

STARK COUNTY CHILD FATALITY REVIEW & FETAL INFANT MORTALITY REVIEW

2023 Annual Report





*"Striving Toward a **Healthier** Community."*

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PURPOSE AND OBJECTIVES

The primary goal of the Child Fatality Review (CFR) and Fetal Infant Mortality Review (FIMR) process is to reduce the incidence of preventable infant and child deaths. In Stark County this is done a detailed comprehensive local review of the circumstances surrounding the deaths to all infants and children in our community. These reviews are completed by a multidisciplinary team made up of representatives from the local agencies listed on page 3 and 4. It's our hope that through this process of reviews and recommendations we can raise community awareness about the circumstances surrounding preventable child deaths and ultimately eliminate or decrease these deaths from continuing to occur. The CFR team was chaired by the Stark County Health Department and reviewed the deaths of children over age one. The FIMR team was chaired by Canton City Public Health and reviewed deaths that occurred before the age of one.

After a review of the infant and child deaths that occurred to Stark County children during 2023, the Stark County Child Fatality Review Board and the Stark County Fetal Infant Mortality Review Team would like to provide the community with their 2023 Recommendations for the prevention future deaths.

The Stark County Child Fatality Review Board and the Stark County Fetal Infant Mortality Review Team completed reviews of 32 deaths. There were 23 cases reviewed by CFR and 9 cases reviewed by FIMR. The deaths that were reviewed occurred between 2020 through 2023. CFR has one case from 2021, four cases from 2022 and six cases from 2023 that are pending and will be reviewed in the future. FIMR has eighteen cases from 2023 that are pending and will be reviewed in the future.



MEETING FREQUENCY AND STRUCTURE

Frequency of Meetings

Child Fatality Review meetings are held on an annual basis or more often if necessary to review data and individual cases. Two meetings were held in 2023. Fetal Infant Mortality Review meetings are held on every other month or more often if needed.

Structure

The county commissioners appointed a health commissioner to establish the CFR committee. ORC 307.622 states, "The review committee shall consist of the following:

1. A county coroner or designee;
2. The chief of police of a police department or the sheriff that serves the greatest population in the county or region or a designee of the chief or sheriff;
3. The executive director of a public children services agency or designee;
4. A public health official or designee;
5. The executive director of a board of alcohol, drug addiction, and mental health services or designee;
6. A physician who holds a license issued pursuant to Chapter 4731. of the Revised Code authorizing the practice of medicine and surgery or osteopathic medicine and surgery, specializes in pediatric or family medicine, and currently practices pediatric or family medicine.

REQUIRED COMMITTEE MEMBERS

Kirkland Norris, R.E.H.S, M.P.H
Health Commissioner

Ronald Rusnak, M.D
Stark County Coroner

Sondra Troyer
Stark County Sheriff's Office

Tricia Mayle
Stark County Job and Family Services

Amanda Uhler RN, MPH,
Public Health Official

John Aller, LICDC-CS, LPCC-S
Executive Director of Stark County Mental Health and Addition Recovery

Dr. Maureen Ahmann, D.O
Physician

ADDITIONAL PARTNER AGENCIES THAT ARE INVITED

Child Fatality Review

Canton City Public Health

Canton City Police Department

Stark County Educational Service
Center

Alliance for Children and Families

Plain Township Fire and Rescue

Fetal Infant Mortality Review

Stark County Health Department

Akron Children's Maternal Fetal
Medicine at Aultman

Cleveland Clinic Mercy Hospital

Community Health Care, Pediatrics

Aultman Hospital

Stark County Coroner's Office

Akron Children's Hospital- NICU at
Aultman

My Community Health Care

REVIEW PROCESS AND DATA SOURCES

The review boards are focused on all childhood decedents who resided in Stark County. Children ages 1 through 17 were reviewed by the CFR team. Children under the age of one and fetal deaths were reviewed by the FIMR team.

For each death, the boards collect demographics including age, sex, race, ethnicity, the year the death occurred, the location of the death, the cause of death, factors that contributed, medical records and any other pertinent information.

The cases reviewed in this report were deaths that occurred from 2020 through 2023. Each case review is discussed among the team to gather a comprehensive understanding of the context of the decedent's life and the events and actions that led to the fatality. The discussions highlight potential contributing factors, intervention implications and recommendations for systemic improvements.

Data sources include: ODH Gateway Mortality Warehouse, behavioral health records, medical records, newborn screening records, children with medical handicaps records, immunization records, criminal justice records, death certificates, forensic records, prescription drug records, social service records, and military/veterans' affairs records.

DATA FINDINGS

Table 1: County Metrics

	Total Number Deaths	Total Number Reviewed During 2023
Under Age 1	26 Infant, 22 Fetal	8 Infant, 1 Fetal
Age 1-17	13	23
Total	39*	32

*Per Ohio Vital Statistics

Figure 1: Deaths by Gender

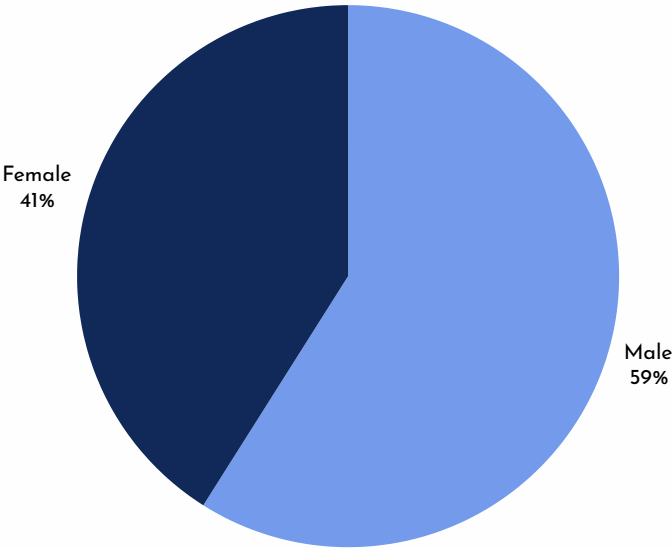


Figure 2: Deaths by Manner

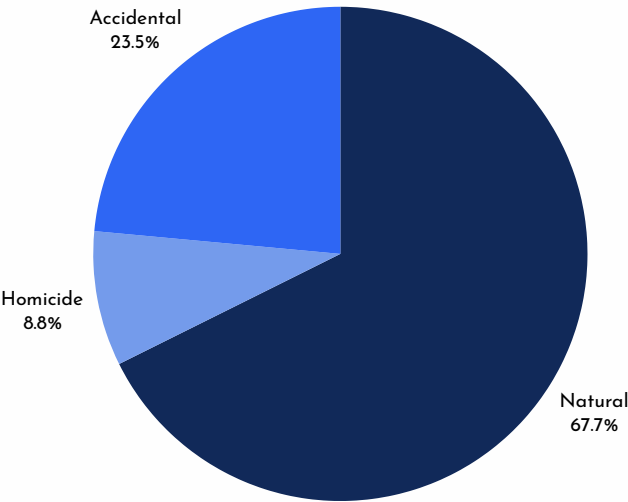
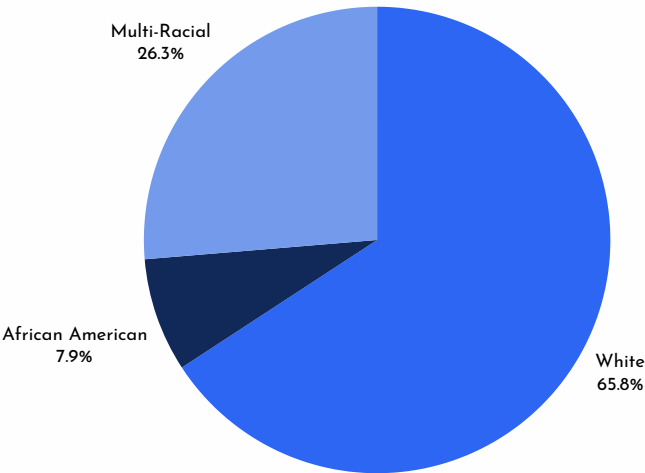
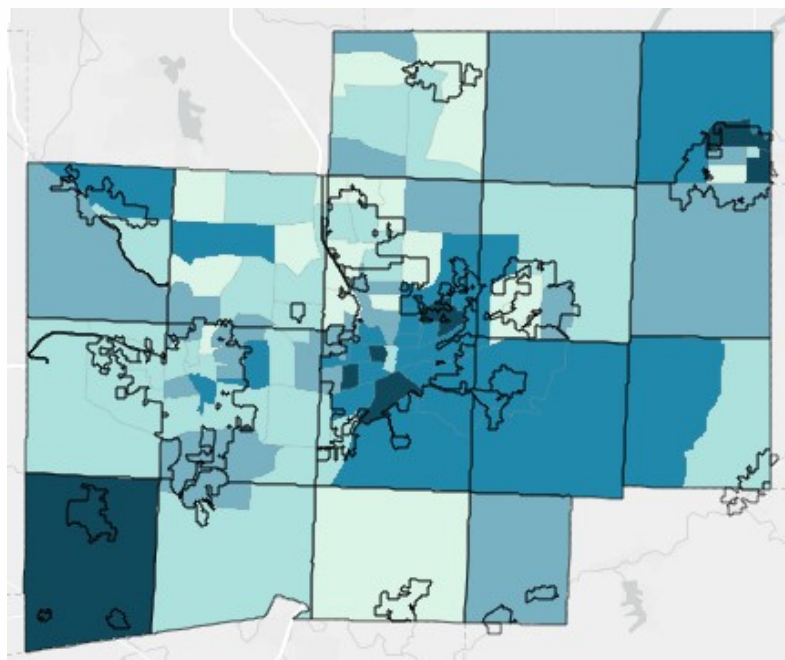


Figure 3: Deaths by Race



CHILDHOOD DEATHS BY CENSUS TRACT

The map below shows where children who have passed away resided. The lighter colors depict fewer deaths, and the darker colors represent a higher incidence of deaths. The map used data from 2000-2023.



RECOMMENDATIONS FOR THE PREVENTION OF NATURAL AND ACCIDENTAL DEATHS

- Education on signs of drowning
- Life guarded public beaches
- Safe gun storage
- Public safety announcements on gun safety
- Education on fireplace safety and inspections
- Home fire safety and escape plan implementation
- Increased availability of low or no-cost escape ladders and smoke detectors
- Increased use of road signs to slow down in residential areas
- Use of speed bumps, roundabouts in residential areas
- Education to the public on safe sleep
- Provide safe sleep education at all medical and WIC appointments before and after birth
- Educate and encourage parents not to bottle prop through medical and WIC appointments
- Advocate for bottle and formula manufacturers to warn of dangers of bottle propping
- Provide education on safe swaddling at prenatal and infant well check appointments
- Allow for virtual home visiting services and in person services
- Support for parents after delivery
- Increase funding for programs to keep pregnant teens in school
- Funding for community homes for young, at-risk mothers
- Funding for school-based health centers for education and support for teen parents
- Promote referrals to hospice care

RECOMMENDATIONS FOR THE PREVENTION OF HOMICIDE AND SUICIDE DEATHS

- Safe gun storage
- Advocate for gun lockboxes to distributed through pediatrician offices and police departments
- Increased access to mental health services for veterans and families
- Development and implementation of safety plans for families
- Screenings for PTSD and home safety screening for veterans
- Increased funding for veteran organizations
- Ad campaigns for veterans with PTSD and safety tips
- Increased firearm safety
- Increased mental health services available at schools
- Resiliency training and coping strategies taught through schools
- Ensure medical conditions are treated using best practices
- Encourage extracurricular activities
- Increased oversight of home/virtual schooled students
- In-home visits for home/virtual schooled students
- Increased access to data-sharing of mental health records
- Decrease the stigma regarding mental health diagnosis and treatment
- Funding for suicide prevention program for parents

RECOMMENDATIONS FOR THE PREVENTION OF INFANT DEATHS

- Make school programming for pregnant and parenting students available in Stark County
- Implement an awareness campaign on proper feeding practices
 - Do not prop bottle
 - Education that if breastfeeding, it is okay to bottle-feed if needed
 - Education on use of alcohol and other drugs while breastfeeding.
- For families new to Stark County:
 - Create a culturally appropriate resource containing information on pregnancy and parenting related services to be distributed through OB/GYN offices, social media platforms, Department of Job and Family Services, insurance providers, and other non-traditional locations.
- Develop a strategy to engage OB/GYN and pediatricians about counseling clients on personal reproductive life plans which includes long-active reversible contraception.
 - Increase access to birth control.
- Safe sleep education campaign targeting anyone that cares for an infant.
 - Address cultural influences especially related to co-sleeping/multiple persons in a bed.
 - Promote and provide information on room sharing.
 - Targeted messaging to parents/caregivers or anyone who may house an infant at any time offering safe sleep education including a cribette and safe sleep training through Cribs for Kids program.
 - Identify different avenues (traditional and non-traditional) to offer safe sleep education and cribette distribution.
 - Create respite care/social support options for parents/caregivers; especially when multiple children are in the home.
- Prenatal and postpartum education campaign.
 - Promote the importance of early prenatal care and attending postpartum visits.
 - Educate on why baby needs to be seen at regular wellness appointments.
 - For medical providers: employ the teach back methods to confirm that parents of premature infants and those with potentially life altering conditions understand when to call the physician, go to the emergency department, etc.
 - Provide education about conditions/behaviors that may put an infant at risk for being born at a low weight/premature via various social media sites and non-traditional avenues.
 - Provide education on the possible risks to mother and baby by use of herbs, alternative medications and homeopathic remedies.
- Resources availability.
 - Increase promotion, education and access to WIC.
 - Promote resources on smoking cessation, weight management, other health lifestyle programs for pregnant persons, including parenting classes.



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