#### **DSS Directors**



#### **State Child Fatality Review Status Report**

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## **June 2017 Point in Time Numbers**

- In June 2018, an audit of the last 5 years identified 125 outstanding fatalities
- The backlog dates ranged from 2012 to 2017
- Counties had a range of 1 to 7 reviews needing completion

## Where We Are Today

- 13 Backlog reviews to be completed by the end of June
- 2 that came of DA hold in the process of being scheduled
- 22 current year reviews are scheduled
- 24 are on DA hold

### FY 2015 - 2017 Data

Unsafe sleep accounted 30 % of our fatalities being reviewed Homicide accounted for another 22% Suicides were the next largest category with 18% 27% cases reviewed were open for assessment at the time of the death

41% were open for assessment or services at the time of death

# **Common Risk Factors**

#### **Unsafe Sleep**

- Substance abuse: 10 of 15 deaths involved the infant tested positive at birth
- Mom had delayed or NO prenatal care
  - Substance abuse combined with mental illness

#### Homicide

- Substance abuse
- Substance abuse combined with mental illness
- Child had prior history of maltreatment
- Untreated mental health
  issues of caregivers
  - Domestic violence in relationships
  - Multiple CPS Reports