



## “The Review” Division of Child Fatality Review

### *GA Child Fatality Review Begins Surveillance for SUID Case Registry*

In August 2009, Georgia CFR was one of five state CFR programs selected by the Centers for Disease Control and Prevention (CDC) to participate in the Sudden Unexpected Infant Death (SUID) Case Registry Pilot Project. This pilot project will be in effect for three years, and will allow participating states to develop a case registry for all sudden unexpected infant deaths, using the web-based National Child Death Review Reporting System.

**Coroners:** Please start utilizing the SUIDI form to report all deaths to infants (younger than one year of age). For all deaths of children over the age of one, please use the older version of the coroner report form (page 1 only). The information in your SUIDI form should be submitted to CFR staff within 7 days of the death, and to your CFR Committee chair/designee.



**CFR Chairs and Designees:** Please note that the new CFR committee reporting form has many detailed questions regarding infant death circumstances. Coroners are asked to provide the CFR committee with investigative and family interview details reported on their SUIDI form, to assist the committee in completing the CFR report form. As per CFR policy, all infant and child deaths are to be reviewed and reported on the standardized form within 65 business days from the date of death.

Georgia CFR will offer specialized trainings in Spring 2010 for coroners, medical examiners, law enforcement and other CFR committee members to support the standardized work of data collection and reporting to the case registry. Trainings will be offered regionally for local CFR committees to learn the new forms required to complete a thorough and timely multidisciplinary case review on every unexpected infant death. Trainings will also cover the CFR trend data, county communication issues, and prevention plans. Training registration information with available dates and locations will be forwarded to committee chairs and members as soon as they become available..

If you have any questions or concerns about this case registry pilot project for sudden unexpected infant deaths, please call the CFR office at 404-656-4200.

### *2007-2008 CFR Annual Report Now Available*

The CFR Annual Report, detailing the causes and circumstances of child deaths reviewed in 2007 and 2008, is now available. This dual-year report will be emailed to all CFR committee members, as well as agency partners and child advocates working with CFR (due to budget constraints, print copies will not be provided). We encourage you to share this report with your colleagues and communities, and show them how to use these data to promote child death awareness and prevention.

Highlights from the Annual Report:

- Fire-related deaths continued to decline; there were fewer reviewed fire-related deaths than in previous years
- Motor vehicle-related deaths continued to be the leading cause of reviewed deaths; sudden unexplained infant deaths remained the second leading cause of reviewed deaths
- Firearms were the leading mechanism of reviewed suicide deaths; asphyxia and poisoning were also mechanisms used in reviewed suicides
- Hispanic females continued to have fewer fatalities than Hispanic males
- Over half of the child abuse/neglect deaths were among infants, a higher percentage than in 2006

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## *Policies in Georgia: HIPAA*

The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) contains rules and policies designed to protect health information, described as the Privacy Rule. The Privacy Rule is often problematic to many members of local CFR committees, in obtaining records for review. The following information is provided to assist you in understanding the HIPAA Privacy Rule and how this law affects the work of child death investigation, review and reporting.



Entities that must follow the Privacy Rule are called “covered entities”. These include health plans (including health insurance companies, HMOs and certain government programs that pay for health care), most health care providers (including most doctors, clinics, nursing homes, and pharmacies), and health care clearinghouses (which process health data into a standardized format). The information that is protected includes your conversations with doctors and providers, your medical records, billing information about you, and information in your insurer’s computer system. Under the Privacy Rule, protected information cannot be used or shared without your permission, prohibiting your health information to be shared with your employer, or for marketing or advertising purposes.

Certain organizations do NOT have to follow the Privacy Rule, including life insurers, many law enforcement agencies, and many state agencies like child protective services.

The HIPAA Privacy Rule recognizes the legitimate need for public health authorities and certain others to have access to protected health information for public health purposes and the importance of public health reporting by covered entities to identify threats to the public and individuals. Thus, the Privacy Rule permits covered entities to disclose protected health information without authorization for specified public health purposes. Covered entities may disclose protected health information to report known or suspected child abuse or neglect, if the report is made to a public health authority or other appropriate government authority that is authorized by law to receive such reports. Generally, covered entities are required reasonably to limit the protected health information disclosed for public health purposes to the minimum amount necessary to accomplish the public health purpose. However, covered entities are not required to make a minimum necessary determination for public health disclosures that are made pursuant to an individual’s authorization, or for disclosures that are required by other law.

According to the Georgia Attorney General’s Office, and with support from the federal Department of Health and Human Services (DHHS) and the CDC, Child Fatality Review Committees are considered to be public health authorities, are fully authorized to receive protected health information from covered entities, and are **exempt** from requiring parental notification and permission to obtain and review medical records for any deceased child. In addition, for cases of unexpected infant deaths, the **prenatal records are also exempt** from the HIPAA requirements of notification and authorization. Therefore, CFR requests for health information from covered entities do not need to be in the form of a subpoena, and a signed release from the parent/guardian of the deceased child is not required.

A copy of the HIPAA Privacy Rule summary and the official CFR authorization letter from the Georgia Attorney General can be found in your CFR Policy Manual (2006 edition), or by contacting CFR staff at 404-656-4200.

## *CFR Welcomes Back Carri Cottengim!*

Carri Cottengim has joined the CFR team to serve part-time as Project Coordinator for the SUID Case Registry. She will support the CFR staff and those counties with high numbers of infant deaths, to ensure that the necessary surveillance activities of those counties are complete and thorough, in accordance with the CDC grant requirements.

Carri has a Master’s degree in Sociology, with a focus on race and ethnicity. She has three years experience as a CFR Program Manager. After taking a break to raise her three children, Carri is excited to be back working on the prevention of infant and child deaths.

*\*\*All county CFR committees should continue to contact their Program Manager for any and all issues regarding child death investigations, reviews, or reporting, including cross-county communication and compliance\*\**

## Update on the Partners of CFR

CFR staff work very closely with many state and local agencies in our efforts to improve surveillance of child deaths and recommend prevention measures. In many instances, our staff serve in advisory roles to guide and inform our partners with fatality data provided by the local review committees. Here is a brief update on the work of some of the partners of CFR, and how the review data from our annual report guides their efforts.

Georgia Violent Death Reporting System - GVDRS is working to collect data on the circumstances and the victims of violent deaths (homicide and suicide). The program, funded by CDC and housed in the Division of Public Health, is also interested in reviewing past SIDS and SUID deaths, to determine if any of these had been misclassified as “unknown” or “undetermined”, when they might have actually been homicides

GLS Youth Suicide Prevention Grant Program - the Garrett Lee Smith federal grant-funded program, housed in the Department of Behavioral Health and Developmental Diseases, is working to develop youth suicide awareness and risk reduction programs throughout the state. The GLS program selected several counties to serve as pilot sites for the school-based programs, and discussed with CFR staff the reported youth suicide data and expressed needs of the CFR committees. CFR staff will also work with the Youth Subcommittee of the Suicide Prevention Coalition of Georgia

United Against Child Abuse Coalition - the Coalition is a group of advocates and agencies who work toward a common goal of reducing the occurrence of child abuse in the state. CFR staff provide certain child abuse/neglect fatality data to the coalition, and advise on other matters that may help in the reduction and prevention of abuse, including policies for DFCS and juvenile court representation

Infant Safe Sleep Coalition - the Georgia Infant Safe Sleep Coalition is comprised of representatives from public and private institutions with the mission of preventing sleep-related deaths in children. Formed in 2007, the Coalition has four active workgroups and is currently determining budget allocations for a grant that was received in 2009. CFR staff participate in each of the workgroups. If you are interested in participating in this coalition or receiving information, please contact Rachelle Carnesale, CFIT Director and Chair of the Coalition, at [rcarnesale@oca.ga.gov](mailto:rcarnesale@oca.ga.gov) or by calling the CFR office.



## Annual Child Fatality Review Awards

It's that time again! Every year the Division of Child Fatality Review recognizes a coroner, child fatality review committee, and child fatality investigation team for their outstanding commitment and dedication to child death investigation, review, reporting, and prevention. We value the importance of acknowledging those who consistently go the “extra mile” in an effort to enhance the lives of Georgia's children. Please join us in applauding the stellar work of our coroners and committee members by submitting your nominations **by February 26, 2010**. Nomination forms can be submitted online directly via SurveyMonkey (follow the links below).

CFR Coroner of the Year Nominations [<http://www.surveymonkey.com/s/XXKNXC3>]

CFR Committee of the Year Nominations [<http://www.surveymonkey.com/s/XXVTVWB>].

If you would like to request a nomination form directly to fax in, please contact CFR staff. Once final selections have been made by the CFR Panel, winners will be announced in April 2010. Award winners will receive a trophy, written commendation from the CFR Panel, and House and Senate resolutions presented before both legislative bodies at the Capitol.



Together  
Everyone  
Achieves  
More

Please submit your stories of success or other ideas by **March 12, 2010** to:  
OCA– Division of Child Fatality Review ● 55 Park Place - Suite 410 ● Atlanta, Georgia 30303  
Phone: 404-656-4200 or Fax: 404-656-5200 or Email to: [gacfrstaff@dhr.state.ga.us](mailto:gacfrstaff@dhr.state.ga.us)

## Upcoming Events

- **2010 Public Health Preparedness Summit, February 16-19, 2010 in Atlanta.** The Summit will strengthen and enhance the capabilities of public health professionals and other participants to plan and prepare for, respond to, and recover from disasters and other public health emergencies. For more information, please visit their website at [www.phprep.org](http://www.phprep.org)
- **Association of Maternal and Child Health Programs, March 6-9, 2010 in National Harbor, Maryland.** For more information, please visit their website at [www.amchp.org](http://www.amchp.org)
- **26th National Symposium on Child Abuse, March 22-25, 2010 in Huntsville, Alabama.** For more information, please visit their website at [www.nationalcac.org](http://www.nationalcac.org)
- **14th Annual National Hispanic Medical Association Conference, March 25-28, 2010, in Washington, DC.** The conference will address health care transformation to expand prevention and health promotion for Hispanic communities. For more information, please visit their website at [www.nhmamd.org](http://www.nhmamd.org)
- **18th Annual Congress for the New Urbanism Conference, May 19-22, 2010 in Atlanta.** The conference will address new research and innovative techniques for assessing the health impact of land use, transportation planning, and community design decisions. For more information, please visit their website at [www.cnu.org](http://www.cnu.org)

## Important Information for YOU

- The U.S. Consumer Product Safety Commission has issued several product recalls since our last newsletter. The following is not a complete list of product recalls and alerts issued from Oct-Dec 2009. Please visit their website ([www.cpsc.gov](http://www.cpsc.gov)) for more information on these and other recalls and safety hazards of children's products:
  - Stork Craft drop-side cribs, including Stork Craft drop-side cribs with the Fisher-Price logo. When the drop-side detaches, it creates space between the drop-side and the crib mattress. The bodies of infants and toddlers can become entrapped in the space which can lead to suffocation
  - Yayita Baby Hammocks, by Three Sisters Toys Inc. The hammock can flip over, posing a serious fall hazard and strangulation hazard
  - Maclaren Strollers; the stroller's hinge mechanism poses a fingertip amputation and laceration hazard
  - Evenflo ExerSaucer® 1-2-3 Tea for Me Activity Learning Centers. The candle flame attached to the top of the cake toy can detach, posing a choking hazard
  - Amby Baby Motion Beds. The side-to-side shifting or tilting of the hammock can cause the infant to roll and become entrapped or wedged against the hammock's fabric and/or mattress pad, resulting in a suffocation hazard [Gwinnett County Medical Examiner's Office was instrumental in the recall of the Amby Bed after reporting a four-month-old's death to the CPSC. Gwinnett Medical Center also initiated posters regarding the dangers of using the Amby Bed]
  - BRP Model Year 2010 Can-Am ATVs. The dynamic power steering can fail, resulting in the sudden loss of steering control. This poses a risk of injury or death to riders
  - The Window Covering Safety Council issued a recall of all Roman shades and roll-up blinds due to the risk of strangulation. There are several million sold by various manufacturers, which are all affected by the recall
- The updated State Model Child Abuse Protocol is now available for you to use in your communities. The revised edition contains information on mandated reporting, school abuse, child sexual exploitation, and special needs children. Please contact the CFR office if you would like to receive a copy (404-656-4200 or [gacfrstaff@dhr.state.ga.us](mailto:gacfrstaff@dhr.state.ga.us)). Per CFR legislation, all county child abuse protocol committees are required to "meet at least semi-annually for the purpose of evaluating the effectiveness of the protocol and appropriately modifying and updating same" (O.C.G.A. 19-15-2). Protocol committees shall also issue a report on the first day of July of each year; the report shall evaluate the extent to which child abuse investigations during the previous 12 months have complied with the child abuse protocols of the committee, recommend measures to improve compliance, and describe which measures taken to prevent child abuse have been successful.

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