

## The Role of Committee Members

### District Attorney / Chairperson Role and Responsibilities:

The District Attorney is mandated to be the chairperson, but has the option to designate any person to serve on his or her behalf. The designee can be selected from any of the mandated or optional members of the committee. In newly formed committees, the Chief Superior Judge should appoint the chairperson. However, since all counties now have an established committee, there is no need for the Judge to appoint a chairperson. The state office of the Department of Family and Children Services (DFCS) recommends that the local (DFCS) representative generally not be considered as chairperson due to potential conflict-of-interest between the work of the agency and the work of the committee.

When the chairperson of the CFR Committee receives a report from the coroner or the medical examiner regarding the death of a child, that chairperson shall review the report and findings as follows:

If the report indicates the child's death does not meet the criteria for review and the chairperson agrees with the decision, he or she should sign the form designated by the Panel stating that death does not meet criteria for review. The medical examiner or the coroner shall forward the form and findings to OCFR within seven days of receipt. If the chairperson believes that the death of a child meets the criteria for review, he or she should convene the committee within 30 days of receipt of the report. Other responsibilities are as follows:

- Accept the report and/or notification from the medical examiner or coroner about the death of a child
- Make a determination from the available resources, and according to established criteria, of the cases to be reviewed by the committee
- Distribute the list of cases to be reviewed by the committee members before the committee meeting is scheduled, so that all members have sufficient time to investigate their agency records for evidence that might prove useful to the committee review
- Arrange to have the necessary information from investigative reports, medical records, autopsy reports or other items made available to members of the committee, so that all members have access to pertinent information relating to the investigation, review and reporting of the child death, and to facilitate any prevention efforts recommended by the committee
- Schedule and notify the committee members of upcoming review meetings
- Chair the committee meetings
- Oversee overall adherence to the child fatality review process
- Ensure that all reporting and data collection requirements are met, including county Annual Reports being forwarded to OCFR by the July deadline each year
- Serve as liaison with each local agency, with other Child Fatality Review Committees and with OCFR

### Additional Responsibilities:

- Explain criteria for pursuing a criminal or civil case, and keep committee informed about any actions taken in connection with a child's death

- Identify previous criminal or civil filings involving the child, family members or others involved with a child's death
- Provide victim assistance, when necessary
- Participate in identifying risk factors to child safety and strategies to address these risks
- Act as liaison with counterparts in other circuits and across the state

**Frequently Asked Questions about the District Attorney Role in CFR:**

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show DA agency involvement?*

*A:* Any agency history of the child should be shared with your committee. There may be agency involvement with the child's parents, grandparents, siblings or other family members. There may be history in Superior Court, Family Court, Probate Court, Magistrate Court, or State Court for any type of case for any person in the family. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

*A:* The District Attorney's Office can do a lot for prevention of child deaths in your community. When people come into your office requesting your services, you can have reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in health departments and doctor's offices. You may choose to use your very public position to make a statement to the press about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep).

**Georgia CFR Chairperson Contacts:**

Counties within Judicial Circuit	Chairperson (and Designee)	Phone Number	Email
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Baker Calhoun Decatur Grady Mitchell	Joe Mulholland	(229) 246-1823	<a href="mailto:jmulholland@pacga.org">jmulholland@pacga.org</a>

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Bartow	Joseph Campbell	(770) 387-5080	<a href="mailto:campbellj@bartowga.org">campbellj@bartowga.org</a>
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Bibb Crawford Peach	Howard Simms (Tamaree Bishop)	(478) 621-6427	<a href="mailto:hsimms@co.bibb.ga.us">hsimms@co.bibb.ga.us</a> <a href="mailto:tamaree-bishop@peachcounty.net">tamaree-bishop@peachcounty.net</a>
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Bryan Evans Tattnall Liberty Long McIntosh	Tom Durden (Dixie Coleman)	(912) 876-4151	<a href="mailto:dixie.coleman@libertycountyga.com">dixie.coleman@libertycountyga.com</a>
Bulloch Effingham Jenkins Screven	Richard Mallard	(912) 764-9924	<a href="mailto:ramallard@ogeecheeda.net">ramallard@ogeecheeda.net</a>
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Clarke	Ken Mauldin	(706) 613-3240	<a href="mailto:kenmauldin@co.clarke.ga.us">kenmauldin@co.clarke.ga.us</a>
Clay Early Miller Quitman Randolph Seminole Terrell	Charles Ferguson	(229) 732-3773	<a href="mailto:ferguson@pacga.org">ferguson@pacga.org</a>
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Upson	Karen Raines	(706) 647-4042	<a href="mailto:kraines@pacga.org">kraines@pacga.org</a>

## Medical Examiner/Coroner

If the death of a child occurs within the county that the child resides, the medical examiner or coroner will notify the chairperson of the CFR Committee or circuit in that child's county of residence within **48 hours** of the child's death (Code Section 19-15-3) This is also true if the child's death occurs outside the child's county of residence.

The medical examiner or coroner shall review the findings regarding the cause and manner of death for each child death report that he or she receives in the following manner:

If cause of death meets the criteria for review (pursuant Code Section 19-15-3[e]), the medical examiner or coroner shall complete and sign the form designated by the Panel stating the death met the criteria for review (see Coroner Reporting Form in Appendix ). He or she shall forward the form findings, within **seven days** of the child's death, to the chairperson of the CFR Committee in the county or circuit of the child's residence. If cause of death does not meet the criteria for review the medical examiner or coroner shall complete and sign the form stating that the death did not meet the criteria for review and forward the form findings, within **seven days** of the child's death, to the chairperson of the CFR Committee in the county or circuit of the child's residence. Other responsibilities are as follows:

- Interview family and witnesses at the death scene to gain knowledge of circumstances, and to determine preliminary cause and manner of death
- Provide pertinent health and medical information regarding a child whose death is being reviewed by the CFR Committee
- Provide forensic information and analysis, including autopsy reports
- Participate in identifying risk factors to child safety and strategies to address these
- If a child is not a resident of the county in which he or she died, the coroner shall forward all information and all reports to the chairperson of the CFR Committee in the county or circuit of the child's residence
- Act as liaison with counterparts across the state

### Frequently Asked Questions about the ME/Coroner Role in CFR:

*Q: You are asking for coroners to interview families when their infant dies from SIDS, but we think that the family doesn't want to be interviewed because they'll feel like we're accusing them of killing their child. Why should we do this, and how could it possibly help?*

*A: Families want to know why their baby died. They want to know if there is anything they can do to protect the next baby, should they decide to have one, and their friends' babies. They want to feel hopeful that the next baby might have a better chance at survival, if they can provide a safer environment. They don't want to feel hopeless. A thorough interview, conducted in a friendly and sympathetic manner, can help calm the family and also involves them in the investigation into why their baby died. Many coroners have told us that parents want to feel helpful after this type of infant death, and your interview will allow them to participate and also to understand SIDS/SUID better.*

*Q: What kind of prevention work can I do? I don't have access to any prevention materials or money.*

*A: The Office staff can assist you with obtaining items such as prevention brochures, posters, or gun locks for your community education project. We can also connect you with public and private agencies who do community prevention work around child fatalities, and you may choose to invite them to your next county*

fair or other large public event. You may choose to be a sponsor for an activity such as “prom night driver safety education” at the high school or “child safety seat checks” at pre-school/kindergarten classes. You may choose to use your public position to make a statement to the local media about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep).

### County Coroner/Medical Examiner Contacts:

Appling	George	O'Quinn	(912) 367-8112
Atkinson	George	Relihan	(912) 422-3221
Bacon	Roy	Crosby	(912) 632-8623
Baker	Andy	Belinc	(229) 734-9127
Baldwin	Colby	Self	(478) 445-4891
Banks	Henry	Galloway	(706) 652-2579
Barrow	David	Crosby	(770) 307-7781
Bartow	Joel	Guyton	(770) 387-5160
Ben Hill	John	Burch, Jr.	(229) 426-5157
Berrien	Robert	Lovein	(229) 686-2007
Bibb	Leon	Jones	(478) 621-6314
Bleckley	Danny	Mathis	(478) 934-2030
Brantley	Richard	Fox	(912) 213-0965
Brooks	Ronald	Miller	(229) 263-8842
Bryan	Daniel	Page	(912) 657-5440
Bulloch	Jake	Futch	(912) 531-2580
Burke	Craig	Kennedy	(478) 569-4831
Butts	Ralph	Wilson	(770) 775-3916
Calhoun	Charlie	Shedrick	(229) 835-2973
Camden	L.	Bruce	(912) 729-5785
Candler	David	Moore	(912) 685-4600
Carroll	Samuel	Eady	(770) 832-7056
Catoosa	Vanita	Hullander	(706) 965-6800
Charlton	Rob	Roberson	(912) 496-7388
Chattahoochee	Brenda	Chancellor	(706) 989-3325
Chattahoochee	Charles	Herlth	(707) 989-1989
Cherokee	Earl	Darby	(770) 429-2193
Clarke	Bobby	Tribble	(706) 340-0689
Clay	Trey	Crozier	(229) 768-3381
Clay	Raymon	Crozier	(229) 768-2912
<b>Clayton</b>	<b>(GBI)</b>		<b>(404) 244-2500</b>
Clinch	Felton	Roundtree	(912) 487-5325
<b>Cobb</b>	<b>Brian</b>	<b>Frist</b>	<b>(770) 528-2200</b>
Coffee	Charles	Sims	(912) 384-1234
Colquitt	Daniel	Warburg	(229) 616-7012
Columbia	Thomas	King	(706) 868-3386
Cook	Ron	Lipse	(229) 896-2612
Coweta	Wimp	Pierce	(770) 253-2561
Coweta	Leslie	Mui	(770) 253-2561
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Dade	Johnny	Gray	(423) 240-7399
Dawson	Ted	Bearden	(706) 265-3159
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Dodge	Joe	Smith	(478) 374-3635
Dooly	Rooney	Bowen III	(229) 273-4531
Dougherty	Emma	Quimbley	(229) 438-3974

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Early	Billy	Jordan	(229) 723-3421
Echols	Ira	Burnett	(229) 559-1612
Effingham	Merle	Kilgore	(912) 772-8100
Elbert	Charles	Almond	(706) 283-4737
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Fayette	C.J.	Mowell	(770) 461-7641
Floyd	William	Oliver	(706) 234-5302
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Glascocock	Connie	Kitchens	(706) 598-2161
Glynn	Jimmy	Durden	(912) 265-3636
Gordon	James	Carver	(706) 629-1508
Grady	Nancy	Clark	(229) 377-1414
Greene	Stephen	McCommons	(706) 453-2626
Gwinnett	Carol	Terry	(770) 995-5558
Habersham	Don	Pitts	(706) 778-6140
Hall	Marion	Merck	(770) 287-8227
Hancock	Alexander	Ingram	(706) 444-6783
Haralson	Roy	Wooten	(770) 646-3878
Haralson	J.	Hutcheson	(770) 646-3878
Harris	Lori	Camp	(706) 718-7687
Harris	Jimmy	Carver	(706) 628-4284
Hart	Mike	Adams	(706) 856-5322
Heard	Kathie	Buchanan	(706) 302-5444
Heard	Kathie	Buchanan	(706) 675-6883
Henry	Charles	Cannon	(770) 914-1414
Houston	Daniel	Galpin	(478) 542-2113
Jackson	Keith	Whitfield	(706) 367-1455
Jeff Davis	Tommy	Carter	(912) 375-9310
Jefferson	Edward	James	(706) 547-2522
Jenkins	Henry	Young	(478) 982-3146
Johnson	Russell	Dixon	(478) 864-3485
Jones	Jerry	Bridges Sr.	(478) 986-4164
Lamar	Jim	Smith	(770) 358-1060
Lanier	W.G.	Music	(229) 482-3385
Lee	Ronald	Rowe	(229) 435-8885
Liberty	Reginald	Pierce	(912) 884-4490
Lincoln	Paul	Reviere	(706) 359-5510
Long	Emmett	Patterson	(912) 545-9460
Lowndes	Walter	Wacter	(229) 242-0668
Lumpkin	Larry	Banister	(706) 864-4159
Macon	Grover	Barfield	(478) 472-7683

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Meriwether	Johnny	Worley	(706) 672-1211
Miller	Danny	Sheffield	(229) 758-3571
Mitchell	James	Jamerson	(229) 294-2661
Monroe	Joey	Proctor	(478) 993-3832
Montgomery	Joe	Strickland	(912) 583-6229
Morgan	Adam	Carter	(706) 752-1790
Murray	Daniel	Carroll	(706) 695-7484
Murray	Larry	Ballew	(706) 695-7484
Muscogee	James	Dunavant	(706) 225-3260
Newton	Bob	Wheeler	(770) 786-7111
Oconee	Ed	Carson	(706) 549-1290
Oconee	John	Simpson	(706) 546-0144
Oglethorpe	James	Matthews	(706) 743-8364
Paulding	Sam	Clark	(770) 445-7133
Peach	Kerry	Rooks	(478) 825-2424
Pickens	Kevin	Roper	(706) 253-2454
Pierce	Milton	Harper	(912) 449-6530
Pike	Terrell	Moody	(770) 567-8642
Polk	Lester	Litesey	(770) 748-1241
Pulaski	Charles	Young	(478) 783-1471
Putnam	Gary	McElhenney	(706) 485-7722
Quitman	Ivey	Belflower	(229) 334-6691
Richmond	Grover	Tuten, Jr.	(706) 821-2382
Rockdale	Stephen	Boyle	(770) 918-6555
Schley	Johnny	Wall	(229) 937-2222
Screven	James	Strickland	(912) 564-2331
Seminole	Terry	Batchelor	(229) 400-2415
Spalding	Sonny	Foster	(770) 229-1366
Stephens	Hoke	Addington	(706) 779-2981

Stewart	Sybil	Ammons	(229) 887-3366
Sumter	Greg	Hancock	(229) 938-0255
Talbot	Clinton	Crosby	(706) 665-3130
Taliaferro	Milton	Alexander	(706) 456-2937
Tattnall	Bobby	Brannen	(912) 654-1402
Taylor	Gary	Lowe	(478) 847-3435
Telfair	Raford	Horton	(229) 868-2705
Thomas	Sam	Brown	(229) 228-4597
Tift	Mike	Beaumont	(229) 386-0181
Toombs	Ronald	Hall	(912) 537-4121
Towns	Robert	Stalkupee	(706) 896-2289
Treutlen	Willie	Higgs	(912) 529-4242
Troup	Jeff	Cook	(706) 883-1709
Turner	Edgar	Perry	(229) 567-3366
Twiggs	Harold	Reese	(478) 945-3121
Union	Benny	Erwin	(706) 886-1491
Union	James	Brookshire	(706) 747-3693
Upson	Michael	Cochran	(706) 647-7543
Walker	W.	Wilson	(706) 375-5621
Walton	Craig	League	(770) 266-1509
Ware	Atha	Lucas	(912) 283-0388
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Wheeler	Ted	Mercer	(912) 523-5113
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Whitfield	Bobbie	Dixon	(706) 275-6235
Wilcox	Dale	Frazier	(229) 365-2226
Wilkes	William	Hopkins	(706) 678-6771
Wilkinson	William	Mathews Sr.	(478) 946-5541
Worth	Pamela	Helms	(229) 776-9945

## Department of Family and Children Services

- Conduct case investigations and intervention as appropriate.
- Identify previous contacts of the child and family with DFCS
- Provide services to surviving siblings and family members at risk
- Develop intervention and public awareness programs to protect children at risk
- Make placement decisions
- Acts as liaison with counterparts in Georgia and other states

### Frequently Asked Questions about DFCS Participation:

*Q: What can I do about my committee when they blame my agency and staff for a child death?*

A: Child Fatality Review is not designed to place blame on any agency, but to identify avenues for prevention of future child deaths. If there are identified gaps in agency policy or practice, the communication among the multidisciplinary members of your committee should help to articulate those gaps in a non-threatening way. Recommendations should then be made to the appropriate county or state director for changes, based on the circumstances of death. If you continue to experience problems with your committee, you should communicate those issues with the chairperson, as it is their responsibility to maintain a pleasant working environment for all members. If your chair is unable to resolve the issue, you may choose to direct your concerns to your agency supervisor, and your next step is to communicate your concerns to your Program Manager at OCFR, who will assist you in identifying additional avenues to correct the situation.

*Q: When I am filling out the CFR reporting form, what does the “supervision” definition really mean?*

A: According to the CPS Policy Manual, section 2104.4: “Children eight years and younger should not be left alone; children between the ages of nine years and twelve years, based on level of maturity, may be left alone for brief (less than two hours) periods of time; and, children thirteen years and older, who are at adequate level of maturity, may be left alone for and may perform the role of babysitter, as authorized by the parent, up to twelve hours. These guidelines pertain only to children who are not in the department’s custody.” CFR requests that you use this explanation when determining neglect and adequate supervision.

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show DFCS agency involvement?*

A: Any agency history of the child should be shared with your committee. There may be agency involvement with the child’s parents, grandparents, siblings or other family members. There may have been Child Protective Services or Public Assistance (welfare programs such as WIC or TANF) provided by the agency for someone in the family. Include also any reports of inadequate supervision, even if those reports have been screened out and/or unsubstantiated. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

A: The County DFCS Office can do a lot for prevention of child deaths in your community. When people come into your office requesting your services, you can have reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in health departments and doctor's offices. You may choose to train your case workers to talk to families when they make home visits about the leading causes of death to children in your community, the importance of keeping a safe and child proof home to prevent deaths and injuries (e.g. electrical outlet plugs, small items removed from the floors, dangerous chemicals placed in a secure location) and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep). DFCS workers have many opportunities to observe home safety measures and discuss with families the benefits of installing smoke alarms, outlet safety covers, and pool gates, among other things.

## Juvenile Court

- Identify previous contacts of the child and family with the Juvenile Court and/or Department of Juvenile Justice
- Make placement decisions, order follow-up services and case management to surviving siblings referred by DFCS
- Participate in identifying risk factors to child safety and strategies to address these
- Act as liaison with counterparts across the state

### Resources:

Georgia Superior Court Domestic Violence Benchbook: A Guide to Civil and Criminal Proceeding, Council of Superior Court Judges: [www.uga.edu/inje/DVBenchbook.html](http://www.uga.edu/inje/DVBenchbook.html)

### Frequently Asked Questions about Juvenile Court Participation:

*Q: I don't feel like my participation is very relevant, because many of the deaths in my county are infant deaths. There isn't much that I can provide to the committee about any agency involvement history of the child. What can I do to be more involved?*

**A:** Juvenile Court representatives are very useful in many case reviews, not only when they have agency history with the child or the child's family. Because CFR committees review deaths involving children up to the age of 17, some deaths include youth involved in Juvenile Court, either by deprivation or delinquency. In addition, some children that die from preventable deaths may have a parent whose Juvenile Court history could be beneficial to the review process. Additionally, because many of the infant deaths in the state are related to prematurity and/or bed-sharing with others, they can be prevented with early education on pregnancy and infant safety to teens before they become pregnant. You may choose to share this information among your clients and co-workers who work with teens regularly. The statistics of infant deaths may be used as prevention education in your work, and long-term results may show fewer unprepared teens having babies before they're ready, and fewer infant deaths in your county.

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show Juvenile Court agency involvement?*

**A:** Any agency history of the child should be shared with your committee. There may be agency involvement with the child's parents, grandparents, siblings or other family members. There may have been delinquency or deprivation adjudication for someone in the family. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

**A:** The Juvenile Court can do a lot for prevention of child deaths in your community. When people come into your office needing your services, you can have reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in health departments and doctor's offices. You may choose to train your officers to talk to families when they meet for case management about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep).

## Public Health

- Identify previous contacts of the child and family with the health department.
- Assist in the discovery and review of child's medical records from public and private providers
- Provide epidemiological, morbidity and mortality data to assist in the evaluation
- Promote intervention and public awareness programs to protect families and children at risk
- Act as liaison to counterparts across the state

### Frequently Asked Questions about Public Health Participation:

*Q: Who is responsible for providing the death certificates to the committee?*

A: It is most helpful for the Health Department representative to provide the death certificates to the committee. Death certificates can be obtained from the local health department, once they are filed with the Bureau of Vital Records. You may also ask the county coroner to obtain the death certificate from the funeral home.

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show Public Health agency involvement?*

A: Any agency history of the child should be shared with your committee. There may be agency involvement with the child's parents, grandparents, siblings or other family members. There may have been WIC, developmental delay services (i.e. Babies Can't Wait) or immunizations provided by the agency for someone in the family. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

A: The County Health Department can do a lot for prevention of child deaths in your community. When people come into your office needing your services, you can have posters and reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in doctor's offices. The county health department can also sponsor health fairs to provide health education to children and families, including information on child death and injury prevention. You may want to train your nurses and support staff to talk to families when they meet for case management about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep and learning how to recognize and report child abuse).

## Mental Health

- Provide information about any services sought or received by the child or family prior to the death
- Assist in the discovery and review of the child's mental health or substance abuse records from public and private providers
- Provide follow-up services to surviving family members
- Promote intervention and public awareness programs to protect families and children at risk
- Act as liaison with counterparts across the state

### Frequently Asked Questions about Mental Health Participation in CFR:

*Q: Who is responsible for providing bereavement services to families after a death occurred? Am I permitted to place a referral for bereavement services to an agency, since the O.C.G.A. 19-15-5 prohibits me from making the identifying child death information available to the public?*

*A:* You may provide agency contact information to the family so that they can initiate services. Many county committees have printed up small, pocket-sized cards with local bereavement service provider agency names, phone numbers and group meeting dates to give to parents after their child's death. Often, it is the coroner who is most likely to talk to the family after the death, and they are able to share this pre-printed information with sympathy. This is very helpful because, while the family may not want bereavement services immediately, they may decide 6 months or a year after the death that they want to talk to someone about their feelings. Having a reminder card with them is a good way to share information and allows them to use it at their discretion. You may also choose to have a clergy person on your committee to help decide the best course of action in certain cases. It has been reported in other states that African-American families may be more likely to talk with a local pastor instead of a bereavement support group. Encourage local pastors to learn about SIDS, SUID and other causes of child deaths to provide this necessary counseling and prevention to families in need.

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show Mental Health agency involvement?*

*A:* Any agency history of the child should be shared with your committee. There may be agency involvement with the child's parents, grandparents, siblings or other family members. There may have been counseling or therapeutic assistance provided by the agency for someone in the family. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

*A:* The County Mental Health agency can do a lot for prevention of child deaths in your community. When people come into your office needing your services, you can have reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in health departments and doctor's offices. . You may also provide information on grief and bereavement, with support services for those who have experienced a child death. You may want to train your counselors and support staff to talk to families when they meet for

case management about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep and learning how to recognize and report child abuse).

## Mental Health Providers Contacts:

State of Georgia, DHR, MHDDAD contact: 404-657-2258

Advantage Behavioral Health Services  
C&A Coordinator: David Anderson, Ph.D.  
165 Dougherty Street  
Athens, GA 30601  
(706) 369-6363 Fax (706) 369-6239  
[davida@advantagebhs.org](mailto:davida@advantagebhs.org)

Community Service Board of Middle GA  
C&A Coordinator: Zack Mercer  
2121 Bellevue Road, Building 4  
Dublin, GA 31021  
(478) 275-6850 Fax (478) 275-6649  
[zmercerc@csbmg.com](mailto:zmercerc@csbmg.com)

Community Service Board of East Central GA  
C&A Coordinator: Patrick Waters  
3421 Mike Padgett Highway  
Augusta, GA 30906-3815  
(706) 432-7923 Fax (706) 432-4911  
[pjwaters@cmhc.us](mailto:pjwaters@cmhc.us)

Georgia Mountains Community Service  
C&A Coordinator: Betty Godfrey  
4331 Thurmond Tanner Road  
Flowery Branch, GA 30542  
(678) 513-5753 Fax (678) 513-5831  
[bhgodfrey@gamtms.org](mailto:bhgodfrey@gamtms.org)

Gateway Behavioral Health Services  
C&A Coordinator: Jamie Flanagan  
1149 Cornell Ave.  
Savannah, GA 31406  
(912) 351-6523 Fax (912) 351-6519  
[jflanagan@gatewaybhs.org](mailto:jflanagan@gatewaybhs.org)

GRN Community Service Board  
C&A Coordinator: Traci Agnew  
PO Box 687  
Lawrenceville, GA 30046-0687  
(770) 339-5070 Fax (770) 339-5016  
[tagnew@grncsb.com](mailto:tagnew@grncsb.com)

The GA Pines Community MHDDAD SB  
C&A Coordinator: Patricia Calloway  
1102 Smith Avenue  
Thomasville, GA 31792  
(229) 227-5472 Fax (229) 227-3238  
[pcalloway@gapines.csb.state.ga.us](mailto:pcalloway@gapines.csb.state.ga.us)

Highland Rivers Community Service Board  
C&A Coordinator: Denise Royster  
650 Joe F. H. Parkway  
Cartersville, GA 30120  
(770) 387-3538  
[deniseroyster@highlandrivers.org](mailto:deniseroyster@highlandrivers.org)

Haralson County Center from MHMRSA  
MH Coordinator: Laura Croft  
405 Alabama Avenue  
Bremen, GA 30110-2153  
(770) 537-2376 Fax (770) 537-1203

Lookout Mountain Community Service  
C&A Coordinator: Marilyn Keller  
501 Mize St.  
Lafayette, GA 30728  
(706) 638-5584 Fax (706) 638-5585  
[marilyn@lmcs.org](mailto:marilyn@lmcs.org)

Lookout Mountain Community Services  
C&A Coordinator: Carol Gobbel  
501 Mize St.  
Lafayette, GA 30728  
(706) 638-5580 Fax (706) 638-5585  
[carolg@lmcs.org](mailto:carolg@lmcs.org)

McIntosh Trail CSB  
C&A Coordinator: Christa Raines  
1574 Williamson Rd.  
Griffin, GA 30224  
(702) 229-3407 Fax (770) 229-3499  
[Christa.raines@mctrail.org](mailto:Christa.raines@mctrail.org)

Albany Area Community Service Board  
C&A Coordinator: Annette Scott  
PO Box 1988  
Albany, GA 31702-1988  
(229) 430-5100 Fax (229) 430-6069  
[ascot@albanycsb.org](mailto:ascot@albanycsb.org)

New Horizons  
C&A Coordinator: Grace Davis  
PO Box 5328  
Columbus, GA 31906-0328  
(706) 321-9606 x204 Fax (706) 322-6576  
[gtdavis@newhorizonscsb.org](mailto:gtdavis@newhorizonscsb.org)

Cobb/Douglas Community Service Board  
C&A Coordinator: Pam McCollum  
3830 South Cobb Drive, Suite 300  
Smyrna, GA 30080  
(678) 213-1463 ext. 221 Fax (770) 438-5136  
[pmccollum@cobbcsb.com](mailto:pmccollum@cobbcsb.com)

Phoenix Center Community Service Board  
Executive Director: Don Blair  
PO Box 2866  
Warner Robbins, GA 31099  
(478) 322-4058 Fax (478) 322-4085  
[dblair2000@hotmail.org](mailto:dblair2000@hotmail.org)

River Edge  
C&A Coordinator: Sue Linn  
PO Box 1215  
Forsyth, GA 31029  
(478) 994-7600 Fax (478) 994-7611  
[slinn@river-edge.org](mailto:slinn@river-edge.org)

Satilla Community Service Board  
C&A Coordinator: Glyn Thomas  
1007 Mary Street  
Waycross, GA 31501  
(912) 284-2591 Fax (912) 284-2545  
[gthomas@satilla.csb.state.ga.us](mailto:gthomas@satilla.csb.state.ga.us)

Middle Flint Community Service Board  
C&A Coordinator: Willie Greene  
415 North Jackson Street, PO Drawer 1348  
Americus, GA 31709  
(229) 931-2956 Fax (229) 931-2968  
[wilgreene@middleflintbhc.org](mailto:wilgreene@middleflintbhc.org)

Oconee Center Family Directions  
C&A Coordinator: Sherrie Johnson  
1371 Orchard Hill Rd.  
Milledgeville, GA 31061  
(478) 445-5322 Fax (478) 445-6062  
[sjohnson@alltell.net](mailto:sjohnson@alltell.net)

Ogeechee MHDDAD Community Service Board  
C&A Coordinator: Darlene Delaigle  
PO Box 726  
Swainsboro, GA 30830  
(706) 437-6857 Fax (706) 437-6858  
[dardelaigle@obhs-ga.org](mailto:dardelaigle@obhs-ga.org)

Pineland Area MHDDAD Community Service Board  
C&A Coordinator: Cynthia Cone-Dekle  
508 Gently Road  
Statesboro, GA 30459  
(912) 764-4256 Fax (912) 764-3252  
[ccdekle@pinelandcsb.org](mailto:ccdekle@pinelandcsb.org)

River Edge Behavioral Health Center  
C&A Coordinator: Janice Breidenstein  
3120 North Oak St. Extension Ste. E  
Valdosta, GA 31602  
(229) 293-6144 Fax (229) 293-6138  
[jbreidenstein@bhsga.com](mailto:jbreidenstein@bhsga.com)

Dekalb Community Service Board  
Research & Outcome Development Director:  
Stephanie Pearson, Ph.D.  
445 Winn Way  
Decatur, GA 30030  
(404) 508-7743 Fax (404) 296-5706  
[nearson@dekcsb.org](mailto:nearson@dekcsb.org)

Serenity Behavioral Health System  
C&A Coordinator: Cathy Ferguson  
3421 Mike Padgett Highway  
Augusta, GA 30906-3815  
(706) 432-7800 Fax (706) 432-3791  
[cferguson@serenitybhs.com](mailto:cferguson@serenitybhs.com)

Clayton Community MH, AD Developmental Services  
C&A Coordinator: Catrechia Stokes  
6315 Garden Walk Blvd.  
Riverdale, GA 30274  
(770) 991-7429 Fax (770) 991-7420  
[catrechia.stokes@claytoncenter.org](mailto:catrechia.stokes@claytoncenter.org)

## Law Enforcement

The responsibilities of the officer at the scene include: interviewing, documenting, and taking photographs at the death scene. The officer also assists the coroner or medical examiner in determining the cause, manner and mode of death. Other responsibilities are as follows:

- Conduct primary case management of investigation when there is possible criminal action
- Provide information on criminal histories of the child and/or family and suspects in child fatality cases
- Provide investigation or criminal records of child and family (i.e. reports, scene photographs, etc.)
- Participate in identifying risk factors to child safety and strategies to address these
- Act as liaison with counterparts across the state

### Frequently Asked Questions about Law Enforcement Participation:

*Q: When filling out the CFR reporting form, what documents should I provide to my committee to show Law Enforcement agency involvement?*

*A:* Any agency history of the child should be shared with your committee. There may be agency involvement with the child's parents, grandparents, siblings or other family members. There may be arrest records, calls to the home for domestic violence or a violation of probation by someone in the family. Those are the types of records that should be shared with the committee as you discuss the circumstances of the fatality, and identify any prevention opportunities for other children in similar situations as a result of the fatality.

*Q: What kind of prevention can my agency recommend as a result of the fatality?*

*A:* The local Law Enforcement offices can do a lot for prevention of child deaths in your community. When people come into your office requesting your services, you can have reading material in your waiting room to educate parents and families on injury prevention in home situations (like how to make a fire escape plan or where to get free smoke detectors). You may even decide to play a short video that tells viewers how to reduce child injury and fatality, similar to those in health departments and doctor's offices. You may choose to use your very public position to make a statement to the press about the leading causes of death to children in your community, and what easy steps people can take to reduce the risk (like placing your baby on his/her back to sleep). When your officers visit homes and communities, you might choose to begin conversations with families about how to recognize and report child abuse, and how to safely store firearms away from children.