

Update 2011:



# Fetal and Infant Mortality Review



# NFIMR

**NFIMR is a cooperative agreement between the American College of Obstetricians and Gynecologists and HRSA's Maternal and Child Health Bureau (Grant # U08MC000136)**

**Since 1990, NFIMR has been the designated resource center working with states and communities to develop fetal and infant mortality review (FIMR) programs**

**For more information about the FIMR process, call (202) 863-2587, e-mail us at [NFIMR@ACOG.org](mailto:NFIMR@ACOG.org), or visit us at [www.nfimr.org](http://www.nfimr.org)**

# THE FIMR PROCESS

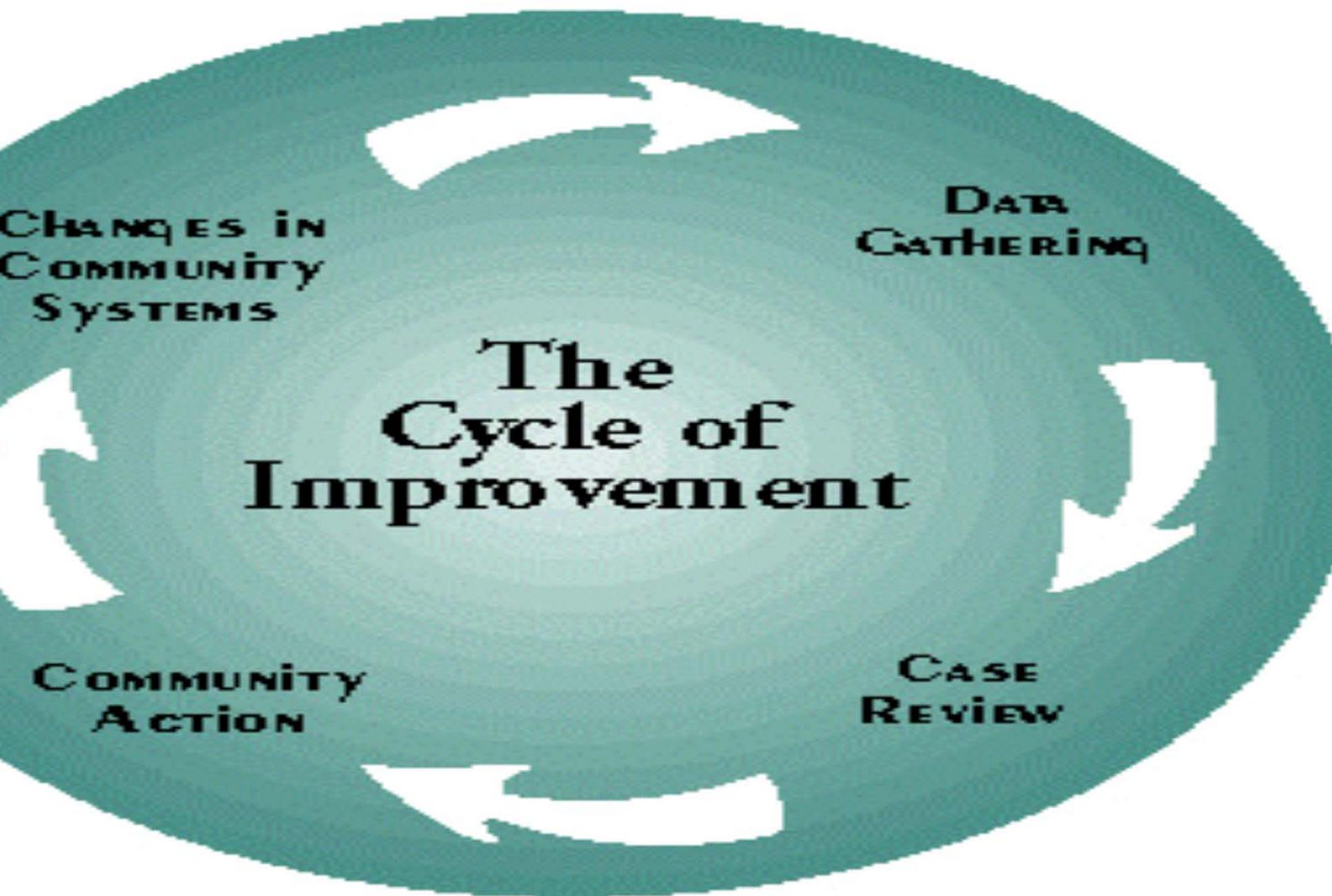
CHANGES IN  
COMMUNITY  
SYSTEMS

DATA  
GATHERING

The  
Cycle of  
Improvement

COMMUNITY  
ACTION

CASE  
REVIEW



# Conceptional Threads



- Confidentiality is key!
- FIMR is an inclusive community coalition
- FIMR focuses on systems of care - finding gaps
- FIMR is action oriented

# Unique Elements



- FIMR gathers extensive and comprehensive medical and related information about the health of the mother to include in the review
- FIMR includes and highly values input from mothers who have lost infant through the maternal interview
- FIMR includes comprehensive representation of women's providers, agencies and institutions as well as infant health on the review team

# Unique Elements



As the health care system for women and infants changes, expands and contracts, FIMR is a most timely early warning system about quality of care issues.



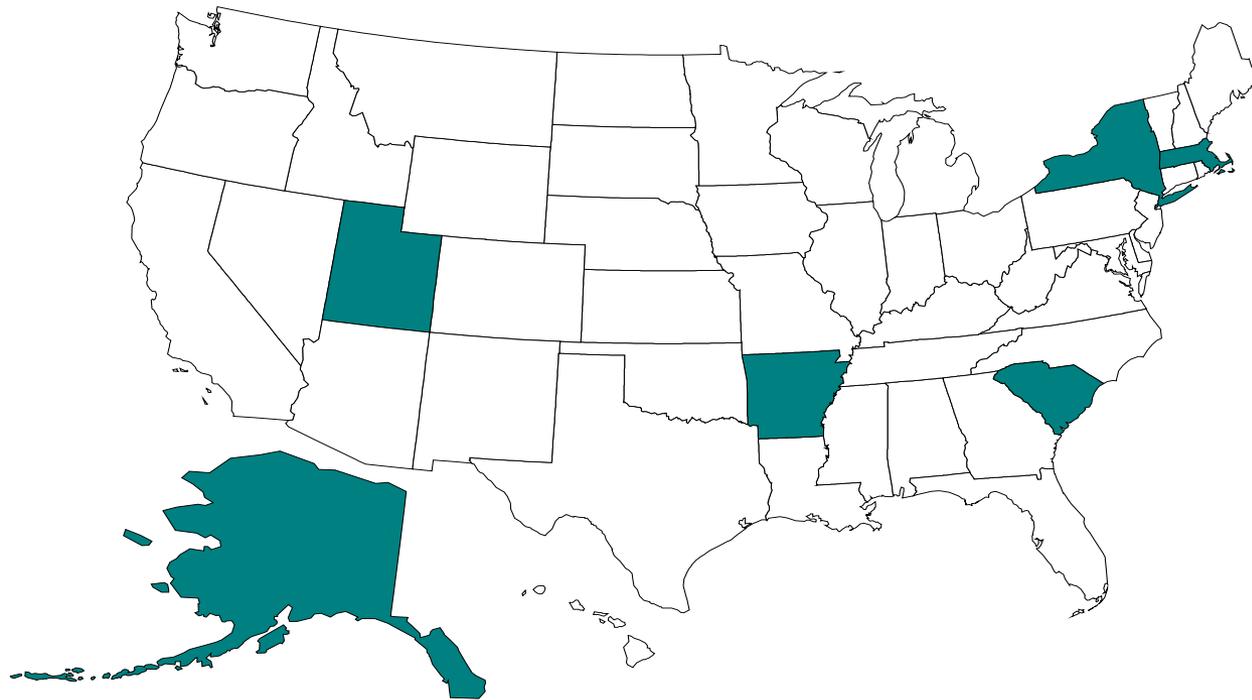
*“None of the studies made by the Bureau attempt to approach infant mortality as a medical question; they merely set down the co-existence of certain conditions of life with varying infant mortality rates. They are concerned with economic, social, civic and family conditions surrounding young babies.”*

Julia Lathrop

Paper read at APHA December 9, 1918

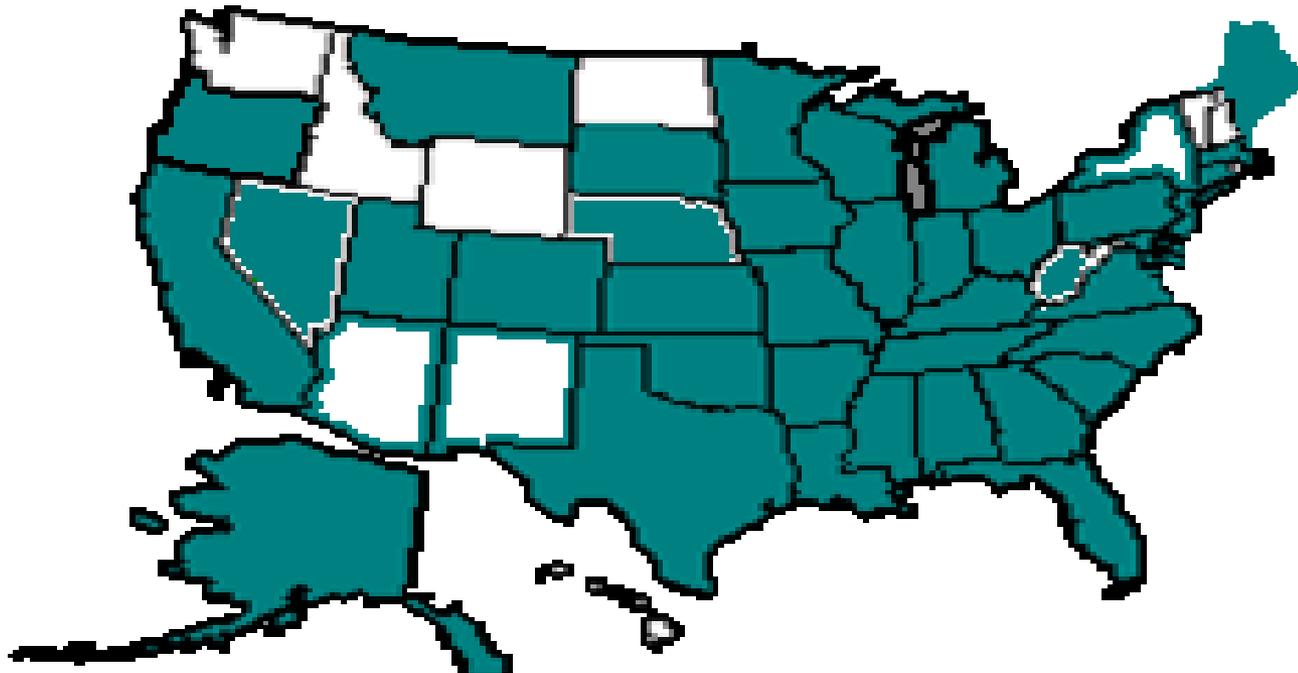


# FIMR 1988





# FIMR 2011





# Johns Hopkins Evaluation of FIMR

“[The FIMR program] ...also creates a setting and a set of concrete activities wherein everyone has a contribution to make and everyone learns from the process. The case study findings indicate that because the FIMR process extends beyond problem identification to promote problem solutions, observable changes in practice and programs occur; ‘things get fixed’ and participants are inspired to take further action.”

Source: Women's and Children's Health Policy Center, Johns Hopkins University. The evaluation of FIMR programs nationwide: early findings. [Online, 2002]. <http://www.jhsph.edu/wchpc/pub/Brochure.pdf> !



# Johns Hopkins Evaluation

FIMR is an evidenced based perinatal systems initiative...

The final FIMR evaluation report was published as a *MCH Journal* supplement (12/04) and titled “**Fetal and Infant Mortality Review: Historical Foundations, Evaluation Findings and Future Directions.**” Both the preliminary and the final reports can be viewed on the Johns Hopkins University website at [www.jhshp.edu/wchpc](http://www.jhshp.edu/wchpc)



## *The Cultural and Linguistic Competence Organizational Assessment Instrument for FIMR Programs*

(CLCOA-FIMR) was developed by the National Center for Cultural Competence (NCCC) in collaboration with NFIMR.

While there are many tools and instruments to assess organizational cultural competence, none has been specifically developed to address the unique issues of local programs such as Fetal Infant Mortality Review (FIMR) teams.

# NFIMR Web Site www.nfimr.org



NFIMR | Home - Windows Internet Explorer

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N A T I O N A L  
**NFIMR**  
FETAL- INFANT MORTALITY REVIEW PROGRAM

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Making a difference in the community

The National Fetal and Infant Mortality Review Program (NFIMR) is a collaborative effort between the American College of Obstetricians and Gynecologists and the Maternal and Child Health Bureau, Health Resources and Services Administration.

What's Happening

[FIMR-HIV Prevention Methodology Webinar on August 5, 2011](#)  
July 25, 2011  
On Friday, August 5th, there will be an informational webinar on the FIMR/HIV Prevention Methodology. The webinar will describe the FIMR-HIV Prevention Methodology and explore how it can be implemented in your jurisdiction.

STAY INFORMED  
Sign up to receive monthly e-updates and connect with others working in local FIMR programs.  
Subscribe Now

http://www.nfimr.org/home

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# Adapting FIMR – Did you know?

One of the three main objectives of the NFIMR program is to adapt FIMR to other types of MCH morbidity and mortality sentinel events

Examples of modification of FIMR include FL's Pregnancy Related Mortality Review (PAMR), Baltimore's congenital syphilis review, NFIMR's FIMR/FASD review, LA's Katrina Aftermath



## Now: FIMR/HIV

Interventions exist to eliminate perinatal HIV transmission in the United States, but many infants still become HIV positive due to missed prevention opportunities

Like infant mortality, perinatal HIV transmission is an MCH sentinel event warranting investigation and action through the CQI process of FIMR

Highly effective service systems, robust community resources and comprehensive interventions must be put in place to prevent perinatal HIV transmission.



# FIMR/HIV HX

- From 2005 to the present, national partners- CDC, ACOG, MCHB, NFIMR and CityMatCH have worked together to adapt FIMR to review of cases where HIV transmission is possible - Dr Ellen Hutchins (MCHB retired) was instrumental in linking w/ CDC and encouraging NFIMR and ACOG participation
- CDC funded pilot of methodology: 06-08 in Jacksonville, FL, Detroit, MI and Baton Rouge, LA
- Second funding cycle 09-11: States of Illinois and Michigan, Philadelphia, PA, Chester County PA, Newark, NJ, District of Columbia, Baltimore, MD, Indianapolis, IN, New Orleans, LA
- July 2011 CDC FOA – FIMR/HIV required for CDC’s 60 perinatal programs

NFIMR



Moving Forward 2010 – 2015 Cooperative Agreement



**NFIMR Conference June 2012!**



## NFIMR Special Objectives

- Describing, expanding and clarifying FIMR's role in reducing racial disparities
- Partnering more closely w/ Healthy Start
- Describing and clarifying how FIMR can incorporate Dr Lu's Life Course Model into its framework

# Life Course Initiative

A 12-Point Plan to Close the Black-White Gap in Birth Outcomes:



- **Improving Healthcare for African American Women**
- **1. Provide Care to Women with Prior Adverse Pregnancy Outcomes.\*\***
- **2. Increase Access to Preconception Care for African American Women.**
- **3. Improve the Quality of Prenatal Care for African American Women.\*\***
- **4. Expand Healthcare Access over the Life Course for African American Women.**
- **Strengthening African American Families and Communities**
- **5. Strengthen Father Involvement in African American Families.**
- **6. Enhance Systems Coordination and Integration for Family Support Services.\*\***
- **7. Create Reproductive Social Capital in African American Communities.**
- **8. Invest in Community Building and Urban Renewal.**
- **Addressing Social and Economic Inequities**
- **9. Close the Education Gap.**
- **10. Reduce Poverty among African American Families.**
- **11. Support Working Mothers and Families.**
- **12. Undo Racism\*\***

Source: Lu MC, Kotelchuck M, Hogan V, Jones L, Wright K, Halfon N. Closing the black-white gap in birth outcomes: A life-course approach. *Ethn Dis.* 2010;20(1 Suppl 2):S62-76.

*About the Life Course Initiative* The mission of the Life Course Initiative is to reduce disparities in birth outcomes and change the health of the next generation in Contra Costa County by achieving health equity, optimizing reproductive potential, and shifting the paradigm of the planning, delivery, and evaluation of maternal, child, and adolescent health services. This 15-year initiative began in 005. For more information,

# FIMR Life Course



## **1. Provide Interconception Care to Women with Prior Adverse Pregnancy Outcomes.**

**Background:** A cornerstone of the FIMR process is a home interview with the bereaved family, most often the mother. Thus, the FIMR program already routinely comes in contact with high risk women who have had a poor pregnancy outcome and referrals are made for services, if the mother agrees.

**Action:** If the mother agrees, the FIMR home visitor can directly facilitate referrals that could address interconceptional risk factors (pregnancy intervals, medical conditions such as diabetes, hypertension, lupus, nutrition issues, substance/alcohol abuse, psychosocial problems, family planning and other issues) that impact the mother's health and may affect a future pregnancy.

*Life Course Initiative*  
A 12-Point Plan  
continued.....



**Other ways FIMRs institutionalize an interconceptional referral process:**

- **Develop labor and delivery protocols for referrals for women who have had poor pregnancy outcomes (this action is one already being taken by some FIMRs) - if a mother loses the infant, the system loses the mom**
- **Develop comprehensive outreach and services for women who have poor pregnancy outcomes (Ex Project Magnolia from Jacksonville FL HM/HB FIMR)**

**Suggestion**

- **Add the federal new home visiting protocols for assessing women with adverse pregnancy outcome**



## 12. Undo racism

This is how FIMR might contribute:

- Listen to mothers who accessed the system
- Ensure that the FIMR team interactions and deliberations are culturally competent (NCCC tool)
- Be more aware of issues related to institutional racism and take action to correct any that identified

Thank you!

