

Report Identification Number: BU-14-023

Prepared by: Buffalo Regional Office

Issue Date: 1/9/2015

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

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<p>Relationships BM = Biological Mother OC = Other Child MGM/PGM = Maternal/parental Grandmother</p>	<p>SM = Subject Mother BF = Biological Father FM = Foster Mother MGF/PGF = Maternal/parental Grandfather</p>	<p>SC = Subject Child SF = Surviving Father FF = Foster father DCP = Day Care Provider</p>
<p>Contacts LE = Law Enforcement EMS = Emergency Medical Services DC = Day Care</p>	<p>CW = Caseworker Dr = Doctor CPR = Cardiopulmonary Resuscitation</p>	<p>CP = CasePlanner ME = Medical Examier FD = Fire Department</p>
<p>Allegations L/B/W = Lacerations/Bruises /Welts B/S = Burns / Scalding PD/AM = Parent's Drug Alcohol Misuse M/FTTH= Malnutrition/Failure-to-Thrive LS = Lack of Supervision OTH/COI = Other</p>	<p>FX = Fractures S/D/S = Swelling/Dislocation /Sprains CD/A = Child's Drug/Alcohol Use P/Nx = Poisoning/ Noxious Substance IF/C/S = Inadequate Food/Clothing /Shelter Ab = Abandonment</p>	<p>II = Internal Injuries C/T/S = Choking/Twisting /Shaking MN = Medical Neglect XCP = Excessive Corporal Punishment IG = Inadequate Guardianship SO = Sex Offender</p>
<p>Miscellaneous LDSS = Local Department of Social Service</p>	<p>IND = Indicated ACS = Administration for Children's Services</p>	<p>UNF = Unfounded NYPD = New York City Police Department</p>

Case Information

Report Type: Child Found Alive

Jurisdiction: Erie

Date of Death: Unknown

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Age: 11 month(s)

Gender: Male

Initial Date OCFS Notified: 06/25/2014

Presenting Information

The four month old baby died. The mother and father did not have time to feed the baby and as a result the child starved. The other children in the home have unknown roles.

Executive Summary

On 06/25/2014 ECDSS received an SCR fatality report involving a family that had an open CPS investigation. This 06/25/14 report had allegations of DOA/fatality, inadequate food, clothing, shelter, and inadequate guardianship against subject mother and father involving subject child. Subject child's sibling had reported at school that his baby brother had died seven days earlier due to no one feeding him.

The caseworker initiated the fatality investigation and found the subject child to be alive and well in the home. The caseworker made appropriate contacts with the subject mother and father, all nine sibling children in the home, and collateral contacts that included family, pediatrician, day care, law enforcement, school, and the medical examiner. The caseworker found that there was a prior infant death in the home from 2007. That infant death had been determined by the County Medical Examiner to have been a natural death caused by sudden infant death syndrome as there was no other explanation rendered through the complete postmortem investigation which included autopsy, histology, metabolic, and toxicology testing.

On 09/08/2014, the allegations of DOA/fatality, IG, and inadequate food, clothing, shelter were unfounded. Basis of determination was that the subject child is not deceased and is alive and well, the home was regularly observed with ample available baby formula, and no health or safety concerns were observed. It is believed that subject child's sibling may have been confused with prior infant death in the home and subject child's health conditions. Subject child was born premature and is slowly gaining weight. Child was recently seen by Pediatrician and caseworker linked the family with VNA services. On-going offered services were declined. Children appeared safe. Case was closed with no further CPS intervention.

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.

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- Was the determination made by the district to unfound or indicate appropriate? Yes

Explain:

N/A

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:

N/A

Required Actions Related to the Fatality

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

Fatality-Related Information and Investigative Activities

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Male	4 Month(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	29 Year(s)
Deceased Child's Household	Sibling	No Role	Male	10 Year(s)
Deceased Child's Household	Sibling	No Role	Male	9 Year(s)
Deceased Child's Household	Sibling	No Role	Male	8 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Year(s)
Deceased Child's Household	Sibling	No Role	Male	3 Year(s)
Deceased Child's Household	Sibling	No Role	Male	2 Year(s)
Deceased Child's Household	Sibling	No Role	Male	3 Year(s)
Deceased Child's Household	Sibling	No Role	Female	1 Year(s)
Deceased Child's Household	Sibling	No Role	Female	5 Year(s)
Other Household 1	Father	Alleged Perpetrator	Male	31 Year(s)

LDSS Response

On 06/25/2014 ECDSS received an SCR fatality report involving a family that had an open CPS investigation. This 06/25/14 report had allegations of DOA/fatality, inadequate food, clothing, shelter, and inadequate guardianship against subject mother and father involving subject child. Subject child's sibling had reported at school that his baby brother had died seven days earlier due to no one feeding him.

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The caseworker initiated the fatality investigation and found the subject child to be alive and well in the home. The caseworker made appropriate contacts with the subject mother and father, all nine sibling children in the home, and collateral contacts that included family, pediatrician, day care, law enforcement, school, and the medical examiner. The caseworker found that there was a prior infant death in the home from 2007. That infant death had been determined by the County Medical Examiner to have been a natural death caused by sudden infant death syndrome as there was no other explanation rendered through the complete postmortem investigation which included autopsy, histology, metabolic, and toxicology testing.

On 09/08/2014, the allegations of DOA/fatality, IG, and inadequate food, clothing, shelter were unfounded. Basis of determination was that the subject child is not deceased and is alive and well, the home was regularly observed with ample available baby formula, and no health or safety concerns were observed. It is believed that subject child's sibling may have been confused with prior infant death in the home and subject child's health conditions. Subject child was born premature and is slowly gaining weight. Child was recently seen by Pediatrician and caseworker linked the family with VNA services. On-going offered services were declined. Children appeared safe. Case was closed with no further CPS intervention.

Multidisciplinary Investigation/Review

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

Comments: N/A

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

Comments: Erie County does not have an OCFS approved Child Fatality Team.

SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
Deceased Child Male 4 Month(s)	Father Male 31 Year(s)	DOA / Fatality	Unsubstantiated
Deceased Child Male 4 Month(s)	Father Male 31 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
Deceased Child Male 4 Month(s)	Father Male 31 Year(s)	Inadequate Guardianship	Unsubstantiated
Deceased Child Male 4 Month(s)	Mother Female 29 Year(s)	DOA / Fatality	Unsubstantiated
Deceased Child Male 4 Month(s)	Mother Female 29 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
Deceased Child Male 4 Month(s)	Mother Female 29 Year(s)	Inadequate Guardianship	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"/>

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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"/>
The SCR Report source contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Fatality Safety Assessment Activities

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

	Yes	No	N/A	Unable to Determine
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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 and placed in foster care at any time during this fatality instigation?	<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"/>

Legal Activity Related to the Fatality

Was there legal activity as a result of the fatality investigation? There was no legal activity

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

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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 report was received as a fatality report for a family with an open CPS investigation, however, the child was found to be alive and well.

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? N/A

Explain:
 N/A

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

Explain:
 N/A

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? | 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:

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- | | |
|---|--|
| <input type="checkbox"/> Had medical complications / infections
<input type="checkbox"/> Misused over-the-counter or prescription drugs
<input type="checkbox"/> Experienced domestic violence
<input checked="" type="checkbox"/> Was not noted in the case record to have any of the issues listed | <input type="checkbox"/> Had heavy alcohol use
<input type="checkbox"/> Smoked tobacco
<input type="checkbox"/> Used illicit drugs |
|---|--|

Infant was born:

- | | |
|---|---|
| <input type="checkbox"/> Drug exposed
<input checked="" type="checkbox"/> With neither of the issues listed noted in case record | <input type="checkbox"/> 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)	Status/Outcome	Compliance Issue(s)
07/30/2011	341-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Malnutrition / Failure to Thrive	Unfounded	No
	341-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	341-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Inadequate Guardianship	Unfounded	
	342-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	342-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Inadequate Guardianship	Unfounded	
	342-Sibling, Male, 8 Months	333-Mother, Female, 26 Years	Malnutrition / Failure to Thrive	Unfounded	

Report Summary:

Mother ran out of formula for eight month old twins. As a result, she has been feeding them lemonade and water for the last three or four days. Because of this the child was very low on sodium. He had seizures and stiffness due to lack of food. Both children are malnourished.

Determination: Unfounded

Date of Determination: 09/15/2011

Basis for Determination:

Family denied running out of formula and only feeding the children lemonade. Parents stated hospital asked if the children had anything new and they reported lemonade. Caseworker, observed the home as very clean and organized. The home had ample amounts of food and formula. Child had failure to thrive, but the family was working with the medical clinic. Family continued to work with the medical clinic. Children appeared safe at this time. Family declined services. Case is closed with no further CPS interventions

OCFS Review Results:

N/A

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
05/11/2012	354-Sibling, Male, 8 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	No

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354-Sibling, Male, 8 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
355-Sibling, Male, 7 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
355-Sibling, Male, 7 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
356-Sibling, Male, 6 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
356-Sibling, Male, 6 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
357-Sibling, Male, 2 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
357-Sibling, Male, 2 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
358-Sibling, Male, 1 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
358-Sibling, Male, 1 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
359-Sibling, Male, 1 Years	352-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
359-Sibling, Male, 1 Years	352-Mother, Female, 27 Years	Lack of Supervision	Unfounded
354-Sibling, Male, 8 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
354-Sibling, Male, 8 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded
355-Sibling, Male, 7 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
355-Sibling, Male, 7 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded
356-Sibling, Male, 6 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
356-Sibling, Male, 6 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded
357-Sibling, Male, 2 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
357-Sibling, Male, 2 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded
358-Sibling, Male, 1 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
358-Sibling, Male, 1 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded
359-Sibling, Male, 1 Years	353-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
359-Sibling, Male, 1 Years	353-Father, Male, 29 Years	Lack of Supervision	Unfounded

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Years	Years		
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Report Summary:

The parents do not adequately supervise their seven young children. The children hang out of the windows, climb on the gutters, and destroy the property. There are concerns that the children will be seriously injured because parents do not supervise them while they are outside.

Determination: Unfounded

Date of Determination: 07/09/2012

Basis for Determination:

Allegations were unfounded. Upon caseworker home visits all children were always properly supervised. Mother moved out of the home with her children because the landlord would not fix the broken toilet and would shut off the water because mother was using too much while doing laundry. Mother and children are currently living with maternal grandmother until a new apartment is ready. Mother and father deny selling their food stamps. Mother and father were always sober and coherent during home visits. All children's needs were being met. Children appeared safe at this time. Case was closed with no further CPS intervention.

OCFS Review Results:

N/A

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
05/13/2012	364-Sibling, Male, 6 Months	362-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	No
	364-Sibling, Male, 6 Months	362-Mother, Female, 27 Years	Lack of Supervision	Unfounded	
	364-Sibling, Male, 6 Months	362-Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded	
	366-Sibling, Male, 7 Years	362-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	366-Sibling, Male, 7 Years	362-Mother, Female, 27 Years	Lack of Supervision	Unfounded	
	366-Sibling, Male, 7 Years	362-Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded	
	367-Sibling, Male, 1 Years	362-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	367-Sibling, Male, 1 Years	362-Mother, Female, 27 Years	Lack of Supervision	Unfounded	
	367-Sibling, Male, 1 Years	362-Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded	
	368-Sibling, Male, 6 Years	362-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	368-Sibling, Male, 6 Years	362-Mother, Female, 27 Years	Lack of Supervision	Unfounded	
	368-Sibling, Male, 6 Years	362-Mother, Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded	
369-Sibling, Male, 3 Years	362-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded		

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369-Sibling,Male, 3 Years	362-Mother,Female, 27 Years	Lack of Supervision	Unfounded
369-Sibling,Male, 3 Years	362-Mother,Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded
370-Sibling,Male, 2 Years	362-Mother,Female, 27 Years	Inadequate Guardianship	Unfounded
370-Sibling,Male, 2 Years	362-Mother,Female, 27 Years	Lack of Supervision	Unfounded
370-Sibling,Male, 2 Years	362-Mother,Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded
371-Sibling,Male, 1 Years	362-Mother,Female, 27 Years	Inadequate Guardianship	Unfounded
371-Sibling,Male, 1 Years	362-Mother,Female, 27 Years	Lack of Supervision	Unfounded
371-Sibling,Male, 1 Years	362-Mother,Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded
372-Sibling,Male, 7 Years	362-Mother,Female, 27 Years	Inadequate Guardianship	Unfounded
372-Sibling,Male, 7 Years	362-Mother,Female, 27 Years	Lack of Supervision	Unfounded
372-Sibling,Male, 7 Years	362-Mother,Female, 27 Years	Parents Drug / Alcohol Misuse	Unfounded
364-Sibling,Male, 6 Months	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
364-Sibling,Male, 6 Months	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
364-Sibling,Male, 6 Months	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
366-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
366-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
366-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
367-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
367-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
367-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
368-Sibling,Male, 6 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
368-Sibling,Male, 6 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
368-Sibling,Male, 6 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded

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Years	Years	Misuse	
369-Sibling,Male, 3 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
369-Sibling,Male, 3 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
369-Sibling,Male, 3 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
370-Sibling,Male, 2 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
370-Sibling,Male, 2 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
370-Sibling,Male, 2 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
371-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
371-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
371-Sibling,Male, 1 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded
372-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Inadequate Guardianship	Unfounded
372-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Lack of Supervision	Unfounded
372-Sibling,Male, 7 Years	365-Father,Male, 29 Years	Parents Drug / Alcohol Misuse	Unfounded

Report Summary:

Parents sell food stamps for alcohol and cigarettes. Unknown if kids are getting enough food. Father shoots his shot gun in the yard or the front of the house when he is drunk. The children run wild and un-supervised around the neighborhood while father is inside sleeping. About ten days ago father was drunk and smacking the two year old on the buttocks about ten-twelve times. The home is unsanitary. There is trash, debris, dirty dishes, and dirty clothes about the home.

Determination: Unfounded

Date of Determination: 05/14/2012

Basis for Determination:

This report was consolidated into open report intake 05/11/2012 Allegations were unfounded. Upon caseworker home visits all children were always properly supervised. Mother moved out of the home with her children because the landlord would not fix the broken toilet and would shut off the water because mother was using too much while doing laundry. Mother and children are currently living with maternal grandmother until a new apartment is ready. Mother and father deny selling their food stamps. Mother and father were always sober and coherent during home visits. Children appear safe at this time. Case was closed with no further CPS intervention .

OCFS Review Results:

N/A

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
06/07/2012	384-Sibling,Male, 1	382-Mother,Female, 27	Inadequate	Unfounded	No

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Years	Years	Guardianship	
386-Sibling, Male, 1 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
387-Sibling, Male, 6 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
388-Sibling, Male, 2 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
389-Sibling, Male, 1 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
390-Sibling, Male, 7 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
391-Sibling, Male, 8 Years	382-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded
384-Sibling, Male, 1 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
386-Sibling, Male, 1 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
387-Sibling, Male, 6 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
388-Sibling, Male, 2 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
389-Sibling, Male, 1 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
390-Sibling, Male, 7 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
391-Sibling, Male, 8 Years	383-Father, Male, 29 Years	Inadequate Guardianship	Unfounded

Report Summary:

Mother and father are unwilling to address the unsanitary conditions of the home. The family is living amongst debris, trash, and clutter that is visible from the door. There are dirty dishes, broken windows, and the plumbing ie, toilet is not working in the home. The parents have been informed that the home is not safe for the children ages three, one, and newborn, however, the parents have refused to comply.

Determination: Unfounded

Date of Determination: 06/08/2012

Basis for Determination:

This report was consolidated into open report 05/11/2012. Allegations were unfounded. Upon caseworker home visits all children were always properly supervised. Mother moved out of the home with her children because the landlord would not fix the broken toilet and would shut off the water because mother was using too much while doing laundry. Mother and children are currently living with maternal grandmother until a new apartment is ready. Mother and father deny selling their food stamps. Mother and father were always sober and coherent during home visits. Children appear safe at this time. Case is closed with no further CPS intervention .

OCFS Review Results:

N/A

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

Date of SCR	Alleged	Alleged	Allegation(s)	Status/Outcome	Compliance
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Report	Victim(s)	Perpetrator(s)			Issue(s)
06/24/2012	395-Sibling, Male, 7 Months	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	No
	395-Sibling, Male, 7 Months	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	396-Sibling, Male, 8 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	396-Sibling, Male, 8 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	397-Sibling, Male, 1 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	397-Sibling, Male, 1 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	398-Sibling, Male, 6 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	398-Sibling, Male, 6 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	399-Sibling, Male, 3 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	399-Sibling, Male, 3 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	400-Sibling, Male, 2 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	400-Sibling, Male, 2 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	401-Sibling, Male, 1 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	401-Sibling, Male, 1 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	402-Sibling, Male, 7 Years	393-Mother, Female, 27 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	402-Sibling, Male, 7 Years	393-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	
	395-Sibling, Male, 7 Months	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	395-Sibling, Male, 7 Months	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded	
	396-Sibling, Male, 8 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	396-Sibling, Male, 8 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded	
397-Sibling, Male, 1 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded		
397-Sibling, Male, 1 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded		

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398-Sibling, Male, 6 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded
398-Sibling, Male, 6 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
399-Sibling, Male, 3 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded
399-Sibling, Male, 3 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
400-Sibling, Male, 2 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded
400-Sibling, Male, 2 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
401-Sibling, Male, 1 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded
401-Sibling, Male, 1 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded
402-Sibling, Male, 7 Years	403-Father, Male, 29 Years	Inadequate Food / Clothing / Shelter	Unfounded
402-Sibling, Male, 7 Years	403-Father, Male, 29 Years	Inadequate Guardianship	Unfounded

Report Summary:

Mother and children cannot stay in their current home due to unsanitary and unsafe conditions. There are several broken windows and the toilet is backed up. Also, mother gets food stamps every month and sells the majority of them. Mother buys a minimum amount of food and spends the remainder on drugs and alcohol for herself and father. Additionally, mother has no diapers or formula for the younger children. Mother and father also fail to supervise the children allowing them to hang out the windows.

Determination: Unfounded

Date of Determination: 06/25/2012

Basis for Determination:

This report was consolidated into open intake 05/11/2012. Allegations were unfounded. Upon caseworker home visits all children were always properly supervised. Mother moved out of the home with her children because the landlord would not fix the broken toilet and would shut off the water because mother was using too much while doing laundry. Mother and children are currently living with maternal grandmother until a new apartment is ready. Mother and father deny selling their food stamps. Mother and father were always sober and coherent during home visits. Home was adequate and the children appeared safe at this time. Case was closed with no further CPS intervention .

OCFS Review Results:

N/A

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
08/23/2012	414-Sibling, Female, 1 Months	412-Father, Male, 27 Years	Inadequate Guardianship	Unfounded	No
	414-Sibling, Female, 1 Months	413-Mother, Female, 27 Years	Inadequate Guardianship	Unfounded	

Report Summary:

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The mother gave birth on 08/09/12. The mother was released from the hospital prior to the child. The child was scheduled to be released on 08/23/12, but the mother and father have not had contact with the hospital or the child since 08/19/12. Several attempts to make contact with the parents have been made and they have not returned phone calls or come to the hospital to pick the child up. The eight other children have unknown roles.

Determination: Unfounded **Date of Determination:** 09/19/2012

Basis for Determination:
 Allegations of IG, against mother and father were not substantiated. Upon investigation, it was revealed and confirmed by source that mother had phone contact with a Nurse 8/22/12 and was prepared for child when discharged to her on 8/23/12. Mother had all the needed supplies in the home. Mother has nine other children in the home and it was understood by hospital staff that she would not make regular hospital visits and, on days she could not make visits, she did maintain phone contact. Mother declined services at this time. Children appeared safe at this time.

OCFS Review Results:
 N/A

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
06/23/2014	444-Sibling, Male, 10 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded	No
	444-Sibling, Male, 10 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded	
	444-Sibling, Male, 10 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded	
	444-Sibling, Male, 10 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded	
	445-Sibling, Male, 9 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded	
	445-Sibling, Male, 9 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded	
	445-Sibling, Male, 9 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded	
	445-Sibling, Male, 9 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded	
	446-Sibling, Male, 8 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded	
	446-Sibling, Male, 8 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded	
	446-Sibling, Male, 8 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded	
	446-Sibling, Male, 8 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded	
	448-Sibling, Male, 3 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded	
	448-Sibling, Male, 3 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded	

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448-Sibling, Male, 3 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
448-Sibling, Male, 3 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
449-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded
449-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded
449-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
449-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
450-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded
450-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded
450-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
450-Sibling, Male, 2 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
451-Sibling, Female, 1 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded
451-Sibling, Female, 1 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded
451-Sibling, Female, 1 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
451-Sibling, Female, 1 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
453-Sibling, Male, 1 Years	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded
453-Sibling, Male, 1 Years	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded
453-Sibling, Male, 1 Years	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
453-Sibling, Male, 1 Years	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
461-Deceased Child, Male, 4 Months	442-Mother's Partner, Female, 29 Years	Excessive Corporal Punishment	Unfounded
461-Deceased Child, Male, 4 Months	442-Mother's Partner, Female, 29 Years	Inadequate Guardianship	Unfounded
461-Deceased Child, Male, 4 Months	442-Mother's Partner, Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
461-Deceased Child, Male, 4 Months	442-Mother's Partner, Female, 29 Years	Lack of Medical Care	Unfounded
462-Sibling, Female, 5	442-Mother's	Excessive Corporal	Unfounded

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Years	Partner,Female, 29 Years	Punishment	
462-Sibling,Female, 5 Years	442-Mother's Partner,Female, 29 Years	Inadequate Guardianship	Unfounded
462-Sibling,Female, 5 Years	442-Mother's Partner,Female, 29 Years	Lacerations / Bruises / Welts	Unfounded
462-Sibling,Female, 5 Years	442-Mother's Partner,Female, 29 Years	Lack of Medical Care	Unfounded

Report Summary:

The mother, parent substitute, live in a one bedroom apartment with ten children. The home is filthy with clutter and garbage throughout. The home is also infested with bedbugs that have left bites on all of the children. The children all have ring worm. The mother and parent substitute have left the ring worm untreated. The mother and father hit the children with a belt using excessive force as a form of discipline leaving bruises and welts. Two of the children, the twins, currently have marks on their backs.

Determination: Unfounded **Date of Determination:** 09/08/2014

Basis for Determination:

The allegations are unfounded. Caseworker observed the home free of any health or safety hazards during several unannounced home visits. The children had no suspicious marks or bruises. Mother denied using physical discipline in the home and was advised against doing so. Children do not have ring worm and mother denied ever having an issue with bedbugs. Services were offered and declined. The children appeared safe at this time. The case was closed with no further CPS intervention.

OCFS Review Results:

N/A

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

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

03/23/2011, SCR report referred to FAR. Allegations of IG and lack of supervision. against subject mother and father involving all the children stemming from the children being home from school with no adult supervision and being unkempt with dirty clothing. A subsequent report was received 04/6/2011 and was consolidated into the open FAR report. This report had allegations of IG and lacerations, bruises, welts against the mother involving the seven year old child. The mother reportedly became angry and bit the child leaving a mark. A grandmother, who lives upstairs, was found to provide care for the children after school and the younger children were in day care. Day care staff had no concerns. Alternative discipline was discussed with the mother. The children were determined safe. The case was closed 3/28/11

05/12/2011, SCR report with allegations of IG, lack of supervisor., and Parent's Drug/Alcohol misuse against mother and father. The report alleged the parents are drinking to intoxication/smoking marijuana while caring for the children and leaving the children home alone un-supervised. Upon investigation there was no credible evidence to support the parents were abusing alcohol/marijuana while caring for the children or leaving the children un-supervised. A grandmother and day care services were in place to provide care to the children while the parents were away. Preventive services were offered and declined. The report was unfounded and closed 5/27/11.

Known CPS History Outside of NYS

There is no known CPS history outside New York State.

Services Open at the Time of the Fatality

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 foster care placement 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.

Required Action(s)

Are there Required Actions related to the compliance issues for provision of Foster Care Services?

Yes No

Foster Care Placement History

There is no record of foster care placement 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 legal activity as a result of the fatality investigation?

Family Court Criminal Court Order of Protection

Have and Orders of Protection been issued? Yes

From: 08/17/2011

To: 11/17/2014

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