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**Memorandum of Understanding
Between
Bureau of Community Health Promotion
Family Health Section
and
WIC and Nutrition Section**

Title: Information Sharing between the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Mortality Review Team.

This Memorandum of Understanding is between the Family Health Section (FHS), representing the Mortality Review Teams, and the WIC and Nutrition Section, representing the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), both in the Bureau of Community Health Promotion, Division of Public Health. The focus of the Mortality Review Team is (1) the review of maternal, fetal, infant, and child deaths by maternal mortality review (MMR) teams, child death review (CDR) teams, and fetal infant mortality review (FIMR) teams to identify causes of all maternal, fetal, infant, and child deaths, (2) to recommend systems improvements, and (3) to encourage prevention recommendations to improve maternal and child health and prevent future deaths. This Memorandum is entered into pursuant to the authority of 7 CFR 246.26 (d) of the Federal Regulations and s. 254.13 of the Wisconsin Statutes.

This MOU extends to the Children's Health Alliance of Wisconsin (Alliance), which has a contract with the Family Health Section's Mortality Review Teams for fetal and infant mortality review and child death review.

I. Goal

The long term goals of this memorandum of understanding (MOU) are: (1) to streamline administrative procedures to minimize burdens on review teams and WIC staff when collaborating for MMR/CDR/FIMR team reviews, and (2) through the review process and findings, to assess and evaluate the responsiveness of a State's service delivery systems to WIC participant's health and health care needs. Specifically, the Memorandum will allow the sharing of WIC participant information with the MMR/CDR/FIMR teams to identify maternal, infant, and child health and social risk factors contributing to these deaths. This information will be used to enhance the health, education or well-being of WIC applicants who are currently enrolled in such programs.

This Memorandum shall provide for sharing of WIC participant information among the State WIC Office, local WIC projects, and Family Health Section staff or their designees participating in Mortality Reviews (including MMR/CDR/FIMR), and local health department representative of the CDR/FIMR Teams.

II. Background on relevant parties

The WIC program is governed by 7 CFR 246 and "Participant" has the meaning set forth in 7 CFR 246.

A CDR team convenes to better understand how and why children die and the circumstances leading up to the child's death. Information is shared among the team to ensure all the contributing factors of a child's death are identified and discussed.

The CDR/FIMR Team Coordinator is selected at an organizational meeting and serves at the discretion of the team. The Team Coordinator may or may not be the local health department representative.

The Alliance has a contract with the Family Health Section to provide coordination of the implementation of CDR and FIMR team reviews and to provide technical assistance to these teams.

"Confidential Information" means any information about a WIC applicant or participant, whether it is obtained from the applicant or participant, another source, or generated as a result of WIC application, certification, or participation, that individually identifies an applicant or participant and/or family member(s). The following information will not be shared: treatment for mental illness, developmental disabilities, alcoholism or drug abuse, or HIV infection test results or HIV status.

FIMR is an action-oriented community process that continually assesses, monitors, and works to improve service systems and community resources for women, infants, and families. Through the review of all fetal and infant deaths, the maternal and infant health and social risk factors contributing to these deaths can be better understood and potential protective factors can be identified. The FIMR process brings private health care providers, public health, and community service providers together with the intention of examining the current systems that support families during pregnancy, infancy, preconception, and inter-conception.

Maternal and Child Health Block Grant funding supports the comprehensive local review of child, infant, and fetal deaths. The MCH Program is funded by federal Title V Block Grant, received from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau.

The MMR is an action-oriented process that reviews cases in which a woman died during pregnancy or within one year of the end of her pregnancy. Cases are identified and case-specific data are collected including health, social and health care system factors that may have contributed to the death. A multi-disciplinary team (MMR Team) of professionals systematically reviews the case information, summarizes issues related to maternal mortality, and makes recommendations to improve maternal health and survival. A team of nurse consultants within the State's MCH Program conducts all of the MMR Team case abstractions, enters them in the database, creates the case summaries, and organizes the team reviews. MCH Epidemiologists provide technical and analytic support to the abstractors and the MMR Team. The Wisconsin Section of the American College of Obstetricians and Gynecologists Representative serves as co-chair for the MMR Team, along with the DHS Chief Medical Officer for Maternal and Child Health. The remainder of the team is composed of a multi-disciplinary group of health and health care professionals all of whom are involved in some aspect of delivery of health care to pregnant women in Wisconsin.

"ROSIE" means the Real-Time Online Statewide Information Environment, which is the Wisconsin WIC Program data system that maintains all WIC participant data on a central database.

III. Purpose

The WIC Program will provide confidential information of specific women, infants, and children who have participated in the WIC Program and who are subjects of a CDR, FIMR, or MMR. These data will be used for public health purposes to identify maternal, infant, and child health and social risk factors contributing to these deaths.

The MMR/CDR/FIMR teams may use the case-specific confidential information only for the purpose(s) for which the WIC Program shared the confidential information and for no other purpose. WIC information may be shared in aggregate to support prevention recommendations provided by the teams.

IV. Activities

The Local Health Department Representative of the CDR/FIMR Team Agrees to:

(1) Provide the designated WIC staff person with the potential WIC participant identifying information. It will include: deceased child's first and last name, birth date, and mother's first and last name, and address.

(2) Provide training to WIC staff about the CDR and FIMR teams.

(3) Share only the data necessary for a Child Death Review or a Fetal and Infant Mortality Review. Only pertinent information related to the case will be shared.

(4) Use appropriate administrative, physical and technical safeguards to prevent the use or disclosure of information other than as provided by this Agreement. Information will be shared in a secure manner, and data will only be stored on a secure server or encrypted device.

(5) Ensure appropriate destruction of personally identifying data. Hard copy media have been shredded or destroyed such that the personally identifiable information cannot be read or otherwise cannot be reconstructed. Redaction is specifically excluded as a means of data destruction. Electronic media have been cleared, purged, or destroyed consistent with National Institute of Standards and Technology "NIST" Special Publication 800-88, Guidelines for Media Sanitization, such that the personally identifiable information cannot be retrieved.

<http://nvlpubs.nist.gov/nistpubs/SpecialPublications/NIST.SP.800-88r1.pdf>

The CDR/FIMR Team Coordinator Agrees to:

(1) Be responsible for obtaining signatures of all persons attending the CDR/FIMR team meetings on a confidentiality agreement prior to the start of any case reviews.

(2) Ensure that if information is requested from the CDR/FIMR Team via any state or federal Open Records Law, that the CDR/FIMR Team does not release the information and refers the requester to the Title V Director within the State's MCH Program.

(3) Ensure that the meeting can be closed to the public whenever review of specific child deaths are discussed, in accordance with the Wisconsin Open Meetings Law (Wis. Stat. 19.85). The CDR/FIMR Team Coordinator will ask the public to leave to conduct confidential business.

(4) Ensure that all parties respect the WIC participant's right to privacy.

The Coordinator of the MMR Team Agrees to:

- (1) Provide the designated state WIC staff person with potential WIC participant identifying information. It will include: deceased woman's first and last name, birth date, and address.
- (2) Provide training to WIC staff about maternal mortality reviews.
- (3) Share only the data necessary for a Maternal Mortality Review. Whenever possible, specific identifying information will not be shared with the MMR team members.
- (4) Use appropriate administrative, physical and technical safeguards to prevent the use or disclosure of information other than as provided by this Agreement. Information will be shared in a secure manner, and data will only be stored on a secure server or encrypted device.
- (5) Ensure appropriate destruction of personally identifiable data. Hard copy media have been shredded or destroyed such that the personally identifiable information cannot be read or otherwise cannot be reconstructed. Redaction is specifically excluded as a means of data destruction. Electronic media have been cleared, purged, or destroyed consistent with National Institute of Standards and Technology "NIST" Special Publication 800-88, Guidelines for Media Sanitization, such that the personally identifiable information cannot be retrieved.
<http://nvlpubs.nist.gov/nistpubs/SpecialPublications/NIST.SP.800-88r1.pdf> (clarify that only WIC data will be destroyed)
- (6) Be responsible for obtaining signatures of all persons attending the MMR team meetings on a confidentiality agreement prior to the start of any case reviews.
- (7) Ensure that if information is requested from the MMR Team via any state or federal Open Records Law, the MMR Team does not release the information and refers the requester to DHS Chief Medical Officer for Maternal and Child Health.
- (8) Ensure that all parties respect the WIC participant's right to privacy.

The Wisconsin WIC Program Staff Agree to:

- (1) Search ROSIE for the deceased child's and/or mother's name.
- (2) Provide the local health department representative of the CDR/FIMR Team or the Coordinator of the MMR Team with the following confidential information for both the child and the mother (range from first visit of pregnancy through life of child); including history, as available:
 1. Members screen
 2. Information screen
 3. Participant Screen, education, health care coverage
 4. Anthropometrics screen
 5. Pregnancy screen
 6. Breastfeeding screen
 7. Assessment screen for health and diet information and assigned risks (excluding information related to treatment for mental illness, developmental disabilities, alcoholism or drug abuse, or HIV infection test results or HIV status)
 8. Care plan-includes education and risks
 9. Extras screen for education history and referrals
 10. Benefit history screen for benefit issuance and redemption

(3) Share the requested data through any of the following methods:

- password protected electronic document(s) that are transmitted via electronic methods such as email
- verbal telephone transmittal or faxes
- in-person review of paper or electronic documents
- verbal presentation at a MMR/CDR/FIMR Team meeting

(4) Use appropriate administrative, physical and technical safeguards to prevent the use or disclosure of information other than as provided by this Agreement. Information will be shared in a secure manner, and data will only be stored on a secure server or encrypted device.

(5) Ensure appropriate destruction of personally identifiable data. Hard copy media have been shredded or destroyed such that the personally identifiable information cannot be read or otherwise cannot be reconstructed. Redaction is specifically excluded as a means of data destruction. Electronic media have been cleared, purged, or destroyed consistent with National Institute of Standards and Technology "NIST" Special Publication 800-88, Guidelines for Media Sanitization, such that the personally identifiable information cannot be retrieved.

<http://nvlpubs.nist.gov/nistpubs/SpecialPublications/NIST.SP.800-88r1.pdf>

(6) Attend MMR/CDR/FIMR meetings, which is **strongly encouraged**, to explain confidential or share additional WIC participant information. If the WIC staff person brings participant records, this staff person will leave the meeting with the WIC participant records.

(7) Provide appropriate notice in accordance with 7 CFR §246.26(h) to the parent/guardian prior to disclosing information to the MMR/CDR/FIMR team such that the notice describes pertinent information that may be disclosed to identify maternal, infant, and child health and social risk factors contributing to death.

(8) Not to act on any information obtained through the data/information sharing process and the MMR/CDR/FIMR review process, such as contacting the family for WIC enrollment.

(9) Keep confidential any names or information obtained through the data/information sharing process, even if the subject of the inquiry was not, or is currently not, a participant in the WIC program.

(10) Ensure that all parties respect the WIC participant's right to privacy.

The MCH Title V Director Agrees to:

- (1) Train the MMR Coordinator and abstractors on this agreement and gather their signature.
- (2) Communicate to the Alliance the expectation that information on this MOU is included in the training provided to CDR/FIMR Coordinators and data entry staff.
- (3) Convey findings related to the WIC population of MMR/CDR/FIMR Teams to the Wisconsin WIC Program Director that can be utilized in enhancing the health, education, or well-being of WIC applicants or participants who are currently enrolled in the program.

The Wisconsin WIC Program Director Agrees to:

Consider findings of the MMR/CDR/FIMR Teams for further action, with possible revisions of WIC Program policies and procedures to enhance the health, education or well-being of WIC applicants or participants.

V. Notification and Review Procedures for Publications and Presentations

State-Initiated Publications and Presentations

The WIC Director and the MCH Title V Director will jointly review and approve final drafts of reports and articles for publication or dissemination that include aggregate information of WIC participants. "Publication" and "dissemination" includes any written article for publication in a professional journal or other publication, or any printed material for presentation to any person, conference, or group external to the Department of Health Services. This includes providing copies of planned articles, the text of speeches, slides, and other graphics.

The review procedure is to determine if the material could have an impact on Department of Health Services' policies and procedures, if data has been misinterpreted/misrepresented, or has violated the confidentiality rights of clients/WIC participants or the Department of Health Services.

Once the publication or presentation is submitted to the WIC Director and the MCH Title V Director, they will have three business weeks (15 days) to respond with comments, questions, and revisions, and decide on whether permission is granted to disseminate or publish the presentation or publication.

In the event of a disagreement between the WIC Director and the MCH Title V Director about the contents of a final draft that cannot be resolved by mutual agreement, the matter under disagreement shall be forwarded to the Bureau of Community Health Promotion Director for review of the matter in controversy for a final determination.

No publication or dissemination shall occur prior to completion of the processes outlined in this section.

Local Jurisdiction-Initiated Publications and Presentations

Local jurisdiction agencies must receive prior approval from the Wisconsin WIC Program Director for the release of reports and articles for publication or dissemination that specifically references WIC participants. "Publication" and "dissemination" includes any written article for publication in a professional journal or other publication, or any printed material for presentation to any person, conference, or group external to the Department of Health Services. This includes providing copies of planned articles, the text of speeches, slides, and other graphics.

The review procedure is to determine if the material could have an impact on Department of Health Services' policies and procedures, if data has been misinterpreted/misrepresented, or has violated the confidentiality rights of clients/WIC participants or the Department of Health Services.

Once the publication or presentation is submitted to the Wisconsin WIC Program Director, he or she will have three business weeks (15 days) to respond with comments, questions, and revisions, and decide on whether permission is granted to disseminate or publish the presentation or publication.

In the event of a disagreement, the Wisconsin WIC Program Director or designee and the local jurisdiction agency representative will discuss the contents of the final draft to come to a resolution.

No publication or dissemination shall occur prior to completion of the processes outlined in this section.

VI. Staff Responsibilities

All staff persons (Local Health Department Representative of CDR/FIMR Team, CDR/FIMR Team Coordinator, Team Coordinator of the MMR Team, and State and Local Wisconsin WIC Program Staff) engaging in the data/information sharing process covered under this Memorandum will adhere to the terms of the Memorandum. Staff obligations described in this Memorandum will persist if any personnel terminate employment with the parties covered in this Memorandum. If newly hired staff are expected to participate in the data/information sharing processes outlined in this Memorandum, the supervisor of the new staff person is required to provide a copy of this Memorandum to the new staff person through either the WIC and Nutrition Section or the Family Health Section.

VII. Effective Date and Duration of Memorandum

This Memorandum shall become effective upon the latest date of signing.

This Memorandum may be amended in writing at any time by mutual consent of the parties. Amendments will be written and signed by the proper representatives of each party and shall identify the exact nature of the amendment(s). Any amendments will be attached as amendments or as clarifications to this Memorandum.

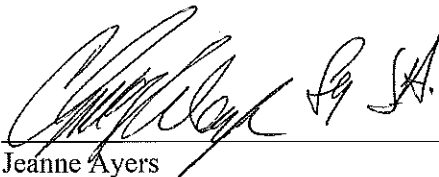
This Memorandum shall continue in effect until either party terminates this Memorandum by providing a thirty-day advance written notice to the other party or until state or federal law changes to invalidate the Memorandum. The Memorandum shall be reviewed by the Section Chiefs biennially and revised upon the mutual concurrence of the parties.

**Memorandum of Understanding
Between
Bureau of Community Health Promotion
Family Health Section
and
WIC and Nutrition Section**

Title: Information Sharing between the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Mortality Review System.

Signature Page

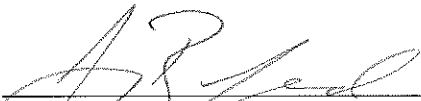
This signature page applies to the MOU entitled Information Sharing between the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and the Mortality Review System.



Jeanne Ayers
State Health Officer
Department of Health Services
Division of Public Health

5-1-19

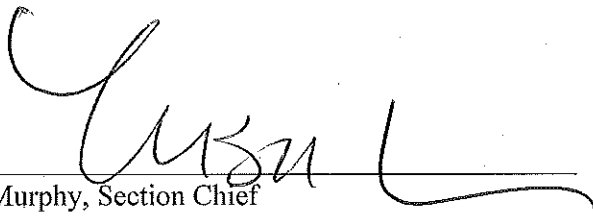
Date



Jody Brassfield, Section Chief
Family Health Section
Bureau of Community Health Promotion

4/19/19

Date



Lisa Murphy, Section Chief
and WIC Program Director
WIC and Nutrition Section
Bureau of Community Health Promotion

4-19-19

Date