



Report Identification Number: NY-16-024

Prepared by: New York City Regional Office

Issue Date: 8/23/2016

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
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		

Case Information



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Report Type: Child Deceased
Age: 1 day(s)

Jurisdiction: Richmond
Gender: Female

Date of Death: 03/12/2016
Initial Date OCFS Notified: 03/14/2016

Presenting Information

The 3/14/16 report alleged that on 3/11/16, the mother gave birth at home to the newborn female infant. The mother cut the umbilical cord with a scissor. The infant took her first breath and moved. The mother went to the kitchen and got a trash bag. She then placed the infant inside the trash bag and then put the bag into the garbage can outside of the home. The infant was found dead outside of the home in the garbage can on 3/12/16 by the police.

Executive Summary

The 1-day-old female infant died on 3/12/16. As of 8/15/16, NYCRO has not received a copy of the autopsy report.

The allegations of the 3/14/16 report were DOA/Fatality and IG by the mother.

The ACS investigation revealed that on 3/11/16 between 6:00 PM and 6:30 PM, the mother gave birth to a female infant in the bathroom in the home. LE informed ACS that according to the mother, after she delivered the infant, she observed the infant moved. The mother cut the umbilical cord with a scissor and then obtained a garbage bag from the kitchen and threw the bag in the garbage outside of her home. While she threw out the bag, the maternal grandparents (MGPs) came home. The MGPs transported (by car) the mother to the hospital believing that the mother had symptoms of a pre-existing medical condition. The mother told her family that her stomach grew larger due to an illness. LE interviewed a male adult who the mother identified as the newborn infant's father. This father said he learned the mother was pregnant in December 2015 after a visit to the Dr. LE said neither parent had a plan to provide care for the infant. The father did not have knowledge of the mother disposing of the infant. LE said that the infant was likely born full term. When asked the reason she disposed of the infant's body, the mother repeatedly said her concerns were related to the MGF.

The MGF informed ACS that his female sibling and brother-in-law had been visiting the family in their home for about one week. The MGPs and the two visiting family relatives left the home and went shopping on 3/11/16. They returned to the home at about 6:30 PM. Upon their return to the home, the MGF said the mother was crying and there was a lot of blood everywhere. She said she needed to go to the Dr. The MGF said the mother again referred to a preexisting illness. They went upstairs into the bathroom and hallway and observed there was blood in several places. The mother cleaned herself, changed her clothes, and entered the family car. The MGF recalled that the mother reminded him she did not want to dirty the vehicle. He said the MGM placed bed sheets with a plastic bag so the mother could sit. He drove the mother and MGM to the hospital. The mother was admitted to the hospital. The MGPs left the hospital and returned home. The MGF said the mother did not mention to them that she had a baby. The MGF was under the impression that the mother was being kept at the hospital due to a preexisting illness. He said that on the morning of 3/12/16, LE arrived at the home and interviewed him regarding the reason the MGPs brought the mother to the hospital. At the police precinct he learned the mother had given birth.

On 3/17/16, the ME informed ACS that there were no signs of trauma to the infant. The infant's lungs appeared to be slightly expanded and there was some air in the stomach. The ME said the findings suggested that the infant was born alive.



The infant had no sibling. ACS staff observed the surviving 16-year-old MU and assessed there were no hazardous conditions in the home. On 3/15/16, ACS visited the 16-year-old MU's school and there were no concerns noted.

The CONNECTIONS record did not reflect that the Notice of Existence was provided to the mother and maternal grandparents within seven days of receipt of the 3/14/16 report. The ACS case record did not establish whether the agency interviewed the mother and attending physician. The 24-Hour and 7-day safety assessments were completed timely and adequately.

As of 8/15/16, the report has not yet been determined.

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? N/A
- 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? Unable to Determine

Explain:

Was the decision to close the case appropriate? Unknown

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:

Required Actions Related to the Fatality

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

Issue:	Failure to provide notice of report
Summary:	The documentation did not reflect that the Notice of Existence was provided to the mother and



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	maternal grandparents within seven days of receipt of the 3/14/16 report.
Legal Reference:	18 NYCRR 432.2(b)(3)(ii)(f)
Action:	ACS must submit a corrective action 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 the attending physician for the mother was interviewed.
Legal Reference:	18 NYCRR 432.2(b)(3)(ii)(b)
Action:	ACS must submit a corrective action 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:	Face-to-Face Interview (Subject/Family)
Summary:	The ACS case record did not reflect whether the agency interviewed the mother who was the subject of the 3/14/16 report.
Legal Reference:	18 NYCRR 432.2(b)(3)(ii)(a)
Action:	ACS must submit a corrective action 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: 03/12/2016

Time of Death: Unknown

Date of fatal incident, if different than date of death: 03/11/2016

Time of fatal incident, if different than time of death: 06:30 PM

County where fatality incident occurred:

RICHMOND

Was 911 or local emergency number called?

No

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

Working

Driving / Vehicle occupant

Playing

Eating

Unknown

Other



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

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

1

At time of incident supervisor was: Not impaired.

Total number of deaths at incident event:

Children ages 0-18: 1

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Aunt/Uncle	No Role	Male	16 Year(s)
Deceased Child's Household	Deceased Child	Alleged Victim	Female	1 Day(s)
Deceased Child's Household	Grandparent	No Role	Female	51 Year(s)
Deceased Child's Household	Grandparent	No Role	Male	54 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	28 Year(s)

LDSS Response

Following the receipt of the fatality report, ACS interviewed the MGF on 3/15/16. Initially, the MGF expressed reluctance to participate in the interview and he provided his attorney's name and contact information. As the interview progressed, the MGF denied he had knowledge of the mother's pregnancy. He said he recently visited a foreign country for five weeks and when he returned about two weeks prior to 3/14/16, he observed the mother had an enlarged stomach. He said he asked the mother the reason she appeared pregnant and the mother denied she was pregnant. The mother informed the MGF that she had a medical condition. The MGF told LE that the mother had an illness. He said the MGM, his sibling and brother-in-law had provided accounts of the case circumstances to LE.

The MGF said he knew the mother had a paramour because the mother and paramour had frequent telephone contacts. The MGF had not met the paramour. The MGF did not disclose the paramour's contact information to ACS and preferred the mother provide the information. He said the mother was very private and he had assumed the paramour was shy. According to the MGF, there was no concern about the mother having a relationship with a paramour.

On 3/15/16, the MGM informed ACS that she had not known the mother was pregnant. The MGM had observed the mother's stomach was larger but the mother claimed she had an illness. The MGM said the MGF, herself, and relatives went shopping; they returned home at about 6:30 PM on 3/11/16. Upon their return to the case address, they observed the mother had been crying and there was blood in the bathroom and in the hallway areas on the second floor of the house. The mother asked the MGF to take her to the hospital. She said the MGF wanted to call 911 but the mother did not agree. The MGM covered the seat of the car with bed sheets and a blue trash bag and they transported the mother to the hospital. She said that on 3/12/16, around 10:00 AM LE visited the case address and interviewed them regarding transporting the mother to the hospital. LE searched the home prior to taking the family to the precinct. The MGM then learned the mother had given birth on 3/11/16. The MGM said she would have immediately called 911 if she had any knowledge of the mother giving birth to the infant. The MGM said she was aware the mother had a paramour. She said had not met the



paramour.

The 16-year-old MU reported that he did not know the mother was pregnant. The family saw that mother's stomach had grown larger but when the grandparents questioned her she told them she had an illness. He last saw the mother on the morning of 3/11/16; she acted normal and seemed fine. He received a call from the adult MU on 3/12/16 informing him of the mother's arrest. He met with the adult MU and family at the police precinct. He said he did not know the paramour. He said the grandparents had a good relationship with the mother and they did not express concerns about the paramour. The MU declined counseling.

The adult MU informed ACS that he did not know the mother was pregnant. He said on the evening of 3/11/16, the mother called him crying and she said she was bleeding everywhere. He told her to call 911. When he arrived at the case address, they had already been transported to the hospital. He said the mother told him she had an illness. He learned of the mother giving birth when LE arrived on the morning of 3/12/16.

On 3/30/16, ACS informed the MGF that ACS could explore assisting with the burial of the infant. The MGF said the family would appreciate the assistance but he would need a religious burial for the infant. The 16-year-old MU declined counseling.

On 4/26/16, ACS interviewed the MGM who said the mother did not kill the infant and she just panicked, and put the infant in a bag. She stated this was a mistake and the mother was not thinking at the time. ACS continued to visit the family.

Official Manner and Cause of Death

Official Manner: Pending

Primary Cause of Death: Unknown

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
029141 - Deceased Child, Female, 1 Days	029142 - Mother, Female, 28 Year(s)	DOA / Fatality	Pending
029141 - Deceased Child, Female, 1 Days	029142 - Mother, Female, 28 Year(s)	Inadequate Guardianship	Pending



CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alleged subject(s) interviewed face-to-face?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All 'other persons named' interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Room Personnel	<input type="checkbox"/>	<input checked="" 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"/>
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 ACS case record did not reflect whether the mother and hospital physician was interviewed.

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



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district?				
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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
Was the risk assessment/RAP adequate in this case?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Legal Activity Related to the Fatality

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

Family Court

Criminal Court

Order of Protection

Criminal Charge: Murder **Degree:** 2

Date Charges Filed:	Against Whom?	Date of Disposition:	Disposition:
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Unknown	Mother	Unknown	Unknown
Comments:	The ACS case record showed that the mother was charged with concealment of a human corpse and murder.		

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 documentation reflected that ACS explored with Safe Horizon whether the maternal grandparents could be reimbursed for all or part of the burial expenses by the New York State Crime Victims Board.

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? No

Explain:

The 16-year-old MU declined services.



Were services provided to parent(s) and other care givers to address any immediate needs related to the fatality? No

Explain:

The mother was arrested on 3/13/16 and incarcerated. The maternal grandparents informed ACS that they were interested in burial assistance.

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? N/A
- 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

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

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

The mother was not known to the SCR or ACS.

Known CPS History Outside of NYS

There was no known CPS history outside of NYS.



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 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.

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 any legal activity within three years prior to the fatality investigation? There was no legal activity

Additional Local District Comments

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