



Report Identification Number: NY-16-109

Prepared by: New York City Regional Office

Issue Date: May 30, 2017

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	

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
CPR-Cardio-pulmonary Resuscitation		

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-Others	

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	

Case Information



Report Type: Child Deceased

Jurisdiction: Office Of Special Investigations

Date of Death: 03/14/2008

Age: 3 year(s)

Gender: Female

Initial Date OCFS Notified: 10/27/2016

Presenting Information

The 10/27/16 report alleged that at an unknown time in 2008, the 3-year-old SC had bronchitis. The adults in the home, PU, GM, GF, and parents were aware of the SC's illness but failed to seek medical attention. The bronchitis turned into pneumonia and the SC subsequently died as a result of the pneumonia. The PU, grandparents and SC's father all abused drugs to impairment while the sole caretakers to the SC's 7-year-old cousin. When impaired, the adults were unable to adequately care for the 7-year-old cousin. The grandparents abused their prescribed medication. The PU abused opiates and the SC's father abused multiple substances. The 7-year-old cousin had a medical condition and was supposed to get treatment daily. The adults did not give the 7-year-old cousin his treatments as required. The adults smoked in the home causing the cousin's medical condition to be exacerbated.

Executive Summary

The 3-year-old female child (SC) died on 3/14/08. LE reported that the ME's office was contacted and there was no record of the SC dying in NYC. The autopsy listed the cause of death as Pneumonia and the manner as Natural.

The allegations of the 10/27/16 report were DOA/Fatality, IG, and LMC of the then 3-year-old child (SC) by the parents, paternal grandparents (PGP) and PU; and IG, LMC, and PD/AM of the 7-year-old child (SC's cousin) by the PGPs, the father (PU of SC) of the cousin, and the SF (father of SC).

At the time of the 10/27/16 report, the SM and her family resided in NJ. ACS contacted the NJ Department of Children and Families Child Protection and Permanency (CP&P) who interviewed the SM and her family. The SM said the SC died due to pneumonia. The SM had reportedly taken the SC to two different hospitals. She first took the SC to Methodist Hospital (MH) in Brooklyn, NY. She was living in Jersey City. She said the day the SC returned home from the hospital the SC seemed ill. The next morning the SC's condition had not improved and SC was blue in the face. The SM called the Dr. and was told to take the SC to the hospital. She took the SC to Christ Hospital (CH) in NJ where the SC passed away. The SM said she took the SC to two hospitals in a 24-hour period, and yet the SC died. The SM said the MH diagnosed the SC had pneumonia and she argued with the medical staff about admitting the SC versus discharging her. The SC's oxygen level was 96 so the hospital released her; if it was lower than 96 they would have admitted her.

The 12/16/16 Investigation Determination safety assessment was inadequate as the comments did not support the selected safety factors, and the safety assessment pertained to siblings or other children residing in the home. In addition, there were two Investigation Determination safety assessments that included different Safety Decisions. The SCR report was dated 10/27/16 and the 7-Day safety assessment was not completed until 12/16/16.

On 12/16/16, ACS Unsub the allegations of DOA/Fatality, IG, and LMC of the then 3-year-old child (SC) by the parents, paternal grandparents (PGP), and PU; and IG, LMC, and PD/AM of the 7-year-old child (SC's cousin) by the PGP's, the PU of SC, who was also the father of the cousin; and the SF (father of SC). ACS found no credible evidence to substantiate the allegations. The PGPs and PU had no caretaking responsibility of the SC and the SC resided in NJ, out of NYS jurisdiction. The SC died in 2008. The ME declared the SC died of natural causes resulting



from pneumonia. There was no indication of foul play. There was no LE or District Attorney (DA) involvement. The NYPD confirmed the SC died of natural causes in 2008 and there was no criminal activity. The SM and SF resided in NJ. The NJ CP&P officials conducted an investigation on ACS's behalf. The NJ CP&P closed their investigation and there was no indication of abuse or neglect. There were no indications that the SM and SF did not provide adequate medical care for the SC.

The PU was not legally responsible for the SC's 7-year-old cousin and had no rights to him. The PU's parental rights were terminated. The 7-year-old cousin was in the care of the PGPs. The PGPs have full custody of the 7-year-old child. The PGPs provided adequate guardianship of the 7-year-old cousin. The SF was not legally responsible for the 7-year-old cousin. He resided in NJ and had no caretaking responsibility for him. There was no indication of a lack of medical care. The PU denied drug use and declined to take a drug test. The PGM denied drug use and tested negative for all drugs/alcohol during the investigation. The PGF tested positive for opiates which was expected as he used prescribed medication. The PGF brought the medications to the test facility and ACS also observed the medications. There was no indication the PGF misused his medication.

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? No

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? Yes

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:

NA

Required Actions Related to the Fatality

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

Issue:	Pre-Determination/Supervisor Review
Summary:	ACS completed two Investigation Determination safety assessments on 12/16/16 and they both had



	two different safety decisions.
Legal Reference:	18 NYCRR 432.2(b)(3)(v)
Action:	ACS must submit a performance improvement plan within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.
Issue:	Timely/Adequate Seven Day Assessment
Summary:	For the 10/27/16 report, ACS completed and approved the 7-Day safety assessment on 12/16/16.
Legal Reference:	SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)
Action:	ACS must submit a performance improvement plan within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.
Issue:	Contact/Information From Reporting/Collateral Source
Summary:	The documentation did not reflect that ACS interviewed the PGP's physicians regarding the prescribed medication that they utilized.
Legal Reference:	18 NYCRR 432.2(b)(3)(ii)(b)
Action:	ACS must submit a performance improvement plan within 45 days that identifies the action the agency has taken or will take to address the citations identified in the fatality report. ACS must meet with the staff involved with this fatality investigation and inform NYCRO of the date of the meeting, who attended and what was discussed.

Fatality-Related Information and Investigative Activities

Incident Information

Date of Death: 03/14/2008

Time of Death:

Date of fatal incident, if different than date of death: 03/13/2008

Was 911 or local emergency number called?

Unknown

Did EMS to respond to the scene?

No

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

Child's activity at time of incident:

- Sleeping
- Playing
- Other

- Working
- Eating

- Driving / Vehicle occupant
- Unknown

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

Is the caretaker listed in the Household Composition? Yes - Caregiver



At time of incident supervisor was: Not impaired.

Total number of deaths at incident event:

Children ages 0-18: 1

Adults: 0

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Female	3 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	36 Year(s)
Deceased Child's Household	Sibling	No Role	Female	18 Year(s)
Other Household 1	Father	Alleged Perpetrator	Male	36 Year(s)
Other Household 2	Grandparent	Alleged Perpetrator	Male	54 Year(s)
Other Household 2	Grandparent	Alleged Perpetrator	Female	54 Year(s)
Other Household 2	Other Child	Alleged Victim	Male	7 Year(s)
Other Household 4	Aunt/Uncle	Alleged Perpetrator	Male	29 Year(s)
Other Household 5	Other Adult	No Role	Female	32 Year(s)

LDSS Response

ACS visited the PGP's home on 10/28/16. The PGM said the SC died from pneumonia in NJ in 2008. PGM said the SM and SC lived with her until the SC was one year old and then moved out on their own. The PGF said the SM had resided in an apartment in Staten Island before relocating to NJ.

The PGM said she had custody of the SC's 7-year-old cousin as the cousin's BM had substance abuse issues. The PU did not have substance abuse issues. The PGM denied the cousin had a serious medical condition. ACS found that the 7-year-old cousin had a mild medical condition and was prescribed medication.

The PGM said the SM and SF did not have substance abuse issues. The PGPs denied drug misuse.

During an interview with ACS staff, the 7-year-old cousin said he knew the SC died as she was very ill. He said he felt safe in the PGP's home, his PGPs made his meals, and no one hits him. He did not know what drugs were. He said he did not take medication. The PGM informed ACS that she had no caretaking responsibility for the SC who died in NJ in 2008. The PGM denied drug misuse, but she acknowledged she took prescribed medication when needed. The PGM was willing to submit to a drug test. She declined bereavement counseling. The PGM said the SC's sibling and the SF resided in NJ. The SC resided in Staten Island for the first year of her life and then moved to NJ. The PGM said she and the PGF were the 7-year-old cousin's foster parents for three years and then became his legal guardians. ACS observed the Order of Kinship Guardianship which was signed by the Richmond County Family Court on 6/27/16. The PGM said the 7-year-old cousin's parents lost their parental rights. The PGF reported he became aware of the SC's death after the PGM received a call saying that the SC was in bad condition at the hospital. The PGF denied drug use, but reported he took prescribed medications. ACS observed the PGFs, 7-year-old cousin's, and PGM's medication. The PGF was willing to submit to a drug test.



On 10/28/16, the ACS supervisor contacted the NJ CP&P to locate an address for the family and make a child protective report regarding this fatality.

LE reported that the ME's office was contacted, and there was no record of the SC dying in NYC. LE established contact with the NJ OCMA who confirmed the SC passed away in NJ on 3/14/08. The ME listed cause of death was natural causes, pneumonia. LE said additional law enforcement involvement was not warranted due to the SC's death occurring outside of LE's jurisdiction.

On 10/31/16, the PU requested an ACS telephone interview. He informed ACS that he did not want any involvement with the investigation. He said he was not using drugs, and he said he did not want to miss a day of employment wages to take a test in regard to a case that had nothing to do with him. ACS informed the PU that ACS staff would get back to him regarding the phone interview.

On 11/2/16, NJ CP&P confirmed contact with the family members in NJ. CP&P had no concerns.

On 11/10/16, ACS received information from the 7-year-old child's Dr. who said there were no prescribed medications and no medical concerns.

ACS received the NJ CP&P report on 12/1/16. The NJ CP&P interviews with SM and SF revealed the SF said he was residing in Staten Island and the SM and children resided in NJ when the SM called and told him the SC was ill and she was taking the SC to the hospital. He said he was "caught with marijuana once in 2009." When interviewed, the SM denied any DV, substance abuse, and clinical health issues.

On 12/9/16, a conference occurred. During the conference, ACS found there was no concern about the cousin. The PGM said the family was not interested in services.

On 12/16/16, the cousin's BM said she did not lose her parental rights; the cousin was in kinship care. BM was not aware of any drug use in the home and had no concerns with the cousin's well-being in the PGP's home. The SC was her niece and she did not have any suspicion of foul play.

Official Manner and Cause of Death

Official Manner: Natural

Primary Cause of Death: From a medical cause

Person Declaring Official Manner and Cause of Death: Medical Examiner

Multidisciplinary Investigation/Review

Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?No

Comments: The investigation adhered to previously approved protocols for joint investigations.

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

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



SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
036781 - Deceased Child, Female, 3 Yrs	036807 - Aunt/Uncle, Male, 29 Year(s)	DOA / Fatality	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036801 - Mother, Female, 36 Year(s)	Lack of Medical Care	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036803 - Grandparent, Female, 54 Year(s)	Lack of Medical Care	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036804 - Grandparent, Male, 54 Year(s)	Lack of Medical Care	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036804 - Grandparent, Male, 54 Year(s)	Inadequate Guardianship	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036801 - Mother, Female, 36 Year(s)	Inadequate Guardianship	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036801 - Mother, Female, 36 Year(s)	DOA / Fatality	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036802 - Father, Male, 36 Year(s)	Lack of Medical Care	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036802 - Father, Male, 36 Year(s)	Inadequate Guardianship	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036802 - Father, Male, 36 Year(s)	DOA / Fatality	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036803 - Grandparent, Female, 54 Year(s)	Inadequate Guardianship	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036803 - Grandparent, Female, 54 Year(s)	DOA / Fatality	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036807 - Aunt/Uncle, Male, 29 Year(s)	Lack of Medical Care	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036807 - Aunt/Uncle, Male, 29 Year(s)	Inadequate Guardianship	Unsubstantiated
036781 - Deceased Child, Female, 3 Yrs	036804 - Grandparent, Male, 54 Year(s)	DOA / Fatality	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036803 - Grandparent, Female, 54 Year(s)	Parents Drug / Alcohol Misuse	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036802 - Father, Male, 36 Year(s)	Inadequate Guardianship	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036804 - Grandparent, Male, 54 Year(s)	Lack of Medical Care	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036807 - Aunt/Uncle, Male, 29 Year(s)	Parents Drug / Alcohol Misuse	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036807 - Aunt/Uncle, Male, 29 Year(s)	Lack of Medical Care	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036807 - Aunt/Uncle, Male, 29 Year(s)	Inadequate	Unsubstantiated



Male, 7 Year(s)	Year(s)	Guardianship	
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036802 - Father, Male, 36 Year(s)	Lack of Medical Care	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036802 - Father, Male, 36 Year(s)	Parents Drug / Alcohol Misuse	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036803 - Grandparent, Female, 54 Year(s)	Inadequate Guardianship	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036804 - Grandparent, Male, 54 Year(s)	Parents Drug / Alcohol Misuse	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036804 - Grandparent, Male, 54 Year(s)	Inadequate Guardianship	Unsubstantiated
036805 - Other Child - deceased child's cousin, Male, 7 Year(s)	036803 - Grandparent, Female, 54 Year(s)	Lack of Medical Care	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
Did the investigation adhere to established protocols for a joint investigation?	<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 SC died in New Jersey on 3/14/08. The documentation reflected the State of New Jersey Office of the Attorney provided information regarding the death scene and autopsy report.

Fatality Safety Assessment Activities

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

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 siblings/other children in the household removed as a result of this fatality report/investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Explain as necessary:

The PGPs showed ACS an "Order of Kinship Guardianship" which was signed by the Family Court on 6/27/16 regarding the SC's 7-year-old cousin. During the investigation, the 7-year-old cousin was not removed from the care of the PGP's.

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	Needed but not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Additional information, if necessary:

The SC died on 3/14/08 in New Jersey. The SM said she had been in therapy with a private therapist when the death occurred. She received group therapy services with the SC's sibling, who is now an adult.



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 SC died on 3/14/08 in New Jersey. The SM went to group therapy with her now adult child. The 7-year-old cousin did not know the SC as he was born after her death. The New Jersey Children's Services referred the SM to Bayshore Hospital, Perform Care, and other service providers for any counseling needs (grief counseling) for her and the children.

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

Explain:

The SC died on 3/14/08 in New Jersey. The SM said she had been in therapy with a private therapist when the death occurred. She attended group therapy services with her now adult child. The New Jersey Children's Services referred the SM to Bayshore Hospital, Perform Care, and other service providers for any counseling needs (grief counseling) for her and the children. The PGM declined bereavement counseling. The SF was not interested in counseling.

History Prior to the Fatality

Child Information

- Did the child have a history of alleged child abuse/maltreatment?** No
- 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?** Yes

CPS - Investigative History Three Years Prior to the Fatality

There is no CPS investigative history in NYS within three years prior to the fatality.

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

The SF was not known to the SCR or ACS as a subject. The PGP's and PU were not known to the SCR or ACS as subjects. The SM was known in one report dated 2/12/13. The allegations of the 2/12/13 report were IG and PD/AM of the female sibling (now adult), 3-year-old male sibling, and a then 7-year-old male child by the SM and step-parent. ACS completed two safety assessments on 2/19/13 and 4/9/13; a RAP was also completed. On 4/10/13, ACS Unsub the allegations of the 2/12/13 report.

The 7-year-old cousin was known as a "Non-confirmed Maltreated" child in two reports dated 4/5/12 and 5/23/12, and as a "Confirmed Maltreated" child in one report dated 8/28/12.

The allegations of the 4/5/12 report were PD/AM of the cousin, and PD/AM and EdN of the cousin's half sibling (who is



now 11 years old) by their mother. ACS completed two safety assessments on 4/11/12 and 5/23/12; a RAP was also completed. On 5/24/12, ACS Unsub the allegations of the 4/5/12 report.

The allegations of the 5/23/12 report were IG of the cousin, and IG and EdN of the cousin's half sibling by their mother. ACS completed two safety assessments on 5/24/12 and 7/18/12; a RAP was also completed. On 7/18/12, ACS Unsub the allegations of the 5/23/12 report.

The allegations of the 8/28/12 report were IG and PD/AM by the cousin and his male half sibling by their mother. ACS completed two safety assessments on 9/4/12 and 10/1/12; a RAP was also completed. ACS Sub all the allegations of the 8/28/12 report.

Known CPS History Outside of NYS

There was no known CPS history outside of NYS. The ACS supervisor was informed by New Jersey Children's Services that there was no information located in their system for the family. No child welfare history was found for family members in New Jersey.

Required Action(s)

Are there Required Actions related to compliance issues for provisions of CPS or Preventive services ?

Yes No

Preventive Services History

There is no record of Preventive Services History provided to the deceased child, the deceased child's siblings, and/or the other children residing in the deceased child's household at the time of the fatality.

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