

Buncombe County
Community Child Protection Team & Child Fatality Prevention Team



Protecting our Children

2017 ANNUAL REPORT TO BUNCOMBE COUNTY BOARD OF COMMISSIONERS

I. Introduction to the North Carolina Child Fatality Prevention System

North Carolina's Child Fatality Prevention System is addressed in Article 14 of the North Carolina Juvenile Code, N.C.G.S. 7B-1400 through 7B-1414. The public policy that anchors this system is articulated in the statute as follows:

The General Assembly finds that it is the public policy of this State to prevent the abuse, neglect, and death of juveniles. The General Assembly further finds that the prevention of the abuse, neglect, and death of juveniles is a community responsibility; that professionals from disparate disciplines have responsibilities for children or juveniles and have expertise that can promote their safety and well-being; and that multidisciplinary reviews of the abuse, neglect, and death of juveniles can lead to a greater understanding of the causes and methods of preventing these deaths.

According to Article 14, the purpose of the system is to assess the records of all deaths of children in NC from birth to age 18, as well as selected cases in which children are being served by child protective services (CPS), in order to:

- Develop a community-wide approach to child abuse and neglect;
- Understand causes of childhood deaths;
- Identify gaps or deficiencies in service delivery in public agency systems designed to prevent abuse, neglect, and death; and
- Make and implement recommendations for laws, rules, and policies that will support the safe and healthy development of children and prevent future child abuse, neglect, and death.

Every county in NC has two teams that are part of the state Child Fatality Prevention System.

1. The **Community Child Protection Team (CCPT)** reviews selected active cases of children who are being served by child protective services (CPS), and all cases in which a child died as a result of suspected or confirmed abuse or neglect and a report of abuse or neglect had been made about the child or their family to DSS within the prior

12 months, or the child or their family was a recipient of CPS within the prior 12 months.

2. The **Child Fatality Prevention Team (CFPT)** reviews the records of all cases of additional child fatalities (i.e., the deaths of children who died from a cause other than suspected abuse or neglect). It is important to note that fatalities are reviewed during the calendar year following the year of death.

In most counties, including Buncombe, these two local review teams are merged into one team. Based on case reviews, the local CCPT/CFPT makes recommendations and advocates for system improvements and needed resources where gaps and deficiencies may exist.

CCPT and CFPT membership is designated by statute, consisting of various representatives of public and private community agencies that provide services to children and their families, including the local Department of Social Services (DSS), Health Department, law enforcement, Guardian Ad Litem, and school systems. The local board of county commissioners also may appoint as many as five additional members to represent agencies or the community at-large. **Appendix 1 shows the mandated members and their appointing authority, as well as the specific individuals filling those roles for the Buncombe County CCPT/CFPT. Board of Commissioners approval is being requested for the appointment of several new team members (highlighted in Appendix 1).** All mandated membership positions are filled with the exception of two positions. We anticipate that a new representative from the Buncombe County Health and Human Services Board will be appointed within the next month. However, the team has never been able to fill the position for a parent of a child who died before their 18th birthday. As we continue our recruitment efforts for this latter position, we would appreciate any assistance that commissioners could offer us.

The purpose of this report is to give a summary of the activities and accomplishments of the Buncombe County CCPT/CFPT during calendar year 2017, including the number of child fatality reviews conducted and aggregate data on the causes of those child fatalities, the number of DSS case reviews conducted, and recommendations for system improvements and needed resources to prevent child abuse, neglect and death.

II. Role of the Buncombe County Board of Commissioners

- Receive annual report from Buncombe County CCPT/CFPT, which contains recommendations for prevention of child abuse, neglect and death.
- Advocate for system improvements and needed resources, if requested.
- Appoint members to the Buncombe County CCPT/CFPT as designated by state statute.

III. Child Maltreatment Case Reviews

In 2017, the Buncombe County CCPT/CFPT reviewed four cases of child maltreatment. **A common thread among those cases was the need for improved access to mental health and substance use disorder treatment for both children and parents/caregivers in our community, especially those without insurance.**

IV. Child Fatality Reviews

Last year, the Buncombe County CCPT/CFPT reviewed 27 deaths that occurred in children who resided in Buncombe County at the time of their deaths in 2016. In December 2017, several members of the team also participated in a state-led intensive fatality review of a child who died in 2016 and whose family had been involved with DSS during the twelve months preceding her death. Two other fatality reviews for children who died in 2016 were not performed; one was due for a state-led intensive review (which was held in March 2018) and the other because of an ongoing criminal investigation. **Please see Appendix 2 for aggregate data on the causes of child deaths in Buncombe County in 2016, as well as select demographic information about the deceased children.**

In 2017, the team identified the following system problem and recommendations for future prevention efforts.

Cause of Death	System Problem Identified	Recommendation
4 fatalities due to Sudden Unexplained Infant Death (SUID) – all involved unsafe sleep environments	Failure of current safe sleep messages to reach all caregivers and/or impact their behavior	Convene workgroup composed of representatives from local public and private agencies that serve infants and parents; review current literature on reducing sleep-related infant deaths; retool local safe sleep messages and delivery of those messages so that they are more likely to reach all caregivers and increase the number of infants who are consistently placed in safe sleep environments

V. Buncombe County CCPT/CFPT Activities and Accomplishments

- The team met 10 times in 2017.
- Individual reports were completed on child deaths reviewed by the team and were forwarded to the state CCPT Consultant and CFPT Coordinator.
- The annual CCPT Survey and CFPT Activity Summary were completed by the dates requested.
- An electronic child fatality tracking tool created by Buncombe County Health and Human Services staff was implemented in January 2017 and utilized to record the cause of death and basic demographic information for each

reviewed fatality, as well as any significant contributing factors that led to the fatality, such as an unsafe sleep environment or parental/caregiver substance use. The team plans to review the data collected in this tool annually to help inform our priorities and activities for the coming year.

- The team partnered with Buncombe County DSS to purchase bracelets with the message, "She believed she could, so she did" on them as well as the intake number for Vaya Health. These bracelets are being distributed to pregnant women or new mothers who have substance use disorders or mental health diagnoses, or have experienced intimate partner violence.
- Transition to a new Chair and Review Coordinator for the team in December 2017, with associated implementation of a new structure to meetings and meeting minutes.

VI. Conclusion

Thank you to the members of the Buncombe County Board of Commissioners for this opportunity to share the work of the Buncombe County CCPT/CFPT. We appreciate your support of our efforts to prevent child abuse, neglect and death. Please feel free to contact me should you have any questions about this report.



Jennifer Mullendore, MD, MSPH
Chair, Buncombe County Community Child Protection Team/Child Fatality
Prevention Team
Medical Director, Buncombe County Health and Human Services

Date: 4/16/2018

Appendix 1: Buncombe County CCPT/CFPT Proposed Membership (as of 4/16/18)

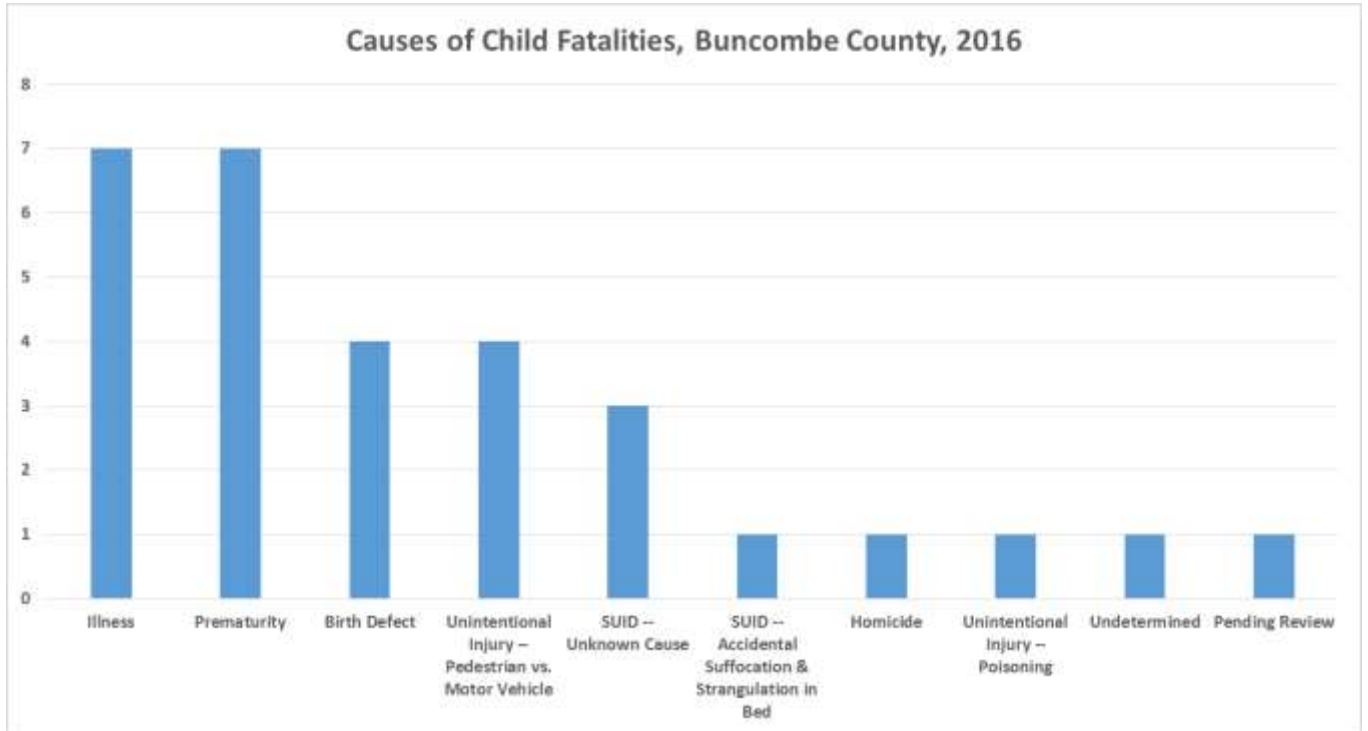
MANDATED MEMBER	APPOINTING AUTHORITY	AGENCY	REPRESENTATIVE	MEMBER SINCE
DSS Director		Buncombe County HHS (BCHHS)	Stoney Blevins	2018
DSS staff member		BCHHS	Katie Swanson	2013
“ “ “		BCHHS	Sherrie Thomas	2016
Local Law Enforcement Officer	Board of County Commissioners	Asheville Police Dept.	Sgt. Angie Tullis	2017
	“ “ “	Buncombe County Sheriff's Dept.	Sgt. Ryan Jordan	2017
Attorney from District Attorney's Office	District Attorney	Buncombe District Attorney's Office	Lisa Morrison	2006
Executive Director of local community action agency (or their designee)		Community Action Opportunities	Trudy Logan	2016
Superintendent of each local school system (or their designee)		Asheville City Schools	April Dockery	2015
		Buncombe County Schools	Jennifer Reed	2018
County Board of Social Services member	Chair of BCHHS Board	Buncombe County HHS Board	VACANT	
Mental Health Professional	Vaya Health LME/MCO Director	Vaya Health	Darcie Sootin	2016
	“ “ “	Family Preservation Services	Kirsten Smith	2013
Guardian ad Litem Coordinator (or their designee)		Guardian ad Litem – District 28	Jennifer Nehlsen	2012
Director of local Department of Public Health		Buncombe County HHS	Jan Shepard	2017
Local Health Care Provider	BCHHS Board	Buncombe County HHS	Dr. Jennifer Mullendore	2011
	“ “	Mission Children's Specialists	Dr. Sarah Monahan-Estes	2012
	“ “	MAHEC OB/Gyn Specialists	Dr. Elizabeth Buys	2017
Emergency Medical Services provider or firefighter	Board of County Commissioners	Buncombe County EMS	Roger Banks	2015

District Court Judge	Chief District Court Judge	Buncombe County District Court	Judge Ward Scott	2015
County Medical Examiner	Chief Medical Examiner	Buncombe County Medical Examiner	Dr. Cynthia Brown	1999
Representative of a Local Child Care Facility or Head Start program	Buncombe County DSS Director	Community Action Opportunities Head Start	Sharon Farmer	2015
Parent of a Child Who Died Before 18 th Birthday	Board of County Commissioners		VACANT	
Additional member #1	Board of County Commissioners	Children's Developmental Services Agency	Molly Payne	2005
Additional member #2	Board of County Commissioners	Mountain Child Advocacy Center	Geoff Sidoli, Executive Director	2015
Additional member #3	Board of County Commissioners	Buncombe County Board of Commissioners	Commissioner Jasmine Beach-Ferrara	2017
Additional member #4	Board of County Commissioners	Community Care of WNC (CCWNC)	Sherry Noto, Care Coordination for Children (CC4C) Supervisor	2018
Additional member #5	Board of County Commissioners	Mission Hospital	Tammy Cody, Team Lead, Clinical Social Work/Perinatal Substance Exposure Project	2018
Review Coordinator	Buncombe County DSS Director and Health Director	BCHHS	Terri Rogers	2017

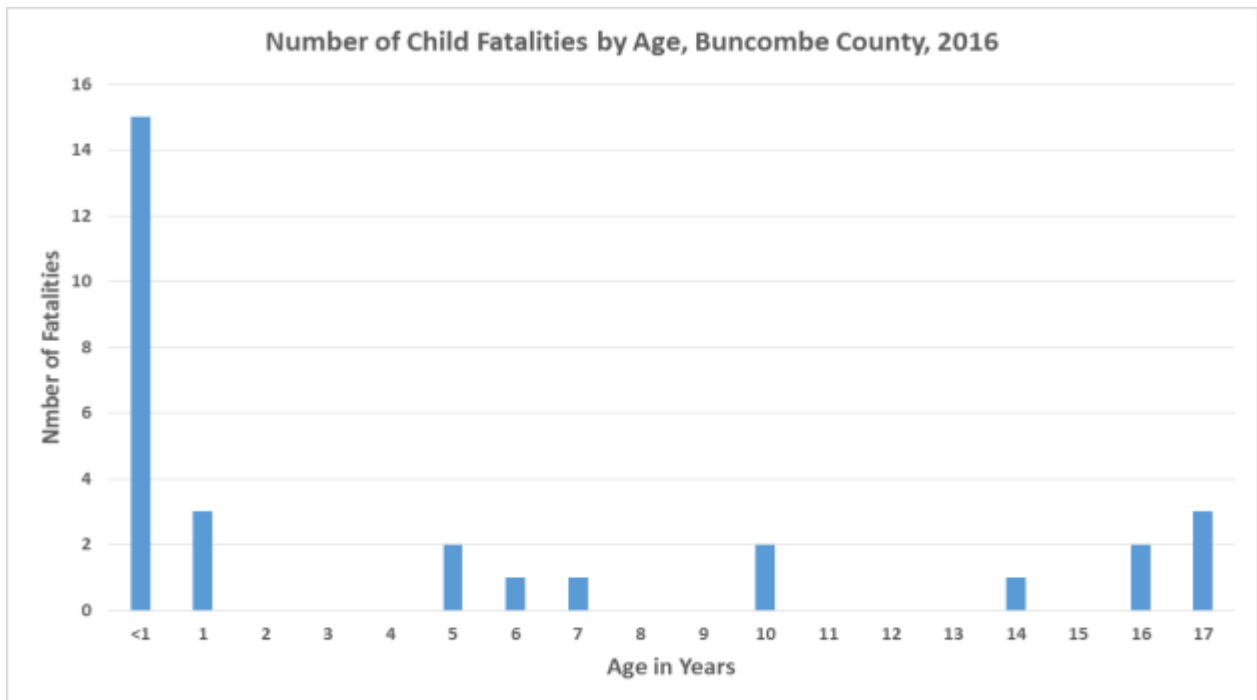
Frequent Guests:

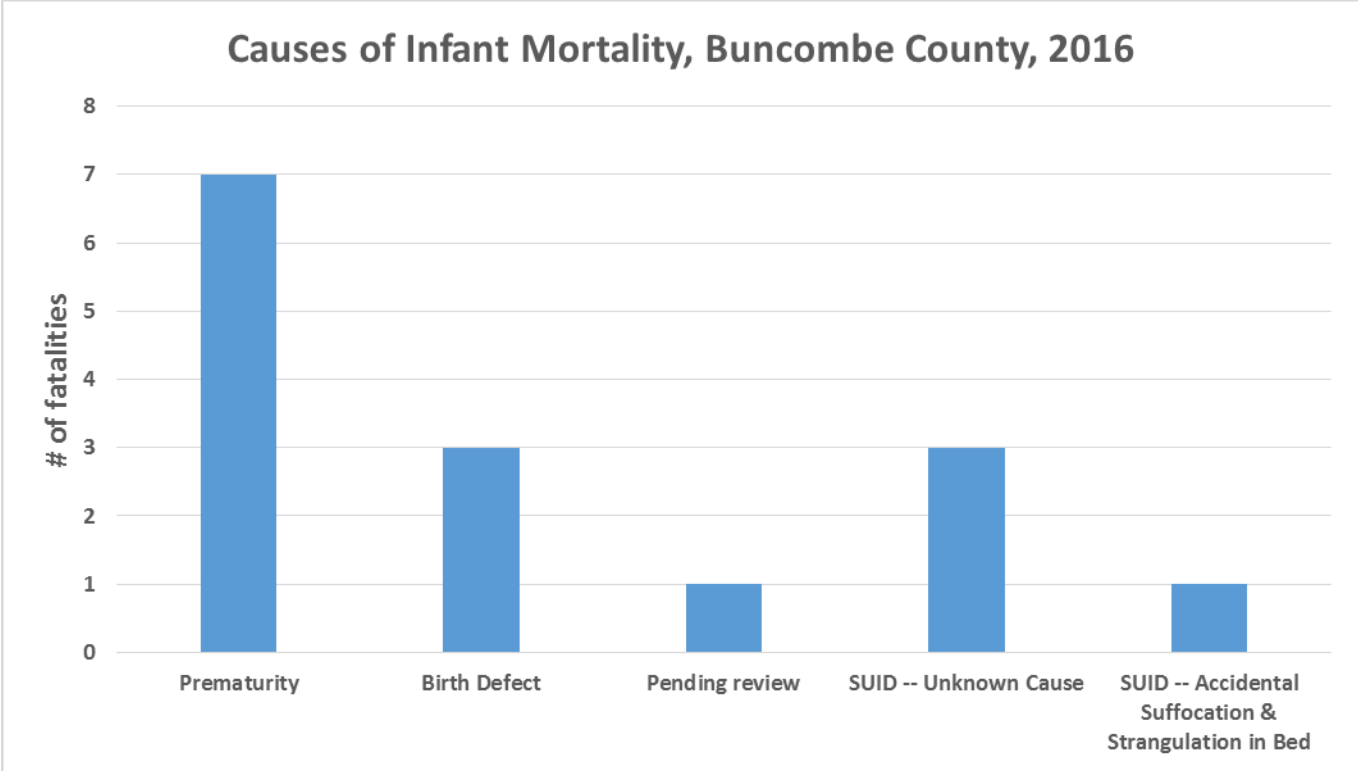
- Mary Ellen Wright, Mission Hospital; since 2016
- Cindee Wood, OB Care Management Team Lead, CCWNC; since 2017
- Joanna Knowles, Helpmate Program Manager; since 2018

Appendix 2: 2016 Buncombe County Child Fatality Data (from Buncombe County CFPT; data through 3/21/2018)



- SUID = Sudden Unexplained Infant Death
- 30 fatalities total, including 15 infants (age <1 year)
- Pending Review = Fatality under criminal investigation & not yet reviewed by team





- SUID = Sudden Unexplained Infant Death
 - All 4 SUID deaths involved unsafe sleep environments; 3 involved co-sleeping
- Prematurity deaths ranged from < 22 weeks to 27 weeks gestation and included 4 deaths < 22 weeks
- Infant mortality by race/ethnicity:
 - 9 White/Non-Hispanic
 - 2 White/Hispanic
 - 2 African-American/Non-Hispanic
 - 1 Unknown/Hispanic
 - 1 Multiracial/Hispanic
- Infant mortality by gender: 1 male, 14 female