BENEFITS OF FIMR:

- Empowers and inspires communities to create local solutions
- Identifies opportunities for interagency partnerships
- Facilitates the grieving process for families and connects them with support agencies
- Enhances understanding of community needs by presenting the whole picture
- Expands available services through cooperative programming and joint funding
- Improves existing service delivery system and the quality of services provided by individual professionals, health and related social service agencies, community-based organizations and local health units
- Reduces gaps in care
- Ultimately, reduces fetal and infant mortality

FIMR IS:

- A demonstrated method of gathering critical information not addressed by other mortality and morbidity reviews
- A warning system that describes changes in health care delivery systems
- A means of implementing core public health functions, such as assessment, continuous quality assurance and policy development
- An in-depth process that uncovers the patterns and causes associated with fetal and infant death
- A collaborative, action-oriented, communitybased approach that leads to improved services and community resources for childbearing families
- An opportunity for public/private partnerships.

FIMR IS NOT:

- A research study
- An institutional review
- A substitute for existing mortality and morbidity reviews
- A quick-fix solution to a complex problem
- A mechanism for assigning blame or responsibility for any death.

"FIMR fits with the core public health functions of assessment and assurance, looking at what's going on, trying to find the most appropriate strategies to fit the community problems, and implementing them in an ongoing process to effect community change."

> — Ann M. Koontz, Former National FIMR Project Officer

ALABAMA

FETAL INFANT MORTALITY REVIEW

A Guide to the Fetal Infant Mortality Review (FIMR) Program



The Alabama Department of Public Health would like to acknowledge the Contra Costa FIMR Program and the Virginia FIMR Program in developing this brochure.

The National FIMR is a collaborative effort the American College of Obstetricians and Gynecologists (ACOG) and the federal Maternal and Child Health Bureau (MCHB). The Fetal Infant Mortality Review (FIMR) Program looks at a variety of factors that affect the health of the mother, fetus and infant to learn more about how to reduce fetal and infant mortality.

The purpose of the Alabama FIMR Program is to understand how a wide array of social, economic, health, educational, environmental and safety issues relate to infant loss on a local level. The goal is to enhance the health and well-being of women, infants and their families through improved community resources and service delivery systems.

HOW FIMR WORKS:

The FIMR process begins when the program is notified that a fetal or infant death has occurred. The FIMR Program receives information from hospitals, clinics, the Alabama Center for Health Statistics, case management programs and other perinatal providers.

Records Review

The FIMR Program reviews information from a variety of sources, including medical records, birth and death certificates, coroner's reports, and records from health and social service agencies.

Maternal Interview

The maternal interview is the heart of the FIMR Program and makes FIMR unique among other case review processes. The interview allows the mother's voice to be heard and provides her with the opportunity to share her experiences before, during and after pregnancy.

FIMR staff contact parents through mail, phone calls and home visits after the pregnancy loss or infant death. Staff provide information, and referrals to other services that assist parents and families.

THE FIMR PROCESS



Case Review

A case summary is prepared using information from the maternal interview and records review. The summary is deidentified to assure the confidentiality of patients, providers and health care facilities. The case summary is then presented to the Case Review Team (CRT) for review. This team represents a range of professional organizations and public and private agencies that provide services and resources for women, infants and families. The CRT reviews the summaries, examines the circumstances related to each case and identifies social, economic, health, educational, environmental, and safety factors associated with those deaths. The CRT then identifies problems that require change and makes recommendations for how to improve policies and services that affect families.

Community Action/Interventions

The next step in the FIMR process is to turn CRT recommendations into action. Issue-specific task force groups are assembled to implement interventions designed to address the problems identified by the CRT. Community Action Team members include those who are in a position to direct change at the community level.



Q: How does FIMR differ from other case review programs?

A: FIMR is the only process that:

- involves a multi-disciplinary team,
- invites community participation,
- interviews the mother, and
- reviews de-identified cases

Q: What is FIMR's relationship to other programs?

A: FIMR's comprehensive approach complements all other efforts to understand and quantify fetal and infant deaths, and invites collaboration with many programs dealing with similar issues.

Q: How do I refer a client to FIMR?

A: You can refer clients who have experienced a pregnancy loss at 20 weeks gestation or greater or the death of an infant up to 1 year old. To refer a client to FIMR, call the FIMR Program at 334-206-2928.

