



# Building Relationships Between Fatality Review Teams and Schools

*National Center Guidance Report*



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# Building Relationships Between Fatality Review Teams and Schools

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## Purpose

Ensuring that child death review (CDR) teams have healthy, productive, and innovative relationships with schools is critical to the CDR process. Engaging schools in CDR aids the review team, and ultimately the community in understanding the context in which a child lived and died. **Most importantly, these relationships are vital for preventing future deaths.**

This guidance seeks to provide information about CDR; outline current collaborations with schools, define the vital role school officials play in multidisciplinary review; discuss the Family Education Privacy & Rights Act (FERPA); and offer suggestions for building or enhancing relationships between schools and CDR teams.

A coordinated response to a child's death is vital to preventing future deaths. Schools are an important public health partner for supporting the well-being of children and adolescents. Youth spend a significant portion of their day in school. Schools provide a multitude of essential services beyond a quality education, including physical and mental health services. Children often learn common information about fire prevention, water safety, motor vehicle safety around car seats and teen driving, and even infant safe sleep at school. Given these vital roles, schools have information on significant protective and risk factors for youth. Specifically, schools can have information on factors such as bullying, academic performance, social integration, peer influence on topics such as substance use, and acceptance of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth.<sup>1,2,3,4,5</sup>





# Child Death Review

## Overview

*The purpose of CDR is to provide a comprehensive and multidisciplinary review of the circumstances surrounding child deaths to better understand how and why children die. These findings are used to catalyze action to prevent future deaths and ultimately improve the health and safety of communities, families, and children.*

CDR enables states and communities to identify underlying risk and protective factors related to child deaths and to use that information to create meaningful change and safer communities. This generates a deeper understanding of how the child lived and why the child died. There are more than 1,350 CDR teams in all 50 states, the District of Columbia, and within Native American Tribes. Although they sometimes go by different names, review different types of deaths, or operate out of different agencies, these programs share their commitment to learning from the tragedies they face and help protect children in the future. CDR teams operate at the state, regional, county, or city level. Each state has an identified CDR coordinator that supports CDR in a variety of ways. That support varies by state depending on funding and structure. [Find your state's coordinator](https://bit.ly/3vTfvh3) (URL: <https://bit.ly/3vTfvh3>).

CDR teams are comprised of members from multiple disciplines, agencies, and organizations, including law enforcement, child protective services, the judicial system (e.g., prosecutor), the medical examiner/coroner, public health, and medicine (e.g., pediatricians, first responders).

### EDUCATIONAL REPRESENTATIVES

Educational representatives should also be invited to participate in CDR teams because of their unique insights into school age populations and access to important information highlighting risk and protective factors.

Additionally, teams may choose to include other members depending on the type of death reviewed, community interests, and if mandated in legislation. Teams are most successful when members have open, honest, and cooperative relationships and dialogue. Team members must also be willing to advocate for change to prevent future deaths.

During the review process, CDR teams collect extensive data on the child, the family, the incident that led to the child's death, the death investigation, cause-specific risk, protective factors, and systems issues and barriers. The team also documents findings and prevention recommendations.

*The graphic below provides an overview of four steps in the CDR process.*

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### Identify Deaths

- Establish a standardized process to identify all deaths of children younger than age 18.
  - Clarify residence and location of death for each case to ensure they fit the jurisdiction's case selection criteria.
- 



### Review Deaths

- Using a facilitated discussion model, conduct a high quality, multidisciplinary review focused on prevention.
  - Identify case findings during the review.
- 



### Collect Data

- Collect data from team deliberation and case review using a standardized form and enter it into the National Fatality Review-Case Reporting System.
  - Use standardized reports to understand current trends.
- 



### Catalyze Prevention

- Use findings identified during the review meeting to develop recommendations for prevention.
  - Catalyze prevention with new and existing partners.
- 

Learn more about CDR by reviewing the [National Center's CDR 101 module](https://bit.ly/3xwcAuX) (URL: <https://bit.ly/3xwcAuX>) and the [CDR Program Manual](https://bit.ly/2TYIfrx) (URL: <https://bit.ly/2TYIfrx>).



## About the National Center

The National Center for Fatality Review and Prevention (National Center) is the technical support and data center serving CDR and Fetal and Infant Mortality Review (FIMR) programs across the country. The National Center offers a wide variety of available services via site visits, email, and telephone.

The National Center is Funded by the Health Resources and Services Administration to:

- ☐ *Technical assistance, training, and support with strategic planning to help support teams to develop, implement, and sustain prevention focused CDR processes.*
- ☐ *Maintenance of the National Fatality Review-Case Reporting System (NFR-CRS), a database into which fatality review teams enter the circumstances of the individual deaths they review.*
- ☐ *Consultation to coordinate with other reviews related to domestic violence, serious injury, maternal mortality, elder/vulnerable adult fatality reviews, Citizen Review Panels, and others, as well as a collaboration between FIMR and CDR.*
- ☐ *Support for the network of state CDR coordinators.*
- ☐ *Resources such as a listserv, website, written review guidance, webinars, and training modules.*



## Data Collection

The NFR-CRS is a free, web-based data system available to CDR teams. Teams can easily access and download their data and run standardized reports. The NFR-CRS is used in 47 states; a data use agreement must be completed to participate. States maintain ownership of their own data, which allows the state to retain control over how the data are used at a national level and for research. As a result, not all states allow their data to be included in publications.

These data cannot be used to create population-level statistics, as different states have different case selection criteria for including cases in fatality review. Nonetheless, CDR data from interdisciplinary case reviews provide insights that would not otherwise be available through vital statistics or other reporting methods (6).

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Given all this information, **NFR-CRS data can help in the following ways:**

- Local teams have access to their data to identify trends and significant risk factors that inform prevention. These data can be shared with Title V programs for real-time monitoring of Title V activities.
- State teams review local findings (when available) to identify trends and significant risk factors and develop recommendations and action plans for state policy and practice improvements.
- State teams match review findings with vital records and other mortality data sources to identify gaps in the reporting of deaths.
- State and local teams use the findings as a quality assurance tool for their review processes.
- Local teams and states use the reports to demonstrate the effectiveness of their reviews and advocate for funding and support for their program.
- National groups use state and local findings for national policy and practice changes.

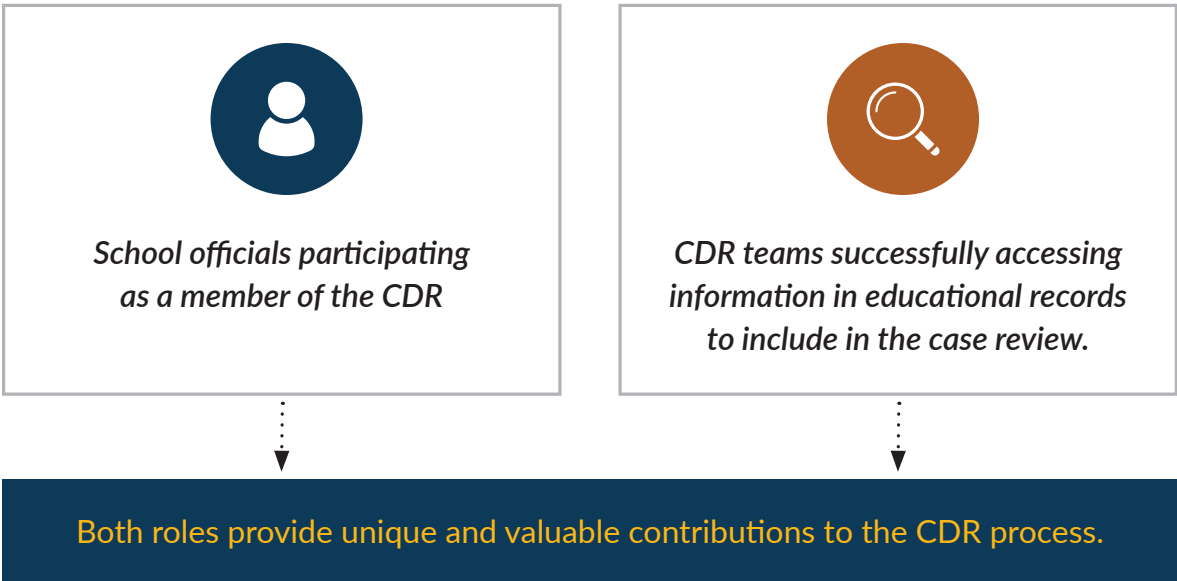
Learn more about the **NFR-CRS** (URL: <https://bit.ly/3qmh0m2>).

# Collaboration Between Schools and Fatality Review Teams

Information in this section was adapted with permission from the report “Family Educational Rights and Privacy Act and Its Unintentional Barriers to Effective Child Death Review” (Joshi, 2020).

## School Roles in CDR

Schools play a vital role in understanding the circumstances of a child’s life. While there are many avenues for building relationships between schools and CDR teams, schools are typically engaged in CDR in the following two ways:



## School Official Participation

Educational representatives are a vital part of the CDR team. Youth spend more than half of their time at school, and consequently, educational representatives often bring a child’s story to life by providing contextual factors that may not be captured in a school record, including generalities such as the culture or policies of a school. Furthermore, educational representatives may share and implement preventative strategies identified during CDR back to their respective schools or districts.

Currently, NFR-CRS data demonstrates that educational representatives participated in the CDR process for only 25% of cases reviewed. CDR coordinators noted in a recent interview that when a school representative was present at the review, their input can be more meaningful than having actual student records.<sup>6</sup>

## Access to Information from School Records

CDR teams review available records to get a comprehensive understanding of the protective and risk factors in a child's life. Schools serve many important functions in a child's life from providing quality educational services to providing physical and mental health services. Consequently, school records provide the CDR team a more complete picture of the circumstances around a child's life. In addition to highlighting risk factors or warning signs, the school record can also show opportunities for improving the connection of students to supportive services. Examples of the types of useful information in educational records are outlined in Table 1 below.

**Table 1. *Types of School Records and Information That Inform CDR***

Types of Useful Information in School Records	Examples of Information
1. Insight into the academic life of the child	Academic records; Transfer to a different school
2. Understand services obtained by the child	Individual Education Plan (IEP); Behavioral Intervention Plans; 504 plans
3. Evidence of risk factors and warning signs	Excessive school absences; Disciplinary records; Bullying/conflict with peers; Noted conflicts with parents or neglect by parents; Frequent visits to school nurse with complaints; Suicide risk assessments
4. Presence of protective factors	Sports participation; Social supports
5. Gaps in service provision or evaluation	Absences of behavioral or learning evaluations; Lack of appropriate follow up for previously identified problems or needs



## Family Educational Rights and Privacy Act (FERPA)

### Overview

FERPA is commonly cited by CDR members as a perceived barrier to accessing information from education records and having educational representatives participate in reviews. While FERPA does not prevent school representatives from participating in CDR, it does provide guidance on how educational records can be shared. The purpose of this section is to provide a high-level overview of FERPA and a few provisions that could have implications for CDR teams.



**FERPA is a federal law intended to protect a student's education records** (34 Code of Federal Regulations, Part 99).

FERPA grants the parents of a student certain rights in regards to their child's education records. In regards to CDR, one relevant right FERPA grants is requiring parental consent in order to release school records or "personally identifiable information" unless an exception applies (see below).<sup>7</sup> These rights transfer to the student when the student turns 18 years old or if they attend school beyond high school; these students are then referred to as "eligible students." If a child dies before they are 18 years old, their parents retain FERPA rights indefinitely. If a child dies after they turn 18, FERPA rights terminate with the child's death and there are no further protections.

## Key Definitions from FERPA:



### Personally Identifiable Information:

"Personally identifiable information" includes but is not limited to the following: the name of the student, the name of the student's parent or family member, social security numbers, student identification numbers, biometric records, date and location of birth, or other information that is linkable (either alone or in combination with other information) to a given student.<sup>8</sup>

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### Educational Records:

Education records are records kept by an educational agency that relate to a student.<sup>7,8</sup> Health records that are kept by a school nurse are also protected under FERPA.<sup>7,8</sup>

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### Institutions Governed:

FERPA is applicable to all educational institutions that receive any portion of their funding from the U.S. Department of Education.<sup>7,9</sup> Consequently, private elementary and secondary schools are generally excluded from FERPA but private colleges are typically included.<sup>7</sup> FERPA also applies to "non-school" agencies that do not enroll students but receive U.S. Department of Education funding.<sup>7</sup>



## Exceptions to the General Consent Rule<sup>10</sup>

In general, schools must have written consent from a parent or eligible student prior to releasing any information from a student record. However, there are a few outlined exceptions in FERPA where consent from a parent or eligible student to access information from educational records may not be required:

1

Directory Information (i.e. name, address, telephone number, dates of attendance) can be disclosed without consent, though a parent or eligible student may opt out of the disclosure of directory information.<sup>7</sup> Of note, the type of information included in the school directory may vary by school district.

2

School officials (i.e. teachers, consultants, volunteers) to whom the school has contracted out official school activities.<sup>7</sup>

3

Authorized representatives of state and local educational authorities in connection with an audit or evaluation of federal or state supported education programs, or for the enforcement of or compliance with federal legal requirements that relate to those programs.<sup>7</sup>

4

Appropriate parties in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals.<sup>7,11</sup>

5

Schools may disclose information in order to comply with a subpoena. The school must make a reasonable effort to notify the parent or eligible student, unless certain exceptions to notification apply.<sup>7,12</sup>

6

If a student enrolls in a different school, school system, or institution of postsecondary education, schools may transfer records to that agency or institution.<sup>7</sup>



## Additional Clarification Points

### Authorized representative exception, a historical note:

Prior to 2008, the "authorized representative" exception could be used to create memoranda of agreement (MOA) between health departments and educational agencies to share data.<sup>7</sup> However, the 2008 amendments to FERPA excluded other state and federal agencies as authorized representatives because they were not under direct educational authority.<sup>13</sup> In 2011, further amendments allowed non-educational agencies to serve as authorized representatives if they are conducting audits or evaluations of educational programs.<sup>7</sup>

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### Differences between FERPA and the Health Insurance Portability and Accountability Act (HIPAA):

The Privacy Rule outlined in HIPAA, a federal privacy law protecting health information, specifically allows for disclosure of protected health information for public health activities.<sup>14</sup> The U.S. Department of Education and the U.S. Department of Health and Human Services released updated joint guidance on the roles of FERPA and HIPAA on students' health records, since some records are governed by FERPA while others are governed by HIPAA. View the [guidance document](https://bit.ly/3hHj84R) (URL: <https://bit.ly/3hHj84R>).

## Limitations to re-disclosure of information under FERPA:



*Can child welfare agencies redisclose information from school education records to other entities?*

Redisclosure is only permitted to an entity that is "engaged in addressing the student's education needs."<sup>15,16</sup> Redisclosure is not permitted for other purposes.<sup>17</sup>



*Can community-based organizations redisclose information from education records to other entities?*

No, regardless of the capacity in which community-based organizations operate, redisclosure without consent is not permitted.<sup>18,19</sup>

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## An important note for CDR Teams: School Official's Observations:

"FERPA does not protect the confidentiality of information in general; rather, FERPA applies to the disclosure of tangible records and information derived from tangible records."<sup>20</sup> Consequently, per the U.S. Department of Education, "FERPA generally prohibits the improper disclosure of personally identifiable information derived from education records. Thus, information that an official obtained through personal knowledge or observation, or has heard orally from others, is not protected under FERPA. This remains applicable even if education records exist which contain that information unless the official had an official role in making a determination that generated a protected education record."<sup>21</sup>



## Strategies for Working with Schools

Recently, semi-structured interviews were conducted with eight CDR coordinators, two coroners, and one medical examiner to understand possible solutions for collaborating with schools and accessing information from school records.<sup>22</sup> These interviews along with assessing how FERPA would affect CDR provided valuable insight on how to best access records and collaborate with schools. While FERPA protects educational records, it does not preclude school representatives from participating in CDR and providing general insights on the school. CDR teams that have successfully formed collaborations with schools cite one of five mechanisms contributing to their success:

1

**The first mechanism is through legislative mandates for school representatives to participate in CDR.**

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2

**The second mechanism is building relationships with schools and creating a culture where collaboration between schools and CDR teams is seen as the norm, regardless of a state legislative mandate.**

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3

**The third mechanism is being flexible and creative on who the educational representative is from each school or district.**

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4

**As a preliminary step, consider focusing school engagement when reviewing certain deaths, such as suicides.**

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5

**The final mechanism is using legislative authority such as a subpoena to obtain information from schools.**



## 1

### State Mandate

CDR coordinators note that state CDR legislation that includes educational representatives as a mandatory participant may facilitate school participation in CDR. Having a state mandate may help schools feel more legally comfortably participating and highlights that schools are an essential member of the team. However, the mandate does not guarantee participation as some states with a mandate still report variable participation of schools; these states noted that relationship building with schools still matter.

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## 2

### Building Collaboration through Relationships and Changing the Culture

CDR coordinators report that they worked to build relationships with representatives from local schools. They report taking time to share information about the CDR process and its purpose. In particular, they note the importance of emphasizing that CDR is not intended to be punitive by placing blame on a particular system but rather supports improving all systems supporting children. A part of relationship building is listening to schools, understanding any barriers they may have in participating, and thinking creatively of how to overcome these barriers. CDR coordinators note that over time, they were able to create a culture where collaborating with schools is the norm.

While it may not be possible to successfully form a relationship with each school or district, coordinators note partnering with some schools is better than none. Additionally, in cases where a successful relationship could not be formed, it is beneficial to reach out again given personnel and cultures continue to change.



### 3

## Flexibility with Representation

Given that schools have many competing demands, maintaining flexibility with who the school representative is that attends CDR is important. CDR coordinators report a diverse array of representatives including school counselors, teachers, wellness representatives, school nurses, or superintendents. Even if the school representative may not have intimately known the child, they may have knowledge about general school policies, details about school culture, and ongoing prevention work. Furthermore, the representative can still take insights gained during CDR back to their representative schools.

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### 4

## Focused Engagement

Some CDR teams group certain cases together to facilitate school participation, such as reviewing suicide cases together. These teams have found that since this topic area is of high relevance to schools, they are able to more easily engage with schools for these cases.<sup>23</sup> These cases can serve as an entry point to building collaborations with schools and establishing a culture of shared learning with schools.

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### 5

## Subpoena

Some CDR programs have the ability to subpoena information from school records. Although a subpoena can be viewed as a punitive step, several states reported that schools feel more comfortable sharing information with a subpoena.

## Success Stories

### Examples of the Benefits of CDR and School Collaboration<sup>22</sup>

When schools and fatality review teams collaborate, prevention work can be amplified, resulting in a more extensive programmatic reach, conservation of resources, and shared messaging.

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#### SUICIDE PREVENTION

In a jurisdiction where there had been an increase in the number of suicides, the school representatives (superintendents, teachers) attended CDR meetings and determined students needed access to more mental health resources. There was no money at this school for trained school counselors, so the school faculty applied for a grant and received funding to hire a professional school counselor.

#### ABSENTEEISM IN CHILDREN WITH DISABILITIES

Through the review of school records of a child with disabilities, one state found that the child had frequent absences from schools that were never investigated. The release of the CDR team's recommendations prompted the state's Department of Education to review statewide chronic absenteeism in children with disabilities. This review led to the subsequent discovery that hundreds of students with significant disabilities faced chronic absenteeism and there was no established system to monitor the safety and education of these children. A large state-wide stakeholder workgroup was formed to address chronic absenteeism and establish protocols to prevent future child deaths.







## Conclusion

Schools play a vital role in the growth and development of children. They can observe both social and academic strengths and challenges and have valuable insights into community systems, risks, and resiliency of children in their communities. This information is critical to understanding the context in which children live and die. Furthermore, schools play an important role in community and state-level prevention efforts. Engaging schools in all aspects of CDR will help improve the health and safety of the community.

The National Center welcomes inquiries into how fatality review teams can meaningfully engage professionals from school districts or departments of education to enrich case reviews and prevention activities. For more information, contact the National Center at [info@ncfrp.org](mailto:info@ncfrp.org).



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