

Jeremy's Story

By Mark and Julie Fiedelholz



Plus...

**a seven-point plan for dealing
with the hidden risks of child care**



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As told by Mark Fiedelholz

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Dedication

We dedicate this book to Jeremy's paternal grandmother, Rachel Fiedelholz. Grandma Rachel died of cancer only a few months before Jeremy's death. She taught first grade for 25 years in the Newburgh, New York public school system and served four terms as a councilwoman in New Windsor. Her love for children was evident in every facet of her life. Although she would have been devastated by the events surrounding Jeremy's death, we know that she is with us as we tell his story in the hope that we may save other children's lives.

Acknowledgements

On behalf of our family, we would like to thank the Children's Forum for its willingness to publish our story and to make it widely available to parents. We also wish to thank Creston Nelson-Morrill, publication coordinator at the Forum, for editing our manuscript. It is our collective hope that *Jeremy's Story* will become a catalyst for long overdue improvements in the nation's child care system.

We would like to give special thanks to Jeremy's surviving grandparents, Jerald Fiedelholz and John and Mary Szkeres; Mark's brothers, Gary and Glenn, and Glenn's wife Jennifer; Julie's sister, Mary Ann Suarez, and her husband Ricardo; and friends Pearl, Howard, Grayce, Miranda, Doris, Vicki, Anne Marie, Jeanne, Shirley, Stephanie, Louise, Donna, Paula, Nina, Barbara, Lee, Mary, Martha, Rick, Denise, Bill, Jeff, Jimmy, Scott, Curt, Billy, Quentin, Ricky, Gary, Diane, Helene, Candy, Adriana, Rosie, Bobbi, Tina, Joe, Herbie, Edie, Lloyd, Richard Porraro and our pediatrician, José Leon, all of whom in their own special way walked with us on our journey of grief, challenge and hope. In addition, we give special thanks to Jonathan, Julie's son from a previous marriage, who was our guiding light during this very dark period of our lives. He gave us a reason to rebuild our shattered family.

On the legal end, we give special thanks to Broward County Prosecutor Dennis Siegle, attorney Greg Monaldi, former state Rep. Steve Effman, Congressman Peter Deutch and U.S. Sen. Bob Graham, all of Florida; state Sen. William Larkin, Gov. George Pataki and Assemblyman John McEneny, all of New York, and scores of others who fought hard to ensure that *Jeremy's Story* would be heard in living rooms and in the halls of government across the nation.

Introduction

We know that there are many loving and caring child care workers who follow the law. We are grateful to them for their commitment to a profession that is underpaid and under appreciated. The problem lies in distinguishing them from those who overcrowd their child care facilities, lie to parents and the authorities and threaten the health and welfare of innocent children. As the demand for child care grows, and the supply shrinks, the potential for fraud increases.

The paucity of state and federal criminal penalties, coupled with the often lax enforcement of the law, have given some owner/operators an open invitation to commit fraud and neglect. Infants and toddlers can't call out for help— and they can't fight back. Most parents think of licensing laws as a safety net. They don't realize how fragile the fibers are that make up that safety net.

Whenever a family suffers a tragedy as painful as ours, there is an overwhelming need to vent grief and shock. However, our overriding objective in sharing *Jeremy's Story* is educating parents on the hidden dangers in America's child care system. Given the right information, parents can assess the positives and negatives of child care and arrive at an informed decision. If one child's life is saved as a result of this book, our determined efforts to make our experience public will have been well worth it.

Mark and Julie Fiedelholz

Prologue

The Children’s Forum provided support for this project because we believe that the Fiedelholzts have a message to share. The death of a child is without doubt the greatest tragedy a parent could face. Their belief that their trust was betrayed by the provider and regulators makes this tragedy all the more painful and senseless.

Jeremy’s Story is told from the perspective of his parents, and their conclusions and recommendations do not necessarily represent the views of the Children’s Forum. Millions of parents with young children work outside the home and must find child care. They simply don’t have the option of staying at home. In fact, Kids Count Center data shows that 63 percent of families with children under six years of age are now in the work force.

The incidence of child death while in the care of child care providers accounts for only about 3 percent of all deaths. When such a tragedy impacts your own family, however, percentages become irrelevant and the pain and grief are overwhelming. The question becomes, “How can we as a state and country protect our youngest and most vulnerable citizens and ensure that this happens to no one else?”

Raising the level of awareness of these issues with the public is our goal. We must as a nation embrace policies that guarantee the safety and well-being of our children. Further, we must go beyond the enforcement of minimal health and safety standards and focus our attention on providing a level of quality where all children thrive.

In Florida, there is a Child Care Resource and Referral Network that consists of agencies that work with all legally operating child care providers and maintain a database with relevant information to share with parents. Referrals are given based on criteria specified by the parent such as curriculum, staff education and training, accreditation, location and costs. However, these are not recommendations. It is up to parents to evaluate each program and choose a provider based on their personal preferences. This certainly is no easy task.

Each local agency provides resources and tools for parents to use in making decisions about their child’s care. In addition to

providing checklists to aid parents in their child care selection, the Florida Department of Children and Families has an online licensing database <http://dcfsanswrite.state.fl.us/Childcare/provider/> where child care licensure information can be easily obtained. This provides another valuable tool for parents to use in assessing quality of care and compliance with basic health and safety standards.. Parents will be able to access the information themselves or with the assistance of a child care resource and referral counselor.

All child care is not created equal. It is neither all bad nor all good and there are vast differences in between the two extremes. It is incumbent upon us that we do everything we can to provide the support families need to make informed decisions. Further, we must commit to improvements in the underfunded system of child care in this state and the nation as a whole. We must protect our children and ensure that they are cared for in environments where they are loved, nurtured and intellectually stimulated.

Our vision here at the Children’s Forum is “making Florida a quality child caring state.” To find out how you can help, contact your local child care resource and referral agency.

Phyllis Kalifeh
President

Jeremy Remembered

Just a few fleeting weeks you were with us.
Evidently your work on earth already quickly done.
Raw now, still, the hurt and the loss,
 the anger barely contained.
Even stronger our commitment to you
 to not have died in vain.
May your legacy be that, having been here,
 you helped make it safer for all the little ones in child care.

Grayce Upshaw

Caregiver to Jeremy's brothers, Jordan and Jonah



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A New Life

Jeremy Paul Fiedelholz was born the night of Oct. 24, 1996 at Plantation General Hospital in Plantation, Florida. Weighing in at 8 lbs., 2 ozs., he was a healthy baby boy. He was our first child together, although we were already blessed with Jonathan, now 17, Julie's son from a previous marriage.

In the weeks after his birth, Jeremy was showered with love and care. He was extraordinarily playful, yet what everyone commented on most was his focus and determination to discover each new toy. He consistently placed in the 95th to 100th percentile for weight. We gave him the nicknames "Chunk" and "Budda Belly." He was starting to smile. He was an absolute joy! At what would be Jeremy's last trip to the doctor's office, his pediatrician held him up high and pronounced him "a perfect 10!" We felt so fortunate to have such a beautiful and healthy child.

Julie works for Catholic Charities in Ft. Lauderdale as the Family Services Program administrator. I'm a communications attorney and former television anchor and operate a legal seminar business. Although my job affords me more flexibility than Julie's, her employment

provides our health insurance coverage. We both need to work full time to make ends meet.

After three months at home with Jeremy, Julie's maternity leave was ending. The search to identify our child care options loomed large. Our first choice was to have someone come into our home to watch Jeremy, and we got the word out to neighbors and trusted friends. We also contacted area hospitals and child care centers for referrals. Although several people expressed an interest in the job, no one, it seemed, wanted part-time work.

The licensed family child care home option

Unable to locate an in-home provider, we started investigating other options. The search for child care became so frustrating that I began calling home health care agencies and hospitals in search of child care services. But their services were geared more to children who have medical problems and the cost was prohibitive. We agreed that if we couldn't find the right child care situation for Jeremy, we would rearrange our work schedules so that one of us could care for him. Our careers clearly came second to Jeremy's well being.

Since Jeremy was only three months old, we were reluctant to place him in a larger child care center. Although we knew there were many large child care centers in our area that successfully supervised infants, we simply did not feel comfortable with the larger number of children in these facilities. This, coupled with the fact that many of the larger centers had lengthy waiting lists for infants, led us to consider another option: placing Jeremy in a family child care home.

Family child care homes are licensed by the state or, in some areas, the county, which places strict limits on the number of infants and toddlers that can be cared for at any one time. The child care provider cares for children in his or her own home, which we felt would result in closer supervision and more nurturing for Jeremy.

We held child care providers to very high standards, and we refused to compromise those standards when it came to Jeremy's safety and nurturing. Between our inflexibility in this regard and the limited number of openings for infants, we had difficulty in finding a caregiver.

We launched our search for a licensed family child care home provider with four criteria in mind:

- The home had to be licensed by the county.
- The caregiver had to demonstrate a love of children.
- The home had to not only be impeccably clean and well organized, but warm and welcoming.
- The caregiver had to live close to our home.

We contacted Family Central, Inc., the local resource and referral agency that provides parents with a list of licensed child care providers. We were given the names of seven local licensed family child care home providers that accepted infants. One of the names on that list was Chrissy's Kids, located not far from our home.

Doing our homework

We talked with several licensed child care providers. We particularly liked one caregiver who seemed especially loving toward the children in her care, but we had reservations about the potential for crime in her area. Another possible candidate lived just up the road from us. She seemed loving and very mindful of the rules, but the layout of her child care rooms caused concern. She also didn't have any immediate openings. And so we decided to take a look at Chrissy's Kids.

A licensed family child care home, Chrissy's Kids had an immediate opening for an infant. This was the most expensive provider on the list, but we didn't mind paying more for quality child care. In fact, we rationalized that if a provider was earning a living wage, she would do a better job taking care of the children in her charge. Best of all, Chrissy's Kids was just blocks from our home.

We called the provider to inquire about a convenient time for her to meet with us and show us her child care facility. She suggested that we meet in the early evening, when no children would be present to distract us. She also asked that we use the side door rather than the front door, so we could go directly into her child care room. We agreed to meet the following week.

We met with the provider at Chrissy's Kids one evening during the week of January 20. Jeremy went with us. There was a light drizzle that made using the side door inconvenient, but we complied with the provider's request. Adjacent to the side door was a fence that enclosed the provider's dogs and swimming pool. That sent up our first red flag. The combination of dogs, a swimming pool and infants concerned us.

The provider came to the door and we were invited into an immaculate, well-organized room. There was an abundance of beautiful toys. Although the child care room had been converted from a garage, it was immediately apparent that much time, thought and money had been spent on the conversion. The room was cozy and beautifully arranged. It had plush carpeting, a very clean restroom facility decorated with children's painted handprints, white hangers for the diaper bags, a diaper changing area and a refrigerator for storage of baby food. A row of portable cribs was neatly aligned against the walls, which were decorated in a colorful children's theme.

We gave Chrissy's an "A" on physical appearance, but what we really cared about was how well-supervised Jeremy would be. The fact that there was one room totally dedicated to child care meant that the children would always be in clear view of the provider. This scored big points with us.

The provider was in her early thirties and a long-time Plantation resident. Her family had deep roots in the area. She had three children, herself. She appeared friendly and professional and didn't try to over sell us on the fact she loved children.

Although we didn't know every requirement for becoming a licensed family child care home, we did know the permissible number of infants per caregiver and the requirement that they be certified in CPR and first aid. These factors clearly distinguish licensed providers from unlicensed ones. The provider showed us her current license with pride. You just can't be too careful of whom you leave your children with, she said.

The provider gave us two sets of printed materials. The first detailed the procedural rules of how she ran Chrissy's Kids. The second was a request for medical information about Jeremy. One of the handouts again reiterated her request that parents pick up their children at the

side door and leave promptly. Her rationale was that if parents lingered around the child care room for small talk, she might be distracted from her duties.

Every statement made and question asked by the provider reinforced the fact she was licensed, well-trained and strictly adhered to all the rules. In addition, she had a fully qualified assistant! If we decided to place Jeremy with her, she said, he would be the fourth full-time child in her care. She said she occasionally had a few drop offs, which allowed the children's mothers a few hours respite. It seemed an ideal situation.

Our timing couldn't have been better, the provider said, noting that one of the children in her care had only recently left. If we didn't take the slot, she would bring in a child from her sizable waiting list. These statements didn't register as pressure tactics because of the way they were delivered. This was just a first interview, and we knew that we still had reference and background checks to complete.

Before we left, I asked the provider a number of questions:

- How many children did she care for at any one time? (We thought state law required that there never be more than four or five infants per certified caregiver. We did wonder how she could afford to pay an assistant, but we assumed she was available on an as-needed basis.)
- Was her child care license certification current?
- Was her assistant certified?
- Did she know CPR?
- Did her assistant know CPR?
- Was she educated on the latest child care techniques?
- Did she ever leave the site to run errands or for other reasons?
- Was this the only room that is licensed for child care by the county?
- Were any other rooms in the house used for child care?
- Where were the dogs kept?
- Were the children ever given access to the pool area?
- Could she provide references?

My “interrogation” thoroughly embarrassed Julie.

We learned that several of the children she cared for were the children of police officers. Since I work with a number of police departments in my legal seminars, this was a selling point. We were given the names and telephone numbers of three references, two of them police officers.

After spending about an hour with the provider, and receiving such reassuring answers to our questions, we thanked her for her time and left. On the drive home, we began to process our visit. The provider appeared professional and caring about children and had a magnificent facility. We knew that she was serious about the child care business because she obviously had made a huge investment in it. We wished that she had cooed over Jeremy like everyone else did, but, we rationalized, she had not wanted to wake him from his nap.

We developed our game plan: secure the opening for Jeremy, but delay taking him to Chrissy’s until all of our background checks were completed. We felt this process would take about a week. As soon as we got home, we called the provider and secured the opening for Jeremy. She agreed to take him the following week for a trial run at a the rate of \$5 per hour. This gave us time to do our homework.

Checking with the county

The Broward County Child Care Licensing Office is granted regulatory authority over child care providers by state law. It retains certification records, the results of background checks and any complaints filed against an provider. When I called the office on January 27, the news was good. Both the provider and her assistant were certified. Neither had a criminal record or a history of complaints.

Next, we set out to verify the references the provider had given us. We hoped to gain some additional insights by talking with the other parents. All three families we spoke to gave the provider glowing reviews. She alternately was described as “loving,” a stickler about the rules and regulations, and as “put(ting) her heart and soul into her child care.”

We could not believe our great good fortune in finding Chrissy's Kids. The provider and her assistant were certified. They were loving and followed the letter of the law. The other parents whose children were in their care spoke highly of them. The provider interviewed well, and her facility was exceptional. Plus, she lived close to our home.

The thought of leaving Jeremy with a stranger—no matter how qualified—was stressful. If we had had the luxury of one spouse staying home full time, we would have jumped at the chance. But as is the case for millions of working parents across the nation, staying at home simply wasn't an option.

Julie wanted to make certain that Jeremy's feedings of breast milk could be supplemented by formula. Over the weekend, she introduced Jeremy to formula, and on Sunday he was fussy and seemed troubled by gas. Julie called Jeremy's doctor and was assured by the nurse that Jeremy's reaction was a normal one to the switch from breast milk to formula.

Although Jeremy showed no other signs of illness, Julie decided not to send him to child care for the few hours on Monday morning as had been planned. The provider called us before we had the chance to call her to inquire as to whether Jeremy would be coming that day. Out of consideration for the provider, Julie told her no. Jeremy was a big boy and carrying him around to help relieve his discomfort from gas was no easy task. I also needed additional time to complete my background checks, and this was a factor in her decision.

A three-hour trial run

Wednesday came, and Jeremy was fine. I called the provider to make certain that she was not at capacity with the drop offs and still could accommodate Jeremy. I spoke with the assistant, who assured me that Jeremy would not put them over the maximum number of children allowed. The game-plan was to drop Jeremy off for a three-hour trial run to acquaint him with his new surroundings.

I said my goodbyes to Jeremy, holding him in my lap, hugging him and smothering him with kisses. Julie fed Jeremy just before

leaving so any fussiness would not be mistaken for hunger pains. She collected his pastel colored diaper bag, making certain that it held an adequate supply of diapers, a baby bottle and formula—just in case. I picked up Jeremy, buckled him up in his baby seat and gave him one more kiss.

Sensing my concern, Julie asked, “What can happen? He may cry, or he may get sick more often being around other children, but he’ll survive.” I waved goodbye and went back to work at my computer in our home office. It was 9:50 a.m.

The trip to Chrissy’s took Julie less than five minutes. She got Jeremy out of the car and knocked at the side entrance of the house where the child care room was located. The provider greeted her. The room seemed dark, but the provider explained that it was rest time for the children. Julie saw one child resting on the floor and a baby protesting loudly as it was being diapered by the assistant—two children in all. Jeremy would be the third.

Julie was introduced to the assistant, who was seven months pregnant. Speaking quietly so as not to disturb the children, Julie assured the provider that she had checked with Jeremy’s pediatrician to make certain that his reaction to the formula in the previous days was normal. She told her that he had been fine since Monday. The provider asked her when Jeremy had last eaten, and Julie told her that she had breast fed him at around 9:30 a.m. She told the provider that Jeremy shouldn’t be hungry, but asked her to warm up his formula before she fed him if he did seem hungry.

Julie told the provider to call her at home, where she was doing paperwork, if she had any questions or problems. They could always try again the next day, Julie told her, if for any reason things didn’t go well that morning.

The provider said she would call Julie if she needed her, and reached out for Jeremy. Julie commented that, if Jeremy got fussy, the provider would more than earn her money! She reassured Julie that he would be fine.

Jeremy gave a little pout as the provider took him from Julie’s arms. Julie reached out and said, “Bye bye.” The entire conversation lasted about five minutes.

Jeremy's Story

Julie returned home. We both had that uneasy feeling that all parents have when they place their children in someone else's care for the first time. But we felt confident that Jeremy was in capable hands and would be closely watched and receive loving care.

Jeremy's Story

2



Our World Comes Crashing Down

As advised in the literature on selecting child care, Julie decided to make an unannounced visit to the provider and pick up Jeremy early. Prior to leaving, Julie wrote out checks to the provider for Jeremy's first two hours of care and the amount due for the following week. Julie left the house shortly before noon. I was still working at the computer.

When Julie arrived at Chrissy's Kids, she rang the doorbell and waited. Nobody responded for about 20 seconds. It seemed like an eternity, especially since the provider had quickly opened the door when she and Jeremy arrived earlier that morning. Finally, the door opened, and she was greeted by the assistant and invited in. The assistant told her that Jeremy was "just fine. He's been great. He's been sleeping the whole time," she said.

Julie was a bit surprised that Jeremy would sleep in strange surroundings, but she breathed a sigh of relief. When she asked where Jeremy was, the assistant pointed him out, in the portable mesh crib closest to the door.

"Why in the world would they lay Jeremy on his stomach?" Julie

wondered to herself. “You don’t put babies on their bellies to sleep.” But there he was, lying face down, both of his tiny hands by his ears.

Then it struck Julie like a lightning bolt: Jeremy did not appear to be breathing. Julie lightly shook him to see if there was any response. “Oh my God, he’s not breathing,” she screamed.

The provider was nowhere to be found. Julie took Jeremy out of the crib, flipped him over onto his back and placed him on the floor. He was extraordinarily pale and there was blue under his eyes. There was vomit on his right cheek. Julie screamed Jeremy’s name again and again, as if the sound of her voice would awaken him.

The assistant, too, was screaming, “He’s not breathing! Oh God, he’s not breathing! I have to call 911!” She ran to the telephone to call 911— and the provider.

Julie realized that since the panicky assistant didn’t seem able or inclined to respond to the emergency, she probably didn’t know what to do. Taking matters into her own hands, Julie tilted Jeremy’s head back and blew two short puffs of breath into his mouth. Surely he would start breathing again, she thought. Everything was going to be fine.

As Julie was trying to revive Jeremy, a little boy came over to her. He was holding a blanket and sucking his thumb. Other children were starting to awaken. Another child tugged at the assistant’s dress as she frantically called 911. Julie ran outside to her car to retrieve her cell phone and called home.

I don’t always answer the telephone in the kitchen when it rings during the day. I’ve fielded my share of calls from telemarketers. I was engrossed in my work, and Julie’s 75-year-old mom, Mary, who was visiting from Pennsylvania, was cooking. For some reason, though, I did pick up the telephone this time. It was a call that would change my life forever.

“He’s dead! Oh my God, he’s dead!” Julie was screaming into the phone. I was incredulous. “What? What are you talking about?” I shouted in disbelief. “Oh my God! Oh my God! It’s Jeremy! He’s dead! He’s not breathing,” came Julie’s agonized response. “I’m on my way,” I said, letting the receiver drop. I turned to Mary, who was frozen at the kitchen sink. “It’s Jeremy,” I said. “It’s Jeremy. Something’s wrong.” I grabbed the keys to my car and flew out the door.

Julie had gone back inside, where the assistant had a telephone lodged between her neck and ear. She was taking CPR instructions from a 911 dispatcher. The assistant was imploring the dispatcher to talk louder. She said she couldn't hear the instructions. Julie realized that her wails of despair were interfering with Jeremy's only hope for survival. She went back outside, thinking she could at least flag down the paramedics who, she knew, were on their way.

Julie had been outside for no more than ten seconds when two police officers arrived on the scene. She pointed one of them to the side door as he jumped over the small fence in the front yard. As he rushed into the house, the child care assistant shouted that he needed to hurry. "He's been down so long!" she screamed.

One of the police officers began to work on Jeremy. He blew two breaths into Jeremy's mouth. As he did, vomit came out of Jeremy's nose. Otherwise, there was no response. The officer cleaned out Jeremy's mouth and nose, and his partner took over.

Within minutes, the paramedics arrived. They rushed Jeremy to an EMS vehicle, where a stretcher awaited him. A paramedic desperately tried to bring Jeremy back, applying mouth to mouth-nose ventilation, but nothing seemed to be working. He had no brachial pulse. They quickly attached EKG leads and got a rhythm that exhibited an occasional bump instead of a flat line. A CPR tube was forced down his throat for breathing observation purposes. It took three attempts for proper placement of the tube.

I parked my car near the driveway, which had been cordoned off with yellow crime scene tape to prevent unauthorized persons from entering. An officer was posted outside. At the same time, the provider drove up with her young daughter. She jumped out of her car. "What happened?" she screamed at the police. "What happened?"

The provider ran into the house. It was the last time we would see her for three years. We later learned through court records that she immediately called her attorney.

Julie was crying, and I raced over to hug her. At some level, I knew that Jeremy was gone. I asked Julie where he was. When she told me that he was in the EMS van, I ran over to it and started pounding on the double doors.

“Where is my son? I have to see my son,” I implored. “Oh, please God, let me see my beautiful baby.” But one of the EMS workers told me to stand back from the vehicle. “We’re doing everything we can,” he said.

One EMS worker held the breathing tube in Jeremy’s mouth. Another checked Jeremy’s pupils and noted that they were fixed and dilated. His skin was pale. Then the EMS vehicle raced off, headed for the nearest hospital.

I held Julie as her tears flooded onto my shirt. I felt totally helpless. I was losing my precious son and, for the first time in my marriage, I found I had no words of comfort for Julie. I desperately wanted to be strong for her. But the realization that I would never again hold a cooing Jeremy in my arms was overwhelming. “Nobody loses their baby in the first two hours of child care,” I thought.

After a few moments, we got into my car and followed the EMS vehicle to the hospital. It was the emptiest and most emotional car ride of our lives. We began to pray, “Please God, help us. Please don’t take our baby from us.”

Brain dead

Jeremy arrived at the Plantation General Hospital emergency room and was immediately placed under the care of pediatrician Michael Silverstein, M.D. He arrived without a pulse. He was given the full arsenal of drugs that might bring him back and after more than 10 minutes of intense resuscitation efforts, his heart beat and pulse returned. Dr. Silverstein was surprised at getting a heartbeat, given the amount of time Jeremy had been down. A larger tube was inserted into his throat. His heart rate was 128; his blood pressure was 69/46.

In his detailed medical notes, beginning with Jeremy’s arrival at the emergency room, Dr. Silverstein wrote that there were no rashes or lesions on Jeremy’s skin. There was no evidence of pneumonia and no sepsis. Blood cultures were negative. There were no abnormalities reflected in a chest x-ray. Yet this otherwise healthy baby boy likely was brain dead upon arrival, he wrote. Jeremy was sent for a CT scan and then admitted to the Pediatric Intensive Care Unit. It appeared that

Jeremy had been in cardiac arrest for between 15 and 20 minutes when the life-saving efforts began.

We arrived at the emergency room and were escorted to a small room nearby. After what seemed like an eternity, Yvonne Rutherford, M.D., the director of the pediatric intensive care unit, came into the room and gave us her analysis of the situation. While they had been able to restore Jeremy's heartbeat and a light pulse, she said, he was almost certainly brain dead. However, two more tests were needed before they could rule out all chances of recovery. We were told that we needed to consider whether we wished him to remain on life support or whether we would sign a "do not resuscitate" order.

We called Julie's sister, who rushed up from Miami, to be with their mother, who we feared might have a heart attack. We called family friends for prayers and support. Several hurried to the hospital to be with us. None of us could believe that this was happening. Then two detectives arrived who said they needed to speak with us. Neither of us was able to talk to them. I kept sobbing, "It's over. It's over. We lost our little boy. We lost him. This can't be happening." Julie sat with tears streaming down her face.

We were dumbfounded when one of the detectives told us that they had found 12 other children at Chrissy's. Julie, who had seen just two children there less than three hours ago, thought the detectives had lost their minds. They had to be mistaken.

A hospital worker came into the room and told us that there was paperwork to be filled out for admission purposes. Just three months before, we had filled out admission papers at this same hospital for Jeremy's delivery.

If there is a rock bottom in life, we had hit it face first.

Breaking the news

How would we tell Jonathan? He was just 13 at the time, a seventh grader, and one of the sweetest and most sensitive young men you could ever meet. I had told friends, "You hear all the horrible stories about step-children, but in my case, it's different. We really enjoy being together."

We began the painful drive over to Jonathan's school to pick him up. We knew that we were about to deliver news that would shatter his life. This wasn't fair. Jonathan had gone through his parents' divorce and a period of adjustment with Julie's and my marriage. Now his three-month-old brother was about to die. This was cruel punishment for a child so innocent and full of goodness.

At the school, we spoke with the principal and explained what had happened. We were ushered into a conference room, and Jonathan was paged to come to the front office. We didn't speak as we waited for Jonathan.

The moment he walked into the room, Jonathan knew that something was wrong. Julie was crying. I looked defeated. As we sat around the table, we explained what had happened. Jonathan sat there silently and stared at us in disbelief. Here was a boy who should have been worrying about which girl he was going to slip a note to. Instead, he was hearing the news that his baby brother was brain dead. The three of us left the school in silence.

A criminal investigation begins

The doctors gave us updates on Jeremy's condition throughout the late afternoon. Julie and I spent most of our time at the hospital mulling over the extraordinarily foreign concept that we might be forced to make a decision to remove Jeremy from life support. At least we could donate his organs, we thought, so that we might help other families in crisis. We sat side-by-side, exchanging only a few words. We each needed to look deep within our souls. We had no idea that the Plantation Police Department was, at that moment, collecting evidence for a criminal investigation.

As we waited for any glimmer of hope at the hospital, the police sealed off the provider's home. They took photos outside and in, where they focused on the crib where Jeremy had lain. Then they confiscated the crib, three pastel blankets, a crib sheet with a brownish stain, a crib pad, several throw pillows and a swath of carpeting with a white stain.

What they found in the rest of the house, after Jeremy was rushed to the hospital, astounded them. Twelve children were found

in rooms throughout the house: five infants, six one-year-olds and one two-year-old. The police called the county child care licensure and enforcement office.

Next, they interviewed both the provider and her assistant. When they determined that the provider had been off-site, shopping at a supermarket, the police requested a copy of the store surveillance video, in the hopes that it might establish a time-line for her arrival and departure there. The store must have been the only one in Broward County not equipped with video cameras.

In the late afternoon, we were approached by a man who identified himself as an investigator from the Department of Health and Rehabilitative Services (now called the Department of Children and Families). We really didn't understand—or care—why he was there, but we assumed it must be routine procedure. His statements rocked us to our very foundations.

Chrissy's Kids had been shut down and the provider's license had been suspended. Why would an accident, albeit one with tragic consequences, result in such swift and drastic action on the part of authorities, I wondered.

The investigator clicked off a checklist of violations:

- The provider was nine over the state maximum of four infants per certified caregiver.
- Her assistant was not certified and did not know CPR. She was an illegal alien.
- When the provider left the premises, she illegally left 13 small children with a very pregnant, uncertified and unqualified assistant.
- Children were found in back rooms not licensed for child care.
- Dogs were found running loose in the house.

We had been defrauded. Since Julie saw only two children when she dropped off Jeremy, that meant the provider had been hiding ten other children out of view. The tragedy had taken on a new dimension. But our primary concern still was Jeremy.

The past three years had been difficult ones for our families. Both Julie's sister and my brother had bouts with cancer and my mother had fought a losing battle with breast cancer. The previous November, she had died at age 65. It had been just two months since my father had lost his vivacious wife of 40 years.

I could not conceive of how I would break the news of Jeremy's condition. Julie struggled with the knowledge that she soon would have to call her father. But how do you explain such a senseless tragedy?

As the hours wore on, it dawned on us that we never had chosen a religion for Jeremy. I am Jewish and Julie is Catholic. Now, under the worst possible circumstances, we would be forced to choose one religion over another. Since we weren't sure if Jeremy would survive the night, we wanted him to have a pathway to God. Julie's job at Catholic Charities, coupled with the persistence of her friend Bill, whom we had asked to be Jeremy's godfather, gave us quick access to clergy.

Bill and the priest arrived. A nurse prepared us for what we would see. She told us that they weren't sure whether Jeremy was having seizures or whether he was shivering from the cold. They would put blankets on him, she said.

Finally, we were led into the unit. We walked by incubators holding premature or sick babies. "Why are we here when our baby is perfectly healthy?" I wondered for an instant.

Jeremy's tiny bed was encircled by a soft white curtain. When the curtain was pulled back, we saw him lying in a tangle of wires that seemed to be attached to every inch of his body. Only 24 hours before, he had been a beautiful, healthy baby. The sight of our little boy surrounded by medical equipment and shaking violently was devastating. Nine months of development and three months of loving care was about to be senselessly lost.

It was hard to reach Jeremy to give him a kiss. But when we did kiss him, his skin was cold to our lips. *My God, he was so cold.* At that moment, we realized that our Jeremy would never be back. Even if he miraculously survived, he would be in a vegetative state the rest of his life. We did not want this for Jeremy.

The priest's hands shook as he gave Jeremy the last rites. Even one so familiar with death was shaken by Jeremy's innocence. Bill stood

by our sides. The pain was so deep. Tears streamed from our eyes. No parent should have to experience this, we thought. When the blessing was finished, we kissed Jeremy. As we left the room, the curtain was closed around his bed.

We left the hospital in a state of shock and drove home to check on Jonathan. The hospital would call us if there were any changes. When we walked into our family room, Jeremy's bassinet and toys were jarring reminders that just hours ago, he had been a playful, happy baby. Never again would he swing in his swing. Never again would he cry for his "binky" or a diaper change. There would be no more calls to family and friends to share the latest news of Jeremy's development. The house was deadly quiet.

Trying to sleep that night was pointless. We could hear Julie's mother, Mary, sobbing in the next room. I told Julie that there would be no more babies born to this family. "No more children, no more pain," I reasoned. "I can't protect my own children in this crazy world."

Saying goodbye

The next day, we couldn't even look at each other without crying. It was particularly difficult for Jonathan to see his mother so defeated. Our once happy, bustling home seemed stark and funereal. This was a very dark time for us.

There had been no change in Jeremy's condition overnight. We knew the clock was ticking down to the moment when we would have to make our decision regarding keeping him on life support. The medical evidence was clear. Additional tests confirmed that Jeremy was brain dead and there was absolutely no hope of recovery.

We collected ourselves and began talking through our decision. We had been crushed to learn that it would not be possible to donate Jeremy's organs to save another life because an autopsy was required for the criminal investigation. The one thing that might have brought some comfort to us had been snatched away.

In both of our minds, Jeremy's spirit had already moved on. Only his body remained. We decided to remove his life support and send him into the loving arms of God. We notified the hospital of our decision,

and the necessary paperwork was begun. A little before 4 p.m. we left for the hospital.

Jeremy had been moved into a separate room at the back of the unit. A black curtain covered the window. A nurse greeted us, and one of the hospital supervisors gave us some paperwork to complete. When we had signed away our son's life, we were led into the room. Jeremy still was on life support, but the tangle of EKG patches, wires and tubes had been removed. The only sound was the hissing of the respirator. Jeremy lay there motionless. Our pain was unbearable.

We were left alone in the room for our final private moments with Jeremy. We hugged and kissed him. We cried. We screamed. We sobbed over and over again, "We're so sorry, Jeremy. We're so sorry we couldn't protect you. Oh God, what happened to our baby, our beautiful baby?"

My wails pierced the hospital walls.

At some point, Julie gently took my hand. "It's time," she said. She called the nurse back in, who lifted up Jeremy and put him in Julie's arms. A moment later, she flipped a switch and the hissing of the machine trailed off. At that instant, the black curtain that covered the window frame came loose; a stream of daylight flooded the room. Jeremy had left us and was in God's embrace.

Casket shopping

Shopping for a casket for your infant son is a surreal experience. While we went back and forth on the issue of burial versus cremation, we knew we wanted an open casket for Jeremy's memorial service.

My dad went with us to the funeral parlor. We had not realized that funeral parlors double as casket showrooms. Just a few days before, we had been cruising the aisles of a toy store. Now we found ourselves standing between rows of caskets.

News of Jeremy's death sent shock waves through the homes of our family and friends. It all had happened so quickly, so unexpectedly. The funeral service was scheduled for the following Saturday, February 1.

A baby's death is a heart-wrenching experience for everyone involved. It is one of life's awful tragedies that tests the depths of your relationships with those you love. Julie had the support of her

co-workers. My friends from college immediately flew down to be with us. Their support meant so much to us.

In the midst of planning the service, I felt compelled to call our contact at the funeral parlor to tell him that we didn't want the provider or her assistant to attend the service. Only later did we realize that I really had wanted them to come so they could see for themselves how their actions had torn apart our lives. I had wanted an apology. I had wanted an acknowledgement of the fact that Jeremy was a precious life, not a commodity. I had wanted them to feel our pain.

We hadn't seen Jeremy since we held him at the hospital. Prior to the guests arriving at the funeral parlor, we went in to view the body and place his toys and baby blankets next to him. There was our baby, lying peacefully in his casket. He looked like he was asleep— but different. The funeral director explained that you normally don't see a baby with its lips closed. Jeremy had been beautiful in life, and he was just as beautiful in death.

When a truly old person dies, there may be only a few survivors who attend a service. Jeremy's service drew a host of friends and family. They paused to look at a white, tri-fold board that contained pictures of Jeremy in his first Halloween costume and in a Santa Claus suit. A long line wound from the entrance to his casket, where everyone offered his or her own blessing. The Archbishop from Miami attended, and both a rabbi and a priest memorialized Jeremy. I don't know from where we summoned the inner strength to do it, but we each spoke about our beloved son, recounting our happiest moments. Afterward, a huge crowd gathered at the house.

Later, Jeremy was cremated and his remains were placed in a gold metal box. It bears the inscription: "In Loving Memory, Jeremy Paul Fiedelholz." Instead of kissing our baby, we now found ourselves caressing this box. Little did we know that in a few short months, our story would become known to millions worldwide.

The medical examiner's report

We waited for two agonizing months for the medical examiner's report. During that time, we met numerous times with the police. For

the most part, these were lonely days of crying, of seeking support from those closest to us and of giving away Jeremy's toys, bassinet and clothing. Jeremy's loss paralyzed us. I couldn't work. Julie worked late hours.

Every weekend we scheduled events away from home. We went bowling and golfing, to movies and theme parks. We even went to Las Vegas. We did anything we could think of to make time pass. There was no joy in our lives. We were zombies.

Jeremy's scent still lingered in the house. Although we quickly gave away his swing, bassinet and stroller, we couldn't part with his yellow butterfly toy that had mirrors in it. He had seemed to enjoy it so. The glider still had dried spit up on it, as did the bib he wore that last morning.

As for his room, which was decorated in a cheery Winnie the Pooh theme, we just didn't have the emotional ability to make changes. His crib, where he would have slept, remained as it was. His clothes, which we had thought he was going to grow into, remained hanging in the closet. The door to his room was kept closed. It seemed that every time we thought that all of Jeremy's possessions in the rest of the house had been given away or tucked out of sight, a reminder would pop up: a bib, a sock or a pacifier.

As the days wore on, we became convinced that something had been wrong with Jeremy's mattress and crib sheet at Chrissy's Kids. We felt betrayed by the provider and by the county licensing office, which had given us incorrect information about the assistant's certification status. We wondered how we would ever trust anyone again. We hoped the medical examiner's report would paint a clear picture of what exactly had happened that morning.

On March 31, we got the answers we had been waiting for. The medical examiner's report listed the official cause of death as positional asphyxia, suffocation because of the position in which Jeremy was placed in the crib. He based his findings on the fact that Jeremy had been found in a face-down position, with a crumpled crib sheet around his face. Blood had been found on the sheet, consistent with bleeding preceding the "terminal event," vomiting. His death was ruled accidental. As I read the report, I realized that we had to make certain

that people were held accountable in this case so that no child would die like this ever again.

Julie's response to Jeremy's death was to seek support from friends and to take time to heal at her own pace. There was a huge hole in her heart that no kind words, amusement park, movie or other diversion could heal. She needed space, time and unconditional support. On the other hand, I wanted accountability and truth. Although I knew this divergence could undermine our relationship, I knew that I would be full of anger and regret if I didn't search for the truth.

Months passed and there still was no word, no expression of condolences, from the provider or any of the other parents whose children were in her care. It was unbearable. It seemed that everybody was running for cover. We knew the direct cause of Jeremy's death was a loose crib sheet, but other factors needed to be considered. Everything seemed to be going the way of the provider, but what she didn't take into account was the power of two loving parents about to wake up a nation to fraud and neglect in the child care system.

Jeremy's Story

3



Going Public

I wrote countless letters questioning why the provider had not been charged criminally for lying to us. Finally, in April, we met with representatives of the Broward County state attorney's office and the case investigators. I laid out my case for why the provider should be charged criminally for lying about her child care operation.

We learned that the options for prosecution were limited, perhaps nonexistent, given the way the law was written. Although she had violated the law in caring for more than the number of children allowed, the provider could not be charged with manslaughter since her actions were not the direct cause of Jeremy's death. She could not be charged with fraud because, according to the law at the time, the amount of the victim's loss had to be at least \$300. The amount we paid the provider for those first two hours of care didn't satisfy the minimum and other parents were unwilling to bring charges.

We left with the following understanding of the law: Providers could lie to parents, willfully violate child care laws and slip through the criminal justice system without being punished. We were horrified.

I decided to take our case to the court of public opinion, despite

the fact that I knew it would place a terrible strain on our marriage, given all we'd been through. We would be forfeiting our privacy, which would be especially hard on Julie. The last thing she wanted was to stand in the glare of the media spotlight, but she trusted me and gave her approval.

Around the end of April, I met with reporter Evelyn Larrubia, of the Ft. Lauderdale Sun Sentinel. Even though I had been a television reporter for years, I found that being the subject of a story that involves your own son's death was a whole new ballgame. The interview went well, I thought, and I hoped the story might be given some "play" in the paper, instead of being relegated to the back pages. When I opened up the newspaper the morning of May 1, the bold front page headline took my breath away: "Childcare Nightmare." Never in my wildest imagination had I thought the story would get such prominent play. The floodgates were open.

My intuition told me the story was about to explode. I only wished it didn't involve Jeremy. I held a press conference the next day, and Jeremy's story ran as the lead on most of the major network affiliates. The story peaked media interest all around the country. In the ensuing days, hundreds of parents nationwide stepped forward to say that they, too, had lost children in child care. As was the case with Jeremy's death, the cause of death generally was listed as "accidental."

The pattern was the same all around the country. Providers were lying to parents about the number of children they were caring for. Overcrowding was leading to a lack of supervision. When a child became distressed due to a defective product or other problem, there was no timely intervention. Children were being seriously injured. Children were dying. In most cases, no criminal sanctions could be imposed and, as a result, providers were getting off without consequences. They were being given a free pass to commit fraud.

Early on, we knew that we had stepped into a battleground full of land mines. Some blamed the parents—us included—for the deaths of our children in child care, reasoning that if the mother had stayed at home, the child's life would not have been placed in peril. Ignorance and out-of-date attitudes abounded.

Although all that Julie wanted was time to privately grieve our son's

death, the publicity train had left the station. It was moving at lightning speed. On July 17, we testified in front of the U.S. Senate Labor and Human Resources Committee on the dangers associated with child care. The hearing received national coverage. Our story was featured on NBC's Today show and on the cover of *U.S. News & World Report*. I appeared on CNN and held numerous press conferences. Somehow, Julie mustered up the strength to accompany me.

Although we didn't realize it, investigators for the Broward County prosecutors' office had never stopped working the case. The evidence against the provider was mounting. It seemed the case might have merit after all. The turning point came when the child care assistant was granted immunity from prosecution in exchange for her testimony against the provider. She acknowledged a lengthy list of fraudulent activities. We had known for months that we had been lied to. Still, we were stunned by the contents of the assistant's sworn affidavit.

On September 10, 1997 the provider was charged with felony neglect. If convicted, she could be sentenced to five years in jail and be required to pay a \$5,000 fine. While she was not charged with directly causing Jeremy's death, she was charged with establishing a neglectful environment. That she faced criminal charges at all is testimony to the determination of the prosecutor's office.

A ray of hope

Jordan Trent Fiedelholz was born at Coral Springs Medical Center the morning of May 15, 1998. He weighed in at 8 lbs., 1 oz. What a bundle of joy! In the delivery room, I held him so tightly and for so long that the nurse had to pry him away from me. For the first time in many, many months, Julie and I shed tears of joy, not pain. With Jordan's beautiful cry resonating off the hospital walls, we were ready to climb out of the darkness and rebuild our lives. This was a chance for a new beginning, a chance to be normal again.

Jordan's birth gave us hope and renewed our strength to fight for justice. We would not allow the provider to neglect children and hide behind lawyers. Jordan's innocence only reconfirmed what we already knew: our children are defenseless and need special protection from

harm. The clock was ticking, and it was time to hold all of the parties accountable for their civil and criminal negligence.

Among other things, we wanted to know why the county child care licensing office misled us about the assistant's certification status. I had been told that "everyone" at Chrissy's Kids was certified. When we finally sorted things out, we determined that "everyone" referred to the provider and her husband, who we had never been told had any association with the child care business.

According to the assistant's affidavit, the provider's husband took her to the licensing office to fill out the paperwork for certification. The assistant used her Canadian Social Insurance number in lieu of a U.S. Social Security number. Nobody caught the sleight of hand. Her pending application noted that she didn't have the required CPR training or the three-hour certification course, but this somehow was overlooked when I called.

The fissures in the county child care licensing system were starting to crack wide open. In addition to allowing an illegal alien to fill out child care certification papers and failing to tell a parent that she wasn't properly certified, the county, it seemed, had an extraordinarily loose inspection policy.

It turned out that inspections were not as random as one might have imagined. At the time of Jeremy's death, county inspectors canvassed child care centers by region. According to the assistant, the provider at Chrissy's Kids always had advance notice of inspections. Once on the premises, inspectors checked out only the area licensed for child care, not the entire home and, unbelievably, they relied on the providers' word regarding the identity and certification status of any assistants. On a hunch, I called an inspector who, records show, had inspected Chrissy's Kids on two occasions. She denied ever having inspected the facility. Either the records were incorrect, or the inspector was lying.

The final straw was when I contacted a top licensing official and was told the county didn't have any paperwork on the assistant. We had been given Jeremy's file, which included the assistant's criminal background check and an affidavit of good moral character on her behalf. Both had been on file with the county. When I confronted her, the licensing official said that information should have been

removed before the file was sent to me. She also said her office lacked the computers necessary to keep track of pending applications. I immediately called the Broward County state attorney's office.

An investigation of the child care licensing office was initiated. In his final report, the primary investigator said he could find no evidence of criminal behavior. The report did, however, point out fundamental problems with field inspectors not receiving information about new applicants. It also suggested that the licensing agency needed more rapid access to state criminal records. To this day, in Broward County, if an assistant doesn't have a local criminal record, he or she can work at a child care facility until the state background check is completed, a process that, at the time, took up to three months.

During these days, we felt so alone. We were shocked at the lack of support from the other parents whose children had been in the provider's care. Where was their outrage? Why did they remain silent?

I contacted two of the parents whom we had sought out for references prior to our leaving Jeremy at Chrissy's Kids. One, whose husband was a police officer, was a long-time friend of the provider. In our initial conversation, she never mentioned that her child previously had been injured while in the care of the provider. Nothing—not the numerous violations of the law nor the fact that her friend faced criminal charges—swayed her. Her response defied all logic and hurt us deeply. What if it had been *her* child who died?

The conventional wisdom seemed to be, "As long as my child isn't hurt or killed, it's not a big deal if a few child care laws are broken." What she and the other parents didn't seem to grasp was that these child care laws are the only safety net a child has. Only two parents supported our advocacy. Outside of required depositions, we never heard from any of the other ten parents.

Later we learned that many of them still did not know the extent of the provider's wrongdoing. Some said they had felt that something wasn't right and regretted not going with their gut instinct. Others said they feared rocking the boat since child care was so hard to find.

Seeking legislative relief

We had been granted a 12-month postponement of the trial due to Julie's pregnancy with Jordan. In the interim, we decided to pursue passage of legislation that would make it a crime for providers to misrepresent the number of children they are caring for, their and their assistants' licensure status and other important information. Using Jeremy's name and tragic story to educate others and prevent harm to other children had become our reason for being.

We contacted the state representative in our district, Steve Effman. After hearing us out and reviewing the case records, Rep. Effman was ready for action. Prior to the 1998 legislative session, he introduced the bill that became known as *Jeremy's Law*.

The bill seemed headed for passage as it made its way through the committee process. But for reasons still beyond us, a powerful member of the state Senate set out to kill the bill. He held the bill in his committee as the clock wound down on the session. On the House side, the bill was ready for a floor vote, but it takes the concurrence of both chambers to pass a bill into law. The senator's delay tactic worked and the bill died on calendar. It was a wrenching defeat for all of us. Rep. Effman vowed to take up the cause again the following year.

Never one to stand idly by, I lashed out at the legislative process that allowed a bill to be held hostage by a single member. Again, I took our case to the media. It all seemed so pointless, I said. The wall of ignorance was too high. Privately, I proposed to Julie that we move to another country, where the welfare of children is a higher priority. But the knowledge that the lives of countless children in Florida and around the nation were at stake kept us going.

In September 1998, our persistence paid off when lawmakers in New York, where I grew up, passed *Jeremy and Julia's Law*. This bill was named after our son and three-month-old Julia Haas, who choked to death in a licensed child care facility in Albany, the same year that Jeremy died. Julia's parents, Joe and Tina, are wonderful people who, like us, sacrificed their privacy to allow Julia's case to become public.

It took some last-minute intervention by Gov. George Pataki and the concerted efforts of the bill sponsors, Sen. William Larkin and Assemblyman John McEneny, to win passage of the bill, but history

was made. For the first time anywhere in the U.S., there would be criminal penalties for providers who intentionally misrepresented their child care activities. Not to be outdone, the Florida legislature overwhelmingly passed *Jeremy's Law* in 1999. Only one member voted against the bill. We now had the endorsement of two of the most populated states in the country. We knew it was time to knock on the doors of the U.S. Congress.

Back in the courtroom

Although numerous trial dates had been set and canceled over a three-year period, a trial date of March 7, 2000 was established. The case was being heard in the Broward County circuit court by Judge Ronald Rothschild. Prosecutor Dennis Siegle is not only a brilliant lawyer, but an extraordinarily caring person who deeply loves children. He is one of the best abuse and neglect prosecutors in the country. There was no doubt in our minds that this man was about to carve out new legal landscape with Jeremy's case.

Pretrial motions are legal tools that can make or break a case. The defense's arsenal includes motions to dismiss a case and motions to prevent a jury from hearing specific evidence. Since we were plowing new ground, we lived with the knowledge that the case could be thrown out on a legal technicality or that the judge could bar the jury from hearing about Jeremy's death, since the provider had not been charged with causing it. As a lawyer, I tried to reassure Julie that the criminal behavior of the provider was covered by the law on neglect.

Judge Rothschild approved two motions that were important to our case. First, the jury would know that Jeremy went to a licensed family child care home where state-mandated rules were intentionally and grossly violated. More importantly, the statute on neglect was ruled constitutional. Since this statute had never been tested before in this way, we had feared the judge might rule the statute unconstitutional, and the case would be dismissed.

The court also ruled that the jury could hear testimony by satellite transmission from the uncertified assistant, who had since divorced and moved back to Canada. (The provider had been fined \$700 by the

Immigration and Naturalization Service for hiring an illegal alien.)

But the legal process entailed many disappointments. The judge denied our motion for Jeremy's death to be brought into the evidence heard by the jury. He did, however, rule that evidence that Jeremy suffered "medical distress" could be entered into the record. As I sat in the back of the court room, my heart sank. This was ludicrous. Were we supposed to pretend that Jeremy didn't die? The entire process was taking a heavy toll on Julie and the rest of the family.

The provider had refused to make any public comments after her initial statements to investigators on the day Jeremy died. She didn't contest the suspension of her child care license or the County's \$200 fine. She didn't talk to the medical examiner. She never— not once— spoke with us. Although we understood this was her legal right, it would have meant a great deal to us for her to say she was sorry that Jeremy had died.

Naturally, the defense expressed confidence that the provider would be acquitted. Every time he spoke those words, it was a stab at our emotions. Using letters that I had written, in which I passionately pleaded for justice, the attorney attempted to convince the media that there was no real case against his client and that I had bullied the prosecutors into charging her. It was a desperate attempt to turn the case around. This last ditch maneuver raised our confidence that they realized the facts were clearly against them. My legal instincts told me the defense was getting ready to plea out.

Ready, set, don't go to trial

March 7, 2000 was scheduled as the date of jury selection, and we were anticipating that the trial would begin in the early afternoon. I received a call at about 9 a.m. from the prosecutor's office. He wanted to know how quickly we could get to the courthouse. The defense wanted to offer a plea to the judge.

We had conflicting emotions. Our sense of disappointment competed with our sense of relief that it finally might be over. The long legal process was nearing an end.

The media beat us to the courtroom. The network affiliates were

there, as was Court TV. This wasn't surprising since Jeremy's case was one of the most high-profile child care neglect cases in the country. It was big news that a plea agreement was in the works.

We brought Jeremy's ashes with us to the courtroom. We sat in the third row. The provider's family occupied the first few rows on the other side of the room. The provider walked in with her attorney. She was professionally attired and well-manicured.

Anticipating the slim possibility of a plea agreement before trial, the prosecutor had asked us to write down the thoughts we wanted to present to the judge. We hoped to accomplish three things with our testimony: we wanted the provider to know how much we loved Jeremy and how her criminal behavior devastated our lives; we wanted to expose every aspect of the provider's fraudulent scheme; and we wanted to make certain that, when she left the courtroom, the provider had a felony record that would preclude her from opening up another child care operation anywhere in the U.S.

The defense attorney read his plea offer. In exchange for her guilty plea, the provider was asking that she be sentenced to two years of house arrest; three years of probation; payment of restitution in the amount of \$2,500 and 150 hours of community service.

The judge invited us to address the court. Julie carried Jeremy's ashes to the podium with us, and we faced the judge. Given where she was sitting, it was impossible to make eye contact with the provider or her attorney. I began to speak for the entire Fiedelholtz family. The pain and devastation in my voice echoed off the walls as I spoke, full of emotion.

"This woman has destroyed our lives," I began. "We are here in body, but our souls have been ripped apart. Jeremy is gone. We are here for the rest of our nation's children. Our children are not second class citizens. They deserve special protection against greedy and selfish providers who endanger defenseless children."

We wanted jail time for the provider, I said, but, at the same time, we had come to the realization that house arrest was an acceptable alternative. The provider's three children needed their mother. If she had demonstrated this kind of compassion for Jeremy, I said, maybe our son still would be in our loving arms.

I finished my comments, and we returned to our seats. The judge then called for the defendant—the provider—to speak. But the defense attorney told him that the provider was distraught and unable to read her apology speech. He would read it for her. Even now, we thought, we were not going to get an apology from her. We held each other's hand and listened.

The defense attorney told the judge that the provider hadn't slept all weekend. *We haven't slept in 39 months*, we thought. The defense went on to talk about what a loving mom she is and how she just couldn't say no when parents approached her about caring for their children. *What do you mean*, we thought. *She wasn't supervising cattle*. These were defenseless infants and toddlers. Her statement rang hollow and insincere.

It must have sounded the same to the judge. He accepted the plea agreement, but did something that would put her out of the child care business forever. He did not withhold adjudication, which carries the same weight as conviction. She was an adjudicated felon, which rendered moot the judge's order banning her from operating a child care facility for five years. As a felon, her name will show up on a national criminal database. Most states will not allow someone with a felony conviction— especially for child neglect— to obtain licensure.

The hearing ended. The provider was fingerprinted and signed some paperwork.

We emerged from the courtroom to a flood of television camera lights. We were nearly blinded. I was interviewed countless times. Then, for some inexplicable reason, I blurted out the fact that Julie was pregnant again, with a baby due in September. Even our closest friends didn't know. It was my way of letting the world know that we were ready to move on with our lives and continue to rebuild our family.

4



Victory is in the Eye of the Beholder

Not a day goes by that we don't think about Jeremy. I still talk to his photos. Julie still cries when his name is mentioned, but she cries even more when it is avoided. Jeremy's reminders are everywhere. Jordan has the same yawn as Jeremy did. Our newborn son, Jonah, is the spitting image of him, but with long locks of hair.

Some may feel that justice was not served. But we are satisfied with the outcome. No child will ever again fall victim to the neglect of this provider. And millions of parents across the nation now approach child care more cautiously, with their eyes wide open. Only two states have enacted *Jeremy's Law*. But we'll never stop hoping. In 1999, Congressman Rick Lazio, from the second district of New York, introduced *Jeremy and Julia's Law* for consideration by Congress. While that bill never came up for a vote, it opened the door for discussion about the inclusion of financial incentives in the mammoth federal appropriations bill for the states to adopt the measure. Our efforts in that regard continue today.

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A Seven-Point Plan for Dealing with the Hidden Risks of Child Care

#1

Don't be lulled into a false sense of security just because the child care provider is licensed.

- A license, in and of itself, is no guarantee of quality child care in a safe environment. To meet the demand for child care, most states have made it very easy for anyone to obtain a child care license.
- Many states leave it up to each county to decide whether licensure should be required and, if so, what the licensure standards should be.
- Providers aren't required to pass a written or practical test to receive a license. Most course workbooks are general in nature and don't focus on infant care.

- Provider training courses nationwide range from only three hours to 30 hours.
- Licensure renewal is easily accomplished.
- Because providers across the nation generally are underpaid there's a perverse incentive for them to make a living wage by ignoring laws limiting the number of children they may care for.
- A recent study shows that parents generally are more knowledgeable about child care nurturing and safety techniques than licensed providers.
- In a recent survey, parents indicated that they had read information about placing sleeping infants on their backs and sides to avoid SIDS. Most providers polled had not.

For more specific information on child care training and licensure requirements, contact your local or state child care licensing department. For a comprehensive listing of regulations in each of the 50 states, contact The Children's Foundation at (202) 347-3300 or www.ChildrensFoundation.net.

#2

Watch for these red flags when interviewing providers.

- The provider wants to meet with you only when there are no children at the center.
- The provider insists that you enter through a particular door.
- The provider seems ignorant of the law.
- The provider seems annoyed that you are asking questions.
- The provider refuses to give you access to every room of the home or facility.
- There are signs of child care activities in unlicensed rooms. Look for portable cribs, diaper stations or toys that are not age appropriate for the owner's children.
- The provider talks more about money that she does about her experience with children.

- The provider seems to be trying to “oversell” her professionalism.
- The provider reacts in a negative way to the idea of unannounced visits.
- The provider refuses to give you the names and telephone numbers of all current parents so that you can check her references.
- The provider refuses to give you the names and telephone numbers of parents who have withdrawn their children in the last six months.

Pay attention to your intuition. Most of the other parents we spoke with after Jeremy’s death who had experienced a tragedy like ours knew “something” wasn’t quite right, but doubted their feelings and mistakenly rationalized them. Don’t be overly impressed with the surroundings. Your foremost concern should be whether the provider is knowledgeable of child care rules and regulations and whether she will provide quality care to your child.

#3

Always verify information with the licensing agency.

- Go to the licensing office in person and review the provider’s file.
- Categorize the information you receive from the provider by topic: laws, certification, licensure and facility inspections.
- Don’t share the information you received from the provider with licensing officials. Ask the licensing officials the same questions you asked the provider and compare the two responses. **If the information is inconsistent, alert the licensing officials.**
- When asking the licensing authority for information, be very specific. Ask for a list of all fully certified assistants at the home or facility. The provider’s assistant should be on that list.
- Ask whether any complaints are on file. Many parents don’t want to rock the boat and don’t file an official complaint. But some do.
- Ask whether the provider or anyone working or living on the

premises has a criminal record.

If you aren't satisfied with the information you receive from the licensing authority, conduct your own criminal background check. In Florida, you can accomplish this by contacting the Florida Department of Law Enforcement Name Search Unit in Tallahassee. There is a fee for this service. Another alternative is conducting an Internet search for background investigation websites.

#4

Put your child's welfare first.

Many parents are either too busy or too concerned about losing their child care provider to make unannounced visits or ask tough questions. Don't fall into that trap. Your child's life may depend on it.

Ask questions that can help you to get to know the caregiver, such as:

- What did she do before becoming a child care provider?
- Does she have any special educational background?
- What led her to choose this profession?
- What does she most enjoy— and like the least— about child care?
- What types of crises and emergencies has she handled in the past?
- What is her method of discipline?
- What would she do if someone unfamiliar came to the door?
- How does she handle a crying baby or a misbehaving child?
- What is the procedure if she becomes ill?
- What types of daily activities and programs are planned for the children?
- How does she keep parents' apprised of their child's progress?
- Is she knowledgeable of community resources that can help her give the best possible services to your child?
- What type of emergency procedures does she have in place for an unconscious or choking child, allergic reactions, fire or natural threats like a tornado?
- What is her procedure for calling parents if a child becomes

- fussy or sick?
- Does she know how to safely nap an infant?

A checklist is available by calling the Florida's Children's Forum Resource and Referral Network toll-free at (888) 352-4453.

#5

Communicate with other parents.

Build trust with the other parents at the child care center or family child care home. Open communication between parents is essential in the event problems arise— or to avoid problems altogether.

#6

Become a child care advocate.

Identify organizations in your area that represent children's interests before the state legislature or the Congress. Support those organizations with your time or money.

#7

Press authorities to enact tougher licensing and inspection standards

Press state, federal and local lawmakers to enact tougher standards for child care providers. At the same time, make them aware of the issues important to quality child care providers: salary, benefits, and educational opportunities. Many child care providers earn so little that they are living at or below the federal poverty level.

A Seven-Point Plan

\$10.00