



Report Identification Number: SV-16-044

Prepared by: Spring Valley Regional Office

Issue Date: Jul 03, 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
Age: 6 month(s)

Jurisdiction: Sullivan
Gender: Female

Date of Death: 10/15/2016
Initial Date OCFS Notified: 10/24/2016

Presenting Information

The subject child was born prematurely at 23 weeks gestation , at local hospital at 2:59AM on March 20, 2016. She weighed 13.8 oz. She was transferred to a hospital in Albany NICU at 4:20AM that same day, due to Respiratory Distress Syndrome. The subject remained at NICU in Albany until October 10, 2016 when she was transferred to a hospital in NYC. She died in the hospital in NYC five days later with a diagnoses of Pulmonary Arterial Hypertension (PAH).

Executive Summary

The family was receiving Preventive Services at the time of the fatality. On 10/19/16 during a phone call to check on the mother, Sullivan County Division of Family Services(SCDFS) learned that the SC had passed on at a hospital in NYC. The mother informed the worker that the SC was transferred to NYC and passed away on 10/15/16 at 2:30AM. During the course of investigation, SCDFS learned that the child was delivered at local hospital premature at approximately 23 weeks gestation, about six months prior and weighed 13.8oz. The child was transferred to a NICU in Albany at 4:20AM shortly after birth due to Respiratory distress syndrome. She remained in the NICU at an hospital in Albany until October 10, 2016 when she was transferred to another hospital in NYC where she passed away five days later with diagnosis of Pulmonary Arterial Hypertension (PAH).

SCDFS completed a home visit on 10/24/16 at the case address where met the mother and the siblings. The caseworker spoke to the mother about burial and funeral assistance for the subject child. The caseworker informed the mother that she had contacted The Tree Foundation for funeral funds, but none were available. SCDFS learned from the mother that Catholic Charities and the hospital were donating some money and her church donated a burial plot. SCDFS contacted all collaterals such as the hospital in Albany and the school for the surviving siblings. The worker learned from the school that the school did not have any concerns in regards to the SS. SCDFS also consulted with legal services to follow-up on the a temporary order of protection that the mother had filed against the father due to concerns with domestic violence. SCDFS contacted law enforcement to learn about another court matter pertaining to the father, unrelated to the child welfare case.

Findings Related to the CPS Investigation of the Fatality

Safety Assessment:

- **Was sufficient information gathered to make the decision recorded on the:**
 - **Safety assessment due at the time of determination?** 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?** N/A
- **Was the determination made by the district to unfound or indicate appropriate?** N/A

Explain:



N/A

Was the decision to close the case appropriate?

N/A

Was casework activity commensurate with appropriate and relevant statutory or regulatory requirements?

Yes

Was there sufficient documentation of supervisory consultation?

Yes, the case record has detail of the consultation.

Explain:

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

Incident Information

Date of Death: 10/15/2016

Time of Death: 02:30 AM

County where fatality incident occurred:

New York

Was 911 or local emergency number called?

No

Did EMS 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

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

Is the caretaker listed in the Household

Composition? No

At time of incident supervisor was: Unknown if they were 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
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Deceased Child's Household	Deceased Child	No Role	Female	6 Month(s)
Deceased Child's Household	Father	No Role	Male	39 Year(s)
Deceased Child's Household	Mother	No Role	Female	38 Year(s)
Deceased Child's Household	Other	No Role	Female	33 Year(s)
Deceased Child's Household	Other	No Role	Male	3 Year(s)
Deceased Child's Household	Other	No Role	Female	12 Year(s)
Deceased Child's Household	Other	No Role	Male	9 Year(s)
Deceased Child's Household	Other	No Role	Male	13 Year(s)
Deceased Child's Household	Other	No Role	Male	6 Year(s)
Deceased Child's Household	Other	No Role	Male	1 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Year(s)
Deceased Child's Household	Sibling	No Role	Female	6 Year(s)
Deceased Child's Household	Sibling	No Role	Female	4 Year(s)
Deceased Child's Household	Sibling	No Role	Male	3 Year(s)
Other Household 1	Other	No Role	Female	61 Year(s)

LDSS Response

On 10/19/16 during a phone call to check on the mother, the caseworker learned that the subject child had passed on at an hospital in NYC. The mother informed that the worker that the subject child was transferred to NYC and passed away on 10/15/16 at 2:30AM. The worker offered to help mother with finding money for funeral and burial expenses. The worker reached out to her agency and not for profit organizations in order to find money to help the mother with funeral and burial expenses. The worker met with the mother at the home address and discussed the funeral and burial for the deceased child. During the meeting the worker also asked the mother to sign a release form for the worker to get medical records, but the mother declined. The worker offered bereavement counseling to the mother, but she declined the services informing the worker that she had support from family members.

The worker learned from hospital staff in Albany that the subject child was transferred to a hospital in NYC on 10/10/16. The worker also reached out to the school to ascertain how the deceased child surviving sibling were doing in school and to find out what type of services they were receiving if any. The caseworker ascertained the surviving sibling were doing well in school and were receiving appropriate services and their attendance was good. The worker helped the mother with re-certification of her Medicaid by taking the filled out paperwork to SCDFS and following-up on the processing. SCDFS also followed-up with legal unit regarding an order of protection that was in place against the father. The worker referred the mother to Hudson Valley Legal Services to help her with concern she had with the landlord and helped the mother with her Section 8 housing issues. The worker also helped the mother with filling out her SNAP benefit paperwork and brought them the SCDFS and registered them for the mother.

Official Manner and Cause of Death

Official Manner: Pending

Primary Cause of Death: Unknown

Person Declaring Official Manner and Cause of Death: Hospital physician



Multidisciplinary Investigation/Review

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

CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
Coordination of investigation with law enforcement?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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? 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Mental health services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify: HEAP							

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 caseworker continued to monitor the case. Some of the siblings were receiving services for speech and physical therapy at the school. The worker ensured that the mother received SNAP, Section 8, HEAP and followed up with children's doctor. Three of the siblings attended Head Start.

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

Explain:

The mother was offered bereavement services, but he she declined. The father also declined the services.

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?** Yes
- Was the child acutely ill during the two weeks before death?** Yes



Infants Under One Year Old

During pregnancy, mother:

- Had medical complications / infections
- Misused over-the-counter or prescription drugs
- Experienced domestic violence
- Was not noted in the case record to have any of the issues listed
- Had heavy alcohol use
- Smoked tobacco
- Used illicit drugs

Infant was born:

- Drug exposed
- With neither of the issues listed noted in case record
- With fetal alcohol effects or syndrome

CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
11/16/2015	14655 - Sibling, Male, 3 Years	14651 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	No
	14655 - Sibling, Male, 3 Years	14651 - Mother, Female, 38 Years	Lack of Medical Care	Indicated	
	14654 - Sibling, Male, 4 Years	14651 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	
	14654 - Sibling, Male, 4 Years	14651 - Mother, Female, 38 Years	Lack of Supervision	Indicated	
	14655 - Sibling, Male, 3 Years	14651 - Mother, Female, 38 Years	Lack of Supervision	Indicated	

Report Summary:

This report was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Guardianship and Lack of Supervision on behalf of the then 2-year-old and 1-year-old surviving siblings and Lack of Medical Care on behalf of the 1-year-old regarding the mother. This report alleged the mother left the 2-year-old and 1-year-old alone during which time the 2-year-old repeatedly banged the 1-year-old's head against the wall. The 1-year-old sustained scratches on his face and his left eye was bloodshot. When the mother became aware of the incident and injuries, she failed to seek medical attention for the 1-year-old, and sent him to school.

Determination: Indicated **Date of Determination:** 12/10/2015

Basis for Determination:

Although the mother was home at the time of the incident, she left the children unsupervised resulting in the incident occurring and the 1-year-old sustaining injuries.

OCFS Review Results:

The family was working with a preventive worker at the time of case closure. There was follow-up to ensure requests by the caseworker were followed through with by the family. There were appropriate collateral contacts made.

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)
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10/27/2015	14663 - Other Child - Half-Sibling, Female, 12 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	Yes
	14664 - Other Child - Half-Sibling, Male, 9 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	14663 - Other Child - Half-Sibling, Female, 12 Years	14661 - Stepmother, Female, 33 Years	Lacerations / Bruises / Welts	Unfounded	
	14662 - Other Child - Half-Sibling, Male, 13 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	14665 - Other Child - Step-Mother's son, Male, 6 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	14666 - Other Child - Half-Sibling, Male, 3 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	
	14667 - Other Child - Half-Sibling, Male, 2 Years	14661 - Stepmother, Female, 33 Years	Inadequate Food / Clothing / Shelter	Unfounded	

Report Summary:

This case was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Food, Clothing, Shelter on behalf of the then 12-year-old, 10-year-old, 8-year-old 2-year-old, 11-month old half-siblings of and the 5-year-old son of the stepmother. Allegations of Lacerations, Bruises, Welts were also filed on behalf of the 10-year-old regarding the stepmother. This report alleged the children were dirty and unkempt. It was noted the children wear dirty clothing, have a foul odor and as a result, they are being ostracized at school by their peers. The 10-year-old had suspicious bruising on her cheek and above her eye.

Determination: Unfounded**Date of Determination:** 11/19/2015**Basis for Determination:**

The home was found to have been neat and clean during unannounced home visits. There was also ample food observed in the home. The children were found clean and were dressed appropriately. The bruising on the 10-year-old was noted to have been sustained when the 5-year-old threw a toy train at her. The pediatrician also noted no child welfare concerns.

OCFS Review Results:

This case replicated the 8/26/2015 case, which was investigated concurrently.

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

Issue:

Adequacy of Documentation of Safety Assessments

Summary:

There was no seven day assessment for this case in the system of record.

Legal Reference:

18 NYCRR432.2(b)(3)(ii)(c)&(iii)(b)

Action:

SCDFS must submit a program improvement plan within 30 days to address timely and accurate completion of seven day assessments.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
08/26/2015	14613 - Other Child - Half-Sibling, Male, 9 Years	14601 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	Yes
	14612 - Other Child - Half-Sibling, Female, 12 Years	14602 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded	



14612 - Other Child - Half-Sibling, Female, 12 Years	14601 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14611 - Other Child - Half-Sibling, Male, 13 Years	14602 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14613 - Other Child - Half-Sibling, Male, 9 Years	14602 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14611 - Other Child - Half-Sibling, Male, 13 Years	14602 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded
14613 - Other Child - Half-Sibling, Male, 9 Years	14602 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded
14611 - Other Child - Half-Sibling, Male, 13 Years	14601 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14621 - Other Child - Half-Sibling, Male, 3 Years	14601 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14612 - Other Child - Half-Sibling, Female, 12 Years	14602 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14621 - Other Child - Half-Sibling, Male, 3 Years	14602 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14621 - Other Child - Half-Sibling, Male, 3 Years	14602 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded
14681 - Other Child - Half-Sibling, Male, 23 Months	14601 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14681 - Other Child - Half-Sibling, Male, 23 Months	14602 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14681 - Other Child - Half-Sibling, Male, 23 Months	14602 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded

Report Summary:

This report was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Guardianship regarding the mother and father and Excessive Corporal Punishment regarding the father on behalf of the then 12-year-old, 10-year-old, 8-year-old 1-year-old and 9-month-old half-siblings. This report alleged the father hit the half-siblings with a hanger until it broke. It also alleged the half-siblings witnessed the mother beat up the step-mother, the mother and father engage in sexual activity, and the mother put an unknown substance in the father's coffee causing him to act in an out of control manner.

Determination: Unfounded

Date of Determination: 12/21/2015

Basis for Determination:

There was no credible evidence to substantiate the allegations. The investigation conclusion narrative stated that some of the allegations listed on this report were investigated previously and were unfounded. There was also conflicting information reported by the children and adults named in the report. Law enforcement closed their case finding no criminality.

OCFS Review Results:

Family was receptive to preventive services and was accepting services within the community. Early intervention referral also made.

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

Issue:

Timeliness of Determination

**Summary:**

This case was opened from 8/26/2015 through 12/30/2015, 66-days past the 60-day mandate.

Legal Reference:

SSL 424(7);18 NYCRR 432.2(b)(3)(iv)

Action:

SCDFS will submit a program improvement plan to the Office of Children and Family Services to address timely determinations within thirty days of the report being issued.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
05/15/2015	14493 - Sibling, Female, 6 Years	14491 - Mother, Female, 38 Years	Other	Indicated	Yes
	14493 - Sibling, Female, 6 Years	14491 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Indicated	
	14496 - Sibling, Male, 3 Years	14492 - Father, Male, 39 Years	Other	Indicated	
	14493 - Sibling, Female, 6 Years	14492 - Father, Male, 39 Years	Inadequate Guardianship	Indicated	
	14493 - Sibling, Female, 6 Years	14492 - Father, Male, 39 Years	Other	Indicated	
	14493 - Sibling, Female, 6 Years	14492 - Father, Male, 39 Years	Sexual Abuse	Indicated	
	14495 - Sibling, Male, 4 Years	14491 - Mother, Female, 38 Years	Other	Indicated	
	14495 - Sibling, Male, 4 Years	14492 - Father, Male, 39 Years	Other	Indicated	
	14494 - Sibling, Female, 4 Years	14491 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	
	14494 - Sibling, Female, 4 Years	14491 - Mother, Female, 38 Years	Other	Indicated	
	14494 - Sibling, Female, 4 Years	14491 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Indicated	
	14494 - Sibling, Female, 4 Years	14492 - Father, Male, 39 Years	Sexual Abuse	Indicated	
	14496 - Sibling, Male, 3 Years	14491 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	
	14496 - Sibling, Male, 3 Years	14491 - Mother, Female, 38 Years	Other	Indicated	
	14493 - Sibling, Female, 6 Years	14491 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	
	14496 - Sibling, Male, 3 Years	14491 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Indicated	
	14495 - Sibling, Male, 4 Years	14491 - Mother, Female, 38 Years	Inadequate Guardianship	Indicated	
14495 - Sibling, Male, 4 Years	14491 - Mother, Female, 38 Years	Parents Drug /	Indicated		



Years	38 Years	Alcohol Misuse	
14495 - Sibling, Male, 4 Years	14492 - Father, Male, 39 Years	Inadequate Guardianship	Indicated
14494 - Sibling, Female, 4 Years	14492 - Father, Male, 39 Years	Inadequate Guardianship	Indicated
14494 - Sibling, Female, 4 Years	14492 - Father, Male, 39 Years	Other	Indicated
14496 - Sibling, Male, 3 Years	14492 - Father, Male, 39 Years	Inadequate Guardianship	Indicated

Report Summary:

This report was called in to the SCR listing allegations of Inadequate Guardianship, and sexual abuse regarding the father on behalf of the then 4-year-old, and 3-year-old surviving siblings. This report alleged the father touched the 4-year-old and 3-year-old inappropriately resulting in sore vaginal area. Allegations of Parents Drug/Alcohol Misuse, and Other, regarding the mother and father were added to the report on behalf of the 4-year-old, 3-year old, 2-year-old and 1-year-old surviving siblings following an additional SCR report that was merged.

Determination: Indicated

Date of Determination: 08/20/2015

Basis for Determination:

There was a stay away order of protection against the father, however he was found in the home while this order was still active. The mother was also transported via ambulance to a local hospital where she was admitted and treated for an overdose. The children were observed dirty, and had untreated Eczema. SCDFS and Police made arrangements for the children to be cared for by the maternal grandmother. The mother has a long history of substance abuse and has failed to engage in treatment, and has been non-compliant with treatment for her mental health diagnosis.

OCFS Review Results:

On 7/17/2015, the father was arrested for violating the order of protection and the mother overdosed and was taken to a local hospital for treatment. SCDFS and law enforcement officials arranged for the maternal grandmother to care for the children. The home was observed to be filthy, and the children remained in the home. The youngest child was noted to have a bad case of untreated Eczema. A neglect petition was filed in Family Court regarding the home conditions. The maternal aunt was staying at the home with the mother and the children. The family began the process of cleaning up the home.

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

Issue:

Timely/Adequate Seven Day Assessment

Summary:

There was no documented seven day safety assessment in the current system of record.

Legal Reference:

SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)

Action:

SCDFS must submit a program improvement plan to OCFS to address the citation in regard to Timely/Adequate Seven Day Assessment in this report within thirty days of the report being issued.

Issue:

Timeliness of Determination

Summary:

This investigation was opened from 5/15/2015 through 8/20/2015, 37-days past the 60-day mandate.

Legal Reference:

SSL 424(7);18 NYCRR 432.2(b)(3)(iv)

**Action:**

SCDFS will submit a corrective action plan to address Timeliness of Determination within thirty days of the report being issued.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
03/25/2015	14475 - Other Child - Half-Sibling, Female, 12 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	Yes
	14477 - Sibling, Female, 6 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14479 - Sibling, Male, 4 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14480 - Sibling, Male, 3 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14479 - Sibling, Male, 4 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14475 - Other Child - Half-Sibling, Female, 12 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14476 - Other Child - Half-Sibling, Male, 9 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14477 - Sibling, Female, 6 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14480 - Sibling, Male, 3 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14479 - Sibling, Male, 4 Years	14471 - Mother, Female, 38 Years	Excessive Corporal Punishment	Unfounded	
	14474 - Other Child - Half-Sibling, Male, 13 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14475 - Other Child - Half-Sibling, Female, 12 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14477 - Sibling, Female, 6 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14480 - Sibling, Male, 3 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14478 - Sibling, Female, 4 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14479 - Sibling, Male, 4 Years	14471 - Mother, Female, 38 Years	Lacerations / Bruises / Welts	Unfounded	
	14479 - Sibling, Male, 4 Years	14472 - Father, Male, 39 Years	Lacerations / Bruises / Welts	Unfounded	
	14474 - Other Child - Half-Sibling, Male, 13 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14476 - Other Child - Half-Sibling, Male, 9 Years	14471 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14478 - Sibling, Female, 4	14471 - Mother,	Inadequate	Unfounded	



Years	Female, 38 Years	Guardianship	
14476 - Other Child - Half-Sibling, Male, 9 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14478 - Sibling, Female, 4 Years	14472 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14474 - Other Child - Half-Sibling, Male, 13 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14479 - Sibling, Male, 4 Years	14472 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14479 - Sibling, Male, 4 Years	14472 - Father, Male, 39 Years	Excessive Corporal Punishment	Unfounded

Report Summary:

This report was called in to the SCR listing allegations of Inadequate Guardianship, Parent's Drug/Alcohol Misuse, Excessive Corporal Punishment and Lacerations Bruises Welts regarding the mother and father on behalf of the then 4-year-old, 3-year-old, 2-year-old and 1-year-old surviving siblings and 11-year-old, 10-year-old and 9-year-old half-siblings. This report alleged the father abuses alcohol, bath salts, Adderall, Ritalin and other pills with alcohol, and the mother puts the pills in the fathers drink for him, causing the father to hallucinate. The father tried to teach the 10-year-old about sex, gave the 11-year-old alcohol and physically discipline the 2-year-old leaving marks.

Determination: Unfounded

Date of Determination: 05/04/2015

Basis for Determination:

The father had passed two drug tests since the initiation of the investigation, and the mother had also passed a drug test and was engaged in services. There had been several unannounced visits to the home in which neither the mother nor the father appeared to have been under the influence. The children's reports of the alleged incidents differ from that of the original allegation.

OCFS Review Results:

The investigation conclusion narrative replicated the 2/6/2015 investigation. There were concerns regarding the 4-year-old sibling wanting to touch her male siblings and father's private parts. This child was listed as participant in the 4/8/15 visit, but the concern was not discussed nor notes entered regarding this child. The 10-year-old half-sibling reported feeling unsafe in the father's care. She also reported seeing the father sniff white powder and bath salts off of a spoon, and the substances came from Ziploc baggies taped to the inside of a fuse box. The 11-year-old half-sibling reported the father had been acting "crazy," and stated that he would rather reside with his mother.

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

Issue:

Timely/Adequate Seven Day Assessment

Summary:

The 7-day safety assessment was submitted on 4/27/15 and approved on 5/4/2015.

Legal Reference:

SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)

Action:

SCDFS will submit a program improvement plan within 30 days to address Timely/Adequate Seven Day Assessments.

Issue:

Adequacy of Risk Assessment Profile (RAP)

Summary:

The risk assessment profile does not indicate the father's untreated mental health concern, sexual behaviors of the then 4-year-old sibling, the siblings observation of the father sniffing substances off a spoon and hiding the contents in a fuse



box, or the children's reports of feeling unsafe with the father.

Legal Reference:

18 NYCRR 432.2(d)

Action:

SCDFS must submit a program improvement plan within 30 days to address the Adequacy of Risk Assessments.

Issue:

Appropriateness of allegation determination

Summary:

The 4-year-old female sibling was reported to have been asking the siblings to touch their private parts, and had inappropriately touched the father while he was asleep. She was listed as a participant in the 4/8/15 home visit, but there were no entries regarding her and the specific concerns regarding her were not addressed.

Legal Reference:

18 NYCRR 432.2(b)(3)(iii)(c)

Action:

SCDFS must submit a program improvement plan within 30 days to address Appropriateness of Allegation Determinations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
02/06/2015	14453 - Sibling, Male, 3 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	Yes
	14453 - Sibling, Male, 3 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14454 - Sibling, Male, 4 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14454 - Sibling, Male, 4 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14455 - Sibling, Female, 4 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14456 - Sibling, Female, 6 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14456 - Sibling, Female, 6 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14457 - Other Child - Half-Sibling, Male, 13 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14457 - Other Child - Half-Sibling, Male, 13 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14458 - Other Child - Half-Sibling, Female, 12 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14459 - Other Child - Half-Sibling, Male, 9 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14459 - Other Child - Half-Sibling, Male, 9 Years	14451 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14453 - Sibling, Male, 3 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	

14454 - Sibling, Male, 4 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14455 - Sibling, Female, 4 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14455 - Sibling, Female, 4 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14456 - Sibling, Female, 6 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14456 - Sibling, Female, 6 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14457 - Other Child - Half-Sibling, Male, 13 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14458 - Other Child - Half-Sibling, Female, 12 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14459 - Other Child - Half-Sibling, Male, 9 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14459 - Other Child - Half-Sibling, Male, 9 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded
14455 - Sibling, Female, 4 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14458 - Other Child - Half-Sibling, Female, 12 Years	14451 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14453 - Sibling, Male, 3 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14454 - Sibling, Male, 4 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14457 - Other Child - Half-Sibling, Male, 13 Years	14452 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14458 - Other Child - Half-Sibling, Female, 12 Years	14452 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded

Report Summary:

This report was called in to the SCR listing allegations of Inadequate Guardianship and Parent's Drug/Alcohol Misuse regarding the mother and father on behalf of the then 4-year-old, 3-year-old, 3-year-old and 1-year old surviving siblings and 11-year-old, 10-year-old and 8-year-old half-siblings. This report alleged the mother and father were engaged in a physical altercation at the home while under the influence of bath salts. The children were noted to have been present when the mother slapped the father, who then kicked the mother in the stomach before choking each other.

Determination: Unfounded

Date of Determination: 04/30/2015

Basis for Determination:

The interviews with the children were inconsistent with the allegations of the report. The father had also screened negative in 2 drug tests since the initiation of the investigation. The mother attended a program and had also passed a drug test. Neither the mother nor father appeared to have been under the influence of any drugs/alcohol at any time during unannounced visits.

OCFS Review Results:

The family declined offered services. The father's mental health issues have still gone unaddressed as noted in the investigation conclusion stating concerns regarding behaviors around the children and comments he had made to them;



suspicious police activity and refusal to seek treatment. Both the mother and step-mother were warned not to have the father in the children's presence if he acted erratically or appeared to have been under the influence. The home was disorganized and cluttered upon the first unannounced home visit. Caseworker noted in a 2/11/2015 note that the family was asked to clean the home and remove broken glass on the front porch.

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

Issue:

Timeliness of Determination

Summary:

The investigation ran from 2/6/2015 through 4/30/2015, 23-days past the 60-day mandate.

Legal Reference:

SSL 424(7);18 NYCRR 432.2(b)(3)(iv)

Action:

SCDFS must submit a program improvement plan within 30 days to address Timely Determinations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
11/19/2014	14432 - Sibling, Female, 4 Years	14428 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	No
	14433 - Sibling, Male, 4 Years	14428 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14434 - Sibling, Male, 3 Years	14428 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14432 - Sibling, Female, 4 Years	14429 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14433 - Sibling, Male, 4 Years	14429 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14434 - Sibling, Male, 3 Years	14429 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14672 - Other Child - Half-Sibling, Male, 23 Months	14429 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14672 - Other Child - Half-Sibling, Male, 23 Months	14428 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	

Report Summary:

The report was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Guardianship regarding the mother and father on behalf of the 21-day-old half-sibling, the 2-year-old, 1-year-old and 1-year-old siblings. This report alleged the father and step-mother got into an argument that escalated into a physical altercation whereby the step-mother sustained injuries requiring medical attention. This incident was said to have occurred in front of the children. The mother was said to have been a witness to the incident, however failed to intervene.

Determination: Unfounded

Date of Determination: 04/14/2015

Basis for Determination:

SCDFS indicated the allegations listed on the report on 1/6/2015, however after administrative review, the case was overturned. The children were present for the incident, and the step-mother did sustain injuries. The police were involved, and the step-mother was treated at the hospital for her injuries.

OCFS Review Results:



The home was noted in deplorable conditions and has remained that way since the August 2014 investigation. While a neglect petition could not be filed based on the domestic incident, it may have been possible to file regarding the condition of the home. Prior history indicated the children's hands and feet were stained black from the filthy conditions of the home, and each home visit speaks to the cleanliness however nothing was done to ensure the safety and risk to the children. The investigation determination safety assessment noted the home is often in a deplorable state. It also noted the untreated mental health concerns of the mother and father, however no actions were documented.

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)
10/14/2014	14424 - Sibling, Female, 4 Years	14421 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	Yes
	14425 - Sibling, Male, 4 Years	14421 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14426 - Sibling, Male, 3 Years	14421 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14423 - Sibling, Female, 6 Years	14422 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14424 - Sibling, Female, 4 Years	14422 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14424 - Sibling, Female, 4 Years	14422 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14426 - Sibling, Male, 3 Years	14422 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14426 - Sibling, Male, 3 Years	14422 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14423 - Sibling, Female, 6 Years	14421 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14424 - Sibling, Female, 4 Years	14421 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14426 - Sibling, Male, 3 Years	14421 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14425 - Sibling, Male, 4 Years	14422 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded	
	14425 - Sibling, Male, 4 Years	14422 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded	
	14423 - Sibling, Female, 6 Years	14421 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	
	14425 - Sibling, Male, 4 Years	14421 - Mother, Female, 38 Years	Parents Drug / Alcohol Misuse	Unfounded	
14423 - Sibling, Female, 6 Years	14422 - Father, Male, 39 Years	Parents Drug / Alcohol Misuse	Unfounded		

Report Summary:

This report was called in to the SCR listing allegations of Inadequate Guardianship and Parent's Drug/Alcohol Misuse regarding the mother and the father on behalf of the then 3-year-old, 2-year-old, 1-year-old and 8-month-old surviving



siblings. This report alleged the father has untreated mental health issues that affect his ability to care for the children. It was also alleged the mother and father snort pills until impairment in the presence of the children. The house was also said to have been filthy and unsanitary with garbage, dirty clothing and other items strewn throughout the home, and the floors were covered in dirt, posing a health hazard to the children.

Determination: Unfounded **Date of Determination:** 02/06/2015

Basis for Determination:
The case was determined by SCDFS to be indicated for the unsanitary conditions of the home. This decision was later overturned. The allegations Parent's Drug/Alcohol Misuse were unsubstantiated as there was no credible evidence to support that there was drug use in the home.

OCFS Review Results:
OCFS is in agreement with the decision to offer services to the family, however an FSS should have been created to ensure the family is following-up. The conditions of the home were also found to be unsanitary, and the allegation of Inadequate Guardianship was indicated by the local district. The investigation conclusion stated that the home was once cleaned to an acceptable level, but was not maintained at that standard. It also appeared as though the presence of the father had a negative impact on the cleanliness of the home. The fathers mental health condition and status remained unknown throughout the investigation.

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

Issue:
Overall Completeness and Adequacy of Investigation
Summary:
The allegations of Parent's Drug/Alcohol Use was never discussed with the mother. A 10/20/2014 supervisory directive stated for the caseworker to find out if the mother was snorting drugs as indicated on the SCR report. An 11/18/2014 interview with the step-mother indicated the mother and father were abusing prescription medications. There is also a history of drug abuse regarding the mother.
Legal Reference:
SSL 424.6; 18 NYCRR 432.2(b)(3) and 18 NYCRR 432.2 (b)(3)(iii)(c)
Action:
SCDFS must submit a program improvement plan within 30 days to address Overall Completeness and Adequacy of Investigations.

Issue:
Diligence of Efforts
Summary:
No effort was made to see the newborn half-sibling who was residing in the home. An 11/5/2014 contact with the hospital social worker indicated the child would likely be discharged on 11/6/2014. This plan for this child was to reside with the father. The child was added to the household composition, however was not seen. The home also appeared to have been a health hazard to the children.
Legal Reference:
NYCRR 430.12D
Action:
SCDFS must submit a program improvement plan within 30 days address Diligence of Efforts in investigations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
08/06/2014	14403 - Sibling, Female, 6 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded	Yes

14405 - Sibling, Male, 4 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14411 - Other Child - Half-Sibling, Male, 3 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14413 - Sibling, Male, 3 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14404 - Sibling, Female, 4 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14411 - Other Child - Half-Sibling, Male, 3 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14409 - Other Child - Half-Sibling, Female, 12 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14404 - Sibling, Female, 4 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14405 - Sibling, Male, 4 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14411 - Other Child - Half-Sibling, Male, 3 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14412 - Other Child - Step-Mother's son, Male, 6 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14413 - Sibling, Male, 3 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14403 - Sibling, Female, 6 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14404 - Sibling, Female, 4 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14412 - Other Child - Step-Mother's son, Male, 6 Years	14402 - Father, Male, 39 Years	Inadequate Guardianship	Unfounded
14403 - Sibling, Female, 6 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14405 - Sibling, Male, 4 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14412 - Other Child - Step-Mother's son, Male, 6 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14413 - Sibling, Male, 3 Years	14407 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded
14410 - Other Child - Half-Sibling, Male, 9 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded
14408 - Other Child - Half-Sibling, Male, 13 Years	14401 - Mother, Female, 38 Years	Inadequate Guardianship	Unfounded

Report Summary:

This report was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Guardianship regarding the mother, father and step-mother on behalf of the surviving then 3-year-old, 2-year-old, 1-year-old and 8-month-old siblings, 11-year-old, 9-year-old, 7-year-old and 9-month old half siblings as well as a 4-year-old child unrelated to the subject child. This report alleged the mother had a long history of



noncompliance with mental health concerns, and had overdosed on Adderoll pills. The mother was pulled over by police as a result and was aggressive with them resulting in her being admitted to a local hospital.

Determination: Unfounded

Date of Determination: 10/17/2014

Basis for Determination:

The mother was alone in the car when she was arrested and not with any of the children. Although there is no narrative in the investigation conclusion section, case notes state that a police report provided confirmed the mother was arrested and the children were not involved.

OCFS Review Results:

There was an FSI stage opened on 10/20/2014 that indicated the stage was opened accidentally. The case indicated it was open for services, however there was no open FSS stage, and there was no documented conversation regarding services with the family noted. It also appears as though the family did not clean up the home as instructed, and the children were found in the home and noted to have filthy hands and feet from the dirty home. The case notes also indicated the father's untreated mental health concerns and erratic behaviors, yet nothing was done to ensure he was an adequate caretaker for the children.

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

Issue:

Timely/Adequate Seven Day Assessment

Summary:

No safety factors were checked on the 7-day safety assessment. The subject mother was not interviewed. The source was not contacted. Two of the children listed on the report were not seen. The children were not interviewed when observed, and it is unclear if the then 11-year-old, 9-year-old and 7-year-old half-siblings were seen during a home visit.

Legal Reference:

SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)

Action:

SCDFS must submit a program improvement plan within 30 days to address Timely/Adequate Seven Day Assessments.

Issue:

Failure to offer services

Summary:

The record clearly documented the father suffered from mental health concerns. The mother also suffers from mental health concerns, and attempted suicide. The home was noted to have been filthy and an informal arrangement for the children was made, but not followed up with. No services were offered to the family. Case open-services was noted, however there is no indication of this.

Legal Reference:

SSL §424(10);18 NYCRR 432.3(p)

Action:

SCDFS must submit a program improvement plan within 30 days to address Failure to Offer Services.

Issue:

Timeliness of Determination

Summary:

The case was opened on 8/6/2014, and closed on 10/20/2014, 15-days after the 60-day mandate.

Legal Reference:

SSL 424(7);18 NYCRR 432.2(b)(3)(iv)

Action:

SCDFS must submit a program improvement plan within 30 days to address Timely Determinations.

Issue:



Timely/Adequate Seven Day Assessment

Summary:

The county did not complete timely/adequate seven day assessment.

Legal Reference:

SSL 424(3);18 NYCRR432.2(b)(3)(ii)(c)

Action:

SCDFS must submit a program improvement plan within 30 days to address timely and adequate seven day assessments.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
01/15/2014	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Inadequate Guardianship		No
	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Lack of Supervision	Unfounded	
	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Lack of Medical Care	Unfounded	
	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Lack of Supervision	Unfounded	
	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Inadequate Guardianship	Unfounded	
	14444 - Other Child - Half-Sibling, Male, 3 Years	14442 - Stepmother, Female, 33 Years	Lack of Medical Care		

Report Summary:

This report was called in to the New York Statewide Central Register of Child Abuse and Maltreatment listing allegations of Inadequate Guardianship, Lack of Medical Care, and Lack of Supervision regarding the step-mother on behalf of the then 3-month-old half-sibling. This report alleged the unrelated 3-year-old child of the step-mother's was brought to the hospital for treatment. The step-mother brought the half-sibling and left him unattended in the hospital room, and did not appropriately plan for the half-sibling. As a result, the half-sibling did not have his Asthma medications and the step-mother also ran out of formula for him.

Determination: Unfounded

Date of Determination: 04/10/2014

Basis for Determination:

The allegations of Inadequate Guardianship and Lack of Supervision were substantiated regarding the step-mother by the Local District. This decision was overturned upon Administrative Review. The step-mother admitted to leaving the half-sibling unattended on a few occasions, one being 30-minutes long. Since the 3-year-old's discharge, the step-mother is back home with the 3-year-old and half-sibling and appropriate provisions were noted to have been in place.

OCFS Review Results:

The step-mother was working with Public Health Nursing at the time of case closure.

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

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

The family has history dating back to 9/14/2007 listing unsubstantiated allegations of Inadequate Guardianship, Parent's Drug/Alcohol Misuse, Other, Sexual Abuse, Choking, Twisting, Shaking and Lacerations, Bruises, Welts regarding the father, step-mother, and paternal grandmother. There are also unsubstantiated allegations of Lack of Supervision and Inadequate Food, Clothing, Shelter, regarding the step-mother, and the step-mother's mother from 3/1/2012.



Known CPS History Outside of NYS

There is no known history regarding this family outside of New York State.

Services Open at the Time of the Fatality

Was the deceased child(ren) involved in an open preventive services case at the time of the fatality? Yes

Date the preventive services case was opened: 06/09/2015

Evaluative Review of Services that were Open at the Time of the Fatality

	Yes	No	N/A	Unable to Determine
Was there information in the case record that indicated the existence of behaviors or conditions that placed the children in the case in danger or increased their risk of harm?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Family Assessment and Service Plan (FASP)

	Yes	No	N/A	Unable to Determine
Was the most recent FASP approved on time?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If not, how many days was it overdue? The initial and comprehensive FASP were due on 7/16/15 and 9/14/15 respectively, but were approved on 7/20/15 and 9/22/15 respectively.				
Was there a current Risk Assessment Profile/Risk Assessment in the most recent FASP?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Provider

	Yes	No	N/A	Unable to Determine
Were Services provided by a provider other than the Local Department of Social Services?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional information, if necessary: SCFC had ordered preventive services for the family on 06/09/15. The mother cooperated with the services, but the father refused and a violation petition was filed against them. There were also preventive services offered through CACHE, for the condition of the home, Community Services (MH), Synergy, and the Recovery Center.				

Required Action(s)



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

Yes No

Preventive Services History

On June 9, 2015, Sullivan County Division of Family Services (SCDFS) received a court order from Sullivan Family Court for preventive services to provided to the family. According to the reviewed case notes, the mother had go to family court for intervention because she and the kid father were having "communication issues." The mother stated to the caseworker that she and her paramour have been physically violent to each other. The ordered that the mother be provided with preventive services. The mother and her 6yrs, 4yrs, 3yrs, and 2yr-old children. The preventive service case is still open. The initial and comprehensive FASP was due on 7/16/15 and 9/14/15 for the 6/15/15 case, but were approved on 7/20/15 and 9/22/15 respectively by the county. The initial and comprehensive FASP for 10/21/15 case was due 2/24/16 and 4/24/16, but were approved on 5/12/16 and 5/16/16 respectively. The FASP assessment for 10/21/15 was due on 8/22/16, but was approved by the county on 9/27/16.

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?

Family Court Criminal Court Order of Protection

Family Court Petition Type: FCA Article 10 - CPS

Date Filed:	Fact Finding Description:	Disposition Description:
Unknown	Adjudicated Neglected	There was not a disposition
Respondent:	035426 Mother Female 38 Year(s)	
Comments:	The record is not thoroughly documented regarding this petition.	

Have any Orders of Protection been issued? Yes

From: 05/15/2015 **To:** Unknown

Explain:
The mother had obtained an order of protection against her boyfriend, who is the father of the subject child alleging that he had verbally and physical abused her.



Additional Local District Comments

N/a

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