



Report Identification Number: SY-18-011

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

Issue Date: Jul 20, 2018

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: 5 year(s)

Jurisdiction: Oswego
Gender: Male

Date of Death: 03/06/2018
Initial Date OCFS Notified: 03/08/2018

Presenting Information

On March 6, 2018, a five-year-old male child died. The child was previously diagnosed with cystic fibrosis. The week prior, he developed a cold which turned into the flu. An ambulance was called to the home on Sunday, March 4, 2018 after he went into cardiac arrest. He was resuscitated and placed on life support. It was determined that the flu had caused a heart attack. It was determined he had no brain activity. After a consultation with the doctors, the parents agreed to stop resuscitations and allow him to pass should his heart stop again.

Executive Summary

Oswego County Department of Social Services (OCDSS) received a report from the SCR on 1/16/18 with concerns the mother and father were not following through with medical recommendations for their 5-year-old male child (SC) who suffered from a medical condition. This medical condition was directly related to the child's death.

This fatality report concerns the death of SC which occurred on 3/6/18. OCDSS received notification of the child's death on 3/7/18 and notified the Syracuse Regional Office that same day. OCDSS submitted the required 7065-Agency Reporting Form on 3/8/18 which noted the SC died during an open CPS case.

On 3/4/18, SC was home with his mother and father when he became unconscious. The father called 911 and began chest compressions until LE, firefighters, and EMS arrived and took over. The child was then transported to the hospital and was in cardiac arrest. Medical staff determined the child had no brain activity. The parents agreed to pull the child off the ventilator and he later died. The child had recently suffered from a cold for which he was taking prescribed medication. The illness turned into the flu which was determined to have caused the child to suffer a heart attack. Medical professionals thought it likely the child was in respiratory failure for a few days before he decompensated and became unresponsive.

OCDSS spoke with the child's doctor who said he could not say the parents were culpable in the child's death, as signs of distress with this medical condition are very difficult to detect.

OCDSS gathered information about the child's death from the mother, father, LE, the child's doctor, and hospital staff. CW obtained documentation from collaterals such as the child's doctor, hospital, and LE.

OCDSS gathered sufficient information to determine there was no reasonable cause to suspect the child's death was a result of abuse or maltreatment.

Several home visits were made and collaterals were interviewed. Grief counseling was offered and declined as the family had already engaged in counseling on their own. The initial case was indicated on 6/28/18 and opened for CPS services. After SC died, it was discovered the parents were not following medical recommendations regarding the 6-year-old male SS who also suffered from a medical condition. A removal petition was filed and denied. The Judge ordered a visiting nurse to the home and the child's condition improved. The case remained open for CPS services.

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:

OCDSS made notable efforts to obtain all pertinent information regarding this child's death.

Required Actions Related to the Fatality

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

Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 03/06/2018

Time of Death: 07:20 PM

Date of fatal incident, if different than date of death:

03/04/2018

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

Unknown

County where fatality incident occurred:

Onondaga

Was 911 or local emergency number called?

Yes

Time of Call:

05:20 PM

Did EMS 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: Child was lying in bed

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

Adults: 0

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	No Role	Male	5 Year(s)
Deceased Child's Household	Father	No Role	Male	45 Year(s)
Deceased Child's Household	Mother	No Role	Female	28 Year(s)
Deceased Child's Household	Sibling	No Role	Female	7 Year(s)
Deceased Child's Household	Sibling	No Role	Male	6 Year(s)

LDSS Response

On 3/7/18, OCDSS received notification that a child in an open CPS investigation died on 3/6/18. OCDSS completed the required form and sent it to the Syracuse Regional Office in a timely manner. OCDSS contacted medical staff at the hospital where the child died. The family declined an autopsy as the child died from medical complications; therefore, the ME was not notified. The two surviving siblings were assessed to be safe on 3/7/18. CW spoke with the mother on this day and offered support and assistance and mother stated the family had no needs at that time.

CW obtained records from LE which showed they responded to the home on 3/4/18 in response to a 911 call at 5:20PM. LE told CW the father said he and the child were on the bed and he turned to ask the child a question and saw he was unconscious. Father then called 911. LE, firefighters, and EMS arrived and performed life saving measures and transported the child to the hospital. The mother and father gave the same account when interviewed.

OCDSS spoke at length with the child's doctor who said he was unable to say if the parents were culpable in the child's death. The doctor stated the parents had been appropriate in the past with treatment and seeking treatment but signs of distress are often difficult to recognize, such that even nurses have a tough time recognizing them. The child had a cold on 2/27/18 and the father had called the doctor and obtained a prescription for him so they did not have to wait for an appointment. The doctor felt the parents would have sought medical attention immediately if the child was in obvious need.

CW interviewed both SS who each said they were at a friend's home the day their brother went into distress. The SS started counseling the following month.

Home visits were made, collaterals were interviewed, and grief counseling was offered to the family. Medical records showed the child struggled with cystic fibrosis for several years. The male surviving sibling also suffered from a medical condition. During the investigation, OCDSS petitioned for the removal of the child as the parents were not following recommended medical treatment. The Judge found imminent risk but found a removal was not in the best interest of the child as it was able to be mitigated by a nurse in the home. A visiting nurse was ordered to the home twice a week and the child's condition improved.

LE did not file any criminal charges as the child's death was due to medical complications. The initial case that was open at the time of the child's death was indicated and opened for CPS services.



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: Hospital physician

Multidisciplinary Investigation/Review

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

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there timely entry of progress notes and other required documentation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an adequate safety assessment of impending or immediate danger to surviving siblings/other children in the household named in the report:				
Within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 7 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 30 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input 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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Child Fatality Report

harm, were the safety interventions, including parent/caretaker actions adequate?				
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Fatality Risk Assessment / Risk Assessment Profile

	Yes	No	N/A	Unable to Determine
Was the risk assessment/RAP adequate in this case?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
During the course of the investigation, was sufficient information gathered to assess risk to all surviving siblings/other children in the household?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an adequate assessment of the family's need for services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the protective factors in this case require the LDSS to file a petition in Family Court at any time during or after the investigation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain:
Family declined all services that were offered but did allow the court ordered nurse in their home.

Placement Activities in Response to the Fatality Investigation

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

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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 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 counseling.

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

Explain:

The parents declined a need for services for themselves.

History Prior to the Fatality

Child Information

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

CPS - Investigative History Three Years Prior to the Fatality



Child Fatality Report

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
01/16/2018	Sibling, Male, 6 Years	Mother, Female, 28 Years	Lack of Medical Care	Substantiated	Yes
	Sibling, Male, 6 Years	Father, Male, 45 Years	Lack of Medical Care	Substantiated	
	Deceased Child, Male, 5 Years	Mother, Female, 28 Years	Lack of Medical Care	Unsubstantiated	
	Deceased Child, Male, 5 Years	Father, Male, 45 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Female, 7 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 7 Years	Father, Male, 45 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Male, 5 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 6 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Male, 5 Years	Father, Male, 45 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 6 Years	Father, Male, 45 Years	Inadequate Guardianship	Substantiated	

Report Summary:

An SCR report alleged the SC had cystic fibrosis. On 1/14/18, SC was discharged from the hospital with a plan to have nursing care come to his home. On 1/15/18, the mother and father refused to allow the visiting nurse into the home. SC left the hospital with multiple medical issues and a prescribed treatment plan. SC's weight gain also needed to be monitored as he was not gaining weight. The roles of the two SS (ages 7 and 6) were unknown.

Report Determination: Indicated

Date of Determination: 06/28/2018

Basis for Determination:

The indication was based on the parents not following recommendations for the child's health and safety including smoking in the home, not allowing the nurse in the home, taking the children out of the hospital against medical advisement, and postponing the children's medical treatment.

OCFS Review Results:

OCDSS made notable efforts throughout the case to assess the safety of the children and encourage the parents to follow medical recommendations. CW made frequent home visits and phone calls to the family. CW also was in frequent contact with medical professionals treating the children and obtained pertinent records.

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

Issue:

Timely/Adequate Seven Day Assessment

Summary:

The 7-day safety assessment was 4 days late.

Legal Reference:

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

Action:

The 7-day safety assessment will be completed within the first 7 days of receiving a report.



Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
11/10/2016	Deceased Child, Male, 4 Years	Mother, Female, 26 Years	Lack of Medical Care	Unsubstantiated	No
	Sibling, Male, 5 Years	Mother, Female, 26 Years	Lack of Medical Care	Unsubstantiated	
	Deceased Child, Male, 4 Years	Father, Male, 44 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 5 Years	Father, Male, 44 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 5 Years	Mother, Female, 26 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Male, 4 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Male, 4 Years	Mother, Female, 26 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 5 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 6 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 6 Years	Mother, Female, 26 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Male, 4 Years	Father, Male, 44 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Male, 4 Years	Father, Male, 44 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 5 Years	Father, Male, 44 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 5 Years	Father, Male, 44 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Female, 6 Years	Father, Male, 44 Years	Inadequate Guardianship	Unsubstantiated	
Sibling, Female, 6 Years	Father, Male, 44 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated		

Report Summary:

An SCR report alleged the mother and father were unable to provide their three children with a minimal degree of care. The parents physically fought in front of the children and as a result, the police have been to the home. The home was unsanitary with dirty clothes, dishes and odor. The children were always dirty and sick. The male children were born with a medical condition and were frequently hospitalized for weeks at a time because the parents did not comply with the medication regimen.

Report Determination: Unfounded

Date of Determination: 01/06/2017

Basis for Determination:

CW spoke with the medical providers for the children and said the parents were compliant with the medical treatment and needs of the children. LE records were obtained and it showed LE responded to the home for a verbal argument in



October 2016. The parents and children denied any conflict in the home since that incident. CW made unannounced home visits and found no health/safety hazards in the home.

OCFS Review Results:

OCDSS reviewed the family's CPS history, made home visits, and interviewed the parents, children, and several collaterals. OCDSS obtained pertinent records from LE and medical providers. OCDSS completed a thorough investigation and appropriately unfounded the case.

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)
05/03/2016	Deceased Child, Male, 3 Years	Father, Male, 43 Years	Inadequate Guardianship	Unsubstantiated	No
	Sibling, Male, 5 Years	Father, Male, 43 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 6 Years	Father, Male, 43 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Male, 3 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 5 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Female, 6 Years	Mother, Female, 26 Years	Inadequate Guardianship	Unsubstantiated	

Report Summary:

An SCR report alleged that on a regular basis, mother and father had physical altercations with each other and other people in the presence of their three children. On at least one occasion, the mother choked the father in the presence of the children. The parents videotaped physical altercations others had in the presence of their children instead of intervening to protect the children.

Report Determination: Unfounded

Date of Determination: 08/24/2016

Basis for Determination:

No credible evidence was found that any physical altercations had taken place in the presence of the children.

OCFS Review Results:

OCDSS interviewed friends, relatives, school officials, and medical collaterals. OCDSS also reviewed the family's CPS history and obtained pertinent records from LE and medical providers. OCDSS completed an accurate and thorough investigation and appropriately unfounded the report.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
12/11/2015	Deceased Child, Male, 3 Years	Mother, Female, 25 Years	Inadequate Guardianship	Unsubstantiated	No
	Sibling, Male, 4 Years	Mother, Female, 25 Years	Inadequate Guardianship	Unsubstantiated	
	Deceased Child, Male, 3 Years	Father, Male, 43 Years	Inadequate Guardianship	Unsubstantiated	



Child Fatality Report

Sibling, Male, 4 Years	Father, Male, 43 Years	Inadequate Guardianship	Unsubstantiated
Sibling, Male, 4 Years	Father, Male, 43 Years	Excessive Corporal Punishment	Unsubstantiated

Report Summary:

An SCR report alleged that on 12/11/15, the 4yo male child wanted a drink and his father was in a back room with the door closed. The child opened the door and father became angry and kicked him with force on his side. The child fell to the floor and held his side in pain. The mother and father constantly smoked cigarettes around the children and the two male children had a medical condition. The children were not supposed to be around smoke of any type. The children were always in the emergency room due to inhaling smoke. The parents' actions were affecting the children's health.

Report Determination: Unfounded **Date of Determination:** 02/19/2016

Basis for Determination:

OCDSS interviewed the source, mother, father, children, school officials and medical professionals. CW did not observe the child to have any marks or injuries. The child did not disclose his father kicked him.

OCFS Review Results:

CW interviewed alleged subjects, children, and multiple collaterals, none of whom disclosed any abuse or maltreatment had occurred. OCDSS completed an accurate and thorough investigation and appropriately unfounded the case.

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)
06/04/2015	Sibling, Female, 5 Years	Father, Male, 42 Years	Lack of Medical Care	Unsubstantiated	No
	Sibling, Female, 5 Years	Mother, Female, 25 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Lack of Medical Care	Substantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Male, 2 Years	Father, Male, 42 Years	Lack of Medical Care	Substantiated	
	Deceased Child, Male, 2 Years	Father, Male, 42 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Female, 5 Years	Father, Male, 42 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 25 Years	Lack of Medical Care	Substantiated	

Report Summary:

An SCR report alleged that the three children were in the care of their father and had no food in their home and had not eaten in two days. The male children were medically fragile and required daily medications that if not taken, could be life threatening. The mother had not attempted to get the boys' medication to their father and their father had not tried to obtain the medication from the mother. The boys had not had their medication for two days. The younger male needed prescribed antibiotics that his mother had not told his father about or attempted to give his father to administer.

Report Determination: Indicated **Date of Determination:** 08/21/2015

Basis for Determination:

This report was indicated as mother refused to provide father with the children's medication and the father did not attempt



to obtain the medication from the mother. LE had to intervene to help get the medication for the children. The allegations of IF/C/S were unsubstantiated as CW found food enough food in the home for the children and the father had money to get more food when necessary.

OCFS Review Results:

OCDSS reviewed the family's CPS history, made home visits, spoke to multiple medical providers, relatives, and LE, and interviewed the parents and children. The children went back in the care of the mother and continued taking their medication as prescribed. OCDSS completed a thorough investigation and made an appropriate determination.

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

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

From 1995-2015, father was named in 16 CPS reports and 14 of them were indicated. These cases involved older half siblings from a previous relationship. In 2002, the father's parental rights were terminated for his three oldest children. From 2010-2015, mother was named in 6 CPS reports and 3 of them were indicated.

Known CPS History Outside of NYS

There is no known CPS history outside of NYS.

Preventive Services History

6/21/10-10/8/12 case was opened as a result of a CPS investigation where the mother ran down the street with her female child (3 months old at the time) in her arms after an argument with the father. The mother had untreated mental health issues and there were concerns of domestic violence in the home between mother and father. OCDSS helped mother obtain MH services such as counseling and medication. The mother and father also went to couples counseling. There were concerns the mother was having difficulty caring for the female SS so a public health nurse was provided. The case was closed when the family no longer had a need for services.

Legal History Within Three Years Prior to the Fatality

Was there any legal activity within three years prior to the fatality investigation? There was no legal activity

Recommended Action(s)

Are there any recommended actions for local or state administrative or policy changes? Yes No

Are there any recommended prevention activities resulting from the review? Yes No