



Report Identification Number: AL-20-035

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

Issue Date: Apr 26, 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: 24 day(s)

Jurisdiction: Albany
Gender: Female

Date of Death: 11/07/2020
Initial Date OCFS Notified: 11/07/2020

Presenting Information

Albany County Department for Children, Youth and Families (ACDCYF) received an SCR report that stated on 11/7/20 at 3:10AM, the subject child passed away. The father rolled over on top of the child while they were sleeping on the couch causing the child to suffocate and bleed from the mouth. The mother had an unknown role.

Executive Summary

On 11/7/20, the Albany County Department of Children, Youth and Families (ACDCYF) received an SCR report regarding the death of the 24-day-old female child that occurred on the same day. At the time of the child's death, she resided with her mother and 4-year-old sibling. The child's father did not reside in the home, but frequented the residence. The 4-year-old sibling's father was incarcerated.

ACDCYF conducted a joint investigation with law enforcement and they learned that on 11/6/20 at 8:00PM, the father arrived to the residence after he completed a double shift at work. The mother and subject child were at the home and the sibling was at his godmother's house for the weekend. The parents walked to a store with the child and then returned home. The parents had dinner and planned to watch a movie on the couch. The mother fed and changed the subject child and she was placed in a swing. The child was fussing and the father picked her up and placed her on his chest while he was sitting up. The mother reported she last saw the child being burped by the father before the mother fell asleep. The father reported he must have dozed off and he next remembered being woken up by the mother screaming at an unknown time. The child was discovered unresponsive laying on her back and was partially underneath the father, who had fallen asleep sitting up and was hunched over. The mother called 911 and the father attempted to perform CPR. Emergency medical services arrived and the child was transported via ambulance to the hospital while CPR was performed. Despite life-saving measures, the child was pronounced deceased at the hospital at 2:57AM.

ACDCYF obtained a copy of the autopsy report, which stated the pathologic diagnoses were infant death while sharing a sleep surface with adults, pulmonary congestion and hemorrhage, normally developed baby girl with no congenital abnormalities and no evidence of trauma. The death certificate listed the cause of death as "sleep surface sharing with two adults; probable" and the manner was undetermined. At the time the case was closed, no criminal charges had been filed related to the subject child's death.

ACDCYF thoroughly investigated the incident by speaking to both professional and familial collaterals. The sibling's safety was assessed periodically throughout the investigation. On 12/8/20, a subsequent SCR report was received which alleged the mother stabbed the father resulting in his death. The stabbing occurred in the presence of the sibling. The mother was arrested for murder and was incarcerated. ACDCYF filed a Severe Abuse Petition against the mother. The sibling was informally placed with his godmother; however, she was not able to provide appropriate child care and ACDCYF explored other placement options. On 12/10/20, a non-familial resource filed an Article 6 Petition and was granted custody of the sibling. Criminal and family court proceedings were pending at the time this report was written. ACDCYF documented interviews prior to the fatal stabbing with the sibling, which included questions about domestic violence and no concerns were disclosed. ACDCYF obtained law enforcement records which consisted of several domestic incident reports involving the mother and father. Prior to the father's death, ACDCYF jointly interviewed the parents regarding the incidents and discussed a plan to not further expose the sibling to domestic violence.

ACDCYF substantiated the allegations of DOA/Fatality and IG against the mother and father. There was credible



evidence the father's actions placed the child at risk of harm which resulted in her death. The basis for substantiating the allegation of DOA/Fatality against the mother regarding the subject child was not clearly documented. The family was offered funeral assistance, mental health counseling and grief counseling. The CPS investigation was closed on 1/20/21 and the family remained open with mandatory preventive services.

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

Explain:

Casework activity was commensurate with case circumstances.

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:

There was detailed supervisory consultation documented throughout the investigation. The CPS investigation was closed; however, the mother and sibling remained open with mandated preventive 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: 11/07/2020

Time of Death: 02:57 AM

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

Unknown

County where fatality incident occurred:

Albany

Was 911 or local emergency number called?

Yes

Time of Call:

Unknown

Did EMS respond to the scene?

Yes

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

N/A

Child's activity at time of incident:

Sleeping

Working

Driving / Vehicle occupant

Playing

Eating

Unknown

Other

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

At time of incident was supervisor impaired?

Drug Impaired

Alcohol Impaired

Impaired by illness

Impaired by disability

At time of incident supervisor was:

Distracted

Absent

Asleep

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	24 Day(s)
Deceased Child's Household	Father	Alleged Perpetrator	Male	25 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	23 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Year(s)
Other Household 1	Other Adult - Father of 4yo sibling	No Role	Male	25 Year(s)

LDSS Response

ACDCYF investigated the incident by searching SCR history and speaking to the source of the report, LE, staff at the hospital, the ME, the fathers of the children and several family members. ACDCYF interviewed first responders and obtained the child's hospital records. On the day of the fatality, the SM and SF were interviewed and the SS was assessed to be safe with his godmother. The godmother cared for the SS while the parents grieved the death.

During interviews with the SM and SF, they stated that on the night leading up to the fatality, the SF came home from work around 8:00 PM. The SM and SC were at the home and the SS was at his godmother's house. The parents walked to



the store with the SC and returned home to make dinner. The SM then fed and changed the SC and put her in her swing while the parents were on the couch watching a movie. The SC was fussing so the SF picked her up and placed her against his chest while he was sitting up. The SM last remembered the SF holding the SC prior to the SM falling asleep. The father reported he continued to watch the movie while the SC was on his chest and then he fell asleep. The SM woke up at an unknown time and noticed the SF hunched over and the SC was on her back on the couch on the right side of the SF. The SF reported he was woken by the SM and was slightly on top of the SC. They noticed the SC was not breathing. The SM called 911 and the SF attempted CPR. The parents ran out of their apartment to call for help, and eventually were met outside by the ambulance, who transported the SC to the hospital.

LE and EMS who responded to the home reported upon their arrival, the parents were outside waiting for the ambulance with the SC. The SC was limp, lifeless, but warm to touch and had good color. CPR was administered on route to the hospital. The parents were observed by first responders to be very distraught. LE had no concerns regarding the parents being under the influence of drugs or alcohol. LE observed remnants of a marijuana cigarette in an ashtray near the couch, but there were no additional concerns reported about the condition of the home. LE believed the death was a tragic accident and reported no apparent concerns for the care of the SC.

ACDCYF questioned the parents regarding drug and alcohol use and they reported the use of marijuana; however, denied use the night of the fatality. When asked about their knowledge of safe sleep, the parents said they were aware of safe sleep guidelines. They further stated the SC typically slept in her cradle and sometimes was placed in a car seat to take naps. The SS was interviewed and reported the SC slept in a crib and sometimes on the couch. The SS did not disclose any additional child welfare concerns and reported feeling safe at his home.

ACDCYF obtained information from collaterals regarding the SC and SS. The SC had been seen by the pediatrician a week prior to her death and was considered a healthy newborn. The sibling's school reported no concerns for his care. Medical records obtained from the autopsy and hospital stated there were no concerns for maltreatment or abuse of the SC and that she appeared very well cared for.

During the fatality investigation, ACDCYF received a subsequent report which alleged the SM had stabbed the SF in the presence of the SS during a domestic dispute. As a result, the SF died on 12/8/20. The SM was charged with murder and was incarcerated. ACDCYF obtained information and records related to the stabbing. The SS was immediately assessed for safety and a plan was made for his care. The SS was interviewed at the Child Advocacy Center and disclosed he saw the SM with a knife and that his SF was bleeding. ACDCYF spoke with the sibling's guardian about trauma counseling for the SS.

Official Manner and Cause of Death

Official Manner: Undetermined

Primary Cause of Death: Undetermined if injury or medical cause

Person Declaring Official Manner and Cause of Death: Other physician

Multidisciplinary Investigation/Review

Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?Yes

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

Comments: The record reflected that the fatality was reviewed by Albany County's CFRT on 11/19/20.

SCR Fatality Report Summary



Child Fatality Report

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
056600 - Deceased Child, Female, 24 Days	056601 - Mother, Female, 23 Year(s)	DOA / Fatality	Substantiated
056600 - Deceased Child, Female, 24 Days	056601 - Mother, Female, 23 Year(s)	Inadequate Guardianship	Substantiated
056600 - Deceased Child, Female, 24 Days	056601 - Mother, Female, 23 Year(s)	Internal Injuries	Unsubstantiated
056600 - Deceased Child, Female, 24 Days	056602 - Father, Male, 25 Year(s)	DOA / Fatality	Substantiated
056600 - Deceased Child, Female, 24 Days	056602 - Father, Male, 25 Year(s)	Inadequate Guardianship	Substantiated
056600 - Deceased Child, Female, 24 Days	056602 - Father, Male, 25 Year(s)	Internal Injuries	Unsubstantiated

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

Additional information:

The father of the sibling was incarcerated. ACDCYF interviewed him via telephone.

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:
 On 12/7/20, the mother was incarcerated after she was charged with the murder of the father. The sibling was present when the fatal stabbing occurred. ACDCYF filed a Severe Abuse Petition related to the incident. A non-familial resource petitioned for Article 6 custody of the sibling and it was granted.

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:
 The mother was arrested following the fatality after she was charged with murder for the fatal stabbing of the father. A non-familial resource was granted Article 6 custody of the sibling as a result.



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 type="checkbox"/>	<input checked="" 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 parents and guardian were offered grief counseling and trauma counseling on behalf of the sibling.

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

Explain:



The parents were offered funeral assistance, grief counseling, holiday gift assistance, mental health counseling and addiction counseling services.

History Prior to the Fatality

Child Information

- Did the child have a history of alleged child abuse/maltreatment? 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 neither of the issues listed noted in case record
- With fetal alcohol effects or syndrome

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)
11/10/2019	Sibling, Male, 3 Years	Mother, Female, 22 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	Yes
	Sibling, Male, 3 Years	Mother, Female, 22 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 3 Years	Mother, Female, 22 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	

Report Summary:

An SCR report received by ACDCYF stated that on a daily basis the SM abused Xanax, marijuana and cocaine to the point of impairment while in the presence of the SS. The SM left the drugs accessible to the SS and sold drugs out of the home. When impaired on drugs, the SM became violent and aggressive. There were physical altercations between the SM and other adult men while the SS was present. The SM shoved bottles into the SS' mouth until his mouth was red and puffy. The SM picked the SS up, threw him on the couch, pushed him to the floor and dragged him. It was unknown if the SS had sustained injuries. The SM let adult men assault the SS. There were also concerns about the SS' hygiene.

Report Determination: Unfounded

Date of Determination: 03/12/2020

**Basis for Determination:**

ACDCYF unfounded the SCR report. The mother and collaterals were interviewed. The mother denied the allegations. There were no concerns observed during home visits. A collateral reported no concern for the care of the child.

OCFS Review Results:

ACDCYF assessed safety of the surviving sibling and found there to be no immediate safety concerns. Collaterals including law enforcement, the pediatrician and a service provider were contacted. Home visits were completed. The mother was interviewed face-to-face; however, her interview was focused on the allegations. The record did not reflect that notification letters were provided. There was no casework activity documented between 11/12/19 and 2/18/20. The mother reported she was pregnant with the subject child during the investigation and it was not documented that safe sleep guidance was provided.

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

Issue:

Failure to provide safe sleep education/information

Summary:

The mother reported she was pregnant with the subject child during the investigation and it was not documented that safe sleep guidance was provided.

Legal Reference:

13-OCFS-ADM-02 & CPS Program Manual, Chapter 6, J-1

Action:

ACDCYF will provide information on sleep safety to the parents and caretakers of infants and expectant parents they encounter and see that parents and caretakers take the steps necessary to provide safe sleeping conditions for the children in their care.

Issue:

Failure to provide notice of report

Summary:

The record did not reflect that notice of existence letters were provided.

Legal Reference:

18 NYCRR 432.2(b)(3)(ii)(f)

Action:

ACDCYF will mail or deliver notification letters to subject(s), parent(s) and other adults named in the report within the first seven days following the receipt of the report.

Issue:

Adequacy of face-to-face contacts with the child and/or child's parents or guardians

Summary:

Although ACDCYF met with the mother face-to-face on two occasions and discussed the SCR report with her, the interviews were focused on the allegations of the SCR report and did not include questions about overall safety and risk.

Legal Reference:

18 NYCRR 432.1 (o)

Action:

ACDCYF will make face-to-face contacts with a child and/or a child's parents or guardians, or activities with the child and/or the child's parents or guardians, which may include but are not limited to facilitating information gathering and analysis of safety and risk factors and determining the allegations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)



08/22/2019	Sibling, Male, 2 Years	Mother, Female, 22 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Sibling, Male, 2 Years	Mother, Female, 22 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Sibling, Male, 2 Years	Father, Male, 24 Years	Inadequate Guardianship	Unsubstantiated	
	Sibling, Male, 2 Years	Father, Male, 24 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	

Report Summary:

An SCR report received by ACDCYF stated that on daily basis, the SM and SF smoked marijuana to the point of impairment while caring for the 2yo SS. While impaired, the parents got into physical altercations with one another and assaulted each other. On one occasion, the SF slammed the SM into a wall, leaving a large hole. Also, the parents screamed at the SS and swore at him when they were fighting.

Report Determination: Unfounded**Date of Determination:** 03/12/2020**Basis for Determination:**

ACDCYF determined there was insufficient credible evidence to substantiate the allegations. The mother was interviewed and denied the father resided in her home. The mother reported she did not use drugs and she did not appear impaired during casework contacts. The father was interviewed via telephone and denied the allegations to be true and also reported he did not live with the mother. The sibling was free of any visible marks or bruises. Law enforcement records were obtained which stated they had responded to the home once due to a verbal dispute between the mother and father. ACDCYF stated they unfounded the report as the information received did not rise to the level of indication.

OCFS Review Results:

ACDCYF assessed safety of the surviving sibling within 24 hours and found there to be no immediate safety concerns. Collaterals including law enforcement, the pediatrician and a service provider were contacted. The mother was interviewed face-to-face and home visits were completed. The record did not reflect that all required face-to-face interviews were completed or that notification letters were provided. There was no casework activity documented between 11/12/19 and 2/18/20. The mother reported she was pregnant with the subject child during the investigation and it was not documented that safe sleep guidance was provided.

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

Issue:

Failure to provide safe sleep education/information

Summary:

The mother reported she was pregnant with the subject child during the investigation and it was not documented that safe sleep guidance was provided.

Legal Reference:

13-OCFS-ADM-02 & CPS Program Manual, Chapter 6, J-1

Action:

ACDCYF will provide information on sleep safety to the parents and caretakers of infants and expectant parents they encounter and see that parents and caretakers take the steps necessary to provide safe sleeping conditions for the children in their care.

Issue:

Failure to provide notice of report

Summary:

The record did not reflect that notice of existence letters were provided.

Legal Reference:

18 NYCRR 432.2(b)(3)(ii)(f)

Action:



ACDCYF will mail or deliver notification letters to subject(s), parent(s) and other adults named in the report within the first seven days following the receipt of the report.

Issue:

Failure to Conduct a Face-to-Face Interview (Subject/Family)

Summary:

Although interviewed via telephone, the record did not reflect the father was interviewed face-to-face or that there were barriers present which prevented a face-to-face interview.

Legal Reference:

18 NYCRR 432.2(b)(3)(ii)(a)

Action:

The full child protective investigation must include face-to-face interviews with subjects of the report and family members of such subjects, including children named in the report.

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

In 2016, the mother had one unfounded CPS investigation with an unsubstantiated allegation of IG regarding the sibling.

Known CPS History Outside of NYS

There was no known CPS 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