

Child Abuse Death Review Data Information Guide

The guide has been developed to assist the local teams in completing the child abuse death review information form. Since the data from this form will be included in the required annual report to the legislature, review teams must ensure that all applicable sections of the form are completed and that the information is accurate. Completed forms should be sent to:

Department of Health
Children's Medical Services
Child Protection Unit
4052 Bald Cypress Way, Bin A06,
Tallahassee, Florida 32399-1707.

The form is divided into thirteen sections (A-M). Sections A – I and K - M will be completed for all child abuse deaths. Section K (Circumstances of Death) has twelve subsections. The circumstances of the death will determine which one of the twelve subsections is to be completed. Sections L and M address team conclusions, recommendations and needed prevention activities. The instructions correspond to the alpha/numeric sections of the form. Unless otherwise noted each section must be completed in its entirety.

A. Identification Information

Section A gathers important demographic information about the deceased child. All information in this section must be completed for all child abuse death reviews.

1. **County of residence**. Refers to the county where the child lived.
2. **County of illness/injury**. Refers to the county where the abuse or neglect that resulted in death occurred.
3. **County of death**. Refers to the county where the child is pronounced/declared dead, which may not be the county of illness/injury. For instance, a child may have been severely injured in one county and transported to a neighboring county, due to available medical facilities, where the child subsequently dies.
4. **Type of death**. Indicate whether the death was the result of abuse or neglect.
5. **Last name**. Print the legal last name of the deceased child. Make sure that the spelling of the name is correct.
6. **First name/middle initial**. Print the legal first name and middle initial of the deceased child.
7. **Date of birth**. Enter the child's date of birth. Make sure that the information entered is accurate and verified through birth records.
8. **Date of death**. Enter the date that the child was pronounced dead.
9. **Sex**. Self-explanatory.
10. **Race**. Self-explanatory.
11. **Ethnicity**. Self-explanatory.
12. **Mother's name**. Required, along with Date of Birth for verification purposes as a cross-reference to ensure ID of the deceased child.
13. **Date of birth**. Self-explanatory.
14. **Father's name**. Self-explanatory.
15. **Date of birth**. Self-explanatory.

B. Social Information

This section addresses social factors that may have contributed to the child's death. Social factors include such things as number of inhabitants living in the household and their relationship to the deceased child and the presence of a paramour in the household and his/her role in parenting the children in the home. This section should be completed for all child abuse deaths.

- 1. Household members.** A comprehensive list of possible household members has been provided. Identify ALL household members by age, sex and race. Enter "F" for female and "M" for male for sex. The coding for race can be found in section A, question 8. Indicate whether criminal record checks were completed on all appropriate household members by a "Y" for Yes and "N" for No. Additionally, identify the head of household by a check in the box. Head of household refers to the person in charge of making the primary decisions for the household.
- 2. Marital status.** Self-explanatory.
- 3. Other child death.** If another child in the family died, indicate the name, age and cause of death, even if the death was a natural one. Obtain a copy of the death certificate, if available.
- 4. Paramours.** Self-explanatory. If no paramour, check N/A
- 5. Primary caregiver.** Indicate whether the live-in paramour has assumed primary responsibility for the care of the children in the home. If no paramour, check N/A.
- 6. Primary disciplinarian.** Indicate whether the parent/caregiver has allowed the live-in paramour to assume responsibility for the discipline of the children in the home. If no paramour check N/A.
- 7. Household income.** Indicate if known, who provides the income to support the household members. If the response is "Other" please specify in space provided.

C. Child Abuse/Neglect

Section C provides information regarding the number and type of prior abuse/neglect cases that have been investigated concerning the child and family. Count each report for each subject/household member. Court action and supervision by the department is explored as well as the identification of risk factors present in the home at the time of the child's death. The source of this information can be found in the Initial Child Safety Assessment completed by DCF staff. Additionally, information on any handicaps or medical conditions, which may increase a child's vulnerability, is necessary in addressing the overall risk factors. This section should be completed for all child abuse deaths.

- 1. Subjects of prior reports.** Prior reports should be reviewed to obtain an unduplicated count of all reports for each family member. The number of prior reports should be noted for all "Yes" responses. These numbers may differ by individual, especially when the household consists of blended families.
- 2. Last prior report.** Indicate when the last report was received by number of months. An open report at the time of child's death would be considered a prior. The only exception to this would be a report alleging the specific incident resulting in the death, which may have been received weeks prior to the death.
- 3. Prior maltreatment.** If the number of prior reports for the deceased child is greater than 0, the reports should be reviewed to determine whether the specific

- maltreatment involved abuse, neglect or both. Check the most appropriate response to this question.
4. **Active investigation.** Indicate whether there was an active report at the time of the child's death. Do not enter a Y response for a report alleging the specific incident resulting in the death, even if the report was received weeks prior to the death. If this question has a Yes response, the number of prior reports on the deceased child must be one or more.
 5. **Previously adjudicated/child.** If there was prior court involvement check to determine if there was an adjudication of dependency by the court. If there was, check the yes response. Check "Unknown" for those cases in which information is not provided or available.
 6. **Supervision.** If the Department of Children and Families (DCF) records indicate a terminated or active supervision case of the deceased child, the "Y" response is appropriate. This also includes cases of courtesy supervision by the department at the request of another state and voluntary supervision where there was no court intervention, but services were provided.
 7. **Previously adjudicated/siblings.** See #5 explanation.
 8. **Supervision/siblings.** See #6 explanation.
 9. **Handicaps.** Self-explanatory.
 10. **Behaviors.** Self-explanatory.
 11. **Risk factors.** The risk factors listed are those found in the DCF Initial Child Safety Assessment. It is important to address each of the risk factors in order to obtain insight into the dynamics of the household. Every attempt should be made to obtain the necessary information to address each risk factor; however, if this information is not available use the "U", Unknown, response rather than leaving them blank.
 12. **Handicaps/siblings.** Self-explanatory.

D. Law Enforcement

This section gathers information on any previous law enforcement involvement with the family prior to the child's death. This information should not be limited to the residence where the child resided at time of injury/death but should also include calls to other known residences as well. This section must be completed for all child abuse deaths. Additional sections to be completed are A, B, C, E, F, G, H, I and K.

1. **Prior involvement.** Self-explanatory
2. **Type calls.** Self-explanatory

E. Domestic Violence

This section gathers information regarding; any history of domestic violence concerning the parent/caregiver, what the child(ren) have witnessed and what intervention/safety plans have been implemented by the parent/caregiver. "Any domestic violence history" refers to at least one incident of domestic violence perpetrated on or by the parent/caregiver." This section must be completed for all child abuse deaths. Additional sections to be completed are A, B, C, D, F, G, H, I and K.

1. **History.** DCF, law enforcement and other agencies familiar with the family will provide information to address this question. For the purpose of this review, a history is defined as one or more incidents perpetrated on the parent/caretaker.

Additionally, incidents of domestic violence are not confined to the present address and may have occurred at previous residences, parent/caretaker's work place, or else where.

2. **Incidents.** This question addresses whether the incidents of domestic violence increased in frequency prior to the child's death.
3. **Documented.** Documented incidents are defined as any department/agency involvement with the family where information indicates that domestic violence was occurring in the home. Undocumented incidents are defined as information obtained through interviews with the family, relatives or friends.
4. **Safety plan.** This question addresses whether the agency/department (law enforcement, DCF and other community agency) involved with the family developed a safety plan for the non-abusive parent and children.
5. **Involvement.** This question addresses whether the non-abusive parent participated in the development of the family safety plan or was only told about it.
6. **Children.** This question addresses the degree of the children's involvement in the domestic violence occurring in the home. Witnessing is defined as hearing or seeing, but not taking part in the domestic violence incidents. Check all that apply.

F. Death/Autopsy Information

This section gathers information regarding the place of injury, date and time of incident/death as well as the medical examiners findings. The primary and secondary cause of death information can be found on the death certificate. If the ICD10 code is known, provide the information, if not, leave blank. This section must be completed for all child abuse deaths. Additional sections to be completed are A, B, C, D, E, G, H, I and K.

1. **Place of injury/illness.** Self-explanatory.
2. **Date of injury.** Indicate the date of the child's injury/illness. For example, child was severely injured, but did not die until two weeks later. The date of injury/illness would be two weeks prior to the death. Use the "Unknown" response if the date is not known.
3. **Time of injury.** Self-explanatory.
4. **Date of death.** Self-explanatory.
5. **Time of death.** Self-explanatory.
6. **Autopsy.** Indicate whether an autopsy was completed on the deceased child. Note: Medical Examiner involvement does not mean that an autopsy was completed.
7. **Death scene investigation.** Indicate the department that conducted the death scene investigation.
8. **Prior trauma.** If applicable, the medical examiner should address this in the autopsy report. If this information is not available at the time of the review, documentation from medical staff (CPT physician, ER doctor) that examined the child at time of admittance to the ER will be sufficient.
9. **Primary cause.** Self-explanatory.
10. **Secondary cause.** Self-explanatory.
11. **Manner of death.** Self-explanatory.

G. Supervision

This section gathers information relating to the level of supervision provided by the parent/caregiver at the time of the child's injury that resulted in the child's death. Teams will identify what factors were present that had an impact on the parent/caregiver's ability to provide appropriate supervision. This section must be completed for all child abuse deaths. Additional sections to be completed are A, B, C, D, E, F, H, I and K.

1. **In charge.** Identify parent/caregiver responsible for supervision of the child at the time of the illness/injury event. Multiple responses are allowed to cover situations where there was more than one parent/caregiver present and providing supervision at the time of the injury/death. If, given the child's age, the response to this question is "v", skip questions 2 and 3 and go to the next section.
2. **Adequacy of supervision.** This question addresses the level of supervision provided at the time of the child's injury/illness. If the child's injuries were inflicted by the parent/caretaker, then supervision would not be an issue and your response would be "not applicable". If the answer to question 2 is no, answer questions 2 a – d. These questions addresses the level of supervision provided at the time of child's death. If the response is "yes" skip a – d and go to the next question.
3. **Witness.** Self-explanatory.

H. Perpetrator Information

This section gathers information regarding the perpetrator. The perpetrator is identified as the person(s) who is thought to have committed the act that resulted in the child's death. This section must be completed for all child abuse deaths. Additional sections to be completed are A, B, C, D, E, F, G, I, and K.

1. **Identified.** Indicate whether a perpetrator has been identified either by law enforcement or the Department of Children and Families. If the response is no or unknown continue to Section I. If the response is yes, the remaining questions must be completed.
2. **Perpetrator.** If a perpetrator has been identified in question 1, their relationship to the child, race, sex and age are to be documented here. When completing the race information refer to section A, question 8 for the appropriate codes. Enter "F" for female or "M" for male for perpetrator's sex.
3. **Perpetrator history.** Enter a "Y" for Yes or "N" for No for each of the items listed. If the information is not provided enter a "U" for Unknown. Provide a response for each section.
4. **Criminal action.** Indicate the status of the criminal investigation at the time of the review. If the investigation is pending, additional follow-up will be needed to determine the outcome of the criminal investigation and update the data form to reflect this information.
5. **Criminal charge.** Indicate the charge(s) that have been filed directly relating to the child abuse death. If no charges filed, do not complete this question.
6. **Conviction.** Indicate the specific charge for which the perpetrator was convicted. If the criminal court case is pending at the time of the review, additional follow-up will be needed to determine the outcome of the court case. If conviction has not occurred, do not complete this question.

I. Injury Related Deaths

This section gathers information regarding circumstances surrounding the injury/illness. The teams will determine if the deceased child was the intended victim, whether the injury/illness occurred during the commission of a crime and if the injury/illness was drug or gang related. Team members should note that there are situations where the person causing the injury is not always identified as the perpetrator. For example, an older sibling hits the child causing the injuries that led to the child's death. While the sibling is identified as having caused the injury, the parent/caregiver may be identified as the perpetrator based on their knowledge of the sibling's history of violence and a failure to adequately supervise and protect the deceased child. Question 7 is only for deaths involving suicide.

1. **Aggressive/assaultive act.** Refers to any hostile, forceful, or self-assertive act. For example, a teenager shooting him/herself with a gun is acting aggressively.
2. **Intentional.** Intentional refers to the act that resulted in death being one that was deliberate, willful or planned (e.g. suicide or homicide).
3. **Person causing injury.** Self-explanatory.
4. **Drug related.** Refers to any drug related activity (using, buying/selling, etc.) that contributed to or resulted in the deceased's death.
5. **Gang related.** Refers to direct gang activity that resulted in or led to the deceased's death. If a child was a member of a gang and died of injuries sustained during a fight with a rival gang, this is considered gang related. Also if the child was not a member of a gang, but was killed because of gang activity then this is gang related. If the injury/illness event does not involve specific gang activity, then the death would not be considered gang related.
6. **Commission of a crime.** Self-explanatory.
7. **Suicide.** Question is designed to gather information about possible risk factors present prior to decedent's death.

J. Infant Deaths

This section gathers information regarding infants under one year of age that die from birth-related problems or natural causes. As such it does not meet the current review criteria and will not be used at this time. However, it will remain on the child abuse death review form for possible future use. Much of this information will come from medical records or history provided by the parent. Additional sections to be completed are A, B, F and K.

1. **Age at death.** Self-explanatory.
2. **Gestation age.** Self explanatory.
3. **Birth weight.** Self-explanatory.
4. **Multiple births.** Number of times the mother has given birth.
5. **Prenatal visits.** Self-explanatory.
6. **First prenatal visit.** Self-explanatory.
7. **Medical complications.** Self-explanatory.
8. **Type of Complications.** Identify one or more diagnosed medical complication that occurred during the pregnancy.

9. **Second hand smoke.** Did the parent/caregiver or others in the household smoke around the child (in the house, in the car, etc.).
10. **Drug use.** Self-explanatory.
11. **Alcohol use.** Self-explanatory.

K. Circumstances of Death

This section gathers information regarding the specific circumstances of death. The section is divided into 11 subsections, each addressing a specific circumstance of death. At the beginning of the section is a checklist of all the subsections. Identify the most appropriate circumstance of death then locate and complete the information in that subsection. Teams are reminded that issues of supervision are addressed in Section G and should not be re-addressed here. This section must be completed for all child abuse deaths.

Sudden Infant Death Syndrome (SIDS) – This section does not meet the current review criteria; however, it has been included for possible future use. This section gathers information to assist in determining whether other factors may have contributed to the child's death. Information should be provided by law enforcement and the medical examiners office. Additional sections to be completed are sections A, B, F, G, and J.

1. **Position at death.** Self-explanatory.
2. **Normal position.** Self-explanatory.
3. **Location.** Self-explanatory.
4. **Sleeping.** Self-explanatory.
5. **Items.** Self-explanatory.

Inadequate Care or Neglect – This subsection gathers information regarding specific neglect related deaths that are otherwise not covered in other sections. For example, if a child dies from medical problems; however, the death is known or suspected to be the result of Munchausen Syndrome by Proxy, the appropriate box would be checked. Additional sections to be completed are A, B, C, D, E, F, G, H and I.

Vehicle Related Death – This subsection should be completed if the circumstances surrounding the death were due to a vehicle related accident. Included in this subsection are situations in which the child was killed as a result of the parent/caretaker running over the child with a vehicle in a driveway or on a road. Additional sections to be completed are sections A, B, F and G. Sections C, D and H should be completed if the death was the result of abuse or neglect.

1. **Occurrence.** Self-explanatory.
2. **Position.** Self-explanatory.
3. **Occupant.** Self-explanatory.
4. **Not occupant.** Self-explanatory.
5. **Road condition.** Self-explanatory.
6. **Restraint.** Refers to any child safety restraint that was in the car and utilized or not utilized.
7. **Helmet.** This question addresses accidents in which the deceased was on a bicycle. For all other's check the "c" response.
8. **Alcohol/drugs.** Self-explanatory.
9. **Cause of accident.** Self-explanatory.

Drowning – This subsection gathers information concerning circumstances related to drowning where the child was at time of drowning, what the child was doing and what safety equipment was available either on the child or near by at the time of the drowning. Questions concerning supervision are addressed in Section G, Supervision. Additional sections to be completed are section A, B, C, D, E, F and H.

1. **Place.** Self-explanatory.
2. **Activity.** Identify what activity the deceased child was engaged in at the time of the illness/injury.
3. **Flotation device.** Self-explanatory.
4. **Supervised.** Self-explanatory.
5. **CPR.** Self-explanatory.
6. **Safety equipment.** Self-explanatory.
7. **Pool.** Self-explanatory.
8. **Swim.** Self-explanatory.
9. **Alcohol/Drugs.** Self-explanatory.

Firearm – This subsection gathers information concerning the circumstances of the firearm death. If the incident involved two children who were of an age requiring some level of supervision, Section G should also be completed. Additional sections to be completed are A, B, C, D, E, F, H, and I.

1. **Possession.** Identify who actually had physical possession of (was holding) the firearm at the time of the incident.
2. **Type.** Self-explanatory
3. **Age.** Identify the age (in years) of the person who had physical possession of (was holding) the firearm at the time of the incident. This is especially important if that person was 12 years of age or under as concerns of supervision should also be identified and addressed.
4. **Source.** The source does not necessarily have to have ownership of the firearm, but may be responsible for bringing the firearm into the house and responsible for securing the firearm
5. **Storage location.** Determine whether the firearm was placed in a secured or unsecured location. Secured refers to a reliable location that is locked and/or inaccessible. Unsecured refers to an unreliable location that is unlocked/accessible.
6. **Use at time of injury.** Identify what activity the person with the firearm engaged in at the time of the injury/incident. For example, if the child or children were playing and found the gun, the appropriate response would be “playing”.

Suffocation/Strangulation/Asphyxiation – This section gathers information regarding the cause of the suffocation/strangulation/asphyxiation to identify trends which may relate to child safety. Additional sections to be completed are A, B, C, D, E, F, G and H. Concerns or issues of supervision are to be addressed in section G.

1. **Cause.** This question addresses the actual cause of the suffocation/strangulation/ asphyxiation, e.g., parent/caregiver rolling over on the child in sleep. Select the most appropriate response based on the information provided by law enforcement and the medical examiner's office.

Two causes required some explanation. Wedging refers to being blocked, jammed, or otherwise caught or trapped between two objects. For example, a child's head may become wedged between the mattress and the headboard or between an adult and an object. Trapped in a confined space refers to any enclosed space that limits movement or flow of oxygen. Examples are a washer/dryer, refrigerator, trunk of car, etc.

2. **Location.** Self-explanatory.
3. **Sleeping.** Self-explanatory.
4. **Bedding.** If bedding was involved in the child's death, answer questions a-c. If bedding was not involved, skip the questions and go on to the next appropriate section. Hazardous bedding refers to the physical structure of a bed that makes it dangerous/unsafe for children. Soft bedding refers to soft material such as a comforter, a foam bed pad or waterbed. Improper use refers to the use of bed materials in a way for which they were not intended, for example, creating a king size bed out of two twin size top mattresses.

Shaken Impact Syndrome – This section addresses what led to the incident of shaking and if prior incidents had occurred. Additional sections to be completed are A, B, C, D, E, F, G H, I, and K.

1. **Trigger.** Refers to the action/event/stimulus to which the perpetrator responded that resulted in the child's death. An example would be the perpetrator was aggravated because the child would not stop crying or perceived the child to not be following direction regarding toilet training
2. **Prior history.** Refers to any known/documented prior incidents that were similar to the event that lead to the child's death.

Fall Injury – This section gathers information regarding the circumstances of death due to a fall/injury. Information in this section will be used to identify any trends related to child safety. Additional sections to be completed are A, B, C, D, E, F, G, H, and I.

1. **Fall.** If your response is "Other" specify in one or two words.
2. **Height.** If known, indicate the height (in feet) from where the child fell. For example, child fell off the couch (2 feet) or child fell from second story window (20 feet).
3. **Surface.** Self-explanatory.
4. **Baby walker.** Self-explanatory.
5. **Thrown or pushed.** Self-explanatory.

Poisoning/Overdose – This section gathers information regarding child abuse deaths as a result of poisoning or overdose. Answer all questions in this section. Additional sections to be completed are A, B, C, D, E, F, G, H and I.

1. **Type of poisoning.** Refers to the type of poisoning agent that resulted in child's death. This can be anything from over the counter medicines to cleaning agents commonly found in the home.
2. **Location.** Was the poison agent in a secured, unsecured or open area? For example, was the deceased child able to access illegal drugs on the table in the living room, which would be considered an open area, or was the deceased child able to access toxic cleaning agents under the sink, which would be considered an unsecured area.

- 3. Safety packaging.** Refers to child proof packaging, for example a childproof aspirin bottle.

Fire/Burn – This section gathers information concerning deaths related to fire or burn. Complete questions 1 – 9 for deaths related to fire. Complete question 10 for deaths related to burns. Additional sections to be completed are A, B, C, D, E, F, G, H, and I.

- 1. Source.** Self-explanatory.
- 2. Smoke alarm present.** Self-explanatory.
- 3. Smoke alarm working.** Self-explanatory.
- 4. Started by.** Self-explanatory.
- 5. Activity.** Self-explanatory.
- 6. Construction.** Self-explanatory.
- 7. Multiple injuries/deaths.** Self-explanatory.
- 8. Location of deceased child.** If the response is “Other” specify in one or two words in the space provided.
- 9. Knowledge of fire escape plan.** The determination of whether the deceased child knew of a fire escape plan will come from information provided by law enforcement through their interviews with the family or caregivers. The age of the deceased victim and/or their cognitive abilities, will help determine the appropriateness of your response.
- 10. Source of burn.** For injuries received from source other than fire.

Other Inflicted Injury – This section gathers information concerning circumstances surrounding the death due to reasons other than previously listed. Additional sections to be completed are A, B, C, D, E, F, G, H and I.

- 1. Type injury.** This question addresses the type of injuries the child received which resulted in death. The medical examiner’s autopsy report and the death certificate will reflect the injuries that led to the child’s death. Consult both in making the determination. For “Other” response, specify in one or two words in the space provided.
- 2. Manner of injury.** Self-explanatory.
- 3. Instrument.** Self-explanatory.

Team Conclusions

Each field in this section **MUST** be completed for each child abuse death reviewed by the team.

- 1. Date of meeting.** Indicate the date the team reviewed the child abuse death.
- 2. Members.** Indicate the members who participated in the child abuse death review. If “Other” is checked, indicate who they were in the “Additional Comments and Conclusions” section.
- 3. Records review.** As part of the child abuse death review process, various departments and agencies, who were/are involved with the family, will provide information concerning services provided to the family. The team must first identify what department/agencies were involved with the family and whether services were provided. The team will then review the information provided to

- make a determination of the adequacy of the services. Additional space has been provided for the team to identify agencies not already listed.
4. **Additional investigation.** As a result of the child abuse death review, did the team identify additional investigative activities that should be completed? If so, this information should be documented in the “Additional Comments and Recommendations” section.
 5. **Manner of death.** As a result of the child abuse death review, the team will make a determination concerning the manner of death from the selection provided.
 6. **Abuse/Neglect Death.** After reviewing all information concerning the child abuse death the team will determine if they agree that the death was due to abuse or neglect and check the appropriate response.
 7. **Death Certificate.** As stated above, based on the information provided the team will determine whether they agree or disagree with the information on the death certificate. If the response is “No”, information supporting the teams conclusion will need to be documented in the “Additional Comments and Recommendations” section.
 8. **Issues.** Issues that were identified as a result of the child abuse death review, should be clearly stated here. Check the appropriate response for the identified issue and provide a brief comment in the space provided. If additional space is needed the “Additional Comments and Recommendations” section can be used. If team did not identify any issues indicate by using the “h” response.
 9. **Information.** During the course of the child abuse death review, was all appropriate information made available to the team? If the response is “No” specify in the space provided.
 10. **Problems.** Note any specific problems encountered by the team during the course of the review.

M. Prevention

After reviewing all information provided regarding the child abuse death, the team should address any prevention issues that have been identified as a result of the review. The area of prevention looks at what, if anything, could have been done to prevent this and similar deaths. Prevention can include recommendations for changes in local ordinances or state law. Also, educational activities at various levels can be utilized to bring issues to the public’s attention. Provide specific recommendations for each area checked.

1. **Preventable death.** Based on the information provided, the team should determine whether the child’s death was preventable. The following definitions should assist teams in making this determination.
 - Not preventable.** No current amount of medical, educational, social or technological resources could prevent the death from occurring.
 - Possibly preventable.** There is insufficient information to determine if the death was preventable.
 - Definitely preventable.** The information provided demonstrates clearly that steps or actions could have been taken that would have prevented the death from occurring.
2. **Primary risk factors.** Refers to persons, things, events, etc., that put an individual at an increased likelihood of dying. Some of these factors may include a person’s lifestyle, diet, violence in home, etc.

Medical. Refers to any condition (physiological, psychological, biological, etc) that predisposes anyone to death/dying.

Social. Refers to anything within the individual's social network (e.g., community, family, friends, acquaintances), culture (e.g., beliefs, rituals, language), etc., that predispose the individual to death/dying.

Economic. Refers to choices made as a result of financial needs or resources, moneymaking processes, employment, etc. or lack of resources themselves.

Behavioral. Refers to an individual's lifestyle including actions or reactions to persons, things, events, (e.g. diet and exercise habits, driving without a seatbelt) that predispose the individual to circumstances that lead to death/dying.

Environmental. Refers to an individual's surroundings (conditions and circumstances) external to and generally out of his or her control that predisposes the individual to circumstances that lead to death or dying (e.g., living in a neighborhood with frequent drive-by-shootings, or gangs in the neighborhood; medical staff that are not trained in certain procedures).

Product safety. Refers to any thing or substance that has been produced or manufactured that predisposes an individual to death/dying.

Drugs or alcohol. Refers to substances which alter physiologic processes and predisposes an individual to circumstances that lead to death/dying.

Other. Refers to any other risk factor not mentioned above. A brief description should be provided in the Additional Comments and Conclusions section if this is checked.

3. **Caregiver.** This information is gathered to determine if the caregiver could have done anything to reduce the risk to the child.
4. **Prevention activities.** For each area checked the team must provide specific information regarding the proposed activity. This information can be incorporated in the Recommendation section. Given the current scope of the review, some of the activities listed below may not be applicable; however, the information has been retained for possible future use. If no prevention activities have been identified, check the "k"

Legislation or law. Refers to recommendations for legislative changes at the state government level.

Local ordinance. Refers to recommendations for or action taken at the local government level.

Community safety project. Refers to any initiative or activity on the part of the community to deliver health messages to reduce the risk factors that predispose an individual to death/dying.

Public forums. Refers to formal or informal gatherings of members of the community to discuss future actions to be taken to reduce the risk factors that predispose individuals in their community to circumstances that lead to death/dying. For example, this could include meeting to discuss how to reduce the risk factors associated with drive-by-shootings in the neighborhood.

Educational activities in school. Refers to lessons/curriculum and/or education programs in the schools that target efforts toward reducing primary risk factors.

Educational activities in the media. Refers to activities such as public service announcements, ad campaigns, etc. which deliver a message that is aimed at target populations at high risk for a particular problem.

Consumer product safety action. Refers to the actions of agencies, individuals, consumer advocates, politicians, etc whose goal is to make the public aware of products that could be or are hazardous or other wise deadly to the consumer.

News service. Refers to the activities of the media (print, radio, and television) with regards to informing the public about risk factors and prevention methods such as a public service announcement regarding child safety and home pools.

Changes in agency/department practice. Refers to any new policies, protocols, etc., that are needed to address issues related to deaths that were preventable.

Other programs or activities. If other is marked, then list the specific target group and recommendation. This can be documented in the Recommendations section.