CHILD FATALITIES: NOT A PRIVATE FAMILY MATTER

QUESTIONS WE ALL HAVE

- How are child deaths different?
- How are they investigated?
- What is a child death review?
- What are our children dying of?

IN ADULTS

- Clear evidence of cause of death
- Clear means at scene of death
- Witnesses
- Documentation of events
- Motive

HOW DID THIS CHILD DIE?
**DIFFERENTIAL DIAGNOSIS**

- **HOMICIDE**
- **ABUSIVE HEAD TRAUMA**
- **ABDOMINAL TRAUMA**
- **CONGENITAL HEART DEFECT**
- **SEPSIS**
- **ACCIDENT**

**SCENARIO**

- Baby boy found in crib not breathing by mother
- 911 called
- EMS responded and found child in rigor and cold to touch
- Pronounced on scene

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- **HOMICIDE**
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**EXPECTED CHILD DEATH**

- **SUID**

**Differential Diagnosis**

- **Natural Death**
- **Autopsy Findings of Trauma**
- **No Trauma History**
- **Homicide**

**NATURAL DEATH IN CHILDREN**

- **No obvious cause of death**
- **No clear means of death**
- **Unsure if this was homicide or accident or natural**
- **No witnesses**
- **No motive**

**SOUTH CAROLINA CODE OF LAWS 63-11-1900**

Every child is entitled to live in safety and in health and to survive into adulthood. Responding to child deaths is a state and a community responsibility. When a child dies, the response by the state and the community to the death must include an accurate, thorough, and complete investigation. Multi-disciplinary and multi-agency investigations of child deaths are the best approach. Responding to child deaths is a state and a community responsibility. When a child dies, the response by the state and the community to the death must include an accurate, thorough, and complete investigation. Multi-disciplinary and multi-agency investigations of child deaths are the best approach.

**CHILD DEATH INVESTIGATION**

- Witness History
- Medical History of Child and Mother (Pregnancy)
- Reenactment of Events Leading Up to Death
- Scene Investigation
- Autopsy

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SOUTH CAROLINA CODE OF LAWS 17-5-541, 542
LOCAL FATALITY REVIEW TO BE CONVENED WITHIN 7 DAYS OF DEATH WITH THE FOLLOWING PARTICIPANTS:
- THE COUNTY CORONER OR HIS DESIGNEE;
- A LOCAL LAW ENFORCEMENT OFFICER;
- SLED CHILD FATALITY AGENT;
- A BOARD CERTIFIED CHILD ABUSE PEDIATRICIAN;
- A REPRESENTATIVE FROM THE LOCAL COUNTY DEPARTMENT OF SOCIAL SERVICES;
- A FORENSIC PATHOLOGIST.

SCENARIO
- BABY BOY FOUND IN CRIB NOT BREATHING BY MOTHER
- 911 CALLED
- EMS RESPONDED AND FOUND CHILD IN RIGOR AND COLD TO TOUCH
- PRONOUNCED ON SCENE

MEDICAL HISTORY
- MOTHER REPORTS THAT THE CHILD DEVELOPED A FEVER THE PRIOR DAY AND WAS FUSSY
- MOTHER INTENDED TO GO TO THE PEDIATRICIAN THE FOLLOWING DAY
- THERE ARE OLDER CHILDREN IN THE HOME WHO HAVE BEEN SICK WITH "Colds"
**INFANT FOUND TO HAVE A UNDIAGNOSED CONGENITAL HEART DEFECT AT AUTOPSY**

**BLOOD CULTURE GREW MRSA**

**Autopsy**

- Natural Death
- Autopsy Findings of Trauma
  - No Trauma History = Accidental
  - Trauma History = Homicide
- Medical History
  - Accidental

**Scene Investigation/Reenactment**

- Mother reports placing infant on stomach to sleep with pillows and blanket in crib

**Unexpected Child Death**

**Medical History**

- And/or Autopsy Findings

**Natural Death**

- Autopsy Findings of Trauma
  - No Trauma History = Accidental
  - Trauma History = Homicide

**Autopsy**

- Infant found to have a undiagnosed congenital heart defect at autopsy

- Blood culture grew MRSA

**Child Abuse Pediatrician**

- Could this infant have died from a cold?
DSS
- Reports that mother has lost custody of all her older children due to substance abuse issues.

Scene Investigation
- Law enforcement: Does mother have a criminal history?

Autopsy
- Bottle collected at scene tested and found to have alcohol.
- Mother confesses to being frustrated that infant was fussy and put alcohol in the bottle to get infant to sleep.

Autopsy
- Toxology at autopsy has high levels of alcohol.

Pathologist
- Mother now reports that the child rolled off the changing table the day before.

Pathologist
- Pathologist: Could the roll have caused the injuries and death?
WITNESSES

- 10 YEAR OLD SIBLING REPORTS IN FORENSIC INTERVIEW THAT MOTHER WAS HIGH
- CHILD HEARD MOTHER YELLING AT THE INFANT AND SAW HER THROW THE INFANT INTO THE WALL

STATE CHILD FATALITY ADVISORY COMMITTEE (SCFAC)

THE SCFAC WAS ENACTED IN 1993 AND IS MANDATED BY S.C. CODE 63-11-1950 TO IDENTIFY PATTERNS IN CHILD FATALITIES THAT WILL GUIDE EFFORTS BY AGENCIES, COMMUNITIES, AND INDIVIDUALS TO DECREASE THE NUMBER OF PREVENTABLE CHILD DEATHS.

THE SCFAC REVIEWS COMPLETED INVESTIGATIONS OF DEATHS INVOLVING CHILDREN (AGE 17 YEARS AND YOUNGER) DEEMED TO BE UNEXPECTED, UNEXPLAINED, OR SUSPICIOUS IN NATURE.

SOUTH CAROLINA CHILD FATALITY ADVISORY COMMITTEE

- REVIEWS ALL CHILD DEATHS IN SOUTH CAROLINA THAT ARE NOT CLEARLY NATURAL
- EACH DEATH IS INVESTIGATED BY THE CHILD FATALITY UNIT AT SLED
- PRESENTED TO THE COMMITTEE FOR REVIEW
- COLLECT DATA AND GENERATES RECOMMENDATIONS
CHILD DEATH REVIEW

PURPOSE:
- TO UNDERSTAND HOW AND WHY CHILDREN DIE IN ORDER TO TAKE ACTION TO PREVENT OTHER DEATHS

MULTIDISCIPLINARY TEAM
- EACH MEMBER BRINGS INFORMATION FROM THEIR AGENCY- SPECIFIC CASE REVIEW
- UNDERSTANDS COLLECTIVE RISK FACTORS
- MAKES RECOMMENDATIONS TO MINIMIZE RISK

CASE REVIEW MODEL
- FOCUS ON SYSTEM IMPROVEMENTS
- IDENTIFIES POTENTIAL MALTREATMENT DEATHS
- OBTAINS SPECIFIC CASE INFORMATION
- CONDUCTS A COMPREHENSIVE, MULTIDISCIPLINARY REVIEW
- METHODS IDENTIFIES SYSTEMS ISSUES TO ASSESS PROBLEMS, DEVELOP RECOMMENDATIONS AND TAKE ACTION

STRENGTHS OF CDR
- IMPROVED INTERAGENCY COMMUNICATION AND COORDINATION
- BETTER IDENTIFICATION AND CLASSIFICATION OF CHILD DEATHS
- CONSISTENT AND STANDARDIZED DATA COLLECTION
- NATIONAL CENTER HAS AN ELECTRONIC TOOL
- PUBLIC SURVEILLANCE OF CHILD MALTREATMENT

WHAT ARE OUR CHILDREN DYING OF?

CASE DEATH REVIEW
- PROJECTS THAT WORKS TO UNDERSTAND HOW AND WHY CHILDREN DIE IN ORDER TO TAKE ACTION TO PREVENT OTHER DEATHS
- EACH MEMBER BRINGS INFORMATION FROM THEIR AGENCY- CASE SPECIFIC
- UNDERSTANDS COLLECTIVE RISK FACTORS
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FINDINGS:
- IMPROVED INTERAGENCY COMMUNICATION AND COORDINATION
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WHAT ARE OUR CHILDREN DYING OF?
**CASE 1**

- 5 YEAR OLD CHILD DIED OF GUNSHOT IN THE HOME
- WHAT KIND OF DEATH IS THIS?
- COULD THE DEATH BE PREVENTED?
- SHOULD DSS BE INVOLVED?
- SHOULD THERE BE CRIMINAL CHARGES?
CASE 2

9 MONTH OLD INFANT FOUND DEAD AT HOME AFTER COSLEEPING WITH PARENTS IN THEIR BED

WHAT KIND OF DEATH IS THIS?
COULD THE DEATH BE PREVENTED?
SHOULD DSS BE INVOLVED?
SHOULD THERE BE CRIMINAL CHARGES?

CASE 3

7 YEAR OLD BOY WITH MUSCULAR DYSTROPHY IS BROUGHT TO THE EMERGENCY DEPARTMENT WITH RESPIRATORY DISTRESS (DIFFICULTY BREATHING) AND DIED IN THE ED

WHAT KIND OF DEATH IS THIS?
COULD THE DEATH BE PREVENTED?
SHOULD DSS BE INVOLVED?
SHOULD THERE BE CRIMINAL CHARGES?

REFERENCES

NATIONAL CENTER FOR FATALITY REVIEW- HTTPS://WWW.NCFRP.ORG/CDR-PROGRAMS/US-CDR-PROGRAMS/SPOTLIGHT-SOUTH-CAROLINA/
SC CHILD FATALITY ADVISORY COMMITTEE- HTTPS://SCFAC-SC.ORG
CDC SUID- HTTPS://WWW.CDC.GOV/SIDS/SUIDRF.HTM
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Questions?
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