



Report Identification Number: NY-20-089

Prepared by: New York City Regional Office

Issue Date: Feb 19, 2021

This report, prepared pursuant to section 20(5) of the Social Services Law (SSL), concerns:

- A report made to the New York Statewide Central Register of Child Abuse and Maltreatment (SCR) involving the death of a child.
- The death of a child for whom child protective services has an open case.
- The death of a child whose care and custody or custody and guardianship has been transferred to an authorized agency.
- The death of a child for whom the local department of social services has an open preventive service case.

The Office of Children and Family Services (OCFS) is mandated by section 20 of the SSL to investigate or cause for the investigation of the cause and circumstances surrounding the death, review such investigation, and prepare and issue a fatality report in regard to the categories of deaths noted above involving a child, except where a local or regional fatality review team issues a report, as authorized by law.

Such report must include: the cause of death; the identification of child protective or other services provided or actions taken regard to such child and child’s family; any extraordinary or pertinent information concerning the circumstances of the child’s death; whether the child or the child’s family received assistance, care or services from the social services district prior to the child’s death; any action or further investigation undertaken by OCFS or the social services district since the child’s death; and as appropriate, recommendations for local or state administrative or policy changes.

This report contains no information that would identify the deceased child, his or her siblings, the parent, parents, or other persons legally responsible for the child, and any members of the deceased child’s household.

By statute, this report will be forwarded to the social services district, chief county executive officer, chairperson of the local legislative body of the county where the child died and the social services district that had legal custody of the child, if different. Notice of the issuance of this report will be sent to the Speaker of the Assembly and the Temporary President of the Senate of the State of New York.

This report may **only** be disclosed to the public by OCFS pursuant to section 20(5) of the SSL. **It may be released by OCFS only after OCFS has determined that such disclosure is not contrary to the best interests of the deceased child’s siblings or other children in the household.**

OCFS’ review included an examination of actions taken by individual caseworkers and supervisors within the social services district and agencies under contract with the social services district. The observations and recommendations contained in this report reflect OCFS’ assessment and the performance of these agencies.



Abbreviations

Relationships		
BM-Biological Mother	SM-Subject Mother	SC-Subject Child
BF-Biological Father	SF-Subject Father	OC-Other Child
MGM-Maternal Grand Mother	MGF-Maternal Grand Father	FF-Foster Father
PGM-Paternal Grand Mother	PGF-Paternal Grand Father	DCP-Day Care Provider
MGGM-Maternal Great Grand Mother	MGGF-Maternal Great Grand Father	PGGF-Paternal Great Grand Father
PGGM-Paternal Great Grand Mother	MA/MU-Maternal Aunt/Maternal Uncle	PA/PU-Paternal Aunt/Paternal Uncle
FM-Foster Mother	SS-Surviving Sibling	PS-Parent Sub
CH/CHN-Child/Children	OA-Other Adult	
Contacts		
LE-Law Enforcement	CW-Case Worker	CP-Case Planner
Dr.-Doctor	ME-Medical Examiner	EMS-Emergency Medical Services
DC-Day Care	FD-Fire Department	BM-Biological Mother
CPS-Child Protective Services		
Allegations		
FX-Fractures	II-Internal Injuries	L/B/W-Lacerations/Bruises/Welts
S/D/S-Swelling/Dislocation/Sprains	C/T/S-Choking/Twisting/Shaking	B/S-Burns/Scalding
P/Nx-Poisoning/ Noxious Substance	XCP-Excessive Corporal Punishment	PD/AM-Parent's Drug Alcohol Misuse
CD/A-Child's Drug/Alcohol Use	LMC-Lack of Medical Care	EdN-Educational Neglect
EN-Emotional Neglect	SA-Sexual Abuse	M/FTTH-Malnutrition/Failure-to-thrive
IF/C/S-Inadequate Food/ Clothing/ Shelter	IG-Inadequate Guardianship	LS-Lack of Supervision
Ab-Abandonment	OTH/COI-Other	
Miscellaneous		
IND-Indicated	UNF-Unfounded	SO-Sexual Offender
Sub-Substantiated	Unsub-Unsubstantiated	DV-Domestic Violence
LDSS-Local Department of Social Service	ACS-Administration for Children's Services	NYPD-New York City Police Department
PPRS-Purchased Preventive Rehabilitative Services	TANF-Temporary Assistance to Needy Families	FC-Foster Care
MH-Mental Health	ER-Emergency Room	COS-Court Ordered Services
OP-Order of Protection	RAP-Risk Assessment Profile	FASP-Family Assessment Plan
FAR-Family Assessment Response	Hx-History	Tx-Treatment
CAC-Child Advocacy Center	PIP-Program Improvement Plan	yo- year(s) old
CPR-Cardiopulmonary Resuscitation	ASTO-Allowing Sex Abuse to Occur	



Case Information

Report Type: Child Deceased
Age: 7 year(s)

Jurisdiction: Kings
Gender: Male

Date of Death: 09/07/2020
Initial Date OCFS Notified: 09/18/2020

Presenting Information

According to the OCFS-7065, the child became ill in the home on 9/7/20, the 911 operator was contacted, EMS responded to the home and the responders transported the child to the hospital where he was pronounced dead.

Executive Summary

The 7-year-old male child died on 9/7/20. The ACS progress notes showed the child's death was due to natural causes.

At the time of the child's death, the family had an open preventive services case beginning on 12/24/19. The preventive services were initiated as a protective intervention, for safety planning, continuing trauma focus family engagement and behavioral change, and monitoring the SS father's access to the children.

The Family Services Progress Notes showed on 9/7/20 at approximately 2:30 AM, the BM was awakened by the older SS who asked her to visit the room he shared with the child. The BM went to the child's room and found him unconscious, and there was black fluid in his mouth and nose. The BM called 911, followed instructions and performed cardiopulmonary resuscitation until EMS arrived at the home. The child was slightly breathing at the time EMS transported him to the hospital. The BM went with the child in the ambulance to the hospital. Upon arrival at the hospital, the medical professionals provided treatment until the child was pronounced dead. The medical personnel informed ACS that the child was diabetic, his medical condition was not previously diagnosed, and he died as a result of medical complication. The medical personnel explained that the BM was not aware of the child's medical condition. The attending physician informed ACS that there was no evidence of abuse/maltreatment of the child.

The child was cremated on 9/12/20. The BM informed ACS of the child's death during a home visit that occurred on 9/16/20.

ACS 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 Services Cases. The information regarding the child's death was reported to OCFS under Chapter 485 of the Laws of 2006.

The child had two SS who resided in the home with the BM. The Family Services Progress Notes showed the older SS was significantly affected because he found the child unconscious. The BM informed ACS that the older SS remained in the room while the child received cardiopulmonary resuscitation. ACS offered counseling and discussed support services for the family. The BM said the family members provided financial assistance for the burial. The BM accepted bereavement for herself but it was unclear whether she enrolled in the services. She declined services for the older SS as he received counseling in school. ACS found the SS did not have suspicious marks/bruise and the home conditions were satisfactory. ACS obtained the medical records for the child and SS and monitored the family's medical needs.

The Family Services Progress Notes did not reflect the child's BF supervised the children, and he was not identified as a Secondary Caretaker. The documentation showed the father of the younger SS resided at a different location. He informed ACS that he relocated out of New York State in September of 2020. He did not visit the SS although he had legal supervised visitation.

ACS obtained information from the ME's office. The documentation showed the child died due to natural causes and the



final autopsy was pending toxicology results.

The case remained open for Court Ordered Services at the time this fatality report was written.

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

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 this fatality report was written.

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: 09/07/2020

Time of Death: Unknown

Time of fatal incident, if different than time of death: 02:30 AM

County where fatality incident occurred: Kings

Was 911 or local emergency number called? Yes

Time of Call: Unknown

Did EMS respond to the scene? Yes

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

Child's activity at time of incident:

- Sleeping Working Driving / Vehicle occupant



Playing
 Other

Eating

Unknown

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

At time of incident supervisor was:

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

Total number of deaths at incident event:

Children ages 0-18: 1

Adults: 0

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	No Role	Male	7 Year(s)
Deceased Child's Household	Mother	No Role	Female	30 Year(s)
Deceased Child's Household	Sibling	No Role	Male	9 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Year(s)
Other Household 1	Other Adult - Parent Substitute	No Role	Male	31 Year(s)

LDSS Response

ACS visited the hospital and interviewed the medical personnel on 9/16/20. During the interview ACS verified that on 9/7/20, the BM and child arrived at the hospital with EMS. Upon arrival, the BM informed the hospital that the older SS found the child on the floor at about 2:30 AM, and the child had dark colored substance coming from his mouth, nose and ears. According to the medical personnel's account, EMS administered CPR to the child in the home but then intubated him so that he was able to breathe. The medical personnel informed ACS that the child's condition was stabilized in the Emergency Room, and he was transferred to the pediatric intensive care unit. At approximately 9:00 AM, the child's heart rate and blood pressure decreased as he was not getting enough oxygen to the brain. The child received medical treatment in the hospital until he was pronounced dead. The medical personnel explained that the child had a missed diabetic diagnosis, the death was due to complications of the illness, and the BM was not aware of the diagnosis.

On 9/17/20, ACS interviewed the family physician, who said the child's autopsy was in progress and further information would be provided pending the results of the ME investigation. The physician provided information about the SS. The documentation showed the physician last examined the SS on 5/20/19. The older SS's height and weight was normal but he had intermittent symptoms of illness. There was no medication prescribed for this SS as his symptoms were mild. The younger SS was prescribed medication for a medical condition and instructions were given to the BM for follow up evaluation in three months. The BM was asked to bring the two SS for follow up appointment in three months but she did not adhere to the physician's directive. The Family Services Progress Notes showed that ACS and the BM discussed the follow up appointments for the SS.

On 9/23/20, ACS interviewed the father of the SS by telephone. This father asked ACS to close his case. ACS offered the father services through virtual conference as he said he no longer resided in New York State. ACS noted the father



abruptly ended the telephone contact.

On 9/23/20, the ME's office contacted ACS and stated that the final autopsy was pending the results of toxicology. According to the ME's office, the preliminary findings showed the child died due to natural causes.

Between September of 2020 and January of 2021, ACS visited the family in the home, established contact through video and telephone conference, and obtained consultations and information from medical, school and community-based agencies. The Family Progress notes reflected the SS seemed healthy and did not have observable marks/bruises. ACS made ongoing safety assessment and risk assessments and safety planned with the BM, as necessary. During a virtual contact that occurred on 1/12/21, the BM informed ACS that she filed a complaint at the police precinct after the father of the SS threatened to harm her and to take the younger SS from the BM's care. The documentation reflected the father no longer resided in New York State.

The preventive services case remained open at the time this fatality report was written.

Official Manner and Cause of Death

Official Manner: Natural

Primary Cause of Death: From a medical cause

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review

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

Comments: There is no OCFS 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First Responders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information:

There was no LE investigation pertaining to the child's death.

Fatality Safety Assessment Activities



Child Fatality Report

	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 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"/>

Explain:

The family was already receiving services.

Placement Activities in Response to the Fatality Investigation

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



Explain as necessary:

There was no removal regarding the surviving children. The case remained open for Court Ordered Services.

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"/>	<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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>

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 case management.

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



fatality? Yes

Explain:

The BM received case management. The father of the SS said he no longer needed services.

History Prior to the Fatality

Child Information

Did the child have a history of alleged child abuse/maltreatment? Yes
Was the child ever placed outside of the home prior to the death? No
Were there any siblings ever placed outside of the home prior to this child's death? 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)	Allegation Outcome	Compliance Issue(s)
10/30/2019	Deceased Child, Male, 6 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	Yes
	Sibling, Male, 8 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 3 Years	Other Adult - Father of SS, Male, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 3 Years	Other Adult - Father of SS, Male, 30 Years	Parents Drug / Alcohol Misuse	Substantiated	

Report Summary:

The report alleged on 10/30/19, the father of the SS was intoxicated while acting as the sole caregiver for SS. He was belligerent and physically aggressive toward others, to the point that he had to be subdued. The SS was not harmed as a result. Further details were unknown.

Report Determination: Indicated

Date of Determination: 12/27/2019

Basis for Determination:

ACS substantiated the allegations of IG of the child and older SS by the BM and IG and PD/AM of the younger SS by the father. ACS explained that the BM allowed the father to hit the children without seeking intervention and the SS was in a public office with the father, who was intoxicated.

ACS did not appropriately apply the standards of maltreatment to the case circumstances. In the Investigation Conclusion Narrative, ACS provided explanations to support substantiation of the allegation of IG of the younger sibling by the BM and IG of the child and older sibling by the father. However, ACS did not incorporate such findings in the report determination.

OCFS Review Results:

ACS visited the home on 10/31/19, and the BM opened her apartment door, showed ACS the children at the entrance, and then closed the door. ACS noted the children did not have marks/bruises. ACS obtained a legal consultation and observed and interviewed the child and older SS in school.



The ACS findings showed the child and SS had significant school lateness, they witnessed domestic violence in the home, the father misused alcohol and exhibited physical aggression during school visits, and the BM and father used corporal punishment to discipline their children. On 12/9/19, ACS visited the home but the BF threatened to harm ACS. The RAP did not reflect the domestic violence circumstances.

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

Issue:
Appropriate Application of Legal Standards (Abuse/Maltreatment)

Summary:
ACS did not appropriately apply the standards of maltreatment to the case circumstances. In the Investigation Conclusion Narrative, ACS provided explanations to support substantiation of the allegation of IG of the younger sibling by the BM and IG of the child and older sibling by the father. However, ACS did not incorporate such findings in the report determination.

Legal Reference:
SSL 412(1) and 412(2)

Action:
ACS must submit a corrective action plan 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:
Adequacy of Risk Assessment Profile (RAP)

Summary:
ACS completed a Risk Assessment Profile and assigned a Final Risk Rating of "Moderate," which did not reflect the father was a perpetrator of domestic violence.

Legal Reference:
18 NYCRR 432.2(d)

Action:
ACS must submit a corrective action plan 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

Between 2014 and 2017, the SCR registered four reports that involved the family. The reports were dated 9/29/14, 9/8/16, 4/5/17 and 5/17/17.

The allegations of the 9/29/14 report were PD/AM of the child and older SS by the BM and IG by the parent substitute. On 11/28/14, ACS substantiated the allegation of PD/AM as the BM said she misused marijuana in the presence of the children. ACS unsubstantiated the allegation of IG on the basis of no credible evidence.

The allegation of the 9/8/16 report was IG of the child and older SS by the BM. On 11/7/16, ACS substantiated the allegation. The findings showed the BM used corporal punishment to manage the children's behavior.

ACS merged the 4/5/17 and 5/17/17 reports and consolidated the investigation. On 6/6/17, ACS unsubstantiated the allegations of EdN and LS on the basis of no credible evidence.

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: 12/24/2019

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: 12/24/2019

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 type="checkbox"/>	<input checked="" 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
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"/>

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
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Child Fatality Report

Was the most recent FASP approved on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there a current Risk Assessment Profile/Risk Assessment in the most recent FASP?	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information, if necessary:
The family received Court Ordered Supervision with ACS.

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:	ACS completed the Initial FASP on 2/4/20 although the due date was 1/3/20.
Legal Reference:	18 NYCRR428.3(f)
Action:	ACS must submit a corrective action plan 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

On 11/24/14, ACS opened a preventive services case for the family after the 9/24/14 investigation showed the BM misused marijuana and there were concerns about domestic violence in the home. ACS provided case management and referral for drug treatment. ACS closed the case on 4/29/15 as the BM declined services.

On 11/7/16, ACS opened a preventive services case for the family to address the BM's use of corporal punishment to manage her children's behavior. The family received assistance for accessing day care and Early Intervention and the BM received support from family resources. ACS closed the case on 12/27/16.

On 12/24/19, ACS opened a preventive services case for the family as the 10/30/19 investigation reflected the BM and father of the SS hit the children, there were domestic violence concerns, and the father misused alcohol. The BM did not



permit ACS to enter her home and as a result, ACS obtained Family Court intervention on 1/2/20. The judge released the child and SS to the BM, provided ACS with an entry order to assess the home environment, and placed an order of protection on behalf of the BM and SS against the father. ACS maintained contact with the family through in-home visits and video conferences. On 9/16/20, during a home visit, the BM informed ACS that the child died on 9/7/20.

ACS did not complete the Initial FASP within the required timeframe.

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:
01/02/2020	There was not a fact finding	Petition Dismissed
Respondent:	056220 Other Adult Male 31 Year(s)	
Comments:	On 1/2/20, ACS filed an Article Ten Neglect petition in Kings County Family Court on behalf of the BM, child and two SS naming the father of the younger SS as the respondent.	

Have any Orders of Protection been issued? Yes

From: Unknown

To: Unknown

Explain:

The judge issued an order of protection on behalf of the BM, child and SS against the father of the younger 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