



Planning for High-Volume Fatality Reviews

At times, fatality review teams may be asked to conduct large-scale review meetings where a high number of cases are reviewed in a short period of time. **The following guidance is intended to help your team successfully review a large number of cases at one meeting.** While this is not a practice the National Center ordinarily recommends, there are unusual times that warrant a responsive public health approach.

There are two models for holding high volume reviews. The first model is to schedule a daylong or multiday review meeting. This involves your core team coming together for an extended period to review cases. The second model is to bring together a large group of partners who can conduct separate reviews simultaneously. This requires multiple people from each agency attend the review meeting. The partners are then broken into mini-review teams where their expertise is matched with cases to review.

Things to consider before conducting a high-volume review:

- Is it possible to instead schedule a few extra regular meetings to stay current on reviews?
- Is there enough staff capacity to pull together case information and create case summaries for large number of reviews at one time?
- Are there enough partners engaged in fatality review to hold a high-volume review?
- Do team members have enough capacity to focus on a large number of fatality reviews? Many agencies and individuals may currently have many competing priorities.
- Can the meeting take place in meeting space that allows for natural light and movement?

If your team decides to conduct a high-volume review, please consider these points whenever possible:

- Schedule the meeting well in advance so that team members have the opportunity to make any adjustments necessary to accommodate attending the meeting.
- Schedule the meeting dates for a “slow” period of work. For example, if the beginning of the work week is difficult for team members, consider holding the meeting at the end of the week.
- If you are scheduling a review meeting where cases will be reviewed simultaneously, ensure that multiple people from each agency are able to attend the meeting.
- Prepare a case file for each death. The case file should contain reports from key agencies such as the coroner/medical examiner, law enforcement, child welfare, healthcare, public health and vital records.
- Prepare a summary for each case. The summary should contain key demographics, a short description of each agency’s findings related to the death, and any other relevant information. Consider creating timelines for cases that involve many agencies. View resources on creating a

de-identified case summary at <https://www.ncfrp.org/wp-content/uploads/NCRPCD-Docs/Creating-the-de-identified-case-summary-for-FIMR.pdf>.

- Enter as much data as possible into the National Fatality Review-Case Reporting System (NFR-CRS) before the meeting. Highlight any key missing fields so that team members can complete them and discuss them during the review. Utilize the National Center’s list of priority variables as a guide. View the Data Quality Initiative. <https://www.ncfrp.org/resources/data-quality-initiative/>
- Designate someone to take notes on the missing data elements. If you are using the model where cases are reviewed simultaneously, there will need to be someone taking notes in each group.
- Group cases into categories for the review discussion, e.g., drownings, motor vehicle crashes, natural deaths.
- Identify a case finding, both positive and negative, for each case reviewed. Document these findings in NFR-CRS in order to use them for prevention work.

During times of uncertainty, it is especially important to practice self-care for yourself, your organization, and your team. The resources below are a good starting place for self-care tools.

- National Center Guidance on Vicarious Trauma: <https://bit.ly/2vs6Bgo>
- National Center tool kit on Vicarious Trauma: <https://bit.ly/2IPYU6O>

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