



## Report Identification Number: SY-19-015

Prepared by: New York State Office of Children & Family Services

Issue Date: Sep 24, 2019

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	OA-Other Adult	
<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
CPS-Child Protective Services		
<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
CPR-Cardiopulmonary Resuscitation		



## Case Information

**Report Type:** Child Deceased  
**Age:** 6 month(s)

**Jurisdiction:** St. Lawrence  
**Gender:** Male

**Date of Death:** 03/26/2019  
**Initial Date OCFS Notified:** 03/28/2019

## Presenting Information

An SCR report received on 3/28/19 alleged that on 3/26/19, the mother fed the 6-month-old subject child at 4:00 AM and fell asleep with the subject child in a recliner. At 8:00 AM, the 8-year-old surviving sibling woke the mother, with concerns the subject child was pale. The subject child was pinned between the mother's arm and the back of the recliner. The subject child was unresponsive. The mother called 911 and attempted CPR. EMS arrived at the scene and the subject child was transported to the hospital, where the subject child was pronounced deceased.

## Executive Summary

This report concerns the death of a 6-month-old male child. St. Lawrence County Department of Social Services (STCDSS) received an SCR report on 3/28/19 regarding the death of the subject child that occurred on 3/26/19. The mother had fallen asleep in a recliner at approximately 4:30 AM after feeding the subject child. At approximately 8:00 AM, the 8-year-old surviving sibling woke the mother, with concerns the subject child did not look right. The mother found the subject child had slid down between her arm and the recliner. The child was unresponsive and the mother called 911 and attempted CPR. Law enforcement and EMS arrived at the home and the subject child was transported to the hospital where he was pronounced deceased at 10:03 AM.

STCDSS interviewed and observed the 8-year-old surviving sibling who resided with the subject child and there were no noted safety concerns. STCDSS provided the family with information and referrals for bereavement services.

The ME's office told STCDSS that the final autopsy report listed the cause of death as asphyxiation due to overlay. The manner of death was accidental. Law enforcement investigated the fatality and concluded their investigation, finding no criminality involved in the death of the subject child. The fatality investigation remained undetermined at the time of this writing.

There was an open investigation prior to the reported death of the subject child. The SCR report was received on 12/20/18, with the allegation of educational neglect against the mother for the 8-year-old surviving sibling. STCDSS filed an Article 10 Neglect petition in Family Court on 6/14/19 against the mother for the 8-year-old surviving sibling for educational neglect. The surviving sibling had numerous unexcused absences and was falling behind in school. The surviving sibling had to repeat the previous year of school as a result of the mother's failure to have the surviving sibling attend school on a regular basis. On 6/18/19, the Family Court Judge issued a temporary order pending further Family Court proceedings. The mother was ordered to make sure the surviving sibling attended school and to cooperate with mandated preventive services. STCDSS opened a family services case on 6/20/19 and the case remained undetermined at the time of this writing.

### PIP Requirement

For issues identified in the historical cases, STCDSS will submit a PIP to the Syracuse Regional Office within 30 days of receipt of this report. The PIP will identify action(s) STCDSS has taken, or will take, to address the cited issue(s). For issues where a PIP is currently implemented, STCDSS will review the plan and revise as needed to address ongoing concerns.

## Findings Related to the CPS Investigation of the Fatality



### Safety Assessment:

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

### Determination:

- Was sufficient information gathered to make determination(s) for all allegations as well as any others identified in the course of the investigation? The CPS report had not yet been determined at the time this Fatality report was issued.
- Was the determination made by the district to unfound or indicate appropriate? N/A

### Explain:

The case remained open at the time of this writing.

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:

The case remained undetermined at the time of this writing; however, a preventive case was opened and STCDSS was providing court ordered services to the mother for the surviving sibling.

### 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: 03/26/2019

Time of Death: 10:03 AM

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

Unknown

County where fatality incident occurred:

St. Lawrence



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

Yes

**Time of Call:**

Unknown

**Did EMS respond to the scene?**

Yes

**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**

**At time of incident supervisor was:**

Drug Impaired

Absent

Alcohol Impaired

Asleep

Distracted

Impaired by illness

Impaired by disability

Other:

**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	6 Month(s)
Deceased Child's Household	Mother	Alleged Perpetrator	Female	30 Year(s)
Deceased Child's Household	Sibling	No Role	Female	8 Year(s)
Other Household 1	Father	No Role	Male	29 Year(s)

### LDSS Response

On 3/28/19, STCDSS received the fatality report from the SCR. STCDSS learned of the death of the subject child on 3/27/19 and they initiated the investigation. SCDSS obtained information from law enforcement, completed a CPS history check, notified the medical examiner's office and the district attorney's office of the death. There was an open CPS investigation involving the surviving sibling, with allegations unrelated to the fatality. The surviving sibling was assessed and there were no noted safety concerns.

On 3/27/19, STCDSS went to the friend's home where the mother and the surviving sibling were staying temporarily. STCDSS interviewed the mother and the 8-year-old surviving sibling separately. The mother told STCDSS the subject child was treated for a skin rash which caused him to be itchy and he had difficulty sleeping. As a result, he was prescribed a steroid. The mother said she fed the subject child at 4:30 AM. The mother said she sat down in the recliner with the subject child on her shoulder and she fell asleep while holding him. The mother said she was not sure the exact time the surviving sibling woke her, but it was approximately 8:00 AM. The surviving sibling told STCDSS she woke and said the subject child "looked like a ghost" and she woke her mother to tell her mother the subject child did not look right. The mother and the surviving sibling said the mother called 911. The mother said when EMS and law enforcement arrived the subject child was transported to the hospital. The surviving sibling said the police took her to another room and asked her questions.



STCDSS interviewed the father and he had no concerns for the care of the subject child or the surviving sibling while in the care of their mother. STCDSS offered the mother and the father referrals for bereavement services. STCDSS appropriately questioned the mother about safe sleep and mother was aware of safe sleep but stated she regularly co-slept with the subject child. Due to mother's history of substance misuse, STCDSS appropriately questioned the mother about drug and alcohol misuse and the mother denied the misuse of drugs or alcohol.

STCDSS observed the friend's home and the surviving sibling and there were no noted safety concerns. There was another surviving sibling who had been adopted in 2016 and had no contact with the subject child or the family. STCDSS made follow up home visits to the mother's home and there were no noted safety concerns for the care of the surviving sibling.

STCDSS obtained information from law enforcement, the medical examiner, emergency services, medical records from the hospital, the children's pediatrician and the children's father. The children's pediatric records noted no concerns. The father had no concerns for the care of the children by their mother.

STCDSS spoke to the surviving sibling's school and there were ongoing concerns about the surviving sibling's frequent unexcused absences from school. STCDSS attempted to work with the mother about the surviving sibling's attendance at school prior to filing an Article 10 Neglect petition in Family Court. The mother continued to avoid STCDSS and on 6/14/19, STCDSS filed an Article 10 petition against the mother for the surviving sibling. On 6/18/19, the Family Court Judge issued a temporary order of protection pending further court proceedings. The mother was ordered to make sure the surviving sibling attended school and to comply with mandated preventive services. On 6/20/19, STCDSS opened a family services case and were providing the mother with preventive services at the time of this writing.

### 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:** Medical Examiner

### Multidisciplinary Investigation/Review

**Was the fatality investigation conducted by a Multidisciplinary Team (MDT)?** Yes

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

### SCR Fatality Report Summary

Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome
051102 - Deceased Child, Male, 6 Mons	051103 - Mother, Female, 30 Year(s)	DOA / Fatality	Pending
051102 - Deceased Child, Male, 6 Mons	051103 - Mother, Female, 30 Year(s)	Inadequate Guardianship	Pending

### CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine



All children observed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alleged subject(s) interviewed face-to-face?	<input 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"/>
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 assessment of impending or immediate danger to surviving siblings/other children in the household named in the report:				
Within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 7 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At 30 days?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any safety issues that need to be referred back to the local district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	Yes	No	N/A	Unable to Determine
Was the risk assessment/RAP adequate in this case?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



# Child Fatality Report

<b>During the course of the investigation, was sufficient information gathered to assess risk to all surviving siblings/other children in the household?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Was there an adequate assessment of the family's need for services?</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>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?</b>	<input checked="" 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"/>

**Explain:**  
 The risk assessment profile had not been completed and the case remained undetermined at the time of this writing. The surviving sibling remained in the care of her mother and a family services case had been opened on 6/20/19.

### 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"/>

**Explain as necessary:**  
 The 8-year-old surviving sibling remained in the care of the mother. On 6/14/19, STCDSS filed an Article 10 Neglect petition in Family Court against the mother for the surviving sibling. The petition alleged the mother had a pattern of not sending the surviving sibling to school and as a result the surviving sibling had already repeated entire year of school.

### Legal Activity Related to the Fatality

**Was there legal activity as a result of 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:
06/14/2019	There was not a fact finding	There was not a disposition
<b>Respondent:</b>	051103 Mother Female 30 Year(s)	
<b>Comments:</b>	On 6/14/19, STCDSS filed an Article 10 Neglect petition in Family Court against the mother for the surviving sibling. On 6/18/19, the Family Court Judge issued a temporary order of protection pending further court proceedings. The surviving sibling had missed numerous days of school in the past school year as well as the current year. The surviving sibling had already been held back one year as a result. The mother was ordered to ensure the attendance of the surviving sibling in school. The mother was also ordered to comply with preventive services. STCDSS opened a preventive services case with program choice of protective and mandated preventive services to prevent placement of the surviving sibling.	



### Have any Orders of Protection been issued? Yes

**From:** 06/18/2019

**To:** Unknown

### Explain:

The Family Court Judge issued a temporary order of protection as a result of the Article 10 Neglect petition filed on 6/14/19 by STCDSS against the mother for the surviving sibling. The order stated the mother was to ensure the surviving sibling attend school and to cooperate with mandated preventive services pending further court proceedings.

### Services Provided to the Family in Response to the Fatality

Services	Provided After Death	Offered, but Refused	Offered, Unknown if Used	Not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Economic support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Funeral arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Housing assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Mental health services	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input checked="" 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"/>				
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alcohol/Substance abuse	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

### History Prior to the Fatality

### Child Information

Did the child have a history of alleged child abuse/maltreatment? 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? Yes



Was the child acutely ill during the two weeks before death?

No

### Infants Under One Year Old

**During pregnancy, mother:**

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

- Had heavy alcohol use
- Smoked tobacco
- Used illicit drugs

**Infant was born:**

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

### CPS - Investigative History Three Years Prior to the Fatality

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
12/20/2018	Sibling, Female, 8 Years	Mother, Female, 30 Years	Educational Neglect	Pending	Yes
	Sibling, Female, 8 Years	Mother, Female, 30 Years	Inadequate Guardianship	Pending	

**Report Summary:**

The report alleged the 8-year-old surviving sibling had been absent from school and was falling behind academically as a result. The surviving sibling had a history of excessive absences. The mother was aware and was failing to adequately address the concerns. The father and the subject child were listed with unknown roles.

**Report Determination:** Undetermined

**OCFS Review Results:**

STCDSS did not document in the Connections case record prior to the reported fatality that they provided safe sleep information to the mother or discussed safe sleep with her. Numerous progress notes were entered 3 months after the event date. The 7-day safety assessment was not completed within the required time frame as per regulation. The safety assessment was completed 14 days late.

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

**Issue:**

Failure to provide safe sleep education/information

**Summary:**

STCDSS did not document in the Connections case record that they discussed safe sleep or provided the mother with safe sleep information.

**Legal Reference:**

13-OCFS-ADM-02

**Action:**

In all CPS investigations with an infant in the home, caregivers must be provided with safe sleep information.

**Issue:**

Timely/Adequate Case Recording/Progress Notes

**Summary:**

STCDSS did not enter progress notes until 3 months after the event date.

**Legal Reference:**



18 NYCRR 428.5

**Action:**

All progress notes will be entered as contemporaneously as possible to their event dates.

**Issue:**

Timely/Adequate Seven Day Assessment

**Summary:**

STCDSS did not complete the seven day assessment within the required time frame as per regulation.

**Legal Reference:**

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

**Action:**

STCDSS will complete the 7-day safety assessment within the required time frame as per regulation.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
09/18/2018	Deceased Child, Male, 0 Days	Mother, Female, 30 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Deceased Child, Male, 0 Days	Mother, Female, 30 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	

**Report Summary:**

The mother gave birth to the subject child on 9/18/18. The mother tested positive for Suboxone at the time of birth. The subject child's toxicology results were pending. It was unknown if the mother was prescribed Suboxone, as she had been non-compliant with providing the hospital with her prescription. The role of the surviving sibling was unknown.

**Report Determination:** Unfounded

**Date of Determination:** 11/02/2018

**Basis for Determination:**

STCDSS unsubstantiated the allegations of parent drug/alcohol misuse against the mother for the subject child based on information gathered from medical professionals and other collaterals. The mother and the subject child tested positive for Subutex not Suboxone. STCDSS learned from the mother's physician that the mother was prescribed Subutex during her pregnancy and was being monitored. The subject child did not suffer any impact as a result of the positive toxicology. The case was unfounded and closed.

**OCFS Review Results:**

STCDSS did not document in the Connections case record that they discussed safe sleep with the mother. The history check was not completed within the required time frame as per regulation. The history check was documented as being completed 8 days after the case initiation date.

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

**Issue:**

Failure to provide safe sleep education/information

**Summary:**

STCDSS did not document in the Connections case record that they discussed safe sleep or provided the mother with safe sleep information.

**Legal Reference:**

13-OCFS-ADM-02

**Action:**

In all CPS investigations with an infant in the home, caregivers must be provided with safe sleep information.

**Issue:**

Review of CPS History

**Summary:**

The case record did not reflect that STCDSS reviewed all prior CPS history within regulatory required timeframes.

**Legal Reference:**

18 NYCRR 432.2(b)(3)(i)

**Action:**

STCDSS will review all prior CPS history within regulatory required timeframes.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
07/26/2016	Sibling, Female, 5 Years	Mother, Female, 28 Years	Inadequate Guardianship	Far-Closed	No
	Sibling, Female, 5 Years	Mother, Female, 28 Years	Parents Drug / Alcohol Misuse	Far-Closed	

**Report Summary:**

The report alleged the mother appeared to be using heroin, pills, and drinking alcohol in the presence of the surviving sibling. The mother was bringing the surviving sibling to homes of people that were using drugs, and the mother was getting high with the adults, in the presence of the surviving sibling. The mother was not able to supervise the surviving sibling properly. The father was listed with an unknown role.

**OCFS Review Results:**

The FAR case met all the statutory requirements.

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

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

SCR report received on 3/25/11 with allegations of IG, LS and PD/AM against the parents for the SS. The allegations were unsubstantiated and the case closed on 5/27/11.

SCR report received on 5/11/13 with allegations of IG and PD/AM against parents for the SS. The allegations were unsubstantiated and the case was closed on 8/1/13.

SCR report received on 8/30/13 with allegations of PD/AM and IG against the mother for the SS (this child was freed for adoption and was adopted). The allegations were substantiated and the case opened on 10/11/13.

SCR report received on 11/22/14 with allegations of IG and L/B/W against the paternal aunt and uncle for the SS. The allegations were unsubstantiated and the case was closed on 12/31/14.

**Known CPS History Outside of NYS**

There was no known history outside of NYS.

**Preventive Services History**

On 9/9/13, an Article 10 abuse/neglect petition was filed in Family Court against the mother and the father. On 9/10/13, the now 2-year-old SS and 26-day-old SS were removed via Article 1027 of the Family Court Act. After hearing testimony, the Family Court Judge granted the removal of the two SS and they were placed in the custody of the Commissioner of St. Lawrence County Department of Social Services (STCDSS). The 2-year-old SS was placed in the



care of the PGM and the 26-day-old SS was placed in a foster home. The SS were placed due to the mother and father's ongoing illegal drug use. The mother and father were court ordered to cooperate with preventive services for the 2-year-old SS. The mother cooperated with SCDSS for the return of the 2-year-old SS but surrendered the 26-day-old. The mother completed a drug treatment program and was in counseling with mental health services. The mother obtained and maintained stable housing and the 2-year-old SS was returned to her care with preventive services in place. The Family Court Judge awarded the mother full custody under an Article 6 custody petition. On 3/23/16, the Family Court Judge ordered the father to have supervised visits only, due to his non-compliance with court ordered services. The supervised visits would continue, until the father could provide proof to Family Court that he had completed a drug treatment program.

### Foster Care Placement History

On 9/9/13, an Article 10 abuse/neglect petition was filed in Family Court against the mother and the father. On 9/10/13, the 26-day-old SS was removed via Article 1027 of the Family Court Act. The Family Court Judge after hearing testimony granted removal and the SS was placed in the custody of the Commissioner of St. Lawrence County Department of Social Services (STCDSS). The SS was born with a positive toxicology for illicit drugs and remained in the hospital and was being treated for withdrawal symptoms. The SS was released from the hospital to a Foster Care placement on 9/25/13. The mother wanted to give this child up for adoption. After paternity was established the parents surrendered their parental rights on 5/13/14. Subsequently, this child was freed for adoption and was legally adopted in 2016.

### Legal History Within Three Years Prior to the Fatality

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

### Recommended Action(s)

**Are there any recommended actions for local or state administrative or policy changes?** Yes No

**Are there any recommended prevention activities resulting from the review?** Yes No