MINUTES

of the

Executive Committee to Review the Death of Children Subcommittee Meeting to address Pediatric Child Abuse Specialist for Nevada

held on

December 11, 2024

via Microsoft Teams <u>Meeting Link</u>

Call-in number: 1(775) 321-6111; Extension: 136916409#

1. Call to Order

April Stahl called the meeting to order at 10:01 PM.

2. For Information: *Roll Call*

- Subcommittee members present:
 - o Dr. Andrew Eisen, Valley Health Systems
 - Amber Hurtado, Human Services at Washoe County
 - Jorge Montano, Safe Kids
 - o Sheri McPartlin, CCSD

• Staff and guests:

- Carissa Pearce, Children's Advocacy Alliance
- Dylan Nall, DCFS
- o Dr. Kris Deeter, Renown Children's Hospital
- o Sabrina Schnur, Belz & Case Government Affairs
- Dr. Terence McAllister, Desert Valley Pediatrics
- Dr. Yaron Ivan, Sunrise Children's Hospital
- Kyra Morgan, DCFS
- o Dr. Nathan Shaller, Clark County Office of the Coroner/Medical Examiner
- Dr. Heron Baumgarten, Western Surgical Group
- o Orjola Merkaj, NICRP
- April Stahl, DCFS
- Beverly Brown, DCFS

3. Initial Public Comment (Discussion only)

April Stahl stated that to provide public comment, please unmute your microphone before speaking, or you can call into this meeting by using the number 775-321-6111, with passcode number 136916409#. Persons making comment will be asked to begin by stating their name for the record.

There was no public comment.

4. For Information Only: Review the purpose of establishing this subcommittee as determined by the Executive Committee on September 25, 2024.

April Stahl stated that the Clark County Child Death Review Team recommended recruiting and retaining a pediatric child abuse specialist in Nevada. At the September meeting, the subcommittee looked at what barriers were present for this recommendation and tried to come up with solutions.

- **5. For Possible Action:** Review and possible approval of subcommittee meeting minutes from November 04, 2024.
 - MOTION: Made by Terence McAllister seconded by Andrew Eisen to approve the meeting minutes from November 04, 2024.
 UNANIMOUS VOTE; MOTIONED CARRIED.
- **6. For Possible Action:** Consideration, discussion, and possible approval of a recommendation to the Executive Committee to enhance mandatory reporter training requirements in Nevada.

April Stahl stated that Dr. Eisen has worked with others to put into place the statute that requires mandatory reporters to receive training. An issue discussed at the previous subcommittee meeting was how to ensure that all mandatory reporters receive the same training. She stated that previously, Dr. Ivan discussed going to different hospitals and talking to staff regarding mandatory reporting and suspected child abuse/neglect. Dr. Ivan mentioned that emergency providers understand their role as mandatory reporters; however, they hesitate due to fears of falsely accusing or punishing parents. Reporting is not about assigning blame; it focuses on ensuring that the appropriate parties can address the child's safety and take necessary actions. Providers will sometimes transfer patients to Sunrise Hospital to avoid reporting a potential child abuse/neglect case. He stated that providers must understand that any suspicion of abuse should be reported, regardless of whether or not the patient is transferred to another hospital.

Dr. Eisen stated that under NRS 432B, all mandatory reporters—including those licensed under health professions chapters, except veterinarians, and other specified individuals—must be informed of their reporting obligations. Licensing or certifying agencies are responsible for providing this notice and maintaining written acknowledgment from licensed or certified individuals. He stated that physicians renewing their licenses must check a box confirming that they will report suspected child abuse or neglect. Their employer is responsible for informing individuals not licensed or certified by the state. While the law mandates informing individuals of their obligation, it does not explicitly require training.

— DRAFT —

Sheri McPartlin stated that an NRS requires all school district employees, including Clark County's 42,000 staff, to receive annual child abuse training. Reports from schools are common, but parents tend to overreact when they become aware of who made the report. This sometimes leads to threats against school staff and results in staff being relocated. She asked if there could be confidentiality regarding the staff that conducts a report. Dylan Nall stated that she has worked previously in CPS. She stated that parents do ask who made the report but they are not allowed to disclose that information. Sometimes, parents can put the pieces together and determine who made the report. She stated that parents can request the report, but cannot see who made it. Sheri asked how we could protect staff. Beverly Brown stated that she was unsure how to proceed with what Sheri was asking. Beverly wondered whether the subcommittee would be interested in making a recommendation for the Executive Committee to evaluate what currently exists for mandated reporters. She stated that there is an inconsistency in mandated reporter training depending on the profession or agency. For example, educational personnel and childcare workers have specific training requirements, but not all mandated reporters do.

 MOTION: Made by Andrew Eisen seconded by Terence McAllister to assess the current standards for training and make further recommendations for improving that training statewide.

UNANIMOUS VOTE; MOTIONED CARRIED.

7. For Possible Action: Consideration, discussion, and possible action regarding solutions and next steps to obtain a pediatric child abuse specialist for Nevada.

April Stahl stated that this recommendation was from the Clark County Child Fatality Review team. Intermountain Health is working to build a standalone children's hospital in Las Vegas. However, this effort does not provide clear direction for next steps. Sheri McPartlin stated that Intermountain Health conducted a needs assessment with the Clark County School District to identify gaps in the community. Their focus includes expanding mental health services and addressing child abuse. April asked Sheri if she had the contact information of the individuals who came out to conduct the needs assessment. Sheri stated that she would share that information with April.

Dr. Eisen stated that there are challenges with recruiting fellows nationwide for a child abuse specialist. Establishing a fellowship requires board-certified child abuse specialists. Established programs like the University of Utah face difficulties. Dr. Ivan stated that establishing a pediatric child abuse fellowship at Sunrise or UMC Hospital might not be feasible in the near future. However, a more practical approach could involve recruiting fellows early in their training. Many hospitals and companies offer first-year fellows a stipend during their fellowship in exchange for signing an agreement to work at their hospital for a set period after completing their training. This approach only needs funding and avoids the hassle of starting a complete fellowship program. Dr. Eisen stated that offering stipends to fellows in exchange for a commitment to work locally is a good short-term solution, but finding the money to fund it is a big challenge. It

is difficult to show healthcare organizations or the state the benefits, especially since the payoff might take years. While this approach is faster and easier than starting a full fellowship program, it still takes time and planning. He stated that a recommendation could help by asking the legislature for funding and working with healthcare organizations to create a program that supports fellows during training. Dr. Deeter stated that in Northern Nevada, a Child Protection Team (CPT) has been established to address child abuse cases. Unlike Southern Nevada, this region relies on a single hospital system that centralizes serious abuse cases. The CPT, comprising five staff members, coordinates case reviews, provides consultation for rural hospitals, creates comprehensive case summaries, and facilitates communication with law enforcement and district attorneys across various jurisdictions. Efforts are underway to secure grants of \$400,000 to \$600,000 to fund specialized training for the team, including certificate programs and guidance from a visiting child abuse expert. Collaboration with state partners and legislative support is critical to sustaining the program and addressing the region's unique challenges in handling child abuse cases. Dr. McAllister stated that in Reno, the single hospital system facilitates collaboration, while in Clark County, pediatricians and hospitals often work in isolation when diagnosing child abuse. He suggested creating a team of experts, including pediatricians and other specialists, to work together on cases. Sunrise Hospital, which already handles most child abuse cases and has strong expertise, could be a good starting point for building this team.

Dr. Eisen stated that he supports forming a team to handle child abuse cases, similar to what is being done in Northern Nevada. He stressed the importance of involving physicians linked to multiple hospital systems for better collaboration. He stated that this plan would involve building a team of experienced physicians who could provide consultations for hospitals when needed. He stated that several people present during the meeting, including himself, are willing to be part of this team. Depending on the situation, this could involve responding to cases over the phone, Zoom, or in person. He suggested the Children's Advocacy Center, which already focuses on sexual abuse cases, as a potential base for this team. Dr. McAllister stated that other states face similar challenges with child abuse response, but some have implemented solutions. Utah coordinates its child abuse teams through the University of Utah, and Kansas has a statewide response team centered at a university. Academic institutions play a role in leading and organizing these efforts, helping to bridge gaps between private institutions. He stated that efforts have already started at UNR.

April Stahl stated that she contacted UNR and UNLV to involve universities in promoting interest among students. She met with Cheryl Cooley at the Child Advocacy Center in Las Vegas to discuss enhancing the training of forensic nurses. She contacted the hospital leaders but has not yet received a response. She also reached out to someone from UNLV, but they did not want to participate. She asked the subcommittee if there was anyone they may have connections with willing to join the subcommittee. Dr. Deeter stated that she has a connection with the Pediatric Chair at UNLV and multiple other people. April asked if she could send her any information she has regarding potential connections. Kyra Morgan stated that she could connect April with individuals from the School of Medicine.

April Stahl asked the subcommittee if anyone would like to present the team's discussions to the Executive Committee at the February meeting. Dr. Terence McAllister stated that he is willing to volunteer. April asked the team if they preferred a consistent meeting time or if they wanted to

coordinate a time that worked best for everyone. The subcommittee agreed to meet on the second Wednesday of every month from 10am-11am.

8. Final Public Comment and Discussion

• Action may not be taken on any matter brought up under this agenda item until scheduled on an agenda for a later meeting.

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There was no public comment.

9. Adjournment

The meeting was adjourned at 10:58 PM.