



Report Identification Number: SV-18-010

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

Issue Date: Jul 02, 2018

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 | | |



Case Information

Report Type: Child Not Found
Age: Unknown

Jurisdiction: Westchester
Gender: Male

Date of Death: Unknown
Initial Date OCFS Notified: 02/08/2018

Presenting Information

An SCR report alleged an uncle starved the 1-year-old male child and as a result, he passed away on an unknown date. The uncle sold the child's organs. The uncle also sexually abused the 16-year-old boy. The uncle and aunt sold the 16-year-old to a group of agents that ran a prostitution ring, knowing he would be sex trafficked. He had been sex trafficked for the past two years. The 16-year-old had not attended school for the past three years and his education was negatively impacted. The aunt and uncle failed to intervene and protect the child. The role of the mother was unknown.

Executive Summary

Westchester County Department of Social Services (WCDSS) received the above SCR report on 2/8/18. It was determined the 1-year-old child did not exist. There was a 16-year-old male child who lived in the home with his grandmother. The aunt and uncle, who were the alleged subjects of the report, lived out of New York State and do not have contact with the family.

There were several reports made against the family in the past which were all unfounded. WCDSS initiated the investigation within 24 hours and found that the 1-year-old child did not exist, but a 16-year-old child did exist and was alive and well. Law enforcement and the District Attorney's office have been involved to investigate the possibility of false reporting, but have not yet taken any legal action.

The allegations of DOA/Fatality, Inadequate Guardianship, and Inadequate Food, Clothing & Shelter were unsubstantiated against the aunt and uncle for the 1-year-old child. The allegations of Inadequate Guardianship, Educational Neglect, and Sexual Abuse for the 16-year-old male child were also unsubstantiated. The family showed frustration over another false report. The case was unfounded and closed on 3/26/18.

Findings Related to the CPS Investigation of the Fatality

Safety Assessment:

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

Determination:



Child Fatality Report

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

Was the decision to close the case appropriate? Yes

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:

Casework activity was commensurate with case circumstances.

Required Actions Related to the Fatality

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

Fatality-Related Information and Investigative Activities

Household Composition at time of Fatality

| Household | Relationship | Role | Gender | Age |
|----------------------------|----------------|---------------------|--------|------------|
| Deceased Child's Household | Deceased Child | Alleged Victim | Male | 1 Year(s) |
| Deceased Child's Household | Father | No Role | Male | 46 Year(s) |
| Deceased Child's Household | Grandparent | No Role | Female | 68 Year(s) |
| Deceased Child's Household | Sibling | Alleged Victim | Male | 16 Year(s) |
| Other Household 1 | Aunt/Uncle | Alleged Perpetrator | Male | 36 Year(s) |
| Other Household 1 | Aunt/Uncle | Alleged Perpetrator | Female | 37 Year(s) |
| Other Household 2 | Mother | No Role | Female | 44 Year(s) |

LDSS Response

On 2/8/18, WCDSS received the fatality report from the SCR. WCDSS initiated their investigation within 24 hours and coordinated efforts with LE. CW informed the DA of the allegations and the history of false reports involving this family. WCDSS completed a history search of the family and reviewed an extensive number of reports that were all unfounded.

CW and LE made a joint home visit and spoke with the grandmother in the home. The grandmother had one 16-year-old grandson. There was no 1-year-old child that allegedly died. The 16-year-old child was assessed as being safe in the care of his grandmother. The grandmother and child were interviewed and denied all allegations. The 16-year-old was doing well in school and school collaterals had been contacted.

WCDSS had received 17 reports over the last 3 years, with similar allegations. No credible evidence had ever been found.



The alleged subjects of the report lived out of state and were not involved with this family. WCDSS attempted contact with them which was unsuccessful.

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? No

Comments: The child that was alleged to have died did not exist.

SCR Fatality Report Summary

| Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome |
|--|---|--------------------------------------|--------------------|
| 046669 - Sibling, Male, 16 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | Educational Neglect | Unsubstantiated |
| 046669 - Sibling, Male, 16 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | Inadequate Guardianship | Unsubstantiated |
| 046669 - Sibling, Male, 16 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | Educational Neglect | Unsubstantiated |
| 046669 - Sibling, Male, 16 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | Inadequate Guardianship | Unsubstantiated |
| 046669 - Sibling, Male, 16 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | Sexual Abuse | Unsubstantiated |
| 046669 - Sibling, Male, 16 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | Sexual Abuse | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | DOA / Fatality | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | DOA / Fatality | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | Inadequate Guardianship | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | Inadequate Guardianship | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046672 - Aunt/Uncle, Male, 36 Year(s) | Inadequate Food / Clothing / Shelter | Unsubstantiated |
| 046701 - Deceased Child, Male, 1 Year(s) | 046673 - Aunt/Uncle, Female, 37 Year(s) | Inadequate Food / Clothing / Shelter | Unsubstantiated |

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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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"/> |

Additional information:

The alleged subject uncle lived out of state and did not return multiple contacts from WCDSS. Attempts were made to contact the source of the report but were unsuccessful.

Fatality Safety Assessment Activities

| | Yes | No | N/A | Unable to Determine |
|--|-------------------------------------|-------------------------------------|--------------------------|--------------------------|
| Were there any surviving siblings or other children in the household? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Was there an adequate safety assessment of impending or immediate danger to surviving siblings/other children in the household named in the report: | | | | |
| Within 24 hours? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At 7 days? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At 30 days? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Was there an approved Initial Safety Assessment for all surviving siblings/ other children in the household within 24 hours? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are there any safety issues that need to be referred back to the local district? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

Placement Activities in Response to the Fatality Investigation

| | Yes | No | N/A | Unable to Determine |
|--|-----|----|-----|---------------------|
|--|-----|----|-----|---------------------|



Child Fatality Report

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|--|--------------------------|-------------------------------------|--------------------------|--------------------------|
| 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? | <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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mental health services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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"/> |

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) |
|--------------------|---|----------------------------|---------------|--------------------|---------------------|
| 12/07/2016 | Other Child - Only living child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Sexual Abuse | Unsubstantiated | No |



Child Fatality Report

| | | | |
|---|-------------------------------|-------------------------|-----------------|
| Other Child - Only living child, Male, 15 Years | Aunt/Uncle, Female, 37 Years | Sexual Abuse | Unsubstantiated |
| Other Child - Only living child, Male, 15 Years | Grandparent, Female, 67 Years | Sexual Abuse | Unsubstantiated |
| Other Child - Only living child, Male, 15 Years | Aunt/Uncle, Female, 37 Years | Inadequate Guardianship | Unsubstantiated |
| Other Child - Only living child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Inadequate Guardianship | Unsubstantiated |
| Other Child - Only living child, Male, 15 Years | Grandparent, Female, 67 Years | Inadequate Guardianship | Unsubstantiated |

Report Summary:

It was alleged the paternal aunt and her husband sold the 16yo to a sex trafficking ring and he was being prostituted. The paternal grandmother was aware of the criminal act but failed to intervene. The child had been gone from the grandmother's home for the past year.

Report Determination: Unfounded**Date of Determination:** 12/28/2016**Basis for Determination:**

The child was seen, interviewed, and denied the allegations. The child was very frustrated by the numerous reports and felt safe in the care of his grandmother. There was no credible evidence the child was ever missing, sold to a sex trafficking ring or had been prostituted.

OCFS Review Results:

WCDSS completed an accurate and thorough investigation and made the appropriate 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) | Allegation Outcome | Compliance Issue(s) |
|--------------------|--|----------------------------|-------------------------|--------------------|---------------------|
| 11/14/2016 | Other Child - Living child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Sexual Abuse | Unsubstantiated | No |
| | Other Child - Living child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Inadequate Guardianship | Unsubstantiated | |

Report Summary:

It was alleged the uncle kidnapped and held the teenage boy for sex trafficking purposes. The role of the mother was unknown.

Report Determination: Unfounded**Date of Determination:** 11/22/2016**Basis for Determination:**

There was a long history of reports being called in on this family. The grandmother, father, uncle, and child denied the allegations were true. The uncle lived out of state. The mother had been chronically homeless and was unable to be contacted. WCDSS found no credible evidence to substantiate the allegations.

OCFS Review Results:

WCDSS completed a thorough investigation and made the appropriate 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) | Allegation Outcome | Compliance Issue(s) |
|--------------------|-------------------|------------------------|---------------|--------------------|---------------------|
|--------------------|-------------------|------------------------|---------------|--------------------|---------------------|



| | | | | | |
|------------|--|-------------------------------|-------------------------------|-----------------|----|
| 03/11/2016 | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Internal Injuries | Unsubstantiated | No |
| | Other Child - Living Child, Male, 15 Years | Grandparent, Female, 67 Years | Internal Injuries | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 34 Years | Internal Injuries | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Lacerations / Bruises / Welts | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Grandparent, Female, 67 Years | Lacerations / Bruises / Welts | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 34 Years | Lacerations / Bruises / Welts | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Grandparent, Female, 67 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 34 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 34 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Aunt/Uncle, Male, 35 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Grandparent, Female, 67 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living Child, Male, 15 Years | Grandparent, Female, 67 Years | Educational Neglect | Unsubstantiated | |

Report Summary:

The grandmother was the guardian for the teenage boy. It was alleged the grandmother was aware that two adult uncles had sexually abused the child at different times and sex trafficked him and she allowed this to happen. The uncles were involved in having 4 fingers and 5 toes of the child cut off and having him shot. The uncles were also involved in the child's nose being cut off. The most recent alleged molestation happened about 2 weeks prior to this report. The uncles had acted as regular and consistent caretakers for the child. The grandmother was aware the child had not attended school at all for the past 2 years. The mother had an unknown role.

Report Determination: Unfounded

Date of Determination: 03/24/2016

Basis for Determination:

All alleged subjects and the child were interviewed and strongly denied the allegations. WCDSS observed the child had all of his fingers and his nose. The child had infrequent contact with his uncles and denied he had ever been sexually abused by them or anyone else.

OCFS Review Results:

WCDSS completed a thorough investigation and had no credible evidence to substantiate the allegations.

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

| Date of SCR Report | Alleged Victim(s) | Alleged Perpetrator(s) | Allegation(s) | Allegation Outcome | Compliance Issue(s) |
|--------------------|-------------------|------------------------|---------------|--------------------|---------------------|
|--------------------|-------------------|------------------------|---------------|--------------------|---------------------|



Child Fatality Report

| | | | | | |
|------------|--|-------------------------------|-------------------------------|-----------------|----|
| 10/28/2015 | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 33 Years | Childs Drug / Alcohol Use | Unsubstantiated | No |
| | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 34 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Grandparent, Female, 65 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 33 Years | Sexual Abuse | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 34 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 33 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Grandparent, Female, 65 Years | Inadequate Guardianship | Unsubstantiated | |
| | Other Child - Living child, Male, 14 Years | Aunt/Uncle, Male, 33 Years | Parents Drug / Alcohol Misuse | Unsubstantiated | |

Report Summary:

It was alleged the grandmother was aware and allowed 2 uncles to rape and have sex with the child. The uncles had frequent and regular contact with the child and were found in his home on a regular basis. The child visited the one uncle's home on weekends. The other uncle was using heroin and injecting the child with heroin. Mother had an unknown role.

Report Determination: Unfounded**Date of Determination:** 11/25/2015**Basis for Determination:**

All alleged subjects and child were interviewed and strongly denied the allegations. Contact was made with collaterals who did not have information to support the allegations.

OCFS Review Results:

WCDSS completed a thorough investigation, interviewed all parties, and did not have credible evidence to substantiate the allegations. The child remained safe in the care of his grandmother and father.

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

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

The child who was alleged to have died did not exist, therefore had no history.

Known CPS History Outside of NYS

N/A

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