Local Review Team Interagency Agreement

This cooperative agreement is made this _______day of _______between each of the following agencies:

for the Office of the Medical Examiner/Coroner

for the Child Protective Services Agency

for the Office of the Prosecuting Attorney

for the Sheriff’s Department

for the State/Local Police Department

for the County/State Health Department

List Others as Needed

WHEREAS, the parties are vested with the authority to promote and protect the public health and safety and to provide services which will improve the well-being of children and their families.

WHEREAS, the parties agree that they are mutually served by the establishment of a multi-agency, multi-professional Child Death Review Team, and the outcomes of the reviews will be the identification of preventable child deaths and recommendations for interventions and prevention strategies.

WHEREAS, the objectives of a Child Death Review Team are agreed to be:

1. The accurate identification and uniform reporting of the cause and manner of every child death.

2. Improved communication and linkages among agencies and enhanced coordination of efforts.

3. Improved agency responses to child deaths in the investigation and delivery of services.

4. The design and implementation of cooperative, standardized protocols for the investigation of certain categories of child deaths.

5. The identification of needed changes in legislation, policy and practices, and expanded efforts in child health and safety to prevent child deaths.
WHEREAS, the parties agree that all members signing this agreement are essential to an effective review.

WHEREAS, the parties agree that the review process requires case specific sharing of records, and that confidentiality is inherent in many of the involved reports so that there will be clear measures taken to protect confidentiality, and no case review will occur without all present abiding by the confidentiality agreement, in accordance with _______________________ (applicable legislation).

NOW THEREFORE, it is agreed that all team members and others present at a review will sign a confidentiality agreement which prohibits any unauthorized dissemination of information beyond the purpose of the review process. The review team will not create any files with case specific identifying data. Case identification will only be utilized to enlist interagency cooperation in the investigation, delivery of services, and development of prevention initiatives. It is further understood that there may be an individual case which requires that a particular agency be asked to take the lead in addressing a systemic or quality of care issue based on the agency’s clear connection with the issue at hand. It is further understood that the Office of the Prosecuting Attorney may use information obtained during the review to pursue prosecution if it appears that a crime may have been committed. It is also understood that team review data will be submitted to _______________________, where it will be maintained for the purpose of establishing a state central registry for child death data. The aggregate data will not include case-specific names. The registry will include standardized data from child death review teams, under the authority of the ________________________ (sponsoring agency of CDR).