

Response to the House Human Service Committee on the Child Fatality Review Team

H.686 - An act relating to establishing the Child Fatality Review Team

What is the problem?

- Vermont's rate of unexpected, unexplained and preventable child fatalities has not decreased over the past decade.
- The Child Fatality Review Team (CFRT), which looks for holes in the system of child protection, does not currently have statutory authority to seek the records it needs to review unexpected, unexplained or preventable child deaths in Vermont. As a result, data are insufficient to make meaningful recommendations.
- To improve prevention efforts and address this problem, the team needs clear statutory authority to review necessary records, and participation and assistance from member agencies and departments.

What is the solution?

- Provide the CFRT the authority it needs to review child fatalities and report to the General Assembly recommendations that may reduce child fatalities in Vermont.

What other fatality review teams exist and how do needs of CFRT differ?

Fatality review teams focus on specific populations so that chosen members bring appropriate and specific expertise to the issues at hand, the solutions are all population-specific, and the case load and breadth of knowledge is not so overwhelming that it impairs development of useful recommendations.

There is statutory authority for the following fatality review teams:

- [Vulnerable Adult Fatality Review Team](#) – lacks members with appropriate background in child health and education issues; cannot review any persons under 18 years.
- [Domestic Violence Fatality Review Commission](#) – does have overlap in some cases, however most child fatalities do not involve domestic violence.
- [Maternal Mortality Review Panel](#) – reviews mothers, neonates, and obstetric issues, not children.
- [Mental Health Crisis Response Commission](#) – focuses largely on review of interactions between Law enforcement or Mental health crisis responders and persons believed to be in a mental health crisis.

How do federal policies (HIPAA and FERPA) affect the investigations of the CFRT?

- Although the Health Insurance Portability and Accountability Act (HIPAA) applies to the Vermont Department of Health, the Health Department can obtain protected health information to prevent injury and to conduct public health surveillance and interventions, which is the primary mission of the CFRT.
- The proposal is also consistent with the Family Education Rights and Privacy Act (FERPA).

Under which teams is peer review exempt?

- Peer review is exempt from review by the Vulnerable Adult Fatality Review Team. Such exemption is appropriate and necessary to facilitate health care provider's review of care for quality improvement and patient protection. By having access to decedent's medical records, the CFRT would have opportunity to understand factors contributing to death without needing reports of peer review.

How far can the CFRT go in their investigation (e.g., can they go into someone's home?):

- The CFRT does not conduct independent investigations. The CFRT would request and review existing documents and information related to a fatality.

Will the members receive compensation?

- Only the Maternal Mortality Review Panel specifies that members will receive no compensation for participation. In the case of the CFRT, members will not receive per diems, but in the scenario that the Team applies for grants, or has access to funding, the Team wants the flexibility to compensate individuals for additional work or special projects related to the Team's work.

What happens if the Team uncovers a crime?

- If the Team uncovered a crime the law enforcement member would take that information back to their agency.
- If the Team uncovered an instance of child abuse or neglect that was not previously uncovered, then the DCF representative would take that information back to their agency.