



History of CDR and FIMR

CDR history

1995-1998: Local child death review (CDR) teams were formed at the discretion of local leaders and often focused on issues related to identification of child abuse.

1998: Wisconsin was one of seven states without a statewide CDR program. As a result, the Department of Justice (DOJ) began the state Child Death Review Team (now known as the Child Death Review Council) to address policy issues.

2005: The Department of Health Services (DHS) charged Children's Health Alliance with identifying the resources necessary to implement a statewide CDR program that would create teams in each Wisconsin County and focus on prevention.

2008: The Alliance, in collaboration with the Injury Research Center at the Medical College of Wisconsin, DHS, and academic partner Timothy E. Corden, MD, was awarded a three year grant from the University of Wisconsin-Madison School of Medicine and Public Health's Wisconsin Partnership Program grant titled *Keeping Kids Alive in Wisconsin*.

2008-2011: As a result of *Keeping Kids Alive in Wisconsin*, more than 30 new CDR teams were formed throughout Wisconsin. All of the teams embraced the prevention-based CDR model.

2009: The state Child Death Review Council moved its administrative home from DOJ to DHS. This transition occurred to support the prevention focus of the program. DOJ continues to be a critical partner in supporting CDR and FIMR.

2010: DHS identified the establishment of CDR and FIMR teams as a maternal and child health priority. As a result, local health departments are able to use their Title V, Maternal and Child Health funds to support the development and implementation of local death review teams.

2011: The Alliance, in partnership with the City of Milwaukee Health Department, Injury Research Center at the Medical College of Wisconsin, DHS, and academic partners Timothy E Corden, MD and Emmanuel Ngui, PhD, was awarded an additional three-year grant from the University of Wisconsin-Madison School of Medicine and Public Health's Wisconsin Partnership Program. This grant, titled *Preserving Infant and Child Health*, seeks to implement a statewide FIMR program that collaborates with the existing CDR system.

2012: The Alliance, in partnership with Injury Research Center at the Medical College of Wisconsin, DHS, and academic partner Timothy E Corden, MD, was

awarded a three-year grant from the Centers for Disease Control and Prevention to improve the investigation and review of sudden unexplained infant deaths. Wisconsin is one of nine states funded.

2012: The Alliance, in partnership with Injury Research Center at the Medical College of Wisconsin, DHS and academic partner Timothy E Corden, MD, was awarded an 18 month research contract from the Centers for Disease Control and Prevention to implement part of the National Action Plan to Reduce Childhood Injuries. This project focuses on developing and implementing a web-based prevention template for local death review teams.

2013: There are 49 CDR teams, covering 51 Wisconsin counties. This accounts for 90 percent of Wisconsin's population.

FIMR history

1993: City of Milwaukee Health Department instituted the Fetal Infant Mortality Review (FIMR) team. The original FIMR funding source came from a Milwaukee Healthy Beginnings Project subcontract that was administered by the Black Health Coalition. The need for a FIMR in Milwaukee was identified by concerned and committed families, social service professionals and healthcare providers. The consumers and professionals of FIMR are from several public and private entities including hospitals, community based organizations, professional societies, and the State of Wisconsin. The FIMR team reviewed deaths occurring only in the City of Milwaukee.

1995: The first FIMR Case Review meeting was held.

2001: Up until 2001, FIMR teams could only access limited data and did not have the capacity for comprehensive analysis. FIMR now analyzes all Milwaukee infant deaths and stillbirths, facilitates Case Review Team meetings, coordinates a maternal interview process, and provides aggregate data to various public health and social service agencies.

2002: The "*Fetal Infant Mortality Review Status Report*" was released. Report data was derived from 2000-2001 infant death medical and social service record abstractions.

2003: FIMR data prompted the Wisconsin Perinatal Summit, "*Healthy Babies in Wisconsin: A Call to Action.*"

2004: FIMR was instrumental in the creation of public health partnerships between many organizations, committees, and institutions that have the welfare of Milwaukee's infant at the core of their mission. This included a Safe Sleep advertisement campaign, a continuing hospital collaborative, several legislative initiatives and other public health programs.

2005: FIMR released the "*Fetal Infant Mortality Review, Report to the City of Milwaukee,*" which focused on *both* infant and fetal death. Report data was derived from 2002-2004 infant death medical and social service record abstractions.

2010: The City of Milwaukee Health Department held the very first Infant Mortality Summit aimed at reducing Milwaukee's high infant mortality rate. The 2010 Summit focused on Safe Sleep. The FIMR team also expanded its review to include several Milwaukee County municipalities at this time.

2010: City of Milwaukee Health Department released its fifth Infant Mortality Report.

2010: DHS identified supporting CDR and FIMR teams as a maternal and child health priority. As a result, local health departments are able to use their Title V, maternal and child health funds to support the development and implementation of local death review teams.

2011: Public Health Madison and Dane County implemented a FIMR team.

2011: The City of Milwaukee Health Department held its second Infant Morality Summit with an emphasis on the leading cause of infant death: prematurity.

2011: The Wisconsin Department of Health Services expanded their Title V, maternal child health contract with the Alliance to not only lead CDR efforts but implement a statewide FIMR system that collaborates with CDR.

2011: The Alliance, in partnership with the City of Milwaukee Health Department, Injury Research Center at the Medical College of Wisconsin, DHS and academic partners Timothy E Corden, MD and Emmanuel Ngui, PhD was awarded an additional three-year grant from the University of Wisconsin-Madison School of Medicine and Public Health, Wisconsin Partnership Program. This grant, titled Preserving Infant and Child Health seeks to implement a statewide FIMR program that collaborates with the existing CDR system and enhances MCH efforts.

2012: The City of Milwaukee Health Department held its third Infant Morality Summit. This year's theme was "Changing the Social Determinants of Health." The conference explored the connections between social and economic factors such as jobs and early childhood education, and how they affect birth outcomes.

2012: Emmanuel Ngui, PhD was awarded a grant from National Fetal and Infant Mortality Review program to develop a way of integrating life course theory (LCT) measures and fathers' perspectives into ongoing Milwaukee FIMR assessment, review, and training processes. The goal of this work is to move the FIMR process toward a health and social equity framework that fully incorporates a broad understanding of LCT and paternal issues that influence birth outcomes and interventions.

2013: Public Health Madison and Dane County in collaboration with academic partner Whitney Witt, PhD, MPH, was awarded a three year grant from the University of Wisconsin-Madison School of Medicine and Public Health, Wisconsin Partnership Program to begin conducting maternal interviews.

2013: Rock County Health Department, in collaboration with academic partner Tim Corden, MD, was awarded a grant from the University of Wisconsin Madison School of Medicine and Public Health to implement a FIMR team.