



Report Identification Number: NY-20-093

Prepared by: New York City Regional Office

Issue Date: Apr 02, 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: 6 month(s)

Jurisdiction: Bronx
Gender: Male

Date of Death: 10/01/2020
Initial Date OCFS Notified: 10/01/2020

Presenting Information

The SCR report alleged on 10/1/20, at approximately 4:00 AM, the father (SF) put the six-month-old male (SC) and his four and seven-year-old siblings (SS) and himself to sleep in the same bed. The mother (SM) checked the SC and realized his body was hanging in a gap in the bed and she could see the SC's head. The SM picked up the SC who was unresponsive. She then initiated CPR and called 911 at 6:39 AM. EMS arrived and transported the SC to the hospital where he was pronounced dead at 6:54 AM. The possible cause of the death of the SC was suffocation as a result of co-sleeping with the SF and the other SS. It was further alleged the SM was aware of them co-sleeping and allowed it to occur.

Executive Summary

This fatality report concerns the death of a six-month-old male who died while in the custody of the SF on 10/1/20. The ACS Bronx Field Office initiated the investigation and received information from the medical staff, the ME, and LE.

The ACS staff contacted the medical staff at Bronx Care Health Systems (BCHS) and learned the SF said he placed the SC along with his four and seven-year-old brothers in the adult bed and laid with them to put them to sleep; however, he fell asleep with them. The SC awoke twice during the night, he was fed and put back to sleep; he was fine. The SF stated he awoke at approximately 6:30 AM and found the SC not breathing and his eyes appeared "glazed." Although it was alleged that the SM initiated CPR, it was the SF who performed CPR and called 911 at 6:39 AM for emergency medical assistance. EMS responded to the case address and transported the SC to the hospital where he was pronounced dead at 6:54 AM on the same day. The SF reported the SC had no fever or cough. The medical staff reported that the SC appeared overweight but clean, and no evidence of physical injuries were found. The SF appeared appropriate based on the circumstances.

The Specialist learned that the SM stated she went to check on the SC and saw a blanket in front of him, his head was on the bed, but his body was wedged between the mattress and the wall. The SS were asleep on the bed and the SF was asleep in another room. She initiated CPR and contacted 911. The SM was distraught.

At the time of the fatality, the family was involved in an open investigation dated 9/7/20. The children remained in the care of their SF and the SM had been excluded from the home other than between 9:AM to 5:00PM. There was an OP on behalf of the children against the SM due to a neglect adjudication. The allegations were IG, LS, EdNeg, and untreated MH issues that impaired her ability to care for the children. The SM was given supervised visits and she was ordered to complete a MH assessment to which she had not completed. The children were deemed safe on 9/14/20.

On 10/1/20, the Specialist made contact with the SM and informed her of the removal of the SS to which she became enraged, cursed, and hung up the phone. The SS were removed from the care of the MGM and placed in the protective custody of the Commissioner of the Administration for Children Services. The Specialist made referrals for appropriate services for the family and the parents accepted and reported they were willing to do whatever it took to regain custody of the children.

The preliminary report from the ME noted there was no abuse, the SC was not underweight; however, there was credible evidence to support that the SC was not appropriately supervised as he was found in between the mattress and the wall. There remained concerns regarding the SM's MH condition and marijuana use, and the SF use of a prescribed medication



and alcohol. Both parents have retained attorneys and have declined to give information about the fatal incident.

On 11/30/20, ACS unsubstantiated the DOA/fatality allegation by the parents stating the information gathered to did not indicate whether parents' actions or inactions led to the SC's demise. The PD/AM of the children by the SM was substantiated based on the SM's positive drugs tests results and her behavior while under the influence, negatively impacted the care she provided to the children.

The allegation of IG and LS of the children by the parents were substantiated as ACS cited the results of their investigations. The SM was in the home at times she was not allowed by court order, the children were found in the home without supervision and the SF disregard for the courts orders and placed the children in imminent risk.

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:

The case remained open as the SS are in foster care and the parents are engaged in supervised visits: the parents have enrolled in services.

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: 10/01/2020

Time of Death: 06:54 AM

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

06:30 AM

County where fatality incident occurred:

Bronx

Was 911 or local emergency number called?

Yes

Time of Call:

06:39 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? Yes

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	Male	6 Month(s)
Deceased Child's Household	Father	Alleged Perpetrator	Male	45 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Male	4 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Male	7 Year(s)
Other Household 1	Mother	Alleged Perpetrator	Female	30 Year(s)
Other Household 1	Mother	Alleged Perpetrator	Female	30 Year(s)

LDSS Response

The Bronx ACS Specialist initiated the 10/1/20 investigation by contacting the hospital staff, ME and LE within the required timeframe. The Specialist learned that the SC died while co-sleeping in an adult bed with two siblings and possibly the SF. The SM found the SC wedged between the bed and the wall. The medical staff told the Specialist that the SC was found with no signs of abuse; however, he was hospitalized for six days for failure to thrive. The ME noted the SC was not underweight, he was twenty-one pounds. The closure of LE's investigation was pending the ME's final report.



The DA reported the parents retained legal counsel and declined to be interviewed.

As a result of the death of the SC, ACS removed both SS and petitioned for a remand based on the parent’s violation of the OP and the SM’s untreated MH that posed an imminent risk. The remand was granted and after a diligent search of collaterals, the SS were placed in non-kinship foster care where they remain to date.

During ACS’ involvement with this family, there were many issues the parents refused to address and adamantly declined services. The SM refused to address her MH condition, she continued to display explosive, violent behaviors that were projected to the school staff, case workers and others in the community. The SM engaged in marijuana use despite the two youngest children tested positive at birth. The SM bragged about smoking in the presence of the children and said it helped her grieve the loss of the PGF and manage bullying on social media. The parents blamed the SS’s school staff for a report, and they changed the SS school; however, the unexplained absences continued, and the younger SS had not been attending daycare. The SS was referred to counseling for separation issues when he arrived at school, but the parents declined. Both parents were instructed by the court to submit to drug screening and they did not. The SF completed parenting skills class and declined PPRS. The SM enrolled in services and did not follow through.

During the investigations, the SF was observed with slurred speech, alcoholic breath, and an open beer, while he was the sole caretaker for the children. In another incident, the SS were found home alone, the SM arrived after the SS opened the door and she became belligerent, even in the presence of LE. At times, the home was observed dirty and disorganized as the SS were often naked. The parents were offered homemaker assistance and PPRS, but they repeatedly declined. Throughout the investigations, the parents accepted from the LDSS a crib, furniture, clothing for the children and carfare. The SM knowingly allowed the SF and children to co-sleep despite Safe Sleep training. The home was always found with an ample supply of food and they appeared happy.

On 11/30/20, ACS unsubstantiated the allegation of DOA/fatality of the SC by the parents, citing the information gathered did not indicate that the parent’s actions or inactions led to the SC’s demise and that the ME final report is pending. ACS substantiated the allegations of PD/AM of the children by the SM, citing her admittance to daily use. The allegations of IG and LS of the children by the parents were substantiated citing the findings of their investigation. ACS wrote that the SM was observed in the home other than the times specified by the court. The SF’s disregard for the court placed the children in imminent risk by allowing the SM in the home at the time the incident occurred. The SF was bedsharing with the children and the SM did not intervene.

Official Manner and Cause of Death

Official Manner: Accident

Primary Cause of Death: Pending

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? No

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

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
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056621 - Deceased Child, Male, 6 Mons	056622 - Father, Male, 45 Year(s)	DOA / Fatality	Unsubstantiated
056621 - Deceased Child, Male, 6 Mons	056626 - Mother, Female, 30 Year(s)	Inadequate Guardianship	Substantiated
056621 - Deceased Child, Male, 6 Mons	056622 - Father, Male, 45 Year(s)	Lack of Supervision	Substantiated
056621 - Deceased Child, Male, 6 Mons	056622 - Father, Male, 45 Year(s)	Inadequate Guardianship	Substantiated
056621 - Deceased Child, Male, 6 Mons	056626 - Mother, Female, 30 Year(s)	Lack of Supervision	Substantiated
056621 - Deceased Child, Male, 6 Mons	056626 - Mother, Female, 30 Year(s)	DOA / Fatality	Unsubstantiated
056621 - Deceased Child, Male, 6 Mons	056626 - Mother, Female, 30 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
056623 - Sibling, Male, 4 Year(s)	056622 - Father, Male, 45 Year(s)	Inadequate Guardianship	Substantiated
056623 - Sibling, Male, 4 Year(s)	056626 - Mother, Female, 30 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
056623 - Sibling, Male, 4 Year(s)	056626 - Mother, Female, 30 Year(s)	Inadequate Guardianship	Substantiated
056623 - Sibling, Male, 4 Year(s)	056626 - Mother, Female, 30 Year(s)	Lack of Supervision	Substantiated
056623 - Sibling, Male, 4 Year(s)	056622 - Father, Male, 45 Year(s)	Lack of Supervision	Substantiated
056625 - Sibling, Male, 7 Year(s)	056622 - Father, Male, 45 Year(s)	Inadequate Guardianship	Substantiated
056625 - Sibling, Male, 7 Year(s)	056626 - Mother, Female, 30 Year(s)	Parents Drug / Alcohol Misuse	Substantiated
056625 - Sibling, Male, 7 Year(s)	056626 - Mother, Female, 30 Year(s)	Lack of Supervision	Substantiated
056625 - Sibling, Male, 7 Year(s)	056622 - Father, Male, 45 Year(s)	Lack of Supervision	Substantiated
056625 - Sibling, Male, 7 Year(s)	056626 - Mother, Female, 30 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 type="checkbox"/>	<input checked="" 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"/>



Child Fatality Report

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"/>
Were appropriate/needed services offered in this case	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain:
The SS were removed from the SF's care as a result of the SM violation of the OP and court orders. The SS were placed



in a non-kinship foster home where they received evaluations and bereavement counseling. They received visits with their parents and they continued school and daycare.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, court ordered?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain as necessary: On 10/1/20, the day of the SC's death, ACS removed the SS and on 10/2/20 ACS filed a petition of neglect and on 10/5/20, the court remanded the SS to a non-kinship foster home. The children were removed also because the SM violated the court order by being in the home outside the times the court order specified.				

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Family or others as safety resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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 were placed in foster care and they received MH evaluations, bereavement counseling and meet their educational needs.

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

Explain:

The SM enrolled in MH and bereavement counseling. Also anger management and parenting skills classes in addition to random drug tests. The SF was enrolled in bereavement counseling and a parenting skills class in his primary language, in addition to random drug testing.

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

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)
09/07/2020	Deceased Child, Male, 6 Months	Father, Male, 30 Years	Inadequate Guardianship	Substantiated	No
	Deceased Child, Male, 6 Months	Father, Male, 30 Years	Lack of Supervision	Substantiated	
	Sibling, Male, 4 Years	Father, Male, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 4 Years	Father, Male, 30 Years	Lack of Supervision	Substantiated	
	Sibling, Male, 7 Years	Father, Male, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 7 Years	Father, Male, 30 Years	Lack of Supervision	Substantiated	
	Deceased Child, Male, 6 Months	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Deceased Child, Male, 6 Months	Mother, Female, 30 Years	Lack of Supervision	Substantiated	
	Sibling, Male, 4 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 4 Years	Mother, Female, 30 Years	Lack of Supervision	Substantiated	
	Sibling, Male, 7 Years	Mother, Female, 30 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 7 Years	Mother, Female, 30 Years	Lack of Supervision	Substantiated	
	Deceased Child, Male, 6 Months	Mother, Female, 30 Years	Parents Drug / Alcohol Misuse	Substantiated	
	Sibling, Male, 4 Years	Mother, Female, 30 Years	Parents Drug / Alcohol Misuse	Substantiated	
	Sibling, Male, 7 Years	Mother, Female, 30 Years	Parents Drug / Alcohol Misuse	Substantiated	

Report Summary:

On 09/07/20, the SCR registered a report that the parents smoked cigarettes and marijuana in the presence of the three children, who have nerve issues due to being exposed to the smoke. The parents were made aware that the smoke would have a negative effect on the children, yet they continue to smoke in the children’s presence. The report alleged that on a regular basis, the mother leaves the three young children in the home, unsupervised, while she goes out to get more drugs. The last incident occurred two days ago, when she left the children without supervision for ten minutes.

Report Determination: Indicated

Date of Determination: 11/06/2020

Basis for Determination:

The PD/AM of the children by the SM was substantiated as she admitted that she smoked marijuana daily in the presence of the children to remedy her grieving the loss of her father-in-law, being bullied on social media, and her MH conditions. The IG and LS of the children by the parents was substantiated based on the circumstances surrounding the passing of the SC, the violation of the OP by the SM and the SF’s disregard of the Court’s Order, placed the children at imminent risk.

OCFS Review Results:

The investigation met regulatory requirements.



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)
03/16/2020	Deceased Child, Male, 1 Days	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	No
	Deceased Child, Male, 1 Days	Mother, Female, 29 Years	Parents Drug / Alcohol Misuse	Substantiated	

Report Summary:

On 03/16/20, an SCR report alleged that the SM had given birth and both the SM and baby tested positive for marijuana. The SM disclosed she used marijuana multiple times per week during her pregnancy. Despite the SM's previous admittance, she reported these drug tests results were false and that they had been taken from the previous medical records. The SM's non-compliance with prior MH treatment has impacted her ability to provide adequate care to the children.

Report Determination: Indicated

Date of Determination: 04/22/2020

Basis for Determination:

The SM admitted that she smoked marijuana during her pregnancy. The SM's untreated mental health conditions had negatively impacted the SS that resulted in her failure to provide adequate care to the SS.

OCFS Review Results:

ACS took the appropriate action to file an Article 10 Neglect Petition and completed a safety plan.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
02/14/2019	Sibling, Male, 5 Years	Father, Male, 44 Years	Educational Neglect	Substantiated	No
	Sibling, Male, 5 Years	Father, Male, 44 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 5 Years	Mother, Female, 29 Years	Educational Neglect	Substantiated	
	Sibling, Male, 5 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 3 Years	Father, Male, 44 Years	Inadequate Guardianship	Substantiated	
	Sibling, Male, 3 Years	Mother, Female, 29 Years	Inadequate Guardianship	Substantiated	

Report Summary:

On 02/14/19, a report alleged that the now-seven-year-old SS had missed 40 days of school and as a result, he was failing. The parents have been contacted via phone and mail; however, there was no improvement in the SS's attendance.

Report Determination: Indicated

Date of Determination: 04/15/2019

Basis for Determination:

The SC was absent from school 49 late 10 days since September, the SM had not provided the SS with basic education and the SF did not intervene. The SM's explosive behavior in the presence of the SS negatively impacted them and the SF had not intervene to initiate any form of safety for the SS.

OCFS Review Results:

ACS made an appropriate determination and initiated the appropriate action.

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)
10/10/2017	Sibling, Male, 2 Years	Father, Male, 42 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	No
	Sibling, Male, 2 Years	Father, Male, 42 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 2 Years	Father, Male, 42 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 2 Years	Father, Male, 42 Years	Lack of Supervision	Unsubstantiated	
	Sibling, Male, 2 Years	Father, Male, 42 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Lack of Supervision	Unsubstantiated	
	Sibling, Male, 4 Years	Father, Male, 42 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 2 Years	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 2 Years	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 2 Years	Mother, Female, 27 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 2 Years	Mother, Female, 27 Years	Lack of Supervision	Unsubstantiated	
	Sibling, Male, 2 Years	Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 27 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 27 Years	Lack of Medical Care	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 27 Years	Lack of Supervision	Unsubstantiated	
	Sibling, Male, 4 Years	Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
Sibling, Male, 2 Years	Father, Male, 42 Years	Poisoning / Noxious Substances	Unsubstantiated		



Sibling, Male, 2 Years	Mother, Female, 27 Years	Poisoning / Noxious Substances	Unsubstantiated
Sibling, Male, 2 Years	Father, Male, 42 Years	Burns / Scalding	Unsubstantiated
Sibling, Male, 2 Years	Mother, Female, 27 Years	Burns / Scalding	Unsubstantiated

Report Summary:

On 10/10/17, a report alleged that the parents failed to provide a clean home environment for the then one and three-year-old SS. The home was filled with garbage, dirty laundry, and the SS walked around naked and urinated on the floors. There were beer bottles everywhere and pills accessible to the SS. The one-year-old SS had drenched himself with a bottle of bleach that resulted in burns to his face. The parents failed to provide adequate supervision. The parents allegedly smoked marijuana, consumed alcohol and opiates to the point of impairment. The parents engaged engaged in DV. The SS's teeth were rotten and they failed to seek dental treatment. The parents had untreated MH conditions

Report Determination: Unfounded**Date of Determination:** 12/08/2017**Basis for Determination:**

According to the ACS' case documentation, the Specialist observed the SS were supervised by the SM and the home was clean, organized and contained adequate provisions. The SS's dental issue was addressed by Mt. Sinai Hospital. At the time the SS were not of school age and the SM denied the use of illicit substances. The SS was found with no burns. The allegations of IG, IF, C, S, LMC, PD/AM CPS were unfounded. The Specialist offered the SM PPRS, but she declined stating she had a negative history with ACS. The SM continued to receive case management services from a community agency who were in the process of discharging and referring her to an agency that would address her MH needs.

OCFS Review Results:

ACS did not make dilligent efforts to have the parents tested for drugs.

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

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

The SM was known to the SCR and ACS as a child and both parents became involved with ACS in four of ten reports that occurred from 8/15/13 to 3/23/16.

In March 2013, the now seven-year-old SS resided with his parents and the PGF. The report alleged that SF had been selling drugs from the home, in the presence of the SS. During that investigation, the SM disclosed she was hospitalized in May and July for untreated mental health conditions. The IG allegation was unfounded. Sometime that month, the SF was charged with possession of a control substance.

In March 2015, a report alleged DV between the parents, in the presence of the SS. The report was unfounded, and the SM continued to demonstrate out-of-control behaviors. At the time the SM gave birth to the now four-year-old SS in November 2015, the SM and SS tested positive for marijuana. The PD/AM allegation was unfounded, and the SM enrolled in services.

In 2016, the allegations of IG, PD/AM of the SS by the parents were unfounded due to the parents' negative drug tests results. However, there were concerns around DV between the parents, physical abuse of the SS by the SM, her explosive behavior in public, and she allegedly sold food stamps to buy alcohol. The case documentation reflected the parents believed the report was generated in retaliation, due to an argument with friends, about money.

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 Child Protective Services case at the time of the fatality? Yes

Date the Child Protective Services case was opened: 03/15/2019

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

Preventive Services History

The family enrolled in PPRS as a result of an Article 10 Neglect Petition that was filed on 3/2/19. The SS had been paroled to the SF and the SM who was excluded from the home and granted visits that were supervised by the PGF. The family was being monitored by FSU at the time. On 3/25/19, the Specialist observed the SS in the home alone, unsupervised. The SF and the SS began PPRS on 6/2/19. The delay in services were due to the SF's reluctance to services. The Court ordered the SF to take the SS to school daily and the other child to daycare; and to take a parenting class that was to commence on 10/30/19. The SM was ordered to enroll in parenting, anger management classes and MH counseling which she initiated but had not made herself available. The SF completed parenting class in December 2019. The SF had not made himself or the children available for PPRS staff to complete the required visits; however, the times they gained entry, the SS were found with no indication of abuse. The home was observed unorganized, dirty but it contained ample supply of food. In February 2020, the SF declined services and told the Specialist to speak to his attorney. On 2/5/20, the Court ordered the SF to avail the PPRS until further court notice. The Court ordered the SM to complete a comprehensive psychiatric evaluation; it had been delayed due to the birth of her third child.

Foster Care Placement History

Following the death of the SC on 10/1/20, the SS were removed from the parents and placed in temporary placement. On 10/2/20, ACS filed an Article 10 Petition of Neglect in the Bronx Family Court against the SF on behalf of the SS. The petition noted that the SF allowed the SM to violate the active, limited OP that was active on behalf of the SS. At the time of the incident, the SM was in the home and had been residing there despite the OP. On 10/5/20, the court remanded the SS and they were placed in a non-kinship foster care home where they remain to date.

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:
03/16/2019	Adjudicated Neglected	There was not a disposition
Respondent:	056626 Mother Female 30 Year(s)	
Comments:	ACS filed an Article 10 Petition due to EdN and IG of the then five-year-old sibling who had missed 49 days of school; it had impacted his progress. The SM also engaged in violent outburst with threats to the school staff and others in the presence of the children that placed them at imminent risk. The SM refused services and after the birth of the SC in addition to multiple incidences, ACS returned to court and the children were placed in the care of the SF; the SM had been excluded from the home and was given supervised visits in the home for hours specified by the court (9:00 AM-5:00 PM). However, the SM had been observed in the home at times other than stipulated by the court. On the day of the fatal	



incident, ACS petitioned the court which resulted in the removal of the SS and placed in a non-kinship foster care home. The SM violated court order.

Have any Orders of Protection been issued? Yes

From: 10/19/2019

To: 10/28/2020

Explain:

The SM did not ensure the SS attend school, he had missed 49 days and was late excessively which impacted his progress. The SM was hostile, violent, displayed outbursts of anger and cursing to the school staff, caseworkers and to people in the community, all in the presence of the SS to whom she yelled and cursed. The SM refused to accept treatment for her MH conditions as they presented as an imminent risk to the children. The SM admitted she smoked marijuana daily and she disclosed she had been hospitalized two times in the past due to her MH state. The SS were placed in the SF's care with an OP against the SM; she maintained daily supervised visits with the 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