Summary of Child Fatality Task Force Accomplishments*

A broad range of Task Force initiatives have played a significant role in protecting North Carolina's kids since 1991. The Task Force makes recommendations to the governor, General Assembly, and other state leaders to prevent child deaths and support child well-being, and these recommendations are often addressed in legislation or through other initiatives. Below are highlights of prevention initiatives and legislation, divided according to three Task Force subject committees.

Unintentional Death Prevention

***Teen Driving**:* North Carolina passed one of the first and most effective graduated driver license (GDL) laws in the nation. Since that time, crashes among teens declined dramatically. The CFTF also supported efforts to ban cell phone use by teens and to enforce "zero tolerance" for alcohol use among young drivers. Additionally, the CFTF supported the effort for "vertical licenses" so that this identification quickly reveals who is under age 21. The CFTF has made ongoing efforts to educate about the science behind the GDL and what keeps teens and road users safe; this education has at times prevented efforts to weaken the GDL law.

***Car seats**:* The CFTF advanced child passenger safety laws (1994 for infant seats; 2004 for booster seats) as well as a two-point penalty increase for drivers who do not assure that young passengers are appropriately restrained (2000), and a law to promote proper installation of safety seats by limiting the liability of child passenger safety technicians and volunteers. (Since 2023 the CFTF has had recommendations to further strengthen child passenger safety laws; while there have been proposed bills, one of which passed the House unanimously, they have not yet become law.)

***Other vehicle safety**:* The CFTF recommended legislation requiring the use of rear-seat safety belts by all passengers (2006). The CFTF supported the Child Bicycle Safety Act to require riders age 15 and younger to wear a helmet (2001). The CFTF supported limits on the use of all-terrain vehicles for children as well as safety training requirements (2005), and advanced legislation raise the minimum age for a person riding in the back of a pickup truck to 16 and removing an exemption for small counties (2008). Through administrative (non-legislative) efforts, the Task Force helped boost education around the importance of rear seat restraints, especially among teens.

Prescription and Other Drug Misuse: In 2011, the CFTF promoted the ban of the sale of dangerous synthetic substances. In 2013, 2015, 2016, and 2017 the CFTF advanced improvements to the Controlled Substances Reporting System (CSRS) to reduce unnecessary prescriptions and more quickly identify potential misuse or abuse. The CFTF has been highly supportive of the drug-take back program Operation Medicine Drop, which has helped result in clearing millions of controlled substances out of medicine cabinets. The CFTF has also been supportive of

* This document was updated October 2026.

efforts to increase access to an overdose reversal drug, naloxone. In 2024 and 2025, the CFTF gathered information on the rise in fentanyl-related deaths among children and teens and how to prevent them.

***Driving while impaired**:* The CFTF has advanced laws to designate impaired driving with a child in the vehicle as an aggravating factor (1993) and then an increase in the penalty (2011). The CFTF also promoted increasing the fee to restore a driver's license lost due to impaired driving with the funds being directed towards enforcing impaired driving laws and deterrence activities (2010). The CFTF also endorsed legislation requiring "zero tolerance" for alcohol measured in the blood or breath of underage drivers.

***Smoke alarms/CO alarms**:* The CFTF advanced a penalty for landlords who fail to install smoke alarms in rental units and for tenants who disable them (1998); this measure was updated to incorporate new battery advancements in 2012. The CFTF also advanced a law requiring carbon monoxide detectors in certain rental properties (2008).

***Gun safety**:* The CFTF convened a subcommittee including Safe Kids, the National Rifle Association and North Carolinians Against Gun Violence to create a consensus brochure in 2007 on gun safety tips. In 2017 and at the recommendation of the State Child Fatality Prevention Team, a firearm safety stakeholder group came together to examine the issue of safe storage of firearms, and the work of this diverse group informed a Task Force recommendation for legislation to launch a statewide firearm safe storage initiative. This initiative was addressed in legislation that became law in 2023. Also in 2023, the Department of Public Safety launched the "NC S.A.F.E." media campaign to promote safe storage, which was informed by the work of the Child Fatality Task Force.

School bus/zone safety: The CFTF recommended a measure to allow pictures taken of drivers committing a stop arm violation as acceptable evidence for conviction and makes it a felony if a student is killed due to an illegal pass of a stopped school bus (2009). A 2011 measure advanced by the CFTF increased the fine for speeding in a school zone. In 2017 the CFTF endorsed legislation addressing school bus safety, and a law was passed that authorizes civil penalties for passing a stopped school bus and the utilization of school bus cameras to facilitate automatic civil enforcement.

Skin cancer prevention: In 2015, the CFTF advanced a law that prohibits tanning bed operators from allowing persons under age 18 to use their equipment.

***Poisoning**:* In 2015, the CFTF advanced legislation that prohibits the sale of e-liquid nicotine containers without child-resistant packaging and without labeling indicating that contents contain nicotine and was one of the first states in the nation to do so. The CFTF has also supported funding Carolina's Poison Control Center.

Harm from tobacco, vaping, and intoxicating cannabis: During multiple years since 2018, the CFTF endorsed a recommendation for state funding for youth tobacco prevention programs and some funding for this purpose has been appropriated through the years. In 2025 & 2026 the CFTF recommended requiring the sale of tobacco/nicotine or intoxicating cannabis products to be limited to those 21 and over, requiring tobacco and intoxicating cannabis retailers to be licensed, and requiring safe packaging requirements for intoxicating cannabis; bills addressing these recommendations have been introduced but have not yet advanced.

Intentional Death Prevention

***Caseload reductions and improved services to abused and neglected children**:* In the early 1990s, CFTF recommendations for more Child Protective Services staff led to dramatically reducing CPS worker caseloads to better protect children and promote stable families. The CFTF advanced the original pilot of Family Preservation Services (1992) and home visiting services (1997). In 2014, the CFTF supported additional funding to DSS to help keep children safe in their own homes.

***CPS Hotline and other reporting**:* The CFTF promoted the funding that led to the creation of a Child Protective Services hotline in each county so that suspected cases of abuse and neglect can be reported and responded to in a timely fashion. In 2008, the CFTF advanced legislation to require hospitals and physicians to report serious, non-accidental trauma injuries in children to law enforcement.

Improved diagnosis and treatment for abuse and neglect: The CFTF promoted funding for training for child sexual abuse investigations (1995); the CFTF has also advanced funding the Child Medical Evaluation Program (1992, 2009, 2012-2014) and Child Advocacy Centers (2012- 2016). In 2013, the CFTF promoted creation of an implementation platform, the Child Treatment Program, to assure evidence-based treatment with fidelity for children who had experienced trauma. In 2017, the CFTF advanced recurring funding to the Child Medical Evaluation Program to increase reimbursement rates to align with regional rates in order to attract and retain experts in this field.

Prevention of abuse and neglect: The CFTF recommended creation of "Kids First" license plates with proceeds going to the NC Children's Trust Fund to prevent abuse and neglect (2002). Work of the CFTF in 2006 helped lead to the creation of the Child Maltreatment Leadership Team which promotes a public health approach to preventing abuse by fostering safe, stable and nurturing relationships. From 2019 - 2022 the Task Force included on its agenda administrative efforts to strengthen education and awareness around child abuse and neglect reporting and through partner organizations made progress improving website information, training on recognizing and responding to child maltreatment, and creating new resources. At the request of the Child Fatality Task Force, the NC Justice Academy included in its 2023 in-service training for law enforcement officers a significant block devoted to recognizing and responding to child abuse and neglect. Through collaborative efforts of various relevant experts, a training on child abuse and neglect recognizing and responding for healthcare providers was developed and began to be disseminated in 2024.

Suicide prevention: From 2017 to 2022 the CFTF recommended various strategies aimed at suicide prevention including funding for more school nurses, social workers, counselors and psychologists and for programs reducing access to lethal means; some funding for these purposes was included in state budgets from 2018-2023. The CFTF also recommended legislation to require suicide prevention training for school personnel and a risk referral protocol in schools and in 2020, legislation addressing this recommendation became law.

Court Improvements: The CFTF advanced legislation to move adoption proceedings from Superior Court to District Court as a first step toward family court (1995). The Court Improvement Project (1998) helps cases of child abuse and neglect move through the system more quickly so that children can be adopted or reunited with their biological family. This improved process led to the number of children with 3 or more placements to be reduced by half. A 2000 CFTF proposal helped streamline termination of parental rights.

***Definition of Juvenile**:* The CFTF recommended broadening the definition of dependent juvenile so that the local Department of Social Services could provide services when parents were unable to provide care for a variety of reasons, including incarceration (1997).

Clarified or strengthened penalties: In 1994, the CFTF worked to increase the penalty for illegally selling a gun to a minor. The CFTF endorsed strengthening penalties when methamphetamine is manufactured in a location that endangers a child (2004). The CFTF promoted efforts to strengthen the sex offender registry law in 2006. In 2008 the CFTF recommended increasing the criminal penalty for misdemeanor child abuse and to amend the criminal offense of felony child abuse. The CFTF supported legislation to prohibit the unlawful custody transfer of a child (2016).

Juvenile Justice: In the mid 1990's the CFTF supported several measures of the Governor's crime package of legislation relating to resources for youth in trouble, as well as diagnostic assessments for all children in "training

schools" (now Youth Development Centers). In 2019, the CFTF was one of many organizations recommending fully funding juvenile justice needs related to recent legislation raising the age for juvenile court jurisdiction in order to effectively address the needs of this youth population, and legislation containing funding for such purpose passed.

Infant safe surrender: The Child Fatality Task Force advanced the state's original "infant safe surrender" law in 2001 to provide a safe alternative for a desperate parent of a newborn who may be tempted to engage in actions harmful to the infant. The CFTF recommended changes to this law to strengthen it and in 2023, legislation addressing these changes became law.

Funds to enable comprehensive toxicology testing in medical examiner jurisdiction child deaths: The CFTF heard from the Office of the Chief Medical Examiner that due to lack of resources, North Carolina does less toxicology testing on children with an established cause of death than any other state and that without comprehensive toxicology testing on certain case types, there may be missed opportunities to determine contributing factors to a fatality. The CFTF recommended funding for this purpose, and the final 2023 Appropriations Act included this funding.

Funds to address the child care crisis: The Task Force was one of many organizations highlighting a crisis in the affordability and availability of child care, and the importance of state funding to address the critical need for families to access child care. In 2024, temporary funding for child care center grants was appropriated, intended to provide temporary help to child care centers who were soon losing federal funding. In 2026, significant funding to address the child care crisis was included in the state budget.

Perinatal Health

Perinatal Tobacco Cessation and Prevention. The CFTF has supported funding for You Quit Two Quit, a perinatal tobacco cessation and prevention program that addresses the impact of tobacco on perinatal health (2016, 2017). The CFTF has also supported funding for Quitline NC (2017, 2018 - 2021).

Birth defects monitoring and expanded newborn screening*:* The CFTF has endorsed efforts to assure monitoring of birth defects (2006, 2007), a significant cause of infant mortality. The CFTF helped to advance legislation to add three conditions to the NC newborn screening panel (2018).

Perinatal Best Practices*:* The CFTF supported funding to help create and support the Perinatal Quality Collaborative of NC to implement perinatal best practice projects in NC hospitals; when the program lost funding in 2025, the CFTF educated about the success of the program, recommended funding to restore the program, and it was in fact restored.

Infant Safe Sleep*:* The CFTF has supported various efforts to promote infant safe sleep and reduce SIDS, including seeking increased funding for programs preventing deaths related to unsafe sleep environments. In 2023, the General Assembly appropriated additional temporary funding for this purpose.

Preconception Health*:* The CFTF has supported funding for folic acid and other strategies to promote preconception health of women and prevent birth defects (2006, 2009, 2011 – 2016).

Preterm birth prevention and healthy birth outcomes. The CFTF supported funding for and training to help medical providers best deliver 17-P, a drug that reduces preterm birth (2006 – 2016), earning NC recognition as a leader in this regard from the National Conference of State Legislators. The CFTF identified incentivizing group prenatal care and increasing the Medicaid reimbursement rate for maternity care providers (to attract and retain providers) as important strategies in preventing infant deaths and decreasing disparities, and recommended Medicaid funding to support these strategies. This funding was included in 2023 legislation that became law.

Efforts to strengthen the Statewide Child Fatality Prevention System (relevant to all three committees): Beginning in 2018, there was significant study and stakeholder engagement to assess ways to improve the statewide child fatality prevention system which resulted in a set of CFTF recommendations in 2019. These recommendations to strengthen the Child Fatality Prevention System were addressed in legislation that became law in 2023, and the CFTF, which is part of this system, has been involved in the implementation of the new system. CFTF staff and leaders have also been involved in planning and leading statewide summits (in 2018 and 2023) that bring together hundreds of professionals working in the child fatality prevention system to collaborate and receive training related to child death reviews and a variety of prevention topics.

Risk-appropriate maternal and neonatal care*:* The CFTF has supported funding to maintain high-risk maternity care services in the eastern part of the state (2010, 2012-2016). The CFTF advanced a law requiring a study of health care facilities across NC to determine the status of NC delivering hospitals related to capabilities for handling various complexity levels of care for mothers and newborns and to identify disparities, service gaps, and other issues impacting access to timely and comprehensive care (2018). This law resulted in the convening of a Perinatal Systems of Care Task Force by the North Carolina Institute of Medicine, and a report with recommendations from this group was presented to the Joint Legislative Oversight Committee on Health and Human Services in March 2020 and the Perinatal Health Committee of the Child Fatality Task Force.

Pulse Oximetry*:* The CFTF supported a quick and inexpensive test that screens newborns for certain congenital heart disease (2013).

Breastfeeding*:* The CFTF convened a subcommittee on the issue of breastfeeding. This work helped lead to a grant for a social marketing campaign and development of State Personnel policies for state offices to be "breastfeeding friendly," serving as a model policy shared with municipalities. The CFTF also worked on implementation of Medicaid coverage of medical lactation support services (2014 — 2017).

Paid Family Leave Insurance Study: CFTF efforts in 2017 to learn more about paid family leave insurance led to a Duke University study analyzing the costs and benefits of a potential paid family leave insurance program in North Carolina. This study was published in March, 2019 and was presented to the full Task Force and the Task Force Perinatal Health Committee during its 2019-2020 study cycle. For 2024, 2025, and 2026, the CFTF has continued efforts to gather and study more information on this topic.