unsubstantiated	

Report Summary:

An SCR report alleged that the maternal aunt and uncle were not providing adequate housing for their two children and the 6-year-old sibling. The sibling appeared to have developmental delays and in January 2019 he was referred to see a specialist for an evaluation for intervention services. The aunt failed to follow through with the evaluation.

Report Determination: Unfounded

Date of Determination: 10/28/2019

Basis for Determination:

The home was observed to be clean and safe for the children. The children voiced no concerns for their care or supervision. The aunt and uncle planned for the sibling to receive intervention services at school the following school year. The sibling was referred to a child development clinic to start receiving services.

OCFS Review Results:

Home visits were conducted and the aunt, uncle and children were interviewed. Safety Assessments and the RAP were completed timely and accurately. Relevant collaterals were contacted.



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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
12/27/2018	Sibling, Male, 1 Days	Father, Male, 34 Years	Inadequate Food / Clothing / Shelter	Substantiated	No
	Sibling, Male, 1 Days	Father, Male, 34 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 1 Days	Father, Male, 34 Years	Parents Drug / Alcohol Misuse	Substantiated	
	Sibling, Male, 1 Days	Other Adult - 2-year-old Sibling's Mother, Female, 24 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Male, 1 Days	Other Adult - 2-year-old Sibling's Mother, Female, 24 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 1 Days	Other Adult - 2-year-old Sibling's Mother, Female, 24 Years	Parents Drug / Alcohol Misuse	Substantiated	

Report Summary:

An SCR report alleged that the mother of the 2-year-old sibling had a positive toxicology for cocaine and opiates at the time of the 2-year-old sibling's birth.

Report Determination: Indicated

Date of Determination: 01/10/2019

Basis for Determination:

The 2-year-old sibling and the sibling's mother both tested positive for heroin and cocaine at the time of the sibling's birth. The sibling remained hospitalized for several additional days due to withdrawal symptoms. The sibling's mother admitted to using heroin and cocaine regularly throughout her pregnancy and she and the father were residing in a drug house. The father began a methadone maintenance program a week prior to the sibling's birth. The sibling's mother was not in treatment. They did not have a source of income to care for the child. An Article 10 Neglect Petition was filed and the sibling was placed in Kinship Foster Care with the paternal grandmother on 1/9/19.

OCFS Review Results:

OCDCFS interviewed the father and sibling's mother, they created a Plan of Safe Care and they discussed safe sleep guidelines. A safety plan was developed for the sibling to be discharged to the paternal grandmother's care and a Neglect Petition was filed to obtain court ordered services. Safety Assessments and the RAP were completed timely and accurately and relevant collaterals were contacted.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
10/04/2018	Sibling, Male, 6 Months	Mother, Female, 27 Years	Inadequate Guardianship	Substantiated	No
	Sibling, Male, 6 Months	Mother, Female, 27 Years	Lack of Supervision	Substantiated	
	Sibling, Male, 6 Months	Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Substantiated	
	Sibling, Male, 6 Months	Other Adult - Siblings' Father , Male, 31 Years	Inadequate Guardianship	Substantiated	



Sibling, Male, 6 Months	Other Adult - Siblings' Father , Male, 31 Years	Lack of Supervision	Substantiated
Sibling, Male, 6 Months	Other Adult - Siblings' Father , Male, 31 Years	Parents Drug / Alcohol Misuse	Substantiated

Report Summary:

An SCR report alleged the mother and siblings' father abused drugs to the point of impairment. As a result, they were unable to provide the 3-year-old sibling (6 months old at the time) with adequate care and supervision. They left the sibling in the house alone without any supervision and they fought with each other in front of the sibling. The parents had two other children taken from their care due to drug abuse and violence. A subsequent report dated 11/12/18 alleged that the mother was using heroin. She was incapable of adequately caring for the sibling when she was abusing drugs while she was the sole caretaker of the sibling.

Report Determination: Indicated

Date of Determination: 12/13/2018

Basis for Determination:

The mother and siblings' father admitted to using marijuana after entering treatment for marijuana abuse. The siblings' father was inconsistent with mental health treatment and he was not taking his prescribed medication. The siblings' father had a physical altercation with a neighbor and he was incarcerated. The mother was present for the altercation, leaving the sibling unsupervised. The siblings' father was having auditory hallucinations while caring for the sibling and the mother did not follow the safety plan and left the sibling alone with him. A Neglect Petition was filed and an order of protection was issued barring the siblings' father from unsupervised contact with the sibling.

OCFS Review Results:

Home visits were conducted and a safe sleep environment was observed. Safety Assessments and the RAP were completed timely and accurately. The mother and siblings' father were interviewed and relevant collaterals were contacted. Escalating concerns for the parents mental health and drug abuse supported Family Court intervention.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
04/03/2018	Sibling, Male, 1 Days	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	Yes

Report Summary:

An SCR report alleged that the mother and father of the siblings had a history of using synthetic marijuana. The mother and siblings' father had a child removed from their care as a result of their drug use. The 3-year-old sibling was born on 4/3/18 and there were concerns for the mother's ability to care for the sibling.

Report Determination: Unfounded

Date of Determination: 04/25/2018

Basis for Determination:

The sibling did not have a positive toxicology at birth and the mother and siblings' father reported that they had not used drugs in several months. The mother and siblings' father were engaged in mental health and substance abuse treatment and the sibling appeared to be well cared for. The family was referred to Healthy Families and the case was opened for preventive services.

OCFS Review Results:

Home visits were conducted, baby supplies were observed and safe sleep education was provided. The mother and siblings' father were interviewed and relevant collaterals were contacted. Although the safety of the sibling was assessed within the required timeframe, the 7-Day Safety Assessment was not completed and approved in Connections until the case closed on 4/25/18.

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

Issue:

Timely/Adequate Seven Day Assessment

**Summary:**

The 7-Day Safety Assessment was completed and approved late in Connections on 4/25/18.

Legal Reference:

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

Action:

OCDCFS will document and approve all Safety Assessments within the required timeframe.

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

An SCR report dated 9/9/13 was unsubstantiated for the allegations of Inadequate Guardianship, Parent's Drug/Alcohol Misuse and Lack of Supervision against the father and the mother of the 15-year-old sibling regarding the 15-year-old sibling.

An SCR report dated 1/23/15 was unsubstantiated for the allegation of Inadequate Guardianship against the mother regarding the 6-year-old sibling.

An SCR report dated 9/15/15 was substantiated for the allegations of Parent's Drug/Alcohol Misuse and Inadequate Guardianship against the mother and the father of the siblings regarding the 6-year-old sibling. The parents had a history of drug abuse and they were under the influence of drugs while caring for the sibling. The maternal aunt and uncle obtained Article 6 custody of the sibling.

An SCR report dated 9/18/17 was substantiated for the allegation of Parent's Drug/Alcohol Misuse against the mother of the father's 3-year-old child. The sibling tested positive for methadone and cocaine at birth. A Neglect Petition was filed against the sibling's mother and the sibling was placed in Foster Care.

Known CPS History Outside of NYS

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

Preventive Services History

A Preventive Services Case was opened from 4/10/18-6/22/20 to support the mother and siblings' father with caring for the 3-year-old sibling. There were ongoing concerns for their mental health and they were abusing drugs. Due to previous substance abuse concerns, the 9-year-old sibling was in the Article 6 custody of the maternal grandparents and the 6-year-old sibling was in the Article 6 custody of the maternal aunt. Both adults were referred to a parent aide and they were attending mental health and substance abuse services. The mother and siblings' father relapsed on synthetic marijuana and the siblings' father's mental health became unstable. An Article 10 Neglect Petition was filed on 12/3/18 and the siblings' father was barred from unsupervised contact with the sibling. The order of protection was violated and the 3-year-old sibling was placed in Foster Care on 1/16/20. On 1/22/20, he was placed in the custody of the maternal grandparents under Article 1017 and the mother and siblings' father were barred from unsupervised contact. On 6/3/20, the maternal grandparents were awarded physical custody of the sibling. The mother and siblings' father were awarded shared legal custody with supervised visitation.

Foster Care Placement History

The father's 3-year-old child was placed in Foster Care on 9/25/17, following a positive toxicology birth for cocaine and



methadone. A Neglect Petition was filed against the sibling's mother. The father and the sibling's mother had a history of drug abuse, unstable housing and mental health concerns. The sibling was placed in the custody of the paternal grandmother under Article 1017 on 10/11/17. The paternal grandmother became a certified foster parent, and on 12/18/18, the sibling was transferred to the custody of the Commissioner of OCDCFS and remained in the kinship foster home of the paternal grandmother. On 12/18/20 the paternal grandmother was granted kinship guardianship of the sibling and the case closed on 1/19/21. The father and sibling's mother were inconsistent in attending substance abuse treatment and maintaining sobriety throughout the case. The father had weekly visitation with the sibling.

The father's 2-year-old child was placed in Kinship Foster Care with the paternal grandmother on 1/9/19, following a positive toxicology birth for cocaine and opiates. A Neglect Petition was filed against the sibling's mother. The father was engaged in substance abuse treatment and had weekly visitation with the sibling. The sibling was in Kinship Foster Care with the paternal grandmother and the services case remained open at the time this report was written.

Legal History Within Three Years Prior to the Fatality

Was there any legal activity within three years prior to the fatality investigation?

Family Court

Criminal Court

Order of Protection

Family Court Petition Type: FCA Article 10 - CPS

Date Filed:	Fact Finding Description:	Disposition Description:
12/03/2018	Adjudicated Neglected	Direct Custody to/or Continued with Relative (Article 10)
Respondent:	057484 Mother Female 29 Year(s)	
Comments:	An Article 10 Neglect Petition was filed against the mother and siblings' father on 12/3/18 regarding the 3-year-old sibling. The 3-year-old sibling was placed in the custody of the maternal grandmother under Article 1017 and there was a finding of Neglect. The maternal grandmother was awarded Article 6 custody of the sibling on 6/3/20.	

Family Court Petition Type: FCA Article 10 - CPS

Date Filed:	Fact Finding Description:	Disposition Description:
01/09/2019	Adjudicated Neglected	Care/Custody to Local Social Services District
Respondent:	051301 Other	
Comments:	On 1/9/19, an Article 10 Neglect Petition was filed against the 2-year-old sibling's mother and the sibling was placed in Kinship Foster Care with the paternal grandmother. On 10/3/19, there was a finding of Neglect with an order of supervision and the sibling's Foster Care placement continued.	

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