

**HAPPY HOLIDAYS**  
from the new  
**NATIONAL CENTER FOR FATALITY REVIEWS**

December 22, 2015

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## Greetings from the Director

by Teri Covington

Greetings Friends and Colleagues,

We began a new era in 2015, as our Center expanded to include both Child Death Review and Fetal and Infant Mortality Review. Our major funder, the Maternal and Child Health Bureau at HRSA, combined its funding in order to "facilitate the strengths of each of these death review processes, thus improving both systems of review and building efficiencies to



better improve systems of care for mothers, infants and children." The Center and HRSA are committed to preserving both processes while also working to build collaboration between the two. We are looking forward to at least three years of working with you to provide technical assistance, training, data support and resources to help you conduct high quality reviews and translate your findings into action to prevent deaths and keep children safe and healthy. MPHI is working closely with ACOG, especially for FIMR activities. We are also fortunate to bring in new partners, such as the Children's Health Alliance of Wisconsin, to work with the National Center staff in our Okemos office: Linda Potter, Heather Dykstra, Esther Shaw, and Nanette Fitzgerald. This coming year, we will be busy expanding and developing the FIMR side of our National Death Review Case Reporting System so that FIMR teams can utilize it for their FIMR data; working to help you improve the quality of your data; expanding efforts to help you translate reviews into prevention; and working with national partners to use your data to influence national policy and programs.

This inaugural newsletter updates you on our expanded and wonderful staff, exciting news from our partners, and updates on transitions of CDR and FIMR coordinators. In our next issue, we will begin highlighting your work in prevention. Please share your success stories with us so that they can be broadly shared.

Our work at the Center is a reflection of your work. I am constantly in awe of your commitment, hard work, and deep care for the families and for the children whose deaths you review. I am so looking forward to an exciting New Year working for you and your National Center for Fatality Reviews. Happy holidays and Happy New Year!

Teri

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## FIMR and CDR: new partners

by Jodi Shaefer



I am directing the FIMR activities at the National Center and am still based at ACOG. Entering into a partnership with MPHI to create the new Center opens new and exciting possibilities, and we are particularly excited to expand the data capabilities of local FIMR programs to track their successes and streamline data abstraction. We will collaborate with Teri on overall Center direction, provide technical assistance for FIMR-related activities and training, collaborate with national partners, and direct work groups

service delivery. The FIMR maternal/family interview along with community ownership of the gaps are essential to effective prevention strategies.

I will be joined in this work by Hanan Abdulahi, who came to ACOG this month. She has a Master's in public policy, centered on social policy for women and families and on health disparities. In her role as Program specialist, she will provide technical and training assistance to state/local FIMR programs; expand our social media presence, and coordinate the racial



on racial disparities and the FIMR database. I look forward to the possibilities of the new Center strengthening and providing a structure for this process.

I have a Ph.D. in nursing with clinical experience in pediatrics, the NICU, public health, and directing a statewide infant and child death program. I have been director of NFIMR since 2014. My passion is working with FIMR programs to close gaps in

disparities work group.

We are currently offering FIMR training around the country. We'll be in Panama City FL on February 4, 2016, providing basic information about implementing FIMR. Contact us if you would like a program in your area. We also encourage any Healthy Start program to call us if we can provide assistance regarding your collaboration with the local FIMR program. We are committed to supporting your efforts and are available for consultation.

### **Attention: CDR and FIMR Coordinators**

The National Center is sending surveys to CDR and FIMR coordinators asking for updated information about their programs and about what services they want and need from the Center. CDR surveys have been sent and FIMR surveys will be sent shortly. Please complete these and return them as soon as you can. Thank you!

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#### **INITIATIVE TO IMPROVE CASE REPORTING SYSTEM DATA QUALITY**

By Patti Schnitzer



I am an epidemiologist and a former associate professor at the University of Missouri. My research has focused on the epidemiology and prevention of childhood injuries, with a special interest in injuries from abuse and neglect of young children. I have 16+ years of experience working with child death review programs and data, including analyses of Missouri CDR data and several analyses of aggregate data from multiple states using the Child Death Review-Case Reporting System.

The National Center for Fatality Reviews has contracted with me to lead its data

#### **BUILDING COLLABORATION BETWEEN CDR AND FIMR**

By Abby Collier, WI Children's Health Alliance

In 2008 I became the coordinator of Wisconsin's child death review program and have led it from a handful of teams to its current 57 teams covering more than 90 percent of



Wisconsin's population. In 2010, our state health department charged the Children's Health Alliance (CHA) with implementing a FIMR system that collaborates with our CDR system. Since then, we have grown from 2 FIMR teams to eight.

The National Center for Fatality Reviews has contracted with CHA to lead its CDR and FIMR collaboration initiative. There are many ways to collaborate between

quality initiative, the goal of which is to improve the completeness and consistency of CDR-CRS data. A Data Quality Workgroup of CDR coordinators is currently providing input into selecting which among the 2,600 CDR-CRS variables we will prioritize for improvement - we can't focus on all of them! Once variables are identified, I will provide electronic training and written guidance to all participating states on how to improve data quality. I will also provide intensive technical assistance and support to 5 states this year and more in the Center's second and third years. To measure progress, we will develop a data quality summary for each state showing progress toward completeness and consistency of the priority variables. I will also create, launch and analyze a CDR-CRS user's survey so we better understand the opportunities and challenges using the CDR-CRS brings to CDR.

I am excited about this opportunity to help make the CDR-CRS data quality the best that it can be. I look forward to working with as many states as possible.

CDR and FIMR, and we are working with state and local programs to identify collaboration methods that meet their needs. A workgroup of CDR and FIMR leaders is crafting models of collaboration based on current practices in the country and will develop written guidance on collaboration for CDR and FIMR programs. I will also provide intensive technical assistance to at least 5 states interested in developing or enhancing collaboration between CDR and FIMR. Additional states will receive technical assistance in years 2 and 3 of the Center's current grant.

I am extremely passionate about CDR and FIMR collaboration. After experiencing the positive benefits of collaboration in Wisconsin, I am really excited to work with other states and local teams on this topic. I also have a strong interest in self-care for death review professionals, whose work is very challenging. My goal is to help individuals and teams develop healthy coping skills so they can continue to conduct reviews in a meaningful and healthy manner.

## AAP creates new CDR Section

In 2014, the American Academy of Pediatrics approved formation of a Provisional Section on Child Death Review and Prevention. AAP sections are groups of members who share a particular area of interest that undertake initiatives that advance the relevant area. Recently, individuals interested in the new Section gathered for a workshop and lunch at the AAP National Conference. Teri Covington attended and was excited by the number of members in attendance and by their enthusiasm: "We are so impressed by and grateful for the hard work of the AAP and a number of long-time pediatric champions of Child Death Review to make the CDR section a reality. The new section is an important step in recognition of the importance of CDR to keeping kids alive and of the importance of pediatricians to the process."

The National Center and AAP hope that the new section will prompt more pediatricians to become active with Child Death Review, and we encourage you to actively promote the section and to use its existence as a tool to recruit pediatricians to your teams. In an exciting development, the AAP recently approved the request of a Kentucky pediatrician for continuing education credits for her work on the Kentucky CDR team - another terrific way you can promote the section to pediatricians. In early

2016 the section is going to develop a process for other pediatricians to do likewise. Another incentive is that for the first couple of years membership in the section is free. Individuals who would like to join should contact Florence Rivera at AAP, frivera@aap.org.

## UPCOMING EVENTS

### Request from the AAP

To promote the new CDR Section, AAP has asked us to identify well-functioning CDR teams with strong pediatrician participation and support. If you believe your team matches that description, please nominate yourself, and we will work with you to approach the AAP.

CDC SUID Categorization Webinar, Feb. 4, 2016, 2-3 pm EST. Opportunity to learn from CDC how it categorizes sudden unexpected infant deaths. **Register here.** FIMR training, Panama City FL, Feb. 4, 2016

National Center Advisory Committee meeting, DC, March 15, 2016

New England Regional CDR meeting, Hartford CT, June 9-10, 2016

Dates/locations for additional CDR Regional meetings will be selected shortly; **check back on our website.**

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## COLLABORATING WITH NATIONAL PARTNERS

### Substance Abuse and Mental Health Services Administration (SAMHSA)

The suicide prevention program at SAMHSA has expressed a keen interest in partnering with the National Center to promote participation of state and local suicide prevention professionals on child death review teams and to help states use CDR data in developing state and local suicide prevention plans. Plans are in the works to develop guidelines to help state Garrett Lee Smith grantees partner with child death review. More information will be forthcoming in the next months.

### Consumer Product Safety Commission (CPSC)

CPSC recognizes the value of child death review to alert and inform them of deaths related to products. Linda Potter testified about the National CDR Case Reporting System at a CPSC hearing to explore ways to improve CPSC's ability to use non-traditional data sources to identify unsafe products. We are currently discussing with CPSC opportunities for its field investigators to participate in CDR. CPSC is also interested in partnering with some state CDR programs to use CDR data to help identify and initiate CPSC field investigations and to determine whether CDR data identifies cases CPSC is not aware of.

### Association of Maternal & Child Health Programs (AMCHP)

The Center recently had an invigorating meeting with AMCHP's Maternal Mortality Project staff. As AMCHP's funding for its Every Mother Initiative comes to a close, AMCHP is looking to the National Center's tools and materials about child death review and is excited about possibilities of working together to build collaboration between the Center and maternal mortality reviews. If you're involved in MMR in your state and want to be part of this process, let us know. More to come in 2016....

## JSI Healthy Start EPIC Center

The Center is working with the JSI Healthy Start EPIC Center to provide technical assistance to local Healthy Start programs about developing and working with FIMR programs.

## Collaborative Improvement & Innovation Network (CoIIN)

The Center is also working on the Infant Mortality CoIIN and the Injury Prevention CoIIN.

### Welcome to new Child Death Review and FIMR Coordinators

We are always sad to see state coordinators leave. In this job we are fortunate to come to know each of you and to value and admire the work you do. So it is in that spirit that we bid both farewell to coordinators who left in 2015, and welcome the coordinators who replaced them:

<i>Moving on</i>	<i>Arriving</i>
<b>FIMR/CDR:</b>	
Maryland: Joan Patterson	Richa Rinade (CDR)
Alaska: Michael Valiquette	Sam Hyde
Indiana:	Gretchen Martin (new to FIMR)
Louisiana:	Robin Gruenfeld
<b>CDR:</b>	
Kansas: Angela Nordhus	Sara Hortenstine
Maine: John Jacobs	Jan Bielau-Nivus
Hawaii: Terri Byers	Helene Kaiwi
New York: John Clinton	Rick Charbonneau
North Carolina: Lisa Mayhew	Nicole Miller
West Virginia: Trish McKay	Maggie Molitor
Louisiana: Denver Dinsick	Cara Bergo
Mississippi: Juanita Graham	Leigh Campbell
Montana: Lori Rowe	Kari Tutwiler
Tennessee: Ashley Brooks	

### UPDATE ON CASE REPORTING SYSTEM DATABASE

In June, the National Center launched Version 4.0 of its Case Reporting System, which is

now used by 44 (soon to be 45) states. The new version includes a number of changes, but the primary change is the addition of a module for the Sudden Death in the Young Registry. And now that CDR and FIMR are partners, a work group of FIMR coordinators from around the country is selecting FIMR questions for addition to the CRS. It is expected that Version 5.0 with FIMR questions and other changes will launch in early 2017.

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