



Report Identification Number: SY-18-040

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

Issue Date: Feb 05, 2019

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

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

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

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

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

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

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

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



Abbreviations

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



Case Information

Report Type: Child Deceased
Age: 6 month(s)

Jurisdiction: Oneida
Gender: Female

Date of Death: 08/28/2018
Initial Date OCFS Notified: 08/28/2018

Presenting Information

An SCR report was received on 8/28/2018. The report alleged that the 6-month-old SC passed away sometime between the hours of 9:00PM on 8/27/18 and 10:00AM on 8/28/18. The mother had placed the SC to sleep on a twin bed with a blanket and pillow at 9:00PM. The mother then put the four SS ages 6, 5, 3 and 1yo to bed and proceeded to smoke marijuana. The mother was too impaired to care for any of the children. The mother never checked on the SC throughout the night. The SC died sometime during the night. At 10:00AM on 8/28/18 the mother found the SC unresponsive and off the bed between a blanket and a stuffed toy. The father was at work at the time the SC was found. The roles of the father and the 9yo SS were unknown.

Executive Summary

This report concerns the death of a 6-month-old female child (SC) that occurred on 8/28/18. Oneida County Department of Social Services (OCDSS) received an SCR report and a duplicate report on 8/28/18. The SC was an otherwise healthy child. The mother had placed the SC on her back on a twin-size mattress at 9:00 PM on 8/27/18. The parents told OCDSS they were smoking marijuana after the SC and 4 of the 5 surviving siblings were sleeping. The 9yo SS was with the PGM. The parents said they went to bed at 10:30 PM. On 8/28/18, the mother awoke at 10:00 AM and made breakfast for the SS. The mother went to the bedroom to check on the SC at approximately 11:30 AM. The mother found the SC face down wrapped in a blanket between the mattress and a pile of toys. The mother called 911 at 11:39 AM. EMS arrived and the SC was pronounced dead at 11:46 AM. The father had left for work at 7:00 AM and was not home at the time the mother found the SC unresponsive. Neither parent had checked on the SC from 9:00 PM on the evening of 8/27/18 to 11:30 AM on 8/28/18.

The ME's final autopsy report findings listed the cause of death as positional asphyxia due to unsafe sleep environment and the manner of death accidental. The District Attorney's office told OCDSS that after a lengthy discussion with the ME, they planned to present the case to a grand jury to determine whether or not there was enough to pursue criminal charges against both parents.

OCDSS assessed the safety of the SC's 5 SS (ages 9, 6, 5, 3 and 1). The parents made a safety plan for the SS to stay with the grandparents pending further investigation. OCDSS assessed the home environment of MGP's and PGP's, and there were no noted safety concerns. OCDSS interviewed the mother, the father, family members, the father of the 9yo SS and the SS. OCDSS requested and reviewed all pertinent medical records of the SC as well as the SS and there were no noted concerns about the care of the children. OCDSS completed all safety assessments and child fatality reports timely and accurately.

On 9/20/18, OCDSS filed an Article 10 Abuse/Neglect petition in Family Court against the parents for the SC and derivative neglect against the parents for the 5 remaining SS. The Family Court Judge had issued an order of protection stating that neither parent shall be under the influence of any substances and they shall provide appropriate supervision of the SS. On 10/29/18, the parents made an admission in Family Court to abuse of the SC and derivative neglect for the SS. The dispositional order issued by the Judge stated that neither parent shall use or be under the influence of any substances in the presence of the SS and the parents were ordered to cooperate with OCDSS for one year.

The child protective case remained open at the time of this writing, though the record reflected that OCDSS planned to indicate the report and protective services would continue to monitor. A preventive case was opened on 9/17/18, the



mother was attending mental health counseling. The mother had submitted to random drug testing throughout the investigation and tested negative. The father continued to test positive for marijuana use. The mother completed a substance abuse evaluation and no further treatment was recommended. The father completed a substance abuse evaluation and treatment was recommended.

Findings Related to the CPS Investigation of the Fatality

Safety Assessment:

- Was sufficient information gathered to make the decision recorded on the:
 - Approved Initial Safety Assessment? Yes
 - Safety assessment due at the time of determination? Yes
- Was the safety decision on the approved Initial Safety Assessment appropriate? Yes

Determination:

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

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:

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: 08/28/2018

Time of Death: 11:46 AM

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

Unknown



County where fatality incident occurred: Oneida
 Was 911 or local emergency number called? Yes
 Time of Call: 11:39 AM
 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

Did child have supervision at time of incident leading to death? No - but needed

At time of incident supervisor was:

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

Total number of deaths at incident event:

Children ages 0-18: 1

Adults: 0

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Female	6 Month(s)
Deceased Child's Household	Father	Alleged Perpetrator	Male	25 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	28 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Female	1 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Female	3 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Male	6 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Male	5 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Male	9 Year(s)
Other Household 1	Father	No Role	Male	33 Year(s)

LDSS Response

On 8/28/18, OCDSS received the fatality report from the SCR, initiated their investigation within 24 hours and coordinated efforts with LE. OCDSS contacted the sources of the reports, completed a CPS history check, and notified the ME and DA of the SC's death. The surviving siblings were assessed and a temporary safety plan was implemented with the parents pending further investigation.

On 8/28/18, OCDSS went to the police department and observed LE's interviews with the parents. The mother cried and said, "I should have put her in her crib." The mother told LE that she had placed the SC on the 9yo SS bed to sleep at 9:00 PM, because he was at his PGM's home for the night. The mother explained she had done this because the 1yo SS was



crying and wanted to watch TV. The mother said she put the 1yo SS into the SC's crib because that room had a TV. No one else was in the bedroom with the SC. LE asked the mother about drug use and the mother told LE she smokes marijuana to relax and admitted to smoking marijuana after she put the children to bed that evening. The mother said she went to bed sometime later that evening. The mother said she woke the next morning around 10:00 AM and made breakfast for the SS and; the father had already left for work. The mother said when she entered the room to check on the SC, she observed the SC on the far side of the bed wrapped in a blanket. The SC was purple but warm to the touch. The mother called 911 and started CPR on the SC. She further explained the SC was found lying between the bed and a big toy car. EMS arrived and took the SC in the ambulance.

The father said he was at work when the mother found the SC. The father initially denied knowing if the mother used marijuana but later in his statement to LE he admitted that he and the mother smoked marijuana together on the porch while the children were sleeping. The father remembered taking a call from his mother at 10:24 PM and they went to bed right after the call ended. The father said he woke at 7:00 AM to go to work. He left for work and said he did not check on the SC before he left the home.

On 8/28/18, the mother gave OCDSS a tour of the home. LE was at the home at the time of the OCDSS visit. OCDSS and LE found marijuana and drug paraphernalia in the parents' bedroom within reach of the children. There were no arrests at the time of this writing.

OCDSS learned that two of the SS were with the PGP's and two were with the MGP's and the 9yo SS was still with his PGM. OCDSS observed the homes and the children, and there were no noted safety concerns of the grandparents' homes.

The OCDSS obtained information from LE, the ME, EMS, medical records from the hospital, and the children's pediatrician. The children's pediatric records noted no concerns. OCDSS spoke with family members, the father of the 9yo SS, and there were no noted concerns for the care of the SS and the relatives denied knowledge of parent's marijuana use. OCDSS verified with the parents that they were aware of safe sleep practices. OCDSS offered the parents trauma services and funeral assistance.

The SS were interviewed and the 9yo SS told OCDSS that his mother often went into her room for hours leaving them unsupervised. The parents agreed to drug testing and tested positive for marijuana use. OCDSS filed an Abuse/Neglect petition in Family Court against the parents for the SC and the SS. The parents were court ordered to refrain from substance use while caring for the SS and to provide age appropriate supervision. The mother was randomly drug tested during the investigation and tested negative. The mother completed a substance abuse evaluation and no further treatment was needed. The mother was receiving counseling. The father continued to test positive for marijuana. The parents made an admission in Family Court to Abuse/Neglect and the SS remained in the care of their parents with court ordered services. A preventive case was opened.

Official Manner and Cause of Death

Official Manner: Accident

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

SCR Fatality Report Summary



Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
048777 - Sibling, Male, 6 Year(s)	048774 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Substantiated
048777 - Sibling, Male, 6 Year(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
048778 - Sibling, Male, 5 Year(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
048778 - Sibling, Male, 5 Year(s)	048774 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Substantiated
048779 - Sibling, Female, 3 Year(s)	048774 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Substantiated
048779 - Sibling, Female, 3 Year(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
048780 - Sibling, Female, 1 Year(s)	048774 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Substantiated
048780 - Sibling, Female, 1 Year(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
048892 - Deceased Child, Female, 6 Month(s)	048775 - Father, Male, 25 Year(s)	Inadequate Guardianship	Substantiated
048892 - Deceased Child, Female, 6 Month(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
048892 - Deceased Child, Female, 6 Month(s)	048774 - Mother, Female, 28 Year(s)	DOA / Fatality	Substantiated
048892 - Deceased Child, Female, 6 Month(s)	048774 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Substantiated
048892 - Deceased Child, Female, 6 Month(s)	048775 - Father, Male, 25 Year(s)	DOA / Fatality	Substantiated
049114 - Sibling, Male, 9 Year(s)	048775 - Father, Male, 25 Year(s)	Inadequate Guardianship	Substantiated
049114 - Sibling, Male, 9 Year(s)	048774 - Mother, Female, 28 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
049114 - Sibling, Male, 9 Year(s)	048775 - Father, Male, 25 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
049114 - Sibling, Male, 9 Year(s)	048774 - Mother, Female, 28 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"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there discussion with all parties (youth, other household members, and staff) who were present that day (if nonverbal, observation and comments in case notes)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 assessment of impending or immediate danger to surviving siblings/other children in the household named in the report:				
Within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 7 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 30 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including 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"/>



Child Fatality Report

Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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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: The children were not removed from their parents.				

Legal Activity Related to the Fatality

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

Family Court
 Criminal Court
 Order of Protection

Family Court Petition Type: FCA Article 10 - CPS		
Date Filed:	Fact Finding Description:	Disposition Description:
Unknown	Adjudicated Neglected	Order of Supervision
Respondent:	048774 Mother Female 28 Year(s)	
Comments:		

Have any Orders of Protection been issued? Yes

From: 09/20/2018 **To:** Unknown

Explain:
 On 9/20/18 OCDSS filed an Article 10 Abuse/Neglect petition in Family Court against both parents. The Judge granted a temporary order of protection at that time ordering that neither of the parents were to be under the influence of substances while caring for their children and to provided appropriate supervision. OCDSS would monitor and provide family with referrals for Mental Health Services. On 10/29/18, the parents admitted to abuse in Family Court of the SC and derivative neglect of the SS. The disposition was a one year Order of Protection. The parents were ordered to cooperate with services and were not to be under the influence of any substances in the presence of the children. A preventive case opened and child protective continued to monitor.

Services Provided to the Family in Response to the Fatality

Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Not Offered	Needed but Unavailable	N/A	CDR Lead to Referral



Bereavement counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input 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"/>				
Alcohol/Substance abuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other, specify: Preventive Services							

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

Infants Under One Year Old

During pregnancy, mother:

- Had medical complications / infections
- Misused over-the-counter or prescription drugs
- Experienced domestic violence
- Was not noted in the case record to have any of the issues listed
- Had heavy alcohol use
- Smoked tobacco
- Used illicit drugs

Infant was born:

- Drug exposed
- With fetal alcohol effects or syndrome



With neither of the issues listed noted in case record

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)
06/15/2018	Sibling, Female, 2 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	No
	Sibling, Female, 2 Years	Mother, Female, 28 Years	Lack of Supervision	Substantiated	
	Sibling, Female, 1 Years	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Sibling, Female, 1 Years	Mother, Female, 28 Years	Lack of Supervision	Substantiated	
	Deceased Child, Female, 4 Months	Mother, Female, 28 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Female, 4 Months	Mother, Female, 28 Years	Lack of Supervision	Substantiated	

Report Summary:

The report alleged at approximately 12:19PM the SM left her three children ages 2, 1 and 4 months old, in a parked vehicle for an undetermined length of time while she was inside a local store. The windows of the vehicle were down, and the car was not running. The children were not harmed.

Report Determination: Indicated

Date of Determination: 08/07/2018

Basis for Determination:

OCDSS met with the SM and CHN and observed the home. The SM admitted she had left the CHN in the car alone unsupervised. The SM took full responsibility and realized the CHN could have been harmed. The SM had been feeling overwhelmed taking care of the CHN and her recent breakup with the father of the CHN. The BF and GM were interviewed and stated they had no concerns for the SM's care of the CHN. The case was IND and closed. There were no needed services.

OCFS Review Results:

OCDSS gathered sufficient information to make a determination and met all regulatory requirements for this investigation.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
01/31/2018	Sibling, Female, 2 Years	Mother, Female, 27 Years	Lack of Supervision	Unsubstantiated	No

Report Summary:

The report alleged the mother was not adequately supervising the 2yo SS, and the SS was able to get out of the front door of the home and wander onto the street for about a minute before she was found. The SS was not injured. The roles of the BF, the SC and the SS were unknown.

Report Determination: Unfounded

Date of Determination: 02/14/2018

Basis for Determination:

OCDSS interviewed the parents, family members, SS and the source of the report. OCDSS observed the home and found



no noted safety concerns for the SS. The SM admitted she had gone to the bathroom and the 2yo SS was in the living room watching TV. When the SM came out of the bathroom she realized the SS had gotten out of the home. The SM immediately located the SS. The SS was unharmed and the parents bought safety locks for the doors. The SM gave birth to the SC during the open investigation. OCDSS appropriately added the newborn to the case and made a home visit and went over safe sleep with the parents and the GM. The case was UNF and closed. There were no services needed.

OCFS Review Results:

OCDSS gathered sufficient information to make a determination in this case.

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

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

SCR report received 9/14/11, with allegations of IG and LS against a cousin for a SS. The allegations were Sub and the case was IND and closed. There were no services needed.

SCR report received 10/26/11, with allegations of IG and LS against the SM and OA for a SS. The allegations were Unsub and the case was UNF and closed.

SCR report received 5/22/12, with allegations of L/B/W and IG against the BF for a SS and IG against the SM for the SS. The allegation of L/B/W was Unsub against the BF for the SS; However, the allegation of IG against the BF and the SM for the SS was Sub. The case was IND and closed. The parents refused services and OCDSS was unable to take legal action.

Known CPS History Outside of NYS

There was no known history outside of NYS.

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