

State of Arizona Child Death Review Legislation

Arizona Statute § 36-3501 to 36-3504 (1993)

Links:

<http://www.azleg.state.az.us/ars/36/03501.htm>

<http://www.azleg.state.az.us/ars/36/03502.htm>

<http://www.azleg.state.az.us/ars/36/03503.htm>

<http://www.azleg.state.az.us/ars/36/03504.htm>

36-3501. Child fatality review team; membership; duties

A. The child fatality review team is established in the department of health services. The team is composed of the head of the following departments, agencies, councils or associations or that person's designee:

1. Attorney general.
2. Office of women's and children's health in the department of health services.
3. Office of planning and health status monitoring in the department of health services.
4. Division of behavioral health in the department of health services.
5. Division of developmental disabilities in the department of economic security.
6. Division of children and family services in the department of economic security.
7. Governor's office for children.
8. Administrative office of the courts.
9. Parent assistance office of the supreme court.
10. Department of juvenile corrections.
11. Arizona chapter of a national pediatric society.

B. The director of the department of health services shall appoint the following members to serve staggered three year terms:

1. A medical examiner who is a forensic pathologist.
2. A maternal and child health specialist involved with the treatment of native Americans.
3. A representative of a private nonprofit organization of tribal governments in this state.
4. A representative of the Navajo tribe.
5. A representative of the United States military family advocacy program.
6. A representative of the Arizona sudden infant death advisory council.
7. A representative of a statewide prosecuting attorneys advisory council.
8. A representative of a statewide law enforcement officers advisory council who is experienced in child homicide investigations.
9. A representative of an association of county health officers.
10. A child advocate who is not employed by or an officer of this state or a political subdivision of this state.
11. A public member. If local teams are formed pursuant to this article, the director of the department of health services shall select this member from one of those local teams.

C. Beginning not later than January 1, 1994, the team shall:

1. Develop a child fatalities data collection system.

2. Provide training to cooperating agencies, individuals and local child fatality review teams on the use of the child fatalities data system.
3. Conduct an annual statistical report on the incidence and causes of child fatalities in this state during the past fiscal year and submit a copy of this report, including its recommendations for action, to the governor, the president of the senate and the speaker of the house of representatives. The team shall submit this report on or before November 15 of each year.
4. Encourage and assist in the development of local child fatality review teams.
5. Develop standards and protocols for local child fatality review teams and provide training and technical assistance to these teams.
6. Develop protocols for child fatality investigations including protocols for law enforcement agencies, prosecutors, medical examiners, health care facilities and social service agencies.
7. Study the adequacy of statutes, ordinances, rules, training and services to determine what changes are needed to decrease the incidence of preventable child fatalities and, as appropriate, take steps to implement these changes.
8. Provide case consultation on individual cases to local teams if requested.
9. Educate the public regarding the incidence and causes of child fatalities as well as the public's role in preventing these deaths.
10. Designate a team chairperson.
11. Develop and distribute an informational brochure which describes the purpose, function and authority of a team. The brochure shall be available at the offices of the department of health services.

D. Team members are not eligible to receive compensation, but members appointed pursuant to subsection B are eligible for reimbursement of expenses pursuant to title 38, chapter 4, article 2.

E. The department of health services shall provide professional and administrative support to the team.

F. Notwithstanding subsections C and D, this section shall not be construed to require expenditures above the revenue available from the child fatality review fund.

36-3502. Local teams; membership; duties

A. If local child fatality teams are organized, they shall abide by the standards and protocol for local child fatality review teams developed by the state team and must have prior authorization from the state team to conduct fatality reviews. Local teams shall be composed of the head of the following departments, agencies or associations, or that person's designee:

1. County medical examiner.
2. Child protective services office of the department of economic security.
3. County health department.

B. The chairperson of the state child fatality review team shall appoint the following members of the local team:

1. A domestic violence specialist.

2. A psychiatrist or psychologist licensed in this state.
3. A pediatrician certified by the American board of pediatrics or a family practice physician certified by the American board of family practice. The pediatrician or family practice physician shall also be licensed in this state.
4. A person from a local law enforcement agency.
5. A person from a local prosecutors office.
6. A parent.

C. If local child fatality teams are authorized, they shall:

1. Designate a team chairperson who shall review the death certificates of all children who die within the team's jurisdiction and call meetings of the team when necessary.
2. Assist the state team in collecting data on child fatalities.
3. Submit written reports to the state team as directed by that team. These reports shall include nonidentifying information on individual cases and steps taken by the local team to implement necessary changes and improve the coordination of services and investigations.

36-3503. Access to information; confidentiality; violation; classification

A. Upon request of the chairperson of a state or local team and as necessary to carry out the team's duties, the chairperson shall be provided within five days excluding weekends and holidays with access to information and records regarding a child whose death is being reviewed by the team, or information and records regarding the child's family:

1. From a provider of medical, dental or mental health care.
2. From this state or a political subdivision of this state that might assist a team to review a child fatality.

B. A law enforcement agency with the approval of the prosecuting attorney may withhold investigative records that might interfere with a pending criminal investigation or prosecution.

C. The director of the department of health services or his designee may apply to the superior court for a subpoena as necessary to compel the production of books, records, documents and other evidence related to a child fatality investigation. Subpoenas so issued shall be served and, upon application to the court by the director or his designee, enforced in the manner provided by law for the service and enforcement of subpoenas. A law enforcement agency shall not be required to produce the information requested under the subpoena if the subpoenaed evidence relates to a pending criminal investigation or prosecution. All records shall be returned to the agency or organization on completion of the review. No written reports or records containing identifying information shall be kept by the team.

D. All information and records acquired by the state team or any local team are confidential and not subject to subpoena, discovery or introduction into evidence in any civil or criminal proceedings, except that information, documents and records otherwise available from other sources are not immune from subpoena, discovery or introduction into evidence through those sources solely because they were presented to or reviewed by a team.

E. Members of a team, persons attending a team meeting, and persons who present information to a team may not be questioned in any civil or criminal proceedings regarding information presented in or opinions formed as a result of a meeting. Nothing in this subsection shall be construed to prevent a person from testifying to information obtained independently of the team or which is public information.

F. A member of the state or a local child fatality review team shall not contact, interview or obtain information by request or subpoena from a member of a deceased child's family, except that a member of the state or a local child fatality review team who is otherwise a public officer or employee may contact, interview or obtain information from a family member, if necessary, as part of the public officer's or employee's other official duties.

G. State and local team meetings are closed to the public and are not subject to title 38, chapter 3, article 3.1 if the team is reviewing individual child fatality cases. All other team meetings are open to the public.

H. A person who violates the confidentiality provisions of this section is guilty of a class 2 misdemeanor.

36-3504. Child fatality review fund

A. The child fatality review fund is established consisting of appropriations, monies received pursuant to section 36-342, subsection E and gifts, grants and donations made to the department of health services to implement subsection B of this section. The department of health services shall administer the fund. The department shall deposit, pursuant to sections 35-146 and 35-147, all monies it receives in the fund.

B. The department of health services shall use fund monies to staff the state child fatality review team and to train and support local child fatality review teams.

C. Monies spent for the purposes specified in subsection B of this section are subject to legislative appropriation. Any fee revenue collected in excess of one hundred thousand dollars in any fiscal year is appropriated from the child fatality review fund to the child abuse prevention fund established pursuant to section 8-550.01, subsection A, to be used for healthy start programs.