

## COMMUNITY ACTION:

The FIMR Program has sponsored several community interventions based on case review findings. Examples of these include:

- A prenatal health card carried by women that provides any potential provider with her essential health information,
- A folic acid public education campaign,
- Provider and client resources on preterm labor and danger signs of pregnancy,
- Grief and bereavement guidelines for use by providers with clients that have experienced a fetal or infant loss, and
- A crib exchange project to assure that low-income families have safe sleeping environments for their infants.

## 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, community-based approach that leads to improved services and community resources for childbearing families
- An opportunity for public/private partnerships.

“FIMR is the most fulfilling, interesting, satisfying, frustrating and important work that I have engaged in. Beyond selfish self growth, I firmly believe in and have seen the changes in health care delivery that have been directly influenced by our team.”  
— Itika Greene, Perinatal Services Coordinator

## FIMR IS NOT:

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

## For more information:

FIMR Program  
Family, Maternal and Child Health Programs  
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925-313-6254

The Contra Costa FIMR Program is supported by Contra Costa Health Services and the Maternal, Child and Adolescent Health Branch, California Department of Health Services.

“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

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# CONTRA COSTA FETAL INFANT MORTALITY REVIEW PROGRAM



A Guide to the  
Fetal Infant Mortality Review  
(FIMR) Program  
of Contra Costa County

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.

FIMR has been operating in Contra Costa County since 1991 and is implemented by the Family, Maternal and Child Health Programs of Contra Costa Health Services.

The purpose of the Contra Costa 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.

“We have come to the realization that you can only go so far looking at statistics, looking at trends. You can describe a lot, but it isn’t until you get out there in the community and look at why the babies are dying...that you really begin to make a difference.”  
— Diana Jorgensen, Medically Vulnerable Infant Program

“FIMR looks behind the numbers to discover what is happening on a personal, not institutional, level.”  
— Patt Young, The Perinatal Council

## HOW FIMR WORKS:

The FIMR process begins when the program is notified that a fetal or infant death has occurred. The FIMR Program receives referrals from hospitals, clinics, the Office of Vital Registry, case management programs and other perinatal providers.



### Grief and Bereavement Support

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

### 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.

### 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.

## Case Review

A case summary is prepared using information from the maternal interview and records review. The summary is de-identified 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 with the health care system 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. Task force members include those who are in a position to direct change at the community level.

“Infant mortality is not a health problem. Infant mortality is a social problem with health consequences.”  
— Sean Casey, First 5 Contra Costa Children & Families Commission

**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 925-313-6254.

“The FIMR Program has enabled our community to look at the tragedy of infant death with a broad perspective, including its impact on individuals, families and the community. We each see pieces of the problems that contribute to infant mortality. As a team, we see more possible solutions.”  
— Susan Lindheim, MD, Kaiser Permanente