NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

Submission Id: 6108

Title

Fetal Infant Mortality Review: The Humanizing Experience of the Family Interview

Priority 1 (Research Category)

Social determinants and vulnerable populations

Presenters

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Abstract

Context: Fetal Infant Mortality Reviews (FIMR) utilize abstracted health service records and family interviews to examine to identify root causes of infant mortality. Case review findings and recommendations are used for surveillance, quality improvement, policy development, and community education and mobilization. Objective: The goal of this study is to understand the impact family interviews have on infant death review outcomes and subsequent recommendations. Study Design and Analysis: Mixed-method convergent design, combining quantitative secondary analysis of records from 158 stillbirth and infant deaths reviewed by Kalamazoo County FIMR from 2015 to 2023, and qualitative semi-structured interviews with 26 national FIMR stakeholders. Multivariate analyses on administrative records were done using Generalized Estimating Equation with two-sided alpha<.05; FIMR stakeholder interviews and open-ended survey questions were -coded for themes. Setting or Dataset: Kalamazoo County, MI, characterized by high disparity between Black and White infant mortality rates. Population Studied: FIMR program implementers. Intervention/Instrument: Interviews completed by bereaved families and included in the FIMR review. Outcome Measures: Quantitative outcomes are number and types of recommendations generated through FIMR case reviews. Qualitative outcomes are experienced impact of family interviews on case review process. Results: 34% (n=53) of the 158 cases reviewed included a family interview. Compared to cases without family interviews, cases with family interview were associated with a 7 times greater likelihood of identifying one or more medical stressors (CI 1.6-28.9, p=.01) and generated more recommendations for provider communication (average 1.4 versus 0.8, p=.01), person-centered decision-making (average 0.5 versus 0.3, p=.02), and bereavement resources (average 0.6 versus 0.1, p=.007). Qualitative themes suggest family interviews 1) provide more complete case information; 2) elucidate social determinants of health; 3) undercut bias and blame during case review; and 4) motivate a desire act. Conclusions: FIMR family interviews bring value to the case review

process, identifying the layered circumstances underlying infant-fetal deaths, generating prevention recommendations to close gaps not visible in medical records, challenging discriminatory attributions of blame, and motivating urgency to act upon recommended changes.