



Report Identification Number: BU-22-005

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

Issue Date: Aug 10, 2022

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	PS-Parent Sub
CH/CHN-Child/Children	OA-Other Adult	
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
CPS-Child Protective Services		
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-Other	
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	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	ASTO-Allowing Sex Abuse to Occur	



Case Information

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

Jurisdiction: Niagara
Gender: Female

Date of Death: 03/01/2022
Initial Date OCFS Notified: 03/07/2022

Presenting Information

On 3/7/22, Niagara County Department of Social Services (NCDSS) was notified by the maternal grandmother, that the mother and child had perished in a house fire. The house fire occurred in New York City on 3/1/22, and the child died the same day from injuries sustained during the fire. There was an open CPS investigation at the time of the fatality. NCDSS completed a 7065 Agency Reporting Form and notified the Buffalo Regional Office on 3/7/22.

Executive Summary

This fatality report concerns the death of a 1-year-old female subject child. At the time of the child’s death, she resided with her mother and father. Niagara County Department of Social Services (NCDSS) had an open Child Protective Services investigation at the time of the death regarding concerns unrelated to the fatality. NCDSS learned of the death of the child during a routine phone call with the maternal grandmother on 3/7/22. The mother and child perished in a fire at their residence, on 3/1/22. NCDSS did not have any contact with the father and there were no surviving siblings.

According to documentation, first responders were dispatched on 3/1/22, after receiving a call at 9:49AM, regarding a building fire at the family’s home. The record did not reflect where in the home or how the fire started. The mother and child were found in a bathroom at the residence, unresponsive, and transported to a local hospital. The mother and child were pronounced deceased at the hospital. The medical examiner reported the child died from smoke inhalation, but the record did not reflect if an autopsy was performed on the child. There was minimal detail gathered and documented regarding the child's death. The record reflected NCDSS requested documents from law enforcement but were not received at the time of the case closure.

NCDSS did not assign a secondary role to the county where the mother, father and child were residing during the open CPS investigation or after the fatal fire for services. The father was never seen face-to face, although attempts to contact him were made. NCDSS made attempts to see the grandmother face to face, but after the fatal incident the grandmother refused to meet with NCDSS. Based on the information in the record that NCDSS gathered, they determined there was no reasonable cause to suspect the death was a result of abuse or maltreatment and closed their investigation.

PIP Requirement

For citations identified in historical cases, NCDSS will submit a PIP to the Buffalo Regional Office within 30 days of receipt of this report. The PIP will identify action(s) NCDSS has taken, or will take, to address the cited issue(s). For issues where a PIP is currently implemented, NCDSS 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:**



- Safety assessment due at the time of determination? N/A

Determination:

- Was sufficient information gathered to make determination(s) for all allegations N/A as well as any others identified in the course of the investigation?
- Was the determination made by the district to unfound or indicate appropriate? N/A

Explain:

The death of the subject child was not reported to the SCR and there were no siblings or other children residing in the home; therefore, safety assessments and a determination were not required.

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:

There was minimal detail gathered and documented regarding the child's death. Based on the information NCDSS gathered, they determined there was no reasonable cause to suspect the death was a result of abuse or maltreatment and closed their investigation.

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: 03/01/2022

Time of Death: Unknown

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

County where fatality incident occurred: Bronx

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? Unknown

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 was supervisor impaired? Unknown if they were impaired.



At time of incident supervisor was:

- Distracted
- Asleep
- Absent
- Other: **found with the child**

Total number of deaths at incident event:

Children ages 0-18: 1

Adults: 1

Household Composition at time of Fatality

Household	Relationship	Role	Gender	Age
Deceased Child's Household	Deceased Child	No Role	Female	1 Year(s)
Deceased Child's Household	Father	No Role	Male	19 Year(s)
Deceased Child's Household	Mother	No Role	Female	22 Year(s)

LDSS Response

NCDSS learned of the death of the mother and child on 3/7/22, as a result of a house fire which occurred on 3/1/22 in New York City. NCDSS notified the Buffalo Regional Office and submitted the required 7065 Agency Reporting Form. NCDSS was initially involved with the family following an SCR report dated 2/24/22. The report alleged the mother failed to meet the child's needs and concerns regarding her history of transience. There were additional concerns regarding the grandmother's substance misuse.

NCDSS initially met with the mother and the child at a friend's residence on 2/24/22. The mother reported that her and the child resided with the father in Brooklyn since December 2021 and would be returning there the following day. NCDSS spoke with the MGM over the phone who confirmed the mother did not live with her and was in the Niagara County area visiting family.

NCDSS attempted to contact the father of the deceased child but were unsuccessful. NCDSS left a voicemail and sent text messages to the father and received no response.

NCDSS attempted to get copies of reports from first responders that were at the scene. NCDSS received an incident report and the Prehospital Care Report Summary from the fire department, regarding the fire. NCDSS requested records from law enforcement and medical personnel regarding the child, the records were not received at the time of the case closure. NCDSS was unable to speak to the first responders directly, regarding the fire and the death of the child. NCDSS did speak with the medical examiner's office, who reported the child was examined following the fire and the child died from smoke inhalation.

NCDSS contacted the child's pediatrician, and they reported no medical concerns for the child.

NCDSS left a voicemail for the father regarding services in response to the fatality. The MGM was offered grief services, but she declined. NCDSS found no evidence to support the allegations in the report open at the time of the death.

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 referred to an OCFS approved Child Fatality Review Team? Yes

CPS Fatality Casework/Investigative Activities

	Yes	No	N/A	Unable to Determine
All children observed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
When appropriate, children were interviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contact with source?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
All appropriate Collaterals contacted?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a death-scene investigation performed?	<input 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 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"/>

Additional information:

There were no siblings or other children in the home to be interviewed. This was not an SCR-reported fatality; therefore, certain investigative activities were not required.

Fatality Safety Assessment Activities

	Yes	No	N/A	Unable to Determine
Were there any surviving siblings or other children in the household?	<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	Not Offered	Needed but Unavailable	N/A	CDR Lead to Referral
Bereavement counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Funeral arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



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

Additional information, if necessary:
 NCDSS did not speak directly with the father during the investigation, despite attempts to contact him.

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:
 The were no surviving children.

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

Explain:
 NCDSS attempted to contact the father via phone call and text but were unable to make contact. NCDSS did leave grief counseling information on the father's voicemail.

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? N/A
- Was the child acutely ill during the two weeks before death? No

CPS - Investigative History Three Years Prior to the Fatality



Child Fatality Report

Date of SCR Report	Alleged Victim(s)	Alleged Perpetrator(s)	Allegation(s)	Allegation Outcome	Compliance Issue(s)
02/24/2022	Deceased Child, Female, 1 Years	Grandparent, Female, 55 Years	Inadequate Guardianship	Unsubstantiated	Yes
	Deceased Child, Female, 1 Years	Grandparent, Female, 55 Years	Parents Drug / Alcohol Misuse	Unsubstantiated	
	Deceased Child, Female, 1 Years	Mother, Female, 22 Years	Inadequate Food / Clothing / Shelter	Unsubstantiated	
	Deceased Child, Female, 1 Years	Mother, Female, 22 Years	Inadequate Guardianship	Unsubstantiated	

Report Summary:

NCDSS received a report which alleged the mother had a history of frequently moving around with the child (age 1). The mother was unemployed and had no means to provide food and clothing for the child. The mother depended on other people to provide for the child's basic needs. At times, the child had gone without food and clothing. The mother was aware that the maternal grandmother (MGM) drank alcohol and used crack to the point she had severe mood swings and at times slurred her speech. Despite knowing this, the mother left the child alone with the MGM, resulting in the MGM being impaired as the sole caretaker of the child.

Report Determination: Unfounded**Date of Determination:** 05/06/2022**Basis for Determination:**

NCDSS unfounded the case due to a lack of fair preponderance of evidence regarding the allegations. NCDSS made an announced visit to the home of a friend to meet with mother and the child and observed the home to meet agency safety standards. The child appeared clean and cared for. The mother returned to her residence in New York City the following day. While at her residence, on 3/1/22, both the mother and child died during a house fire. NCDSS reached out to the father, through voicemail and text, he did not respond. NCDSS contacted the pediatrician and there were no concerns for the child.

OCFS Review Results:

The record did not reflect that NCDSS checked history for the father and his PID's were not consolidated. The history of the maternal grandfather and his wife were checked and documented in Connections although they were not part of the CPS investigation. Case notes were entered in a timely manner and completed safety assessments on time.

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

Issue:

Case record contains information that is relevant, useful, factual and objective

Summary:

The father's information and demographics were not updated in Connections; therefore, pertinent information such as his name, and CPS history was inaccurately recorded in the case record of this investigation.

Legal Reference:

18 NYCRR 428.1(a) and 18 NYCRR 428.1(b)(1)

Action:

NCDSS records must contain information that is relevant, useful, factual and objective to best reflect accuracy throughout documentation.

PIP Requirement:

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

Issue:

Review of CPS History

**Summary:**

The case record does not reflect that NCDSS conducted a history check on the father.

Legal Reference:

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

Action:

NCDSS will review all prior CPS history within regulatory required time frames.

PIP Requirement:

The Buffalo Regional Office advised there is currently an existing PIP in place for this issue, as a result of a prior finding by OCFS. NCDSS will continue to work on this issue and revise their current PIP if deemed necessary.

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

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

Known CPS History Outside of NYS

There is no known CPS history outside of New York State.

Legal History Within Three Years Prior to the Fatality

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

Additional Local District Comments

Niagara County will thoroughly review prior history and will actively seek to consolidate PID's on persons named on the report.

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