Meeting of the Intentional Death Prevention Committee of the North Carolina Child Fatality Task Force

October 20, 2026





Welcome & Approval of Minutes

Minutes from last meeting on September 16, 2026 have been posted on the CFTF website, the minutes have been sent out and the link to the minutes is also on your agenda

Today's Agenda

Focus on Child Welfare

- Child Welfare Data in North Carolina
- Tools, technologies, programs and policies to support the child welfare system
- Child Welfare and "The Impossible Imperative"

Context for Studying the Topic of Child Welfare: preventing child abuse & neglect is a priority of the statewide child fatality prevention system

"The purpose of the system is to assess the records of child deaths in North Carolina . . ., to **study data and prevention strategies related to child abuse, neglect, and death**, and to utilize multidisciplinary teams to review these deaths in order to

(i) develop a **communitywide approach to the problem of child abuse and neglect**,

(ii) und**erstand the causes and contributing factors** of childhood deaths,

(iii) identify any gaps or deficiencies that may exist in the delivery of services to children and their families by public agencies that are designed to prevent future child abuse, neglect, or death,

(iv) identify and aid in facilitating the **implementation of evidence-driven strategies to prevent child death and promote child well-being**, and

(v) make and implement **recommendations for changes to laws, rules, and policies that will support the safe and healthy development of our children and prevent future child abuse, neglect, and death**." [N.C.G.S. 7B-1400]

The CFTF's 1992 Annual Report Explained the Origin of the CFP System and the CFTF

- NC Child Advocacy Institute report on child maltreatment fatalities in NC
- Increased concern that fatalities related to child abuse and neglect were being undercounted in existing data systems
- Several child abuse deaths in the news where children were known to DSS
- Significant rise in reports of child abuse and neglect but no funding for DSS to keep up with increased case load
- DSS and NC stakeholders came together and consulted with national experts. Recommendations included immediate increased funding for county DSS and reviews of child deaths
- 1991: Review teams were established; 10.25 million was appropriated for CPS for FY 1991-93; and the CFTF was created

NC Child Fatality Task Force

Child Protective Services Data Overview

October 20th, 2026

Overview

- In June of 2025, NC DHHS began rolling out the new Comprehensive Child Welfare Information System (CCWIS) – called PATH NC - for Child Protective Services Intake & Assessment (I&A)
  - In April of 2026, all 100 counties fully transitioned into PATH NC for I&A

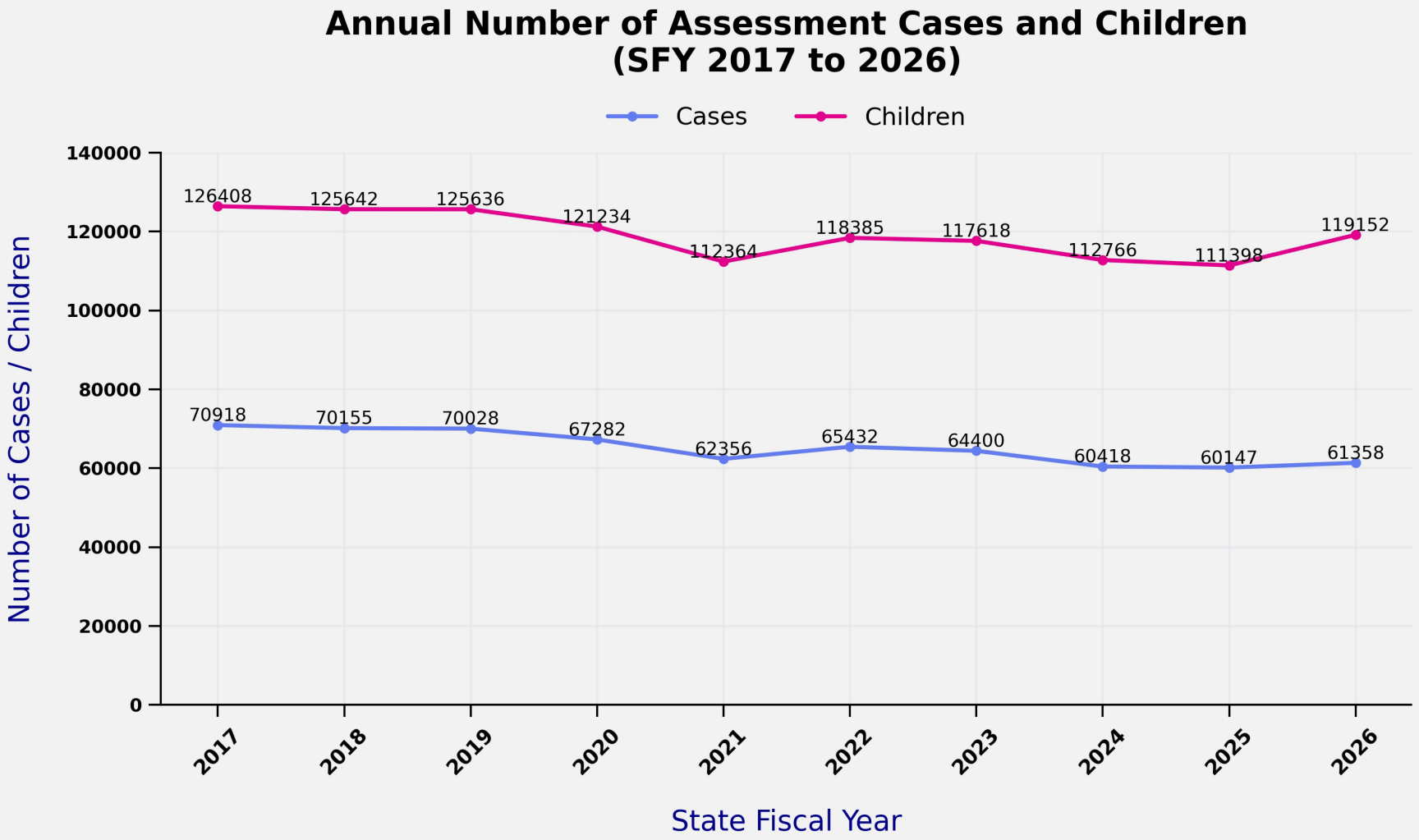
- The rollout of PATH NC for Ongoing Case Management (Family In-Home Services, Foster Care, Eligibility, Placements, Financials, Foster Home Licensing, and Adoptions) is in-progress.
  - As of today, 70 counties have begun using PATH NC for all mandated child welfare functions and all 100 counties are planned to be deployed by February 2027.

- Prior to PATH NC, counties used different case management processes, ranging from case management software, all the way to paper files and other manual processes. Close to half of counties relied on manual case management processes prior to PATH NC.
  - On top of the varying local processes, counties were required to periodically key data from mandatory forms into old state “Legacy” systems. This enabled NC DHHS to submit required federal reports, reimburse counties for services and placements, and to track high-level data relating to child welfare activities in NC

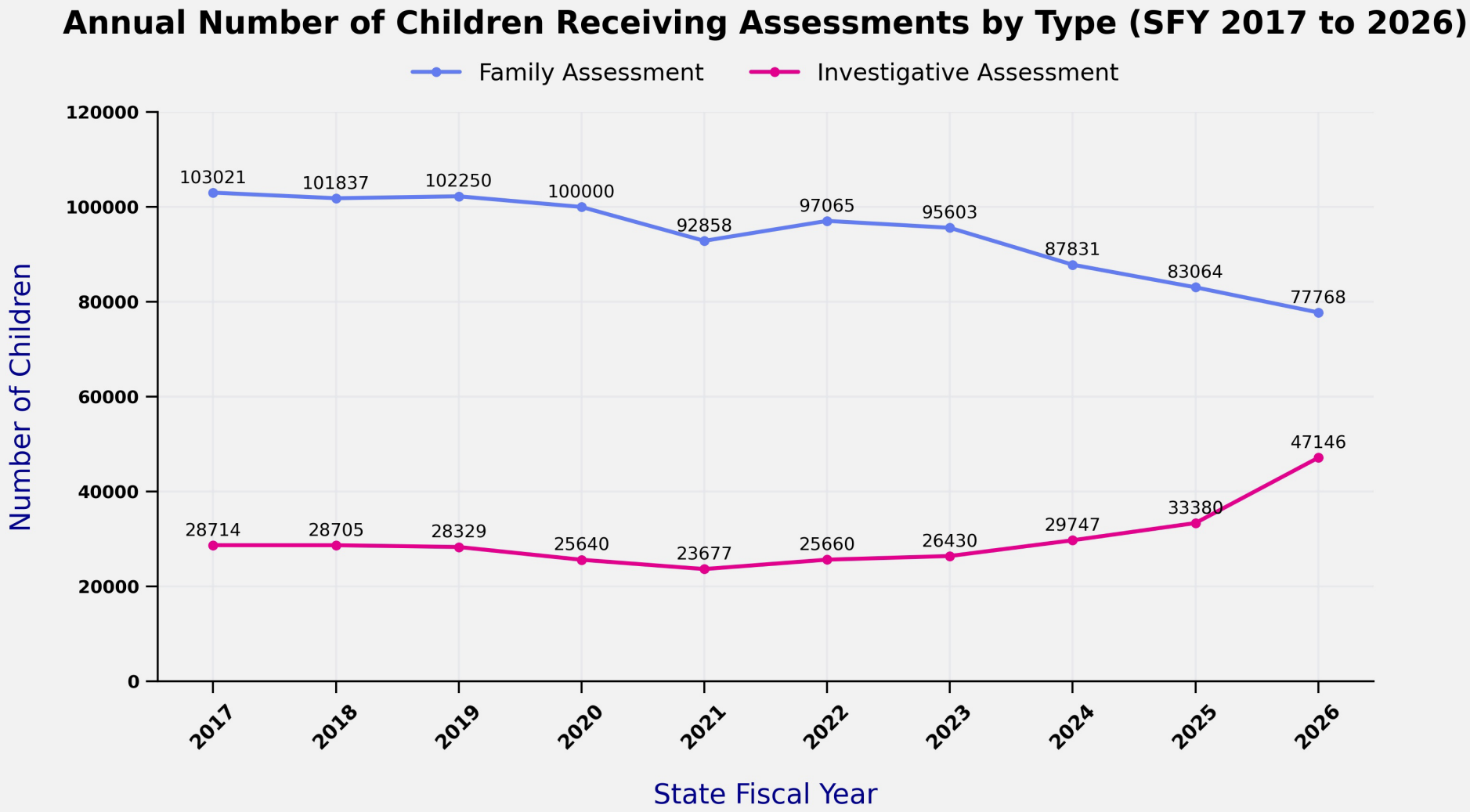
- This presentation includes a few slides showing longitudinal data pulled primarily from those “Legacy” systems

- Additionally, a few slides will show more recent data that is available from PATH NC, which has enabled NC DHHS to track more metrics and have more timely access to important child welfare indicators

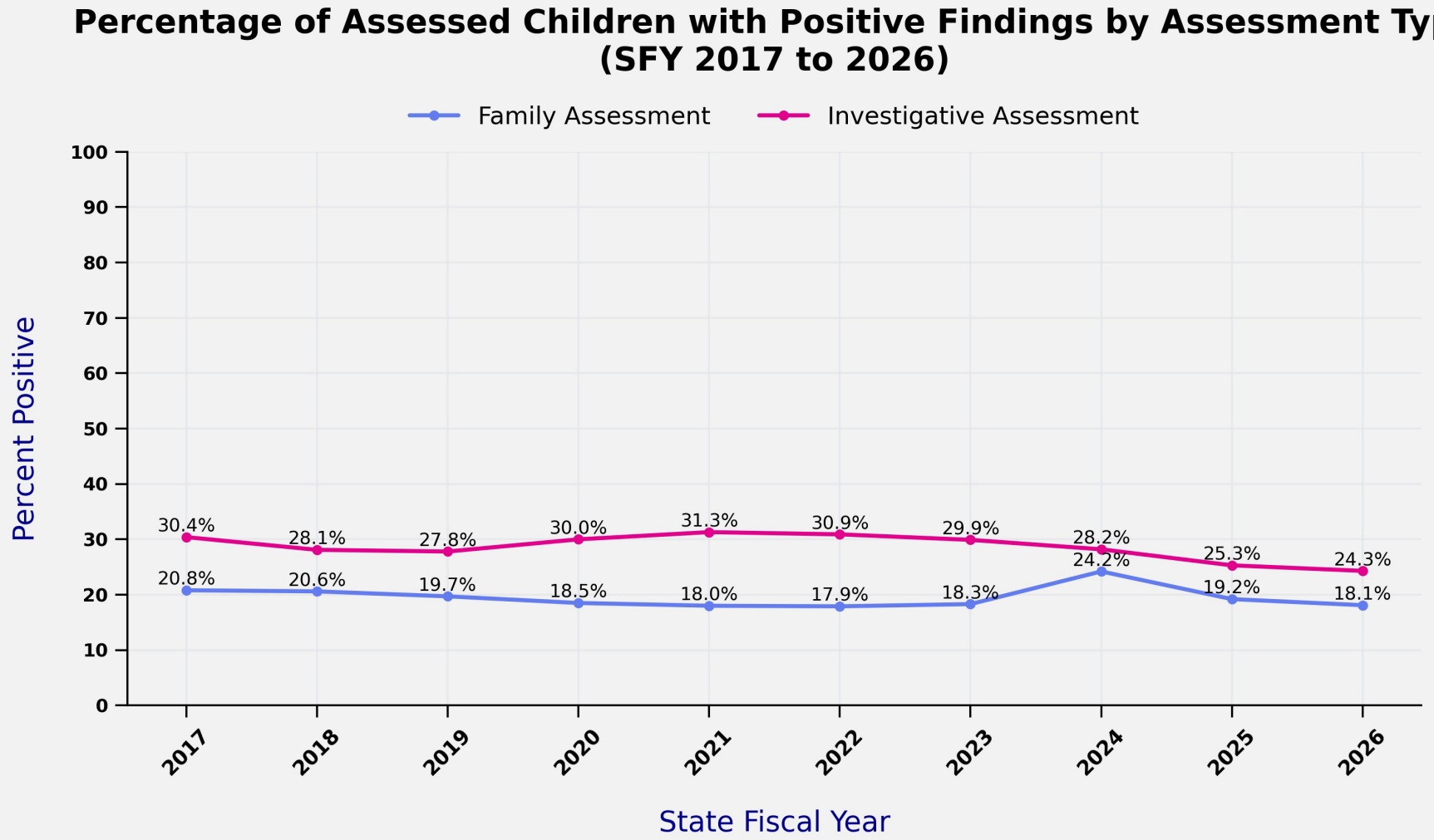
CPS Assessments – SFY 2017 – SFY 2026



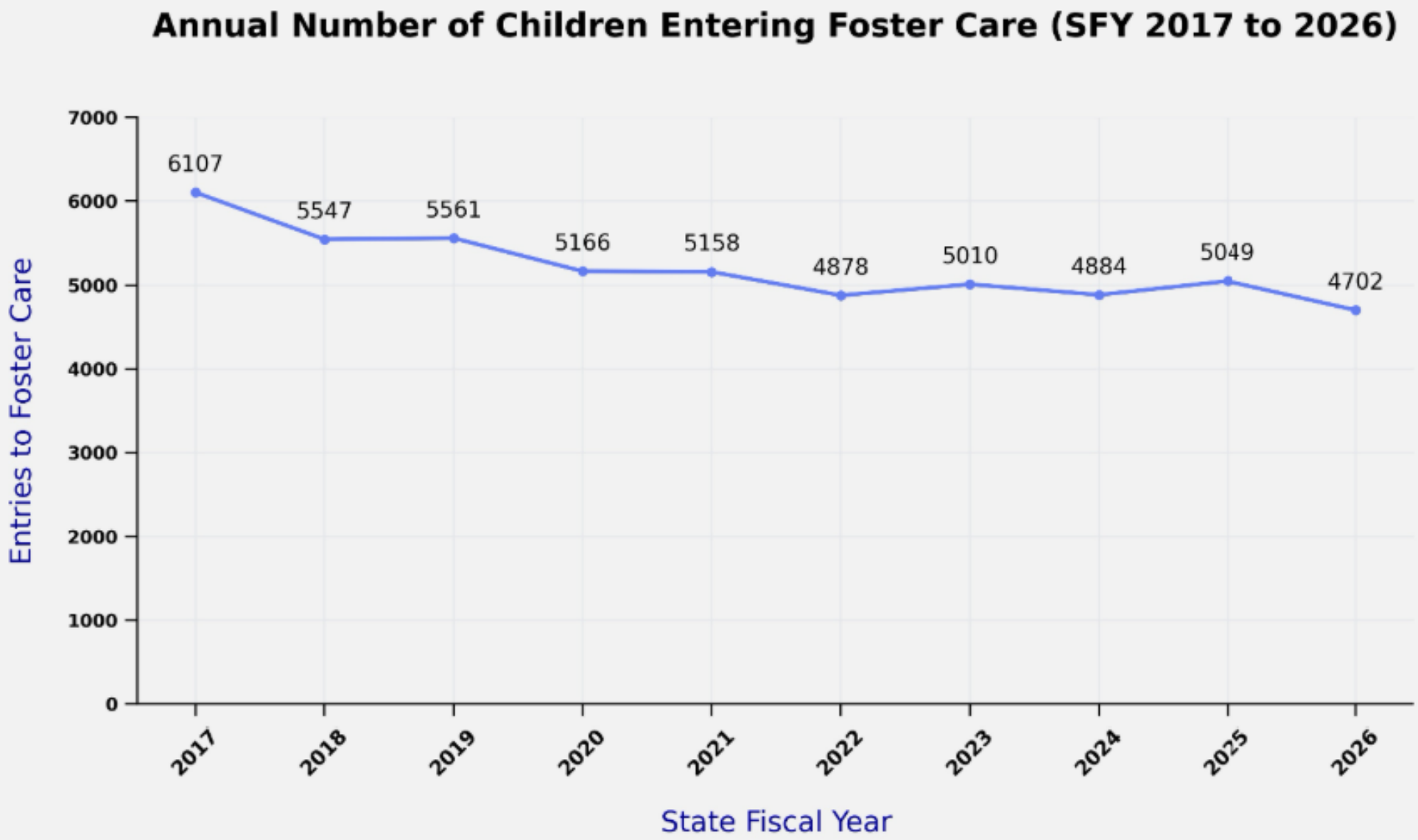
CPS Assessments – SFY 2017 – SFY 2026



CPS Assessments – SFY 2017 – SFY 2026



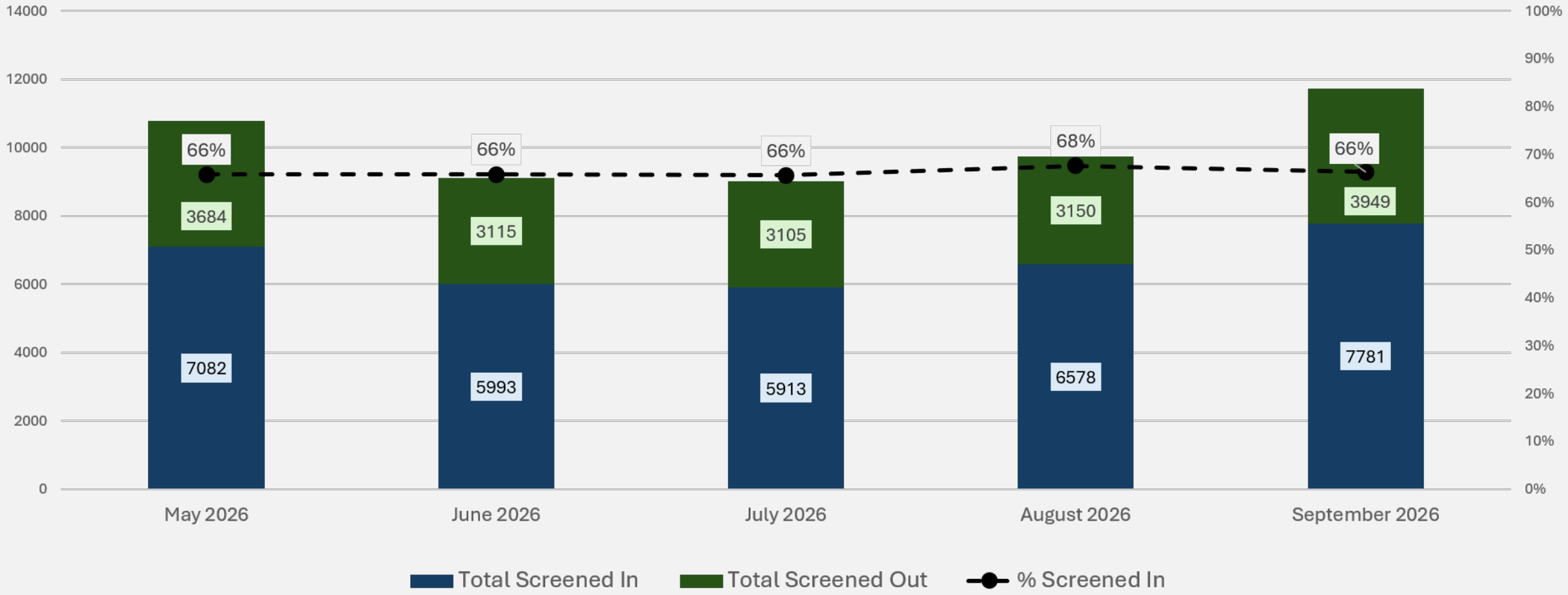
Children Entering Foster Care in NC



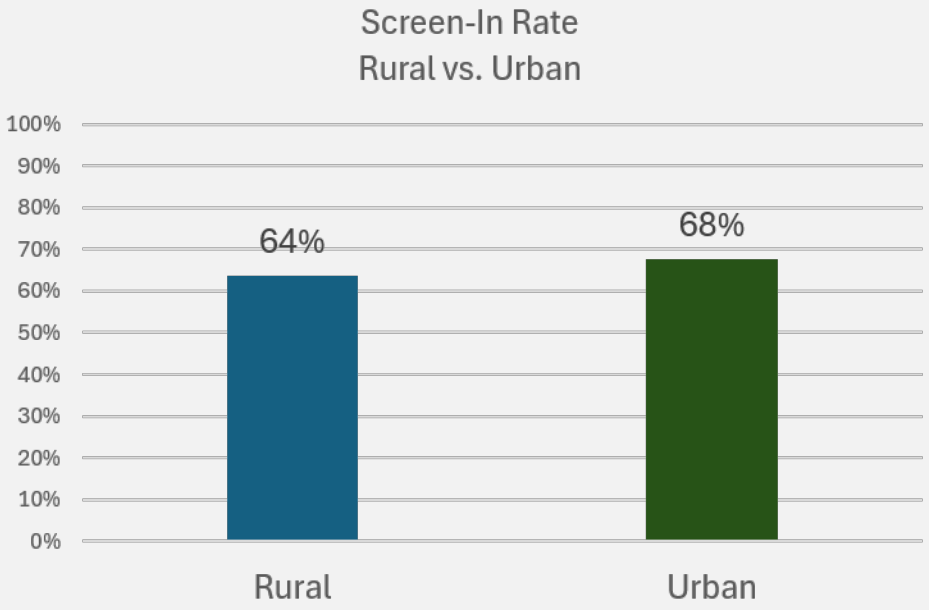
PATH NC Data – Intakes & Screen-In Rate

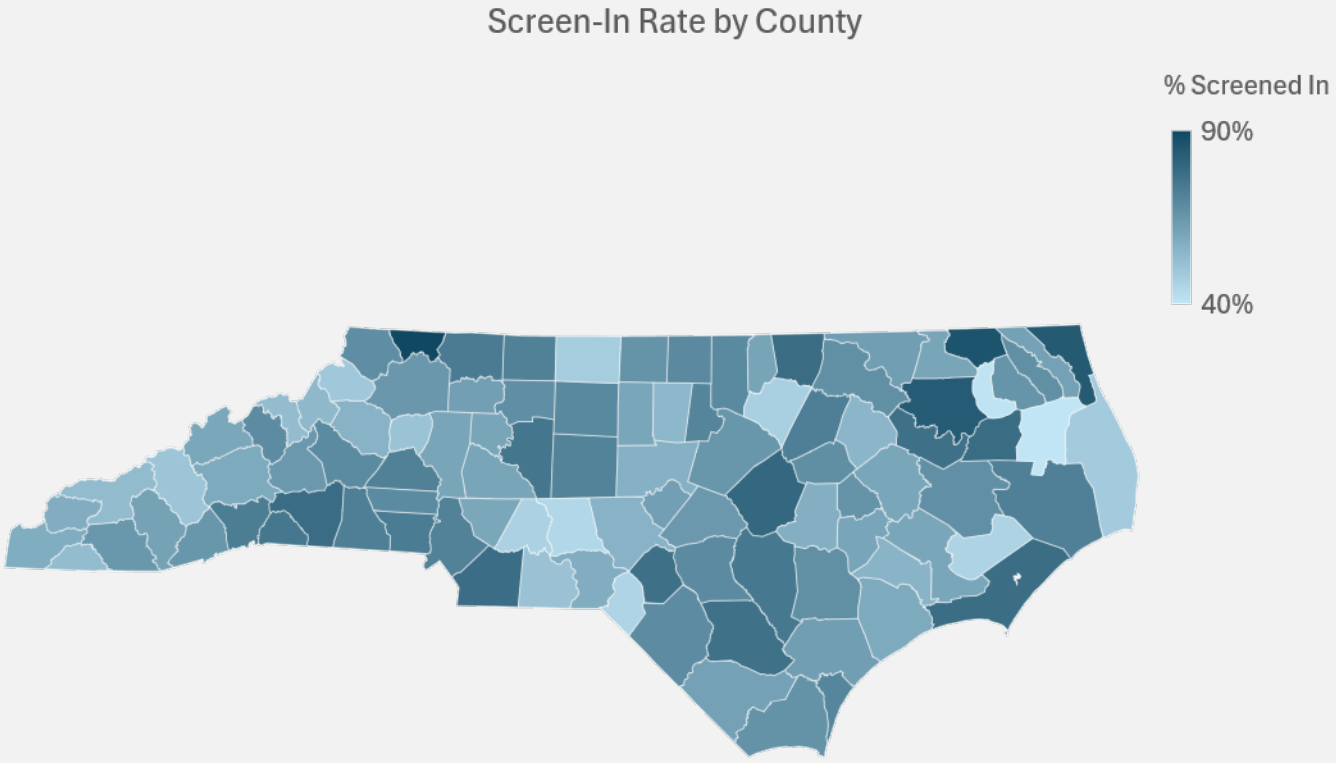
Since all 100 counties have rolled into PATH NC for I&A (May 2026 – Sep 2026):

- **50,350** total Intakes have been completed
- **66% were** Screened-In



PATH NC Data – Screen-In Rate Across NC

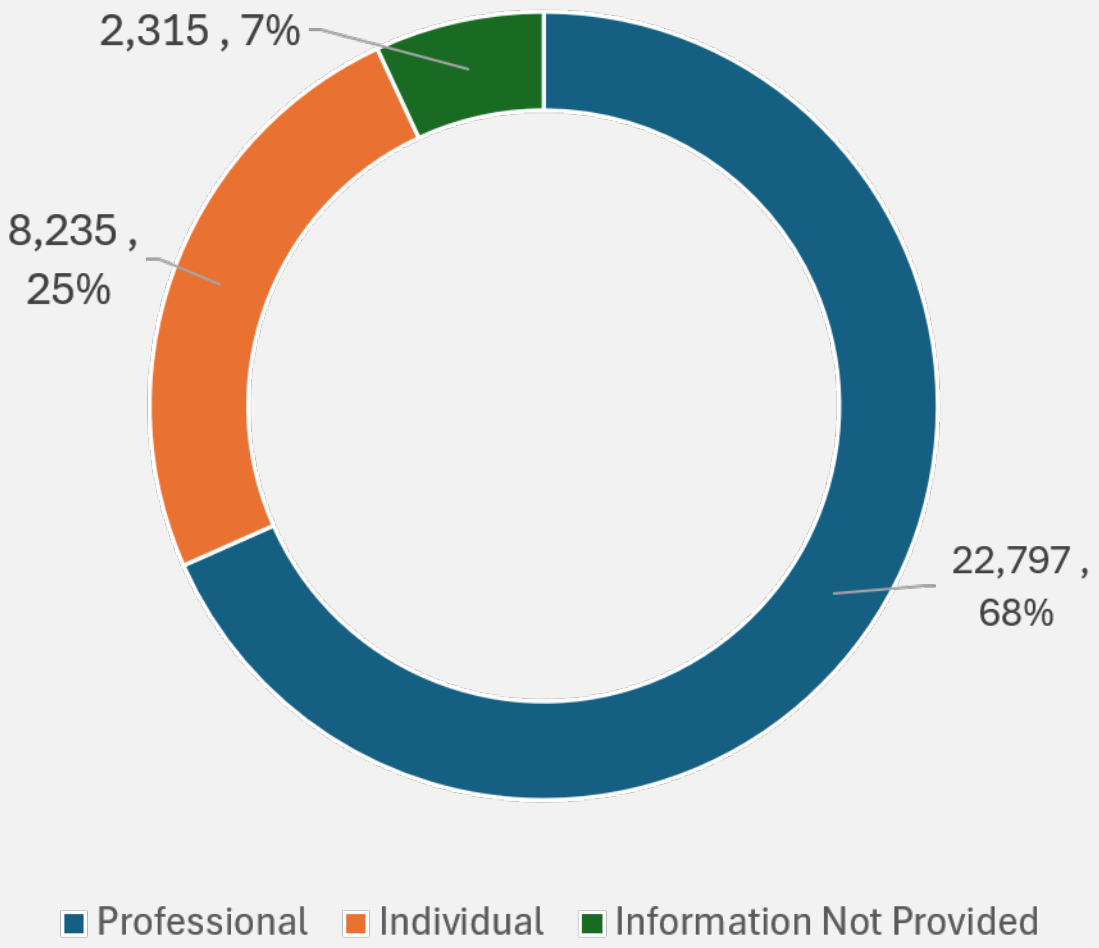




- Urban counties have a slightly higher screen-in rate than rural counties
- 68 out of 100 counties have screen-in rates within 10 percentage points of the State total rate (66%)
- Small counties with low numerators and denominators may appear as outliers in the data

PATH NC Data – Reporter Role for Screened-In Intakes

Screened-In Reports by Reporter Role



Reporter Role	Screened-In Reports	%
Legal or Criminal Justice Personnel	8,332	25%
Human Service Personnel	5,159	15%
Medical Personnel	4,659	14%
Educational Personnel	4,480	13%
Non-Relative	3,425	10%
Relative	2,951	9%
Information Not Provided	2,315	7%
Parent	1,724	5%
Child Day Care Provider	167	1%
Victim	135	0%
Total Screened-In Reports	**33,347**	**100%**

PATH NC Data – Maltreatment Allegations on Screened-In Intakes

Since all 100 counties have rolled into PATH NC for I&A (May 2026 – Sep 2026):

- **33,347** Intakes have been Screened-In
- **56,662** specific child-level allegations of abuse and neglect <u>on Screened-In Intakes</u>

Maltreatment Type	Allegations	%
Neglect	31,779	56%
Abuse & Neglect	14,608	26%
Abuse	8,797	16%
Neglect & Dependency	742	1.3%
Dependency	489	0.9%
Abuse, Neglect & Dependency	155	0.3%
Abuse & Dependency	92	0.2%
Total Allegations	**56,662**	**100%**

Maltreatment Category	Allegations	%
Physical Neglect	32,165	57%
Physical Abuse	8,924	16%
Maltreatment Details Undetermined	4,840	9%
Sexual Abuse	3,153	6%
Medical Neglect	2,819	5%
Emotional Abuse, Mental Injury	1,585	3%
Educational Neglect	1,070	2%
Caregiver Incapacity	827	1.5%
Abandonment	688	1.2%
Encouraging or Enabling Delinquent Offense, Moral Turpitude	314	0.6%
Human Trafficking	157	0.3%
Death of a Child	91	0.2%
Illegal Transfer of Custody	18	0.03%
Safe Surrender Infant	11	0.02%
Total Allegations	**56,662**	**100%**

PATH NC Data – Detailed Maltreatment Allegations on Screened-In Intakes

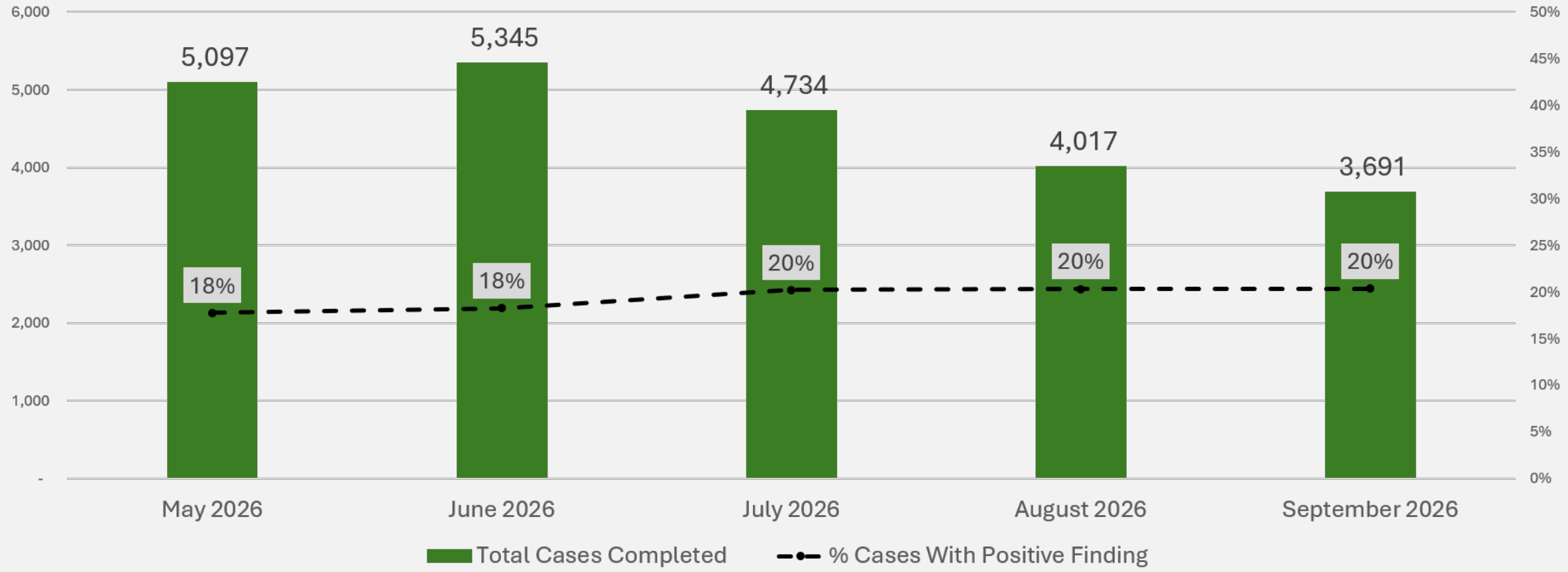
The following table shows the top 10 most common detailed maltreatment allegations made on the 33,347 Screened-In Intakes from May 2026 – September 2026. These represent 81% of all allegations. The top 4 detailed allegations represent over half of all allegations on screened-in Intakes.

Top 10 Most Common Detailed Allegations	Total Allegations
Exposure to violence in the home, injurious environment	9,823
Unsafe supervision/child left alone	9,031
Unsafe living conditions	5,731
Maltreatment Details Undetermined	4,840
Substantial risk of physical harm - threatening or dangerous behavior toward the child	4,602
Unsafe discipline	4,150
Serious physical injury inflicted by action of a caretaker	2,429
Physical health: The delay, refusal, or failure on the part of the caretaker to seek, obtain, and/or maintain necessary medical, dental, hearing or vision care when the caretaker knows or reasonably should know that such action adversely impacts the child	1,783
Unsafe food/nutrition	1,782
Caretaker actions have led to the child's severe anxiety, depression, withdrawal, or aggressive behavior toward self or others	1,585

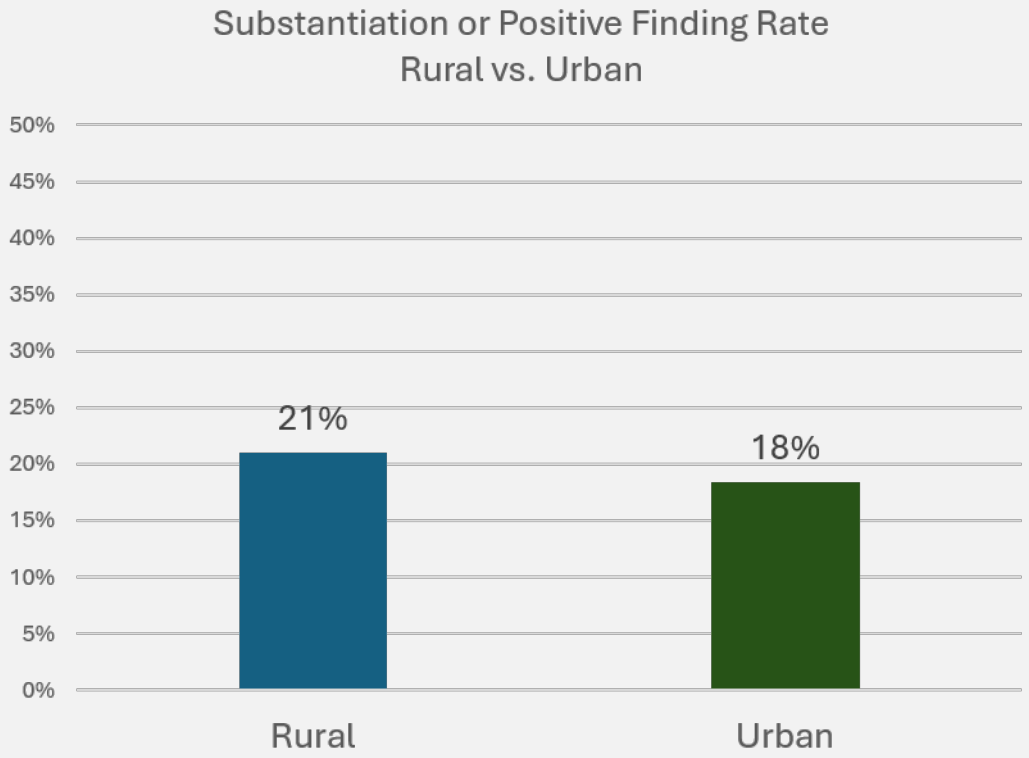
PATH NC Data – Assessments

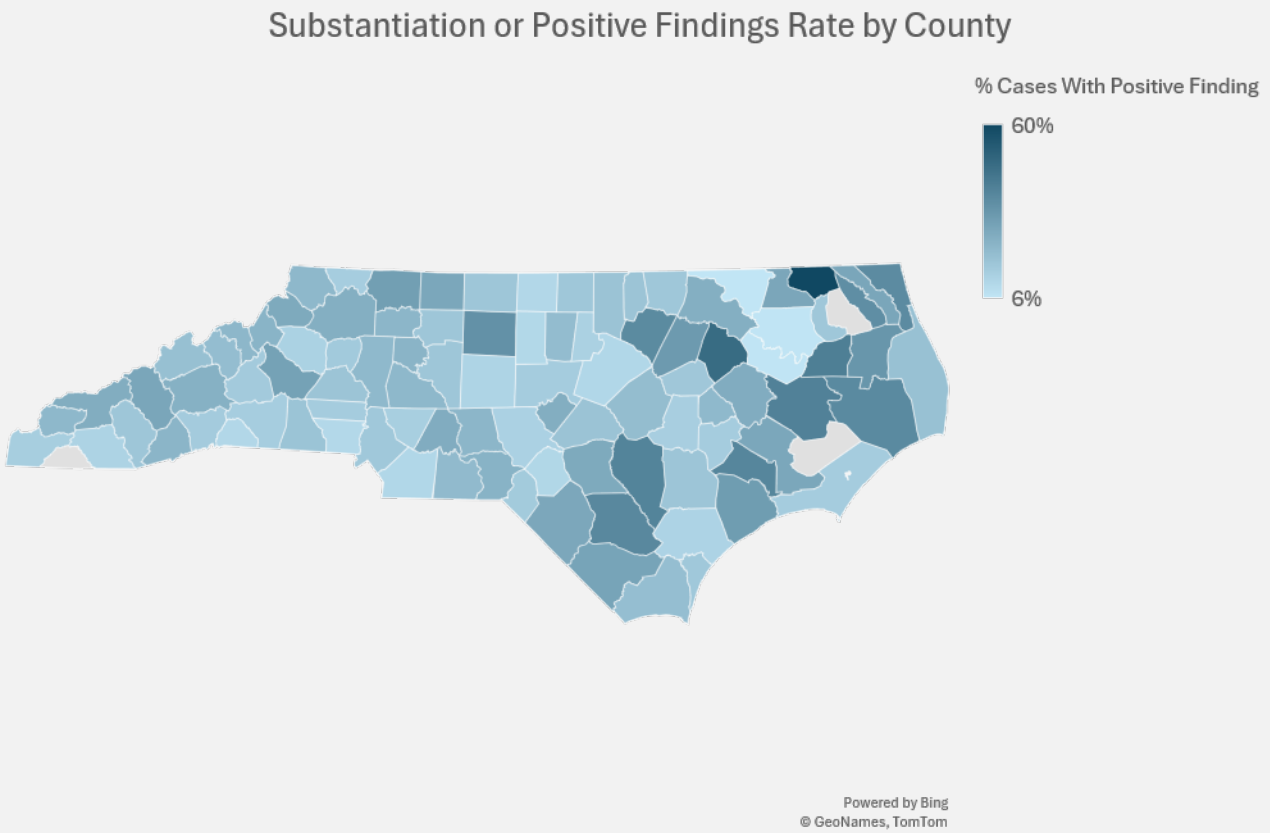
Since all 100 counties have rolled into PATH NC for I&A (May 2026 – Sep 2026):

- **22,884** CPS Assessments have been fully completed involving **48,490** children
- **19% (4,404)** of cases, **17% (8,163)** of children have been found to be substantiated or had a positive finding of maltreatment
- **22** of these cases (**45** total children) involved a death of at least one child with suspected maltreatment



PATH NC Data – Substantiation or Positive Finding Rate for Assessments

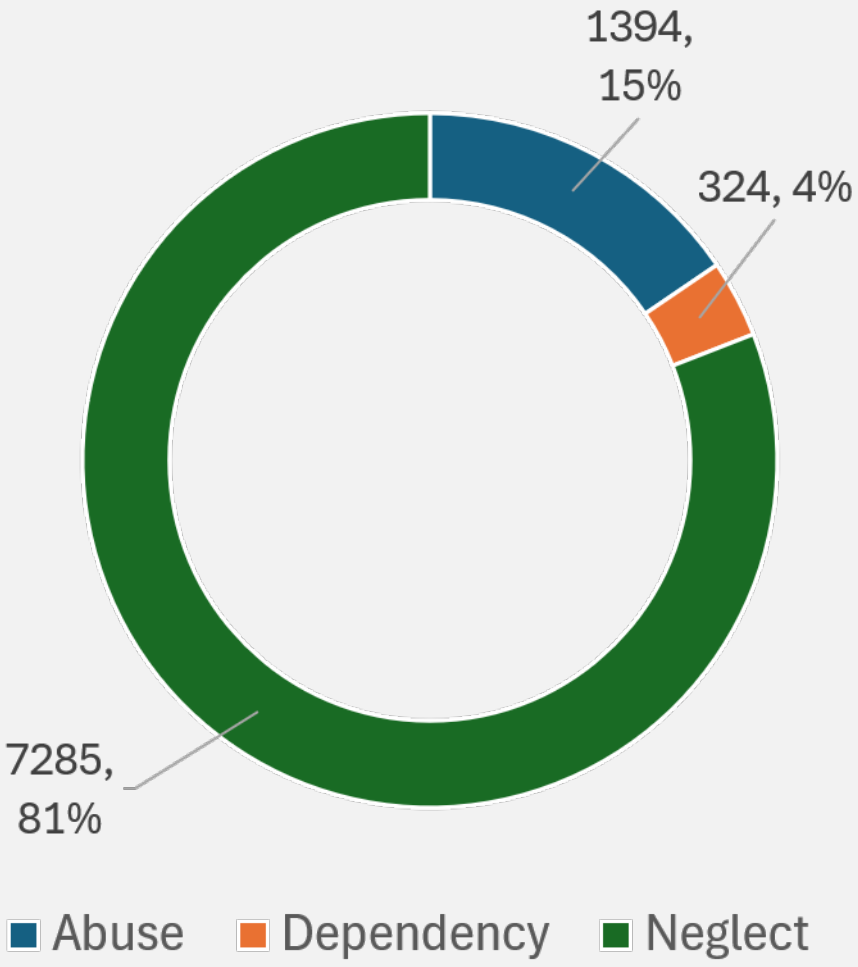




- Rural counties have a slightly higher substantiation or positive finding rate than urban counties
- 78 out of 100 counties have substantiation or positive finding rates within 10 percentage points of the Statewide rate (19%)
- Small counties with low numerators and denominators may appear as outliers in the data

PATH NC Data – Assessment Maltreatment Disposition

Children With Substantiations or Positive Findings by Maltreatment



Maltreatment Category	Children with Positive Finding	%
Physical Neglect	6,734	82%
Physical Abuse	998	12%
Medical Neglect	763	9%
Caregiver Incapacity	321	4%
Sexual Abuse	302	4%
Educational Neglect	206	3%
Emotional Abuse, Mental Injury	140	2%
Abandonment	126	2%
Death of a Child	45	1%
Encouraging or Enabling Delinquent Offense, Moral Turpitude	40	0.5%
Illegal Transfer of Custody	4	0.05%
Safe Surrender Infant	3	0.04%
Human Trafficking	3	0.04%
Distinct Children With Positive Finding(s)	**8,163**	**100%**

NC Department of Health and Human Services

Child Welfare Updates

Lisa Tucker Cauley
Division Director for Child, Family, Adult, and Regional Support Services

Donna Fayko
Deputy Director for Child Welfare Services

Oct. 20, 2026

Roles and Responsibilities

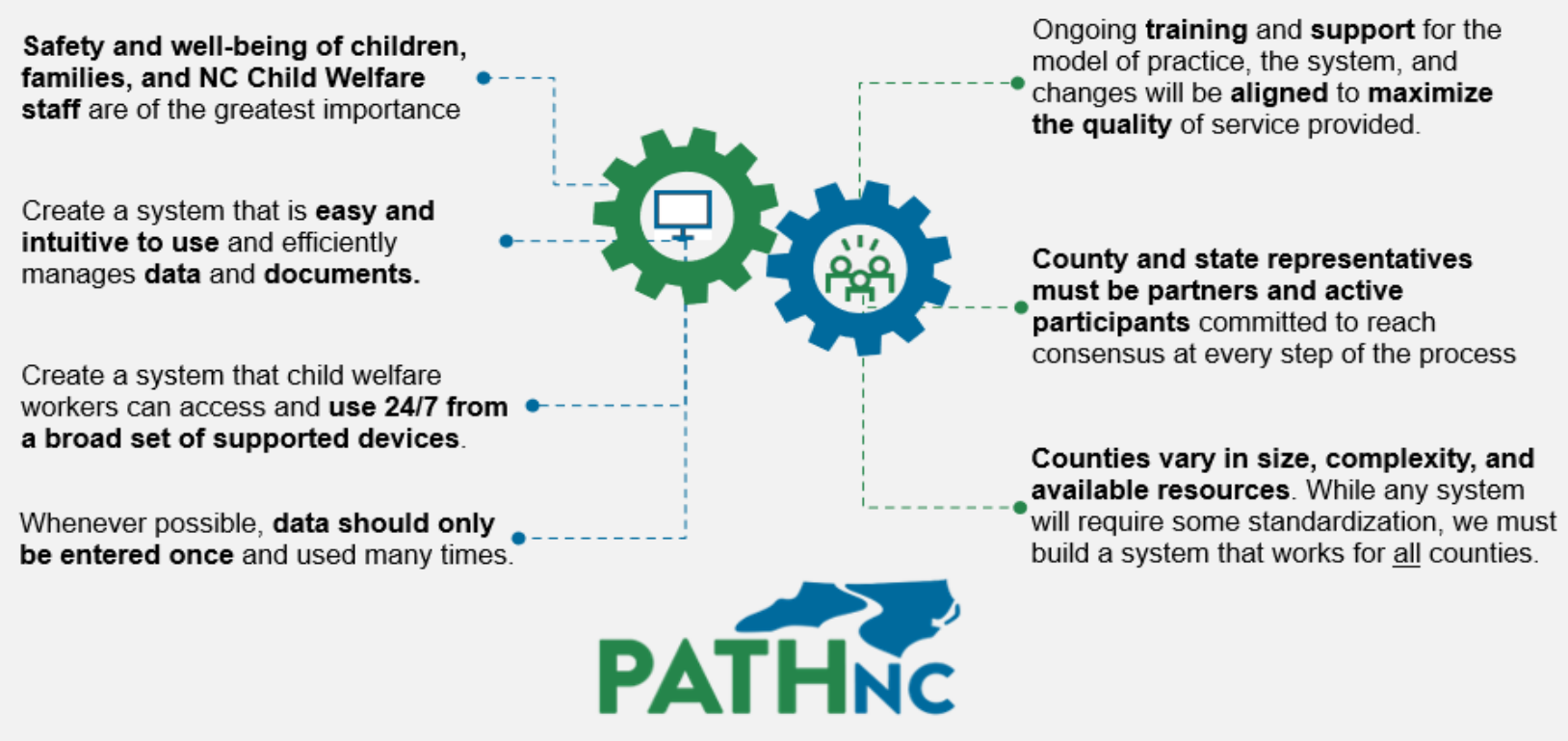
State

- Accountable to federal Children's Bureau to collect, analyze and report data, expenditures, outcomes and legislation
- Train new employees and provide ongoing training
- Interpret state law, write and revise policy
- Conduct Quality Assurance and case reviews
- Implement new programs
- System progress

County

- Implement new policies, procedures and laws at the county level
- Work with children and families
- Report data to state
- Attend trainings
- Work with the community
- Hire and retain staff

PATH NC



- Intake and Assessments implemented in all 100 counties
- Ongoing Case Management implemented in 70 counties, and rollout continues
- Screening decisions averaging 92% alignment with policy

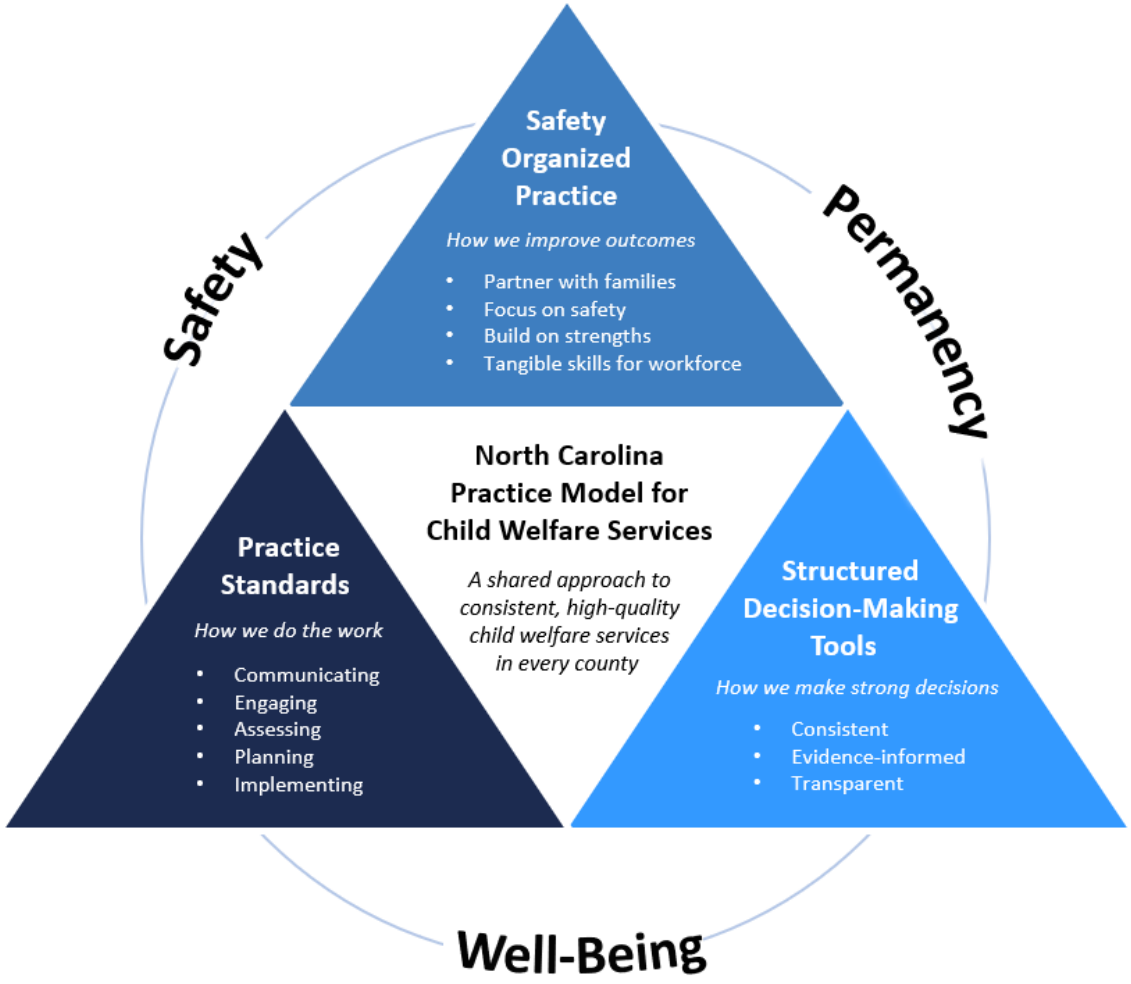
Children and Families Specialty Plan (CFSP)

- A **person-centered and family-focused** approach to care to strengthen and preserve families, prevent entry and re-entry into foster care, and support reunification and other permanency options
- Single statewide contract, **offering continuous access** to health care during transitions
- Benefits include all NC Medicaid State Plan benefits covered by Standard Plans, and most Tailored Plan benefits
- Care Management **connects DSS offices with CFSP**, including co-location
- **Supports permanency**, especially for children with complex needs
- **Improves access** to step-up/step-down behavioral health support services and trauma-informed care
- **Better coordination and transitions** into and out of residential treatment
- Phase 2 will include family members of children in foster care

Regional Abuse and Medical Specialists (RAMS)

- Provides social workers with access to **medical expertise in child maltreatment** to support assessment, safety plans, and case decisions
- Resource available 24 hours per day, 7 days per week via regional experts
- **Consultation in high-risk cases** involving children aged 3 and under, such as:
  - Poorly explained or unexplained severe injuries
  - Sexually transmitted infections (STIs) in young children
  - A household history of child fatalities
  - Suspected medical child abuse
  - Medically complex medical neglect or substance-affected infants
- Active across North Carolina's counties and **integrated with modern case management tools** like PATH NC

Workforce Development



- Redesign of Pre-Service Training, newly developed Track Trainings better prepare and support workforce

Child Welfare Education Collaborative:

- Partnership with colleges and universities to support recruitment and retention
- Stipend for students at three participating schools, plans to expand statewide
- In 2026, 45 students graduated trained and ready to join the workforce

Expanding Prevention Services

- North Carolina's Family First Prevention Services Act (FFPSA) programs focus federal funding on **evidence-based in-home programs**, **substance use support**, and **family preservation** to safely keep at-risk children out of foster care
- **HOMEBUILDERS**: intensive in-home crisis intervention and family preservation services
  - Statewide implementation, administered through contract community agencies by region
  - Since services started in February 2024, 85% of 1,583 children served by HOMEBUILDERS remained safely at home after receiving services
- **Sobriety, Treatment, and Recovery Team (START)**: supports families affected by substance use disorders and co-occurring child maltreatment
  - North Carolina has one certified START site and is piloting in six additional counties, with efforts underway to expand further
  - Nationally, children whose families participate in START enter out-of-home foster care at half the rate of children receiving traditional child welfare services
- **Parents as Teachers (PAT):** home visiting program for children ages zero to kindergarten
  - Parents as Teachers is being piloted in 10 North Carolina counties
  - Participation helps narrow kindergarten achievement gap for children at risk of foster care

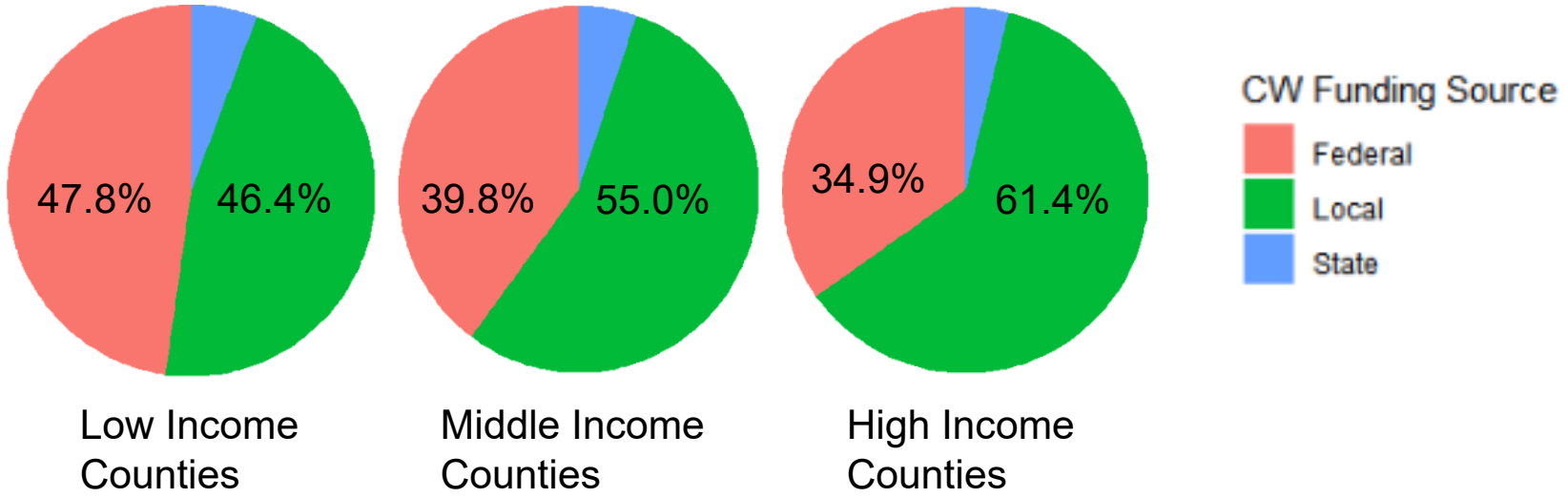
Building on North Carolina's stronger infrastructure for child welfare services

Areas of Opportunity

- Funding and local variations in resources
- Workforce and quality of practice
- Local governance and state oversight capacity
- Addressing complex needs and system gaps

Funding and Local Variations in Resources

North Carolina child welfare funding for program administration by income tier:



- Counties financed **56%** of NC child welfare administrative program funds in SFY20-21.
- However, wealthier counties fund larger shares of child welfare budgets locally.
  - As counties outstrip capped state allocations, those with **more resources and stable tax bases** can draw on additional funding to address still-remaining staffing and service needs

Workforce and Quality of Practice

- The statewide turnover rate for 2024 was 39% for child welfare staff and 22% for child welfare leadership

County Size	Turnover Rate
Small	45.54%
Medium	38.87%
Large	25.15%
State	39%

- High turnover contributes to loss of experienced workforce, increased recruitment and training demands, instability in case management
- Variations between counties in salaries, available positions, and resources contribute to staffing challenges

Local Governance and State Oversight Capacity

- In our county-administered system, 100 agencies operate within their own structures and governance models for:
  - Leadership structure
  - Personnel and HR programs
  - Financial priorities
  - Community-based resources
  - Provider networks
- Responsibilities and authority for state supervision (including enhanced case reviews through Fostering Care Act in NC) are outpacing capacity to address identified needs
- **Centralization study legislated in House Bill 696** presents opportunity to improve efficiency, oversight, capacity, and resource equity across counties

Addressing Complex Needs and System Gaps

- Gaps between child-serving systems – such as child welfare, the courts, and behavioral health – cause longer stays for children in foster care and delays in permanency (through reunification, adoption, guardianship or custody)
- DSS's responsibilities to provide for the safety of a child in their custody do not change based on whether behavioral health resources like residential treatment are available
- Gaps in service availability contribute to children sleeping in DSS offices
- Initiatives to address immediate system needs include:
  - **Enhanced Emergency Care** – providing short-term placement in a setting appropriate for a child's immediate safety, while they await a placement that meets their needs
  - **Pilot Emergency Placement Collaborative** – surging state and county resources to move children with complex needs directly into a placement that meets their needs
- Cross-system coordination will be critical to address service gaps

A Home for Every Child: Program Improvement Plan

- New, coordinated approach to address longstanding challenges in child welfare
- Shared strategies that align child-serving systems such as child welfare, courts, behavioral health, NC Medicaid, private agencies, and more
- Four statewide focus areas:
  - Strengthening foundations of practice
  - Improving placement quality and stability
  - Increasing foster care capacity
  - Decreasing demand through safe, timely permanency
- Adoption reinvestment funding will support counties in implementing strategies to safely reduce the number of children in foster care
- Right-sizing foster care reduces caseloads, relieves workforce burden, and supports higher-quality practice
- Combined with efforts to reduce office boarding, the PIP helps to address root causes of system strain and supports sustained improvement across systems

Recognizing Progress

- PATH NC statewide technology system
- New Structured Decision-Making tools
- Expanded access to services that prevent entry to foster care
- Better coordination of care through CFSP
- Improved training for new workers
- Supporting recruitment through CWEC
- RAMS resources for high-risk cases

Priorities Moving Forward

- **Additional funding** to improve resources and outcomes across counties.
- Statewide, system-level efforts to **stabilize the workforce**.
- Stronger **coordination and accountability across systems** that serve children with complex needs.
- **Improving capacity** to monitor and support child welfare practice.

Questions?

Berkeley Social Welfare

Child welfare practice and critical decision making

Jill Duerr Berrick
North Carolina Child Fatality Task Force

Berkeley
UNIVERSITY OF CALIFORNIA

Outline for today

- Factors that increase risk in child protection
- Decision making in child protection
- Navigating the competing principles in child protection

Fatalities due to maltreatment

- 1,773 (2024 data)
- 2.41 per 100,000 children
  - 66% under age 3
  - 45% under age 1
  - Black children are 3.5x more likely to die than White children
  - 78% due to neglect
  - 13-14% had received child welfare services in the previous 5 years
  - 2-4% had returned home after foster care in the previous 5 years

Fatality as an outlier event

- 4.4M referrals to child abuse hotlines (2024)
- 7.7M children
  - Approx 2M referrals “screened-in”

- Adequate staffing
- Adequate training
- Adequate supervision

Narrowing the likelihood of fatality

Staffing

- Chronic vacancies
- Persistent staff turnover
- Contributors to recruitment & retention challenges:
  - Pay
  - Job stress / emotional tax
  - Workload
  - Quality of supervision / support
  - Organizational culture & climate
  - Time for healing & family change

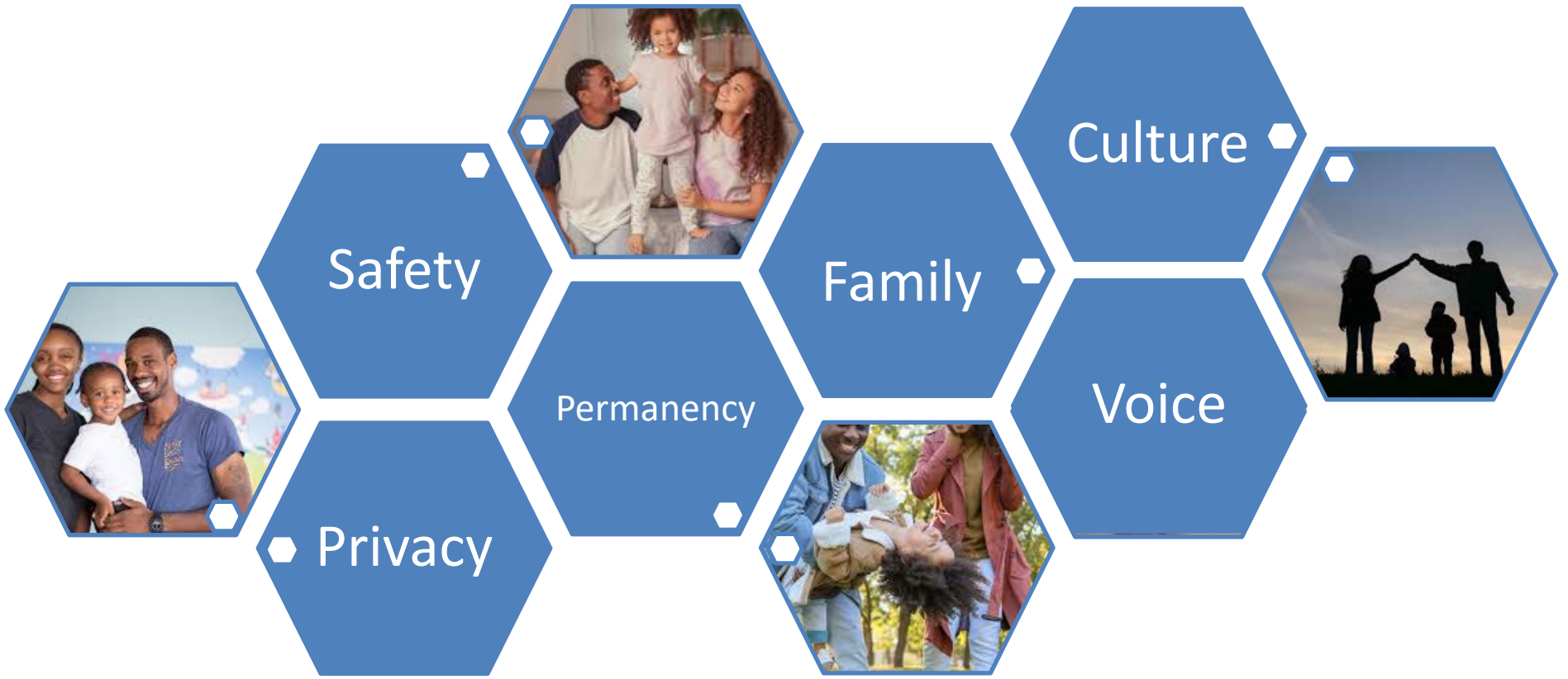
Social Worker Role

- Inspiring change
- Supporting healing

- Decision maker
  - Hotline screening
  - Investigations
  - Appropriate services
  - Removal
  - Reunification
  - Alternative permanency

Decision Making under Conditions of Uncertainty

- Limited information
- Obscured information
- Limited time
- Competing priorities


Safety
Permanency
Privacy
Family
Culture
Voice



The Opinion Pages | EDITORIAL

Young Victims of the Opioid Epidemic

By THE EDITORIAL BOARD JAN. 16, 2017

WINSTON-SALEM JOURNAL

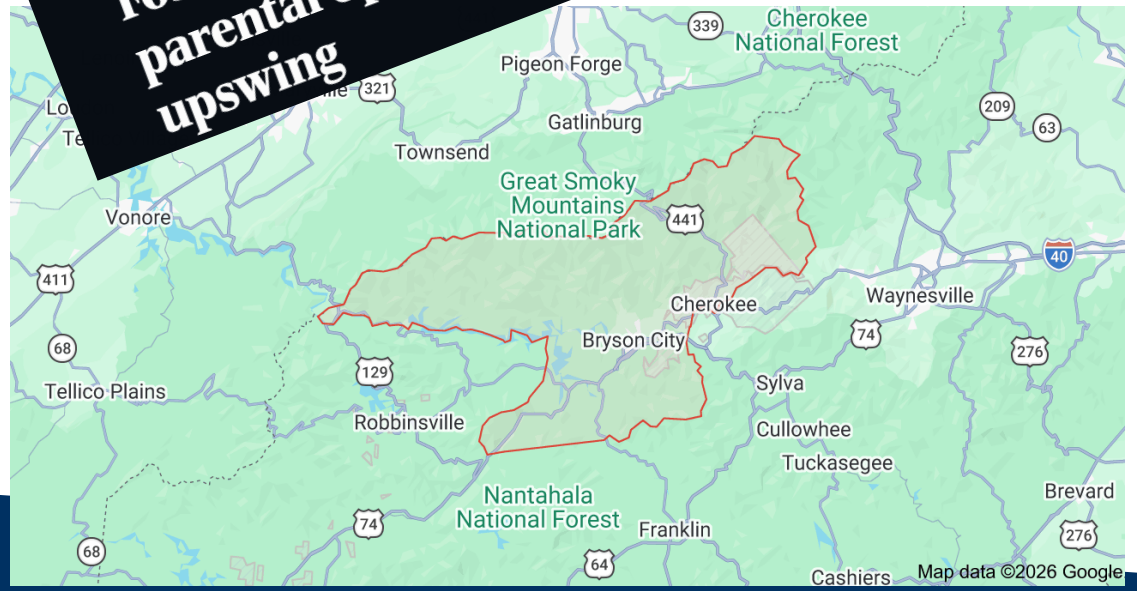
E-edition News Obituaries Opinion Sports Puzzmo Puzzles Lifestyles Public Notices Homes

Search Winston-Salem Journal

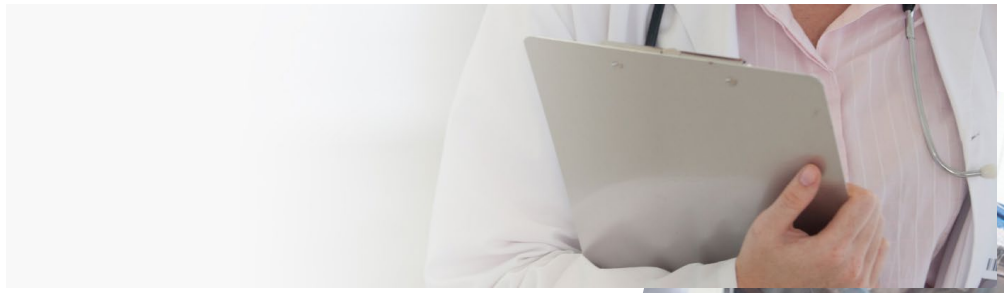
A Lee Enterprises, Incorporated newspaper. Majority shareholder: David Hoffmann, Hoffmann Media Group.

55° Cloudy

Foster care placements rising in Triad; parental opioid addiction contributing to upswing



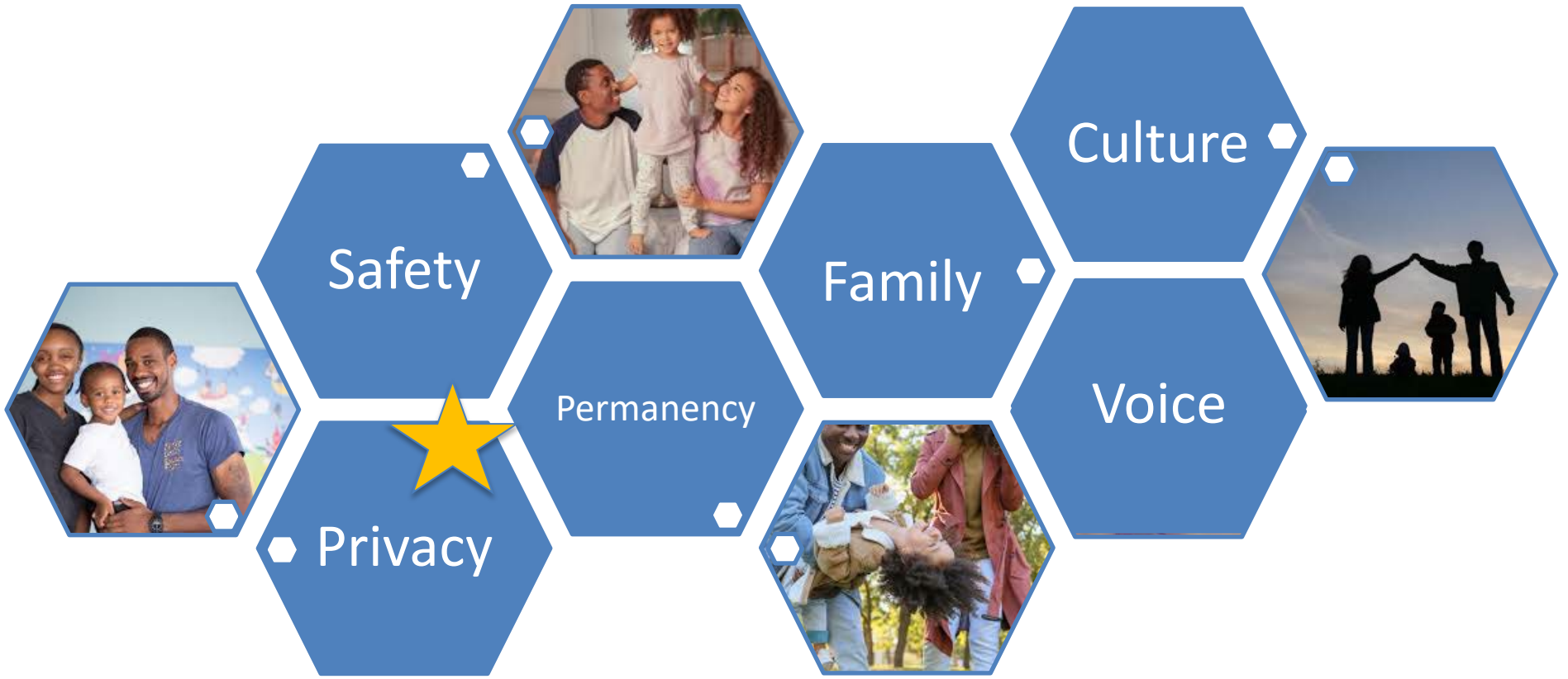
Berkeley
UNIVERSITY OF CALIFORNIA







Berkeley
UNIVERSITY OF CALIFORNIA



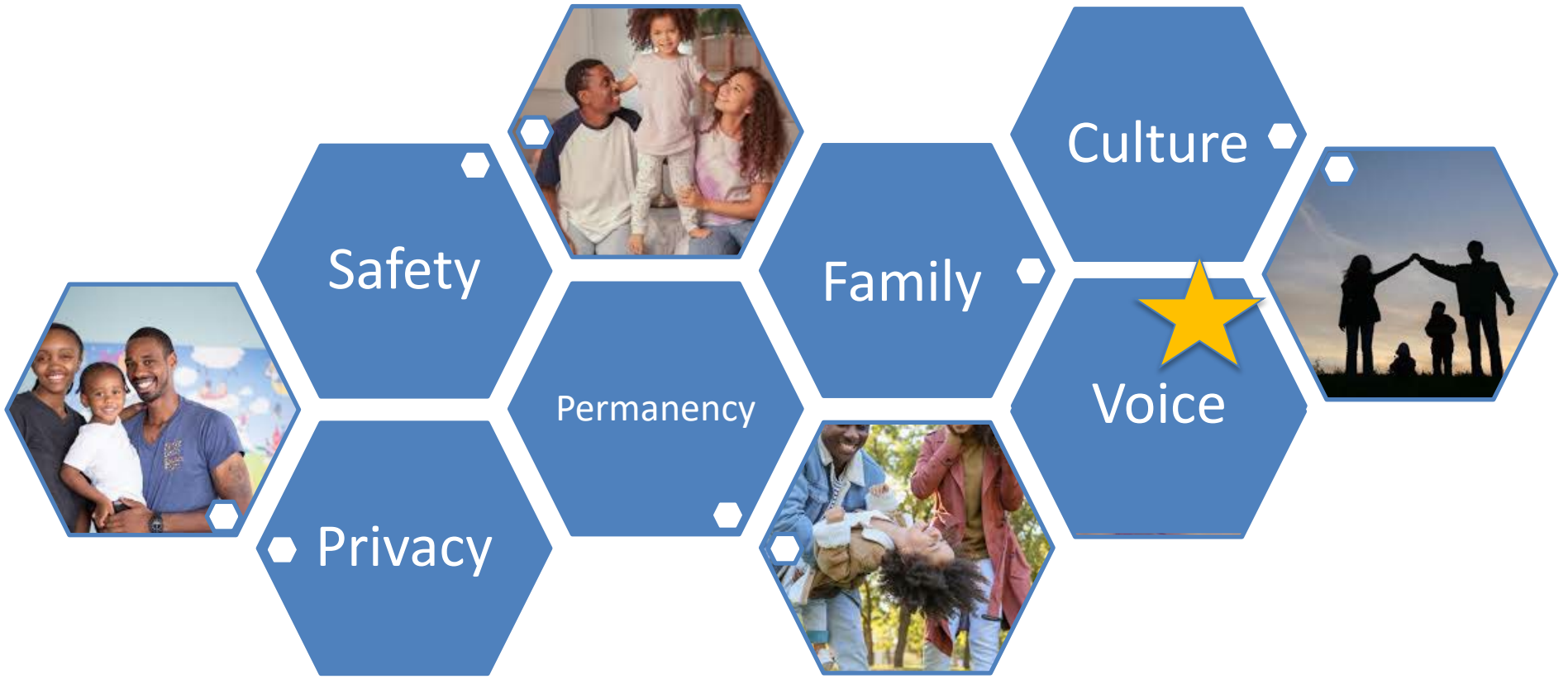
Berkeley
UNIVERSITY OF CALIFORNIA



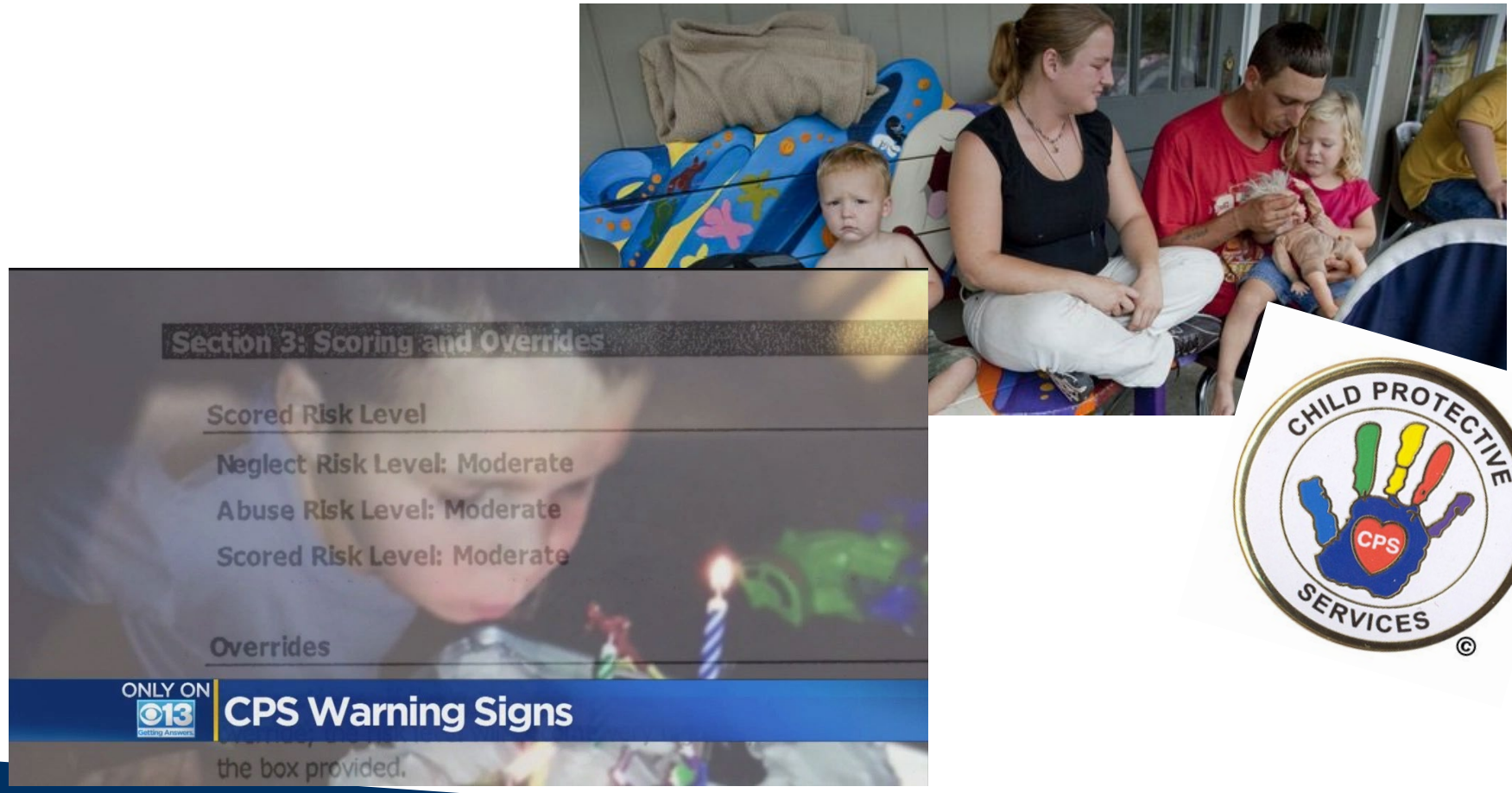


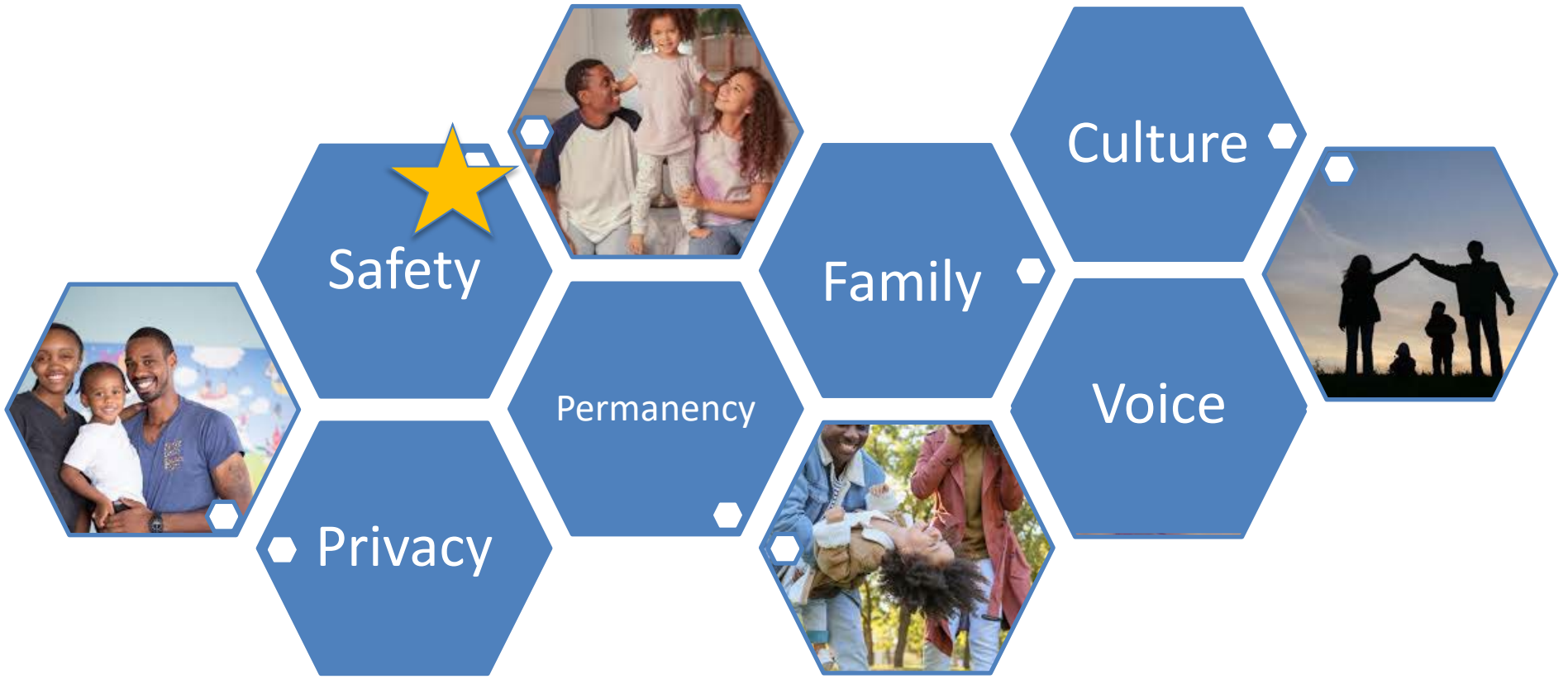

Danger/Harm
Vulnerable Child
Complicating Risk Factors





Berkeley
UNIVERSITY OF CALIFORNIA


Section 3: Scoring and Overrides
Scored Risk Level
Neglect Risk Level: Moderate
Abuse Risk Level: Moderate
Scored Risk Level: Moderate
Overrides
ONLY ON 13
CPS Warning Signs
the box provided.


Safety
Permanency
Privacy
Family
Culture
Voice







Berkeley
UNIVERSITY OF CALIFORNIA

NORTH CAROLINA | *Commentary*

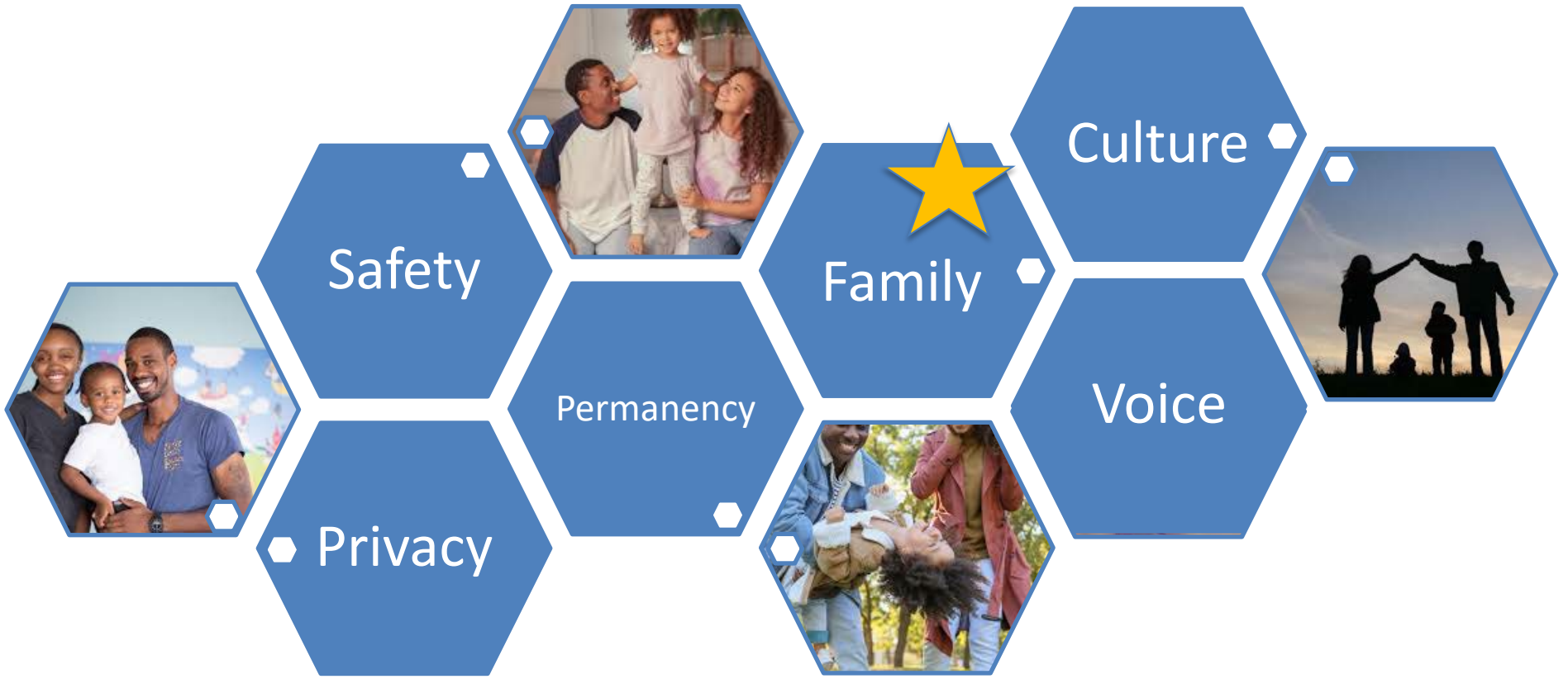
North Carolina says family comes first. Our foster care policies should, too.

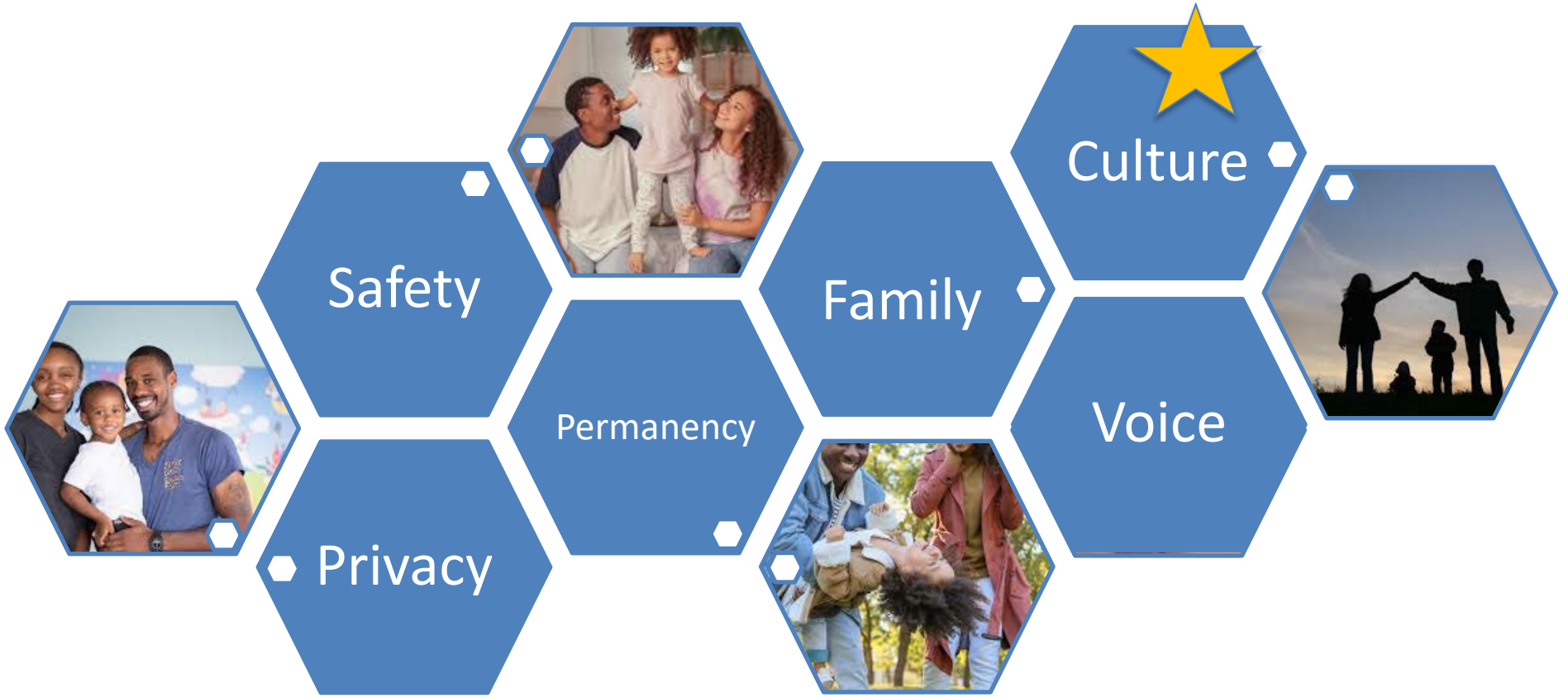




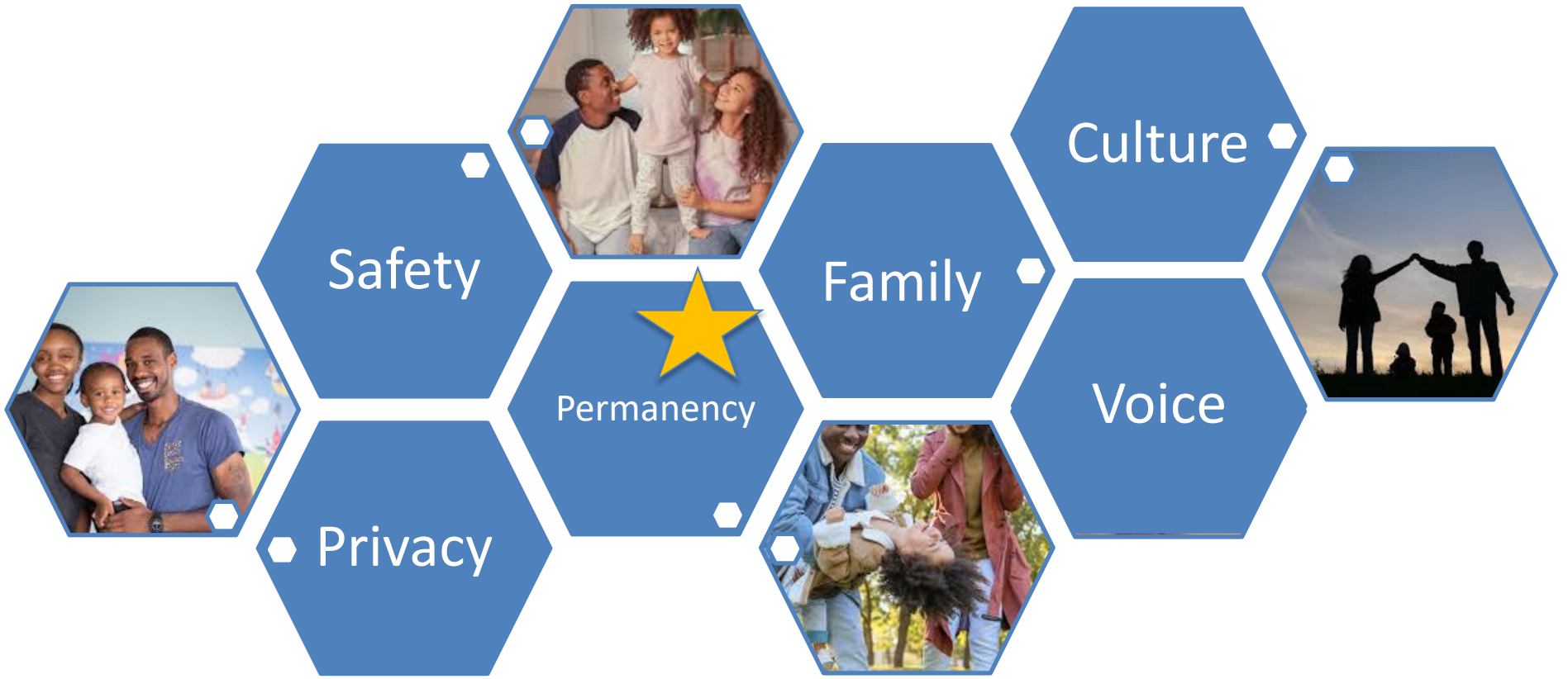


Berkeley
UNIVERSITY OF CALIFORNIA


Safety
Permanency
Privacy
Family
Culture
Voice



Berkeley
UNIVERSITY OF CALIFORNIA



Berkeley
UNIVERSITY OF CALIFORNIA



Berkeley
UNIVERSITY OF CALIFORNIA

After child deaths, NC steps in to run Davidson County child welfare agency





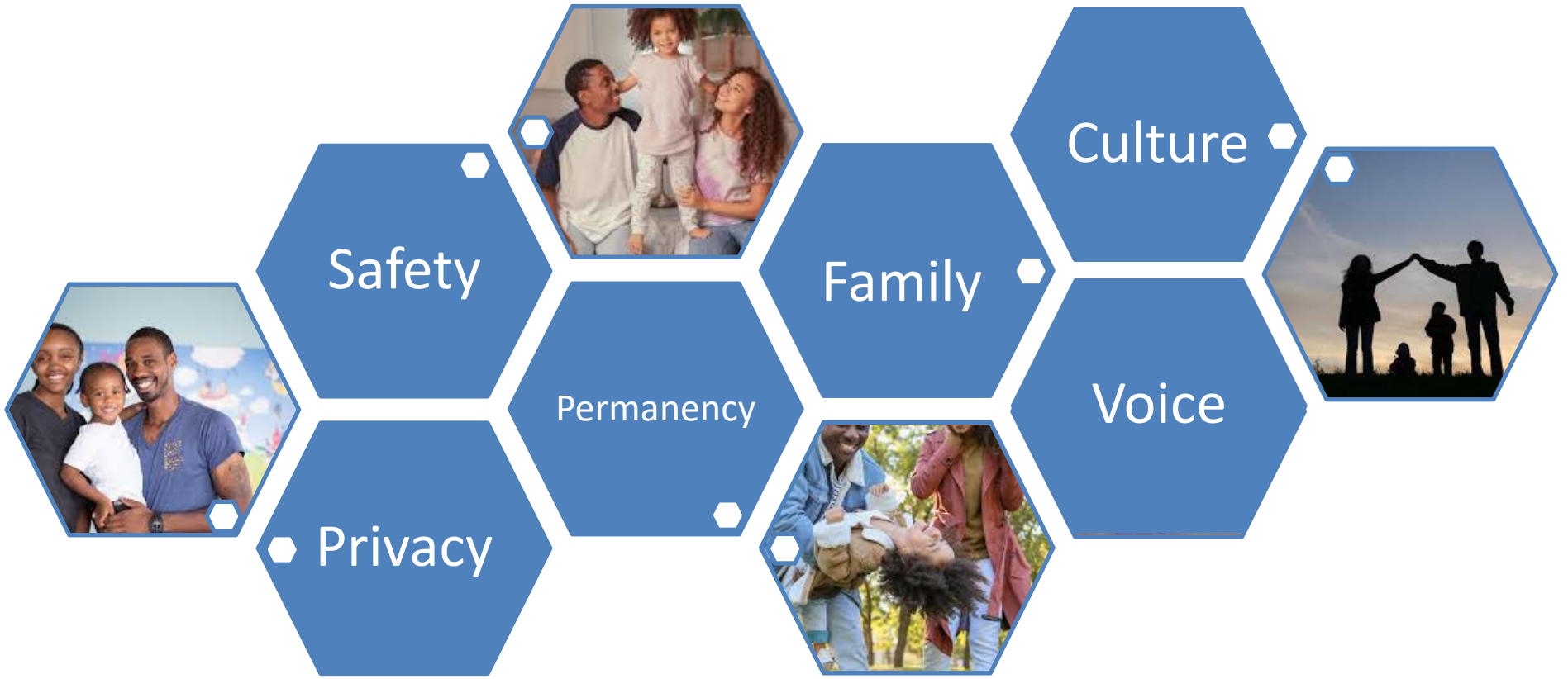
NC lawmakers eye more child welfare changes after Charlotte girl's death exposes chronic gaps in the system

Berkeley
UNIVERSITY OF CALIFORNIA

Thoughts about minimizing the likelihood of fatality in the context of child welfare

Berkeley
UNIVERSITY OF CALIFORNIA

- Support effective social work practice
- Set the context for good social work practice
- Recognize, embrace, and articulate competing principles
- Avoid “right” vs. “wrong” thinking in favor of reasonable assessments.


Safety
Permanency
Privacy
Family
Culture
Voice

Committee Discussion on Child Welfare Topic & Next Steps

Announcements & Adjourn