

**BALTIMORE CITY CHILD
FATALITY REVIEW TEAM
ANNUAL REPORT 2008**

Joshua M. Sharfstein, M.D., Chair
Shaonna Gorham, MS

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GENERAL INFORMATION

Membership and Leadership of Team

Chair: Joshua M. Sharfstein, M.D., Commissioner of Health
Baltimore City Health Department

Child Fatality Review (CFR) Staff

Dana Kaplin, MPH
Baltimore City Health Department

Shaonna Gorham, MS
Baltimore City Health Department

Membership and affiliations

Alisa Ames, MHS
Baltimore City Health Department

Jacquelyn Duval-Harvey, Ph.D.
Baltimore City Health Department

Donna Becker, RN, MSN
UMSOM, Center for Infant and Child Loss

Marci Himmel
Department of Social Services

Tiara Braxton
Office of the State's Attorney

Janet Hankin, Esq.
Office of the State's Attorney

Angela Burden, MA, RN
Baltimore Health Care Access

Dave Holzer
Baltimore City Department of Social Services

Anthony Czepik
Baltimore City Fire Department

A. Melissa Houston, M.D.
Baltimore City Health Department

Wendy Dechowitz
Baltimore Substance Abuse Systems, Inc.

Walter Jackson
Maryland Department of Juvenile Services

Rebecca Dineen
Baltimore City Health Department

Paul Kidd
Baltimore City Police Department

Julie Drake
Office of the State's Attorney

Theodore King, M.D.
Office of the Chief Medical Examiner

Caroline Fichtenberg, Ph.D.
Baltimore City Health Department

Layla Layman
Baltimore City Health Department

Kamala Green, MA
Mayor's Office for Children, Youth & Families

Jean Lewis
Mayor's Office of Criminal Justice

Karen Hardingham, RN
Baltimore Safe Kids

Elizabeth Parker, MHS
Baltimore City Health Department

Membership and affiliations (continued)

Elizabeth Poole
Baltimore City Health Department

Christopher Williams
Baltimore City Health Department

Stephanie Regenold, M.D., MPH
Baltimore City Health Department

Tanya Williams, Psy.D.
Baltimore City Public School System

Charles Shubin, M.D.
Mercy Family Care

Dan Wilson
Baltimore City Department of Social Services

Dorenzer Thomas, MSW
Baltimore Mental Health Systems, Inc.

Delmas Wood
Department of Juvenile Services

Donna Vincenti, M.D.
Office of the Chief Medical Examiner

Crystal Young, MSW
Baltimore City Department of Social Services

Harvey Webster
Baltimore City Fire Department

Meetings in 2008

CFR meetings are scheduled on the third Monday of each month. There were twelve meetings held in 2008.

Case Reviews

A total of fifty-nine fatality cases were reviewed in 2008. There were twenty-two homicide cases, twelve accident cases, two suicide cases, and twenty-three SUDI/SIDS/SUDC cases.

RECOMMENDATIONS AND ACTIONS: INFANT DEATHS

Recommendation 1: Gather information and conduct an analysis of sleep related deaths to inform policies and programming to prevent future infant deaths.

Actions: Conduct an analysis and produce a bi-monthly report of sleep related deaths with the goal of identifying the significant trends of the deaths.

The Baltimore City Health Department's Office of Epidemiology is developing a 2009 Community Health Survey. Safe Sleep questions will be included on the survey to gain an understanding of the communities' level of awareness and education on the ABCs of Safe Sleep (Alone, on the Back, in a Crib).

Recommendation 2: Educate medical and service providers about the high number of infant deaths in Baltimore related to an unsafe sleeping environment, so that they understand the extent of the problem and can provide patients with needed resources and education to decrease sleep related deaths.

Actions: As a part of the Baltimore City Health Department's Safe Sleep Initiative, the Safe Sleep Coordinator distributes educational materials (brochures and posters) and provides training to medical providers, home visiting professionals, Department of Social Service (DSS) personnel, public safety personnel, foster care parents, and other appropriate groups, to raise awareness and educate about infant safe sleep practices and free crib program.

A letter is sent to the hospital of birth notifying the Chair of Pediatrics when an infant born at that facility died due to unsafe sleep practices. We began sending letters to the birthing hospitals in 2007. As a result, many hospitals have increased their efforts to ensure mothers are educated on safe sleep practices before leaving the hospital.

Recommendation 3: Implement checks and balances that ensure DSS is notified of an infant's death to expedite an investigation of the home where the fatality occurred.

Actions: The Baltimore City Police Department (BCPD), the Office of the Chief Medical Examiner (OCME), and DSS are collaborating to ensure that all unexpected child deaths with siblings in the home are reported to DSS for investigation.

The Baltimore City Police child abuse detectives uniformly report all child deaths with other siblings at home directly to DSS intake specialists.

The OCME sends a Child Death Report directly to DSS.

DSS conducts an investigation immediately to ensure the safety of the other children in the home.

Recommendation 4: Strengthen the relationship between the Baltimore City Health Department (BCHD) and DSS.

Actions: CFR members met with Molly McGrath, Chief Operating Officer at DSS, to discuss strengthening the relationship between the two agencies. Several strategies have been implemented to increase the protection and support of vulnerable families. Two examples of these strategies are as follows: 1.) Two liaisons at DSS have been assigned to the BCHD's Maternal and Infant nursing program. The liaisons provide feedback on challenging situations within 24 hours of the request. 2.) The Safe Sleep Coordinator provides safe sleep training to the DSS staff and clients including case managers, foster care/kinship care parents, and teenage youth receiving services.

Recommendation 5: Identify more aggressive strategies to outreach and educate high-risk pregnant and post-partum women.

Actions: The BCHD's Maternal and Infant Care program collaborates with Baltimore Health Care Access (BHCA) and DSS. The Maternal and Infant Care program conducts targeted community outreach to women who have been identified as high risk. The Maternal and Infant Care staff works aggressively to locate all women and children who have been referred to the program by visiting their obstetrician and pediatrician. The staff also outreaches those women who have refused initial services from BHCA.

Recommendation 6: Provide protection to infants who are being cared for by a mother with an extensive history of DSS involvement. Support legislation that would implement a reporting system in Baltimore City to alert the appropriate agencies when a mother with a previous history of child removal for abuse or neglect gives birth to another child.

Actions: Written communication was sent to Secretary Brenda Donald, Department of Human Resources to express the Child Fatality Review Team's support and urgency of implementation of the Birth Match Process in Maryland.

RECOMMENDATIONS AND ACTIONS: ACCIDENTS

Recommendation 7: Educate the public on the importance of using booster seats for small children.

Actions: The BCHD featured 'booster seat safety' as a Prevention Wednesday message.

Written communication was submitted to Andres Alonso, Ed.D, CEO, Baltimore City Public School System, requesting his assistance in the distribution of a flyer on 'booster seat safety' to the parents of all first, second, and third grade students.

Recommendation 8: Educate the medical community about the Baltimore City Fire Department's (BCFD) program offering free smoke detectors to city residents.

Action: A letter was mailed to all pediatric providers to increase awareness of the free smoke detector program.

RECOMMENDATIONS AND ACTIONS: SCHOOL SYSTEM

Recommendation 9: Case reviews indicate the prevalence of truancy in the school records of victims and/or perpetrators of violent crimes. Determine whether policies and practices currently exist to reduce absenteeism among students.

Actions: A letter was mailed to the Director of Attendance and Truancy, Baltimore City Public School System (BCPSS) inquiring whether or not a protocol exists to outreach a child when s/he has a long absence from school.

The Office of Attendance and Truancy provides support and guidance to schools, parents, and students around the issue of attendance. Additional roles and responsibilities include: assisting families in identifying root cause and resolving issues that result in truancy and assist schools in identifying and resolving issues that result in truancy. There are several initiatives that assist in outreaching schools, parents, and students.

The BCPSS and Department of Juvenile Services (DJS) meet and share reports on attendance and truancy to decrease the number of youths who do not attend school and are not adhering to court ordered education mandates.

RECOMMENDATIONS AND ACTIONS: VICTIMS OF/OR PERPETRATORS OF VIOLENCE

Recommendation 10: Notify Court Masters when a youth under the care and supervision of their court dies or is prosecuted for 1st degree murder.

Actions: Letters are sent to Juvenile Court Masters when a fatality or perpetrator case is reviewed involving a juvenile under the court's care and supervision at the time an incident occurs. Highlighting the importance that children receive appropriate care and treatment in safe environments with adequate oversight, the letter invites the courts to consider reviewing procedures that the court might have done differently to prevent the death.

Recommendation 11: Make systems changes necessary to improve communication and the sharing of information between the adult and juvenile justice systems so that staff are able to make well-informed, appropriate recommendations on the disposition of each juvenile case.

Actions: In addition to receiving daily WATCH reports from the BCPD, DJS has a full-time employee stationed at the BCPD Watch Center. This person serves as the DJS point person to share information regarding juvenile arrest. The information is disseminated to DJS staff and the Court.

DJS has granted the Department of Public Safety “Violence Prevention Unit” access to the DJS automated youth system (i.e., ASSIST).

DJS receives daily reports from the Department of Public Safety “Pre-Trial Services” on all youth under age 21 arrested as an adult. The information is disseminated to DJS staff and the Court.

DJS has assigned a full-time Case Manager to the Baltimore City Detention Center (Juvenile Division) to facilitate releases, contacts, and juvenile case information on youth under 21 years of age that are arrested.

DJS is a regular participant in the BCPD Gun Stat meetings.