

## Child Fatality Task Force



# Administrative Recommendations and Issue Monitoring Update July 2011

## Perinatal Health

- **Coordinate efforts to work with hospitals to reach new parents with important messages;**  
*Dr. Verbiest coordinated a team of graduate students who worked with a variety of partners to explore ways to improve this process. Key stakeholders were convened and progress is underway*
- **Support Medicaid reimbursement for certified lactation consultants.**  
*This issue continues to be explored within the Administration.*
- **Distribute materials relating the NC Blueprint for Breastfeeding.**  
*The Blueprint is available for anyone who would like a copy. The State Breastfeeding Coordinator in the Division of Public Health is working to compile an updated status report on the progress that has been made towards achieving those goals.*
- **Encourage counties and municipalities to adopt local guidelines consistent with the State Personnel HR Guidelines on Lactation Support.**  
*The League of Municipalities and the Association of County Commissioners have been contacted about this issue. Additionally, the NC Chamber has been contacted to see what supports might be helpful to businesses to voluntarily adopt breastfeeding friendly policies, which have been shown to reduce turnover and absenteeism and well as lower medical/health insurance costs.*
- **Monitor strategies that affect infant mortality racial disparities.**  
*The Perinatal Health Committee held three meetings on this topic with presentation from national experts, researchers, local program directors and others. A subcommittee will explore the issue further. All materials, included brainstormed possible action steps, are available of the CFTF website.*
- **Track legislation on midwives and/or home births.**  
*Legislation was filed (H522 and S662) to establish a NC Council of Certified Professional Midwives which can set requirements for licensure, employee staff, set fees for licensure, determine fitness of applicants, conduct investigations and receive 3<sup>rd</sup> party payments. There are many other provisions as well. It was deemed appropriate for consideration by the Joint Legislative Committee on New Licensing Boards. Since there is a fiscal impact, it is eligible for consideration in during the 2012 short session.*
- **Monitor proposals that affect access to care for pregnant women and women of childbearing years.**  
*The Task Force monitored many budget proposals that could affect access to care, including rates paid to doctors, services covered, medical homes for pregnant women and health care for newborns and other children. On-going concerns include no continuation of funds for the ECU high-risk maternity clinic, the elimination of the Health and Wellness Trust Fund, and changes in the Office of Minority Health and Health Disparities that could reduce services for pregnant women and infants.*

## **Intentional Death Reduction**

- **Endorse full implementation of the Strategic Plan for the NC Medical Examiner System, including regionalization with trained death scene investigators.**  
*The State Team withdrew this request as the OCME seeks to re-evaluate the plan.*
- **Place a high priority on a comprehensive case management system through NC FAST for the Division of Social Services (DSS).**  
*Funding was provided for NC FAST in the budget (up to \$9.6 million nonrecurring in each of the next two fiscal years). However, the top priority is addressing higher volume programs (such as food assistance and health insurance). DSS is exploring other strategies to develop a statewide system that will help monitor core activities and keep track of cases that cross county lines.*
- **Encourage the Division of Public Health to continue to work with partners to explore development of a surveillance system for child abuse and neglect.**  
*The Injury and Violence Prevention Branch of the Division of Public Health was among a handful of successful applicants for CDC funding to enhance surveillance for child abuse and neglect. (The Task Force wrote a letter in support of the application.) The scope of work includes an epidemiologist position focused on developing a child maltreatment surveillance system. Additionally, two of their letters of intent to Rex Endowment were approved for the submission; one focuses piloting child maltreatment surveillance in Wake County. (The other seeks to reduce teen driving injury and death.)*
- **Continue work with DSS to understand and improve strategies relating to the process, including screening, in-take, multiple response system, and reports back to people who refer families for DSS services.**  
*DSS will report on progress at an upcoming Intentional Death Committee meeting.*
- **Monitor CARELINE and other warm lines for suicide prevention.**  
*The CARELINE was eliminated. The Division of Developmental Disabilities, Mental Health and Substance Abuse Services is working to assure that suicide calls are routed appropriately and that all are handled in-state by September 2011.*
- **Track progress on training of child care workers to recognize and report signs of child abuse.**  
*Prevent Child Abuse NC is working on online training appropriate for educators and others on recognizing and referring child abuse and neglect concerns. They anticipate completion of the first product in fall of 2011.*

## **Unintentional Death Reduction**

- **Promote state efforts to effect as soon as possible the establishment of permanent drop-off locations for unneeded medications.**  
*Until very recently, only law enforcement could take control of unneeded medications, due to federal law. This law has changed. Rule making is in process and exact procedures are not yet set. Safe Kids has committed to purchasing secure lock-boxes for drop-off in select pilot sites across the state, including a 24 hour pharmacy in a hospital, fire stations, and other locations. The CFTF has convened meetings of stakeholders.*
- **Support efforts of State Board of Education to decrease sports injuries.**  
*Rep. Folwell championed legislation to address this issue. The Gfeller-Waller Athletic Concussion Awareness Act (H792) requires that coaches, other school personnel and parents of middle and high school athletes receive information about concussions and prohibits same-day return-to-play. Only once cleared for play by specified health providers may athletes later return to practice or play. Would become effective in the upcoming (2011-2012) school year.*
- **Support creation of the Department of Public Instruction coordinator position focused on driver education currently in process between DPI and the Department of Transportation to implement a standardized curriculum, data collecting/analysis and other key functions.**  
*The Department of Public Instruction has applied for an extension grant from the Governor's Highway Safety Program for continuing to employ a full time Driver Ed consultant.*

- Support work of the driver education curriculum development committee (arising from study bill) towards creation of an effective standardized driver education program, including evidence-based curriculum changes and behind-the-wheel requirements.**

Many changes occurred that affect driver education. The budget (H200) establishes elements that must be covered in driver education classes, such as six hours of driving time, one hour of motorcycle awareness and six hours on the "offense of driving while impaired and related subjects." The State Board of Education will set requirements for driver education instructors. Local boards may charge up to \$45 for driver education instruction. Modify Driver Education Program (S339) directs the State Board of Education to adopt a salary range for driver education instructors. Here is the proposed draft driver education curriculum approved by the SBE in March (starts on page 19):  
<http://www.ncpublicschools.org/docs/stateboard/meetings/2011/03/hrs/03hrs.pdf>
- Support the Child Care Commission rule to require that child care providers inform parents about whether or not the provider carries liability insurance.**

The Child Care Commission voted to publish rule text regarding liability insurance in May. Given the process requirements, it will likely be January 2012 before the rule (if adopted) will into effect.
- Monitor and support federal efforts to reduce childhood exposure to toxins.**

Senator Lautenberg (NJ) introduced S 487, the Safe Chemicals Act. Hearings may begin this fall. For more information: <http://www.saferchemicals.org/safe-chemicals-act/index.html> Also, a study in [Pediatrics](#) found that a tenfold increase in the amount of any of four organochlorines -- chemicals used in pesticides before they were banned in the U.S. and other countries -- in the umbilical cord of newborns corresponded to a decrease of approximately 2 to 4 ounces in their birth weight. Researchers also said higher levels of DDT correlated to smaller head circumference, while hexachlorobenzene was linked to shorter birth length. They noted the findings don't indicate that pesticides are the direct cause of fetal growth obstruction. The Child Fatality Task Force has written letters to all members of our Congressional Delegation regarding this issue.
- Monitor proposed changes to the graduated driver license system (arising from mandated study in study bill).**

Driving log, revocation of provisional license for charges of serious offenses and other changes go into effect October 1, 2011. Since North Carolina adopted graduated driver licensing, crashes are down 38% for 16-year-olds and 20% for 17-year-olds, among the best results of any state. Time spent driving and gaining experience are critical for teens learning to drive more safely. Changes from Modify Graduated Licensing Requirements (S636) include requiring that learning drivers keep a log of time and conditions driven. Additionally, a provisional license will be revoked if the licensee is charged with a variety of serious driving violations, such as excessive speeding. The Division of Motor Vehicles is charged with evaluating the effectiveness of the provisions.
- Monitor proposed federal requirements or proposed state changes to laws affecting child agriculture workers.** A national survey last month showed that 4 out of 5 Americans agreed that child labor laws should protect children equally, regardless of the industry in which they worked. <http://farmworkersforum.wordpress.com/2011/06/19/american-public-young-farmworkers-deserve-equal-protection-of-child-labor-laws/>