

MINUTES
Administrative Team to Review the Death of Children Meeting
Held on
Tuesday, November 1, 2005
At Division of Child and Family Service (DCFS)
Mountain Springs Conference Room
711 E. Fifth St.
Carson City, NV 90701

I. Call to order and Roll Call

Jone Bosworth, Chair of the Administrative Team to Review the Death of Children called this meeting to order and took roll call.

Members Present:

Jone Bosworth, Administrator, DCFS
Michael Capello, Director, WCDSS
Emil DeJan, Chief, NVHD
Ray Kendall, Director of Rural Clinics, MHDS
Sharon Benson, Deputy, AG
John Douglas, Captain, DPS - representing George Togliatti, Director, DPS

Not Present:

Susan Klein-Rothschild, Director, Clark County Department of Family Services
Judith Wright, Chief, NVHD
George Togliatti, Director, DPS

Staff and Guests:

Reesha Powell, SWS, DCFS
Andrew Zeiser, AZ Consulting
Cyndi Sauchak, Investigator, LVPD
Barbara Legier, CPP, DCFS
Caroline Thomas, SSPS, DCFS

Mr. Kendall made a motion to accept the minutes.

Mr. DeJan requested that it be clearly noted in future meeting minutes which attendees are members and which are representatives. Mr. DeJan then seconded Mr. Kendall's motion. None opposed. Motion carried.

The Team reviewed previous Administrative Team Responses to the Second Quarter Clark County Multidisciplinary Team recommendations. This update was lead by Barbara Legier. The documents reviewed included:

- A letter to Executive Committee from the Administrative Team regarding enhancing the co-sleeping media campaign to include older siblings, obtaining an MDT attendance list to verify which required representatives are attending

the meetings and which are not so that the Administrative Team may help facilitate attendance by all required parties, and the creation of a subcommittee through the Executive Committee regarding legislative changes for Judges and attorneys to obtain child welfare and domestic violence training.

- A letter to the Juvenile Justice Commission related to the development of an informational pamphlet for distribution by county probation departments regarding youths dying as a result of the parents not recognizing or considering that the youth's unresponsiveness (due to substance abuse) required immediate medical attention. Many of these youths had involvement with the probation departments. Mr. Capello agreed to attend the next Juvenile Justice Commission meeting in Reno to answer any questions the Commission may have related to the letter that was sent to them by the Administrative Team and report back to the Administrative Team.
- A letter to the State Attorney General's Office requesting that a statutory review of other states be completed related to cases being deemed "non-coroner" cases and the use of mopeds and mopeds.
- A letter to the Decision-Making Group from the Administrative Team requesting standardized practice when requesting CPS information from other states.
- A letter to the Department of Health and Human Services regarding the development of a law enforcement check list (teen suicide investigations) and the creation of the Suicide Prevention Unit.
- The Administrative Team Response Sheet to the Clark County MDT recommending their participation in the Mental Health Consortium meeting to address the need for increased child psychiatric services in Clark County.
- Handouts from the State Health Division related to psychotropic medication and nursing mothers and infant screening information.

Mr. Kendall made a motion that the Administrative Team provide a copy of all of these documents to the Clark County local MDT. Mr. DeJan seconded the motion. None opposed. Motion carried. Administrative Team staff will forward documents to the MDT Co-Chairs.

Ms. Powell presented a child welfare informational memorandum drafted by representatives from DCFS, Clark County and Washoe County, regarding Medically Fragile Children who have a medical condition which is documented by a physician that can become unstable, unchangeable which may result in a life threatening situation. The memorandum advises case workers to obtain all medical documentation on all medically fragile children during the course of the investigation process and throughout the life of case. In addition, prior to a child's welfare case closing, the memorandum advises workers to notify all of the child's medical health providers that the case would be closing into encourage them to notify the child's welfare agency immediately if those child's needs are not being met. The memorandum will go before the Child Welfare Decision-Making Group on November 8, 2005. Once the memorandum is approved, copies will be provided to the Administrative Team.

Mr. Zeiser presented a status report on the Clark County Child Fatality Data Improvement Project including the purpose of the project and the projected outcomes.

Purpose of the Project:

- Insure that accurate, meaningful data is collected and reviewed regularly;
- Correctly track the number and causes of child fatalities and near fatalities in the state;
- Increase the focus on preventable deaths that are caused by abuse and neglect, the lack of education of care providers, and fatalities of children that are served by the Child Welfare System; and
- Insure that substantiations of abuse and neglect are appropriately determined in order to promote safety, permanency and wellbeing for children who are served by Child Protective Services.

Project Outcomes:

- Increase internal data integrity by establishing a system of cross checks between a variety of DCFS data sources that include: a child neglect data system, CANS, the County Courtesy Notification Database and the regional CDR team data. These internal crosschecks are going to be expanded to determine child involvement with the Juvenile Justice System, and those children receiving Juvenile Justice and Mental Health Services;
- Increase external data integrity by establishing a system of crosschecks with the Nevada State Health Division Office of Vital Statistics through a Memorandum of Understanding; and
- Other outcomes will include incorporating child fatality and near fatality case reviews into the DCFS quality improvement process. This will insure that improvements to data collection and staff training are accomplishing the established purposes for the project.

Progress to Date:

- Progress to date includes the development of a detailed data base of child fatalities in Clark County, for calendar years 2001 through 2004.
- This data base was developed by DCFS Information Management Services. The data is crosschecked with the DCFS source data and State Vital Statistics data to evaluate the initial data quality and identify areas that need improvement in terms of data collection.
- Initial areas that have been identified for data improvement include discrepancies in child name spellings, dates of death and cause of death. Also, incomplete or missing data elements, lack of detail in the unity case notes and incomplete unity case closures upon child death.

- There is a need to reinforce case worker focus on the investigative process and appropriate substantiations of abuse and neglect, as well as a need to review policies and procedures surrounding case worker follow-up on child fatalities, training on data entry for substantiations and child fatalities and including proper closure, supervisory review of child fatalities and possible trauma to case workers that results from that.

A one page summary of the Clark County Child Fatality Data Improvement Project will be forwarded to all Administrative Team members.

Mr. Kendall made a motion requesting that the Executive Committee include data from the Child Fatality Data Improvement Project into the Child Death Annual Report.

Mr. DeJan seconded the motion. None opposed. Motion carried.

Ms. Legier then reviewed the “Cumulative MVT Child Death Quarterly Report”, the “Child Death Review, Multi-Disciplinary Team Observations and Recommendations”, and the “Summary Quarterly Administrative Team Tracking Document for CDR MDT Recommendations” with the Administrative Team.

Recommendation #1 from the Clark County MDT is to increase the amount of child welfare training, focusing on child safety, mandatory reporting and warning signs of abuse and neglect to those that license and regulate shelter and emergency foster care facilities. Ms. Legier noted that this recommendation is being addressed through the Child Welfare Program Improvement Plan, as a massive amount of training is being completed in these areas. The Family Risk Assessment Protocol (FRAP) is a new practice to address these issues and the CAPTA Corrective Action Plan addresses the mandatory reporting element and the reporting manual is being updated and distributed, as was the Intake Policy to ensure CAPTA compliance.

Ms. Legier suggested that no additional action is needed other than to notify the local MDT of the action already undertaken by all of the state Child Welfare Agency. The Team agreed to inform the Executive Committee of their opinion on the recommendation. A response sheet from the Administrative Team will be forwarded to the local MDT. No motion required.

The Team then addressed the next recommendation, that the “Practice of Midwifery, should become more firmly regulated.” The discussion that followed indicated that based on the recommendation from the local MDT, is not clear what is being requested of the Administrative Team. For example, clarification is needed to determine if the MDT is requesting licensure requirements for midwifery or a statutory change.

The Administrative Team agreed to send a response back to the local MDT requesting clarification of the recommendation before the Administrative Team consider what action or response would be appropriate. The Team agreed to this. No motion required. A response sheet for this recommendation will be forwarded to the local MDT requesting

further direction for the Administrative Team on this recommendation related to Midwifery.

The next recommendation from the local MDT is to form an Alternative Drug Court for pregnant women using drugs, or propose new legislation that mandates treatment for pregnant women using drugs, and proposed legislation that allows prosecution of mothers who have had repeated child deaths due to drug exposure. Mr. Kendall expressed concern over the last part of the recommendation to “prosecute mothers who have repeated child deaths due to drug exposure.” The Team agreed that it is not the Administrative Team’s role to “prosecute” individuals. The Team agreed to refer this to the Executive Committee to develop networking opportunities in existing agencies such as the Bureau of Drug and Alcohol Abuse and the State Health Department for collaboration. The Team does not support the piece of the recommendation on the prosecuting of mothers. All members were in agreement. No motion required. A response will be forwarded to the local MDT.

The next recommendation from the MDT suggests that construction sites should be strictly regulated with regard to safety issues near public access points where children may be present. Discussion ensued and it was decided that this issue would best be addressed by the Clark County Commissioners, as a number of different state, county and city agencies are responsible for monitoring these sites. The Team agreed that this recommendation will be referred to the Executive Committee requesting they present this issue to the Clark County Commissioners. No motion required. A response will be forwarded to the local MDT.

The next recommendation from the MDT requests that counseling for co-victims of recent suicides be made available, especially for boy/girlfriends of the deceased. The Team agreed to refer this to the Department of Health and Human Services State Level Suicide Prevention Unit. The Team agreed. No motion required. A response will be forwarded to the local MDT.

Ms. Bosworth then moved to the next agenda item regarding a letter from the Administration for Children and Families, requesting information from DCFS on the death of a Clark County child and the DCFS letter to Clark County Department of Family Services, requesting information on the death of a child. Ms. Bosworth explained that this was placed on the agenda as an informational item to highlight the Federal level of interest in the child fatalities occurring in Clark County in particular. The Division of Child and Family Services has forwarded a response back to ACF.

Ms. Bosworth then explained that this is her last day with DCFS and requested that the Team elect a new Chair of the Administrative Team. Discussion ensued.

Mr. DeJan nominated Michael Capello as Chair of the Team for the next year. Mr. Kendall seconded the motion. All agreed. No opposed. Motion carried.

Ms Bosworth then moved to the Public Comment portion of the meeting. There was no public comment.

Topics for the next meeting were discussed. It was requested that the next Administrative Team meeting be a joint meeting with the Executive Committee.

Mr. Kendall made a motion to have a joint meeting with the Executive Committee and Mr. DeJan seconded the motion. All agreed. None opposed. Motion carried.

Administrative Team staff will contact the Executive Committee and request a joint meeting in January. Meeting is tentatively set for January 17, 2006.

Meeting adjourned.