

— DRAFT —

MINUTES

of the

Executive Committee to Review the Death of Children Meeting

held on

February 16, 2022

via teleconference

Microsoft Teams

teams.bjn.vc##105936574#1171407597

Call-in number: 1(775) 321-6111; Extension: 603-222-633#

1. Call to Order, Roll Call, Introductions

Stephanie Herrera called the meeting to order at 10:01 AM.

Executive Committee members present:

- Kathie McKenna, Pioneer Territory CASA
- Margarita De Santos, SNHD
- Desiree Mattice, Department of Public Safety
- Lisa Sherych, DPBH
- Vickie S. Ives, DPBH - MCH
- Amber Howell, Washoe County HSA
- Sheri McPartlin, CCSD
- Christine Eckles, Washoe County JJ
- Stephanie Herrera, DPBH - Vital Records
- Misty Vaughan Allen, DPBH - Suicide Prevention
- Tim Burch, Clark County DFS
- Jennifer Spencer, Attorney General's Office
- Dr. Cindy Pitlock, DCFS
- Megan Freeman, DCFS

Executive Committee members absent:

- Beth Handler, HHS Director's Office
- Breanna Jenkins, Renown
- Nancy Saitta, Retired
- Jessica Rogers, Las Vegas Metro Police Department
- Nick Czegledi, Elko County Sheriff's Office
- Michelle Sandoval, DPBH - Rural Clinics

Staff and guests:

- Jessica Freeman, DCFS
- Dawn Davidson, NICRP
- Elizabeth Holka, NICRP
- Jeremy Gladstone, Insurance Commissioner's office
- Kaitlynn Rodriguez, DCFS
- Stephen Dotter, DCFS
- Denise Tyre, Supervisor, Human Services at Washoe County
- Linda Anderson,
- Nick Stosic, Deputy Commissioner of the Division of Insurance
- Jeanette Belz, Belz and Case

2. Initial Public Comment

No comments.

3. For Possible Action: Approval of Meeting Minutes from November 17, 2021.

- Approval of November 17, 2021 meeting minutes.

Stephanie Herrera asked the Executive Committee if they had any comments regarding the Meeting Minutes from November 17, 2021. No comments were made.

MOTION: Made by Kathie McKenna, seconded by Jennifer Spencer, to approve the Meeting Minutes from November 17, 2021.

UNANIMOUS VOTE; MOTION CARRIED.

4. For Information Only: Division of Child and Family Services (DCFS)/ Nevada Institute for Children's Research and Policy (NICRP) Child Death Review (CDR) updates

- Updates from our partners at the National Center for Fatality Review and Prevention (CFRP)
- Sudden Death of the Young (SDY) Program

Stephanie Herrera requested updates from the National Center for Fatality Review and Prevention (CFRP) and the Sudden Death in the Young (SDY) Program. Jessica Freeman stated that the National CFRP will have Version 6.0 of the National CFRP Database available this upcoming Spring 2022. The SDY Program has no updates at this time.

NO MOTION MADE.

5. For Information Only: Update on the progress of the HCQC Subcommittee regarding the 2018 Quarter 2 recommendation that hospitals should adopt consistent internal policy for assessment of children when they present with suspicious or serious injuries.

Margarita De Santos summarized the 2018 Quarter 2 Recommendation and stated that the most recent subcommittee meeting occurred on 02/01/22. Margarita then asked for a member who was present during the Health Care Quality and Compliance (HCQC) subcommittee meeting to provide an update. Jessica Freeman stated that the subcommittee's primary focus is to identify the right medical care for children who are victims of abuse. The HCQC subcommittee met with a team of experts and discussed the best approach to meet the identified needs discussed in prior meetings. Three different processes were discussed:

- What process should be followed when children present to Pediatric Emergency Rooms with findings/injuries that raise concerns of abuse and neglect?

The team of experts determined that this process should be relatively easy to determine, as many of these hospitals already have protocols in place for these situations.

- What process should be followed when children present to emergency rooms that do not have a pediatric doctor with findings/injuries that raise concerns of abuse and neglect?

This process is where the team determined they should start. A tip sheet will be developed that outlines protocols and testing. This tip sheet will be given to assist HCQC in the development of a policy.

- What process should be followed when children present to community medical centers, such as general practitioner offices or urgent care centers?

The team determined that this third process would be more difficult and will take more time to develop. The team also discussed the need to have a centralized call line that would assist with these situations. For hospitals and medical centers that do not have a pediatric specialist, it would be helpful to have a number that could be called to speak with an expert. The team will research other states that have this in place to inform their efforts. Jessica stated that the subcommittee intends to continue to keep the larger Executive Committee updated and asked if anyone had any questions or comments at this time.

NO MOTION MADE.

6. For Possible Action: Brief discussion by Nevada Insurance Commissioner on the differences of implementing the 2020 Q4 recommendation from Clark regarding removal prior authorization when filling certain medications relating to mental or physical health. Approval of the next steps for this recommendation may be needed.

Margarita De Santos provided a summary of the Clark CDR Team's 2020 Quarter 4 Recommendation as follows. A discussion was held during the last few meetings regarding this recommendation. During the May meeting, Beth Slamowitz, Senior Policy Advisor on Pharmacy at DHHS, presented the current policies that Medicaid has in place to protect vulnerable children and brought up potential issues that may arise with this recommendation. Despite this, the Clark CDR Team determined that this recommendation was still warranted. During the August meeting, it was suggested to also include asthma medication to the letters. During November's meeting, the recommendation letters to NV Medicaid, the NV Insurance Commissioner and NV Board of Pharmacy were approved and sent shortly after the meeting. A response from Mr. Jeremy Gladstone, the Assistant Chief Examiner of the Nevada Division of Insurance, was received on December 9, 2021. After providing Mr. Gladstone with general information on how recommendations were made, he stated that he would forward the information to the Division's Health Team for further review. Ms. Barbara Richardson, the Insurance Commissioner, then spoke with Jessica Freeman from DCFS and discussed the difficulties in implementing this recommendation. A response from Nevada Medicaid was received on December 9, 2021, stating that they would be willing to review and have further conversations, however, no further response has been received. Margarita asked if Barbara Richardson was present or if a representative from her office was present to provide further information regarding the difficulties in implementing this recommendation as discussed earlier. Jeremy Gladstone was present and introduced himself. He stated that he works with life and health products. He also stated that the response letter submitted by the Executive Committee has been reviewed and that the Insurance Commissioner's Office is greatly concerned about mental health for all Nevadans, especially children. He expressed concern that the Insurance

Commissioner's Office and the Executive Committee would face difficulties in trying to implement this recommendation due to its lack of regulatory authority in gaining compliance from insurance agencies, as their ability to enact policy or law is very limited. Jeremy further stated that, while the Division of Insurance does oversee health insurance carriers in general, its authority becomes much more limited when considering large, self-insured groups. He said that most of their authority stems from individual and small group policies, which only makes up about 7% of the overall population of Nevada's insured. He reiterated that a large challenge faced in trying to implement a policy like this is the regulatory limitations and the limited authority provided to the Division of Insurance given through Nevada law. Jeremy asked if Nick Stosic, Deputy Commissioner of the Division of Insurance, had any comments he wanted to add. Nick added that, if part of the Executive Committee's process was to attempt to influence and help develop legislation, now would be a good time to try to attempt that in order to move forward with this recommendation. He stated that the Interim Health Committee is planning on meeting this summer and that this committee could help pass legislation that could sponsor recommendations proposed by the Executive Committee. Margarita asked if there was any further discussion on this topic. Based on the information provided on this topic, Margarita De Santos asked the Executive Committee how they would like to proceed and if this should be kept open to see if further response is received. She gave the following options:

- Should this recommendation be kept open to see if further response is received?
- Does the committee want to explore further options for this recommendation?
- Should this recommendation be considered closed and a response back to the Clark team be developed?

Christine Eckles stated that she thought this recommendation is something the Executive Committee should continue to work towards given the information presented today and in prior meetings. Jessica Freeman asked Christine if she thought the Executive Committee should reach out to the Interim Health Committee, to which Christine agreed to. Lisa Sherych asked if the Executive Committee had any data regarding the number of individuals that were denied filling prescriptions due to prior authorizations, to which Jessica stated that the Executive Committee does not. Jessica clarified that, at the time the recommendation was created, the Clark CDR team was originally more concerned about issues presented by prolonging the amount of time before a prescription is filled due to prior authorizations required. Lisa also said that the Executive Committee should continue to keep this recommendation open, regardless of the exact number of individuals prevented from filling prescriptions in a timely manner. Dawn Davidson stated that the Executive Committee should submit a follow-up letter to the Clark CDR team to make sure that they are updated on what the Executive Committee is doing with this recommendation, as is usually done. Jessica Freeman asked the Executive Committee if they wanted to send the response letters they previously sent to the Nevada Insurance Commissioner and Medicaid to the Interim Health Committee in addition to a small explanation of what the Executive Committee does.

MOTION: Made by Desiree Mattice, seconded by Christine Eckles, to approve the action of submitting response letters to the Clark CDR team and the Interim Health Committee as discussed above.

UNANIMOUS VOTE; MOTION CARRIED.

7. For Possible Action: Discuss and approve the response letters for the below recommendations and next steps for the below recommendations.

- 2021 Quarter 1- Elko recommends that gun locks, and gun safety classes be required for gun owners, particularly those with children in the home. Additionally, they recommend that children receive gun safety classes.
- 2021 Quarter 2- Washoe CDR recommends the following:
 - Hospitals and drug testing facilities begin testing for Fentanyl as part of their standard drug testing panels.
 - Narcan to be made more accessible to the at-risk teenage population.
 - Hospitals should test for Fentanyl when withdrawal signs are present in mothers and infants.

Margarita De Santos summarized the Elko CDR Team's 2021 Quarter 1 Recommendation. Jessica Freeman stated that at the last meeting, it was decided to look for different training curriculums that may already exist and provide information to the Elko team so that they may further consider potential trainings as provided by Jennifer Spencer, Dawn Davidson, and Jessica Freeman. A response letter was drafted with different resources and will be sent to the Elko CDR Team upon approval. Margarita asked the Executive Committee to review the response letter to the Elko CDR Team and if they wanted to consider this recommendation closed. She asked if the Executive Committee had any questions regarding this letter. Lisa Sherych stated that she was supportive of the response letter as proposed and emphasized the importance of adding some resources that allows Elko to follow up with this recommendation internally.

MOTION: Made by Jennifer Spencer, seconded by Vickie Ives, to approve the response to Elko's 2021 Quarter 1 recommendation.

UNANIMOUS VOTE; MOTION CARRIED.

Moving on, Margarita De Santos summarized the Washoe CDR Team's 2021 Quarter 2 Recommendation. The Washoe County CDR team recommended that hospitals and drug testing facilities begin testing for fentanyl as part of their standard drug testing panels and that Narcan be made more readily accessible to at-risk teenage population. Additionally, the Washoe CDR Team recommended that hospitals test for fentanyl when withdrawal signs are present in mothers and infants. Margarita stated that response letters were drafted to the Washoe Regional CDR Team, Bureau of Health Care Quality and Compliance, and Overdose Data to Action Committee. During the November meeting, it was discussed to revise the response letters to ensure the correct language was used to match the work

being done by various state agencies regarding the third sub-recommendation. After the meeting, a Washoe representative stated that this sub-recommendation would no longer be needed as it is captured within the first sub-bullet recommendation. As a result, the response letters were amended to reflect the deletion of that specific recommendation. The response letters will be sent upon approval from the committee. Margarita asked the Executive Committee to review the response letters for the 2021 Quarter 2 Recommendation. Jessica Freeman stated that Denise Tyre, Washoe County CDR Facilitator, was on the call and asked if the Executive Committee had any questions regarding the amendments to the response letters for this recommendation. Jessica stated that Denise discussed revising the letters to remove the part asking hospitals and facilities to test for fentanyl as part of their standardized screening, as that is already protocol. Jessica asked the Executive Committee if the removal of this language from the 3rd sub-recommendation was enough to address the concerns of the language that surrounded it during previous discussions. Dr. Cindy Pitlock raised a concern of this recommendation potentially creating unintended consequences by requiring standardized panels without considering the large percentage of women who receive fentanyl as part of their labor management. Denise stated that the standardized panel would likely be conducted as an initial screening upon admission to the hospital and therefore any fentanyl utilized to assist labor would not alter results. Additionally, if parents are released from the hospital and provided with fentanyl, this would ideally be documented and therefore inform any screenings. Dr. Pitlock also raised privacy concerns regarding fentanyl use for labor management. Lisa Sherych clarified that the recommendation focused on screening for fentanyl if withdrawal signs are present in mothers and infants. Denise Tyre provided additional clarification that the intent behind the recommendation was to have information regarding fentanyl use more readily available. Denise further clarified that fentanyl should be part of drug testing panels for several reasons. One of these reasons is that there are children presenting to the hospital with overdose symptoms while test results for fentanyl are taking over a week. Additionally, there is a concern regarding mothers who use fentanyl recreationally during their pregnancy but are not testing positive during any drug screens at birth. As a result, child welfare agencies are not receiving the proper reports but instead receiving subsequent reports regarding child neglect or near fatalities due to the mothers' fentanyl use that could have been prevented if someone had been alerted of the fentanyl use at the time of birth. Denise also stated that any fentanyl distributed as a pain management tool during labor would surely be taken into consideration during any of the drug screens proposed by this recommendation. Dr. Pitlock thanked everyone for the clarification and that her concerns had been alleviated.

MOTION: Made by Kathie McKenna, seconded by Christine Eckles, to approve Washoe County's 2021 Quarter 2 Recommendation response letters as written.

UNANIMOUS VOTE; MOTION CARRIED.

8. For Possible Action: Review and respond to 2021 Quarter 4 summaries of regional CDR team statistics and recommendations and determine if these items need further discussion, ready for formal recommendation, or the item can be considered closed.

- 2021 Quarter 1- Washoe CDR recommends that a Public Service Announcement and community education be developed regarding minors operating ATVs.

Dawn Davidson provided a summary of the 2021 Quarter 1 Washoe Recommendation. She said that the recommendation originated from a recent CDR review in which at least 2 child deaths occurred that involved ATVs. Washoe CDR decided to recommend a PSA and community education regarding ATV operation as it pertains to minors being involved in ATV recreation. She asked the Executive Committee how they wanted to respond. Jessica Freeman stated that she would also provide additional information. She stated that there was no minimum age requirements for operating off-highway vehicles in our state and ATV drivers are not required to be a certain age either. However, children under the age of 16 years must be supervised by an adult who is at least 18-years-old. Dr. Cindy Pitlock asked if there were any helmet law required for youth. Dawn stated that non-operators are not required to wear a helmet. Lisa Sherych stated that, during commercial sale, it is clearly stated that ATVs should not be operated by those under the age of 12 or 13 years within the manufacturer's recommendations. Dawn verified that there are federal laws that limit the ages of ATV operators and that there are tags that indicate age limits. Kathie McKenna asked if this tag was only required to be on new ATVs, as she recently purchased one second-hand and there were no tags or any mention of age limits. Christine Eckles, Dr. Pitlock, and Desiree Mattice all agreed that the Executive Committee should take action to create public service announcements regarding ATV use for youth in addition to pursuing laws requiring helmets. Additionally, this is a recommendation that should be considered for the rest of the state. Jessica Freeman confirmed this was how the Executive Committee wanted to proceed and said that this recommendation would be brought back with some proposals during the May meeting.

NO MOTION MADE.

9. For Possible Action: Review, discuss, and approve parameters for State Fiscal Year (SFY) 2023 Public Awareness Funding.

- Approve the Notice of Funding Application (NOFA Application), timeline of application process and funding priorities/areas of focus.
- Determine who will participate on the subcommittee to review the applications to propose funding recommendations to the larger committee.
- Approve the amount of funding of SFY 2023 public awareness funding.

Stephanie Herrera reminded the Executive Committee that the Notice of Funding Application was provided with the rest of the meeting documents prior the meeting. Stephanie asked the Executive Committee if they wanted to require a year-end report and/or a presentation on how the funding was used, including successes and outcomes. She also asked the Executive Committee if they felt that any edits were needed for the application. Jessica Freeman reiterated for the record that there were two edits to the application, specifically the addition of language regarding evidence-based practices and requiring an end of year report. Stephanie stated that the proposed timeline for the parameters for State Fiscal Year 2023 Public Awareness Funding includes a release date for the application of March 1, 2022 and a deadline for submission of April 29, 2022.

Stephanie Herrera stated that the subcommittee will meet in May to review the applications to propose funding amounts to the larger committee. She asked if there were any volunteers for the subcommittee. Vickie Ives, Kathie McKenna, and Jennifer Spencer volunteered for this subcommittee. Stephanie

thanked the volunteers and stated that a special meeting will be held in June for the Executive Committee to vote on the funding recommendations. Approved funding amounts will be provided to applicants by July 1, 2022. Stephanie stated that the primary areas of prevention for the applications also needed to be determined. Last year, applicants were asked to focus on suicide prevention and the promotion of safe sleep environments. In past years, prevention efforts have been broader and included areas such as drowning prevention and injury prevention. Stephanie asked the Executive Committee if they had any input or comments. Margarita De Santos stated that she would like the committee to continue their focus on safe sleep environments. Jennifer Spencer agreed that the committee should continue to fund suicide prevention and safe sleep, in addition to any type of injury prevention and the prevention of any other potential trends. Stephanie stated that the amount that will be awarded will need to be approved and that DCFS confirmed that the Executive Committee can award up to \$200,000. Jessica stated that last year, the Executive Committee increased the awarding amount to \$300,000 in the previous year due to the COVID-19 pandemic, but that DCFS did approve \$200,000 this year in order to retain a specific amount in the reserves. Amber Howell stated that the Executive Committee should not have any reserves in child fatality funding and that the committee should be utilizing as many dollars as possible. She stated that the revenue stream is generated from the number of deaths, and therefore if less revenue is generated, that would mean prevention efforts are working. She stated that she could not think of a better time to disseminate any funding the committee had, especially considering recent increases in overdose deaths, suicides, and the ongoing COVID-19 pandemic. Jessica Freeman stated that last year the committee voted to keep \$50,000 in reserves, however DCFS Fiscal reported to legislation that the reserves would remain at \$150,000; as such, that would leave \$200,000 to spend this coming fiscal year. Jessica stated that some of the funding was allocated as operating funds with a contract with the Nevada Institute for Children's Research and Policy in order to facilitate the functions of the committee. Additionally, if there was a potential emergency that arose in the middle of a fiscal year, the reserves would be utilized to fund prevention efforts to address that. Lisa Sherych asked if there is existing language in state law that specifies how the Executive Committee should maintain its reserves, and if so asked for it to be presented to the committee. Lisa and Amber agreed that further clarification would be helpful so that the committee could maximize the amount of funding for prevention efforts while complying with legislative language. Jessica stated that she could locate the information that was presented to legislation authorizing the amount kept in the reserves.

MOTION: Made by Kathie McKenna, seconded by Desiree Mattice, to approve the application with the proposed amendment; for the timeline of releasing the application March 1, 2022, receiving the applications by April 29, 2022, and then providing funding in the amount of \$200,000 by July 1, 2022; and for the subcommittee consisting of members Vickie Ives, Kathie McKenna, and Jennifer Spencer.

UNANIMOUS VOTE; MOTION CARRIED.

10. For Possible Action: The Executive Committee's recommendation to DCFS for the annual Citizen's Review Panel report.

- Discuss the response from DCFS regarding the recommendations made for the 2021 report.
- Discuss and review possible recommendations to submit for the 2022 CRP annual report.

Stephanie Herrera stated that Public Law 104-234, Title 1, Section 106, the Child Abuse Prevention and Treatment Act (CAPTA) provides for a state grant program for the support and improvement of state Child Protective Systems (CPS). CAPTA requires that Nevada have at least three (3) Citizen Review Panels (CRP) to receive funding for child protection efforts. These panels are to review various aspects of the child protection system at the state and local levels and make recommendations for improvements. The Executive Committee is one of the three Citizen Review Panels in Nevada. Jessica Freeman stated that each year a CRP report is written and provides recommendations to DCFS administration to improve practice throughout the State. The following includes the recommendations the Executive Committee submitted for last year's CRP report and the response from DCFS:

- It is recommended that DCFS identify ways in which wraparound services can be provided to families who have youth that may have suicidal ideation. Additionally, best practice would be to refer a family and have services started as soon as possible to prevent more youth from dying by suicide.
 - Response: DCFS accepts this recommendation and will partner with other agencies, develop a list of providers, and recommend the local child welfare jurisdictions establish procedures when a youth may have suicidal ideations to ensure the youth's safety and that the youth is referred to services in a timely manner. DCFS child welfare will:
 - Partner with DCFS Mobile Crisis Response Team (MCRT) to learn about their process for referring families to service providers;
 - Partner with Wraparound in Nevada to learn more about what the program offers and if they can be a service provider for families with youth with suicidal ideation;
 - Develop a list of providers who are able to provide services to families on an emergency basis; and
 - Request the child welfare agencies develop procedures for child welfare staff to follow when a youth may have suicidal ideation.
- It is recommended that DCFS partner with sister agencies to provide education to parents/caregivers on how to look for signs of suicidal ideation and keep their child safe once suicidal ideation/signs have been identified. This includes, but is not limited to, appropriate firearm safety/storage, medication safety/storage, and other potential means.
 - Response: DCFS accepts this recommendation. DCFS will continue to partner with sister agencies to provide education for parents/caregivers. DCFS has already partnered with the Office of Suicide Prevention and Children's Behavioral Health who have produced a packet of resources to distribute to local agencies. DCFS will continue this partnership which will allow any new and/or relevant information to be distributed when appropriate. Clark County's Child Death Review Team has previously reached out to gun shop owners within Clark County to provide brochures about proper gun storage and training. Through the Executive Committee to Review the Death of Children, DCFS will monitor the progress of this activity and consider implementation statewide. DCFS will explore the ability for child welfare agencies to provide gun safety locks, gun safes, and/or medication lockboxes to distribute to families that may need them.
- It is recommended that DCFS partner with sister agencies and other community providers as appropriate to increase evidence-based public awareness around Safe Sleep and Water Safety in an effort to prevent unsafe sleep and drowning deaths.
 - Response: DCFS accepts this recommendation. DCFS will continue to partner with sister agencies. DCFS intends to explore development of public service announcements to increase the education around Safe Sleep environments and Water Safety. DCFS through the Executive Committee to Review the death of Children will:

- Award funding to agencies that prioritize Safe Sleep;
- Partner with the Division of Public and Behavioral Health (DPBH)'s Maternal, Child and Adolescent Health to promote the National Safe Sleep Awareness in October which could include public awareness campaigns and educational resources;
- Partner with Cribs for Kids to ensure all hospitals in the state have a Safe Sleep educational program;
- Explore how to increase public awareness regarding water safety and water competency and/or form partnerships with relevant agencies that can assist with this goal.

A discussion was held at the last meeting to develop recommendations around prevention of child homicide. Based on that discussion, the following recommendations are being proposed:

- It is recommended that DCFS partner with sister agencies and other community providers as appropriate to update the Choose Your Partner Carefully campaign with language that aligns with current research in order to help people identify when they may be in an unhealthy relationship that may impact their children, including placing children in an unsafe situation.
- It is recommended that DCFS perform a statewide analysis of current programs that are working to prevent the top four causes/manners of death in children in order to identify systematic gaps so that preventative funding can be more precisely targeted.

Stephanie Herrera asked if the Executive Committee wanted to add any additional edits regarding the prevention of child homicide deaths or if they had any additional suggestions for other recommendations.

MOTION: Made by Desiree Mattice, seconded by Sheri McPartlin, to approve recommendations to submit for the 2022 CRP annual report.

UNANIMOUS VOTE; MOTION CARRIED.

11. For Possible Action: Top four manners/causes of death in children in Nevada.

- Unsafe Sleep
- Suicide
- Drowning
- Homicide

Stephanie Herrera provided an update for youth suicide counts by sex that occurred in 2021. There were a total of 15 deaths, including 13 males and 2 females.

NO MOTION MADE.

12. Final Public Comment

No public comments made.

13. Adjournment

It was stated by Margarita De Santos that the next meeting of the Executive Committee will be held on May 18, 2022 at 10 AM. The meeting was adjourned at 11:21 AM.

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