

NORTH CAROLINA LOCAL CHILD FATALITY PREVENTION TEAM ACTIVITY REPORT 2023

Abstract

This report highlights collected NC Local Child Fatality Prevention Team (LCFPT) data related to the 2023 Activity Summaries for activities during the 2023 calendar year.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

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Introduction

In North Carolina, as part of the child fatality prevention system, a Local Child Fatality Prevention Team (LCFPT or Teams), exists in every county. It is the responsibility of the local Health Director to ensure the operation of the LCFPT. For additional requirements regarding the LCFPTs, please refer to General Statutes of North Carolina [§ 7B-1407](#). LCFPTs are multidisciplinary and comprised of professionals representing social services, law enforcement, district attorney's offices, local community action agencies, local school systems, mental health departments, guardian ad litem members, health care providers, and more.

LCFPTs are required to meet at least four times per year (ideally quarterly) but can meet more often, as needed. When LCFPTs meet, they have access to records specific to the child death(s) in review. The mission of LCFPTs is to:

- Identify system problems that may contribute to a child's death.
- Make recommendations for the prevention of future child deaths to county commissioners, the county board of health, the State Team, and the Task Force.
- Implement local recommendations.
- Advocate for children.
- Educate communities on how children are dying and how to keep children safe from injury and harm.

The Annual Activity Summary, a component of the Agreement Addenda between local health departments and the North Carolina Department of Health and Human Services, Division of Child and Family Well-Being, is completed by each LCFPT. For the calendar year 2023, all 100 LCFPTs completed the Activity Summary survey. Their responses are analyzed in this report.

This report will share a summary of the collaborative activities, programs, and partnerships between LCFPTs and their communities, which all focus on keeping North Carolina children safe.

County Representation

A HUGE accomplishment, ALL counties are represented in this report after receiving 100% of completed responses to the respective years Activity Summary.

Meetings conducted by LCFPTs in 2023

All LCFPTs are legislatively required to meet at least four times per calendar year. Counties with larger numbers of child fatalities may find it necessary to meet more often to adequately review all fatalities.

In 2023, across all counties, 452 meetings were conducted. The number of LCFPT meetings ranged from one meeting (by three LCFPTs) to 12 meetings (two LCFPTs); four meetings were the most

common number of meetings for Teams (53%), followed by Teams that met more than four times (42%). Regarding how LCFPTs meet, results are displayed in Chart 1, below.

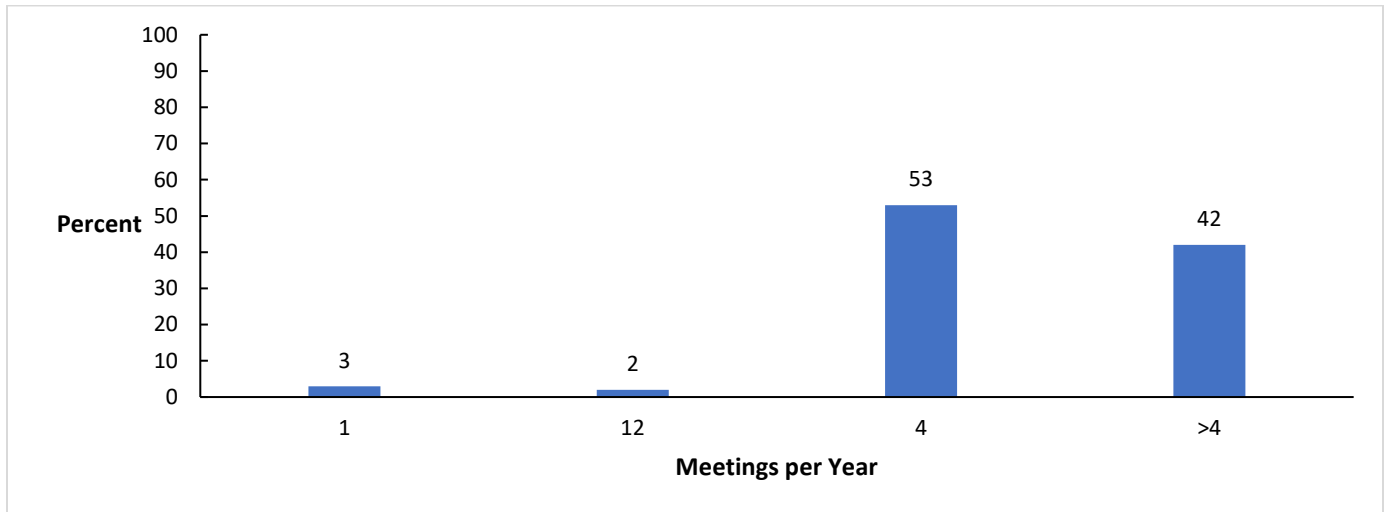
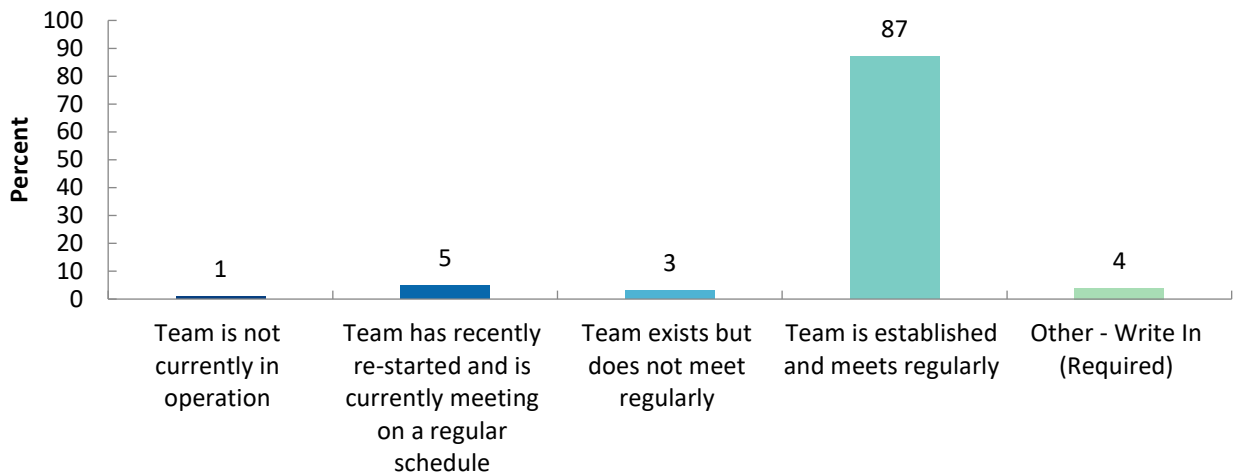


Chart 1: LCFPT Meeting Description

Question 4: Which of the following statements best describes your CFPT?



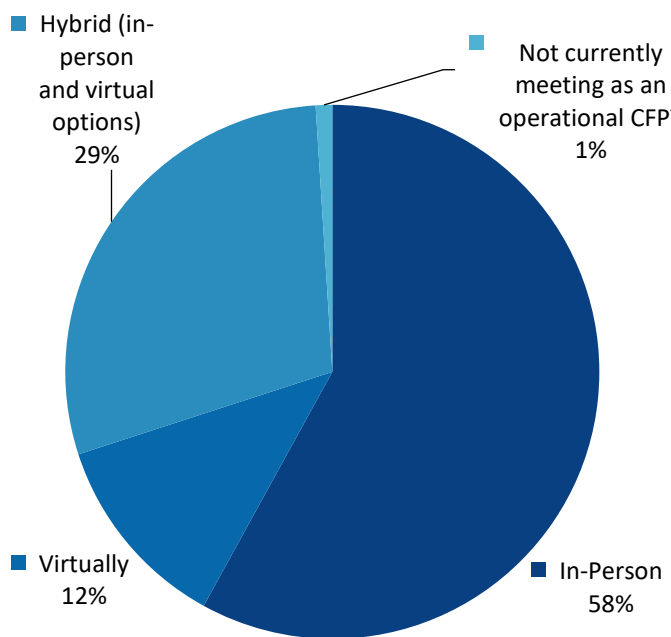
A major milestone, nearly 90% of counties are established and meet regularly. Of those who chose ‘other,’ responses included “Established; sporadic meetings/attendance; The team is being rebuilt due to vacancies; Team has been established. During Covid, meetings were not held. Restarted

meetings back in 2023; Team exists but only meets when cases to review - otherwise send emails of information from the State.”

Chart 2, and accompanying table note how the LCFPTs are meeting. A majority of teams are back to meeting in-person after a few years of COVID-19 pandemic alterations, though hybrid, and virtual meetings are practiced as well. Both virtual and hybrid bring their own challenges both with technology and with engagement.

Chart 2: LCFPT Meetings

CFPT Meeting Format



Value	Count
In-Person	58
Virtual	12
Hybrid	29
Non-operational CFPT	1
	Total: 100

Team Member Representation

Local Child Fatality Prevention Teams (LCFPTs) have several options of team format and leadership to help lessen the burden of completing all necessary reviews.

1. LCFPTs can choose to be blended with their local Community Child Protection Team, meaning they meet simultaneously. In 2023, more than 76% of the responding counties identified themselves as a blended team of Child Fatality Prevention and Community Child Protection.

2. Counties with a high number of deaths per year – 30 or more – may choose to utilize subcommittees to decrease the challenge of reviewing all deaths. Among LCFPT respondents in 2023, eight counties stated they utilize subcommittee meetings.
3. Member participation was asked for the second time in this year’s survey, providing a glimpse of who is involved in case reviews. A few highlights can be seen below with specific details found on Table 1.
 - a. Parents of a child who died before their 18th birthday had the highest vacancy rate at 58%.
 - b. 82% of responding counties have DSS staff members attending every meeting and 56% of counties have the Director of Local Department of Public Health attending every meeting.
 - c. Attendance percentage represents only percent of Occasionally, Frequently, and Every Meeting for responses.

Table 1: LCFPT Member Representation

Darker color/deeper blue equates to higher county/percentage and graded to white, zero. Definitions of the membership include:

- Vacant - Position is not filled/appointed
- Never - Position is assigned but individual not attending
- Rarely - Position is assigned but individual has inconsistent attendance
- Occasionally - Position is assigned but individual attended half of meetings
- Frequently - Position is assigned but individual missed one meeting

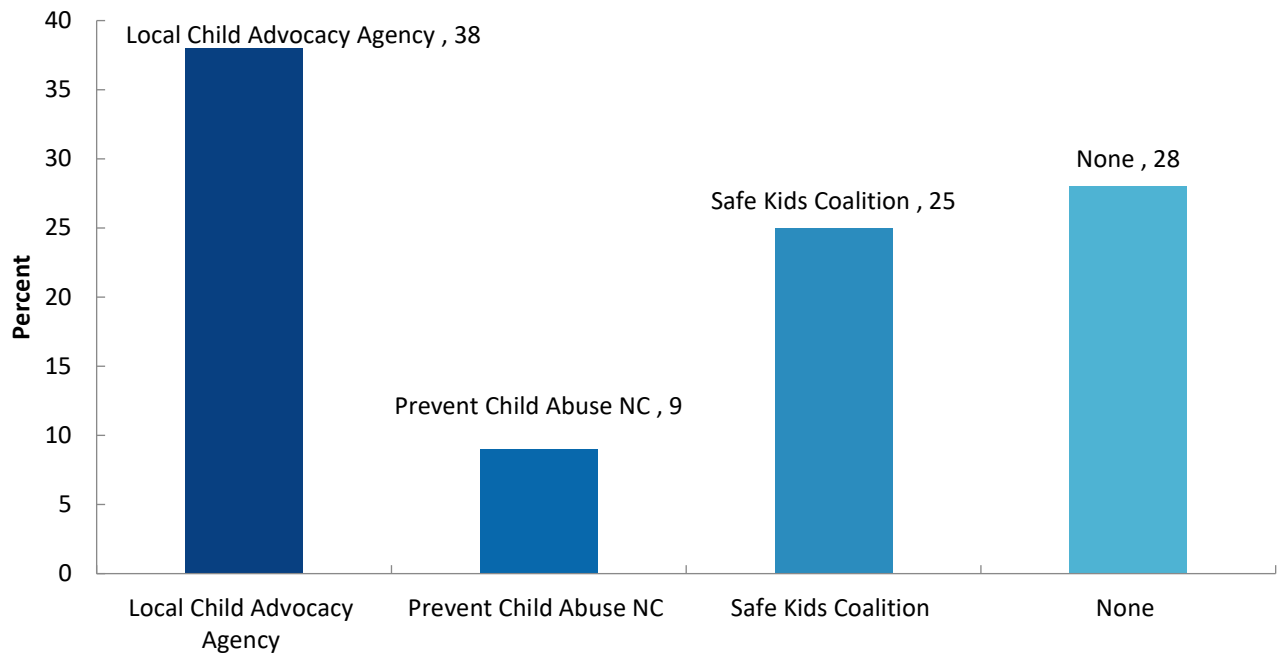
	Vacant	Never	Rarely	Occasionally	Frequently	Every meeting	Attendance
DSS Director	4%	9%	12%	11%	24%	40%	75%
DSS Staff member		1%	1%	8%	8%	82%	98%
Law Enforcement	1%	11%	14%	15%	24%	35%	74%
District Attorney	18%	22%	21%	17%	11%	11%	39%

Community action agency director	20%	8%	9%	18%	19%	26%	63%
School superintendent	6%	7%	10%	17%	29%	31%	77%
County board of social services member	24%	5%	12%	9%	22%	28%	59%
Mental Health professional	9%	3%	6%	22%	27%	33%	82%
Local guardian ad litem coordinator	7%	8%	9%	21%	25%	30%	76%
Director of local department of public health	2%	7%	7%	8%	21%	55%	84%
Health care provider	8%	6%	13%	6%	24%	43%	73%
EMS or Firefighter	15%	10%	14%	13%	16%	32%	61%
District court judge	38%	21%	17%	11%	6%	7%	24%
County medical examiner	22%	26%	7%	13%	16%	16%	45%
Representative of local childcare facility or Head Start program	30%	12%	9%	14%	19%	16%	49%
Parent of a child who died before reaching the child's 18th birthday	58%	13%	10%	3%	9%	7%	19%

Local CFPT Collaboration

Since LCFPTs are made up of multidisciplinary members, various perspectives exist from a variety of different work settings and disciplines. LCFPTs were asked who, outside of team members, were community partners the team collaborated with during 2023. Results shown in Chart 3.

Chart 3: LCFPT Collaborative Partners



Community partnerships noted among 'Other,' totaling 72 responses, include:

- County Justices Services Dept.
- Cone health system
- Council on Adolescents
- DSS Medicaid -- economic services
- Daymark Recovery Services
- Domestic violence shelter (Steps to Hope)
- East Carolina Injury Prevention Program
- Help, Inc.
- Hopeline
- Iredell County Partnership for Young Children
- Juvenile Justice
- Local Counseling Service
- Local Domestic Violence Shelter Advocate
- Local YMCA
- Office of Violence Prevention
- Partnership for Children
- Partnership for Health
- Safe Sleep NC
- Sandhills Opioid Consortium
- Smart Start/ Project Participant
- UNC Highway Safety Research
- Local Attorney
- Warren County Schools
- Worth Court - Human Trafficking

- YoungLives (Randolph County)
- Chatham Drug Free
- Cribs for Kids
- Daymark Director
- Eastpointe
- Former Sherriff
- Insight
- Latin-X Outreach Services
- Military Family Advocacy member
- North Carolina Partnership for Children & Smart Start
- Substance Use Disorder Coalition
- Trillium
- United Way
- Western Area Office of NC Dept. of Public Safety's Division of Juvenile Justice & Delinquency Prevention
- Albemarle Regional Overdose Prevention Coalition
- Family Connects Member
- Partners Behavioral Health
- Warren Family Institute
- Work First
- CCDSS Family Resource Center
- Coastal Women's Shelter
- No Wrong Door - Substance Abuse

Allocated Legislative Funds

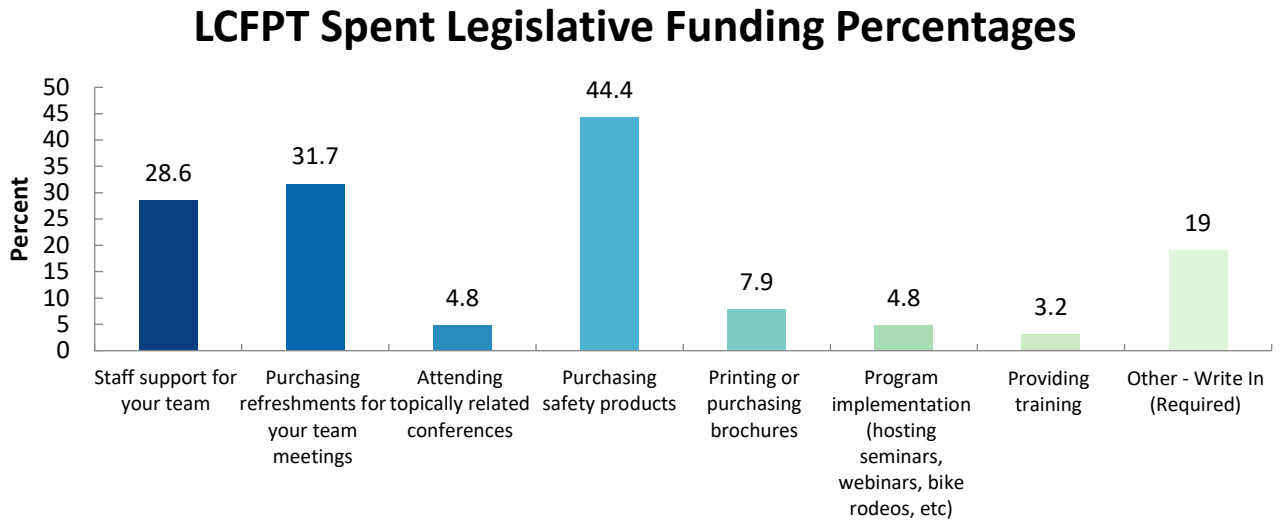
State funding to support LCFPTs is \$74,200 annually. Funding is allocated to LCFPTs to spend on operational costs. Funding is distributed through a formula to 84 counties, the additional 16 counties chose to eliminate their budgets in 2002 due to DPH funding cuts.

Of the responses to the 2023 activity summary, 65 counties reported having legislative funds, and 13 counties were unsure if their LCFPT received any funding for LCFPT functioning.

Funds Spent

The LCFPTs have certain guidelines they must follow regarding how they can use their funds. However, there is some flexibility, which allows local teams to determine what will be the best fit for their county's needs. Across the responses, the two most popular areas for spending were: staff support for the team and purchasing safety products. Of note, many LCFPTs use their funds in more than one way.

Chart 4: LCFPT Funds



Of the 12 (19%) counties who chose 'Other', responses included:

- Salary and mileage (two responses)
- Paper
- Swim lessons for foster children
- Purchase Pinwheels, buttons, posters, bracelets, and key rings to give away to community for child abuse prevention month
- Items for Child Abuse Awareness Month
- Gun Safety, bullying, Gang intervention
- Bike Helmets
- Not disclosed
- Not spent (three response)

CFPT Accomplishments and Activities

As we emerge from the challenging pandemic years and adapt to the ongoing epidemic, many individuals serving on LCFPTs are still engaged with additional responsibilities in addition to the regular job duties, on top of serving on this voluntary team. Despite those challenges, there remains an abundance of accomplishments noted by LCFPTs. Chart 5 highlights categories of accomplishments shared.

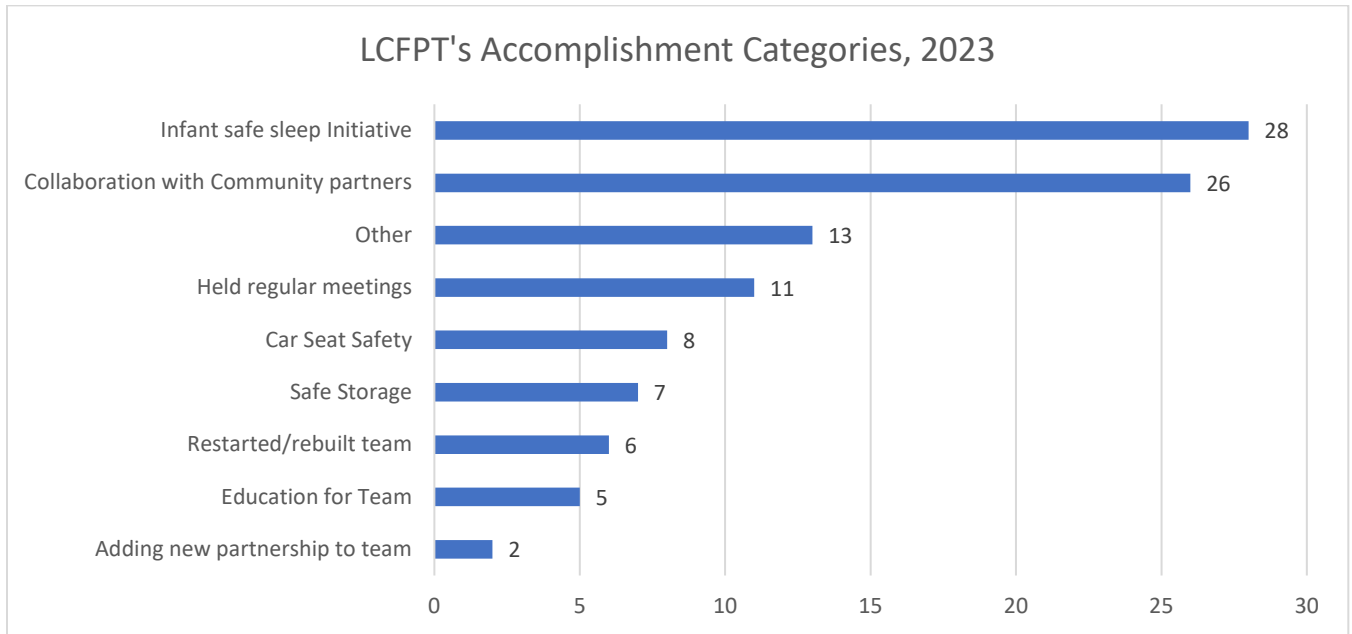
Abundant 'Other' category included:

- Addressed backlog/pending case reviews
- Restarted/rebuilt team
- Topic focus: ATV safety; fire safety; poison prevention; choking hazards
- workgroup for recommendation actions

- Created Fentanyl Task Force for the county
- Coordination with military
- Coordination/advocacy for Medical Examiner regional office

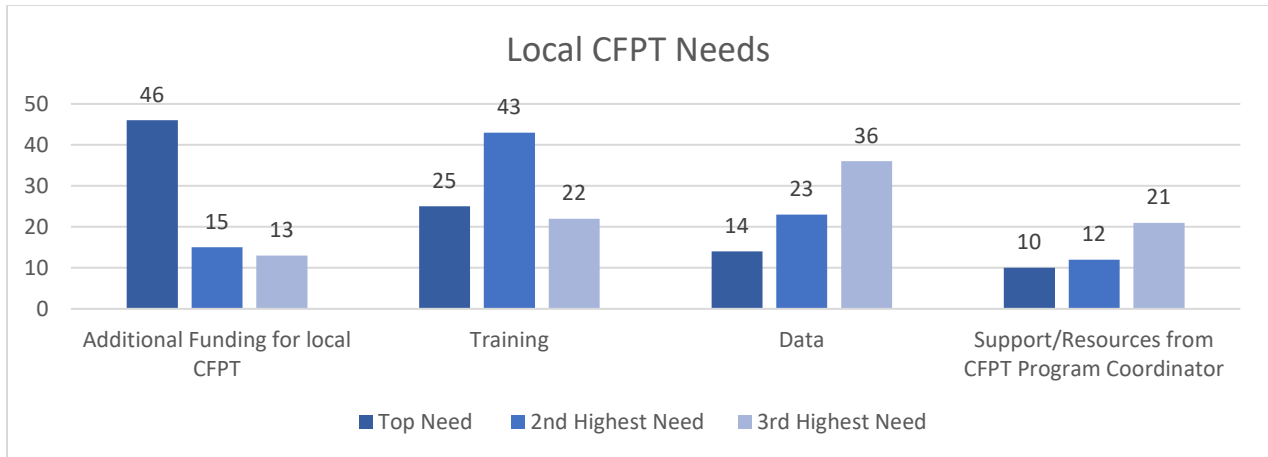
Specifics of shared accomplishments can be found in Appendix A.

Chart 5: 2023 Noted LCFPT Accomplishments



Team Needs

Teams ranked topics based on their LCFPT’s needs. Provided topics included: Additional funding for local CFPT, Training, Data, Support/resources from CFPT Program Coordinator, as well as three options for open responses. Of responses, 25% ranked ‘Training’ as their top or second highest area of need, compared to 65% last year. A majority of respondents did note ‘Additional Funding for CFPT’ as the top need.



Of the write-in responses, respondents offered the following needs

- Appointment of local ME designee
- Comparisons of data
- Education from medical studies done
- Compliant membership
- Information sharing from OCME and trends
- Law Enforcement Cooperation
- Support from CCPT regarding DSS roles
- Services/resources for foster care placements

Training Needs

Ongoing training keeps LCFPTs updated on current policies, procedures, and best practices; highlight specific areas of interest and need; and provide information gained to be used during child fatality reviews when creating fatality prevention activities.

Among past annual activity summary surveys, respondents were asked to rank a set group of training topics. Last year, the 2022 annual activity survey asked respondents to identify at least one specific training topic the team would benefit from. Following that trend, topics noted are included below. Some respondents noted more than one topic. These topics included:

- CDR Report Form & National Child Fatality Data System 101 Basics
- Recruitment of members
- Substance use and training specific to Fentanyl use -- Fentanyl overdose & near misses/data and trends
- Statewide/national trends
- Cases review with sample system issues: How to better determine/identify the system issue
- Substance Affected Infants
- Better communication between counties to share data

- Swimming Child Safety
- Ways to put changes into action based on identified system problems
- Writing recommendations
- Suicide prevention
- Actionable items to meet obtainable goals
- Substance abuse in teens
- Surveillance/Data
- Social Determinants of Health
- Mental health options
- Overdose prevention
- Interpreting Child Injury Data
- Medication Stored Securely
- Benchmarks Trauma Training
- Becoming more organized and getting all the players to the table consistently
- When is an autopsy required and why?
- Safe Sleep subject expert - what else can we do?
- Evidence-based training for team. How do we change the safe sleep / SUD trends
- Responsible caretakers (i.e., having someone as designated 'sober' person in home to care for child(ren))
- How to successfully run a CFPT meeting/ structure of meetings
- Mock team fatality review
- Recruitment
- Training for new coordinator
- Transitioning to new protocols with the changes based on legislation
- How to "carry out" recommendations for changes identified by the CFPT
- Initiatives taken by other teams - would be good to get ideas of what other teams are doing
- Pediatric Mental Health
- Ways to promote better prenatal care
- Basic training on roles of each team
- Making the most of a child fatality review
- Acquiring medical records
- Purpose and how the team should function
- Perinatal conditions leading to prematurity
- Attendance strategies
- Human trafficking
- Effects on mental health
- RSV information & prevention
- Gun safety
- How ME determines SIDS as related to cause of death

- Generational trauma, psychology behind neglect/abuse behaviors
- Car seat/seat belt education
- Involuntary placements
- Team member retention
- Handling out of state deaths
- How to engage members/encourage participation
- MDTs related to childhood intervention
- Training new members on how CFPT meetings are conducted and what is included
- Hospital visits for non-fatalities
- Opioids/Substance Abuse Children Families
- Training on how our recommendations are utilized
- Systematic Issues
- Grant/financial resources to apply for
- Appointing members
- Collaborative partnerships
- Medical Terminology typically utilized in ME reports

These specific training needs will be used to plan upcoming years' training for LCFPTs.

Improvements

The state-level Child Fatality Prevention System continually strives for improvement. Since LCFPTs make up one branch of this system, they were asked for suggestions related to the CFPT review process. Of those who responded, the following suggestions were offered:

- Training
 - Invite the Chief Medical Examiner as a Speaker to the meeting. It will assist the group with clarifying/understanding death causes, such as undetermined.
 - More training for law enforcement
 - Make sure everyone has adequate training
 - Provide training insight from state level to local team 1-2x/year.
 -
- Data
 - Statewide data from CFPTs in aggregate form. As well as comparison between other CFPTs within the same region.
 - Receive data quarterly.
 - We would like statewide and local data to review annually on CF trainings.
- Membership
 - Bringing more attention to the program to raise attendance at meetings

- It is incredibly hard to find a member that is a parent of someone who lost a child. I wish this could be revisited, as this process and team can be very traumatic for a parent.
- A lot of counties are now combined (Public Health and DSS) and are called Health and Human services. The team requirements may need to be reviewed. For example, a DSS Board member would now become HHS board member. Also, review the need for a parent on the team. Multiple concerns for confidentiality but also trauma for the parents.
- Partnership
 - Understanding our local court process/DSS and how it/they works together in regards to children and custody issues could be helpful. We have had several reviews where this process was not understood by those not in DSS or judicial realm.
 - Partnership with the military child fatality reviews to create a more comprehensive review and recommendations
- Report forms
 - Streamline process for submitting individual reviews rather than submitting each review one by one through email
 - Change the confidential report format from a fillable pdf to a HIPAA-compliant survey format. This would streamline the process on both the local and state side.
- Funding
 - Funding for the teams to make a measurable difference in the community
 - CCPT does not provide any additional funding to put towards the teams efforts
- Receiving records
 - We have a hard time getting records at times. Ideas on making it more important for folks to send
 - Out of state records
 - Out of state records are difficult to obtain, especially when no hospital name is listed on the death certificate. This information would provide an excellent source of information and a starting place for the Review Coordinator to begin sending off for records.
 - Would benefit from receiving out-of-state medical examiner reports.
- Lists of statewide resources for addressing system problems (we can brainstorm ideas but unsure how to make the ideas a reality.)
- It is difficult to get through all the fatality reviews in a timely manner when we have just under 30 per year and an increasing number of them are complex (e.g., suicide, overdose, fatal gunshot injuries, unsafe sleep) and lead to long conversations. We could benefit from tips on how to review them in an efficient but effective way
- Assist in clarifying reviews that may cross county lines
- We would like more information regarding changes made at the state level as a result of local CFPT recommendations

- Need additional information on non-fatalities hospital visits. What are we to do with the information given?
- Make it more streamlined, less reviewers needed, less meeting required if no deaths (only meet if a death occurred in that quarter)
- More community resources to distribute
- We would like the state to give us the reason why a case is sent to us delayed explaining to the team

Response on New Legislation for Child Fatality Prevention System

Given the recent passing of new legislation impacting the child fatality prevention system. Respondents were asked how they felt about the process. Over half, 53%, noted feelings of excitement and nerves about the changes. Almost a third noted being excited about the changes to come, while 14% noted feelings of being overwhelmed by the perceived changes. Of importance, six respondents noted not being aware of the proposed changes. Those counties have received additional communication from the state coordinator to ensure they are abreast of the changes to come.

Summary:

This 2023 report of responses from the Activity Summary Surveys provides an overview of the happenings, challenges, accomplishments, and future aspirations for the local child fatality prevention teams (LCFPTs).

All 100 LCFPTs submitted completed Activity Summary Surveys! With a requirement to meet at least quarterly, 80% of LCFPTs reported meeting at least four times during 2023. Meetings were primarily held in person, 58% across the noted 452 total meetings. Teams are also almost all established and meet regularly. In terms of membership on the LCFPT, parents of a child who died before their 18th birthday had the highest vacancy rate at 58% while 82% of responding counties noted having DSS staff members attend every meeting along with 55% having the director of the local department of public health also attending every meeting. While not all LCFPTs receive legislative funding, those that do use the funding primarily for purchasing safety products, followed by purchasing refreshments and staff support. Of note, many LCFPTs use their funds in more than one way.

In addition to helping children and families in their communities, Teams also identified their greatest needs in anticipated work for the next calendar year. 'Additional Funding' was noted as a top area of need for among counties with 'Training' and 'Data' noted as second or third needs. Suggested training topics by respondents included over 60 topics which will be used as a guide when drafting new opportunities.

The Activity Summary is a crucial way for the Local Child Fatality Prevention Team Coordinator to better understand the happenings. As was done in the past, the survey will be adapted as needed annually to better understand the best ways to support each LCFPT across North Carolina. Overall, this report serves as an example of the variety of ways that the LCFPTs worked together to help provide meaningful impacts to reduce child fatalities in their communities.

Appendix A

Specifics of shared LCFPT accomplishments can be found below:

- CFPT was able to meet in-person to resolve COVID case review backlog. Meetings included excellent technical assistance review by State CFPT Coordinator Kerry Young.
- A possible initiative with county govt employees to eat lunch with students and engage with students who may be struggling with school or homelife issues.
- Our team successfully resumed following the previous health department district splitting up. New team members were recruited, and meetings are now held on a regular schedule.
- County Health and Human Services continues to work with community partners, health department care management staff, WIC, and County Health Department Dental Clinic and Trillium to reduce child health disparities by providing education and child health preventative and primary care. CMARC and CMHRP promote safe sleep by providing pack-n-plays to families as part of the safe sleep initiative. The health department partners with Smart Start to provide car seat safety education.
- Training CFPT team members on Water Safety, sharing resources via social media outlets and school newsletters; Safe Sleep Training for team; Fire & Burn Safety training for team.
- The County CFPT team had four meetings during the calendar 2023 year. The meetings were held on 2/24/2023, 6/30/2023, 8/25/2023, and 11/17/2023. Team members were given the option to attend meetings in person or virtually. Five child fatalities were reviewed during the 2023 calendar year. County CFPT focus discussion for 2023 was Suicide Prevention and Mental Health Resources.
- We had some guest speakers at one of our quarterly meetings that was very beneficial to the group.
- Safe Sleep education was provided to law enforcement, social workers, fire department, parents, foster parents, community members, and public health. Partnership with local EMS to provide safe sleep education and resources to families served by organizations across the County. The team partnered with local Latinx programs to enhance communication and service delivery to Spanish-speaking individuals. The team collaborated with Partners Health Management, the local Controlled Substances Coalition, the Opioid Settlement team, and local service providers to explore expanding local substance use disorder services for youth.
- County worked with the school system, fire departments, local medical providers offices, and the fire marshal to address fire safety in homes. We also discussed the importance of frequent testing of smoke detectors.
- Had seminar with NC Child Death Investigator to learn more about common causes of child fatalities. Communicated with the local YMCA to try to start a program with the local schools to teach young children how to swim to prevent drowning.
- Our CFPT was able to meet in person for the entire year and review all cases that were pending. Our team is committed to addressing mental health among adolescents in our community.
- Through the review process, the local Child Fatality Prevention Team identified a couple of needs - the need for mandated reporting protocols between health care workers, social workers, and law enforcement, and the need for extra counseling for the decedent's family members. The County Child Fatality Prevention Team also had a very educational meeting in November on early pregnancy, pregnancy risks, and various pregnancy outcomes.
- Members of the team 1. Completed Child Protection Services training on Wednesday, January 24. 2. The County Health Department became a designated Safe Surrender location. An infant up to 30

days old may be given to a designated safe person, legally and anonymously. 3. Continued to offer Back to Sleep education to parents/caregivers during prenatal and pediatric visits, also to other facilities and caregivers/parents in surrounding counties. 4. The Safe Sleep Program with the Pack-n-Play and car seats along with the training is offered at the Health Department. 5. Positive Parenting Program (Triple P) training offered throughout County. 6. The Breast-Feeding Peer Counselor Program/breast feeding support is offered in the county.

- Four meetings in 2023, most were a combination of zoom and in-person meetings. We focused on resources for suicide prevention and mental health resources. We discussed the overdose prevention coalition and received updates on this. We discussed getting gun locks into the hands of people that need them, this went along with gun safety that we also discussed. Cyber bullying was also discussed as it is growing in schools. Discussed ways to develop new projects.
- Accepted as one of 3 counties for the Safe Sleep NC Pilot Initiative.
- Our county continues to work closely with County DSS, EMS, and Pediatrics practice regarding our cases. We continue to brainstorm as a team to ensure that the children of our county are at their healthiest and safest. Any trainings that have been offered by the state CFPT continued to be passed on to all team members.
- Triple P Parenting presentation w/brochures for community hand-out.
- We were able to fill several vacant positions. Member attendance and participation have increased due to filling vacant positions. Seven Pack-n-Plays were distributed along with safe sleep education.
- The team is established and meets regularly. We continued to work on Suicide Prevention and Mental Health Resources and also focused on the distribution of medication lock boxes within the community and provided information related to Mental Health to all principals, guidance counselors, and social workers in our local school system. We also continue to work with the Albemarle Overdose Prevention Coalition.
- We distributed gun locks at community events that were provided by Trillium and ARHS. When community events are attended, we share information such as safe sleep, mental health resources, immunization needs according to age, Triple P information and other pertinent information. We try to focus our outreach around our focus areas of suicide prevention, mental health and ATV safety. Trillium continues to share training and other resources for our partners. Suicide Prevention, ATV Safety and Mental Health were the focus areas. We continue to share training and resources among the group to further knowledge on each of the topics. ECU Health Bertie is helpful with providing any data that they have on ER visits related to our strategies. Each member shares occasional social media posts regarding these issues as well. With continued education and shared resources, we hope to reach our community with these health and safety topics.
- MCHD had a Family Day in July 2023 for families to come out for different booths, play centers, and firetrucks. There were packs and plays given away to approximately 30 families to promote safe sleep. There is another Family Day scheduled for August 2024.
- During 2023, CFPT conducted five meetings reviewing 23 child deaths identifying system issues and making prevention recommendations to the state CFPT coordinator. CFPT meetings were held via zoom, were very effective with excellent attendance and participation by team members. During 2023, CFPT members displayed intense dedication evaluating childhood deaths attempting to identify causes and associated preventative system problems. Individual reports were completed on child deaths reviewed by the team and forwarded to the state coordinator. Completed one intensive child death review with system issues and prevention recommendations forwarded to the state

coordinator. Annual reports were written and presented to the county Board of Commissioners and County Board of Health.

- In 2023, our team was able to utilize Agreement Addenda funding toward the purchase of Pack n' Plays. We partnered with the Iredell County Partnership for Young Children to host two Safe Sleep training courses for families in need. Upon completion of the training, families received a Pack n' Play along with other safe sleep information and community resources.
- Collaboration with Safe Kids; Representative from Safe Kids will now serve on CFPT Committee.
- CFPT is making a great effort to rebuild our team and expand efforts to continue to serve the community.
- Able to meet again due to Covid and lack of staff was a big achievement.
- The team identified water safety as a need and Early Head Start funded water safety classes over the summer.
- We work well with community partners.
- Advocated and held County training on drug myths specifically to address education on Fentanyl.
- Made efforts to re-convene and review our processes after losing members due to retirement, resignations, etc. Kerry Young worked closely and even attended our last meeting to review the process with us.
- Having regular meetings with the majority of required members present. Moving back to in-person meetings only. In-person meetings allow for better collaboration and participation among members.
- Re-established team during 2023 and met three times. OASIS presentation to team.
- Our Team continued to utilize social media to inform parents/grandparents about child safety issues. Prevention activities, social media posts, school bus safety, drowning prevention, hot cars and child deaths, and safe sleep. Utilized social media to feature a series of poison prevention posts to promote and increase awareness regarding poison prevention. Gun safety locks were made available for distribution at the Health Department. A car seat safety check event was held in October at the Health Department. Outcome: 29 car safety seat inspections were performed by 4 car safety seat technicians.
- Distributed Safe Sleep education/information to CFPT members, medical providers in the county, DSS staff, and Health Department Staff on the importance of educating the community about Safe Sleep practices. Hosted Sesame Street in Communities training for CFPT members.
- MCPH advocating for more School Nurse positions (1 per school) 2. Program for Progress-participating in the HOP Pilot which has been wildly successful 3. DSS - Medicaid expansion – has potential for increase of 3,000 slots for 19-64. 4. VAYA – LME is applying for Medicaid Child and Specialist provider for state 5. Sheriff Dept- Blue Buddies- SRO's and deputies partner with at risk children and eat lunch one or two times a week and do a check in. 6. EMS- became a site for CTE program for Franklin High School 7. CMARC/CMHRP – continue to do safe sleep training and Car Seat Safety and offer car seats and Pack n' Plays.
- Met regularly. Had State monitoring visit and all went well.
- County Team has an event for Child Abuse Prevention Month in April. We partner with local agencies and community partners and invite and encourage Warren County residents to participate in the event. The team provides items to give away to residents and volunteers. Team planted pinwheels at different locations throughout the county. Team and county agencies participated in Wear Blue day and sent out information on social media accounts and in the local newspapers.

- Four meetings in 2023, all were in combination of zoom and in person meetings. We continued our focus on resources for Suicide Prevention/Mental Health and Vaping. The county Prevention Coalition gave us valuable resources. The Gates County School District did get in place Mental Health services for students to be seen during school times with a provider on site. The program was thriving with over 40 students mid-year, and in the future they hope to expand the number of students they can accommodate by getting more providers. County School District sent out valuable fliers and pamphlets to students during the year on Mental Health/Vaping and Suicide. The county School System reports success with the HAOLs placed at the High school to detect Vaping in progress. The ordinance established for vaping/tobacco usage on school property to have mandatory cessation classes and suspension of student from school. The cessation classes have been a hit with the students in decreasing vaping. We also had a Safe Haven Baby Box installed at County Rescue. One Child Fatality was to be reviewed 11/23 but was tabled and was reviewed 01/2024.
- We have been having a tough time just keeping members. Not a lot of accomplishments that go beyond.
- CFPT team met with the organizer of NC Kids to determine if this was something that could benefit our community. Without any financial resources, this team struggles to achieve measurable results with regard to focus topics. We support every agency and effort to advance the community's knowledge about suicide prevention and mental health resources.
- During the calendar year 2023, our team worked with members at the Health Department to promote child safety digital graphics and information through the department Facebook. These posts were derived from emails received from state partners as well as topics identified during meetings that were of key importance for our community.
- Turnover from DSS serving as chair and host to local health department serving as chair and host.
- After COVID, our team was able to re-connect with seasoned members and add new members. We started meeting on a scheduled basis. Attended the CFPT regional meeting in February 2023. Participated in our county's child abuse prevention activities in April. Secured a safe sleep display that can be set up at our various agencies.
- Our County CCPT has continued to have good attendance and participation in 2023. We have continued to allow members to participate virtually to encourage good attendance. The average meeting attendance is 10 members at each meeting. The team provides input on cases presented and helps to identify deficiencies in child welfare services in our community so that our community's resources are best utilized to serve the children and families. In 2023, our Community Child Protection Team reviewed 8 cases involving approximately 15 children. In 2023, the Clay County Health and Human Services Agency (DSS) received approximately 145 child protective services reports of abuse, neglect, and/or dependency and completed 105 child protective services assessments/investigations. County HHSA/DSS has an average of eight open In-Home services cases in which a social worker assists the family to address identified issues without removing the children from their own home. There are currently 24 children in the legal custody of County HHSA/DSS and four foster youth in the 18/21 program. The team has identified that the three most common areas leading to child maltreatment in the county during 2023 were: substance abuse by the parents, mental health issues of the parents and children, deficiencies in life skills by the parents (lack of housing, lack of transportation, unemployment, lack of budgeting skills, etc. In many of these cases, it was found that the parent's support network was either negative or lacking altogether. The team

identified the top three recommendations for improving child welfare services at the state and local level. These recommendations include: Lack of appropriate placements for children, especially those with high acuity (i.e., behaviors/mental health needs), access to better quality Mental Health/Substance Abuse Services offered for adults (especially with no insurance), and improved access to In-Home Parenting Programs for families with children older than five years old. During 2023 the CCPT continued to partner with community organizations to umbrella the TEAM LED/Peer Support program under the CCPT. The TEAM LED/Peer Support program is a grant funded program that was developed by the County Health Department and Sheriff's Department. The TEAM LED program is a diversion program where law enforcement can choose to refer someone who is about to be arrested for minor crimes (theft, possession etc.) to a Peer Support Specialist instead of being charged and arrested. The program also allows for Community referrals to the Peer Support Specialist as well. The grant for this program ended in August of 2023, although the diversion grant has ended it was instrumental in the hiring of peer support specialists at local Appalachian Mountain Health Centers and this is still a resource available for our community. In 2023, the County CCPT continued with the Early Intervention Team, which is a sub-committee of the CCPT. The Early Intervention Team consists of Department of Juvenile Justice, Mental Health providers, County Community for Students, County school personnel, Department of Social Services, and our local court system to address excessive school absences for children in the County school system. In addition to preventing excessive school absences, The Early Intervention Team was created in hopes of identifying families in need of services and providing intervention early to address the needs. During the meetings with the parents, the Early Intervention Team stresses the importance of school attendance, develops a plan with the parents to address the issues that created the truancy, and discusses with the parents potential legal consequences of their children continuing to be truant. These meetings are continuing to be held on a monthly basis during the school year and there has been good attendance by parents.

- Gun locks were given out to county departments that needed them. Gun locks were presented to several families that did not have one with children inside the home. Tyrrell County Schools held a Substance Abuse Informational night discussing the new THC Gummies and how they can look like popular candy and treats that children are used to seeing. The informational session brought awareness and shined light on a situation that needed to be addressed within our school system.
- Collaboration with local agencies to support and promote Prevent Child Abuse Prevention Month in April. We put out signage and pinwheels across the county in various locations.
- Reviewed all fatalities from previous year. Provided recommendations to state.
- No accomplishments that go beyond requirements.
- Established workgroups that use CFPT recommendations for tactical approaches to problems found during reviews.
- Provided car seats to community members in need and have gun locks in stock to provide to clients.
- Duplin County accomplished promoting safe sleep within the county. There were 8 Pack n' Plays purchased in 2023 with Child Fatality funds. County Health Department was awarded a Dr. Ann F Wolfe Endowment Mini-Grant which allowed the county to purchase an additional 70 Pack n' Plays in 2023. There were 38 Pack n' Plays distributed in 2023 to County families in need. Each Pack n' Play includes a sleep sack, fitted sheet, pacifier, and education materials in English and Spanish from the Crib for Kids' Program. The target population is Medicaid, uninsured, and low in-come families with infants under 12 months, and/or pregnant women living in the county. The goal is to decrease infant

mortality and provide medical providers with education about the importance of Safe Sleep. Clients can be referred by DSS and Health Department case managers who work with at-risk families with young children and pregnant women.

- The County Child Fatality Prevention Team, a sub-committee of the County Child Protection Team, meets quarterly during the year. It is during these meetings that team members review child fatalities that occurred the previous year, determine if there were any system problems that caused or contributed to the fatality, make any recommendations, or develop action plans to address the area of concern. These findings are reported to the Team Coordinator in the Children and Youth Branch within the North Carolina Division of Public Health. We continue to check and install car seats. We are continuously looking for grants to continue providing car seats to those in need in our county.
- The team participated in April Child Abuse Prevention Month and this year the team focused on Safe Sleep. We did a media campaign on Facebook and handed material out to our patients in the clinic. We applied for a small grant to purchase Pack n' Play. Members had the opportunity to view various online training courses offered through the Office of the Medical Examiner on topics specifically related to the CFPT team. Reviewed data around injuries with CFPT team.
- Gun lock purchases and distribution.
- Worked with schools/local substance abuse prevention team to increase awareness of fentanyl laced drugs/symptoms of poisoning.
- We distributed safe sleep information and gave bassinets to parents that were co-sleeping. We also received gun safety locks from our local sheriff's department to give to parents that didn't have gun safety locks.
- Completion and distribution of referral form listing support agencies for sudden child demise Attended YMAC summer camp with show and tell instructional CPR (hands only) for appropriate aged children, water safety, when/how to activate 911 Participated in Kids Expo at local pediatrician office Participated at local community festival and fairs.
- As in the past, several of the County CFPT members are also active members of the Safe Kids Riverbend Coalition. As the county has had several safe sleep concerns in the past, Safe Kids Riverbend has added this as a focus area and increased community outreach and awareness. One of the MC CFPT partners, the MTW District Health Department, has written several grants and obtained financial donations which enabled them to purchase Pack n' Plays to be given to families with young children that did not have safe sleeping options available for their child. The parents/guardians were also given education related to safe sleep as well as other safety tips to protect their child(ren) at home, in the vehicle as well as out in the community.
- The team focused on Suicide Prevention and Behavioral Health Resources, Sleep Safety and ATV Safety. The team discussed ATV safety and getting information out to schools to distribute, pending approval. Trillium provided a website for resources related to Behavioral Health and Suicide Prevention. Kathleen Foreman provided website information for ATV safety and contacted local newspaper to possibly have an article in the local newspaper, but we did not get a response. Several CFPT members volunteered at the Potato Festival in collaboration with community partners. The local health department distributed lock boxes to store meds, covid test kits and program brochures of programs available to the community.
- Accomplishments for the Jones County CFPT for calendar year 2023 include supporting the Health Department's decision to purchase a car seat simulator to better enhance the Child Passenger Seat

program. This simulator would allow the certified Car Seat Installer to demonstrate installation in a safer atmosphere while providing clearer instructions and training for clients receiving car seats.

- County CFPT continues to offer education on car seat safety, choking hazards, and SIDs and safe sleep practices in our community.
- Grew car seat safety check program and led educational campaign, recognizing vehicle accidents as one of leading causes of death among youth in Chatham. Initiated childbirth classes, developed and disseminated safe sleep materials, strategized around driver safety education, including coordinating with Safe Kids and UNC Highway Safety Research Hosted CFPT Program Coordinator to finetune CFPT review process.
- Safe Sleep display & Cannabis Edibles Flyer campaign based on CFPT trends.
- The Child Fatality Team and Child Protection Team have partnered to help reduce parents co-sleeping with their children. Child Fatality funds were used to purchase Pack n' Plays and bedside bassinets. Child fatality chair along with the Child service coordinators are working in conjunction with the families to educate about co-sleeping with their children. If there is a need, a form is filled out and submitted to the Child Fatality Chair and then the social worker makes sure the parent receives either a Pack 'n Play or bassinet.
- Developing QR codes for health and community related services. Funds availability for the purchase of car seats and Pack n' Plays. Community Awareness for the availability of swimming instruction.
- Collaborated/Participated in Be Well Event hosted by DSS to recognize Child Abuse Prevention Month Planning meeting/discussion in regard to Medicaid Expansion Team discussed better ways to support the mental health of Spanish-speaking communities, partnering with Alliance (LME).
- Reviewed fatalities at bi-monthly meetings, held an intensive review of one fatality assisted by rep from Raleigh.
- County Health Department applied for and was granted additional funding to purchase 50 Pack n' Play units to distribute to those who do not have a safe place for babies to sleep. 2. DSS and the Sherrif's Department partnered to provide Mandatory Reporting training to school staff in our county.
- In November 2023, the team requested and received education from representatives with YoungLives of Randolph County, Dr. Kathleen Riley, and Heather Voncannon. This community resource is a teen mentorship program that focuses on parenting education for teens, providing community resources, safe sleep education, basic CPR classes and more. The Child Fatality Team Coordinator also requested a Safe Sleep Educational kit which includes retractable table top displays of key safe sleep messaging (English/Spanish), Pack n' Play/doll display from Cribs for Kids and 30 board books emphasizing safe sleep. The Safe Sleep Educational kit was requested at the end of September 2023. Due to some funding issues, Randolph and a few other counties will not receive their kits until 2024. The Safe Sleep Educational kit will be used to teach staff, community partners and CFPT members to learn how to create a safe sleep environment for infants up to 12 months of age and reduce the risk of SIDS. The CFPT will continue to seek and obtain education in SIDS and Safe Sleep for children in 2024 since this continues to be an ongoing issue that needs to be addressed. The team will continue to address any unsafe sleep conditions by making Pack n Play portable cribs available along with safe sleep education through printed flyers, and the Books for Babies Program in partnership with the county Partnership for Children and county Health.
- Through our diligent review, we were able to successfully send one case back to law enforcement for additional review that led to a child abuse and homicide charge earlier this month. We were also

able to partner with other local agencies to provide them with the Safe Sleep kit we received to use at their resource fairs.

- Recommended community Training - Underage drinking, Safe sleep Prenatal and perinatal Health Care Access Options.
- Our Team participated in the Smart Start Day. Our team along with partners UNC Health Southeastern and Robeson County DSS/Sparc provided a booth with activities for participants to gain knowledge regarding Safe Sleep. Items were provided for education and guidance on providing safe sleep for children. We also had a drawing, where active participants with children under the age of 12 months could win a safe sleep alternative bedding (Pack n' Play). Materials for safe sleep and substance affected infants were also available and provided to participants.
- Requested and received Safe Sleep Toolkit. Our county HD agreed to be one of three pilot counties for NC Safe Sleep Project to collaborate with community members to reduce unsafe sleep behaviors.
- Our team participated in multiple community events, National Night Out and Kids Fest. Both events highlight community engagement and safety. We also purchased Pack n' Plays to promote safe sleep.
- Planned child abuse awareness and prevention event for April 2023. Due to inclement weather this event had to be rescheduled more than once. Has been rescheduled for April 2024.
- Continue efforts on safe sleep.
- Blended CFPT and CCPT team successfully met in person nine times during 2023. There continue to be issues with co-sleeping and unsafe sleep conditions in county despite teaching efforts by DSS, CCHD, Atrium Health, PCP, and social media posts. Team also discussed processes that are currently in place for police making DSS reports when there is a child death and other siblings living in the home. 1. Hannah Moore with City of Shelby Police Dept shared information with everyone at police dept regarding reporting to DSS. 2. Continued efforts to provide community education regarding safe sleep by local pediatrician's, CMARC, Health Department, Atrium Health, and DSS. 3. Bailey Caudle shared safe sleep info again on the Facebook and Instagram pages at County Health Department. 4. Terre Bullock added safe sleep brochures to the packets they give to parents at the Children's Advocacy Center.
- Meeting regularly, no child fatality cases but discussed child safety issues.
- Our county had a major backlog in reports from ME which caused us to not have all pertinent details regarding child's death. We educated County Commissioners and legislators on this and were able to get a bill passed that has led to our county and a few others in the area receiving an ME office.
- The local CFPT recognizes that inadequate health insurance coverage is one of the largest barriers to health care access and unequal distribution of coverage contributes to disparities in health. Out-of-pocket medical costs may lead individuals to delay or forgo needed care such as doctor visits, dental care, and medications. Hence, the CFPT Chair arranged an in-service Medicaid training for team members to enrich their understanding of Medicaid benefits, protocols, and eligibility requirements, bridging gaps to ultimately enhance health care outcomes for children and families. The training provided valuable information and team members left with their questions addressed. A program monitoring visit was conducted by Kerry Young, Local Child Fatality Prevention Program Coordinator with the state. Due to the team's dedication, support, expertise, and consistency, positive results were achieved. The team received a commendation for its excellent work! The program coordinator expressed her gratitude to the team for allowing her to observe the procedures of the local CFPT meeting and emphasized the team's diligence in utilizing the CFPT resource page. A program

monitoring visit has not taken place from the state since August 2011. The mentioned outcome is evidence of the exceptional work carried out by the local CFPT.

- Sponsored and presented information at a well-attended and productive Community Conversation on Youth Suicide and Mental Health in May 2023 - Sponsored and helped with planning for a press briefing kickoff for the NC SAFE campaign in June 2023.
- The team held yard sales, met with representatives on areas that affect children in our community, participated in multiple events that are presented in our 2024 Report.
- We have a wonderful group that meets and discusses ways to reduce child deaths in our county. It's a great collaboration between DSS and the Health Department.
- We meet more frequently than is required and we review all preventable deaths instead of the minimum requirements.
- Initiated Fentanyl Task Force to discuss Fentanyl issues within our County. The Task Force has been transferred to the recently hired Opioid SUD Program Coordinator.
- We continue to promote and provide safe sleep education through PCHD's Cribs for Kids program. We continue to see a high number of infant deaths contributed to unsafe sleep, so the message is very important for our community.
- Participated in/Sponsored the County Infant Mortality Reduction Coalition (FCIMRC).
- Enhanced protocols developed by the military to better coordinate with the ED so children being seen for suicidal/mental health crises and medical conditions have all concerns addressed during discharge planning process and after care services are in place. Purchased safe sleep magnets and distributed in the community (2000 English and 750 in Spanish)- educational materials on safe sleep purchased to support magnets; Purchased 60 Pack n' Plays, 15 car seats, and strollers (number to be determined) for community partners including Family Connects , Worth Court human trafficking participants and Project Buckle Up; Revived EKG Community Education program with law enforcement (Educating Kids on Guns and Gangs); provided gun locks and locker mirrors to supplement school resource officer materials; continued to monitor School Code of Conduct compliance and provide hands-on support when there is need - we have seen a great decrease on the out of compliance areas since this is in place; educational materials (booklets, coloring books, book marks, pamphlets for the community (faith based programs, recreation and parks, mentoring programs and schools) on fire arm safety, bullying and internet safety. Purchased 25 Wearable blankets for Family Connects, Triple P and other early safe sleep programs.
- Stabilizing team for year 2024.
- Successfully held community events where we distributed over 800-gun locks to the community in partnership with the police department.