



IMPROVING CONSISTENCY OF CHILD MALTREATMENT IDENTIFICATION FOR **SLEEP-RELATED SUICIDE**

TELLING STORIES TO SAVE LIVES



Key Funding Partner

Federal Acknowledgement

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HOUSEKEEPING

Before we get started

- This webinar is being recorded and will be available on the National Center's webpage (URL: www.ncfrp.org).
- Participants are muted. Use the question-and-answer box ask questions.
- Contact the National Center (email: info@ncfrp.org) for any tech problems.





EVALUATION

<https://www.surveymonkey.com/r/32BRMMX>

Speakers

The speakers have no financial relationships or interests to disclose.



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Agenda

At the end of this presentation, attendees will have increased knowledge about:

1

BACKGROUND



Discuss how and why these guidelines were developed

2

THE GUIDELINES



Review each step of the new guidelines

3

PRACTICE



Practice using the guidelines with mock cases



Prioritizing Personal Wellbeing

The content of today's meeting may include information about individual or aggregate fetal, infant, or child deaths. This may evoke strong feelings or other distress. Please prioritize your own wellbeing during this meeting, even if you need to step away from the meeting. Contact the Suicide & Crisis Lifeline at 988 via phone or text for additional support.



BACKGROUND

Making Determinations of Child Maltreatment in the NFR-CRS

A Public Health Approach

- Using a public health model within the context of CDR is the ideal approach for optimal child maltreatment identification and, therefore, prevention.
- For every death reviewed and entered in the NFR-CRS, teams are asked to consider if child maltreatment played a role in the death, based on available information and professional judgments.
- This determination is strictly prevention-focused with no legal ramifications.

a. Did child abuse, neglect, poor or absent supervision or exposure to hazards cause or contribute to the child's death?

- Yes/probable
- No, go to next section
- U/K, go to next section

If yes/probable, choose primary reason:

- Child abuse, go to I5b
- Child neglect, go to I5f
- Poor/absent supervision, go to I5h
- Exposure to hazards, go to I5g

Meet Jack

Mock Case #1

Jack, a 2-month-old infant, was sleeping in a car seat (unbuckled) that was placed on top of an adult mattress. Supervisor left the room to do laundry. Upon returning, the supervisor found Jack had fallen from the car seat and was unresponsive, face down on the mattress. Jack had tested positive for methamphetamine at birth. Supervisor was not impaired at time of incident. Child protective services substantiated the death.





Poll

Mock Case #1

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, abuse
- c. Yes, neglect
- d. Yes, poor or absent supervision
- e. Yes, exposure to hazards

Answer

Mock Case #1

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, abuse
- c. Yes, neglect**
- d. Yes, poor or absent supervision
- e. Yes, exposure to hazards



Meet Jill

Mock Case #2

Jill, a 1-month-old infant, had been crying in her bassinet. Father of child (FOC) wanted to give mother of child (MOC) some time to sleep, so took Jill into the living room. He gave her a bottle and then placed her on his chest on the couch. FOC fell asleep and woke up to find Jill unresponsive with her face pressed into the couch. No child welfare action was taken and FOC was not impaired.





Poll

Mock Case #2

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, abuse
- c. Yes, neglect
- d. Yes, poor or absent supervision
- e. Yes, exposure to hazards

Answer

Mock Case #2

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, abuse
- c. Yes, neglect
- d. Yes, poor or absent supervision
- e. **Yes, exposure to hazards**



This Project

Overview

Problem

- For sleep-related sudden unexpected infant deaths (SUID), determining if child maltreatment contributed to the death is complex and often inconsistent.



Objective

- Develop guidelines, informed by data and practice, to:
 1. Help CDR teams consistently classify the contribution of child maltreatment to SUID.
 2. Distinguish between neglect and exposure to hazards.



Goals

- Increase consistency in classification of maltreatment.
- Provide guidance to distinguish between neglect and exposure to hazards.
- Encourage objective classification based on incident circumstances rather than the subjective interpretation of social or demographic factors.

Methods

Examining the Data

- Conducted background research to settle on a set of guidelines.
 - Identified sleep-related SUIDs in NFR-CRS from 2004-2018 (n=25,797).
 - Compared demographic, incident, caregiver characteristics based on CDR team's classification of neglect, exposure to hazards, no maltreatment.
 - Identified key variables associated with classification of neglect or exposure to hazards, using Chi-Squared to determine statistical significance.
 - Assessed strength of associations to distinguish between neglect and exposure to hazards.



Methods

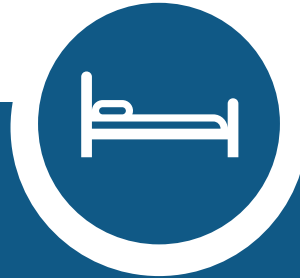
Examining the Data



OVERALL DETERMINATIONS



CDR teams determined child maltreatment contributed to 51% of sleep-related SUIDs, with 15% classified as neglect and 69% as exposure to hazards.



EXPOSURE TO HAZARDS



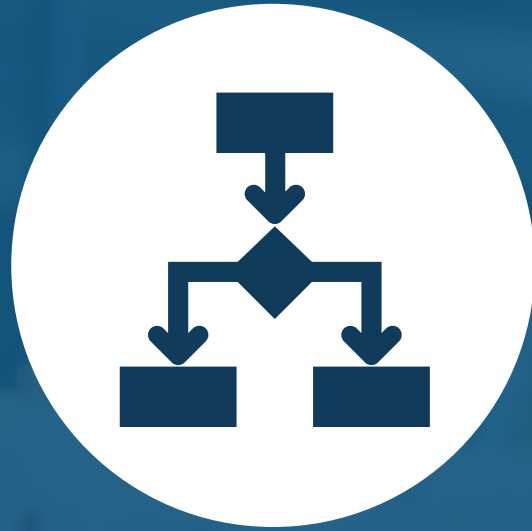
Sleeping surface, objects in the sleep environment, and infant sleep position were strongly associated with classification of exposure to hazards ($\chi^2 < 0.001$).



NEGLECT



Child welfare action (OR 2.2, 95% CI 2.0-2.5) and supervisor impairment (OR 2.9, 95% CI 2.6-3.0) were strongly associated with classification of neglect.



THE GUIDELINES

Piloting the Guidance

South Dakota, Texas, and Colorado

- Draft guidelines were developed and piloted in three states.
- In-person meetings with multidisciplinary CDR members in each state.
- Introduced the draft guidelines and used them to walk through recent sleep-related SUIDs from each state.
- Discussed the circumstances of each death and if the guidelines should consider additional factors.



Key Feedback Themes

South Dakota, Texas, and Colorado

- Acknowledged that child maltreatment determinations for sleep-related SUIDs have historically not been done consistently.
- Grateful that the tool will provide consistency and help during difficult case review discussions.
- The guidelines will help remove personal judgment and bias from the child maltreatment determination.
- There are some challenging aspects to the guidelines.
- Final guidelines were drafted based on feedback.



The Guidelines

Step 1

- Determining if the Death is a Sleep-Related SUID

Step 2

- Determining Exposure to Hazards

Step 3

- Determining Neglect

The Guidelines

Step 1: Determining if the Death is a Sleep-Related SUID

To be considered a sleep-related SUID for purposes of these guidelines, the death must meet all four of the below criteria:

- Child is an infant (has not reached their first birthday)
- "Child never left hospital following birth" checkbox is not selected (Case Definition section) → Child never left hospital following birth
- Infant death was sleep-related (Question I2)
- Cause of death selections match the definition of SUID (Question G6):
 - External cause of injury: asphyxia, undetermined, or unknown; or
 - Medical condition: SIDS, undetermined medical cause, or unknown; or
 - Undetermined if injury or medical cause; or
 - Unknown.

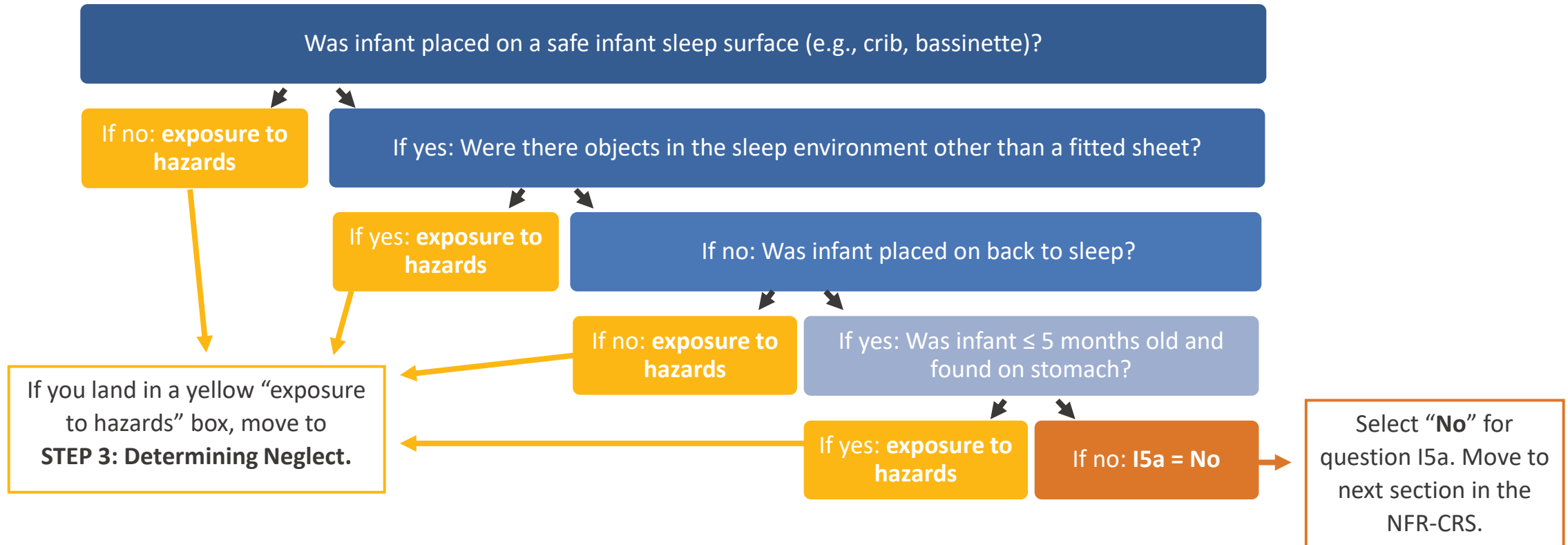
If you can check all four boxes above, move to **STEP 2: Determining Exposure to Hazards**.

If you cannot check all four boxes, please **stop here** and consult the Data Dictionary for assistance completing Section 15.

The Guidelines

Step 2: Determining Exposure to Hazards

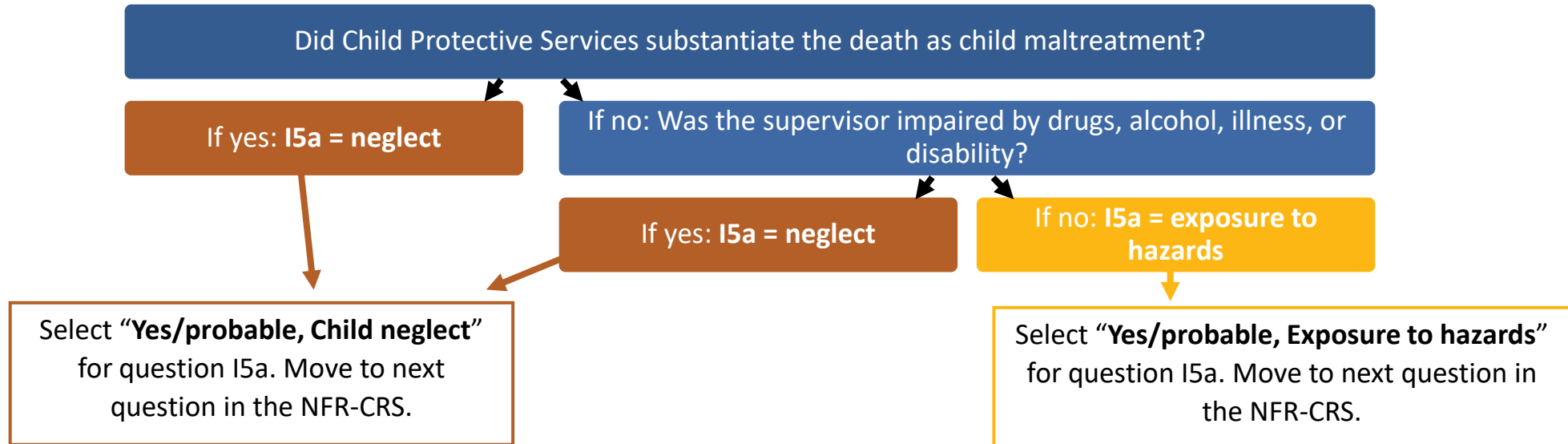
Start with the first question below and follow the arrows until you land in a yellow or orange box.



The Guidelines

Step 3: Determining Neglect

Start with the first question below and follow the arrows until you land in a yellow or orange box.



How to Handle Missing/Unknown Data

Using the Guidelines



- Collecting the pieces of data used in the guidelines can be challenging.
- Depending on your missing piece(s), you may still be able to make a child maltreatment classification.
- A few examples:
 - If the death meets criteria for “exposure to hazards” but information about CPS substantiation and supervisor impairment are both missing/unknown, classification is left at “exposure to hazards.”
 - If the death meets criteria for “exposure to hazards” and there was either CPS substantiation or supervisor impairment, classification is “neglect,” even if one is missing/unknown.



MOCK CASES

Meet Jane

Mock Case #1

Jane, a 1-month-old infant, had cold symptoms. Her parents moved an adult mattress into the living room and her mother laid down with her on it and fell asleep. When the mother woke up, Jane was unresponsive and was subsequently pronounced dead at the hospital. No child protective services action was taken, and her mother was not impaired.





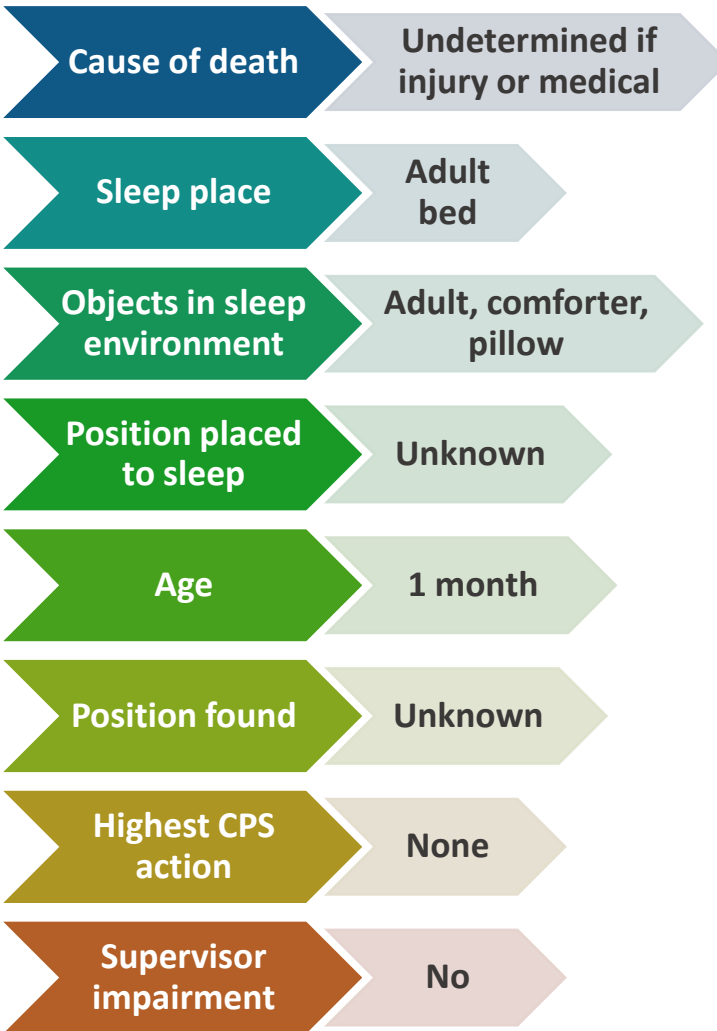
Poll

Mock Case #1

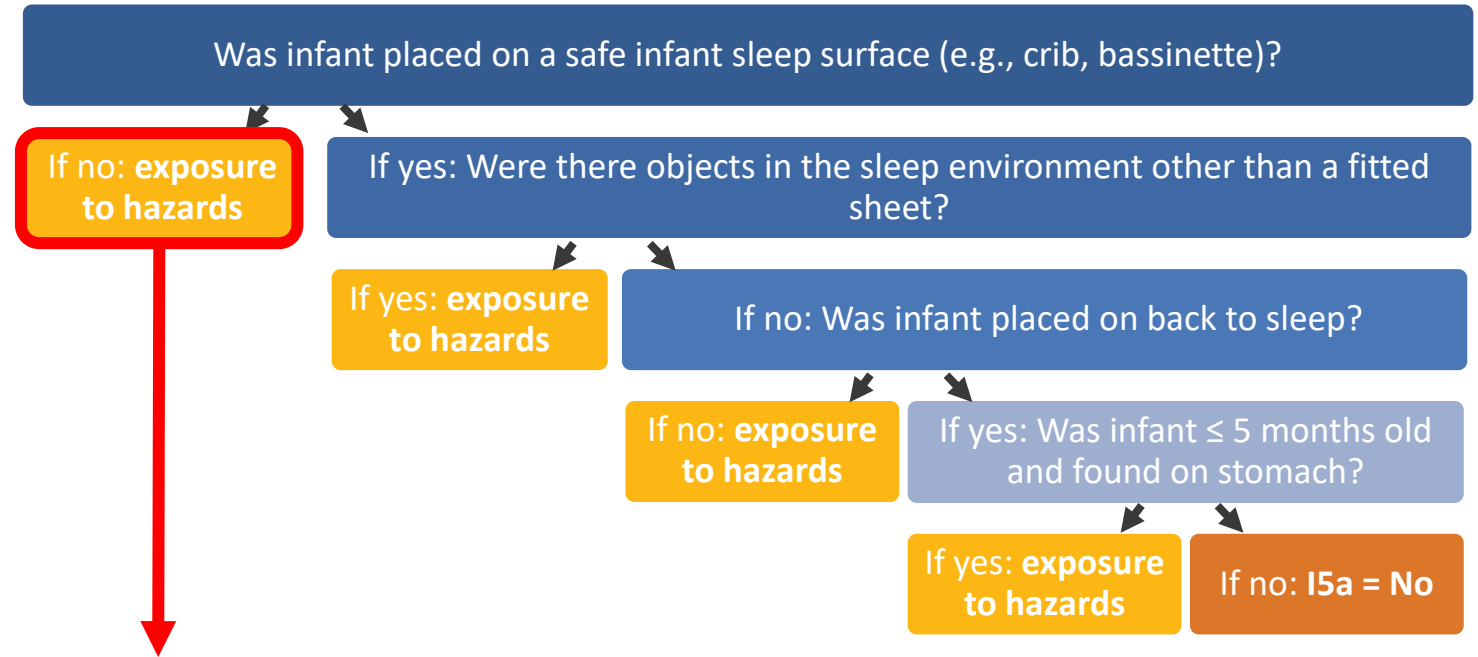
Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards
- c. Yes, neglect

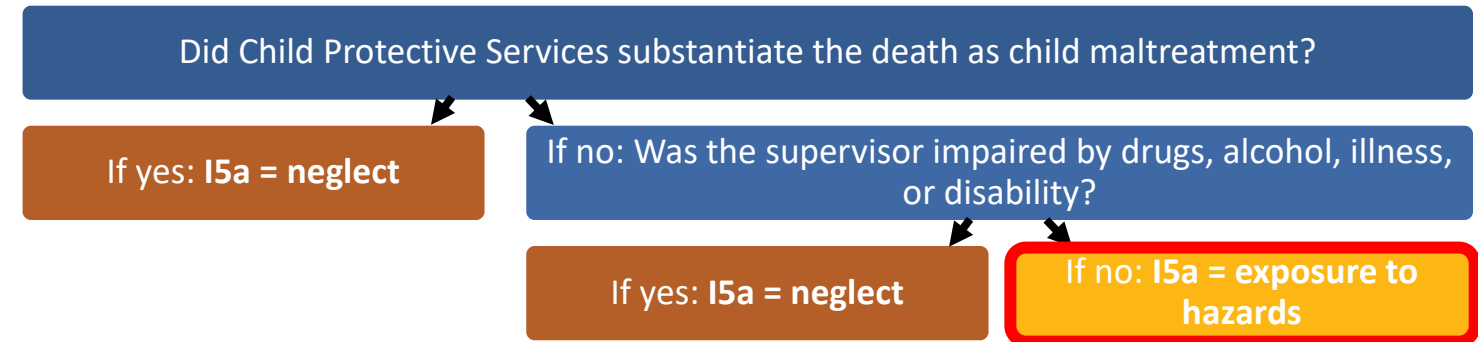
Case Details



Step 2: Exposure to Hazards Classification (Meets criteria for sleep-related SUID)



Step 3: Neglect Classification (Meets criteria for exposure to hazards)



Answer

Mock Case #1

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards**
- c. Yes, neglect



Meet John

Mock Case #2

John, a 4-month-old infant, was found unresponsive in an adult bed with his face pressed into his mother's arm. The mother tested positive for multiple illicit substances. The infant normally slept in his parent's bed, but there was a crib in the home. CPS action was pending at the time of case review.





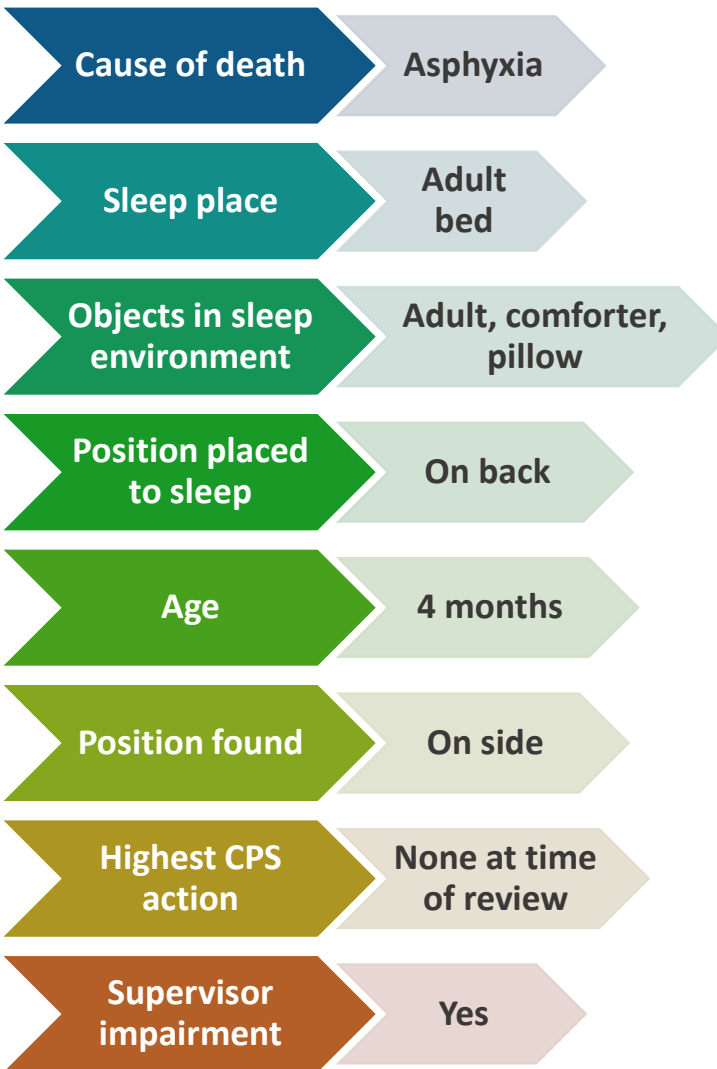
Poll

Mock Case #2

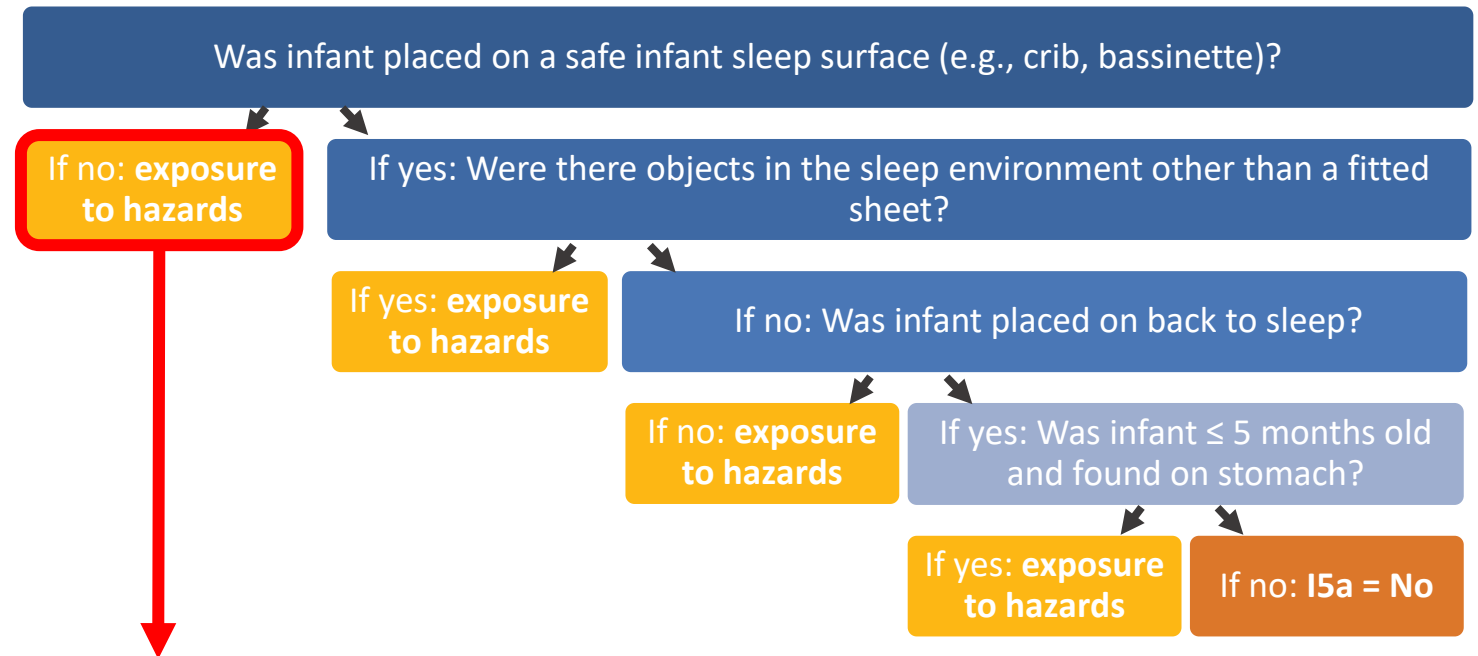
Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards
- c. Yes, neglect

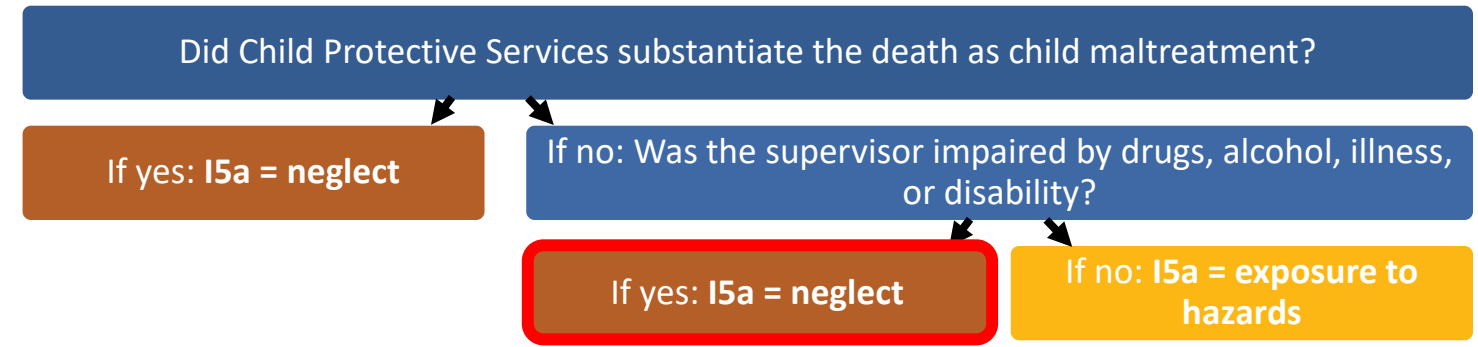
Case Details



Step 2: Exposure to Hazards Classification (Meets criteria for sleep-related SUID)



Step 3: Neglect Classification (Meets criteria for exposure to hazards)



Answer

Mock Case #2

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards
- c. **Yes, neglect**



Meet Alex

Mock Case #3

Alex, a 2-month-old infant, was placed to sleep on their stomach in a Pack N Play with their twin. The Pack N Play was filled with clothes and blankets. The mother awoke in the morning to find Alex unresponsive. Child protective services substantiated the death, and the mother was impaired.





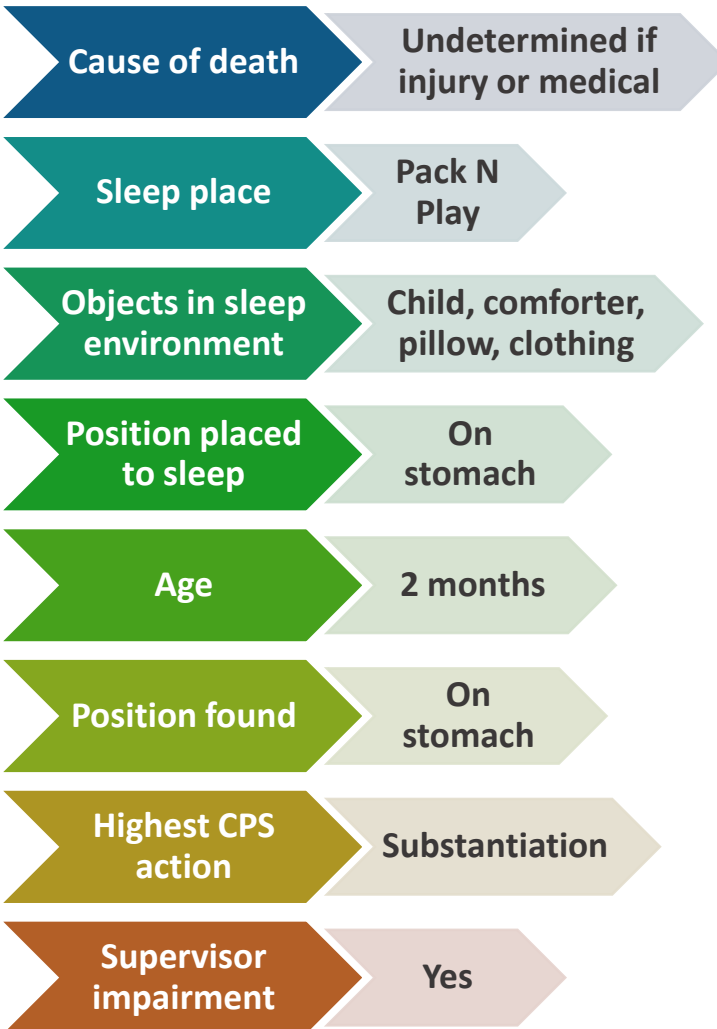
Poll

Mock Case #3

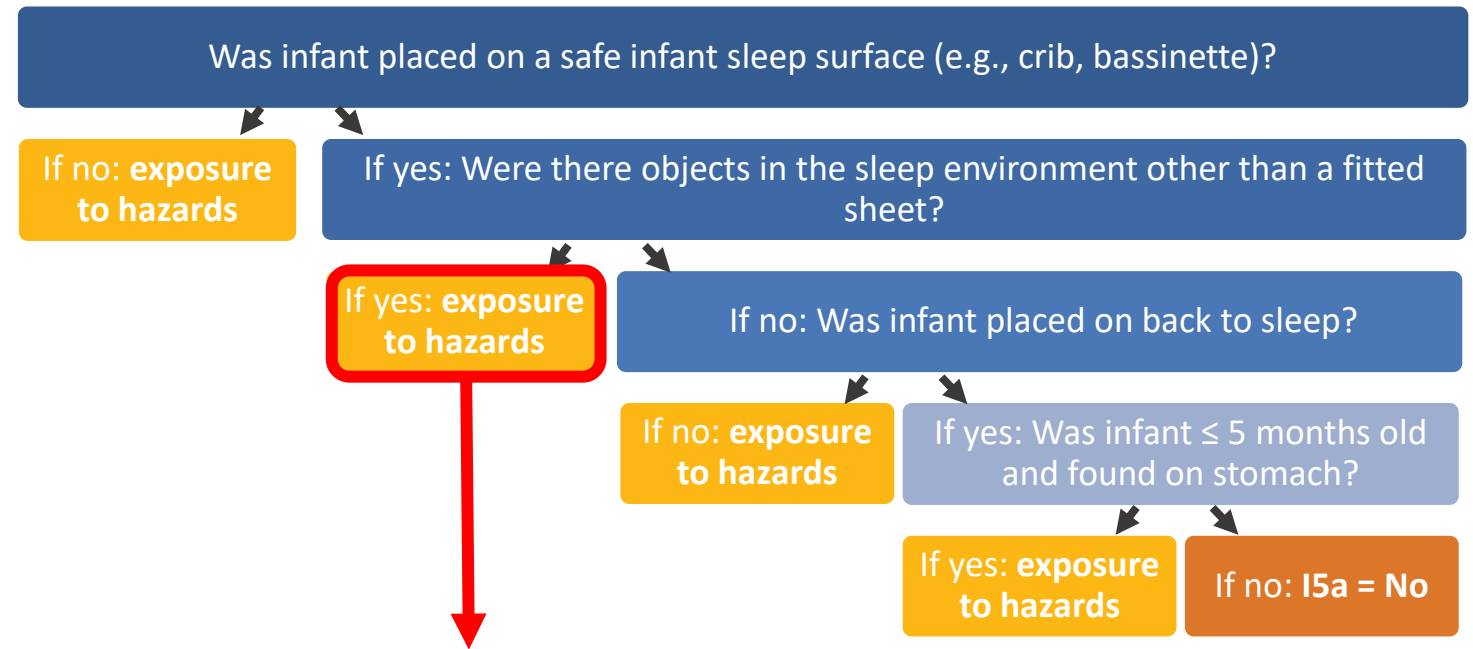
Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards
- c. Yes, neglect

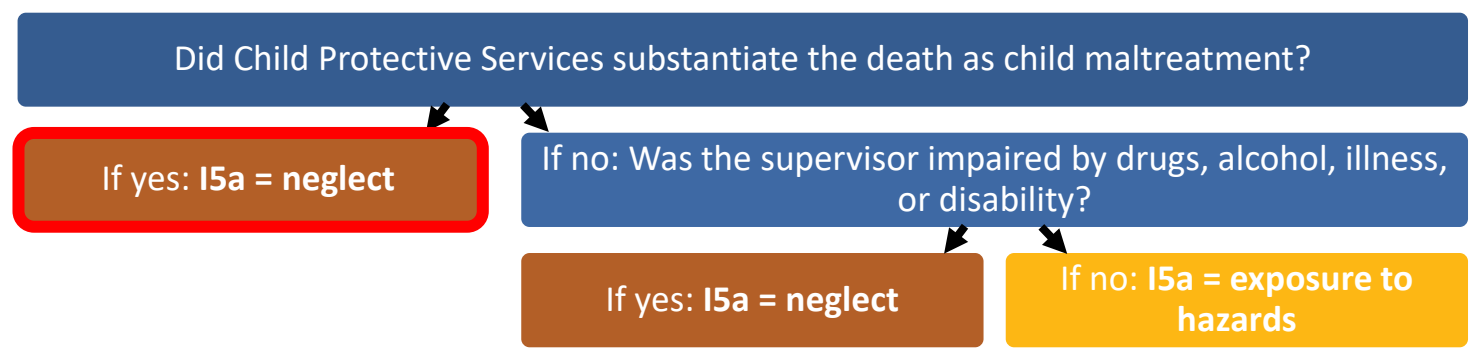
Case Details



Step 2: Exposure to Hazards Classification (Meets criteria for sleep-related SUID)



Step 3: Neglect Classification (Meets criteria for exposure to hazards)





Answer

Mock Case #3

Did child abuse, neglect, poor or absent supervision, or exposure to hazards cause or contribute to the child's death?

- a. No
- b. Yes, exposure to hazards
- c. **Yes, neglect**

Conclusions

And Next Steps

- The guidelines will encourage consistent and objective child maltreatment classification based on incident circumstances.
- Data quality improvements generated by these guidelines will aid in a better understanding of how child maltreatment contributes to sleep-related SUIDs and what can be done to prevent future similar deaths.





QUESTIONS?



EVALUATION

<https://www.surveymonkey.com/r/32BRMMX>



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