

## **Child Fatality and Near Fatality External Review Panel**

Kids Are Worth It! Conference

The Galt House

140 N. Fourth Street

Louisville, KY 40202

Tuesday, September 13<sup>th</sup>

### **MINUTES**

**Members Present:** Judge Melissa Moore Murphy, Chair; Detective Jason Merlo, Kentucky State Police; Commissioner Marta Miranda Straub, Department for Community Based Services; Janice Bright, State Child Fatality Review Team; Dr. Elizabeth Salt, Citizens Foster Care Review Board; Dr. David Lohr, Medical Director, Department for Community Based Services

**Members Virtual:** Dr. William Ralston, Chief Medical Examiner; Dr. Henrietta Bada, Department for Public Health; Mark Hammond, Kentucky Coroners' Association; Steve Shannon, KY Association of Regional Programs, Inc; Lori Aldridge, Tri County CASA; Dr. Christina Howard, Child Abuse Pediatrician, University of Kentucky; and Dr. Jennie Green as proxy for Dr. Melissa Currie, Norton Children's Pediatric Protection Specialist, University of Louisville.

#### **Welcome and Introductions**

*Judge Murphy, Chair*

Judge Murphy welcomed everyone to the meeting. It is a pleasure to introduce our newest member, Mark Hammond, who is the President of Coroners' Association.

*Mark Hammond introduced himself as the President of the Kentucky Coroners' Association and the Boyd County Coroner. He has been involved as a paramedic since '89 and involved in the fire service since '85. He currently serves as a coroner and a regional director of the Kentucky Fire Commission and handles the training for the eastern part of the state.*

Judge Murphy thanked Mr. Hammond for joining us and reminded the panel this position was one of our recent legislative additions. We are grateful for you coming on board and think your knowledge will be beneficial for the panel. Next, we'd like to introduce Dr. Jennie Green who is serving as Dr. Currie's proxy for today's meeting.

*Dr. Jennie Green introduced herself. She has been a child abuse pediatrician at Norton's for the last two years.* Judge Murphy thanked her for joining us.

Everyone should have the Minutes and Case Review Summaries from the August meeting. If everyone has had an opportunity to review those, we will entertain a motion. Steve Shannon made a motion to adopt the minutes and case review summaries which was seconded by Lori Aldridge and Dr. Elizabeth Salt. With no objections, the August Minutes and Case Review Summaries stand as submitted.

## **Epidemiologist Update**

As you all may recall, we were allocated some funds to hire an epidemiologist and I'm going to let Elisha give you an update on that position.

*Elisha:* The Cabinet submitted an RFP to hire an epidemiologist and we did not receive any bids on that proposal. Our options are to repost the bid and try to hire an independent contractor or we can explore contracting with DPH or KIPRIC to utilize their current epidemiologist staff. Dr. Howard and I have been in conversations about what is the best approach, but we would like to know how the entire panel would like to proceed.

*Dr. Howard:* After Elisha and I talked, I think right now it's hard to find a private epidemiologist willing to take on partial work. I think the majority of KIPRIC staff are like that as well. Perhaps Dr. Bada can speak about the panel utilizing part of their epidemiology division to help with our report.

*Dr. Bada:* Yes, I think we can do it, but it will depend on how much time you'll need and if you need more time, we can explore hiring additional staff. We currently have two positions open that we're having trouble hiring but we have three on board. It shouldn't be an issue, we can help with the funding also because from Title V, we had the SSDI grant. The purpose of the grant is to link databases and that will go beyond what we currently in Maternal and Child Health. Our department is interested in child fatality and SUID. So, I don't think the needs of the panel would exceed the current needs of MCH.

*Dr. Howard:* What I like about that, is there are multiple epidemiologists. If we have a private contractor and they decided not to stay on board, we will have to rehire and retrain for that position. Whereas, if we utilize DPH's program, they have several staff and someone else could easily step up to assist the panel.

*Judge Murphy:* It sounds like we're leaning towards consulting with DPH, if everyone is ok with that? All members agreed with not reposting the RFP and exploring the options of contracting with DPH or KIPRIC. We will provide the panel with an update at the October meeting.

## **Legislative Update**

LRC testimony is happening tomorrow at 1:00 for the Child Welfare Oversight and Advisory Committee. Dr. Currie and Steve Shannon are both testifying on behalf of the panel. As always, we greatly appreciate you both taking care of that for us. We also have our annual Legislative Oversight and Investigations Committee review currently underway. Elisha, do you have anything to add.

*Elisha:* LOIC staff did indicate they hope to have their report ready for the committee by November. So, we will need some panel members to volunteer to testify. I will keep you all posted as more information becomes available.

## **Child Home Safety Committee Update**

*Joel:* The Child Home Safety Committee is a collaborative effort between the panel, KSPAN, and Prevent Child Abuse KY. Last year as you may remember, we were funded to purchase medication lockboxes and distribute them through the community. We were able to successfully distribute all of

those and reapplied for another grant for FY23 and were fortunate enough to receive \$42,000 in funding. Last year we distributed 1,335 boxes across the state and this year we will be able to more than double that number. We will be distributing those through regional prevention centers, FYRSC, HANDS, and other community partners that work with the family. University of Kentucky, Division of Pediatrics, Forensic Medicine received a grant through another funding source, and they are targeting MAT providers, needle exchange programs, and hospitals. We have been working with UK and when they receive request from community resource partners, they send those to us, and we send them any medical provider request we receive to ensure there's no overlap. If anyone is interested in getting this information out or engaging a local community partner just send me an email.

### **Safe Sleep Workgroup Update**

*Dr. Lohr:* The Safe Sleep work group has been meeting monthly since January. So, it's in the context of these cases we review regarding co-sleeping. We are working to better integrate, I think, DCBS and ongoing efforts with Division of Maternal and Child Health to expand the outreach, the impact, and really pick up where we left off before the pandemic. The last three months we've been working to get training for foster parents and DCBS workers. We've been thinking about ways to expand the messaging to the Division of Child Care and the Division Family Supports. The Division of Maternal and Child Health has an existing program that they successfully ran a few years ago. When the pandemic came, we noticed the statistics reversed a little bit. So, we're looking to try to expand that message and renew it. What's left on our agenda is to bring in some of the MCOs and hear what they are doing. Things like providing cribs and more messaging. This will allow us to see if there's any patterns that we can suggest to the others. Certain MCOs are more active than some, it would be nice to have all of them. I foresee at last three more meetings, to work on this. This is an ad hoc group and at some point, we make our links and suggestions, and we can monitor with you. Thank you for the time.

### **Torture Definition**

*Dr. Salt:* Last meeting, we had identified that there were some definitional problems with child torture. We had a couple of cases where we visited whether this was torture. We did a review of the literature and Judge Messer reviewed case law specific to whether it's defined or not. It's sort of a philosophical issue that I think will require further discussion, but I think we've made some headway as to what's out there. Currently, we're using the Knox definition, which I think is important to recognize that this was a study that five child abuse pediatricians selected cases they determined to be torture. However, cases involving primarily sexual abuse were excluded from this study. I think this is something that's going to require further discussion and has further implications certainly as to which definitions we use. I also think it's important because it's universally known to be important behavior and that translates to substantial policy change.

*Judge Murphy:* We have a slide presentation we can send out to all the members. Does anyone have any questions?

*Commissioner Miranda-Straub:* I just wondered what you see as the next steps? And thank you for researching this and helping us solve this problem. In some of these cases, the definition seems inadequate. So, what do you suggest are the next steps as a panel?

*Dr. Salt:* The National Center for Child Abuse Statistics and Policy and they have, I think, a fairly inclusive definition. Federal policy has a whole document rationalizing the different aspects of their definition. It's interesting, Judge Messer, Lucy Heskins, and myself all landed on that same document and found it be extremely useful in trying to really conceptualize this because the problem with this study is they're already taking a definition and then applying cases to it, instead of vice versa. I think its really important to do this research across disciplines. The general population needs to understand what domestic child torture is and be able to support legislation and policies to effectively change that. It definitely warrants further discussion in my mind.

#### **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-013-21-C	Joel Griffith
2	NF-089/090-21-C	Joel Griffith
3	F-053-21-C	Joel Griffith
4	F-030-21-NC	Joel Griffith
1	NF-014-21-C	Joel Griffith
2	F-063-21-PH	Joel Griffith
3	NF-092-21-C	Joel Griffith
4	NF-098-21-C	Joel Griffith
1	F-062-21-PH	Cindy Curtsinger
2	NF-099-21-C	Cindy Curtsinger
3	NF-141-21-C	Cindy Curtsinger
1	F-010-21-C	Joel Griffith
2	NF-023-21-NC	Joel Griffith

#### **Additional Discussion:**

**Firearms:** Does the panel want to discuss child access prevention laws as a potential recommendation? The National Conference of State Legislators said 27 states and the District of Columbia have such laws, Kentucky does not. Yes, we should consider it as a recommendation. Maybe we should consider having a list of all our recommendations and then list the top five recommendations.

**DCBS Staffing:** The panel requested an updated on the current staffing capacity at the Department for Community Based Services.

**Meeting adjourned.**