



Report Identification Number: SV-16-007

Prepared by: Spring Valley Regional Office

Issue Date: 7/11/2016

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
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		

Case Information



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Report Type: Child Deceased
Age: 2 year(s)

Jurisdiction: Orange
Gender: Male

Date of Death: 03/24/2016
Initial Date OCFS Notified: 03/25/2016

Presenting Information

On 3/20/16 an SCR report was filed which alleged that on 3/19/16 the mother was under the influence of narcotics while driving with the subject child and was involved in a collision. The report stated that the SC was ejected in his car seat through the sun roof and suffered severe head trauma and it was anticipated that he would be declared brain dead. The report alleged IG, II and PD/AM against the mother. A duplicate report was registered on 3/20/16 stated that the mother tested positive for opiates and that the child was declared "brain" dead. This report also listed the MGGF, a Parent Substitute, an 11-month-old sibling and an 8-year-old male half-sibling with unknown roles. A subsequent report registered on 3/25/16 added that the mother was under the influence of opiates and benzodiazepines, drove at high speeds and the child was improperly restrained. This report added the allegation of DOA/fatality against the mother.

Executive Summary

There was an open investigation with the family at the time of the fatality. There were concerns of IG and PDAM.

The investigation revealed that on 3/19/2016, the mother drove behind a vehicle on the roadway, with the subject child as a passenger in her car. The subject child was seated in an outdated car seat and believed to have not been properly secured in the vehicle. The mother attempted to pass the vehicle in front of her, striking the rear of the vehicle, resulting in the mother's vehicle veering off and going over an embankment. The subject child was ejected from the vehicle, and struck a tree approximately 7-feet from the ground. Emergency services were called by the passenger of the other vehicle, as well as many on lookers. The mother did not have a valid driver's license at the time of the accident. Both the mother and the subject child were airlifted to the medical center. During the investigation and transport, local law enforcement officials and EMS personnel found several pill bottles at the scene of the accident containing Suboxone, methadone, trazidone, Seroquel and Zoloft, and a small bag of various pills, including pills identified as Xanax, located in the mothers bra. It was believed the mother was under the influence of drugs at the time of the accident, however results from her toxicology screening have not been received.

On 3/21/2016, the subject child was declared brain dead, and was maintained on life support to allow the mother to make the final decision regarding his life. The mother was heavily sedated, and intubated, due to her own serious injuries, and was unable to make the decision once she was declared medically stable. The maternal grandfather gave permission and the subject child was pronounced dead on 3/24/2016. The preliminary autopsy results listed the cause of death as Blunt Force Trauma of the body with fractures of skull; Intermeningeal Hemorrhages, lacerations of brain; survival of 3 days in coma with cerebral edema and hypoxic encephalomalacia.

The mother was arrested while at the hospital, and charged with Vehicular Assault and Ability Impaired/Drugs. Her criminal case is pending and local law enforcement officials are waiting on the results from her toxicology screening to pursue additional charges if necessary.

Medical records indicated the mother did not receive prenatal care while pregnant with the subject child, and he was born prematurely at 35 weeks, 3 days. At the time of the subject child's birth, he tested positive for methadone and subsequently suffered withdrawal and was treated. The subject child was in the Neonatal Intensive Care Unit for 20



days prior to his discharge as a result of his withdrawal and other medical needs.

OCDSS filed an abuse/neglect petition in family court on behalf of the surviving siblings, due to the mothers extensive medical needs, mental health concerns, and drug use. The father of the 8-year-old half-sibling was given physical custody of him, and custody of the 11-month-old sibling was given to the maternal uncle as the father is incarcerated. Contacts with these siblings were maintained throughout the investigation and their safety and wellbeing was assessed.

The CPS investigation was closed on 05/18/2016. All of the allegations listed on the report were determined to have been substantiated regarding the mother, on behalf of the subject child and his siblings. A preventive case was opened on 5/15/16 and remained open at the time this report was completed.

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:

The determination and decision to close the investigation were appropriate.

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 level of casework activity, including supervisory consultation, contact with the family and others from the receipt of the report through case conclusion, was appropriate.

Required Actions Related to the Fatality

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



Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 03/24/2016

Time of Death: Unknown

Date of fatal incident, if different than date of death: 03/19/2016

Time of fatal incident, if different than time of death: 03:57 PM

County where fatality incident occurred: ORANGE

Was 911 or local emergency number called? Yes

Time of Call: 03:57 PM

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:

- checkbox Sleeping, Working, Driving / Vehicle occupant, Playing, Eating, Unknown, Other

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

Is the caretaker listed in the Household Composition? Yes - Caregiver

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At time of incident supervisor was:

- checkbox Drug Impaired, Absent, Alcohol Impaired, Asleep, Distracted, Impaired by illness, Impaired by disability, Other:

Total number of deaths at incident event:

Children ages 0-18: 1

Household Composition at time of Fatality

Table with 5 columns: Household, Relationship, Role, Gender, Age. Rows include Deceased Child's Household and Other Household 1.



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Other Household 2	Aunt/Uncle	No Role	Male	30 Year(s)
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LDSS Response

Orange County Department of Social Services, (OCDSS), conducted an investigation into the allegations listed on the report. OCDSS made many appropriate collateral contacts including the Medical Examiner, local law enforcement officials, hospital staff, service providers, and community resources. All subjects and other persons named on the report were interviewed and observed, and the allegations were discussed. Appropriate service referrals were offered to the family.

The safety and wellbeing of the 8-year-old and 11-month-old male siblings was assessed and contact with them was maintained throughout the investigation. OCDSS completed all safety assessments and the risk assessment profile (RAP). All of the assessments were timely, and appropriate. The case notes were very well documented, detailed, and contemporaneous.

The investigation revealed that on 3/19/2016, the mother drove behind a vehicle on the roadway, with the subject child as a passenger in her car. The subject child was seated in an outdated car seat and believed to have not been properly secured in the vehicle. The mother attempted to pass the vehicle in front of her, striking the rear of the vehicle, resulting in the mother's vehicle veering off and going over an embankment. The subject child was ejected from the vehicle, and struck a tree approximately 7-feet from the ground. Emergency services were called by the passenger of the other vehicle, as well as many on lookers. The mother did not have a valid driver's license at the time of the accident. Both the mother and the subject child were airlifted to the medical center. During the investigation and transport, local law enforcement officials and EMS personnel found several pill bottles at the scene of the accident containing Suboxone, methadone, trazidone, Seroquel and Zoloft, and a small bag of various pills, including pills identified as Xanax, located in the mothers bra. It was believed the mother was under the influence of drugs at the time of the accident, however results from her toxicology screening have not been received.

As per the Medical Examiner's office, an autopsy was completed on the subject child on 03/25/2016. The preliminary autopsy report listed the cause of death as "Blunt Force Trauma of Body with Fractures of Skull; Intermeningeal Hemorrhages, Lacerations of Brain; Survival of 3 days in coma with Cerebral Edema and Hypoxic Encephalomalacia". There was police involvement and the mother was charged with Vehicular Assault and Ability Impaired/Drugs. The results of the toxicology screen conducted at the hospital on the day of the incident have not yet been received. As a result, her criminal case is pending, and additional charges will be considered as needed.

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 05/18/2016 and the allegations on the report were determined to have been substantiated regarding the mother, on behalf of the subject child for Inadequate Guardianship, Parent's Drug/Alcohol Misuse, Internal Injuries and DOA/Fatality, and Parent's Drug/Alcohol Misuse and Inadequate Guardianship on behalf of the surviving 11-month-old sibling and 8-year-old half sibling. The mother did not demonstrate an understanding of the severity of the situation and had not acknowledged that the subject child died as a result of her actions. The mother had severe medical needs that required extensive therapy as a result of the collision. It was determined that due to her extensive medical needs, mental health concerns and drug use, the mother was unable to adequately care for her children. An abuse/neglect petition was filed in Orange County Family Court on 4/12/2016 on behalf of the surviving siblings and an



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order of protection was issued against the mother barring her from having unsupervised contact with the siblings. On 4/15/16 OCDSS opened a prev

Official Manner and Cause of Death

Official Manner: Pending

Primary Cause of Death: From an injury - external cause

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review

Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?No

Comments: The investigation adhered to previously approved protocols for joint investigation.

Was the fatality reviewed by an OCFS approved Child Fatality Review Team?Yes

Comments: This case was reviewed at two OCFS approved Child Fatality Review Team meetings held on 4/5/2016 and 5/3/2016 respectively.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
028761 - Deceased Child, Male, 2 Yrs	028762 - Mother, Female, 27 Year(s)	Inadequate Guardianship	Substantiated
028761 - Deceased Child, Male, 2 Yrs	028762 - Mother, Female, 27 Year(s)	DOA / Fatality	Substantiated
028761 - Deceased Child, Male, 2 Yrs	028762 - Mother, Female, 27 Year(s)	Internal Injuries	Substantiated
028761 - Deceased Child, Male, 2 Yrs	028762 - Mother, Female, 27 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
028763 - Sibling, Male, 8 Year(s)	028762 - Mother, Female, 27 Year(s)	Inadequate Guardianship	Substantiated
028763 - Sibling, Male, 8 Year(s)	028762 - Mother, Female, 27 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
028764 - Sibling, Male, 11 Month(s)	028762 - Mother, Female, 27 Year(s)	Inadequate Guardianship	Substantiated
028764 - Sibling, Male, 11 Month(s)	028762 - Mother, Female, 27 Year(s)	Parents Drug / Alcohol Misuse	Substantiated

CPS Fatality Casework/Investigative Activities



	Yes	No	N/A	Unable to Determine
All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input 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 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"/>
Did the investigation adhere to established protocols for a joint investigation?	<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:

Numerous collateral contacts were made during the investigation, all of which were appropriate.

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 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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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parent/caretaker actions adequate?				
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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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, court ordered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain as necessary:
 On 4/12/2016, OCDSS filed a petition in Family Court against the mother, the maternal grandfather and his paramour. Orders of protection against the mother were issued for the subject child and his surviving siblings. The maternal uncle and his wife were awarded 1017 custody of the 11-month-old male surviving sibling. Article 6 custody of the 8-year-old surviving male half-sibling was granted to his father.

Legal Activity Related to the Fatality

Was there legal activity as a result of the fatality investigation?

Family Court

Criminal Court

Order of Protection

Family Court Petition Type: FCA Article 10 - CPS

Date Filed:

Fact Finding Description:

Disposition Description:



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04/12/2016	There was not a fact finding	There was not a disposition
Respondent:	028762 Mother Female 27 Year(s)	
Comments:	A petition was filed in Orange County Family Court on 4/12/2016 which, listed the mother, the maternal grandfather, and the maternal grandfathers paramour as respondents on behalf of the subject child, the surviving 8-year-old male half-sibling and 11-month-old male sibling. Custody of the 11-month-old was granted to the maternal uncle and his wife, and custody of the 8-year-old was given to his father. The father of the 11-month-old and the subject child's father, was incarcerated at the time the court petition was filed. This case is on the calendar for a conference on 9/21/2016.	

Criminal Charge: Assault Degree: NA			
Date Charges Filed:	Against Whom?	Date of Disposition:	Disposition:
03/19/2016	The Mother	Unknown	Pending
Comments:	The mother was arrested and charged with vehicular assault only, pending the outcome of the toxicology report. The toxicology report is expected to be received sometime in June 2016. However, it is unclear as to when it will be finalized.		

Have any Orders of Protection been issued? Yes	
From: 04/12/2016	To: Unknown
Explain:	
An order of protection was issued against the mother on behalf of the 11-month-old male sibling and the 8-year-old male half sibling. The mother was not to have any unsupervised contact with the children. The order would remain in effect until minimally, the next court date, 9/21/2016.	

Services Provided to the Family in Response to the Fatality

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"/>				
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>				
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Alcohol/Substance abuse	<input checked="" 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 case remained open for ongoing services. The mother's mental health and drug use concerns will be discussed and aid will be offered through the service provider. The 11-month-old surviving sibling was referred to Early Intervention services. Special Assistance Trauma Unit (SATU) services were also offered to the family which includes bereavement services.

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 11-month-old surviving sibling and 8-year-old surviving half-sibling were removed from the care of the mother. Custody of the children was given to the maternal uncle and the 8-year-old's father respectively. A preventive services case was opened on 4/15/16 and a referral for early intervention services was made on behalf of the 11-month-old.

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

Explain:
 Mental Health and Substance Abuse services as well as bereavement services will be provided through the service case that remained open at the time of the investigation closure.

History Prior to the Fatality

Child Information

- Did the child have a history of alleged child abuse/maltreatment? Yes
- Was there an open CPS case with this child at the time of death? 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? No

CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
02/16/2016	9507 - Sibling, Male, 8 Years	9502 - Mother, Female, 27 Years	Inadequate Guardianship	Indicated	No
	9508 - Sibling, Male, 11 Months	9502 - Mother, Female, 27 Years	Inadequate Guardianship	Indicated	
	9508 - Sibling, Male, 11 Months	9503 - Grandparent, Male, 62 Years	Inadequate Guardianship	Indicated	
	9508 - Sibling, Male, 11 Months	9505 - Grandparent, Female, 56 Years	Inadequate Guardianship	Indicated	
	9507 - Sibling, Male, 8 Years	9506 - Unrelated Home Member, Male, 21 Years	Inadequate Guardianship	Unfounded	
	9508 - Sibling, Male, 11 Months	9502 - Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Indicated	
	9501 - Deceased Child, Male, 2 Years	9502 - Mother, Female, 27 Years	Inadequate Guardianship	Indicated	
	9507 - Sibling, Male, 8 Years	9503 - Grandparent, Male, 62 Years	Inadequate Guardianship	Indicated	
	9501 - Deceased Child, Male, 2 Years	9506 - Unrelated Home Member, Male, 21 Years	Inadequate Guardianship	Unfounded	
	9508 - Sibling, Male, 11 Months	9506 - Unrelated Home Member, Male, 21 Years	Inadequate Guardianship	Unfounded	
	9501 - Deceased Child, Male, 2 Years	9502 - Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Indicated	
	9501 - Deceased Child, Male, 2 Years	9503 - Grandparent, Male, 62 Years	Inadequate Guardianship	Indicated	
	9501 - Deceased Child, Male, 2 Years	9505 - Grandparent, Female, 56 Years	Inadequate Guardianship	Indicated	
	9507 - Sibling, Male, 8 Years	9505 - Grandparent, Female, 56 Years	Inadequate Guardianship	Indicated	
	9501 - Deceased Child, Male, 2 Years	9502 - Mother, Female, 27 Years	Internal Injuries	Indicated	
9507 - Sibling, Male, 8 Years	9502 - Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Indicated		

Report Summary:

This report alleged Inadequate Guardianship against the mother, maternal grandfather, the maternal grandfather's paramour and the mothers friend on behalf of the subject child, and his 8-year-old half-sibling and 11-month old male sibling. Allegations of Parents Drug and Alcohol Misuse on behalf of all of the children and Internal Injuries on behalf of



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the subject child were added against the mother. The report stated the mothers friend passed away from an overdose in the home while the children were present. Prior to this event, the report stated the friend was selling marijuana out of the home which the mother, grandfather and his paramour knew about.

Determination: Indicated **Date of Determination:** 04/15/2016

Basis for Determination:

The mother had a significant history of substance abuse concerns and the friend that died in the home was found to have been in possession of drugs and paraphernalia. The children were home at the time of the death and the grandfather and his paramour were aware the friend was staying in the home and aware of the mothers drug abuse history and did nothing to protect the children. During the investigation, the mother was involved in a serious motor vehicle collision while operating the vehicle without a license and the subject child in the car. The subject child sustained fatal injuries from the accident. The mother was found in possession of drugs at the scene.

OCFS Review Results:

This report was open at the time the fatality occurred. The investigation continued concurrently wit the fatality investigation. The surviving children were placed with their fathers. Their investigation was appropriate and CFS is in agreement with the determination.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
11/09/2015	9495 - Other Child - 8-year-old sibling's paternal cousin, Male, 10 Years	9493 - Other Adult - 8-year-old sibling's father, Male, 31 Years	Inadequate Guardianship	Unfounded	No

Report Summary:

This report alleged Inadequate Guardianship against the 8-year-old sibling's father on behalf of his 9-year-old nephew. This report alleged the 9-year-old nephew was residing in the home and his mothers boyfriend took him to school on a regular basis. This report alleged the mothers boyfriend hit him and pushed him to the ground.

Determination: Unfounded **Date of Determination:** 01/25/2016

Basis for Determination:

The mother's boyfriend got along well with the nephew and was not afraid of him. The incident appeared to be the two playing around at the bus stop and the family was proactive about finding out information and clarifying facts regarding the nephew.

OCFS Review Results:

OCFS review found that the investigation was appropriate and is in agreement with the determination.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
10/08/2015	9488 - Sibling, Female, 12 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unfounded	No
	9489 - Sibling, Female, 9 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	9488 - Sibling, Female, 12	9486 - Father's Partner,	Educational Neglect	Unfounded	



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Years	Female, 38 Years		
9490 - Sibling, Male, 6 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unfounded
9490 - Sibling, Male, 6 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Guardianship	Unfounded
9491 - Other Child - Paramour's Daughter, Female, 16 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Guardianship	Unfounded
9488 - Sibling, Female, 12 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Guardianship	Unfounded
9489 - Sibling, Female, 9 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Guardianship	Unfounded
9491 - Other Child - Paramour's Daughter, Female, 16 Years	9486 - Father's Partner, Female, 38 Years	Inadequate Food / Clothing / Shelter	Unfounded

Report Summary:

This SCR report was registered against the Paramour of father of the then 7-year-old male half sibling's. Allegations of Inadequate Guardianship, Inadequate Food, Clothing, Shelter and Educational Neglect were made on behalf of her 16, 12, 9 and 6-year-old children. This report alleged the paramour had not been in the home for several days leaving the children without any food.

Determination: Unfounded

Date of Determination: 11/24/2015

Basis for Determination:

The paramour had missed appointments with temporary assistance which caused her case to be closed. As a result, the family was homeless however the paramour took appropriate measures to ensure the children were safe with relatives and their basic needs were met. The paramour also took steps to reopen her case and secured temporary housing.

OCFS Review Results:

OCFS is in agreement with the investigation.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
10/06/2014	9482 - Sibling, Male, 6 Years	9483 - Mother, Female, 25 Years	Lack of Supervision	Unfounded	No
	9484 - Deceased Child, Male, 1 Years	9483 - Mother, Female, 25 Years	Lack of Supervision	Unfounded	
	9482 - Sibling, Male, 6 Years	9483 - Mother, Female, 25 Years	Inadequate Guardianship	Unfounded	
	9484 - Deceased Child, Male, 1 Years	9483 - Mother, Female, 25 Years	Inadequate Guardianship	Unfounded	

Report Summary:

This report alleged Inadequate Guardianship and Lack of Supervision against the mother on behalf of the then 1-year-old subject child and his then 6-year-old male half-sibling. This report stated that the mother went to her drug treatment program and left the children alone and unsupervised at the home. The report also noted extensive CPS history.

Determination: Unfounded

Date of Determination: 11/03/2014

Basis for Determination:

The basis for the determination was that the mother left the children in the care of their maternal grandfather while



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attending the drug treatment program. The investigation revealed that the maternal grandfather or his paramour, look after the children in the mothers absence.

OCFS Review Results:

OCFS is in agreement with the determination of this investigation.

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

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

A case was called in on 2/22/2010 listing allegations of Inadequate Guardianship on behalf of the then 2-year-old surviving male half-sibling against the mother and his father. This case was unfounded and closed on 4/8/2010. A case was called in on 6/11/2013 listing allegations of Inadequate Guardianship and Parent's Drug/Alcohol Misuse against the mother and maternal grandfather on behalf of the then 5-year-old half-sibling. The case was assigned to the FAR track and closed on 5/7/2014. On 10/6/2014, a case was called in with allegations of Inadequate Guardianship and Lack of Supervision against the mother on behalf of the then 6-year-old half-sibling and the subject child. The case was unfounded and closed on 11/10/2014.

Known CPS History Outside of NYS

There is no known history outside of New York State.

Services Open at the Time of the Fatality

Was the deceased child(ren) involved in an open Child Protective Services case at the time of the fatality? Yes

Date the Child Protective Services case was opened: 04/15/2016

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

	Yes	No	N/A	Unable to Determine
Was there information in the case record that indicated the existence of behaviors or conditions that placed the children in the case in danger or increased their risk of harm?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Family Assessment and Service Plan (FASP)

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



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Closing

	Yes	No	N/A	Unable to Determine
Was the decision to close the Services case appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Required Action(s)

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

Yes No

Preventive Services History

On 1/25/2012, a service case was called in noting the mother, who was living with the maternal grandfather, claimed she had no food for her son. The mother began cursing at the Emergency Food Stamps office as her case was closed for failure to recertify. There was concern about her parenting skills and mental health status. The case was closed on 3/1/2012 after the mother signed papers giving the then 4-year-old's paternal grandmother temporary guardianship of him following the mother's arrest for probation violation.

An SCR report was registered on 6/11/2013, which alleged Inadequate Guardianship and Lack of Supervision against the mother and maternal grandfather on behalf of the then 5-year-old half-sibling. The case was switched to the FAR track, where the mother responded very positively to the intervention and had allegedly made tremendous changes in her life. It was noted the mother demonstrated strong commitment to her recovery and was meeting all of the needs of her children. The case was closed on 5/7/2014.

A service case was opened on 4/13/2015 as the then 12-day-old sibling was born positive toxicology. The family declined services and the case was closed on 6/29/2015.

Required Action(s)

Are there Required Actions related to the compliance issues for provision of Foster Care Services?

Yes No

Foster Care Placement History

There is no record of foster care placement 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



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