CFEP Examiner Input Needed

We are seeking input from current and past CFEP examiners to aid in the revision and updating of Program guidelines. We welcome comments on any aspect of the Program, but are especially requesting input on three questions. Please fill out this quick survey by copying this link into a web browser: https://www.surveymonkey.com/s/XRYC575

If you have any concerns or further questions, please e-mail Mark Everson at mark_everson@med.unc.edu.

Medical Child Abuse

Medical Child abuse, formerly known as Munchausen Syndrome by Proxy, has been the focus of a graduate project under the supervision of Deb Flowers. A survey was developed for both medical and non-medical professionals across the state in order to assess the understanding, prevalence, and treatment of MCA in the state. Surveys were distributed to over 1600 professionals such as CMEP rostered child abuse pediatricians, child protection workers with DSS, law professors from the 6 universities in the state who offer law degrees, all sheriff and police departments and District /Assistant District Attorneys within NC.

The goal of this project is ultimately develop a multi-disciplined taskforce, much like the state of Michigan has done, address the need for more education, provide the education and have the support of state legislatures in addressing the issue.

If you would like to know the results of the surveys or have any questions, please email Angel Mitchell at amitchel@wakehealth.edu

CMEP Webinars

Mark your calendars! CMEP webinars resumed Sept. 24 and will continue for the rest of the year and into 2014 on the following dates: Oct 22, Nov 19, Jan 28, Feb 25, March 25, April 22, May 27, June 24.

Letters of Agreement

Also, CMEP/CFEP sent out letters of agreement over the summer to all providers for the upcoming fiscal year. Thanks to those who have returned them! If you haven’t had a chance yet, please sign yours and return it to us at your earliest opportunity. Please contact us at cmep@med.unc.edu or 919-843-9365 if you need another copy of yours to sign. After you sign it, you may fax it back to us at 919-843-9368. We do need for you to sign this if you wish to remain on our active provider list and to be reimbursed for services. Thank you!