

Child Fatality and Near Fatality External Review Panel

Virtual Meeting

Tuesday, May 17, 2022

MINUTES

Members Present: Judge Melissa Moore Murphy, Chair; Lori Aldridge, Co-Chair, Executive Director, Tri County CASA; Shannon Hall as proxy for Commissioner, Department for Community Based Services; Janice Bright, State Child Fatality Review Team; Betty Pennington, Family Resource and Youth Service Center; Dr. Elizabeth Salt, Citizens Foster Care Review Board; Dr. Melissa Currie, Chief, Norton Children's Pediatric Protection Specialist, University of Louisville; Dr. Christina Howard, Child Abuse Pediatrician, University of Kentucky; Detective Jason Merlo, Kentucky State Police; Steve Shannon, Executive Director, KARP; Dr. Henrietta Bada, Department for Public Health; Isela Arras, Kentucky Coalition Against Domestic Violence; and Dr. David Lohr, Medical Director, Department for Community Based Services.

Welcome:

Judge Murphy, Chair

Judge Murphy welcomed everyone to the meeting and thanked Lori Aldridge for chairing the previous meeting in her absence. Next item on the agenda is to approve the Minutes and Case Review Summaries from the April 19th meeting. With no changes, Betty Pennington made a motion to approve and that was seconded by Dr. Melissa Currie. With no objections the minutes and case review summaries from the April meeting stand as submitted.

Kids Are Worth It! Conference

The Kids Are Worth It Conference is scheduled to be held in-person this year on September 12th – 13th at the Galt House in Louisville. The panel currently has their September meeting scheduled virtually for September 20th. Panel members agreed to move the meeting to September 13th from 1:00 p.m. – 4:00 p.m. in conjunction with the conference at the Galt House. Additional information will be distributed as it becomes available.

June Meeting

Reminder next month's meeting will be an in-person meeting in the multipurpose room at the Fayette Circuit Courthouse. The special meeting notice will be sent out. Everyone please mark your calendars and we will have a virtual option for those that cannot travel. Parking is available at the District Court building off Barr Street and lunch will be provided to the members.

Safe Sleep Plan

Dr. William Lohr, Chief Medical Director

We have been meeting as a group with members of Department for Public Health, Department for Behavioral Health, Developmental and Intellectual Disabilities and the Department for Community Based Services over the past few months to look at the current safe sleeping campaign and finding ways to help invigorate it and improve the impact. We are appreciative of Dr. Bada and the division because they are the subject matter experts. They have a safe sleep campaign that has been developed and I'll put the website in the chat box. We've discussed data trends of SUID and SIDS over the past few years that show that the campaign has made an impact. However, like with many things, the COVID pandemic changed things. The most recent data trends shows that less than half of all SUID deaths are now SIDS and the number of SIDS deaths are decreasing but SUID deaths have gone up a little bit, 92 in 2020 vs 87 in 2015. We're talking about the ways you can get the message out. We do feel the providers are giving regular messaging on safe sleeping but there appears to be gaps once families are returning. We're in the middle of thinking of avenues on how to attack this. Updates include things like the DCBS Plan of Safe Care is being updated to make sure that it includes safe sleeping outreaches being discussed and the folks at DPH are discussing updates to the ABCD campaign. I know Dr. Bada and the team is looking to ensure their campaign is updated and we're talking about ways to work with marketing to be sure that the consistent messaging is being given to target families. We are going to be meeting with the folks from the leaders in marketing in each of the Cabinets and think of ways we can improve the outreach and the consistent messaging. Dr. Salt has been a regular member of the team and she's looking at perhaps some research through students that she's aware of on more efficient uptake and intakes to get the parents at risk to take the message and act on it. Reaching out to the people like MCO's also will be part of our plan. I appreciate the chance to give you an update and I'm open for questions.

Judge Murphy: Thank you, Dr. Lohr. Is there anything specifically the panel can do to help you in these efforts?

Dr. Lohr: That would be the main ask, your broad support to help supply consistent messaging across the spectrum. Each of you are connected and can provide this and echoing a grassroots effort is called for.

Isela: I'm so glad to hear about this, especially considering a recent article I read over the weekend that discussed information and causes of SIDS. Is there an opportunity for us to do some preventative work for additional information to educate people so they better understand it?

Dr. Lohr: I think you're right and you're welcome to join the workgroup. We've been talking about messaging symposiums, social platforms, and anything we can think of to get out consistent messaging to more people. Please feel free to join. If you would send me your email, I'll add you to meeting group.

Isela: Yes, any additional information we can get out to new families to prevent these tragedies, I'm more than happy to help.

Dr. Currie: Due to conflicts, I haven't been able to attend the meetings. However, one thought I wanted to add is having the workgroup partner with the Kentucky Chapter of the American Academy of Pediatrics to disseminate the new information. You may also want to partner with the Kentucky Chapter of the American Academy of Family Practitioners since we know so many kids in Kentucky see family practitioners instead of pediatricians.

Dr. Bada: That's a nice suggestion. We have our mental health program that's just beginning and its in partnership with the Kentucky Chapter of the American Academy of Pediatrics. I think that would be a good venue to get the messaging out. It's not one specific agency who is responsible, everyone who has contact with a young family needs to be reenforcing the consistent messaging of safe sleep. We have to really extend education to every entity and the families.

Joel: When I read these cases, I'm surprised about the number of cases where the family received the messaging of safe sleep, but the child died in an unsafe sleep situation. I don't know where the disconnect is between what people are being told and what they go home and do.

Dr. Currie: It's a huge cultural issue. Sleep practices are passed down within families and particularly in some cultures there are generations upon generations of families that have co-slept with their babies and that is just what is done in their culture. I think engaging grandparents has always sort of been the key to effective messaging. A lot of folks get information about safe sleep from their parents.

Dr. Lohr: I agree and in talking about engaging the culture, I'm also thinking about other sources like churches and social networks that can reinforce the message.

Jan: Joel, you are correct. When we do our PRAMs survey, which is Pregnancy Risk Assessment Monitoring, and they survive women who have recently had a baby. From that survey we see high rates, like 94% - 96%, that say they received the safe sleep messaging. We have birthing facilities that have a safe sleep contract with new parents and nurses will report they find the baby in the bed with the parents at the hospital after they've signed that contract. It's a habitual thing they've learned from others and especially when they've successfully had that first baby and no issues. When we're talking counts of 60-80 true SUIDS from death reviews a year in Kentucky versus 50,000 plus births. It's hard to get them to see that picture. It's much easier to say, when we talk about 80 deaths that's 4 kindergarten classes in the state of Kentucky. We do have to overcome things like the quilts and blankets that are homemade by grandma or somebody and the guidance they are getting from other sources.

Dr. Salt: I'm on the task force and we talk about how difficult it is to change behavior. We know lots of unhealthy behaviors that are very difficult to change, smoking, healthy eating. We've been trying to tackle these for years. I think we have to think of it at that level. How do we change a behavior? It has to be very forward facing. Those approaches on the medical side should be consider in addition to public health approaches.

Dr. Lohr: We thought it would be helpful to have ongoing reports out so we can continue to get your input and reflect interest and excitement. We hope to give you a report again later in the year.

Jan: I would suggest adding Dr. Christina Howard to your task force. She attends a lot of these local child death reviews and conducts trainings. Just a reminder E, is Exit the bed before feeding. We're seeing an uptick, especially during the cold weather, bringing that baby in feed and then they fall asleep.

Judge Murphy: Thank you everyone. If anyone wants to participate in this task force, please put your email in the chat or feel free to send Dr. Lohr an email. It's important work and we all have our spears of influences and if we can help, we need too.

Impairment Discussion

Since Dr. Ralston could not attend today's meeting, we are going to push this discussion to the June meeting.

Before we start with the case reviews, I want to take a moment and said goodbye to Betty Pennington. This will be her last meeting with us today but that doesn't mean she's off the hook. She has agreed to relay data and information to her folks in the FRYSC world. As we all know, this is not fun work and the fact that she's taken her time and energy to be a part of this group, we appreciate it. We just wanted to give you a proper goodbye and say thank you. You will be missed.

Betty: Thank you to everyone, it's been an honor to serve with you all.

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	NF-120-21-C	Joel Griffith
2	NF-124-21-C	Joel Griffith
3	NF-096-21-C	Joel Griffith
4	NF-085-21-C	Joel Griffith
1	NF-072-21-C	Joel Griffith
2	NF-057-21-C	Joel Griffith
3	NF-083-21-C	Cindy Curtsinger
4	F-041-21-C	Joel Griffith
1	F-031-21-C	Joel Griffith
2	NF-062-21-C	Joel Griffith
3	NF-066-21-C	Joel Griffith
4	NF-147-21-C	Joel Griffith
1	NF-022-21-C	Cindy Curtsinger

Meeting adjourned.