



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

YVONNE COPELAND • Director, Division of Child and Family Well-Being

North Carolina Child Fatality Prevention Team— Know Your Responsibilities



ALL CFPT Members

The role of every CFPT member is crucial and adds essential information and perspective for every review. The basic role of all members includes the following duties:

1. Attend meetings. The General Statute requires teams to meet a minimum of four (4) times annually.
2. Check your agency records for contact with the family, parents, or deceased child.
3. Notify the Review Coordinator if you are unable to attend a meeting.
4. Forward information from your agency to the Review Coordinator on cases to be reviewed when you are unable to attend.
5. Assist the team members with identifying system problems, recommendations, and actions.
6. Help team members decide if more information is needed to conduct a full child fatality review.
7. Notify the Chairperson or Review Coordinator if you are unable to fulfill the responsibilities of your position on the team.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF CHILD AND FAMILY WELL-BEING

LOCATION: 5601 Six Forks Drive, Building 2, Raleigh, NC 27609
MAILING ADDRESS: 1928 Mail Service Center, Raleigh, NC 27699-1928
www.ncdhhs.gov • TEL: 919-707-5600 • FAX: 919-870-4881

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Confidentiality Reminder:

- Each local CFPT member must sign a confidentiality statement
- NC law prevents the local CFPT from contacting, questioning, or interviewing families of deceased children as part of the review.
- NC law protects information shared at local CFPT reviews, even from introduction into court proceedings to maintain the family's privacy.
- While the CFPT may periodically release non-identifiable aggregated data, releasing case-specific information would be a serious breach of confidentiality.
 - It is not within the purposes of the CFPT to release any case-specific information, even when the information may be “public knowledge” (e.g., as a result of a trial). Case-specific information which is already public record may be obtained by the public through appropriate channels, which do not include the CFPT.
- The confidentiality of each participating organization must be recognized and respected.
- Confidentiality must be appropriately balanced against the need for information to make the prevention system operate successfully

Checklist for Records Review- Emergency Medical Services

Below is a checklist to assist you, as the EMS representative, to identify sources of information available for local CFPT reviews:

1. Agency contact with mother, father, or deceased child, including dates of contact and circumstances surrounding child's death
2. Household members or other people who were present at the time of death, and conditions of the home environment
3. Indicators of family violence, accidental or non-accidental injury, substance abuse, and physical or mental impairment
4. Medical information about household members, including medications, health care providers, diagnoses, and treatment
5. Communication and dates of contact with other agencies regarding this family