



## **Role of the Fetal Infant Mortality Case Review Team (CRT) Member**

### **Why FIMR?**

Unique among all health outcomes, the death of an infant has always been viewed as a sentinel event that serves as a measure of a community's overall health, social, and economic well-being. Local FIMR programs are learning how and why our babies are dying, and making recommendation to improve our systems of care and resources for infants, women, and families.

### **What does the FIMR team do?**

The FIMR team reviews and analyzes de-identified cases of infant deaths in the community. Data is obtained through an interview with the mother/family, medical records, WIC, social service agencies, and birth and death certificates. The purpose of the review is to understand and identify those factors that contributed to the death, plan interventions to address the risks, and work toward preventing deaths in the future. FIMR **does not** assign blame for the death or seek to find fault.

### **Who belongs to the FIMR team?**

Successful FIMR teams have 10 – 20 members from diverse professional and consumer backgrounds. The broader the representation on the FIMR team, the more relevant the proposed interventions will be to the community. Professionals and agencies on the review team should characterize the ethnic and racial make-up of the community, and represent agencies that provide services and resources to women, infants, and families. Minimally, the team should include the local health department, primary and tertiary care institutions, obstetric and pediatric providers, hospital administrators, Medicaid supervisors, WIC program nutritionists, family planning providers, health educators, community health workers, and representatives of drug treatment centers. Others representatives might include minority rights advocates, faith based community members, Chamber of Commerce health committee members, and local SIDS coalitions.

### **What are the responsibilities of a FIMR team member?**

- Attend monthly meetings, lasting 1 ½ - 2 hours
- Review the prepared cases and participate in discussions relevant to the local determinants of infant mortality
- Act cooperatively with all team members, listen respectfully to others opinions and ideas and value each member for the talents and skills they bring to the group.

- Maintain confidentiality, and pledge not to divulge any information that may be sensitive or identifiable on a specific case
- Work to form recommendation for changes in practice, programs, or policy based on case review findings.
- Take aggregate information and relevant recommendations back to your own agency or the community at large when appropriate.

*“Infant Mortality is the most sensitive index we possess of social welfare”.*

-Julia Lathrop, Children’s Bureau, 1913