The Challenge: Each year more than 700 children and more than 400 infants die in Wisconsin. For every injury-related death there are 21 injury hospitalizations and 629 emergency department visits. The majority of these deaths and hospital visits are considered preventable. Fetal Infant Mortality Review (FIMR) and Child Death Review (CDR) share the common goal of preventing future deaths and injuries by identifying the risk factors and circumstances surrounding each death. Wisconsin CDR teams review most deaths to children younger than age 19 while FIMR teams review all infant deaths younger than age one and most stillbirths greater than 20 weeks gestation and/or 350 grams.

Project Goal: The purpose was to establish strong collaboration between two separate systems, FIMR and CDR, to increase effectiveness of prevention efforts in target counties. The project improved data collection, quality and interpretation, established collaboration between FIMR and CDR and ensured FIMR/CDR teams gained experience in translating data into best practices, interventions and programs.

Results: The Case Reporting System from the National Center for Fatality Review and Prevention was expanded to include more than 50 variables focused on maternal, fetal and infant health. Wisconsin is automatically uploading birth and death records with free and automatic access to encourage use of the system from FIMR/CDR teams. At this time, more than 90 percent of CDR and FIMR teams use this data system.

The project increased the number of FIMR teams from two to eight and CDR teams from 49 to 57. The CDR team’s coverage increased from 49 to 57 of Wisconsin’s 72 counties. CDR teams exist for more than 93 percent of Wisconsin’s child population younger than age 19.

Eight counties (Dane, Kenosha, Marinette, Milwaukee, Racine, Rock, Walworth and Wood) were provided technical assistance, including identification of ways to collaborate with existing CDR teams, assistance accessing records from medical or other institutions and help running and creating reports.

Data from Wisconsin’s first joint CDR and FIMR report (located on the Children’s Health Alliance website at chawisconsin.org) has been used to educate policymakers, inform prevention activities at the state and local level including creation of the educational home visiting tool, Sleep Baby Safe, and demonstrate the burden of sleep-related deaths in grant applications. The project leveraged funding from the Centers for Disease Control and Prevention (CDC) for a total of $658,434 and the National Center for Fatality Review and Prevention for $165,000.

Child and Infant Deaths Reviews Inform Prevention Efforts

Grantee: Children’s Health Alliance of Wisconsin
Grant Title: Preserving Infant and Child Health
Geographic Location: Statewide
Academic Partner: Timothy Corden, MD, UW School of Medicine and Public Health, Department of Population Health Sciences; and Emmanuel Ngui, DrPH, UW-Milwaukee School of Public Health
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