

CHILD FATALITY & NEAR FATALITY EXTERNAL REVIEW PANEL
JULY 20, 2015

Members Present: Judge Roger Crittenden, Chair; Judge Brent Hall; Joel Griffith, Prevent Child Abuse Kentucky; Tina Webb for Commissioner Teresa James, Department for Community Based Services, Cabinet for Health and Family Services (CHFS); Allison Taylor, designee for Dr. Stephanie Mayfield, Commissioner, Department for Public Health, CHFS; Major Eddie Johnson, Kentucky State Police (KSP); Dr. Jamie Pittenger, Pediatric Hospital Specialist, University of Kentucky School of Medicine; Dr. Blake Jones, University of Kentucky School of Social Work; Ed Staats, Citizen Foster Care Review Board; Sharon Currens, Kentucky Coalition Against Domestic Violence; and Dr. Owen Nichols, CEO, NorthKey Community Care.

Members Absent: Senator Julie Raque Adams, Representative Tom Burch, Maxine Reid, Dr. Ruth Shepherd, Jenny Oldham, Nicky Jeffries, Dr. Sabrina Jo Grubbs, Dr. Melissa Currie, and Dr. Tracy Corey.

Judge Crittenden began by introducing a new panel member, Ed Staats, who represents the Citizen Foster Care Review Board. Judge Crittenden also stated that he has been reappointed to serve on the panel as well as Dr. Grubbs, Dr. Currie, and Judge Hall. He noted that the panel has a new medical analyst, Kim Millbranth, and introduced the intern from Kentucky State University, La'Quida Smith.

Ms. Holleran stated that Ms. Smith is assisting with preparing data for the annual report. Ms. Holleran noted that there are some cases that will need to be reviewed for the next meeting in order to include them in the data. She noted that the panel also needs to discuss potential recommendations for the report at the next meeting.

The minutes from the previous meeting were approved as submitted. Judge Crittenden asked Mr. Cannady to give the financial report. Mr. Cannady noted that close to \$220,000 of \$420,000 was spent for the fiscal year. He stated the billing for analysts came in under the budgeted \$30,000 and there will be more bills coming in for that which will come out of the 2016 budget. He also noted that we are now being billed for COT services which will be approximately \$500/month. He noted that there will also be a larger percentage billed for the attorney position as well due to the work being almost exclusively for the panel. He also noted that more analysts will be added.

Ms. Holleran stated that a new RFP has been done keeping the nurses skill set but also adding social workers as analysts. She noted that only five people responded to the RFP. She noted that Dr. Currie and Ms. Oldham are on the staffing committee that made the decision on how many to hire. She is hoping the new analysts will begin reviewing cases by the 1st of August but it may not begin until the 15th. She noted that Dr. Currie and Ms. Oldham have instructed her to go ahead and post again for more analysts. She noted more analysts are needed as the 2013 cases have yet to be reviewed and therefore more funds will be spent for analysts.

Judge Crittenden announced that Ms. Holleran will be leaving her position this week and taking a position with General Electric. He wished her well in her new position and expressed his gratitude for all her work for the panel.

Judge Crittenden asked La'Quida Smith to update the panel on the current data review. Ms. Smith commented on some inconsistencies in data between three different forms and her work in trying to address and correct those issues. Ms. Smith stated that there are approximately seventeen pieces of data for each case missing between two of the forms. Ms. Holleran noted that any missing data will be researched by the analysts.

Kara Daniel, General Counsel for the Justice & Public Safety Cabinet (JPSC), spoke about the attorney, Lynn Bruckner, who will be replacing Ms. Holleran. She stated that Ms. Bruckner has very specific experience in this area and has been working with child issues for about fifteen years. She noted that Ms. Bruckner is currently employed at the Attorney General's Office and will start work at the Justice & Public Safety Cabinet on August 16th. She stated that Ms. Bruckner is currently a member of the Kentucky Multidisciplinary Commission on Child Sexual Abuse and is also staff to the Kentucky Child Sexual Abuse and Exploitation Board.

Deputy Secretary Vickie Wise, JPSC, spoke to the panel regarding the adoption of a legislative policy. She stated that having a policy in place would help promote smoother operations and would give the staff understanding of their role in legislative matters. She noted that some of the panel's recommendations could require legislation and having a policy in place could be helpful in that process. Judge Crittenden asked Mr. Cannady to place this issue on the agenda for the September meeting and to ask Ms. Bruckner to draft guidelines prior to that meeting. Mr. Griffith was in agreement but also stressed the need for an overall set of bylaws for the panel. Judge Crittenden suggested including that on the November agenda.

Judge Crittenden reported on the Summit held by the panel. He stated that there was great participation by some agencies but lacked participation by city and county law enforcement agencies and coroners.

Judge Crittenden updated the panel on training by medical professionals to judges on abuse/neglect. He noted that he has a phone conference coming up with various family court judges and AOC to set up a training program for judicial colleges.

Mr. Griffith noted that the statewide safe sleep campaign will begin in October. He noted that a packet of information was put together for people to go out and train birthing hospitals how to educate parents of newborns about the risk of shaking, how to soothe an infant, etc. and having them sign a commitment statement. He noted that a survey was conducted to find out what is currently being done and then letters were sent from Prevent Child Abuse KY, University of Louisville, University of Kentucky and others to hospital administrators. He noted that the response had not been great; therefore, they would recommend drafting a letter from the panel to the administrators that addresses the findings of the panel regarding pediatric head trauma and

safe sleep and expresses the importance of using the education materials at birth. Dr. Pittenger expressed concern that the proper person be contacted at the hospitals to get the appropriate response. Mr. Griffith asked Dr. Pittenger to assist in determining the most appropriate contact person. He also suggested the panel send a letter of notification to the birth hospital of any infant that has died as a result of unsafe sleep. Mr. Griffith expressed the importance of making the connection for the administrators in an effort to create more of an incentive to do the evidence based training. He suggested that there be more discussion at the next meeting regarding these letters of notification to address issues brought up around privacy and time delays. Judge Crittenden agreed.

Judge Crittenden noted that on authorizing legislation and Supreme Court rule changes to allow open dependency, neglect and abuse cases he intends to speak with Senator Adams and Representative Burch on that issue. He noted it would probably be the same bill that was introduced previously. He stated that he would speak to Dr. Currie and Judge Hall about the drug testing again before addressing that recommendation. Ms. Holleran stated that she did a considerable amount of research on that issue and Indiana is the only state that has passed legislation.

Cases Reviewed:

Group 1: (Burch, Corey, Currens, Jones, Johnson)

F-18-14-NC

- Three week old died as result of abusive head trauma.
- Father confessed and was charged.
- Documented abusive head trauma training signed by mother only at birthing hospital
- Mother had two prior children with only one in her custody.
- Mother moved here from Michigan due to boyfriend torturing older child who was no longer in her care.
- This would be a case to send letter to birthing hospital. Hospitals need to target both parents and anyone living in the home for training.

NF-3-14-C

- One month old infant in care of mother when injuries occurred.
- Multiple injuries and fractures.
- Mother denied knowing how injuries occurred but later reported that the sixteen month old sibling pulled changing over while infant was on it.

- That evening the maternal grandparents had received phone call from mother reporting there was something wrong with her and to come home immediately. EMS transporting as they arrived.
- Grandparents reported mother's behavior appeared erratic and she seemed focused on cleaning the house as opposed to going with the child to the hospital.
- Father had been on a two week factory shutdown but had returned to work that day.
- Father reported that the infant did not sleep well the night before and that before he left for work that day her eyes seemed odd and were rolling back and forth.
- He reported that he told mother about it and that paternal grandmother had seen this before.
- Father denied any history of trauma and described her as a fussy baby that was difficult to console.
- Family members reported that mother had significant postpartum depression that was not being treated.
- Mother was involved in foster care system and had been abused. She was adopted at the age of twelve.
- Father reported an opiate addiction ten years prior but denied wanting to use again.
- Previous report substantiated against unknown perpetrator regarding a sibling.
- Safety plan put in place. Mother failed to comply. Father completed anger management.
- Substantiated physical abuse against both parents. Substantiated both old and new injuries.
- Mother charged with criminal abuse 1st.
- Permanent custody to paternal aunt and uncle for both children.
- **Panel Determination: Physical abuse, abusive head trauma.**

F-25-14-NC

- Two month old living in shelter with parents.
- Father found infant unresponsive in crib.
- Someone reported that mother smelled of alcohol, admitted to occasional use of alcohol.
- Prevention plan.
- Sudden unexplained death of infant.
- Sibling placed in foster care for over four months while waiting on blood alcohol results on mother. Returned to parents when results came back with only trace amount. Parents complied with all requirements of prevention plan.
- **Panel Determination: Other, SUDI.**

NF-16-14-C

- Fatality – three month old found unresponsive.

- In care of father while mother was at work.
- Mother gave baby a bath that morning and did not notice any bruising on him.
- Father said he fed the baby and placed him in crib.
- Father stated when he went back to check on him, found him unresponsive with milk in his nose and mouth.
- Father began CPR and called mother to call police and ambulance.
- Taken to local hospital and then flown to Vanderbilt.
- Multiple extensive injuries and healing fractures, taken off life support.
- Missed two pediatric appointments, letter sent regarding missed appointments.
- Made two month appointment, found to be in less than one percentile for height, weight and head circumference. Was admitted to Vanderbilt for evaluation for failure to thrive. Primary care physician called CPS because parents had not gotten to Vanderbilt yet but mother said she had transportation issues.
- Spent three days at Vanderbilt, formula changed, monitored and gained weight. Labs showed something that would indicate the possibility of fractures at that point but non-specific so would not necessarily trigger hospital to do scan.
- Two follow-up appointments with pediatrician and last one was eleven days before fatal event.
- Father diagnosed with bipolar disorder.
- Mother had history of ADHD and stated she had bipolar disorder and anxiety.
- Mother reported emotional and physical abuse from her father when she was a child.
- Mother denied there was domestic violence with baby's father but family members admitted to seeing bruising on her face and were worried. His previous spouse reported being hit daily while in a relationship with him.
- Prior CPS history.
- Father had criminal history.
- Substantiated physical abuse on both parents and substantiated neglect.
- **Panel Determination: Abusive head trauma, physical abuse, neglect.**

Group 2: (Adams, Currie, Crittenden, Goins, Mayfield, Taylor)

NF-26-14-C

- Two year old presented to outlying ER lethargic.
- Father was caring for this child and four year old sibling, took something to truck and came back to find two year old with suboxone pills in his mouth.
- Father said he removed about half the tablet from the child's mouth, child ingested 4mg.
- Transferred to UK; urine tox. also positive for methamphetamine because father stores both in the same container so child ingested both.
- History of drug abuse with both parents.

- Child showed signs of withdrawal at birth.
- CPS was called on admission.
- Meconium tox. in hospital came back negative but urine tox came back positive for buprenorphine eight days after he was born.
- CPS did not substantiate case.
- Mother admitted starting pregnancy in a clinic but stopped and was getting stuff on the street so that she did not go thru withdrawals during the pregnancy.
- Safety plan in place.
- No prior court involvement; no drug court involvement.
- Substance abuse by caregiver, missed opportunities during newborn period and to assist parents who admitted drug problems.
- It was noted that questions regarding previous cabinet involvement need to be included in data collection. Even the most current data collection tool is only capturing data regarding previous cabinet involvement within one year prior. Does that time need to be expanded? Should the question include prior cabinet involvement with this child or an older child?
- **Panel Determination: Supervisory neglect.**

NF-53-14-NC

- Six month old presented to outlying ER due to being unresponsive.
- Transferred to Kosair.
- Father admitted to shaking baby.
- Mother was at work.
- Domestic violence not admitted but bruises visible on mother.
- Father reported having anger issues.
- Birth hospital documented safe sleep and abusive head trauma education.
- Criminal charges filed against father.
- Father stated that he believes he may be bipolar, family history of bipolar disorder.
- No formal mental health treatment.
- No CPS or criminal history.
- Unsubstantiated on mother, substantiated near fatality on father.
- CPS documented that mother kicked father out of the house, changed locks.
- **Panel Determination: Abusive head trauma.**

NF-42-14-NC

- Nearly two month old presented to outlying hospital after going limp during diaper change.

- Mother reported that she fed infant, placed him in bouncy seat and took shower. Could hear him crying when she got out of shower. Her paramour had placed him on bed and said that he would not stop crying. Mother said she was able to calm him down but as she was dressing him he appeared to fall asleep. Could not awaken him. Called her mother and then pediatrician. Told to go to ER.
- History later is different in that she said she went to wake him to feed him and his arms and legs were floppy and she couldn't wake him.
- Baby had bruise on left forearm and mother had sought care for bruise two days prior in ER. Concerns were documented about mother's lack of concern for infant. Paramour summoned the nurse because he could not get mother awake and infant was crying and she refused to get up even when asked by the nurse.
- Discharged home to mother with supervision until completion of DCBS investigation.
- Mother was still in high school and working at fast food restaurant.
- No CPS history.
- ER physical should have done further evaluation due to bruising.
- **Is this a near fatality? Panel agreed to not include in data.**
- **Panel Determination: Unsubstantiated; determination not necessary.**

Group 3: (Griffith, Hall, James, Reid, Nichols)

F-19-14-C

- Nine month old presented to Georgetown Hospital unresponsive.
- Positional asphyxiation and wedging.
- Guardian had taken him from crib and placed him in the bed with couple she was staying with and their child.
- Found between wall and bed with sheet around him and turning blue and began CPR.
- Child was placed with this guardian after determined to be abandoned by his parents
- Parents stated they had left the child with guardian for some time while they were getting their house in order and the guardian did not return him.
- Parents had gone to live with relative that was registered sex offender and guardian did not feel that was best for the child. Guardian went thru the system and received custody of the child.
- Substantiated case of neglect on mother and father was ongoing at the time of death. Closed due to parents having no other children with them. One other child was in the care of another individual.
- Several CPS reports on guardian, history of moving in with partners and taking care of their children, children being neglected. Substantiated neglect on two cases was overturned by hearing while trying to obtain custody of this child.

- Request Scott County court records; guardian had history of guilty of assault 4th and endangering welfare of minor. Did judge step out beyond cabinet recommendation to keep child with this caretaker? Criminal charges would not be overturned like the cabinet substantiations.
- Tina Webb, CHFS, stated that the cabinet would not have recommended placement when the caregiver had two substantiated cases on record.
- **Panel Determination: Unsafe sleep.**

NF-67-14-NC

- Fatality. Two month old infant transferred to Kosair after being taken to immediate care center by parents.
- Mother not English speaking. Father spoke English.
- Reported to be found face down unresponsive on the sofa by father after being propped on a pillow shortly beforehand.
- Infant had skull fracture and other injuries.
- Baby declared brain dead but mother refused to allow removal of life support.
- Court became involved and infant's body was artificially maintained on ventilator for about twenty days until court made decision to remove from life support.
- Multiple injuries identified including multiple rib fractures.
- Father reported possibly hitting infant's head on wall as they were rushing him to immediate care. When told that would not account for the injuries to the infant, then later described two incidences of dropping the infant in the bathtub.
- Fatality substantiated against father.
- Father charged with criminal abuse 1st.
- **Panel Determination: Abusive head trauma, physical abuse.**

Group 4: (Oldham, Shepherd, Jeffries, Grubbs, Pittenger)

NF-08-14-NC

- Eleven month old brought to health department for immunizations.
- Audibly wheezing and nurses very concerned.
- Had been in week prior and mother was told to take him to ER.
- Again told mother to take him to ER, called CPS.
- CPS found mom and dad at home with child still having trouble breathing, told to take child to ER immediately.
- Father drove mother and baby to ER but initially was not going to go but social worker told him he had to go also.

- Father says he forgot driver's license so he dropped mother and baby off and leaves for forty-five minutes.
- Social worker gets mother and baby checked in. Father starts texting mother and calling her screaming over the phone. Social worker intervened and told him to get back to hospital.
- Transferred to Vanderbilt in respiratory failure.
- Diagnosed with warts in his throat which obstructed airway and required two surgeries.
- Parents were both students, father recently out of military and family lost health insurance.
- Child had been seen regularly until they lost insurance coverage.
- **Panel Determination: Substantiated medical neglect**, child returned to family with prevention plan.

NF-21-14-NC

- Three year old ingested her sibling's clonidine medication.
- Administered Narcan and airlifted to metropolitan medical center.
- Ingested nine tablets.
- Mother reported finding the pill bottle on the coffee table and child asleep on the floor. Lid was on the bottle and no pills visible on the floor. Went to bathroom where pills were kept and noted cabinet was unlocked with chair next to it.
- In later interview, mother reported medication was actually within reach of the child on the kitchen counter.
- Mother reported different history later and said that she was able to wake the child and ask how many pills she took and the child replied two.
- Mother and father claimed from that point forward to lock the medication in the father's gun safe with key remaining with mother.
- Substantiated neglect against both parents.
- Substantiated near fatality against mother.
- Children removed from custody and placed with relative and referred to counseling.
- One sibling had history of fire setting.
- At time of this incident, family had five children and mother was pregnant.
- Substantiated risk of harm on all children against both parents.
- **Panel Determination: Supervisory neglect.**

The next meeting will be held on September 14, 2015, in Louisville. With no further business to discuss, the meeting was adjourned.