



Report Identification Number: NY-18-122

Prepared by: New York City Regional Office

Issue Date: May 21, 2019

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		



Case Information

Report Type: Child Deceased
Age: 11 year(s)

Jurisdiction: Kings
Gender: Female

Date of Death: 11/18/2018
Initial Date OCFS Notified: 11/19/2018

Presenting Information

According to information provided to the SCR, on 11/18/18 the 911 operator was contacted and the 11-year-old child was transported to the hospital where CPR was performed. The child died at the hospital. The child had a pre-existing condition for an extended period of time. There were no concerns of neglect as the BM had knowledge of the situation and acted appropriately. There were no concerns about the SS.

Executive Summary

This 11-year-old medically fragile female child died on 11/18/18. In March 2019, NYCRO contacted the New York City Office of Chief Medical Examiner and verified the ME’s office did not conduct an autopsy. ACS staff observed the Certificate of Death and noted the manner of death was listed as natural.

At the time of the child’s death, the family had an open preventive services case effective 7/19/07. The case was initially opened to address hazardous housing conditions, parenting, and child development needs. The family received Family Preservation, homemaking, individual and family therapy, mental health, day care, child care and Early Intervention services. The case remained open for Court Ordered Services with ACS supervision, and PPRS with SCO Family of Services (SCO).

ACS found that 11/18/18, the MGM, accompanied by the child and 10-year-old SS, utilized public transportation and traveled from the MGM’s home to the BM’s home. When they arrived outside of the BM’s home, the MGM checked the child, observed the child was unresponsive and alerted the BM. At 8:53 AM, the BM contacted 911 for assistance. At 8:55 EMS responded and transported the child to the hospital. The hospital staff performed CPR; however, the child remained unresponsive and was pronounced dead in the hospital.

ACS contacted the hospital and requested the child’s medical records. The medical staff informed ACS that the child's death was probably due to pre-existing medical conditions.

SCO submitted the OCFS-7065 Agency Reporting Form for Serious Injuries, Accidents or Deaths of Children in Foster Care and Deaths of Children in Open Child Protective or Preventive Cases. The information regarding the child’s death was reported to OCFS under Chapter 485 of the Laws of 2006. ACS and SCO incorporated the information into the open preventive services case for further exploration.

ACS visited the home, interviewed the BM, engaged the four SS, and assessed the home conditions within 24 hours of notification of the child’s death. During a home visit, the BM provided records that verified the child was transported to the hospital, and at 9:46 AM on 11/18/18, the attending physician provided treatment to the child. ACS completed ongoing safety assessments and found there were no safety factors that placed the SS in immediate danger. The BM said fathers of the SS were not involved with the family. ACS and SCO involved the BM in implementing a service plan that included utilization of the MGM and MU for family support. The BM addressed the SS medical and academic needs. The family received homemaking, casework counseling and bereavement. services.

The preventive services case remained open at the time of issuance of this fatality report.

Findings Related to the CPS Investigation of the Fatality

**Safety Assessment:**

- Was sufficient information gathered to make the decision recorded on the:
 - Safety assessment due at the time of determination? N/A

Determination:

- Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation? N/A
- Was the determination made by the district to unfound or indicate appropriate? N/A

Explain:

There were no allegations of abuse/maltreatment regarding this case.

Was the decision to close the case appropriate? N/A

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 case remained open for preventive services at the time of issuance of this fatality report.

Required Actions Related to the Fatality

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

Issue:	Adequacy of Risk Assessment Profile (RAP)
Summary:	The RAP did not include information about the family's history of hazardous housing conditions.
Legal Reference:	18 NYCRR 432.2(d)
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.
Issue:	Timely/Adequate Case Recording/Progress Notes
Summary:	ACS did not enter progress notes contemporaneously. There were events that occurred on 11/19/18 that were not entered until 2/15/19.
Legal Reference:	18 NYCRR 428.5
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed



Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 11/18/2018

Time of Death: Unknown

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

Unknown

County where fatality incident occurred:

Bronx

Was 911 or local emergency number called?

Yes

Time of Call:

08:53 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

At time of incident supervisor was: Not impaired.

Total number of deaths at incident event:

Children ages 0-18: 1

Adults: 0

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	No Role	Female	11 Year(s)
Deceased Child's Household	Mother	No Role	Female	32 Year(s)
Deceased Child's Household	Sibling	No Role	Male	10 Year(s)
Deceased Child's Household	Sibling	No Role	Female	9 Year(s)
Deceased Child's Household	Sibling	No Role	Male	5 Year(s)
Deceased Child's Household	Sibling	No Role	Female	8 Year(s)

LDSS Response

Following the child's death, ACS reviewed information from a medical specialist and the family physician. The documentation showed the child had pre-existing medical conditions since 2013; she received hospitalized care but continued to have medical issues, including visual impairment.

ACS visited the home and observed and interviewed the BM, SS and MU on 11/19/18. During the visit, the BM said the child visited the MGM's home every two or three weeks as part of a family arrangement. The child and 10-year-old SS were in the MGM's home from 11/16/18 through approximately 8:15 AM on 11/18/18. They used public transportation for



persons with disabilities for visits to the MGM's home. Upon their return on 11/18/18, the child was in the vehicle outside of the BM's home when the MGM attempted to wake her and observed she was unresponsive. The MGM alerted the BM who contacted 911 for assistance. The 10-year-old SS provided an account of his activities and his explanation was consistent with the information that was previously documented in the ACS case record. The MU, who resided in the MGM's home, observed the child prior to the time she left the MGM's home on 11/18/18. Per the MU's account, the child was observably alert but seemed tired. The MU did not have concerns about the care the BM provided the child and SS.

ACS observed the home conditions and noted the family had adequate food and supplies. ACS observed the medication box the BM prepared for the child's visits to the MGM. The documentation did not reflect any concerns about the medication box. There were no observable signs of alcohol or drug misuse in the home.

ACS interviewed the child's medical specialist on 11/26/18. ACS learned the medical staff had recently prescribed a new medication for the child. The child received medical examinations on 10/25/18 and 11/8/18, respectively. The BM was compliant with the child's scheduled appointments.

On 11/26/18, ACS interviewed nursing staff, who provided in-home services to the child. ACS verified the child received visiting nurse services beginning June 2017. An in-home visit occurred on 11/16/18. The nursing staff monitored the child's health, checked prescribed medication and assisted the BM with organizing medication, diet and other health needs. The documentation showed the child had stable health and the BM was receptive to addressing possible areas of concern.

On 11/30/18 ACS obtained information pertaining to EMS response to the home. ACS learned the 911 call was made on 11/18/18 at 8:53 AM. EMS responded at 8:55, observed the child was unconscious and not breathing, attempted CPR and transported the child to the hospital.

Between November 2018 and April 2019, ACS and SCO maintained adequate contact with the family through visits to the home and school and telephone communication. ACS verified the family received financial assistance for the child's burial. During the home visits, ACS and SCO observed the SS and noted they did not have suspicious marks/bruises and seemed healthy. The BM provided adequate supervision of the children. However, there were household concerns including: clutter, pest infestation and rental issues. ACS addressed concerns about the SS's behavior. ACS contacted the assigned community based agency and learned that bereavement was incorporated into therapeutic services. In April 2019, SCO verified the 9 and 10-year-old SS continued to receive counseling through the community based agency. The SCO case record showed the 5 and 8-year-old SS received therapeutic services in school.

Official Manner and Cause of Death

Official Manner: Natural

Primary Cause of Death: Unknown

Person Declaring Official Manner and Cause of Death: Hospital physician

Multidisciplinary Investigation/Review

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

Comments: There is no approved Child Fatality Review Team in NYC.

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"/>
Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information:

There were events that occurred on 11/19/18 that were not entered until 2/15/19.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
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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 type="checkbox"/>	<input checked="" 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"/>
Explain: The family received PPRS.				

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: There was no removal regarding the SS.				

Legal Activity Related to the Fatality

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

Have any Orders of Protection been issued? No

Services Provided to the Family in Response to the Fatality

Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Economic support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Funeral arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Housing assistance	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Family or others as safety resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional information, if necessary:
The family received PPRS.

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 SS received therapeutic services and monitoring of mental health and medical needs.

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

Explain:

The BM received homemaking and case management.

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?	Yes
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)	Allegation Outcome	Compliance Issue(s)
03/15/2018	Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated	No
	Sibling, Female, 7 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated	
	Sibling, Female, 9 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated	



Sibling, Male, 10 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated
Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Lack of Medical Care	Unsubstantiated
Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 7 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 9 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 10 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 7 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 9 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Male, 10 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated

Report Summary:

The 3/15/18 SCR report alleged the BM was overwhelmed and unable to control the child and SS, ages: 7, 9, and 10 years. The BM did not properly supervise the child and SS, and fell asleep. The child and SS acted out sexually. The BM hit the 9-year-old SS and this SS was fearful of the BM. The child and SS were constantly hungry. These issues were ongoing. The role of the 5-year-old SS was unknown.

Report Determination: Unfounded

Date of Determination: 05/14/2018

Basis for Determination:

ACS unsubstantiated all the allegations of the 3/15/18 report on the basis of no credible evidence. ACS explained that during all visits, the Specialist observed the child, SS and home conditions, and found the BM provided the children's basic needs. ACS added that the BM ensured the child and SS attended school as required and received adequate supervision in the home.

OCFS Review Results:

ACS made unannounced visits to the home, conducted ongoing safety and risk assessments, obtained medical consultation and scheduled forensic interviews at the CAC. ACS found there were no observable signs of inappropriate material within the children's reach in the home, the family had an adequate supply of food and the child and SS did not have visible marks/bruises. During the visits, ACS observed the child and SS exhibited difficult and challenging behavior. ACS noted the BM addressed the behavior concerns. The family received homemaking, respite and PPRS to address identified needs. The documentation did not include the outcome of the CAC interviews.

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)
02/13/2018	Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Lack of Medical Care	Unsubstantiated	Yes
	Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	



Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Deceased Child, Female, 11 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated
Sibling, Female, 8 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 8 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 8 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated
Sibling, Female, 9 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Female, 9 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Female, 9 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated
Sibling, Male, 10 Years	Mother, Female, 31 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated
Sibling, Male, 10 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 10 Years	Mother, Female, 31 Years	Lack of Supervision	Unsubstantiated

Report Summary:

The 2/13/18 SCR report alleged the 11-year-old child had a pre-existing medical condition. The BM was required to maintain a daily document/log to monitor the child's condition. The BM did not maintain the log. The child's medical status was unknown. This placed the child at risk of having a seizure and fainting. The BM was not consistent with giving the child the prescribed medications and vitamin. The roles of the SS were unknown.

Report Determination: Unfounded**Date of Determination:** 05/08/2018**Basis for Determination:**

ACS added the allegations of IG of the three older SS, and LS and IF/C/S of the child and three older SS to the 2/13/18 report. ACS unsubstantiated all the allegations of the report on the basis of no credible evidence. ACS explained that the BM provided a minimum degree of care to the child and SS. The BM addressed the child and SS medical needs and made the required entries for the child in the log book. The BM and homemaker provided adequate supervision in the home.

OCFS Review Results:

ACS initiated the investigation within the required timeframe, made adequate safety and risk assessments and obtained relevant information from the medical, school, family resources and PPRS contacts. The findings showed the BM did not secure the log book. ACS assisted the BM with developing a safety plan and monitoring the household needs. The case record showed the BM became increasingly proactive with medication administration and maintaining the written records. The child's health was stable. The BM continued to require nursing and homemaking to sustain an adequate level of household functioning.

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

Issue:

Overall Completeness and Adequacy of Investigations

Summary:

An Investigation Progress Note dated 3/26/18 showed forensic interviews were requested and may have been scheduled for 4/2/18. The documentation did not include outcome of the interviews. The interviews were necessary to assess the



methods of discipline utilized in the home, adequacy of parental supervision, and the BM's capacity to manage the child and SS's behavior.

Legal Reference:

SSL 424.6 and 18 NYCRR 432.2(b)(3)

Action:

ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
08/14/2017	Deceased Child, Female, 10 Years	Mother, Female, 31 Years	Lacerations / Bruises / Welts	Substantiated	Yes
	Deceased Child, Female, 10 Years	Grandparent, Male, 48 Years	Lacerations / Bruises / Welts	Substantiated	
	Deceased Child, Female, 10 Years	Mother, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 4 Years	Mother, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 7 Years	Mother, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 8 Years	Mother, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 9 Years	Mother, Female, 31 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Female, 10 Years	Grandparent, Male, 48 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 4 Years	Grandparent, Male, 48 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 7 Years	Grandparent, Male, 48 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 8 Years	Grandparent, Male, 48 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 9 Years	Grandparent, Male, 48 Years	Inadequate Guardianship	Substantiated	

Report Summary:

The 8/14/17 SCR report alleged the child had suspicious bruising that was sustained while in the BM's care. The explanation the BM provided was not consistent with the location of the bruises. The child had bruising to both of her inner upper thighs, the right side of her buttocks, both of her shoulders, her upper back and her right side. The child sometimes hit herself. The four SS physically fought with one another in the home and the BM was unable to control their behavior to keep them safe. There were no reported injuries to the SS.

Report Determination: Indicated

Date of Determination: 10/11/2017

Basis for Determination:

ACS added the allegations of IG of the child and four SS, and L/B/W of the child by the MGF to the 8/14/17 report. ACS substantiated all the allegations of the report as the findings showed the BM and MGF hit the child and SS as a form of



discipline in the home. The child sustained bruising to her body and the BM was unable to provide a consistent explanation.

OCFS Review Results:

ACS obtained LE involvement and CAC assessment. ACS found the BM and MGF used their hands and other objects to hit the child and SS. The child said she sustained some bruises from fights with the SS. The ACS safety assessments showed the child and SS had significant developmental and/or medical needs and the BM was unable to protect them. ACS assisted the BM with development of a safety plan, and obtained an OP barring the adult caretakers from hitting the child and SS. The child and SS received therapeutic services through a community based organization. ACS did not provide a Notice of Determination to the BM and MGF who were listed as the subjects of the 8/14/17 report.

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

Issue:

Failure to Provide Notice of Indication

Summary:

ACS did not provide a Notice of Indication to the BM and MGF who were listed as the subjects of the 8/14/17 report.

Legal Reference:

18 NYCRR 432.2(f)(3)(xi)

Action:

ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
04/30/2017	Sibling, Male, 9 Years	Mother, Female, 31 Years	Inadequate Guardianship	Unsubstantiated	No

Report Summary:

The 4/30/17 SCR report alleged on 4/29/17, the 9-year-old male SS and a younger female SS, played on the bunk bed. The male SS fell off the bed and sustained multiple bruises all over his face, and a nose bleed. The BM did not seek prompt action as she delayed in obtaining medical service by waiting 12 hours before seeking services. The BM placed the male SS's health at risk.

Report Determination: Unfounded

Date of Determination: 06/12/2017

Basis for Determination:

ACS unsubstantiated the allegation of IG on the basis of no credible evidence. ACS explained that the SS was taken to the ER where he received treatment. ER staff determined the SS sustained injuries that were consistent with the explanation about his fall.

OCFS Review Results:

ACS findings showed the SC fell from his bed and BM took him to the hospital on 4/30/17. The SC received medical care for the fall and was discharged to the BM with no prescribed medications or follow up appointment. ACS completed ongoing safety and risk assessments and noted there were no safety factors that placed the child and SS in immediate danger. The Final Risk Rating was "Very High" and the family continued to need homemaking and PPRS. ACS did not appropriately adequacy of parental supervision of the children in the home.

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)
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07/21/2016	Deceased Child, Female, 9 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Substantiated	Yes
	Deceased Child, Female, 9 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 3 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Male, 3 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 6 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Female, 6 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 7 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Female, 7 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 8 Years	Mother, Female, 30 Years	Inadequate Food / Clothing / Shelter	Substantiated	
	Sibling, Male, 8 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	

Report Summary:

The 7/21/16 SCR report alleged the BM did not maintain a sanitary home environment for the child and four SS. The home was in deplorable condition with garbage, old food, and refuse cluttering the floors. There was bed bug infestation and mice in the home.

Report Determination: Indicated

Date of Determination: 09/25/2016

Basis for Determination:

ACS substantiated the allegations of IG and IF/C/S of the child and SS by the BM on the basis of credible evidence. ACS explained that the child and SS were removed and subsequently returned to the BM.

OCFS Review Results:

ACS visited the home and observed and interviewed the BM, child, SS and homemaker. ACS found there were piles of exposed bags, clothing, garbage and litter throughout the home. The children did not have clean clothing to wear. The child and SS had healed scratches reportedly sustained during fights among siblings. On 7/11/16, ACS conducted an emergency removal of the child and SS and transported them to the ACS Children's Center. The child received hospitalized care for her illness. The fathers had no contact with the child and SS and the BM said she did not know the fathers' whereabouts. ACS did not provide a Notice of Indication the BM who was the subject of the 7/21/16 report.

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

Issue:

Failure to Provide Notice of Indication

Summary:

ACS did not provide a Notice of Indication to the BM, who was an alleged subject of the 7/21/17 report.

Legal Reference:

18 NYCRR 432.2(f)(3)(xi)

Action:

ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.



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

The BM was an alleged subject in 15 SCR reports dated 2/3/06, 9/11/08, 3/25/09, 5/11/09, 7/8/09, 7/28/09, 10/18/09, 10/19/09, 7/20/12, 8/7/12, 6/13/13, 12/27/13, 9/8/14, and 6/5/15 (two reports).

The allegations of the 2/3/06 report were: LMC, IG, L/B/W and IF/C/S of a male half-sibling by the BF and BM. On 3/14/06, ACS substantiated all the allegations pertaining to the BF and unsubstantiated all the allegations concerning the BM. The report was indicated.

The allegations of the other reports were a combination of B/S, IG, IF/C/S, L/B/W, LS, M/FTTH, PD/AM, and XCP. The 5/11/09, 10/19/09, and 8/7/12 reports were consolidated with ongoing investigations, respectively.

The reports dated 3/25/09, 10/18/09, 7/20/12, 6/13/13, 12/27/13, 9/8/14, 6/5/15 were indicated. The reports dated 9/11/08, 7/8/09 and 7/28/09 were unfounded.

Known CPS History Outside of NYS

There was no known CPS history outside of NYS.

Services Open at the Time of the Fatality

Was the deceased child(ren) involved in an open preventive services case at the time of the fatality? Yes

Date the preventive services case was opened: 07/19/2007

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: 07/19/2007

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

	Yes	No	N/A	Unable to Determine
Did the service provider(s) comply with the timeliness and content requirements for progress notes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the services provided meet the service needs as outlined in the case record?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did all service providers comply with mandated reporter requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Casework Contacts

	Yes	No	N/A	Unable to Determine
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Child Fatality Report

Did the service provider comply with case work contacts, including face-to-face contact as required by regulations pertaining to the program choice?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Services Provided

	Yes	No	N/A	Unable to Determine
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were services provided to parents as necessary to achieve safety, permanency, and well-being?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If not, how many days was it overdue? 48				
Was there a current Risk Assessment Profile/Risk Assessment in the most recent FASP?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the FASP consistent with the case circumstances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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"/>

Provider

	Yes	No	N/A	Unable to Determine
Were Services provided by a provider other than the Local Department of Social Services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information, if necessary:
The family received services through New York Foundling and SCO Family of Services.

Required Action(s)

Are there Required Actions related to compliance issues for provisions of CPS or Preventive services ?
Yes No



Issue:	Timeliness of completion of FASP
Summary:	The Reassessment FASP document was due on 8/14/18 but New York Foundling preventive program did not complete the document until 10/1/18.
Legal Reference:	18 NYCRR428.3(f)
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the New York Foundling preventive program and inform NYCRO of the date of the meeting, who attended and what was discussed.
Issue:	Adequacy of Risk Assessment Profile (RAP)
Summary:	The RAP was inadequate as it did not include information about the SS who were previously in the care of alternative caregivers, and the family's history of unstable housing.
Legal Reference:	18 NYCRR 432.2(d)
Action:	ACS must submit a PIP within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

Preventive Services History

Between July 2007 and 11/19/18, the family received preventive services. According to the Family Services Progress Notes, the family received services because the BM was overwhelmed and the children had multiple medical, developmental and educational needs. The child and two older SS participated in individual counseling sessions. The BM completed mental health evaluation and it was determined she did not need individual counseling. The BM completed parenting classes. The BF assisted with supervision of the child and three older SS for brief intervals but was not compliant with the service plan. Subsequently, the BM said she did not have information about the BF and the father of the youngest SS. The documentation did not reflect whether ACS made diligent efforts to locate these fathers.

The BM and MGM received training to provide care of the child and were compliant with appointments and medication administration. The family physician examined the child on 11/8/18 and found there were no concerns regarding the care the BM provided. An assigned nurse and ACS staff observed the child in the home on 11/16/18 and determined the child was in stable health. On 11/19/18, ACS received notification of the child's death.

Foster Care Placement History

On 1/9/07, the child and oldest SS were placed in foster care under a 358-a Court Action voluntary placement petition that was filed in Kings County Family Court. The child and SS resided in a certified foster home with JCCA supervision. In March 2009, the BM gave birth to a female SS who received foster care services under an Article Ten Neglect petition that was filed on 5/19/09. The child and oldest male SS were discharged from foster care on 5/19/09 and the female SS was discharged on 7/7/09.

The child returned to foster care placement under an Article Ten Neglect petition on 9/3/13. She remained in foster care until 6/24/14 when she was discharged to the BM.

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:
08/23/2017	There was not a fact finding	Order of Supervision
Respondent:	049443 Mother Female 32 Year(s)	
Comments:	ACS filed an Article Ten Neglect petition in Kings County Family court on behalf of the child and four SS. The judge released the child and SS to the BM with ACS supervision.	

Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
Unknown	There was not a fact finding	There was not a disposition
Respondent:	049443 Mother Female 32 Year(s)	
Comments:	On 7/25/16, ACS filed an Article Ten Neglect petition in KCFC on behalf of the child and SS naming the BM as the respondent. The judge returned the child and SS to the BM on 8/4/16.	

Have any Orders of Protection been issued? Yes	
From: 08/23/2017	To: 09/14/2017
Explain: During the investigation of the 8/14/17 report, ACS filed an Article Ten Neglect petition on behalf of the child and SS. The judge issued a temporary OP, stipulating the BM and other caretakers must not hit the child and SS.	

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