



**Report Identification Number: AL-16-004**

**Prepared by: Albany Regional Office**

**Issue Date: Jul 31, 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

<b>Relationships</b>		
BM-Biological Mother	SM-Subject Mother	SC-Subject Child
BF-Biological Father	SF-Subject Father	OC-Other Child
MGM-Maternal Grand Mother	MGF-Maternal Grand Father	FF-Foster Father
PGM-Paternal Grand Mother	PGF-Paternal Grand Father	DCP-Day Care Provider
MGGM-Maternal Great Grand Mother	MGGF-Maternal Great Grand Father	PGGF-Paternal Great Grand Father
PGGM-Paternal Great Grand Mother	MA/MU-Maternal Aunt/Maternal Uncle	PA/PU-Paternal Aunt/Paternal Uncle
FM-Foster Mother	SS-Surviving Sibling	PS-Parent Sub
CH/CHN-Child/Children		
<b>Contacts</b>		
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-Cardiopulmonary Resuscitation		
<b>Allegations</b>		
FX-Fractures	II-Internal Injuries	L/B/W-Lacerations/Bruises/Welts
S/D/S-Swelling/Dislocation/Sprains	C/T/S-Choking/Twisting/Shaking	B/S-Burns/Scalding
P/Nx-Poisoning/ Noxious Substance	XCP-Excessive Corporal Punishment	PD/AM-Parent's Drug Alcohol Misuse
CD/A-Child's Drug/Alcohol Use	LMC-Lack of Medical Care	EdN-Educational Neglect
EN-Emotional Neglect	SA-Sexual Abuse	M/FTTH-Malnutrition/Failure-to-thrive
IF/C/S-Inadequate Food/ Clothing/ Shelter	IG-Inadequate Guardianship	LS-Lack of Supervision
Ab-Abandonment	OTH/COI-Other	
<b>Miscellaneous</b>		
IND-Indicated	UNF-Unfounded	SO-Sexual Offender
Sub-Substantiated	Unsub-Unsubstantiated	DV-Domestic Violence
LDSS-Local Department of Social Service	ACS-Administration for Children's Services	NYPD-New York City Police Department
PPRS-Purchased Preventive Rehabilitative Services	TANF-Temporary Assistance to Needy Families	FC-Foster Care
MH-Mental Health	ER-Emergency Room	COS-Court Ordered Services
OP-Order of Protection	RAP-Risk Assessment Profile	FASP-Family Assessment Plan
FAR-Family Assessment Response	Hx-History	Tx-Treatment
CAC-Child Advocacy Center	PIP-Program Improvement Plan	yo- year(s) old



## Case Information

**Report Type:** Child Deceased  
**Age:** 1 year(s)

**Jurisdiction:** Albany  
**Gender:** Male

**Date of Death:** 06/02/2015  
**Initial Date OCFS Notified:** 02/17/2016

## Presenting Information

On 2/17/16, it was reported the children resided with their mother and while the children were on visitation with their father on 6/2/15, the father put the 1 year old and 2 year old children in the bathtub with water to bathe them. The father left both children unsupervised in the bathtub to cook food in the kitchen. It is unknown how long they were left unattended and when the father returned to the bathroom, the 1 year old was floating unresponsive facedown in the bathtub. The father attempted to resuscitate the child, but was unsuccessful. The child died on 6/2/15 as a result of drowning. The 2 year old was not harmed.

## Executive Summary

This report involves the death of a one-year-old male child (SC) in Albany County. The SC's death occurred on 6/2/15. In June of 2015 the death was reported to the SCR. The report was investigated by the Albany County Department of Children Youth and Families (ACDCYF) and a fatality report was issued. On 2/17/16, ACDCYF received a SCR report reporting the death of the same 1-year-old male child. The report received on 2/17/16 alleged that on 5/31/15 during a visit with their father, he left his two children; 1-year-old (SC) and 2-year-old (SS) alone in a bathtub full of water while he went to the kitchen to check on cooking food. When the father returned, he found the SC floating on his back and unresponsive. The SS was not harmed. On 6/2/15, the SC was removed from life support and pronounced dead. In June 2015 following the death of the SC, the SS returned to the home of the mother. Initially all SS's visitations with the father were stopped and subsequently there was a modification of the prior Family Court Order whereby the father was granted supervised visitation with the SS. A Preventive Services case was opened on 9/21/15 for one year for long term monitoring and services. Concerns regarding both parents' ability to provide adequate care for the children due to their developmental delays and limitations have been expressed and were addressed through service providers. Before the death of the SC, the mother and father conceived a child and the mother gave birth to a male child in 10/2015. The father engaged in ongoing supervised visitation with the SS and his newborn son. On 5/10/16, the father was granted unsupervised visits from Fridays at 5pm until Saturday at 5pm with one child per visit and he was not allowed to bathe the children. On 3/24/17, the services case was closed. The parents had a history of DV. Albany City Court issued a stay away OOP against the father in June 2012 and remained in effect until September 2014. The order was granted following an incident between the parents whereby the mother sustained a broken nose. At the time the OOP was issued, the mother was pregnant with the SS. Despite the OOP, the parents continued to have contact and conceived the SC. The mother of the SC had a history of homelessness and often resided in a shelter. The MGM was a resource for the mother and the mother often resided with her. Since the birth of the SC, the mother was present when the father visited the children. The father petitioned the Albany City Court for visitation and he was granted unsupervised visitation on April 13, 2015. Prior to the death of the SC, the father had 4 weekends of unsupervised visitation. The father resided with a church member and that individual reported no concerns with the father and the care he provided for the children. She was not home at the time of the SC's drowning. The mother of the SC had spent time with the father and children during the father's visitation the weekend of the incident that resulted in the SC's death. She



provided details around the time she spent with the father and children and she did not identify any concerns.

On 6/28/16, ACDCYF determined the 2/17/16 report to be indicated against the father for IG, LOS and DOA/Fatality regarding the SC and the allegations of IG and LOS regarding the SC and SS were substantiated.

## Findings Related to the CPS Investigation of the Fatality

### Safety Assessment:

- **Was sufficient information gathered to make the decision recorded on the:**
  - **Approved Initial Safety Assessment?** Yes
  - **Safety assessment due at the time of determination?** Yes
- **Was the safety decision on the approved Initial Safety Assessment appropriate?** Yes

### Determination:

- **Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation?** Yes, sufficient information was gathered to determine all allegations.
- **Was the determination made by the district to unfound or indicate appropriate?** Yes

### Explain:

A Preventive Services Case was opened on 9/21/15 and closed on 3/24/17.

**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:

Case was open for Preventive Services through 3/2017.

## 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:** 06/02/2015

**Date of fatal incident, if different than date of death:**

05/31/2015

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

08:40 AM

**County where fatality incident occurred:**

Albany

**Was 911 or local emergency number called?**

Yes

**Time of Call:**

08:48 AM

**Did EMS to respond to the scene?**

Yes

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

No

**Child's activity at time of incident:**

Sleeping

Working

Driving / Vehicle occupant

Playing

Eating

Unknown

Other: Bathing

**Did child have supervision at time of incident leading to death?** No - but needed

**At time of incident supervisor was:**

**Total number of deaths at incident event:**

**Children ages 0-18:** 1

**Adults:** 0

### Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	Alleged Victim	Male	1 Year(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	24 Year(s)
Deceased Child's Household	Sibling	Alleged Victim	Female	3 Year(s)
Deceased Child's Household	Sibling	No Role	Male	4 Month(s)
Other Household 1	Father	Alleged Perpetrator	Male	24 Year(s)

### LDSS Response

On 2/17/16, it was reported that the SC passed away on 6/2/15. On 5/31/15, the SC was found unresponsive in the bathtub at his father's residence and was hospitalized on life support. The incident occurred at the father's home during visitation with his two children. The report also alleged IFCS and IG against mother regarding the SS. A CPS investigation was initiated on 5/31/15 and on 9/21/15 the father was indicated for inadequate guardianship and lack of supervision. The case was opened on 9/21/15 for one year for long term monitoring and the family was engaged in ongoing prevention services. The father was engaged in ongoing supervised visits with the two SS. The visits were supervised by a service provider.

As a result of the 2/17/16 SCR report, it was noted by ACDCYF that the fatality was previously investigated and no further investigative actions were required. On June 09/21/2015 the long term services case was closed and the mother voluntarily agreed to continue to work with preventive services through 3/24/2017. On 5/10/2016, the father was granted unsupervised visits from Fridays at 5pm until Saturday at 5pm with one child per visit, providing sponge baths only.



In June 2016, mother and father were offered further services to help support them regarding the death of their son and both parents declined.

#### Official Manner and Cause of Death

**Official Manner:** Accident

**Primary Cause of Death:** From an injury - external cause

**Person Declaring Official Manner and Cause of Death:** Coroner

#### Multidisciplinary Investigation/Review

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

**Comments:** ACDCYF worked with LE and the case was reviewed at a CFRT meeting in June 2015. Subsequent to the 2/17/16 SCR report, there was no contact with LE and there was not another CFRT meeting.

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

**Comments:** ACDCYF worked with law enforcement and the case was reviewed at a CFRT meeting in June 2015. Upon the receipt of the 2/17/16 report, there was not another CFRT meeting.

#### SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
029224 - Deceased Child, Male, 1 Yrs	030542 - Father, Male, 24 Year(s)	Inadequate Guardianship	Substantiated
029224 - Deceased Child, Male, 1 Yrs	030542 - Father, Male, 24 Year(s)	Lack of Supervision	Substantiated
029224 - Deceased Child, Male, 1 Yrs	030542 - Father, Male, 24 Year(s)	DOA / Fatality	Substantiated
030461 - Sibling, Female, 3 Year(s)	030542 - Father, Male, 24 Year(s)	Lack of Supervision	Substantiated
030461 - Sibling, Female, 3 Year(s)	030542 - Father, Male, 24 Year(s)	Inadequate Guardianship	Substantiated
030461 - Sibling, Female, 3 Year(s)	030541 - Mother, Female, 24 Year(s)	Inadequate Food / Clothing / Shelter	Unsubstantiated
030461 - Sibling, Female, 3 Year(s)	030541 - Mother, Female, 24 Year(s)	Inadequate Guardianship	Substantiated

#### CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alleged subject(s) interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All 'other persons named' interviewed face-to-face?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Contact with source?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When safety factors were present that placed the surviving siblings/other children in the household in impending or immediate danger of serious harm, were the safety interventions, including parent/caretaker actions adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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### Fatality Risk Assessment / Risk Assessment Profile

	Yes	No	N/A	Unable to Determine
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



<b>in Family Court at any time during or after the investigation?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Were appropriate/needed services offered in this case</b>	<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
<b>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?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Were there surviving children in the household that were removed either as a result of this fatality report / investigation or for reasons unrelated to this fatality?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Explain as necessary:</b> No removal was necessary regarding the SS.				

### 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
<b>Bereavement counseling</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Economic support</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Funeral arrangements</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Housing assistance</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Mental health services</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Foster care</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Health care</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Legal services</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Family planning</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Homemaking Services</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Parenting Skills</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Domestic Violence Services</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



<b>Early Intervention</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>Alcohol/Substance abuse</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Child Care</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>Intensive case management</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>Family or others as safety resources</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>Other</b>	<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:**  
 In Sept 2015, the case was opened for Long Term CPS Monitoring and Preventive Services. The mother was pregnant with the father's child and a referral for a PHN to monitor the mother's blood pressure and weight was made. The surviving 3 year old sibling was referred for Early Intervention and speech therapy. Parenting skills were provided to both parents

**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:**  
 ACDCYF assessed the needs of both parents and the Surviving sibling and provide necessary services..

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

**Explain:**  
 Parents were engaged in counseling.

## History Prior to the Fatality

### Child Information

- Did the child have a history of alleged child abuse/maltreatment? No
- Was there an open CPS case with this child at the time of death? Yes
- Was the child ever placed outside of the home prior to the death? No
- Were there any siblings ever placed outside of the home prior to this child's death? No
- Was the child acutely ill during the two weeks before death? No

## 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)
10/28/2015	Sibling, Female, 2 Years	Father, Male, 23 Years	Inadequate Guardianship	Indicated	Yes

**Report Summary:**  
 In 10/15, mother gave birth to a baby boy. Father was at the hospital and began acting out, telling people violence toward a child is ok and it was ok to be a pedophile. Father threw a bag of clothing toward the mother stomach. Father had to be removed from the hospital by security. There was concern for the children's safety in the presence of their father.

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



**Basis for Determination:**

While the mother was delivering their baby boy the father made comments about pedophiles and child abuse to hospital staff. Father was asked to leave the hospital and he became irate. The Albany Police had to escort him out of the hospital.

**OCFS Review Results:**

ACDYF did not conduct any investigative responsibilities past the 24 hour safety assessment, contact with the source and consultation with a supervisor all on 10/28/15. The case was open without any casework activities from 10/28/15 until indication on 12/10/15.

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

**Issue:**

Determination of Nature, Extent and Cause of Conditions (Report)

**Summary:**

There was not a thorough and complete investigation of this report and all regulatory standards were not complied with.

**Legal Reference:**

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

**Action:**

ACDCYF has a PIP in place as a result of a OMA which addresses this issue. Quarterly reviews of cases during 2016 show significant improvement in practice. In 2017 new strategies will be developed to make sure caseworkers make all necessary contacts and gather sufficient information to make assessments of abuse and maltreatment.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
06/02/2015	Deceased Child, Male, 19 Months	Father, Male, 23 Years	Lack of Supervision	Indicated	No
	Sibling, Female, 2 Years	Father, Male, 23 Years	Lack of Supervision	Indicated	
	Deceased Child, Male, 19 Months	Father, Male, 23 Years	Inadequate Guardianship	Indicated	
	Sibling, Female, 2 Years	Father, Male, 23 Years	Inadequate Guardianship	Indicated	

**Report Summary:**

It was alleged the father left his 18 month old in the bathtub full of water unattended on 5/31/15. The father returned and found the child unresponsive and floating in the water. The child was transported to the hospital and placed on life support. On 6/2/15, the child was pronounced dead as a result of drowning.

**Determination:** Indicated

**Date of Determination:** 08/11/2015

**Basis for Determination:**

The father's poor judgment of leaving his 1-year-old and 2-year-old children unsupervised in a bathtub, resulted in the 1-year-olds drowning and subsequent death. The SC was removed from life support on 6/2/15. There was sufficient credible evidence to substantiate the IG and LOS allegations for both the SC and SS and indicate the report. The case remained open for Long Term Monitoring Services.

**OCFS Review Results:**

OCFS found ACDCYF immediately initiated an investigation into the incident. ACDCYF assessed the safety of the SS and implemented a safety plan. Interviews were completed with the parents and other collateral contacts prior to the death.

ACDCYF continued to investigate and contact necessary parties following the death of the SC on 6/2/15.

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



Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
05/31/2015	Sibling, Female, 2 Years	Father, Male, 23 Years	Inadequate Guardianship	Indicated	No
	Deceased Child, Male, 19 Months	Father, Male, 23 Years	Inadequate Guardianship	Indicated	
	Sibling, Female, 2 Years	Father, Male, 23 Years	Lack of Supervision	Indicated	
	Deceased Child, Male, 19 Months	Father, Male, 23 Years	Lack of Supervision	Indicated	

**Report Summary:**

While the children were on visitation with their father, it was reported the father left his 1-year-old and 2-year-old children in the bathtub unsupervised. The father left the bathroom to check on food he had left cooking in the stove. When the father returned to the bathroom, the SC was floating unresponsive. The 2-year-old child was playing in the tub. The father grabbed the SC and went to a neighbor's home where CPR was initiated and 911 was called. The SC was transported to the hospital and remained hospitalized for two days until he was removed from life support and passed away.

**Determination:** Indicated**Date of Determination:** 09/21/2015**Basis for Determination:**

The father's poor judgment of leaving his 1-year-old and 2-year-old children unsupervised in a bathtub, resulted in the 1-year-olds drowning and subsequent death. The 1-year-old was removed from life support on 6/2/15 and passed away. There is sufficient credible evidence to substantiate and indicate the allegations of IG and LOS against the father regarding both the SC and SS. The case remained open for Long Term Monitoring Services.

**OCFS Review Results:**

OCFS found ACDCYF immediately initiated an investigation into the incident. ACDCYF assessed the safety of the SS and implemented a safety plan. Interviews were completed with the parents and other collateral contacts prior to the death.

ACDCYF continued to investigate and contact necessary parties following the death of the SC on receipt of a subsequent report on 6/2/15.

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)
09/24/2014	Deceased Child, Male, 2 Months	Mother, Female, 22 Years	Other	Unfounded	No
	Sibling, Female, 18 Months	Father, Male, 23 Years	Other	Unfounded	
	Sibling, Female, 18 Months	Mother, Female, 22 Years	Other	Unfounded	
	Deceased Child, Male, 2 Months	Father, Male, 23 Years	Other	Unfounded	

**Report Summary:**

The CPS report was a court ordered investigation based on the father's petition to Family Court around visitation with his children.

**Determination:** Unfounded**Date of Determination:** 02/25/2015**Basis for Determination:**

The investigation found there was no prior indicated CPS history in this family. The mother expressed concerns the



father has limitations. Both parents were described as "slow". The mother and father both spoke of prior DV incidents between the two of them. Both parents denied any drug or alcohol use. The mother had no concerns regarding the visitation she was supervising between father and children. The children were observed and found to be medically up-to-date with developmental delays that were being addressed. No services were being provided. On 2/24/15, Family Court granted the father unsupervised visitation.

**OCFS Review Results:**

OCFS found ACDCYF spoke with the mother, father and maternal grandmother with whom the mother and children resided. The children were observed and found to be clean and appropriately dressed. The pediatrician was contacted and no concerns were identified. The parents did have a history of DV, but were not residing together.

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)
11/06/2013	Sibling, Female, 9 Months	Mother, Female, 21 Years	Inadequate Guardianship	Unfounded	No
	Sibling, Female, 9 Months	Father, Male, 22 Years	Inadequate Guardianship	Unfounded	

**Report Summary:**

The report alleged IG against the mother and father of the SC. It was reported a verbal argument between the parents escalated and the father pushed the mother while she was holding the eight month old sibling. The report stated that no one was injured. Reportedly the parents had a history of being physical with each other and there was a Stay Away OOP valid until 9/2014. The parents continued to violate the order since they resided together. It was reported both parents are mentally limited and that impairs their ability to care for the child. At the time of this report the mother was pregnant with the SC.

**Determination:** Unfounded

**Date of Determination:** 02/07/2014

**Basis for Determination:**

The investigation found it was plausible the parents did not understand the OOP was still in effect since both are limited. Both parents denied an incident of DV and provided the same explanation as to what happened. Both parents stated the mother had come to father's home to get items for the child and it was the neighbors that were fighting. Child was observed and no injuries observed. There were no concerns around the care of the child from the pediatrician. The maternal grandmother resided with the mother to assist her in the care of the child. The father was arrested for violation of the OOP and a warrant was issued for the mother on the same charge.

**OCFS Review Results:**

OCFS found ACDCYF had difficulty maintaining contact with the family throughout this investigation. The mother and SS moved several times and after giving birth to the SC, moved into an apartment with the maternal grandmother. The information the mother provided as to where she was residing was often unreliable. ACDCYF spoke with both parents and the maternal grandmother around the conditions of the existing OOP. During the investigation the mother and SS often could not be located and it raised concern as to if they were with the father. The record indicated the father resided in the home of another person.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
05/14/2013	Sibling, Female, 3 Months	Mother, Female, 21 Years	Other	Unfounded	Yes
	Sibling, Female, 3 Months	Father, Male, 22 Years	Other	Unfounded	

**Report Summary:**

This was a court ordered investigation. The mother of the SC filed custody petition for then three month old child due to a prior incident of domestic violence between the parents. There was an OOP issued in 2012. Despite the OOP the



parents conceived a child together and resided together until April 2013.

**Determination:** Unfounded

**Date of Determination:** 06/21/2013

**Basis for Determination:**

ACDCYF was unable to make contact with the mother and child during this investigation. ACDCYF made phone contact with the father. The father reported he was too busy to meet with the worker. He denied any contact with the mother or child since court and having any contact information for the mother. ACDCYF had no contact information for the mother and learned the mother had gone to DSS to seek assistance with shelter. She was provided with paperwork and never returned. ACDCYF did call an area motel to see if the mother was there. Her whereabouts remained unknown throughout the course of this investigation.

**OCFS Review Results:**

OCFS found that ACDCYF did not attempt to contact MGM to see if she knew the mother's whereabouts. During one attempted home visit to the father's home male and female clothing was observed outside drying. There was no additional follow-up to discuss the observations with the father or additional attempts to go to the residence to see of the mother and child were there.

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

**Issue:**

Determination of Nature, Extent and Cause of Conditions (Report)

**Summary:**

ACDCYF attempted to meet with the parents to discuss the report. There were other sources of information that may have been explored to determine the validity of the allegations. During one attempted home visit to the father's home, male baby clothes were seen outside drying. ACDCYF failed to follow-up to determine if mother and child were residing at father's home in violation of the OOP.

**Legal Reference:**

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

**Action:**

ACDCYF PIP includes strategies to address the same concern identified in the OMA . Quarterly site reviews during 2016 show improvement and new strategies will be developed in 2017 to make sure caseworkers make necessary contacts and gather sufficient information to assess abuse and maltreatment.

**Issue:**

Timely/Adequate Seven Day Assessment

**Summary:**

A seven day assessment was not completed.

**Legal Reference:**

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

**Action:**

ACDYF must take steps to ensure that prior to the approval of a case determination, all required safety assessments are completed and approved.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
03/07/2013	Sibling, Female, 18 Days	Father, Male, 22 Years	Inadequate Guardianship	Unfounded	Yes
	Sibling, Female, 18 Days	Mother, Female, 21 Years	Inadequate Guardianship	Unfounded	

**Report Summary:**

The report alleged the parents have limited mental capacity and are unable to properly care for the then two-week-old surviving sibling due to their limitations. On 4/2/13, ACDCYF received a subsequent report alleging the father assaulted



the mother in the presence of the SS was consolidated into this investigation. On 4/17/13 another subsequent report was received alleging the father was not taking his prescribed medication for anger management resulting in the father becoming physically and verbally aggressive toward the mother was consolidated into this report. It was also stated there was an OOP in effect against the father prohibiting contact with the mother.

**Determination:** Unfounded

**Date of Determination:** 05/10/2013

**Basis for Determination:**

The investigation found the parents were observed by ACDCYF to interact positively with the child and appeared to have bonded with her. The father was easily distracted however the mother was the primary caretaker and did not leave the child unsupervised with him. The child was found to be clean and free of any marks or bruises. There were no safety concerns in the home. The parents denied the allegations and the mother was observed not have any marks or bruises. There were no police reports of calls to the home. No medical concerns regarding the child were identified. After the 4/17/13 allegations, the parents stopped responding to ACDCYF and no further contact was made.

**OCFS Review Results:**

OCFS found ACDCYF obtained information from observation and interviews with the parents to find the parents interacted positively with the child and appeared to have bonded with her. Medical providers did not have concerns regarding the child. The parents denied incidents of domestic violence between them and the mother was not observed with bruises. There were no police reports of calls to the home. However, the status and conditions of the OOP were not investigated. After 4/17/13 the parents stopped responding to ACDCYF and no further contact was made. The parents also did not respond to PHN or respond to referrals for Healthy Families and Early Intervention Services.

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

**Issue:**

Overall Completeness and Adequacy of Investigation

**Summary:**

Allegation of domestic violence was not completely investigated. The existence and conditions of an OOP against the father was not verified and possible violations identified and evaluated. Other than a phone contact with mother following the report of 4/17/13 there was no further contact with the family.

**Legal Reference:**

SSL 424(6); 18 NYCRR 432.2(b)(3)

**Action:**

ACDCYF implemented a corrective action plan to address this issue as a result of a Ongoing Monitoring an Assessment review completed by ARO and quarterly reviews done in 2016 show significant improvement. The CAP also indicates in 2017 new strategies will be developed to make sure necessary contacts and sufficient information is gathered to fully address abuse and maltreatment.

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

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

**Known CPS History Outside of NYS**

There is no known history outside of New York State.

**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.

### Casework Contacts

	Yes	No	N/A	Unable to Determine
Were face-to-face contacts with the child in the child's placement location made with the required frequency?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

### 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: Other Family Court (Including Article 6 Custody/Guardianship)		
Date Filed:	Fact Finding Description:	Disposition Description:
06/04/2015	There was not a fact finding	Adjourned
Respondent:	None	
Comments:	the father was granted unsupervised visits from 5:00pm Friday through 5:00pm Saturday, rotating one child per visit. The father is not allowed to bathe the children but he can give the children a sponge bath.	

Have any Orders of Protection been issued? Yes	
From: Unknown	To: Unknown
<b>Explain:</b> According to the Connections record, the police reported in 9/14 that the father was in violation of an OOP. The mother reported that there was a significant history of DV incidents including the father breaking her nose in 2012 and in March 2014 he attempted to run her over with his car.	



## 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