Kalamazoo County Fetal Infant Mortality Review (FIMR) Recommendations

FIMR is a community-level, interdisciplinary continuous quality improvement (CQI) process for identifying root causes and preventing future deaths.

Infant Morality is the tip of the iceberg ...

Across the globe and the nation, Infant Mortality (the death of a baby before its first birthday, is a "white glove" test of a community's health. High infant mortality rates and reasons babies are dying is considered the tip of the iceberg for two main reasons:

- Problems that are harming babies are problems that are affecting the entire community in less visible ways;
- For every infant that dies, there are many times more infants who survive but at disadvantages that affect them throughout their lives, keeping them behind every step of the way.

Recommendation Categories

- 63% Strengthen Provider & Patient Communication
- 50% Care Coordination between Medical & Community Systems, especially for Low-Income and Women of Color
- 44% Health Promotion in Clinical & Community Settings
- 37% Family Centered Care
- 30% Address Social Risk
- 22% Bereavement Support

Strengthen Provider & Patient Communication

- Readiness to hear in order to assist patients, educate providers, and implement processes
- Develop processes for checking patient understanding, especially bad news and assessing options
- Provider skill development for shared decision-making
- Ensure consistency of information across hospital shifts and inter-professional, multi-disciplinary teams
- Create processes for communicating to patients during crisis situations
- Institute repetitive messaging for key and emotional medical issues
- · Offer second opinions and consults
- Use visuals and multidisciplinary teams to help patients understand
- Ensure processes of documentation for ease of usage, like important info on first page

Care Coordination

- Implement case management and process for navigation of services
- Automate linkage from early pregnancy testing sites like Emergency Departments to prenatal care
- Automate follow-up to close loop on referrals from early pregnancy testing sites
- · Increase community outreach for prenatal care
- Streamline service delivery by making primary care utilization as easy as possible for the patient
- Maximize utilization of existing resources
- Offer easy pharmacology consult about medication interactions and dosage for providers
- Map existing processes to identify gaps and resources
- Coordinate forensic investigation of the police, Medical Examiner, and Child Wellfare



Health Promotion in Clinical & Community Settings

- Support interconceptional care by prepping for next pregnancy by encouraging contraception and spacing
- Implement American College of Obstetrics and Gynecology (ACOG) guidelines for both medical and social care
- Facilitate content training and panel discussions on emerging risk trends and about available resources
- Consistent messaging and social marketing for emerging and intractable trends
- · Maximize insurance coverage and use of benefits
- Develop response to Safe Sleep issues

Address Social Risk

- Increase capacity to serve more individuals for longer periods of time
- Automate patient screening with validated screening assessments for material, social and psychosocial risk
- Automate risk-stratified response to screening including the easy identification of multiple available services
- Utilize evidence-based approaches, where available, to address social risk
- Establish step-down hand-offs between Child Welfare and maternal-infant programs
- Provide medication management services during pregnancy for pain and mental health
- Intentional recruitment pipeline for hiring people of color and people from community
- · Institute a housing safety net

Family Centered Care

- Integrate doulas into care continuum to support: advocacy, health promotion, and empowerment
- Create menu of care options such as: patient centering and bundled mother/baby visits
- Empower patients to look at accurate, high-quality websites and other resources
- Explicitly integrate patient religious and cultural preferences into decision-making
- Engage fathers, partners, and other caregivers
- Empower patient questions, requests into decisionmaking

Bereavement Support

- Develop a coordinated bereavement network for linking families to resources and following-up to ensure that a connection is made for all types of perinatal loss
- Maintain updated list of bereavement resource options including: individual counseling, support groups, medical support, funeral homes, and other types of family support
- Publicize resource list
- · Support with funeral arrangements and costs
- Provide emotional support to families during crisis and the forensic investigation

Integrate FIMR Into Systems

- Establish pipeline for FIMR recommendations to reach medical and community systems
- Create process for patients and families to communicate with medical administrators
- Establish process for stakeholder institutions prioritization of FIMR identified issues and recommendations
- Engage in bereavement coordination

Miscellaneous

Invest in Child Welfare worker training, support, supervision

