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Health Concerns:

- Every year in the United States, about 23,000 babies who are born alive do not survive to their first birthday [1]
- An almost equal number of babies are stillborn, without signs of life [1]
- While fetal and infant mortality in the United States has improved, disparities persist between whites and persons of color, especially African Americans, Latinos, and Native Americans [1]
- The US national infant mortality rate is 5.7 per 1000 live births (2018), Illinois had an Infant Mortality rate of 6.5 per 1000 live births (2018) and Chicago had an Infant mortality rate of 7.0 per 1000 live births (2018) [2]

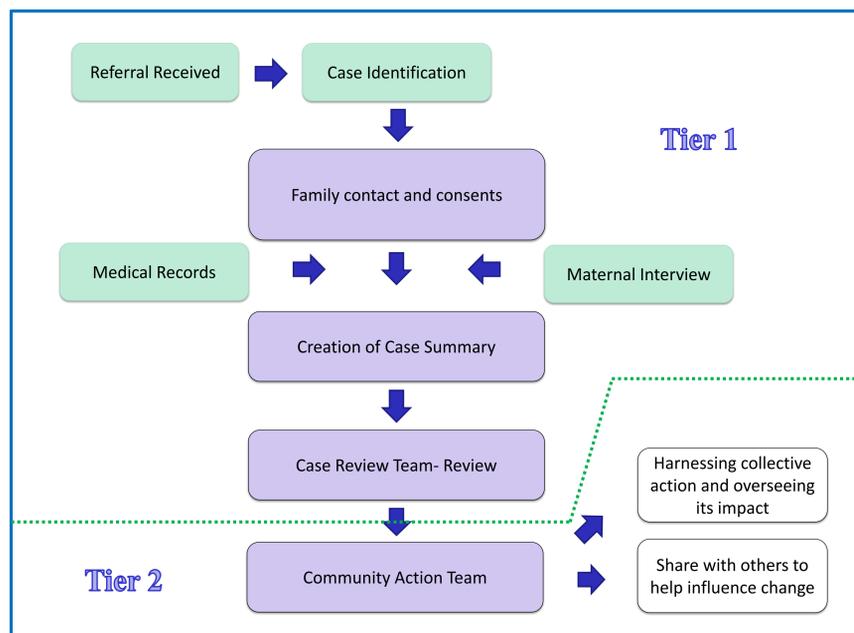
What is FIMR?

FIMRs are community-based efforts aimed at identifying non-medical issues associated with fetal and infant loss through family interviews. The Chicago FIMR project takes a 2-tiered approach to improve outcomes from systems and services provided to pregnant women, infants, and families. This includes two multidisciplinary teams, the Case Review Team (CRT) and the Community Action Team (CAT).

- **Tier 1** sees the CRT review de-identified maternal interview and medical abstracts leading to the development of recommendations constructed from the issues present or contributing to the outcomes of these individual cases.

- **Tier 2** sees these recommendations being given to the CAT who are charged with turning them into meaningful action through collaborative efforts at the community level.

The process:



Goals:

- Identify gaps and barriers to services that may contribute to poor birth or health outcomes by engaging and completing family interviews
- Communities are empowered and inspired to develop local solutions by directly influencing the changes being made
- Improves existing service delivery systems and the quality of services by identifying opportunities for interagency collaboration
- Give individual professionals, health/social service agencies, community-based organizations, and local health depts feedback to improve the quality of services they provide
- Reduction in prenatal and newborn mortality rates

Future Steps:

FIMR PROCESS: Continuous Quality Improvement (CQI)



The CQI model will help FIMR see the impact the interventions have while allowing for their continuous refinement

Conclusions

The focus on families' stories when reviewing losses help paint a full picture as to the nonmedical issues they may have faced before a loss. The aim of FIMR is to learn about the areas of improvement and harness the collective power of communities to make a positive impact on health outcomes.

FIMR FY2021 Recommendations

• Expand access to pregnancy related peer-to-peer support groups by at least two opportunities focused in the communities of highest infant mortality within the next 18 months.

Peer to Peer Support

• Create and/or support efforts promoting active listening and other tools aimed at addressing implicit bias by providers and staff working at birthing hospitals in the communities with the highest infant mortality rates in Chicago within the next 3 years.

Implicit Bias

• Develop or promote available services of reliable, safe, and affordable transportation for medical care visits directed at pregnant individuals, infants, and children within the next 12-18 months.

Transportation

To refer a participant or learn more

Acknowledgements

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Citations

- (1)National Center for Fatality Review and Prevention. (n.d.). Fetal and Infant Mortality Review. NCFRP. Retrieved on September 25, 2021, from <https://www.ncfrp.org/fimr/>
- (2)Illinois Infant Mortality Report. Illinois Department of Public Health. (December 2020)