



**Report Identification Number: AL-16-029**

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

**Issue Date: Jun 02, 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:** 13 year(s)

**Jurisdiction:** Columbia  
**Gender:** Male

**Date of Death:** 12/01/2016  
**Initial Date OCFS Notified:** 12/06/2016

### Presenting Information

On 12/1/16, SC was traveling to Albany with his 17-year-old SS, 24-year-old SS, and the 17-year-old's boyfriend. The family's vehicle was struck and t-boned by another vehicle. SC's vehicle was not at fault for the accident. SC was pronounced dead on the scene.

### Executive Summary

On 12/2/16, Columbia County Department of Social Services (CCDSS) was informed that the male 13-year-old SC had died in a car accident on 12/1/16. Albany Regional Office was notified on 12/2/16, of the death of the SC in an open preventive services case. There was no reason to suspect the death was due to child abuse or maltreatment.

On 12/1/16, SC was traveling to Albany with his 17-year-old SS, 24-year-old SS, and the 17-year-old's boyfriend. The 24-year-old SS was driving the family vehicle to visit a relative in the hospital. It is unknown if weather conditions contributed to the cause of the accident. The family's vehicle was struck by another vehicle. SC's vehicle was not at fault for the accident. SC was pronounced dead on the scene. The others in SC's vehicle sustained injuries such as broken bones and head trauma. It's unknown if there were charges filed against the driver who struck SC's vehicle. The record does not reflect that the worker obtained any information from LE. It's unknown if the occupants of the vehicle were wearing safety belts.

Upon learning of the SC's death, CCDSS made contact with the family to assess the surviving siblings. Everyone was safe, however they were coping with the loss of SC. Family was offered help with anything they needed. CCDSS casework was commensurate with the concerns of the open preventive case. CCDSS kept in regular contact with the family and kept in regular contact to monitor their changing service needs. CCDSS made frequent and regular contact with the family to help them make progress with their goals.

LDSS will submit a Program Improvement Plan (PIP) to the Regional Office within 30 days of receipt of this report. This PIP will identify what action(s) the Regional Office has taken, or will take, to address the cited issue(s). For citations where a PIP is currently implemented, LDSS will review the plan(s) and revise as needed to further address on-going concerns.

### 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?** N/A

**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** N/A



appropriate?

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:**

Safety was assessed and documented in the progress notes. Case continues to be open for services with the family.

### 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: 12/01/2016

Time of Death: Unknown

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

County where fatality incident occurred:

COLUMBIA

Was 911 or local emergency number called?

Unknown

Did EMS 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

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: Not 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
Deceased Child's Household	Deceased Child	No Role	Male	13 Year(s)
Deceased Child's Household	Mother	No Role	Female	48 Year(s)
Deceased Child's Household	Sibling	No Role	Male	15 Year(s)
Deceased Child's Household	Sibling	No Role	Female	17 Year(s)
Deceased Child's Household	Sibling	No Role	Female	8 Year(s)
Deceased Child's Household	Sibling	No Role	Female	19 Year(s)
Deceased Child's Household	Sibling	No Role	Male	13 Year(s)
Other Household 1	Father	No Role	Male	52 Year(s)
Other Household 2	Father	No Role	Male	51 Year(s)
Other Household 3	Sibling	No Role	Female	24 Year(s)

### LDSS Response

Within the first 24 hours, CCDSS visited the BM and surviving siblings. CCDSS was notified of SC's death by his mental health counselor. CCDSS offered resources to BM including transportation and food delivery. CCDSS made visits on 12/2/16, 12/5/17, 12/6/17, 12/9/17 and 12/12/17 to offer supportive services. Some of the SS stayed with relatives for a few days after SC's death. CCDSS saw that emergency food assistance, funeral expenses, transportation assistance were provided. SC's school had a memorial service. BM and BF showed the caseworker a photo of SC's body. BM was aware that SC was going with his siblings to visit a cousin in the hospital. BM had no concerns about the SC traveling with his siblings to the hospital. The record did not reflect road conditions, or what caused the accident. There was no copy of the LE accident report in the record. The 17-year-old SS sustained multiple injuries and remained in the hospital. The 24-year-old had injuries to her legs and was unconscious in the hospital. Assessment of the family's service needs was completed, and counseling offered to the family. They declined, saying they were not ready but would attend when they became ready to do so. The family's preventive case remained open.

### 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:** Unknown

### Multidisciplinary Investigation/Review

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

### CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
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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"/>
Contact with source?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Examiner / Coroner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination of investigation with law enforcement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Placement Activities in Response to the Fatality Investigation

	Yes	No	N/A	Unable to Determine
Did the safety factors in the case show the need for the surviving siblings/other children in the household be removed or placed in foster care at any time during this fatality investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were there surviving siblings/other children in the household removed as a result of this fatality report/investigation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Legal Activity Related to the Fatality

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

### 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homemaking Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Early Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



Alcohol/Substance abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family or others as safety resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Were services provided to siblings or other children in the household to address any immediate needs and support their well-being in response to the fatality? N/A

**Explain:**  
Although services were offered, the children denied having any immediate needs that needed to be addressed, therefore no services were provided.

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

**Explain:**  
BM got counseling and was given extra food and gas cards.

## History Prior to the Fatality

## Child Information

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

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
07/12/2016	12840 - Sibling, Female, 17 Years	12838 - Mother, Female, 48 Years	Childs Drug / Alcohol Use	Unfounded	Yes
	12840 - Sibling, Female, 17 Years	12838 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded	
	12840 - Sibling, Female, 17 Years	12839 - Unrelated Home Member, Male, 28 Years	Childs Drug / Alcohol Use	Unfounded	
	12840 - Sibling,	12839 - Unrelated Home	Sexual Abuse	Unfounded	



Female, 17 Years	Member, Male, 28 Years		
12842 - Sibling, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Guardianship	Unfounded
12840 - Sibling, Female, 17 Years	12839 - Unrelated Home Member, Male, 28 Years	Parents Drug / Alcohol Misuse	Unfounded
12841 - Deceased Child, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Food / Clothing / Shelter	Unfounded
12840 - Sibling, Female, 17 Years	12838 - Mother, Female, 48 Years	Sexual Abuse	Unfounded
12840 - Sibling, Female, 17 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Guardianship	Unfounded
12842 - Sibling, Male, 13 Years	12838 - Mother, Female, 48 Years	Inadequate Food / Clothing / Shelter	Unfounded
12842 - Sibling, Male, 13 Years	12838 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded
12841 - Deceased Child, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Parents Drug / Alcohol Misuse	Unfounded
12840 - Sibling, Female, 17 Years	12838 - Mother, Female, 48 Years	Inadequate Food / Clothing / Shelter	Unfounded
12840 - Sibling, Female, 17 Years	12838 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded
12840 - Sibling, Female, 17 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Food / Clothing / Shelter	Unfounded
12841 - Deceased Child, Male, 13 Years	12838 - Mother, Female, 48 Years	Inadequate Food / Clothing / Shelter	Unfounded
12841 - Deceased Child, Male, 13 Years	12838 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded
12841 - Deceased Child, Male, 13 Years	12838 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded
12842 - Sibling, Male, 13 Years	12838 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded
12841 - Deceased Child, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Guardianship	Unfounded
12842 - Sibling, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Inadequate Food / Clothing / Shelter	Unfounded
12842 - Sibling, Male, 13 Years	12839 - Unrelated Home Member, Male, 28 Years	Parents Drug / Alcohol Misuse	Unfounded

**Report Summary:**

BM was alleged to be using drugs while caring for her three CHN. Allegations that an adult male friend of BM was using drugs with BM and 17-year-old SS. It was alleged that the adult male friend was also having a sexual relationship with the 17-year-old SS. The home was alleged to be dirty with dog feces strewn about the home.

**Determination:** Unfounded

**Date of Determination:** 08/26/2016

**Basis for Determination:**

Each CH was interviewed privately and did not disclose any information to support the allegations. CW spoke with several of BM's preventive workers who expressed no concerns regarding these allegations. CW never observed BM or



the adult male friend to be under the influence of drugs or alcohol. CW never observed drugs or alcohol in the home, nor did they observe dog feces in the home. 17-year-old SS was on birth control and had been educated about sexual health and safety. BM felt this report was falsely reported out of retaliation by an ex-boyfriend.

**OCFS Review Results:**

The 17-year-old SS and the adult male denied any kind of sexual relationship. The home was clean with no dog feces on the floors. BM denied she abused substance and the children did not disclose of any substance abuse by their mother. CW tried getting BM to submit to drug testing but she refused as she's already been through these allegations before. BM was frustrated with the repeated reports.

BF was not provided with a Notice of Existence of the report.

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

**Issue:**

Failure to provide notice of report

**Summary:**

BF was not provided with a Notice of Existence letter.

**Legal Reference:**

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

**Action:**

Parents of children named in SCR reports will be given a Notice of Existence letter when their child is named in a report.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
03/30/2016	12837 - Sibling, Male, 13 Years	12831 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded	Yes
	12834 - Sibling, Female, 17 Years	12831 - Mother, Female, 48 Years	Educational Neglect	Unfounded	
	12834 - Sibling, Female, 17 Years	12831 - Mother, Female, 48 Years	Childs Drug / Alcohol Use	Unfounded	
	12834 - Sibling, Female, 17 Years	12831 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded	
	12835 - Sibling, Male, 15 Years	12831 - Mother, Female, 48 Years	Inadequate Guardianship	Unfounded	
	12835 - Sibling, Male, 15 Years	12831 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12837 - Sibling, Male, 13 Years	12831 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12835 - Sibling, Male, 15 Years	12831 - Mother, Female, 48 Years	Educational Neglect	Unfounded	
	12834 - Sibling, Female, 17 Years	12831 - Mother, Female, 48 Years	Parents Drug / Alcohol Misuse	Unfounded	

**Report Summary:**

BM allowed 17-year-old SS to smoke marijuana. 17-year-old SS missed 35 days of school and her grades were negatively impacted as a result. 15-year-old SS missed 20 days of school and was failing as a result. BM was aware of this and failed to ensure the CHN attended school. BM abused heroin and was not attentive to the needs of her CHN. BM was not monitoring 12-year-old SS and ensuring that he was going to bed at an appropriate time and he stayed up late at night playing video games and constantly fell asleep in class.



**Determination:** Unfounded **Date of Determination:** 05/26/2016

**Basis for Determination:**

Both CHN did have medical issues that were contributing to their poor attendance. CW verified these issues with the family doctor. The 17-year-old SS did not legally have to attend school that year. The 12-year-old SS had issues with migraines but once the CH received appropriate medical care, his symptoms lessened and he began attending school again. BM refused to take any drug tests as she felt she was being harassed by someone who she thought kept making reports against her. CW never observed BM under the influence of drugs and there were no disclosures made by the CHN about BM being on drugs.

**OCFS Review Results:**

BF was not provided notice of the report.

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

**Issue:**

Failure to provide notice of report

**Summary:**

BF was not provided with a Notice of Existence of the report.

**Legal Reference:**

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

**Action:**

CCDSS will send Notification of Existence letters to parents of the maltreated children listed on the report.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
12/28/2015	12818 - Sibling, Female, 16 Years	12815 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	Yes
	12818 - Sibling, Female, 16 Years	12816 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded	
	12818 - Sibling, Female, 16 Years	12816 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12818 - Sibling, Female, 16 Years	12817 - Adult Sibling, Female, 18 Years	Inadequate Guardianship	Unfounded	
	12820 - Deceased Child, Male, 12 Years	12815 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	12820 - Deceased Child, Male, 12 Years	12816 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12821 - Sibling, Male, 12 Years	12815 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded	
	12821 - Sibling, Male, 12 Years	12815 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12821 - Sibling, Male, 12 Years	12816 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded	
	12821 - Sibling, Male, 12 Years	12817 - Adult Sibling, Female, 18 Years	Childs Drug / Alcohol Use	Unfounded	
	12819 - Sibling, Male, 14 Years	12815 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12819 - Sibling, Male, 14 Years	12816 - Mother's Partner,	Childs Drug /	Unfounded	



Years	Male, 54 Years	Alcohol Use	
12819 - Sibling, Male, 14 Years	12816 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded
12819 - Sibling, Male, 14 Years	12817 - Adult Sibling, Female, 18 Years	Parents Drug / Alcohol Misuse	Unfounded
12818 - Sibling, Female, 16 Years	12816 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12818 - Sibling, Female, 16 Years	12817 - Adult Sibling, Female, 18 Years	Parents Drug / Alcohol Misuse	Unfounded
12820 - Deceased Child, Male, 12 Years	12815 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded
12820 - Deceased Child, Male, 12 Years	12816 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12820 - Deceased Child, Male, 12 Years	12817 - Adult Sibling, Female, 18 Years	Parents Drug / Alcohol Misuse	Unfounded
12818 - Sibling, Female, 16 Years	12815 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded
12818 - Sibling, Female, 16 Years	12815 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12818 - Sibling, Female, 16 Years	12817 - Adult Sibling, Female, 18 Years	Childs Drug / Alcohol Use	Unfounded
12820 - Deceased Child, Male, 12 Years	12817 - Adult Sibling, Female, 18 Years	Inadequate Guardianship	Unfounded
12821 - Sibling, Male, 12 Years	12816 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded
12821 - Sibling, Male, 12 Years	12817 - Adult Sibling, Female, 18 Years	Parents Drug / Alcohol Misuse	Unfounded
12819 - Sibling, Male, 14 Years	12815 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded
12819 - Sibling, Male, 14 Years	12815 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12819 - Sibling, Male, 14 Years	12816 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12819 - Sibling, Male, 14 Years	12817 - Adult Sibling, Female, 18 Years	Childs Drug / Alcohol Use	Unfounded
12821 - Sibling, Male, 12 Years	12815 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12821 - Sibling, Male, 12 Years	12816 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12821 - Sibling, Male, 12 Years	12817 - Adult Sibling, Female, 18 Years	Inadequate Guardianship	Unfounded
12819 - Sibling, Male, 14 Years	12817 - Adult Sibling, Female, 18 Years	Inadequate Guardianship	Unfounded

**Report Summary:**

BM, PS (parent substitute) and adult sibling used marijuana and heroin to the point of impairment while caring for the



four CHN. The adults in the home became violent towards each other and the CHN as a result of them being impaired. BM and PS sold prescription pills to obtain money for their heroin use. The three oldest CHN smoked marijuana in the home. BM and PS were aware and failed to intervene.

**Determination:** Unfounded

**Date of Determination:** 02/22/2016

**Basis for Determination:**

There had been two previous unfounded reports with similar allegations. As a result of that, BM would not allow the CHN to be interviewed as she felt it would be traumatizing to them. BM said she had a falling out with upstairs neighbors and she felt they made this report to harass her. BM and PS did not submit to a drug test. CW never observed any family members to be under the influence of any drugs or substances. CW did visually see all CHN and did not note any concerns. CW contacted collaterals, none had concerns for the CHN.

**OCFS Review Results:**

BF was never added to the report or interviewed. No Notice of Existence letter was provided to BF. CW contacted the appropriate collaterals to verify there were no concerns for the well being of the CHN.

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

**Issue:**

Failure to provide notice of report

**Summary:**

BF was never provided with a Notice of Existence letter.

**Legal Reference:**

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

**Action:**

CCDSS will provide biological parents Notice of Existence letters.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
11/01/2015	12804 - Sibling, Female, 16 Years	12802 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	Yes
	12804 - Sibling, Female, 16 Years	12805 - Aunt/Uncle, Male, 50 Years	Lack of Supervision	Unfounded	
	12804 - Sibling, Female, 16 Years	12801 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded	
	12804 - Sibling, Female, 16 Years	12805 - Aunt/Uncle, Male, 50 Years	Inadequate Guardianship	Unfounded	
	12822 - Deceased Child, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	12808 - Sibling, Male, 12 Years	12801 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded	
	12808 - Sibling, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded	
	12806 - Sibling, Male, 14 Years	12802 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded	
	12806 - Sibling, Male, 14 Years	12802 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded	
	12806 - Sibling, Male, 14 Years	12802 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	



12804 - Sibling, Female, 16 Years	12802 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded
12804 - Sibling, Female, 16 Years	12801 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12804 - Sibling, Female, 16 Years	12801 - Mother, Female, 47 Years	Lack of Supervision	Unfounded
12804 - Sibling, Female, 16 Years	12801 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded
12804 - Sibling, Female, 16 Years	12802 - Mother's Partner, Male, 54 Years	Lack of Supervision	Unfounded
12822 - Deceased Child, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Childs Drug / Alcohol Use	Unfounded
12822 - Deceased Child, Male, 12 Years	12801 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12822 - Deceased Child, Male, 12 Years	12801 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded
12822 - Deceased Child, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12808 - Sibling, Male, 12 Years	12801 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12808 - Sibling, Male, 12 Years	12801 - Mother, Female, 47 Years	Lack of Supervision	Unfounded
12808 - Sibling, Male, 12 Years	12801 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded
12808 - Sibling, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Lack of Supervision	Unfounded
12808 - Sibling, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded
12806 - Sibling, Male, 14 Years	12801 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded
12804 - Sibling, Female, 16 Years	12805 - Aunt/Uncle, Male, 50 Years	Parents Drug / Alcohol Misuse	Unfounded
12822 - Deceased Child, Male, 12 Years	12801 - Mother, Female, 47 Years	Lack of Supervision	Unfounded
12822 - Deceased Child, Male, 12 Years	12805 - Aunt/Uncle, Male, 50 Years	Inadequate Guardianship	Unfounded
12822 - Deceased Child, Male, 12 Years	12805 - Aunt/Uncle, Male, 50 Years	Parents Drug / Alcohol Misuse	Unfounded
12808 - Sibling, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12808 - Sibling, Male, 12 Years	12801 - Mother, Female, 47 Years	Sexual Abuse	Unfounded
12806 - Sibling, Male, 14 Years	12801 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded
12806 - Sibling, Male, 14 Years	12801 - Mother, Female, 47 Years	Parents Drug /	Unfounded



Years	47 Years	Alcohol Misuse	
12806 - Sibling, Male, 14 Years	12802 - Mother's Partner, Male, 54 Years	Lack of Supervision	Unfounded
12806 - Sibling, Male, 14 Years	12805 - Aunt/Uncle, Male, 50 Years	Parents Drug / Alcohol Misuse	Unfounded
12804 - Sibling, Female, 16 Years	12802 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded
12822 - Deceased Child, Male, 12 Years	12801 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded
12822 - Deceased Child, Male, 12 Years	12802 - Mother's Partner, Male, 54 Years	Lack of Supervision	Unfounded
12822 - Deceased Child, Male, 12 Years	12805 - Aunt/Uncle, Male, 50 Years	Lack of Supervision	Unfounded
12806 - Sibling, Male, 14 Years	12801 - Mother, Female, 47 Years	Lack of Supervision	Unfounded
12806 - Sibling, Male, 14 Years	12805 - Aunt/Uncle, Male, 50 Years	Inadequate Guardianship	Unfounded
12806 - Sibling, Male, 14 Years	12805 - Aunt/Uncle, Male, 50 Years	Lack of Supervision	Unfounded
12806 - Sibling, Male, 14 Years	12801 - Mother, Female, 47 Years	Sexual Abuse	Unfounded

**Report Summary:**

BM and PS (parent sub) used alcohol, heroin, and pills to get high in the direct presence of 3 CHN ages 16, 15, and 14. BM and PS were aware that the CHN used marijuana and did not attempt to intervene or change their behavior. At the time of the report BM and PS were very impaired and there was a party going on with 15-20 adults getting high with the CHN at home. The situation had been ongoing for the past 2 years.

**Determination:** Unfounded

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

**Basis for Determination:**

Case was UNF. BM continued to feel she is being harassed by a neighbor as several reports with similar allegations were made on 11/1, 11/6, 11/12, 11/15 and 11/21/15. CW went to the home with LE the night it was reported that there was a party going on and that everyone was impaired. CCDSS and LE found that nobody was impaired and there was not an excessive amount of people in the home. BM said they had family over for dinner. BM refused to go for a drug test. CHN never disclosed anyone has used drugs or alcohol around them. CCDSS has never seen anyone named in the report, under the influence of drugs or alcohol.

**OCFS Review Results:**

Two of the RAP questions were answered incorrectly. CCDSS identified CHN had never been in the care of alternate caregivers, when it was documented that the children were removed due to mother's drug use in 2013.

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

**Issue:**

Adequacy of Risk Assessment Profile (RAP)

**Summary:**

Two of the RAP questions were answered incorrectly. CCDSS identified CHN had never been in the care of alternate caregivers, when the case record showed otherwise. Progress notes reflect that history was reviewed and the children were removed in 2013 due to BM's drug use.

**Legal Reference:**



18 NYCRR 432.2(d)

**Action:**

Workers answers will accurately reflect the information they obtain through reviewing case history.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
08/16/2015	13054 - Sibling, Female, 16 Years	13051 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded	No
	13053 - Sibling, Male, 12 Years	13051 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	13053 - Sibling, Male, 12 Years	13111 - Mother's Partner, Male, 54 Years	Sexual Abuse	Unfounded	
	13054 - Sibling, Female, 16 Years	13111 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded	
	13054 - Sibling, Female, 16 Years	13111 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13055 - Deceased Child, Male, 12 Years	13051 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13052 - Sibling, Male, 14 Years	13051 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13052 - Sibling, Male, 14 Years	13111 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded	
	13053 - Sibling, Male, 12 Years	13051 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13052 - Sibling, Male, 14 Years	13111 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13052 - Sibling, Male, 14 Years	13051 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	13053 - Sibling, Male, 12 Years	13051 - Mother, Female, 47 Years	Sexual Abuse	Unfounded	
	13055 - Deceased Child, Male, 12 Years	13051 - Mother, Female, 47 Years	Childs Drug / Alcohol Use	Unfounded	
	13055 - Deceased Child, Male, 12 Years	13051 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	13055 - Deceased Child, Male, 12 Years	13111 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded	
	13054 - Sibling, Female, 16 Years	13051 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	13055 - Deceased Child, Male, 12 Years	13111 - Mother's Partner, Male, 54 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13053 - Sibling, Male, 12 Years	13111 - Mother's Partner, Male, 54 Years	Inadequate Guardianship	Unfounded	
	13054 - Sibling, Female, 16 Years	13051 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13053 - Sibling, Male, 12	13111 - Mother's Partner,	Parents Drug /	Unfounded	





Years	Male, 54 Years	Alcohol Misuse	
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**Report Summary:**

BM drank to intoxication while caring for 17 and 16-year-old females, 15 and 12-year-old males. BM also abused prescription medications to impairment. This occurred on a daily basis.

**Determination:** Unfounded

**Date of Determination:** 10/22/2015

**Basis for Determination:**

CHN never made any disclosures about their BM abusing substances. BM denied drug use and submitted to several urine screens throughout the investigation that were all negative for substances other than her prescribed medications.

**OCFS Review Results:**

CWs did a thorough investigation in regards to mother's drug use. Mother took random drug tests throughout the investigation, which all came back negative.

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

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
06/15/2015	13022 - Sibling, Female, 17 Years	13021 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	Yes
	13023 - Sibling, Female, 16 Years	13021 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13028 - Sibling, Male, 14 Years	13021 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	
	13028 - Sibling, Male, 14 Years	13021 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13022 - Sibling, Female, 17 Years	13021 - Mother, Female, 47 Years	Parents Drug / Alcohol Misuse	Unfounded	
	13023 - Sibling, Female, 16 Years	13021 - Mother, Female, 47 Years	Inadequate Guardianship	Unfounded	

**Report Summary:**

BM had weekend visitation with her CHN and she continued to abuse drugs in their presence. BM was unable to adequately care for the CHN due to her addiction to prescription pain medication. BM was arrested for shoplifting this weekend. The CHN were with the BM but it is unknown if she used the children to steal items.

**Determination:** Unfounded

**Date of Determination:** 07/08/2015

**Basis for Determination:**

BM tested negative for substances other than her prescription medication. CHN denied that BM uses substances while they're in her care on weekend visitation. BM and CHN denied the shoplifting event occurred.

**OCFS Review Results:**

CW did not confirm with LE that BM wasn't arrested in a shoplifting incident that was alleged in the report. CW simply took the word of BM and CHN that it was someone else who was arrested at the store while they were there.

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

**Issue:**

Contact/Information From Reporting/Collateral Source

**Summary:**

It was alleged that BM was arrested in a shoplifting incident. BM and CHN denied this happened. CW did not verify with LE that BM wasn't arrested for shoplifting.

**Legal Reference:**



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

**Action:**

CW will contact appropriate collaterals and obtain and document information necessary to determine allegations.

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Status/Outcome	Compliance Issue(s)
08/20/2014	13156 - Sibling, Male, 11 Years	13154 - Foster Parent, Female, 41 Years	Excessive Corporal Punishment	Unfounded	No
	13156 - Sibling, Male, 11 Years	13154 - Foster Parent, Female, 41 Years	Inadequate Guardianship	Unfounded	

**Report Summary:**

Earlier this month, FM slapped the 11-year-old CH on his hand with excessive force as a form of discipline. CH's hand was red and he was in pain for a while. FM did this because CH played with a hook that was used to hang objects on the wall. FF and other foster CHN had no roles.

**Determination:** Unfounded**Date of Determination:** 03/12/2015**Basis for Determination:**

CH did not sustain any marks or injuries nor did he have any significant lasting pain. CH was interviewed during this investigation and felt safe at the foster home. CH was slapped once on his hand with an open hand. CH had never been hit before or after that incident. CW spoke with several collateral contacts and appropriately determined this report to be unfounded.

**OCFS Review Results:**

CW did a thorough job investigating this case and appropriately determined to unfound this report.

**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)
03/20/2014	13375 - Sibling, Female, 15 Years	13373 - Unrelated Home Member, Male, 19 Years	Sexual Abuse	Indicated	No
	13374 - Sibling, Female, 16 Years	13372 - Unrelated Home Member, Male, 21 Years	Sexual Abuse	Indicated	
	13375 - Sibling, Female, 15 Years	13372 - Unrelated Home Member, Male, 21 Years	Sexual Abuse	Indicated	
	13374 - Sibling, Female, 16 Years	13373 - Unrelated Home Member, Male, 19 Years	Sexual Abuse	Indicated	

**Report Summary:**

Approximately one year ago, BM allowed two men, who were about 21 years old, to reside in the home. While residing in the home, they had sexual relationships with the two female children. BM was unaware of the sexual relationship between the men and her daughters.

**Determination:** Indicated**Date of Determination:** 09/15/2014**Basis for Determination:**

Throughout the investigation, CPS found some credible evidence to substantiate the allegations. CPS worked jointly with LE the investigation and there was some credible evidence. The two men were arrested and charged with rape in the 2nd degree and sexual misconduct.

**OCFS Review Results:**

CCDSS worked jointly with LE and was able to gain sufficient evidence from the investigation to make the correct



determination.

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)
01/14/2014	13367 - Sibling, Male, 10 Years	13365 - Mother's Partner, Male, 52 Years	Inadequate Guardianship	Indicated	No

**Report Summary:**

The SC, and 12 and 10-year-old SS were in kinship foster care with grandmother/foster parent. During this past winter break, the mother's boyfriend went to the home to pick up mail. During that time, the 10-year-old son was having an outburst and was out of control. Parent sub threw the child, who missed the mattress, and hit his head and back on the metal part of the bed post. As a result, the child was in pain. Prior to the children being placed in foster care, they were residing with the mother and parent substitute, making parent sub a person legally responsible. The roles of grandmother, 12-year-old son, and other 10-year-old son were unknown.

**Determination:** Indicated

**Date of Determination:** 05/09/2014

**Basis for Determination:**

All subjects and appropriate collaterals were interviewed and information was gathered to appropriately determine the allegations. Collateral contacts were able to corroborate the information the children disclosed regarding the allegations. Throughout the investigation, CPS found some credible evidence to substantiate the allegations.

**OCFS Review Results:**

CPS acted appropriately by changing the children's placement as their grandmother was unable to keep them safe in her care.

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

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

- 12/6/05-3/8/06 UNF: IG & L/S
- 8/8/07-9/26/07 UNF: IG & OTH/COI
- 4/30/08-5/19/08 UNF: OTH/COI
- 10/25/09-8/11/10 UNF: IG, L/B/W & S/D/S
- 1/14/10-4/6/10 UNF: IG & L/B/W
- 3/5/10-6/14/10 UNF: IG & OTH/COI
- 1/14/11-2/3/11 UNF: IG, CD/A, PD/AM
- 5/27/11-9/20/11 UNF: IG & OTH/COI
- 1/2/13-3/26/13 UNF: IG & PD/AM
- 3/20/13-7/25/13 INDICATED: IG, PD/AM, SA & LMC
- 4/12/13-7/31/13 UNF: IG, L/B/W & S/D/S

### Known CPS History Outside of NYS

There is no known CPS history 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: 07/08/2016

### 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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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: Berkshire Farm				

### Required Action(s)

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

Yes  No

### Preventive Services History

There is no record of Preventive Services History provided to the deceased child, the deceased child's siblings, and/or the other children residing in the deceased child's household at the time of the fatality.

### Required Action(s)



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

Yes  No

### Foster Care Placement History

There were no children in foster care at the time of the SC's fatality.

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

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

### 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