

Child Fatality and Near Fatality External Review Panel

Virtual Meeting

Tuesday, July 21, 2026

MINUTES

Members Present: Judge, Lauren Adams Ogden, Chair; Dr. Christina Howard, Child Abuse Pediatrician, University of Kentucky; Dr. Elizabeth Salt, Citizen Foster Care Review Board; Hon. Olivia McCollum, Practicing Local Prosecutor; Victoria Bengé, Executive Director, CASA; Nicole Smith Abbott, LCSW; Catherine Frye, State Child Fatality Review Team; Dr. William Ralson, Chief Medical Examiner, OME; Lesa Dennis, Commissioner Department for Community Based Services; Steve Shannon, Executive Director, KARP; Representative Samara Heavrin, House of Representatives, District 18; Senator Danny Carroll, State Senate, District 2; Mike Bowling, Prevent Child Abuse Kentucky; Heather McCarty, Regional Manager, FRYSC; Dr. Danielle Anderson, Practicing Medication-Assisted Treatment; Jonathan Murphy, Kentucky State Police, Post 2; Geoff Wilson, Association of Addiction Professionals and Dr. Lyndsey Neese, Department for Public Health

Welcome

Judge Lauren Adams Ogden, Chair

Chair Ogden welcomed everyone to the July meeting. Judge Ogden introduced the panel's newest member, Mike Bowling. Mr. Bowling is a retired Kentucky State Police trooper and represents Prevent Child Abuse Kentucky. We are grateful to have his level of expertise to help support the panel. We also have Jason Reynolds who is representing the Administrative Office of the Court.

First item of business on the agenda is the approval of the Minutes and Case Review Summaries of the June meeting. Victoria Bengé made a motion to approve, which was seconded by Commissioner Lesa Dennis. With no objections, the May Minutes and Case Review Summaries stand as approved.

Next item of business is the recent legislative testimony; I'd like to give a shout out to Dr. Melissa Currie and Steve Shannon. Thank you both for representing the panel and sharing the hard work of the panel. We greatly appreciate your willingness to testify.

Data Presentation

Casey Reed, Epidemiologist

Casey provided an update to members regarding the most recent data compared to the prior five years of data collection. To date the panel has reviewed 131 cases but we estimate there will be a total of 250 cases for SFY25. This data is preliminary – the top four categories reviewed by the panel have remained consistent. However, Natural causes/medical diagnosis have increased to the level of abusive head trauma in SFY25. The panel has reviewed total of 61 overdose/ingestion cases, including the cases set for today's meeting. The majority of these cases have occurred in the Bluegrass and KIPDA regions. Children aged 1-4 years old are at a higher risk of overdose/ingestion, this has remained consistent over the last five years. The average age of overdose/ingestion cases is three years old. The top five substances ingested have remained consistent over the last few years. Cannabinoid ingestion continues

to increase and is at a all time high. We are also seeing an increase in methamphetamine and amphetamine ingestions. Torture cases have continued to fluctuate over the last five years. Among those cases the majority involved physical abuse (94%), neglect (75%), AHT (46%), malnutrition/starvation and overdose/ingestion (15%). DCBS issues, financial issues, DCBS history, medical neglect, and Bystander issues are the top family characteristics of cases identified as torture by the panel. Younger age groups have a higher rate of tortures and males are slightly more prevalent. Switching to medically fragile children, although the total number of cases reviewed to date appears to decrease here, the overall percentage has increased. Excluding SFY25, cases determined as medical neglect have been increasing over the last four years. The number of nutritional neglect cases has also increased, with a six-year high being reported in SFY23. Nutritional neglect is most often reported in children ages 5-9. The final slide compares external panel suicides to statewide suicide data. It's important to note that the statewide data is based on a calendar year and external panel is SFY. For calendar year 2025, Kentucky reported the highest number of suicides statewide that it has seen in the last ten years. The panel continues to only review a very small subset of those cases.

Judge Ogden thanked Casey for updating the panel on this important information. With no further questions, we will begin our case reviews.

Case Reviews:

The following cases were reviewed by the Panel. A case summary of findings and recommendations are attached and made a part of these minutes.

<u>Group</u>	<u>Case #</u>	<u>Analyst</u>
1	F-034-25-C	Cynthia Hildebrandt
2	NF-147-25-C	Cynthia Hildebrandt
3	NF-142-25-C	Cynthia Hildebrandt
4	F-058-25-NC	Cynthia Hildebrandt
4	F-003-25-C	Jennifer Burke
3	NF-182-25-C	Jennifer Burke
2	NF-044-25-C	Jennifer Burke
1	NF-101-25-C	Jennifer Burke
2	NF-107-25-C	Emily Neal
1	F-061-25-C	Cynthia Hildebrandt
3	NF-155-25-C	Cynthia Hildebrandt
4	F-063-25-PH	Cynthia Hildebrandt
4	F-062-25-PH	Jennifer Burke
3	NF-066-25-C	Jennifer Burke
1	NF-181-25-NC	Cynthia Hildebrandt
2	NF-175-25-C	Cynthia Hildebrandt
3	NF-102-25-C	Emily Neal

*Due to time restraints, F-042-25-C and NF-015-25-C will be moved to the August agenda for review.

Additional Discussion:

Potential recommendation regarding mail-in drug screens being utilized by medication assisted treatment providers. May require a policy change to ensure proper screening is occurring.

Reports of medical neglect that are screened out by central intake should receive a second level of review by DCBS nursing staff.

Ensuring the panel has access to the justification section contained in TWIST regarding reports that did not meet criteria.

Hospitals should be encouraged to report cases to law enforcement in addition to making a CPS report.

Continue to encourage consistent statewide drug testing, with confirmatory of positive screens, in all pediatric patients suspected of overdose/ingestion.

Potential recommendation to increase pediatric education for providers who at urgent care/treatment facilities across the state. May be beneficial to have a conversation with the MCOs to see if their providers feel equipped to handle the pediatric population and if not, the MCOs can notify the consumer.

Next meeting will be held virtually on August 18th. Motion to adjourn made by Steve Shannon and seconded by Dr. Howard. With no other business, the meeting is adjourned.