



Report Identification Number: AL-15-004

Prepared by: Albany Regional Office

Issue Date: 8/5/2015

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	MN-Medical Neglect	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



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

Jurisdiction: Rensselaer
Gender: Female

Date of Death: 02/26/2015
Initial Date OCFS Notified: 02/26/2015

Presenting Information

On 2/26/15, an SCR report was received alleging that on the same day, at 11 a.m. a 2 year-old female stopped breathing while in the care of the parent substitute (PS). The 2 year-old did not have any pre-existing medical condition causing the death to be suspicious. The report added that the 2 year-old passed away at 2:08 p.m. The mother was at work at the time of the incident making her role unknown. The allegations of inadequate guardianship and DOA/Fatality are against the PS.

Executive Summary

An SCR report was received on 2/26/15, it was substantiated on June 8, 2015 for DOA/Fatality and IG against the Parent Substitute (PS).

The mother, PS and the deceased resided in the home. The PS has 2 children (2 & 9) who do not reside or visit in the home. There are no other children residing in the home. The father resides in NYC and does not have any other children.

On 2/26/15, an SCR report was received regarding a 2 year old who was discovered not breathing at 11 a.m. The mother was at work at the time and the PS was supervising the deceased. The 2 year-old did not have any pre-existing medical issues. A 911 call was not received until 1 p.m.

An autopsy was performed and the preliminary findings revealed that the child had 3 broken ribs and a ruptured spleen/liver. There were no known medical issues that had been identified previously. The cause of death has not yet been determined as the autopsy report has not been issued final.

The criminal investigation is pending the final autopsy 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?

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?
- Was the determination made by the district to unfound or indicate appropriate?

Yes, sufficient information was gathered to determine all allegations.

Yes



Explain:

N/A

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:

N/A

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: 02/26/2015

Time of Death: 02:08 PM

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

County where fatality incident occurred: RENSSELAER

Was 911 or local emergency number called? Yes

Time of Call: 01:00 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:

- 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

2

At time of incident supervisor was: Not impaired.

Total number of deaths at incident event:

Children ages 0-18: 1



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Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Female	2 Year(s)
Deceased Child's Household	Mother	No Role	Female	23 Year(s)
Deceased Child's Household	Mother's Partner	Alleged Perpetrator	Male	29 Year(s)
Other Household 1	Father	No Role	Male	23 Year(s)
Other Household 2	Other Child	No Role	Female	2 Year(s)
Other Household 3	Other Child	No Role	Female	9 Year(s)

LDSS Response

RCDSSCPS immediately contacted law enforcement officials and began gathering information pertaining to the incident. ACS was assigned secondary as the biological father resided in NYC.

RCDSS CPS learned that there were no other children residing in the home but that the PS had 2 female children with two different mother's and were not local. One child was (2) residing with her mother in NYC and the other (9) was residing with her mother in Puerto Rico. The PS had not seen this child in several years so the whereabouts were unknown.

RCDSS interviewed the mother and the PS in the home. It was explained that the subject child (SC) was put to bed around 9:30 p.m. the night before. The SC always slept until 11 a.m. but that morning was different. The SC woke up at 8 a.m. for a diaper change. The mother left for work at 8:30 a.m. leaving the PS the sole caretaker for the SC. At 8:30 a.m. the PS placed the deceased back to bed and PS went back to sleep. At 11:00 a.m. the PS went in the bedroom to wake up the SC but discovered her under the covers not breathing. The PS moved the SC to the couch in the living room where CPR was performed. The PS did not have a phone, so he left the home to get assistance. According to the PS, he tried to get the neighbors in the building and next door but was unsuccessful. The PS returned to the home to re-check the SC. The PS then ran to a restaurant a few streets away where he called 911 at 1 p.m. It is unknown as to the reason for the call taking 2 hours to be made. The first responders arrived and brought the SC to the hospital where she was pronounced dead at 2:08 p.m. The SC had been seen by her pediatrician on 9/5/14 for a physical. The SC was healthy, up to date with immunizations and no medical concerns were noted. An autopsy was performed and the preliminary results revealed that the child had internal trauma (3 broken ribs) and a lacerated liver. The medical examiner office explained that that these injuries were new.

Although, contact with many collaterals were made including neighbors, family, law enforcement and first responders, RCDSS did not contact the 17 year-old niece who was previously involved in an alleged domestic violence incident with the PS and father. The first responders stated that the SC was in the front room on the futon/couch and rigormortis had not yet set in.

All parties in NYC were assessed and interviewed by ACS. ACS learned that the PS was the father's cousin and that the mother had an OOP against the father due to domestic violence issues. The father stated that he had only seen the SC 5 times since they moved and that he had concerns regarding the PS caring for his child. The father filed a petition against the PS in Rensselaer County Family Court in December 2014 which resulted in a OOP with the SC. It stated that PS must refrain from assault, harassment, reckless endangerment strangulation, criminal obstruction of breathing, disorderly conduct, criminal mischief, sex abuse/misconduct, intimidation threats etc. against the SC. The order also stated the PS not have any verbal or physical altercations in the presence of the SC, and no corporal punishment. ACS stated that the PS had not seen his 2 year-old daughter since he moved in June 2014. The PS ex-paramour was in the process of filing for full



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custody and agreed to not have the PS visit with his child while the investigation continued.

RCDSS offered grief counseling services and mental health services but the mother declined the services. The CPS case was indicated against the PS for IG and DOA/Fatality as he was the sole caretaker who last saw the SC, took two hours to call 911 and that the injuries were new. The case was closed on 6/8/15.

Currently, law enforcement has not filed any charges but the case remains open. The final autopsy report has not been issued.

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)? Yes

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

Comments: The team met and discussed the case.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
017688 - Deceased Child, Female, 2 Year(s)	017687 - Mother's Partner, Male, 29 Year(s)	DOA / Fatality	Substantiated
017688 - Deceased Child, Female, 2 Year(s)	017687 - Mother's Partner, Male, 29 Year(s)	Inadequate Guardianship	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"/>



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All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Members	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Legal Activity Related to the Fatality

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

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	Needed but not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



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Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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? No
Was the child ever placed outside of the home prior to the death? No
Were there any siblings ever placed outside of the home prior to this child's death? No
Was the child acutely ill during the two weeks before death? No

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)
02/01/2014	3856 - Other - niece , Female, 17 Years	3871 - Father, Male, 22 Years	Choking / Twisting / Shaking	Unfounded	No
	3856 - Other - niece , Female, 17 Years	3871 - Father, Male, 22 Years	Inadequate Guardianship	Unfounded	
	3858 - Deceased Child, Female, 2 Years	3871 - Father, Male, 22 Years	Inadequate Guardianship	Unfounded	

Report Summary:
 On 2/1/14, ACS received an SCR report alleged that the biological father of the deceased threw the then 17 year old female daughter (later learned as a niece) on the bed and choked her. It alleged that the incident occurred in the presence of the then 1 year old daughter (the deceased). The report alleged choking twisting, shaking, and IG against the father



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pertaining to the 17 year old and IG pertaining to the deceased.

Determination: Unfounded

Date of Determination: 03/14/2014

Basis for Determination:

It was determined that the 17 year-old was a niece who was in the home visiting for the day and the father was not a caretaker of the 17 year-old. The deceased was in the other room sleeping and did not witness the incident. The mother of the deceased was also not residing in the home at the time of the incident. A witness was present and denied that anyone was choked and that the 17 year-old was the aggressor. Law enforcement was involved which led to an arrest of the deceased's father. There was no previous history on the father. The father was ACOD in criminal court for one year. ACS unfounded the report on 3/3/14.

OCFS Review Results:

OCFS agreed 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)
12/22/2014	3852 - Deceased Child on Report, Female, 2 Years	3850 - Father, Male, 22 Years	DOA / Fatality	Indicated	Yes
	3852 - Deceased Child on Report, Female, 2 Years	3850 - Father, Male, 22 Years	Inadequate Guardianship	Indicated	

Report Summary:

A court order investigation (COI) was ordered on the parents who reside in separate homes. The deceased resided with her mother in Rensselaer County. ACS was assigned secondary as the father resided in NYC. The report out date was scheduled for 1/7/15. The allegation listed was IG.

Determination: Unfounded

Date of Determination: 01/12/2015

Basis for Determination:

The report was unfounded as both homes were observed and free of safety concerns. All interviews and collateral contacts did not reveal that the child was unsafe. The maternal grandmother agreed to supervise the visits with the father. The report was submitted on 1/7/15 to court and the case was closed on 1/12/15.

OCFS Review Results:

Although information was obtained about parents, the PS was not added to the case as he was a member of the mother's household. RCDSS did not complete a full investigation.

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

Issue:

Overall Completeness and Adequacy of Investigations

Summary:

RCDSS did not complete a full investigation during the COI. They conducted an investigation solely on the parents on the order. RCDSS did not add the parent substitute on the case who resided in the home with the mother.

Legal Reference:

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

Action:

RCDSS will complete a full investigation on all members of the household when a COI is ordered.

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



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There is no known history for more than three years prior to the fatality.

Known CPS History Outside of NYS

There is no known history outside NYS.

Services Open at the Time of the Fatality

Required Action(s)

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

Yes No

Preventive Services History

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

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?

Family Court Criminal Court Order of Protection

Have any Orders of Protection been issued? Yes

From: 01/09/2015

To: 04/30/2015

From: 12/08/2014

To: 06/15/2015

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