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Case Review: The Foster Home of Kimberly Malpass
September 30, 2015

This report provides a comprehensive overview of the Department of Children and Families' (DCF) involvement with Kimberly Malpass, who was a licensed foster parent with DCF since March 5, 2014.

This review reinforces that recruitment, development, support, and oversight of families providing foster/pre-adoptive care to children in DCF custody requires the same protective lens as DCF's clinical work. Moreover, it underscores the importance of assessing each applicant, exploring their motivation, ensuring the applicant understands his or her role and responsibilities as a foster/pre-adoptive resource, and ensuring the applicant is able to provide a safe and stable home that promotes well-being for each child entrusted to their care.

The purpose of this review is not to place blame, but to highlight the importance of each decision made by individual case workers, family resource workers, and supervisors every day. This review demonstrates the importance of the initial screening of a foster home, the need for accurate documentation, the need for vigilant supervision, and the shared responsibility of all DCF staff to ensure the safety of children in DCF custody.

Despite Ms. Malpass' enthusiasm to be a foster parent, the Department should have used all available information to fully understand her ability to safely care for DCF children. There were several instances where DCF failed to appropriately assess the abilities of Ms. Malpass and failed to perceive risks of harm to children in her care. Fidelity to DCF policy would have mitigated these failures. A corrective action plan will be implemented as a result of this case review. These action items will be implemented in conjunction with the reform efforts that are already underway as a result of the findings in the CWLA quality review, the recently released report on the Loiselle case, and recently announced priorities between Local SEIU 509 and the Administration.

August 15, 2015

On August 15, 2015, Kimberly Malpass called 911 because two DCF foster children in her care, Samara, 22 months old, and Ava, 2 years old, were unresponsive. On the same day four 51A reports[1] were filed. These reports were screened-in[2] as an emergency[3] and Emergency Response Workers (ERWs) responded to the hospital.

Upon arrival to the hospital, Ava was pronounced dead and Samara was critically ill. Samara had high salt levels and was dehydrated. She was suffering from seizures, respiratory failure, and a high temperature. The medical findings suggested that the children suffered heat stroke, which would indicate that they had prolonged exposure to a high temperature environment.

At the time of the incident, four other children were living in the home. A third foster child, A.S., was transported to the hospital on August 15. After a medical examination no concerns of abuse were detected. A.S. was immediately placed in another DCF foster home. On August 16, 2015, all three of Ms. Malpass' children, T.Q., D.Q., and M.M., were medically cleared and DCF took emergency custody of the children; placing them with a relative.

On September 3, 2015, Samara was transferred to a long-term rehabilitation hospital. Currently, T.Q., D.Q., and M.M. remain in DCF custody and are placed with a relative. State and local police continue to conduct a criminal investigation.

Process for Review of the Case:

The Department of Children and Families Special/Case Investigation Unit (CIU) conducted a review of DCF involvement with the Malpass home as a result of the fatality of Ava and the near fatality of Samara. CIU is responsible for the internal review of all critical incidents within DCF. CIU's review was intended to capture the full chronology of contacts between DCF and the Malpass home and to conduct an analysis of these events and related decisions in the context of DCF policy, case practice, and agency operations.

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[1] A report filed with DCF on behalf of a child that alleges the abuse or neglect of the child is called a "51A report". Section 51A of chapter 119 of the Massachusetts General Laws requires certain individuals, such as medical or school staff, to file a report with DCF when they have reasonable cause to believe that a child is the victim of abuse or neglect.

[2] Upon receiving a 51A report, DCF screens the report to determine if the allegation meets DCF's criteria for suspected abuse or neglect, if there is immediate danger to the child, and whether DCF involvement is necessary. During screening DCF obtains information from the reporter and contacts professionals involved with the family (e.g., doctors, teachers). DCF may also contact the family, if appropriate. A report will be "screened-out" if it does not meet the criteria for a reportable concern, the perpetrator is a non-caretaker of the child, or the allegation in the report is not credible. All other reports are "screened-in" and assigned either for investigation or an initial assessment. Cases of sexual or serious physical abuse or severe neglect will be assigned for investigation. The severity of the situation will dictate whether it requires an emergency or non-emergency investigation. All other cases will be assigned for an initial assessment. Generally, moderate or lower risk allegations, are assigned for an initial assessment.

[3] An emergency investigation is initiated when it is determined that there is an imminent danger to a child. An emergency investigation must begin within two hours and be completed within five business days of the report. A non-emergency investigation must begin within two business days and be completed within 15 business days of the report.

The CIU reviewers examined the DCF record, including, investigation reports from 2008 and 2015, a screened-out 51A report from 2012, the family resource record for the Malpass foster home, the clinical records related to placements in the Malpass home, and the adoption record for Samara. CIU also obtained and reviewed the early intervention contacts for Samara and A.S., dictation from a pre-adoptive license study conducted by an outside agency, and the Auburn police department's responses to the Malpass home. During the 2015 CIU case review, interviews were conducted with two supervisors, four social workers with direct knowledge of the case, an area program manager, and the director for the Worcester East area office. Interviews were also conducted with the licensor and investigator from the Department of Early Education and Care (EEC) and the foster care manager from DCF Central Office.

Case Review Findings:

1) DCF Policy Was Not Followed During the Approval Process

The family resource policy mandates that each potential foster home is fully explored to ensure that it meets the physical and safety standards outlined in DCF policy and mandated by the Department of Early Education and Care (EEC). Each prospective foster parent must demonstrate that he or she meets the initial eligibility standards[4], including a background record check[5]. Once a review of the initial application and physical standards[6] is completed, a prospective foster parent must complete the pre-license education, support and training program. Prior to approval, the family resource worker must conduct a license study. During the license study, the family resource worker must obtain detailed information about an applicant's family, their significant relationships, their parenting style, their support network, their family of origin, and their medical and mental health history. The family resource worker must also conduct three interviews with an applicant, two of which must be home visits.

The licensing process utilized in Ms. Malpass' case was deficient and demonstrates an absence of supervisory oversight of critical steps required under DCF policy. Specific examples include:

[4] A foster parent must be at least 18 years old; all household members ages 14 and older must pass a background check; no member of the household can have an open case with DCF in the past 12 months; no person in the house can be responsible for the neglect or abuse of a child in the past; family must have a stable housing history; the home must have sufficient space; one member of the household must read and write English; the home must be clean, safe, have adequate lighting, appliances and furniture; each bedroom must provide at least 50 square feet per child.

[5] The background record check is a two part inquiry. The background record check (BRC) is a search of the DCF clinical database to determine prior 51A/51B history. The Criminal Offender Record Information (CORI) check is used to determine if the individual has a criminal history.

[6] All foster homes must meet physical standards. For example, the home must: be clean, safe, free of obvious fire and other hazards, and of sufficient size to accommodate comfortably and appropriately all members of the household and the approved number of foster/pre-adoptive children; have safe and adequate lighting, ventilation, hot and cold water supply, plumbing, electricity and heat; be furnished with a refrigerator and cooking stove in safe, working condition; have sufficient furniture to allow each child to sleep in a separate bed and to have adequate storage space for her/his personal belongings; have bedrooms which provide at least 50 square feet per child; have smoke detectors in working order on every floor; and have a working telephone.

- The family resource worker conducted one pre-screening visit to the home during the application process and one additional home visit prior to the license study being approved. At least one more interview should have been conducted prior to approval.
- Physical and safety standards of Ms. Malpass' home were not fully assessed, resulting in erroneous conclusions regarding physical capacity. There was not enough physical space to accommodate the children who were placed there.
- The family resource worker approved the foster home without specifying any specific criteria for the number, gender, age, and characteristics of children who may be placed in the home. This omission was critical because the limited physical space should have restricted the home's capacity to one female foster child.
- The family resource worker did not interview Ms. Malpass' children during the license study despite the fact that all three were old enough to participate in the assessment process. [7]
- The family resource worker did not assess the needs of Ms. Malpass' children or her capacity to meet those needs. Specifically, the family resource worker did not follow-up on a concern raised by one of the children's physician, who reported that Ms. Malpass was overwhelmed by managing her own children's medical needs.
- The fact that T.Q. and D.Q. had no relationship with their biological father was not explored. Nor, did the family resource worker obtain any information about the circumstances of M.M.'s adoption.
- Ms. Malpass' background record check revealed that she had prior contacts with DCF; a 51A report was filed in 2008 and 2012. As a result of the prior DCF contact, her application to become a foster parent required approval by the director of areas. The request for approval by the director of areas did not acknowledge the 2012 51A report. Only being presented with the 2008 51A report[8], the director of areas approved the application to move forward, with the caveat that the license study must demonstrate that the concerns raised in the 2008 51A report no longer exist. During the 2015 CIU investigation, the family resource worker acknowledged that (s)he did not comply with this directive. A review of the file demonstrates that the family resource supervisor did not follow-up to ensure compliance with the directive.
- The family resource worker made no attempt to obtain a prior home study that was completed by an outside agency in 2007 when Ms. Malpass independently adopted M.M.

2) DCF Failed to Appropriately Utilize Available Information to Understand the Capacity of the Caregiver

A review of the case demonstrates that Ms. Malpass was an enthusiastic foster parent who provided care to nine separate foster children over the course of eighteen months: two of those foster children were less than 1 month old; two were under 1 year old; two were under 2 years old; two were under 3 years old; and 1 was almost 5 at placement. At least five separate case

[7] Ms. Malpass' 3 children lived in the home; two biological sons and one adopted daughter. At the time of the license study the children's ages ranged from 7 to 13 years.

[8] The 51A report was investigated by DCF; however, the allegations were determined to be unsupported during DCF's review.

workers came into contact with Ms. Malpass over the eighteen month period and provided positive reports about Ms. Malpass and the well-being of the children in her care. Ms. Malpass was more than willing to accept the challenges of caring for her 3 children in addition to many young foster children. Nevertheless, it was the responsibility of DCF to utilize all available information to appropriately assess her capability to provide quality care to those children.

DCF did not assess Ms. Malpass' Health Status

In 2008 Ms. Malpass reported to DCF that she: had a diagnosis of Lupus; had suffered kidney failure since she was 12 years old; was in weekly therapy; took Xanax nightly; and took two different medications for her kidney disease. During the application process Ms. Malpass indicated that she: was disabled, receiving Social Security Disability (SSD) payments; continued to suffer from Lupus; and had Gout.

The license study record contains no assessment of how Ms. Malpass' illness and disability might impact her ability to provide quality care to young children.

DCF did not assess Ms. Malpass' parenting capability

Ms. Malpass has 3 children, at least one of whom has special needs. During the license study, very little information was obtained about T.Q. and D.Q.'s father, who had no contact with the children, and the adoption of M.M. Additionally, one of the medical references provided by Ms. Malpass raised concerns about Ms. Malpass being overwhelmed and called into question her ability to care for additional children. Particularly concerning is the fact that none of Ms. Malpass' three children, ages 7 to 13 years, were interviewed during the license study.

In 2012, as a result of a 51A report, DCF contacted a guidance counselor at Ms. Malpass' children's school. The guidance counselor reported that: one of the Malpass' children experienced 23 absences, 13 dismissals and was late 8 times; Ms. Malpass and the maternal family were well known to the Auburn schools regarding issues of chronic neglect. DCF also spoke to staff at the school who indicated that one of the Malpass children was out of control at times and "can't be brought back" and the family was known for "inter-generational neglect."

The license study record does not make any reference to the 2012 51A report suggesting that this information was not considered. The information contained in the license study was not sufficient to assess Ms. Malpass' parenting style or to assess the quality of care that she was currently providing to her children. For these reasons, the license study could not accurately assess Ms. Malpass' capacity to parent additional children.

DCF did not fully assess the safety of the home prior to licensing the home

In 2008, Ms. Malpass admitted to DCF that she put bills in her children's names. This behavior is against the law and should have raised questions about her judgment. During the 2015 CIU investigation, the family resource worker indicated that she never spoke to Ms. Malpass to discuss whether Ms. Malpass discontinued the practice of putting bills in her children's names.

Additionally, DCF did not contact the local police department to inquire about the Malpass home. Although there is no current protocol or policy that requires this check, such a review would have shown that between July, 2008 and December, 2013, there were at least 25 police

responses to the home. Although no arrests were made during these responses, the Auburn police were familiar with Ms. Malpass and her family.

DCF failed to act on concerning information obtained subsequent to licensing the home
In March of 2015, a 51A report was filed alleging that Ms. Malpass was allowing her boyfriend, Mr. Mallet, to stay in the home. According to the 51A report, Mr. Mallet used drugs and had been recently charged with unarmed robbery. The DCF investigator ran a background record check on Mr. Mallet, which revealed concerning criminal charges. After an investigation, the investigator noted that Mr. Mallet was likely in the home more than Ms. Malpass reported.[9] Despite the 51A report and the investigator's findings in April, there was no increased oversight of the home.

3) DCF Supervision in Ms. Malpass' case was deficient

The full review of this case demonstrates that DCF staff charged with supervision and oversight neglected to provide a check and balance to ensure compliance with DCF policy and practice, as outlined in the family resource policy and EEC Licensing Standards. An important role of a DCF supervisor is to perceive risk when it is missed by the resource worker and ensure fidelity to DCF policy.

Upon review of the license study, the supervisor should have identified several concerns based on the 2008 and 2012 contacts Ms. Malpass had with DCF. The supervisor should have also reviewed the documentation in the case and required the family resource worker to complete all requisite paperwork. Specific deficiencies in documentation include:

- The family resource worker did not appropriately complete or date the forms used to document the physical standards in the home.
- The record does not indicate that the family resource worker provided the foster/pre-adoptive parent agreement to Ms. Malpass or had her sign the document. DCF policy requires the agreement to be signed and placed in the record. This document indicates the type of licensure granted to the foster home, provides important information to the foster parent, and is a contract between DCF and the foster parent.
- Ms. Malpass did not sign the required information verification form. This documents the family's receipt of all required information.
- Samara, A.S., and Ava's social worker did not complete the required child placement agreements. The child placement agreement outlines supports that should be provided to the foster parent by the family resource worker and the child's social worker. The child placement agreement is supposed to be reviewed during the annual re-evaluation of the foster home.
- The child placement agreements obtained for other children placed in the home were not filled out completely and were missing required signatures.
- The overcapacity waivers submitted on April 1, 2014 and February 11, 2015 omitted key facts.

[9] During the CIU investigation in August of 2015, Mr. Mallet reported that he lived in the home for about a year and a half.

- Between November 17, 2014 and January 1, 2015, four foster children were living in the Malpass home despite the fact that the home was only licensed for three. When a foster home is over its licensed capacity, the area director must obtain approval from the regional director. Neither prior to nor during this time period when the home was overcapacity was an approval sought.

4) DCF Policy Was Not Followed during the Probationary Period of Ms. Malpass' Foster Home

Subsequent to being licensed by DCF, a foster home is put on a 6 month probationary period. During a probationary period the family resource worker is required to visit the foster home monthly.

During Ms. Malpass' probationary period, the family resource worker conducted only 3 of the 6 required visits. The family resource worker did not make visits to the Malpass foster home in May 2014, July 2014, or August 2014. During the 2015 CIU case review, the family resource worker indicated that (s)he felt (s)he had visited the home on additional occasions but had not entered the visits into the appropriate records.

5) Ms. Malpass Had Too Many Children in her Care

Placement History, March 2014 to August 2015

Name	Date of birth	Age at placement	Date of placement	End of placement
S.S.	4/9/13	10 months, 24 days	3/5/14	4/3/14
I.C. (sibling of A.C.)	5/3/11	2 years, 11 mos.	3/31/14	9/18/14
A.C. (sibling of I.C.)	5/7/12	1 year, 11 mos.	3/31/14	9/18/14
Samara (sibling of A.S.)	10/1/13	8 months, 26 days	6/26/14	8/15/15
L.R.	8/26/14	24 days	9/19/14	10/17/14
Ava	8/10/13	1 year, 1 month	9/20/14	8/15/15
E.E. (sibling of J.E.)	12/8/09	4 years, 11 mos.	11/17/14	1/7/15
J.E. (sibling of E.E.)	7/15/11	3 years, 4 mos.	11/17/14	3/4/15
A.S. (sibling of Samara)	2/6/15	14 days	2/20/15	8/15/15

The Department establishes capacity limits regarding the maximum number of foster children to ensure that the foster family is able to meet the children's needs as well as the needs of the other household members. DCF policy provides that a maximum of six children, including biological, adopted, and foster children, may be cared for in a single home at one time. Of the six children, up to two may be age 24 months or younger and only one may be age one month or younger. During a foster home's probationary period, up to two foster children may be placed in the home.

The Malpass foster home was initially approved for two children on March 5, 2014. On April 1, 2014, less than a month later and during the probationary period, the family resource worker sought a waiver[10] of the limit on the maximum number of children allowed in the Malpass home. The waiver submitted for approval inaccurately indicated that the "foster home has space to place the girls together rather than place them in two different foster homes." The regional director granted an approval to increase the capacity from two to three children.

On September 20, 2014, Ava, 1 year and 1 month old, was placed in the Malpass foster home. Despite DCF policy, at this point in time there were three foster children in the home all under the age of two.

On November 17, 2014, the family resource worker placed two children, J.E. and E.E., in the Malpass foster home. At this point in time there were four foster children in the home. All four children lived in the home from November 17, 2014 until January 7, 2015. However, no overcapacity approval was submitted or approved during this two month time period.

On February 11, 2015, the regional director granted an over-capacity approval to permit A.S. to be placed in the home. From February 20, 2015 through March 4, 2015 there were four foster children living in the Malpass home. The overcapacity approval was contingent on weekly visits to the foster home, which were a shared responsibility between the ongoing social workers and the family resource worker.

From March 4, 2015 until August 15, 2015, there were 3 foster children in the home, each less than 24 months old and one of whom was 14 days old at the time of placement.

In each instance prior to granting an overcapacity approval, DCF should have: 1) conducted an inquiry to ascertain whether the physical and safety standards of the home were met, including sleeping arrangements; and 2) determined whether Ms. Malpass had the parental capacity to care for so many children. In addition, with so many young children in the home, DCF should have required increased supervision over the home.

Corrective Action Plan:

1. **System Level Action Items**
   - Retrain all family resource workers, supervisors, and managers on the requirements and compliance expectations embedded in family resource policy and EEC licensing standards.
     - Reinforce the expectation that a tape measure must be used to ensure adherence to physical standards.
     - Reinforce the expectation that all license studies include an interview with each household member, including children and individuals frequently visiting the home.

[10] Under DCF policy, during a foster home's probationary period up to two children may be placed in a home. In order to increase capacity in the home, a waiver request must be submitted by area director and approved by the regional director. A waiver request must include: name, date of birth, familial relationship of children in the home; name and date of birth of children recommended for placement; the reason the placement is in the child's best interest; efforts to locate alternate placement; and the area director's recommendation.

- Issue guidance on use of medical and behavioral health histories to assess impact on a caregiver's ability to safely provide quality care.
- Clarify existing foster home policy regarding the approval of overcapacity requests and requests to place more than two children under 24 months in a single foster home.
- Modify the foster home approval process to require contact with local law enforcement agencies to obtain information related to police or emergency responses to potential foster homes.
- Incorporate into policy the use of use of social media in the foster home approval process and foster home re-assessment process.
- Develop an internal audit process to ensure foster home approvals and licensing assessments are completed in accordance with DCF policy.

2. Regional Level Action Items

- The regional and central offices will conduct a record review of Worcester East area office's family resource records. The review will examine compliance with DCF policy and EEC licensing standards and will identify practice concerns and quality improvements needed in the Worcester East area office.
- Following the rollout of the retraining on family resource policy and EEC licensing standards, area program managers and supervisors managing family resource units will meet regionally on a bi-monthly basis to ensure consistent application of and compliance with policy and EEC licensing standards.
- Regional quality assurance staff will conduct ongoing and regular reviews of existing foster home approvals, with an immediate focus on overcapacity approvals and ensuring that enhanced safety assessments are complete and comprehensive.

3. Area Office Level Action Item: Worcester East

Each foster home in the Worcester East area office will complete an enhanced safety assessment at the next assessment period (annual, limited or reassessment). Pursuant to the assessment, all bedrooms will be measured with a tape measure and measurements will be recorded in the DCF file. This assessment may occur earlier in the event of issues arising from the Central/Regional audit process.

4. Determine Disciplinary Action Consistent With the Findings of This Report

As a result of this review, two DCF staff members have been reassigned from their current responsibilities. One social worker was assigned to administrative duties pending appropriate human resource action. Such action will include a show cause hearing to determine appropriate disciplinary action. One former supervisor, now a manager, has been reassigned to the regional office, pending the results of the internal audit of the foster homes in the Worcester East area office.

5. Implement the Corrective Action Plan in Coordination With Other System Reforms

The Department of Children and Families is in the midst of fundamental and far-reaching reforms. Several high profile and tragic incidents involving children and families working with DCF have brought attention to the need for systemic and broad-based investments and changes.

The findings from this case review, along with those in the recent review of the case involving seven year old Jack Loiselle, are being used in conjunction with the blue print for improvement detailed in the Child Welfare League of America (CWLA) report to chart-out short, medium and long-term reforms. These reforms include new investments to reduce social worker caseloads and expand management and supervisor capacity. DCF will bring in specialized expertise to support case-level decision-making. The policies for appropriate supervision, intake processes, and the assessment of parental/caregiver capacity are all being revised with urgent timelines for implementation. DCF will also be working with community partners across the state to help identify, recruit and retain foster families willing and able to safely care for and nurture children who are unable to safely remain at home. Each of these reforms will be advanced in the context of ensuring a sharp focus on DCF's primary mission of protecting children.

Chronology of Ms. Malpass' Contacts with DCF

This report highlights DCF's interaction with Ms. Malpass prior to becoming a foster parent and after she was approved as a foster parent.

Malpass Household Members on August 15, 2015

Name	Birth date	Relationship	Current
Kimberly Malpass	1/6/1981	Foster Mother	
Anthony Mallet	12/7/1981	Foster mother's boyfriend	
T.Q.	7/22/2000	Malpass' biological son	kinship placement
D.Q.	7/11/2004	Malpass' biological son	kinship placement
M.M.	3/3/2006	Malpass' adopted daughter	kinship placement
Samara	10/1/2013	Foster child	long-term rehab hospital
Ava	8/10/2013	Foster child	deceased
A.S.	2/6/2015	Foster child, Samara's sibling	with new foster family

Contact with DCF Prior to Approving Ms. Malpass as a Foster Parent

July 2, 2008, 51A report filed with DCF alleging the neglect of Ms. Malpass' three children by Ms. Malpass. Report alleged deplorable conditions in the home and that Ms. Malpass put bills in the children's names. The report was screened-in for an emergency response and ERWs responded to investigate the allegations. [11] During the investigation Ms. Malpass reported that she: had a diagnosis of Lupus; suffered kidney failure since she was 12 years old; was in weekly therapy; took Xanax nightly; and took two different medications for her kidney disease. Ms. Malpass admitted to putting bills in the children's names. The ERWs did not find the apartment to be in deplorable condition as reported.

July 7, 2008, the case was closed because the allegations of neglect were unsupported.

[11] An emergency investigation is initiated when it is determined that there is an imminent danger to a child. An emergency investigation must begin within two hours and be completed within five business days of the report. Upon conclusion of the investigation, the investigator will issue a conclusion that the allegations were either supported or unsupported. An allegation is unsupported when there is not reasonable cause to believe a child has been abused or neglected, or the harm was not caused by a care taker.

June 4, 2012, 51A report filed with DCF alleging the neglect of Ms. Malpass' three children by Ms. Malpass and the physical abuse of M.M. by Ms. Malpass' boyfriend. Report alleged that Ms. Malpass verbally threatened the children and swore at them and that welts were observed on M.M. from being hit with a belt by the boyfriend. During the screening process, DCF contacted a guidance counselor at the children's school, who reported that one of the Malpass' children experienced 23 absences, 13 dismissals and was late 8 times and Ms. Malpass and the maternal family were well-known to the Auburn schools regarding issues of chronic neglect. The screener also spoke to staff at the school, who indicated that: one of the Malpass children was out of control at times and "can't be brought back"; there were no concerns pertaining to physical abuse of M.M.; and the family was known for "inter-generational neglect."

June 11, 2012, the 51A report was screened-out.

Malpass Foster Home Chronology

This chronology details the contacts DCF had with Ms. Malpass between August of 2013 and August of 2015. Between April of 2014 and August of 2015, DCF social workers visited the home frequently. Unless otherwise noted in the chronology, during each visit the social worker reported no concerns with the home or the children or indicated that the children were doing well. Social workers in the home consistently reported that the foster children were happy, appeared neatly dressed, and that Ms. Malpass was providing a caring environment.

Application and Initial Approval Process

August 23, 2013, Ms. Malpass submitted an application to the Worcester East area office to become a foster parent.

September 16, 2013, the family resource worker conducted a pre-screening visit to the Malpass home and obtained information for the license study. Little detail was recorded in the file about the home or the visit.

October 31, 2013, the family resource worker conducted a home visit and gathered information to complete the license study.

November 13, 2013, Ms. Malpass completed the required Massachusetts Approach to Partnership in Parenting (MAPP) training for new foster parents.

November 20, 2013, Ms. Malpass wrote a letter, upon request of the area office, requesting a waiver related to the 2008 unsupported DCF investigation. This waiver was necessary in order for her to be approved as a foster parent.

November – March, 2013, the family resource worker conducted the license study, which included medical, educational, and personal references. Ms. Malpass was receiving SSD; there was, appropriately, no employment reference in the file. The study did not include information about the full nature of Ms. Malpass' disability, the impact, if any, it would have on her foster parenting capacity, and for what length of time she had been receiving disability benefits. One of the medical references provided by Ms. Malpass raised concerns about Ms. Malpass being overwhelmed and called into question her ability to care for more children. T.Q. and D.Q. were not interviewed during the license study and very little information was obtained about their

father, who had no contact with the children. Additionally, very little information was obtained about the adoption of M.M.

January 17, 2014, the area program manager recommended a waiver of the 2008 DCF history, allowing Ms. Malpass' foster parent application to move forward. The waiver was granted with the caveat that during the license study, the family resource worker must verify current medication prescribed, if any, and ensure all utilities are in the name of an appropriate adult.[12]

Ms. Malpass is licensed to care for up to two children

March 5, 2014, Ms. Malpass' home was approved as an unrestricted[13] foster home resource for two children. The family resource worker did not specify or make any recommendations about the age, gender, or needs of the children who would be placed in the Malpass foster home.

March 5, 2014, S.S., 10 months and 24 days old, is placed in the Malpass home. One foster child is in the home.

March 6, 2014, the family resource worker visits the Malpass home.

March 6, 2014, S.S.'s social worker visits the Malpass home.

March 20, 2014, S.S.'s social worker visits the Malpass home.

Ms. Malpass' home is overcapacity, the home is licensed to care for up to two children but three are in the home

March 31, 2014, siblings I.C., 2 years 11 months, and A.C., 1 year 11 months, are placed in the Malpass home. Three foster children are in the home.

April 1, 2014, a waiver[14] is sought of the limit on the maximum number of children allowed in the Malpass home. The waiver inappropriately indicates that the foster home has space to place the siblings together rather than place them in two different foster homes.

Ms. Malpass' home is licensed to care for up to three children

April 3, 2014, a limited re-evaluation was completed on the Malpass home for the purpose of conducting a background record check on Ms. Malpass' parents so they could babysit the children. During this limited re-evaluation, the capacity of the foster home was increased from

[12] During the August 2015 CIU investigation, the family resource worker reported (s)he did not have a conversation with Ms. Malpass during the licensing study about the concerns raised in the 2008 report to DCF.

[13] An unrestricted foster home is licensed by DCF to provide care for a child usually not previously known to the individual. Other types of DCF family resources include: kinship care and child-specific care, where the caregiver has a prior relationship with the child.

[14] Under DCF policy, during a foster home's probationary period up to two children may be placed in a home. To increase capacity in the home a waiver request must be submitted by the area director and approved by the regional director. A waiver request must include: name, date of birth, familial relationship of children in the home; name and date of birth of children recommended for placement; the reason the placement is in the child's best interest; efforts to locate alternate placement; and the area director's recommendation.

two to three children. There was no reason for this change reflected in the resource worker's documentation.

April 3, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

April 3, 2014, S.S. leaves the Malpass home. Two foster children remain in the home.

April 14, 2014, Ms. Malpass contacted I.C. and A.C.'s social worker and requested early intervention services for the girls.

April 15, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

April 28, 2014, the family resource worker visits the Malpass home. Ms. Malpass indicates that she is preparing for surgery and that her mother will be in the home to provide support during her post-surgery recovery.

April 29, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

April 30, 2014, Ms. Malpass contacted I.C. and A.C.'s social worker indicating that she observed marks on the side of I.C.'s right leg and did not see them the night before when she bathed her.

May 7, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

May 19, 2014, Ms. Malpass contacted I.C. and A.C.'s social worker and explained that her surgery had been rescheduled from late April to May 22, 2014, so her mother would be picking the girls up from daycare. Ms. Malpass also expressed concern that the girls were biting other children. The social worker suggested that Ms. Malpass discuss her concerns about the girls' behaviors with the early intervention clinician.

May 31, 2015, the family resource worker did not complete the mandated home visit during the month of May.[15]

June 3, 2015, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

June 12, 2014, the family resource worker visits the Malpass home.

June 17, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

[15] Family resource workers are required to conduct monthly home visits during a foster home's six month probationary period. These visits are important because they allow for the timely identification of issues in the home and a timely response to concerns the family may have with the child. These visits also provide an opportunity to encourage a foster parent to participate in trainings consistent with the child's needs.

June 26, 2014, Samara, 8 months and 26 days old, is placed in the Malpass foster home. Three foster children are in the home.

June 30, 2014, Ms. Malpass called the supervisor responsible for Samara's case and reported that Samara had lice, was having difficulty eating solid food, and would be going to the pediatrician. The supervisor promised to ensure that Samara's early intervention services were transferred so there would not be any disruption in services for Samara.

July 4, 2014, Samara's social worker picks her up from the Malpass home and transports her to a supervised visit.

July 7, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

July 15, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

July 18, 2014, Ms. Malpass called Samara's social worker indicating that Samara continued to have problems eating.

July 24, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

July 28, 2014, Ms. Malpass informs Samara's social worker that Samara has a hand, foot and mouth virus and a fever and had gone to the doctor.

July 31, 2014, the family resource worker did not complete the mandated home visit during the month of July.

August 5, 2014, I.C. and A.C.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

August 5, 2014, Ms. Malpass contacts the family resource worker to report that she filed a complaint with the police because her neighbor stole her credit card information. Ms. Malpass was concerned that the neighbor would file a vindictive report with DCF against her.

August 6, 2014, Ms. Malpass called the family resource worker to report that Samara was still sick and had gone to the doctor for treatment of a rash and a fever. Ms. Malpass also reported that she was going on vacation for a week and needed respite for Samara.

August 8, 2014, Samara is placed in respite and I.C. and A.C. visit their maternal grandmother while Ms. Malpass is on vacation.

August 18, 2014, Samara, I.C., and A.C. return to the Malpass foster home.

August 18, 2014, Ms. Malpass called the family resource worker and Samara's DCF social worker to report that Samara's rash was chicken pox.

August 31, 2014, the family resource worker did not complete the mandated home visit during the month of August.

September 9, 2014, Samara's social worker picks her up at daycare, transports her to a supervised visit, and drops her off at the Malpass home.

September 11, 2014, Ms. Malpass reports to DCF that she noticed a bruise on I.C.'s leg. I.C. indicated that she received the bruise from the daycare provider because she was naughty. A 51A report is filed alleging the physical abuse of I.C. by her daycare provider. This report was screened-in and assigned to the Special Investigation Unit (SIU)[16].

September 12, 2014, the family resource worker visits the Malpass home.

September 16, 2014, Samara's social worker picks her up from the Malpass home and transports her to a supervised visit.

September 19, 2014, I.C. and A.C. leave the Malpass foster home and are placed with a relative. One foster child remains in the home.

September 19, 2014, L.R., 24 days old, is placed in the Malpass foster home. Two foster children are in the home.

September 20, 2014, Ava, 1 year and 1 month old, is placed in the Malpass foster home. Three foster children are in the home; all three are under the age of two years old.

September 22, 2014, L.R.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

September 24, 2015, Ava's social worker visits her at the Malpass home.

September 26, 2014, L.R.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

October 6, 2014, L.R.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

October 10, 2014, Samara's social worker picks her up at daycare, transports her to a supervised visit, and returns her to daycare.

October 17, 2014, L.R. leaves the Malpass foster home. Two foster children remain in the home.

October 17, 2014, Ava's social worker picks her up at daycare and transports her to a supervised visit.

October 21, 2014, Samara's social worker picks her up at the Malpass home, transports her to a supervised visit, and returns her to daycare.

October 30, 2014, Ava's social worker visits her at the Malpass home.

[16] On September 16, 2014, an SIU investigator interviewed Ms. Malpass and I.C. about the incident. The SIU investigator also interviewed the daycare provider and other collaterals involved with I.C. and the childcare provider. The investigation was unsupported in October, 2014.

November 10, 2014, Ava's social worker visits her at the Malpass home.

Ms. Malpass' home is overcapacity, the home is licensed to care for up to three children but four are in the home. Overcapacity waiver, which is required by DCF policy, is not requested.

November 17, 2014, Siblings, E.E., 4 years and 11 months old, and J.E., 3 years and 4 months old, are placed in the Malpass foster home. Four foster children are in the home.

November 19, 2014, the family resource worker visits the Malpass home. Ms. Malpass reports that E.E. and J.E. are having difficulty sleeping and are waking up during the night crying.

November 19, 2014, E.E. and J.E.'s social worker picks the girls up from the Malpass home and transports them to a supervised visit.

November 24, 2014, Samara's social worker picks her up at daycare and transports her to a supervised visit. Ms. Malpass reports that the early intervention clinician comes to the home every Tuesday to work with Samara and things are going well.

November 26, 2014, Samara's social worker picks her up at daycare and transports her to a supervised visit.

November 28, 2014, the family resource worker conducts the annual re-evaluation[17] of the Malpass home. The re-evaluation does not fully comply with DCF policy because the family resource worker does not: complete the physical standards check list; measure the rooms; or complete a comprehensive assessment of the home's capacity to care for foster children. The family resource worker highlights that the home does not meet the standard that requires 50 square feet per child but then notes in the narrative that "the home meets all physical and safety standards." A summary of placements is included in the evaluation, including a summary of the challenges with E.E. and J.E.

December 11, 2014, Ava's social worker visits her at the Malpass home.

December 16, 2014, Samara's social worker picks her up from the Malpass home and transports her to a supervised visit.

December 17, 2014, the family resource worker visits the Malpass home. Ms. Malpass discusses her difficulties with J.E. and E.E.; they have trouble sleeping and are very disruptive in the home. Ms. Malpass reports speaking regularly with the girls' social worker and express that she wants the girls to be able to stay together, but their behaviors are disruptive.

December 18, 2014, Samara's social worker picks her up from the Malpass home and transports her to a supervised visit.

[17] The purpose of the annual re-evaluation is to: review the family's provision of foster/pre-adoptive care services since the initial license study; determine what supports are needed to encourage the family's willingness and ability to continue providing foster/pre-adoptive care services; and determine whether the licensing standards continue to be met.

January 7, 2015, Ms. Malpass reports to the family resource worker that E.E. and J.E. are out of control and she does not feel she is able to keep both of them. Ms. Malpass expresses concern for the safety of the other foster children in her home.

January 8, 2015, E.E. and J.E.'s social worker brings the girls to a supervised visit with their mother and maternal grandfather. E.E.'s mother notices a scratch on E.E.'s upper chest. E.E. reports that it came from "AJ," a boy at school. E.E.'s mother complains that the girls' hair is not combed. The girls' social worker speaks to Ms. Malpass about the girls' hair. Ms. Malpass agrees to ensure the girls' hair is combed.

January 8, 2015, E.E. leaves the Malpass home and is placed in a residential program. Three foster children remained in the home.

Three children are in the home; an overcapacity waiver is not needed under DCF policy.

January 12, 2015, a foster care review[18] is held for Samara. The foster care reviewer concluded that DCF and Ms. Malpass were in full compliance with their service plan tasks. Placement for Samara was deemed necessary and appropriate and a recommendation was made to change her goal from reunification to adoption.

January 13, 2015, the annual re-evaluation, which began on November 28, is completed. The capacity of the home is three children.

January 14, 2015, J.E.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

January 20, 2015, J.E.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

January 21, 2015, a permanency planning conference was held for Samara, her goal was changed from reunification to adoption.

January 23, 2015, Samara's social worker picks her up from daycare and brings her to a supervised visit. Ava's social worker visits her at daycare.

February 3, 2015, Samara is assigned an adoption social worker. The adoption social worker discusses the possibility of adopting Samara with Ms. Malpass. Ms. Malpass indicates that she is very bonded to Samara and wants to be certain that she can meet all her needs before committing to adopt her.

February 6, 2015, a foster care review is held for Ava. The foster care reviewer: concluded DCF and Ms. Malpass were in full compliance with their service plan tasks; noted Ava was reaching her developmental milestones; and noted the placement was necessary and appropriate. Ava was doing well in Ms. Malpass' care and there were no concerns about her placement.

[18] For each child in DCF's care and custody, a foster care review is conducted every six months. The review includes an assessment of the progress towards the child's permanency goal, the child's overall well-being and the success of the current placement.

February 11, 2015, J.E.'s social worker picks her up from the Malpass home and transports her to a supervised visit.

February 12, 2015, approval is granted by the regional office to place A.S., Samara's sibling, in the Malpass home. The approval indicates that the placement of A.S., making her the third child under the age of two in the home, is in compliance with DCF regulations, since she is a sibling to a child already placed in the home.

Ms. Malpass' home is overcapacity, the home is licensed to care for up to three children but four are in the home; approval was obtained from the regional office to place A.S. in the home.

February 20, 2015, A.S., 14 days old, sibling to Samara, was placed in the Malpass home. Four foster children are in the home; three of whom are under the age of two.

February 23, 2015, the family resource worker visits the Malpass home.

February 24, 2015, the social worker picks A.S. and Samara up from the Malpass home and transports them to a supervised visit.

February 26, 2015, Ava's social worker visits her at the Malpass home.

March 3, 2015, Ms. Malpass reports to E.E. and J.E.'s social worker that she saw E.E. and J.E.'s mother in court.[19]

March 4, 2015, J.E.'s social worker picks her up at daycare and transports her to a supervised visit. At the visit, J.E. and E.E.'s mother reports to the social worker that: Ms. Malpass is allowing her boyfriend, Mr. Mallet, to stay in the home; she knows the boyfriend uses drugs; the boyfriend had told her that he is the disciplinarian in the home and he hit J.E. in the head and sent her to her room when she was not listening. J.E. and E.E.'s mother further indicated that she wanted J.E. removed from the foster home. The social worker filed a Comprehensive Emergency Services[20] (CES) request to send someone out to the Malpass home to see if the boyfriend, Mr. Mallet, was in the home. A CES worker went to the home and observed a male in an upstairs window but Ms. Malpass would not allow entry into her home.

March 5, 2015, Ms. Malpass went to the area office and reported that it was her brother who was in the home the night before. A meeting was held at the area office regarding the information J.E. and E.E.'s mother had relayed to their social worker. J.E. and E.E.'s social worker and supervisor reported that they had searched Ms. Malpass' Facebook account and viewed several pictures of Ms. Malpass and Mr. Mallet together. Both the supervisor and the social worker reported that the pictures reflected that the two were in a romantic relationship because there were hearts drawn around the pictures. The family resource supervisor stated at the meeting that it was not their practice to get information from Facebook about their family resource providers.

[19] Ms. Malpass was in court for a matter related to her own children's child support.

[20] CES is a contracted service that is provided for afterhours emergency responses for foster families and intact families.

March 5, 2015, a 51A report is filed alleging the neglect of J.E. The report alleges that: Ms. Malpass is allowing her boyfriend, Mr. Mallet, who is an alleged drug user, to stay in the home; Mr. Mallet hit J.E.; and Mr. Mallet was arrested in April, charged with unarmed robbery and Ms. Malpass bailed him out. This report was screened-in and assigned to the Special Investigation Unit (SIU).

March 5, 2015, J.E. leaves the Malpass home. Three foster children remain in the home.

Three children are in the home; an overcapacity waiver is not needed under DCF policy.

March 6, 2015, the family resource worker visits the Malpass home. Ms. Malpass was extremely angry about the 51A report and denied Mr. Mallet was in the home. The family resource worker mentioned the photos of Ms. Malpass and Mr. Mallet on Facebook and reminded Ms. Malpass that she must inform DCF of new household members and frequent visitors.

March 9 – March 18, 2015, SIU conducts an investigation. The reporter, the reported children, the foster mother, the foster mother's biological sons and her adopted daughter are interviewed. Ms. Malpass denies a relationship with Mr. Mallet, but acknowledges that she has pictures of herself and Mr. Mallet together on Facebook. Ms. Malpass reports that her family resource worker told her to take down the pictures because they were "incriminating." Mr. Mallet denies: living in the Malpass home; disciplining J.E.; telling J.E.'s mother that he was the disciplinarian in the home or exchanging any pertinent information with her. The family resource worker, Samara's early intervention worker, and the social workers for A.S., Samara and Ava all express support for Ms. Malpass. A background check on Mr. Mallet revealed concerning criminal charges. The investigator concludes that the report of neglect is unsupported. However, the investigator notes that Mr. Mallet was likely in the home more than Ms. Malpass reported.

March 11, 2015, the social worker picks A.S. and Samara up from the Malpass home and transports them to a supervised visit.

March 13, 2015, Ava's social worker visits her at the Malpass home.

March 20, 2015, the family resource worker visits the Malpass home.

March 23, 2015, a limited re-evaluation of the Malpass foster home is initiated after the allegations in the 51A report were found to be unsupported. Ms. Malpass continued to deny that she was in a relationship with Mr. Mallet, but admitted posting bail for him a few days earlier. Ms. Malpass told the family resource worker that she was no longer in contact with Mr. Mallet. The family resource worker emphasized with Ms. Malpass that all frequent visitors needed to be approved by DCF.

March 27, 2015, Ms. Malpass decides to adopt Samara. The adoption worker discusses the up-coming court case and the pre-adoptive licensing study (PALS) with Ms. Malpass. She reports that Samara was referred for a developmental evaluation at UMASS Medical Center and that she is working with the early intervention clinician to ensure Samara receives needed services.

April 2, 2015, A.S.'s social worker visits with A.S. and Samara in the Malpass home.

April 7, 2015, Ava's social worker picks her up at daycare for a supervised visit and then returns her to the Malpass home.

April 16, 2015, A.S.'s social worker visits with A.S. and Samara in the Malpass home. Ms. Malpass reports that A.S. went to the doctor on April 15, 2015 for a rash on her face that turned out to be eczema. A.S. had gained weight, but the pediatrician wants her to put extra formula in her bottle. Ms. Malpass states that Samara is doing well and she continues to meet weekly with her early intervention clinician.

April 30, 2015, A.S.'s social worker visits A.S. and Samara at the Malpass home and then transports them to a supervised visit with their mother.

May 14, 2015, Ava's social worker visits Ava at the Malpass home. Ms. Malpass reports that Ava is doing well at home and at daycare and she is up to date medically.

May 15, 2015, a limited re-evaluation is conducted to run a background check on Ms. Malpass because she was being screened to become the Worcester East area office parents and children together (PACT) coordinator. The PACT coordinator is a volunteer position that verifies and approves reimbursement to foster parents.

May 18, 2015, the family resource worker visits the Malpass home. Ms. Malpass states that A.S. was referred to a geneticist because the pediatrician was concerned that one side of her face was growing faster than the other side.

May 21, 2015, the adoption social worker transports A.S. and Samara from the Malpass home to a supervised visit with their mother.

May 24 & 28, 2015, a limited re-evaluation is initiated on each date to approve a babysitter. Three names were submitted, none were approved due to significant psychiatric concerns or a problematic history with DCF.

June 2015, Ms. Malpass became the PACT coordinator at the Worcester East area office.

June 2, 2015, A.S.'s social worker picks A.S. and Samara up from the Malpass home and transports them to a supervised visit. Ms. Malpass reports that both A.S. and Samara have a diaper rash.

June 17, 2015, the social worker picks up Samara and A.S. from the Malpass home and transports them to a supervised visit.

June 21, 2015, the social worker picks A.S. up from the Malpass home and Samara up from daycare and transports them to a supervised visit. The social worker returns the girls to the Malpass home and discusses concerns about some medical follow-up needed for A.S.

June 24, 2015, a limited re-evaluation of the foster home was initiated to run a background record check on two babysitters that Ms. Malpass requested be approved to care for the foster children in the home.

June 25, 2015, the social worker transports Ava from the foster home to a supervised visit with her mother.

July 2 – July 12, 2015, Ms. Malpass is on vacation. Samara and Ava are placed in a respite foster home but remain in the same daycare. A.S. went on vacation with Ms. Malpass.

July 16, 2015, Ava's social worker picks her up at the Malpass home and transports her to a supervised visit with her mother.

July 21, 2015, Ava's social worker visits her at the Malpass home. Ms. Malpass reports that she took Ava to the pediatrician the day before because she had fallen and received a bruise on her head.

July 21, 2015, social worker picks A.S. up from the Malpass home and picks Samara up from daycare and transports the girls to a supervised visit. Both children are returned to the Malpass home.

July 23, 2015, a DCF foster care review is held for Samara and A.S. The goal of adoption remained in place for Samara. The reviewer noted that Ms. Malpass was in the process of having an adoption home study completed. The review concluded that DCF and Ms. Malpass were in full level of compliance with their service plan tasks. No safety concerns were noted regarding the children's placement at the Malpass home.

July 23, 2015, social worker picks A.S. up from the Malpass home and picks Samara up from daycare and transports the girls to a supervised visit. Both children are returned to the Malpass home.

August 12, 2015, the family resource worker visits the Malpass home. Samara is home with Ms. Malpass because she has a rash all over her body. The doctor indicated that it was probably an allergic reaction.

August 15, 2015, Ms. Malpass called 911 after finding Samara and Ava unresponsive. Two 51A reports are filed. The reports indicate conflicting information about where Ms. Malpass found the children. One report indicates she discovered the children unresponsive after their naps. The other report indicates she discovered the children unresponsive on the living room floor. These reports were screened-in as an emergency and ERWs responded to the hospital.

Upon arrival to the hospital, Ava was pronounced dead and Samara was critically ill. Samara had high salt levels and was dehydrated. She was suffering from seizures, respiratory failure and a high temperature. The medical findings suggested that the children suffered heat stroke, which would indicate that they had prolonged exposure to a high temperature environment.

A.S. was also brought to the hospital via ambulance, but appeared fine. State police initiated an investigation. ERWs interviewed Ms. Malpass after police finished their interview. Ms. Malpass indicated during the interview that: she put Ava and Samara in their beds for a nap at 10:00 a.m.; she went to check on the girls between 11:30 a.m. and 12:00 p.m. and found them unresponsive; she called 911 and carried them both downstairs to the living room; Mr. Mallet was her boyfriend "on and off" for about a year and was in the home when she found the girls, but left before police arrived. During the interview, Ms. Malpass' sister arrived at the police department and stated that a lawyer had been consulted and advised Ms. Malpass not to speak to anyone. Ms. Malpass was instructed to bring her three children, T.Q., D.Q, and M.M. to the hospital to be medically cleared. All three of the children were interviewed at the hospital by investigators.

Post August 15, 2015, Ms. Malpass' three children were medically cleared and DCF took emergency custody of the children and placed them together with a relative.

Ms. Malpass' three children participated in a forensic interview at the District Attorney's office. The SIU investigator interviewed DCF staff, medical providers, collaterals, and reviewed medical records. The investigator interviewed Mr. Mallet by phone. Mr. Mallet told the investigator that: on Friday night, August 14, 2015, Ms. Malpass went out drinking with friends; he stayed at home and took care of the children; he fed Ava and Samara, changed their diapers and put them to bed; M.M. was downstairs watching television with another little girl and they were playing with A.S.; M.M. brought A.S. upstairs around 9:30 p.m., he gave A.S. a bottle, changed her diaper and put her to bed; T.Q. came home around 11:30 p.m. showered and went to his room; he woke up when Ms. Malpass returned home; Ms. Malpass was drunk and throwing up; M.M. helped her mother in the bathroom; M.M. slept in the room with them because she was worried about her mother; he and Ms. Malpass argued; he took two Xanax tablets out of Ms. Malpass' pocketbook and went to bed; he woke up when he heard Ms. Malpass screaming the next day; he left the home before police arrived. Mr. Mallet felt that the allegations of neglect were ridiculous and felt that the incident was related to some type of accident.

Mr. Mallet told the investigator that he had been living in the home for a year and a half and that Ms. Malpass and her children had lied to DCF about his presence in the home.

The investigator interviewed the physician from the Child Protection Unit at UMASS and reviewed Ava and Samara's medical information. The medical findings suggest that the children suffered heat stroke, which would indicate that they had prolonged exposure to a high temperature environment. The doctor's report states that "this would be expected to result from having been left unattended in a room or vehicle with excessive temperature. Petechial skin findings and bruising pattern concerning as they may have resulted from child struggling against car seat restraints, though pattern of injury not definitive. It is my medical opinion that this represents child neglect."

On August 21, 2015, the allegations of neglect were supported on behalf of Ava, Samara, A.S., and Ms. Malpass' three children by Ms. Malpass and Mr. Mallet. The allegation of death was supported on behalf of Ava by Ms. Malpass and Mr. Mallet. Neither Ms. Malpass nor Mr. Mallet provided any reasonable explanation as to what happened to the girls. The investigator also noted that Mr. Mallet had been living in the home and that Ms. Malpass had lied to DCF about his presence in the home. Ms. Malpass' three children, T.Q., D.Q., and M.M., remain in DCF custody and are placed with a relative. A.S. was placed in an alternative foster home. Samara is in a rehabilitation hospital.