

# SPECIALIZED CHILD ABUSE TRAINING

## CHILD DEATH SCENE INVESTIGATION

**August 4, 2011**

**Great Wolf Lodge**

3575 North US Highway 31 S

Traverse City, MI 49684

(231) 941-3600

The Prosecuting Attorneys Association of Michigan, Child Abuse Training Services, in cooperation with the Prosecuting Attorneys Coordinating Council, and the Department of Human Services (DHS), is pleased to present this cross-professional Specialized Child Abuse Training seminar on the topic of Child Death Scene Investigation. Registration will begin at 8:30 a.m. on Thursday, August 4, 2011 and the program will begin promptly at 9:00 a.m. The conference will conclude by 4:30 p.m.

This is a one-day training program provided by the Michigan Child Death Review Program. Investigators will be coached on the use of the State of Michigan Sudden & Unexplained Child Death Scene Investigation Form and they will be introduced to the use of doll re-enactments as a tool in child death scene investigation. Investigators will learn from real case examples and have the opportunity to discuss all aspects of child death scene investigations.

The primary goal of this seminar is to train participants on the revised State of Michigan Sudden & Unexplained Child Death Scene Investigation Form. Public Act 179 of 2004 was put into place to standardize response “when a child under the age of 2 years dies within this state under circumstances of sudden death, cause unknown.” To comply with this law, the Michigan Department of Community Health promulgated rules R330.1-4 that require the use of this revised tool.

This training is geared toward law enforcement, prosecutors and DHS Children’s Protective Services workers. As this is a specific area of expertise, the investigators being trained in child death investigation should be the person within your jurisdiction available and willing to conduct the scene investigation and complete the tool. The local Medical Examiner will be notified of who the trained investigators are in their area.

Please find enclosed a copy of the registration form for the seminar. There is no tuition charge or charge for materials for this seminar. Attendees are responsible for overnight accommodations, transportation, meals, and other incidental costs. You may book directly with the Great Wolf Lodge at (231) 941-3600. **The rates for this conference are \$65.00 for single, \$90 for double & \$115 for triple/quad occupancy.** You must mention you are with the Prosecuting Attorneys Association to receive these rates.

The Prosecuting Attorneys Association office must receive seminar registration forms by **July 12, 2011**. Registration is limited to 35 people so please register early.

PLEASE NOTE: This conference is completely separate from our Annual Conference (which will be held on the same dates at the same location). If you attend this training, you will not be able to attend Annual Conference.

If you have questions please contact Jennifer Doerr at [doerrj@michigan.gov](mailto:doerrj@michigan.gov).

[www.michiganprosecutor.org/cats](http://www.michiganprosecutor.org/cats)

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(One form per person. Duplicate if necessary. **Please type or print clearly.**)

Name: \_\_\_\_\_

**Please select the category that best describes your current job description:**

- |   |   |
|---|---|
| <input type="checkbox"/> CAC Forensic Interviewer                                 | <input type="checkbox"/> Private Agency (FC, Adoption, etc.)  |
| <input type="checkbox"/> CAC other  | <input type="checkbox"/> Prosecutor/Assistant                 |
| <b>DHS (choose below)</b>   | <input type="checkbox"/> Tribal CPS                           |
| <input type="checkbox"/> CPS worker/investigator                                  | <input type="checkbox"/> Tribal PA/APA                        |
| <input type="checkbox"/> Foster Care worker                                       | <input type="checkbox"/> Tribal Other                         |
| <input type="checkbox"/> Other: i.e. Adoption, Licensing,<br>Manager, Supervisor, | <input type="checkbox"/> Victim advocate/witness professional |
| <input type="checkbox"/> Law enforcement _____                                    | <input type="checkbox"/> Other: be specific: _____            |
| <input type="checkbox"/> Medical personnel (SANE, MD) _____                       |   |

Title: \_\_\_\_\_ County: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: (for seminar confirmation)

\_\_\_\_\_

Signature

***Your signature is your guarantee that you will attend the entire training***

Do you have any specific questions/issues you would like addressed at the seminar?

Confirmation details for this seminar will be sent out approx. 2 weeks prior to the seminar date.

**Fax this form to the Prosecuting Attorneys Association of Michigan, Child Abuse Training Services office at (517) 334-6787 by July 12, 2011.**

Prosecuting Attorneys Association of Michigan, Child Abuse Training Services  
116 W. Ottawa, Suite 200, Lansing, Michigan 48913  
Telephone: (517) 334-6060 Ext. 836 Fax: (517) 334-6787

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