

KANSAS MATERNAL & CHILD HEALTH



Kansas Maternal and Child Health Council

This project is supported by
the Kansas Department of Health and Environment
with funding through the Health Resources and
Services Administration (HRSA) of the
US Department of Health and Human Services (HHS)
under grant number B04MC32543
and Title V Maternal and Child Health Services

Schrotberger Heather

Deborah Alliston

Sara Hortenstine

Kari Harris

Heather Braum

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Sara Hortenstine

WELCOME

University of Kansas, School of Medicine – Wichita

Department of Pediatrics



KMCHC Chair

Drew Duncan

Braum

Heather

Heather Schrotberger

Member Updates

Executive Director

Kansas Head Start Association



Deborah Alliston MD, MEd

Sara Hortenstine

Kari Harris Heather Braum

Drew Duncan





Heather Schrotberger
Executive Director
Kansas Head Start
Association



ABOUT KHSA

Vision: Kansas Head Start programs are impactful leaders in early education.

Mission: The Kansas Head Start Association strengthens leadership, learning, partnership, and advocacy opportunities for Head Start families, staff, and programs.

WWW.KSHEADSTART.ORG

KHSA SERVICES

CONVENING
Head Start
program leaders,
staff, and
families

SUPPORTING
Head Start
program leaders,
staff, and
families

ADVOCATING for Head Start program leaders, staff, and families

HEAD START IN KANSAS

HEAD START

Preschool for children ages 3 to 5

EARLY HEAD START

Home visiting and child care for pregnant women and children ages 0 to 3

EHS-CCP

Child care for in partnership with community child care providers

HEAD START

ELIGIBILITY

- Income
- Identified risk
- Public
 - assistance
- Homelessness
- Foster care



78 counties

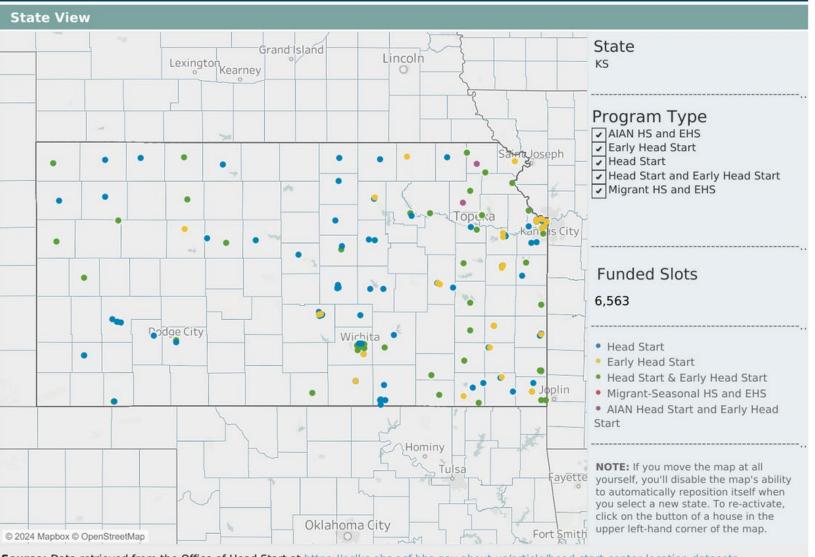
\$90+ million

HEAD START IN KANSAS

BY THE NUMBERS

2,454 employees

Head Start Center Locations



Source: Data retrieved from the Office of Head Start at https://eclkc.ohs.acf.hhs.gov.about-us/article/head-start-center-location-datasets Last updated Jan 9, 2024.



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Member Updates



Clinical Associate
Professor, Wichita
- Pediatrics
University of
Kansas School of
Medicine Wichita

MD, MEd Deborah

Kari Harris

Hortenstine

ש

Sal

Heather Braum

Drew Duncan



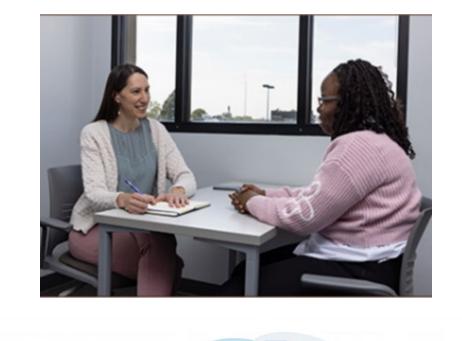
A HEALTHY KANSAS STARTS HERE



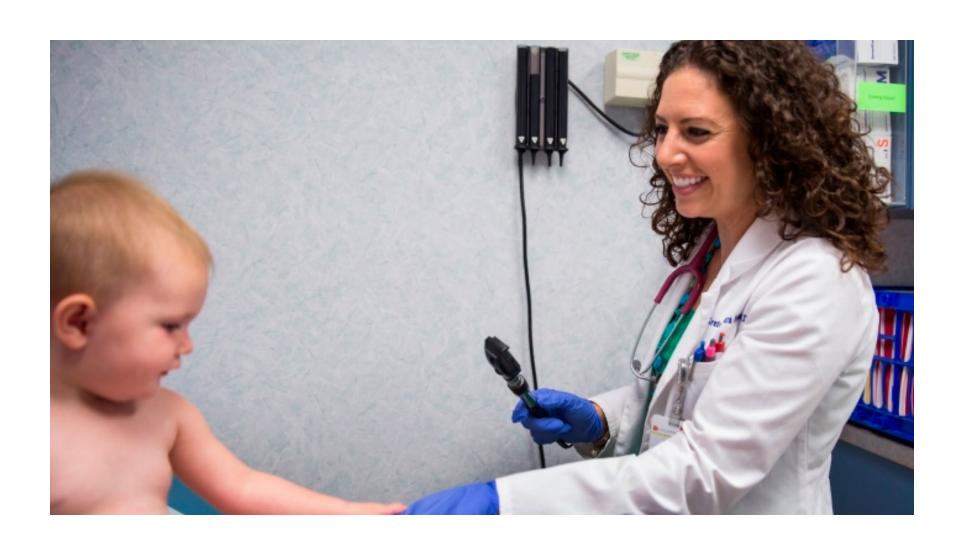
Deborah A Alliston, MD, MEd

University of Kansas SOM-Wichita





KU Pediatric Clinic





Heather Schrotberger

Kristi Weaver MD

Child Death Review Board

Executive Director

Child Death Review Board



Sara Hortenstine

Kari Harris

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Kansas- State Child Death Review Board Presented to: KMCH Council 1/15/2025

Sara Hortenstine- Division Chief, Youth Services & Executive Director of the Kansas State Child Death Review Board

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State Child Death Review Board- Kansas

Since 1994, the Board has reviewed >13,000 child deaths

- All causes/manners of death
- Birth to age 17
- Kansas Residents/Kansas Fatalities

Annual Report to Governor and Legislature

- Latest Report-Published each year on October 1st, 2022
- Data regarding 2022 calendar year



Purpose and Impact of the State Child Death Review Board

- ➤ Provide detailed information about the circumstances of a fatality, beyond the limited data available from death certificates and traditional vital statistics reports.
- ➤ Used to describe patterns in infant, and child deaths and reveal commonalities that lead to actionable recommendations to prevent future deaths and improve the health of the entire community.





Investigating Child Deaths by a Records Review

Birth/Death Certificate

Autopsy Information

Toxicology, photos, investigation reports, etc.

Medical information

Birth Records, PCP information, death records, immunization records.

CPS

DCF history regarding decedent, siblings, and caregivers

Law Enforcement

Investigation reports, SUIDI, scene photos, 911 call, interviews, dash cam, etc.

Mental Health

School Records

• Grades, attendance, disciplinary actions, etc.

Child Care Licensing

Social Media, Obituary, Articles, etc.

Records are primarily related to the decedent



Process for Review- Kansas SCDRB









2024 Kansas State Child Death Review Board Annual Report

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Undetermined Manner65
Undetermined Manner65
Undetermined Manner

QR Code- 2024 SCDRB Annual Report



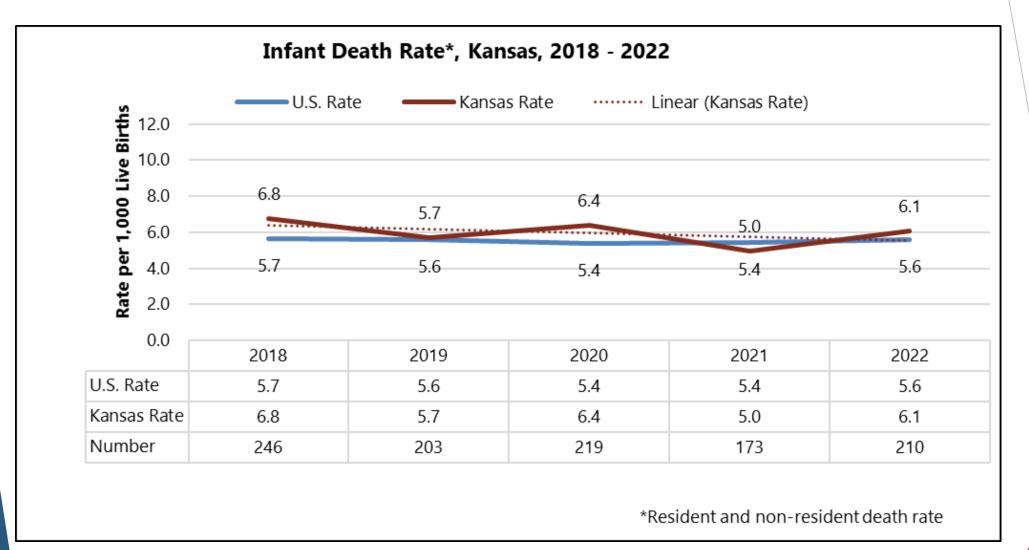
State Child Death Review Board Website

www.ag.ks.gov/SCDRB



^{**}See disclaimer

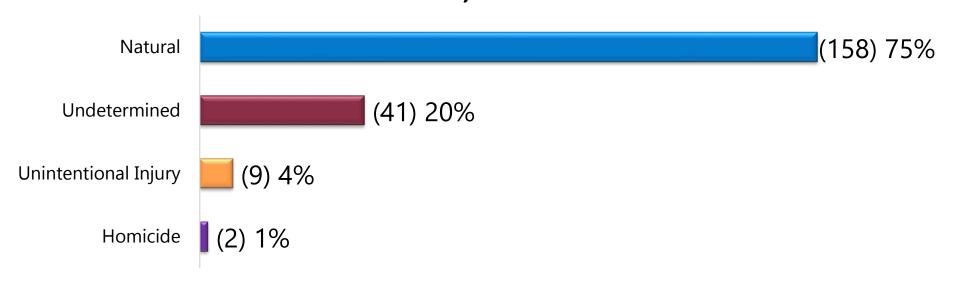
Infant Deaths, Kansas 2018-2022





Mortality Affecting Infants

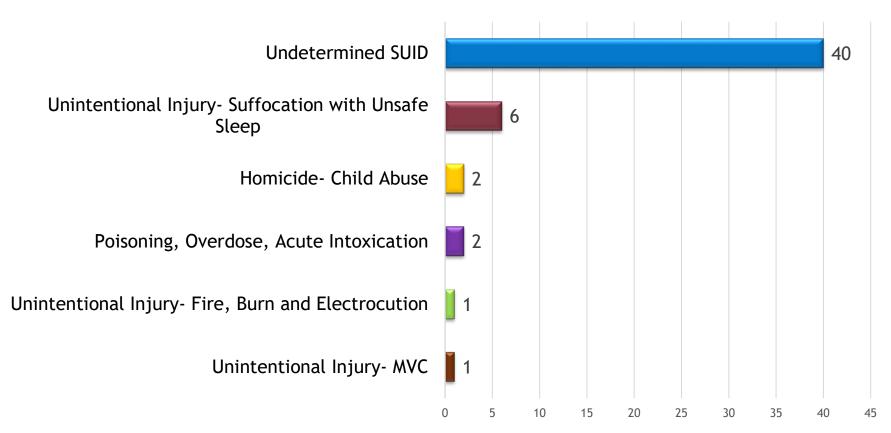
Percentage of Infant Deaths by Manner of Death, 2022, N=210





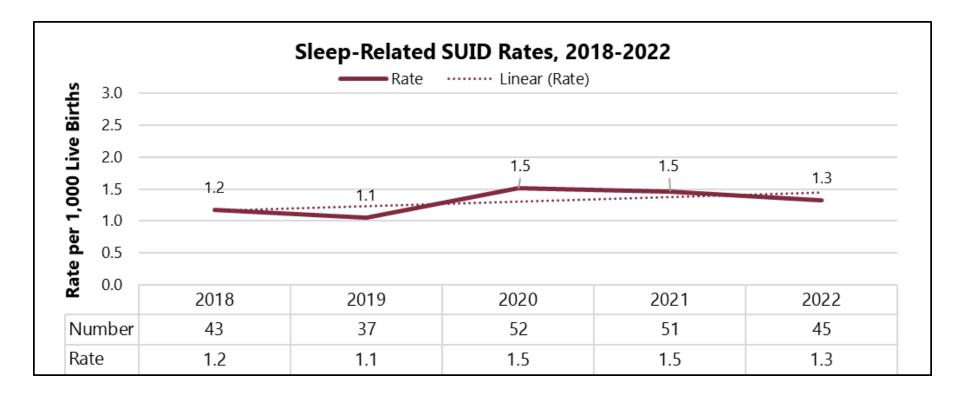
Mortality Affecting Infants, continued

Number of Infant Deaths by Non-Natural Causes, 2022, N=52

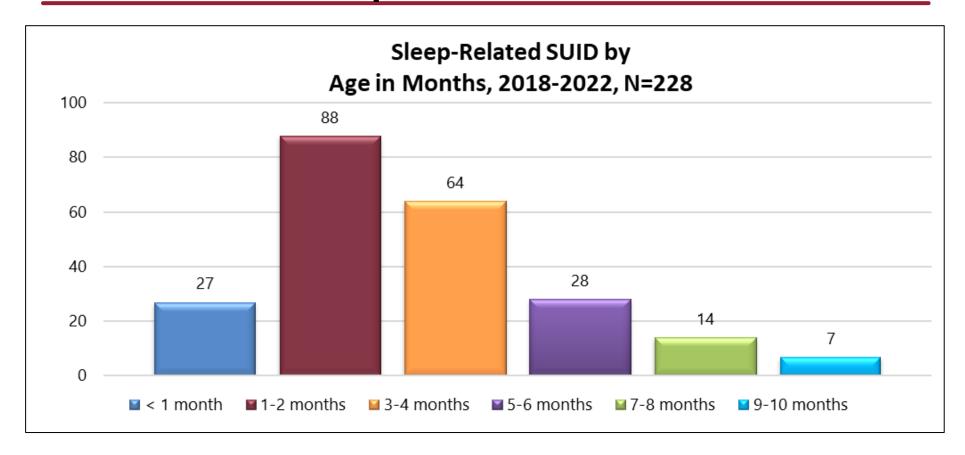




Definition-Sudden Unexpected Infant Death (SUID) is a term used to describe the sudden and unexpected death of a <u>child less than 1 year old</u> in which the cause is not obvious before investigation. These deaths usually occur during sleep or in the child's sleep area.









Caregiver or Supervisor Fell Asleep While Feeding Infant, Sleep-Related SUID, 2018-2022, N=228

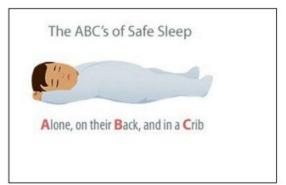
Caregiver or Supervisor Fell Asleep While Feeding Infant Yes		Number 26
	Bottle	11
No		190
Unknown		12



CASE VIGNETTE Sleep-Related Infant Death

Safe Sleep Surfaces- An infant was placed in a safe-sleep location of a crib at bedtime. During the night, the infant woke for a feeding and the young mother brought the infant to the parents' adult bed to be breastfed. During the course of the feeding, the mother fell asleep and woke a few hours later to find the infant unresponsive. This death was classified as Sudden Unexpected Infant Death due to possible suffocation and an unsafe sleep environment.

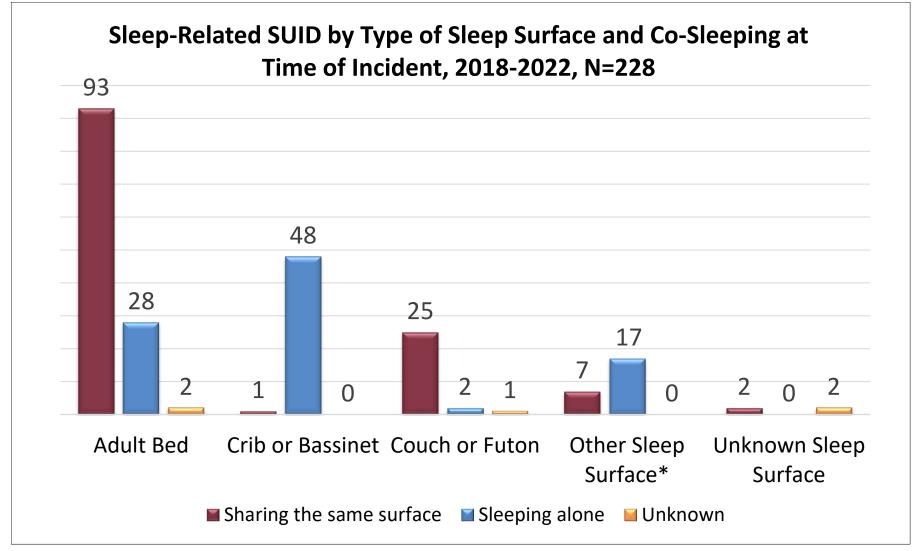
Board Reflection- Parents should be reminded that if infants are brought to an adult bed for a feeding (breast or bottle), the parent should consider some type of alert so the infant can be returned to a separate safe crib or bassinet when the parent is ready to return to sleep.





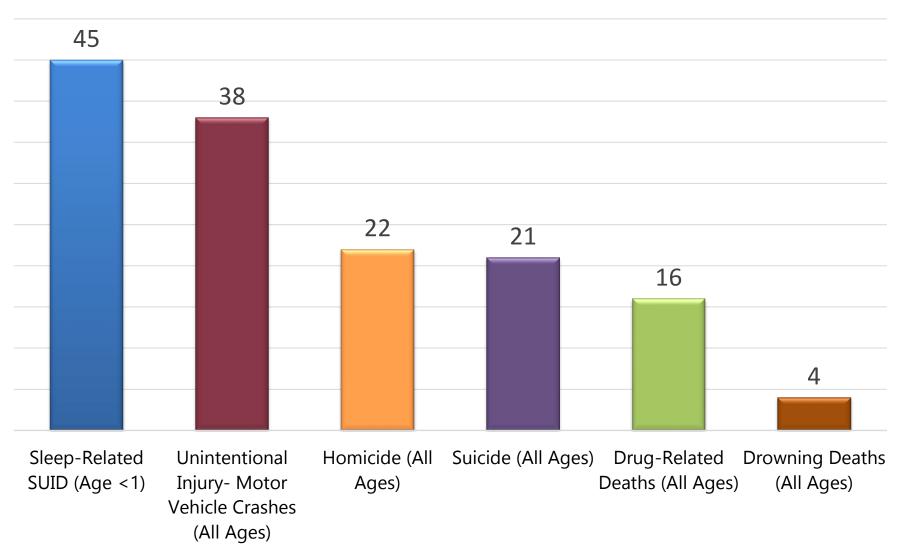


Photos Credit-KIDS Network http://www.kidsks.org/





Comparison of Numbers of Sleep-Related SUIDs with Other Categories of Death, 2022





CHARACTERISTICS OF SLEEP-RELATED SUIDs, 2018-2022, N=228

- ▶ 99% had evidence of one or more unsafe sleep practices
- ▶ 79% occurred when the infant was sleeping in a place other than a crib or bassinet
- ▶ 53% were put to sleep on an adult bed, and 12% were put to sleep on a couch or futon
- ▶ 54% were sharing a sleep-surface
- ▶ 52% were put to sleep on their stomach, side, or a position other than the recommended supine (on their back) placement
- ▶ 11% of parents or caregivers fell asleep while either breastfeeding or bottle feeding the infant



Infant Deaths- Disparities

Rate of Death per 1,000 live births by Race/Ethnicity, All Manners of Death, Age <1, 2018-2022

Kansas Rate All Races	White/ Non- Hispanic		American Indian/ Non- Hispanic		Multiple Race/ Non- Hispanic	Hispanic- Any Race
6.0	4.6	11.3	*	4.1	16.3	8.1

*Death count of 9 or less, suppressed

Sleep-Related SUID Rate of Death per 1,000 live births by Race/Ethnicity, Age <1, 2018-2022

Kansas Rate All Races	White/ Non- Hispanic		American Indian/Non- Hispanic	Asian/ Non- Hispanic	Multiple Race/ Non- Hispanic	Hispanic- Any Race
1.3	1.0	2.7	*	*	5.4	1.5

*Death count of 9 or less, suppressed



Questions/Comments





Contact Information

Sara Hortenstine

Division Chief, Youth Services Executive Director, SCDRB Office of the Attorney General

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- Phone: (785) 296-7970
- Email: sara.Hortenstine@ag.ks.gov

For more information about the State Child Death Review Board, Please Visit: www.ag.ks.gov/SCDRB



Heather Schrotberger

Kristi Weaver MD

Sara Hortenstine

Kari Harris

Legislative Updates



Heather Braum

Senior Policy Advisor

Kansas Action for Children

Drew Duncan

Paige Leonard

Hortenstine Sara

Kari Harris Heather Braum

Birth Defects Program



Birth Defects Program
Section Chief



Leonard

Paige

Birth Defects Program
Coordinator







Overview

Vision: To improve the quality of life and health outcomes

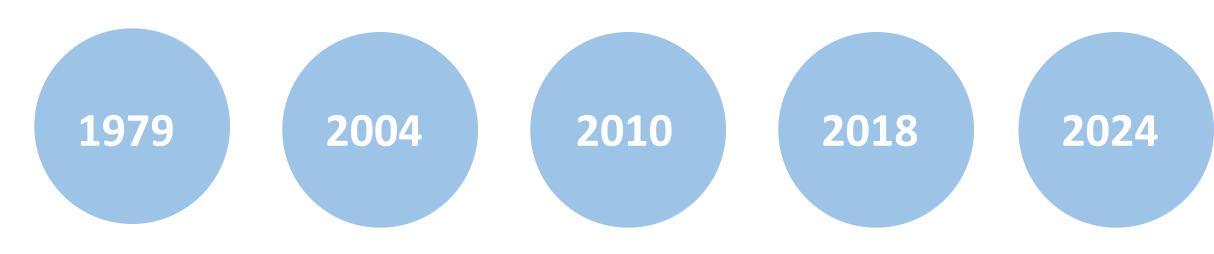
Mission: Through a data driven approach and relationship building, Kansas screening and surveillance strives to improve equitable access to information, services, and support to newborns, mothers, and families.

Purpose:

- Identify risk factors
- Facilitate treatment, intervention, and prevention
- Inform and educate the public



Key Birth Defects Events in Kansas



Began collecting birth defect information

Passage of Senate Bill 418 Regulations were exapnded

KBDP coordinator position is created

Referrals to Support Programs



Recent Program Activities

2018

- CDC Zika grant
- Integrated with the Konza Information Network (KHIN) and the Office of Vital Statistics

2021

Data was interrupted

2022

- Regulation update <u>Kansas Birth Defects Surveillance Reporting Manual</u>
- Newborn Screening (NBS) website and newsletter



Recent Program Activities - Continued

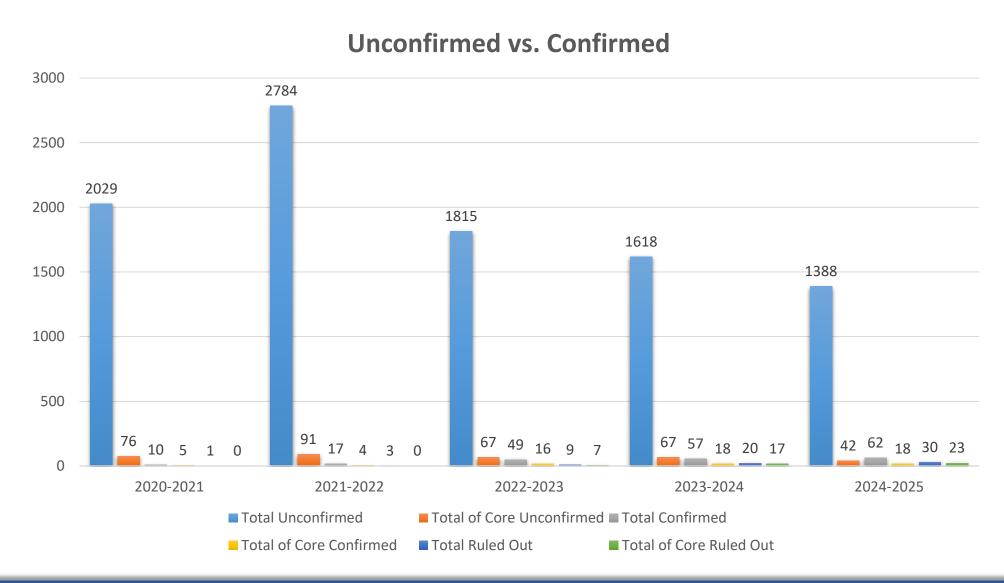
2023

- Referrals
- Program materials

2024

- Referrals of core defect
- Newborn Screening and KDHE website update
- Program material
 - KBDP brochure
 - KBDP manual and SOPs
- Critical Congenital Heart Defect (CCHD) program collaboration







Current and Future Activities

- Trends
- Konza Information Network
- Outreach and education
- Funding





Birth Defects Awareness Month (BDAM)

- Every Journey Matters
- CDC and MotherToBaby: FASD Podcast series
 - January 9 Episode 1: FASD Discovery and Prevalence
 - January 16 Episode 2: CDC's Work Addressing Prenatal Alcohol and Other Substance Use and FASDs
 - January 23 Episode 3: Living with FASDs
 - Podcast Website: <u>The MotherToBaby Podcast</u>
 - YouTube Channel: MotherToBaby YouTube
 - CDC TRAIN: links TBD



Title of Presentation Goes Here

Thank you/Questions





Expectations for Domain Work Groups

Stay present and participate actively.

Invite everyone into the conversation. Take turns talking.

ALL feedback is valid. There are no right or wrong answers. Value and respect different perspectives (providers, families, agencies, etc.).

Be relevant. Stay on topic.

Allow facilitator to move through discussion questions.

Avoid repeating previous remarks.

Disagree with ideas, not people. Build on each other's ideas.

Capture "side" topics and concerns; set aside for discussion and resolution at a later time.

Reach closure and summarize conclusions or action steps for small group reports.



Work Group Questions

- 1. What were the most critical takeaways from today's presentations?
- 2. Summarize your workgroup's progress on your Special Project since the last meeting.



Work Group Projects

Women/Maternal: Develop a universal, consistent prenatal risk assessment form that includes clinical and social determinants of health data.

Perinatal/Infant: Welcome postcard for all Kansas babies.

Children: Help parents and caregivers access resources to address their child's behavioral health needs.

Adolescent: Improve civic engagement for adolescents.

YOUR FACILITATORS



WOMEN/MATERNAL

Jill Nelson | Perinatal and Infant Health Consultant KDHE Bureau of Family Health



PERINATAL & INFANT

Stephanie Wolf | Clinical
Perinatal/Infant Health
Consultant
Kansas Perinatal Community
Collaboratives Program
Coordinator

KDHE Bureau of Family Health



CHILDREN

Maddie Wegner | Child Health Consultant

KDHE Bureau of Family Health



ADOLESCENT

Jaquita Clark |
Child and Adolescent
Health Consultant

KDHE Bureau of Family Health

WORK GROUP ASSIGNMENTS

Women/Maternal		Perinatal/Infant		Children		Adolescent	
Facilitators: Jill Nelson		Facilitators: Stephanie		Facilitators: Maddie		Facilitator: Jaquita Clark	
Recorder:		Wolf		Wegner		Recorder:	
Juliet Swedlund		Recorder:		Recorder:		Holly Frye	
		Kali Steelsmith		Cora Ungerer			
Rebecca	Adamson	Carrie	Akin	Jennifer	Brunning	Linda	Buchheister
Anji	Antje	Deborah	Alliston	Cristi	Cain	Lisa	Chaney
Rebecca	Bell	Brenda	Bandy	Stephanie	Coleman	Jaquita	Clark
Deena	Carmona	Kourtney	Bettinger	Derik	Flerlage	Amy	Dean-Campmire
Mary	Delgado	Heather	Braum	Cory	Gibson	Geno	Fernandez
Lisa	Frey Blume	Mariah	Chrans	Dione	Guyton	Holly	Frye
Sapphire	Garcia	Stacy	Clarke	Kaitlin	Johnson	Kirstianna	Guerrero
Shalae	Harris	Drew	Duncan	Julie	Laverack	Kari	Harris
Stephanie	Jerguson	Stephen	Fawcett	Karen	Perez	Elaine	Johannes
Jamie	Kim	Sara	Hortenstine	Cherie	Sage	Shannon	Kennedy
Karly	Lauer	Brandi	Markert	Heather	Schrotberger	Steve	Lauer
Jeni	McDonald	Jill	Nelson	Peter	Stoepker	Sookyung	Shin
Patricia	McNamar	Susan	Pence	Cora	Ungerer	Melissa	Valenza
Oluwakemi	Onyenagubo	Cari	Schmidt	Maddie	Wegner	Donna	Yadrich
Amittia	Parker	Katie	Schoenhoff	Daina	Zolck		
Lisa	Shoop	Christy	Schunn				
Jill	Swedlund	Kali	Steelsmith				
Kristi	Weaver	Stephanie	Wolf				
Kendra	Wyatt						



Time for a Break

SEE YOU BACK IN 15 MINUTES



15:00

Start Stop Reset mins: 15 secs: 0 type: None •

Breaktime for PowerPoint by Flow Simulation Ltd.

Show Settings



Welcome Back

TIME FOR WORK GROUPS

DOMAIN WORKGROUP REPORT OUT

WOMEN/MATERNAL

Develop a Universal and Consistent Prenatal Risk Assessment Form that Includes Clinical and Social Determinants of Health Data







PERINATAL/INFANT

Welcome Postcard for all Kansas Babies







CHILDREN

Help Parents and Caregivers Access Resources to Address their Child's Behavioral Health Needs.







ADOLESCENT

Improve Civic Engagement for Adolescents







Member Announcements

THE FLOOR IS YOURS!





Deborah Alliston

Sara Hortenstine

CLOSING

University of Kansas, School of Medicine – Wichita

Department of Pediatrics



Harris

Kari

KMCHC Chair

Heather Braum

Drew Duncan

Paige Leonard

We Want Your Feedback!



Scan the QR Code for Evaluation



Next Meeting Dates

May 7, 2025 10 a.m. – 2 p.m. Kansas Health Institute

July 23, 2025 9 a.m. – 12 p.m. Virtual

Contact information

Jennifer Miller State MCH/Title V Director <u>Jennifer.miller@ks.gov</u>

Denise Cyzman KAAP Executive Director denise.cyzman@kansasaap.org





Department of Health and Environment

kdhe.ks.gov