



Fatality Review Teams and Healthy Start Programs: Enhancing Collaboration

What is Healthy Start?

Healthy Start is a federally funded, community-based program seeking to reduce infant mortality, improve perinatal outcomes, and striving to improve behavioral, mental, and women's health by improving systems of community care. Healthy Start provides case management and care coordination, referrals, access to medical services, and group-based education services for pregnant women, mothers, infants, and fathers. There are 115 Healthy Start programs nationwide.

What is Fatality Review?

Fatality review is a community-led, multidisciplinary process that helps professionals understand why a death occurred and to identify opportunities for prevention. Fatality review identifies how families access and navigate community services and resources and seeks to improve systems. Fetal and Infant Mortality Review (FIMR) and Child Death Review (CDR) teams engage in an action-oriented review process.

Why Should Fatality Review and Healthy Start Collaborate?

When CDR and FIMR teams and Healthy Start form partnerships, they enhance maternal and child health (MCH) outcomes by:

- Optimizing community resources.
- Involving community members in decision-making.
- Improving MCH services and systems.
- Translating data into strategies that save lives and improve community health.

What Are the Benefits of Collaboration?

Optimize Community Resources	Elevate Family Voice	Improve MCH Service Systems
<p>Sharing information reveals hard to identify patterns and risk factors, identifies system failures, reduces service duplication, and improves outcomes.</p>	<p>Incorporating insights from personal experiences can identify gaps in access to optimal care not seen in data, such as transportation or insurance barriers. It humanizes the review process, promotes balanced and compassionate recommendations, and ensures they reflect community needs. It also builds trust, encourages accountability, and highlights the importance of optimal health care.</p>	<p>Raising awareness of community-specific MCH challenges highlights local MCH challenges, mobilizes stakeholders, and tailors interventions to community needs.</p>
<p>Collaborating on recommendations helps align priorities across agencies, enhances credibility, and drives system-wide improvements.</p>	<p>Using personal stories to develop prevention resources adds depth to data. Anchor stories guide team decisions; promotes community responsive strategies; and strengthens trust with all community members.</p>	<p>Sharing data and findings to inform policy and practice helps identify trends and risk factors; translates findings into policy recommendations; and guides improvements in critical practices and public health strategies.</p>
<p>Sharing membership and expertise helps build leadership, fosters shared knowledge, and strengthens inter-agency collaboration and accountability.</p>	<p>Incorporating family stories of grief into bereavement resources helps create empathetic, relatable materials that help grieving families feel understood. It also informs support group content, exposes gaps in grief care, and promotes healing through advocacy.</p>	<p>Fostering partnerships among local, state, and national partners helps align local efforts with state and national priorities and strengthens systems through shared goals and coordinated actions.</p>
<p>Leveraging resources for collective impact helps reduce overhead costs and boosts funding for interventions. This also helps cross-trained staff and strengthens policy advocacy.</p>		

Healthy Start, FIMR, and CDR Collaboration Scenario:

A Coordinated Response to SUID

When an infant enrolled in a local Healthy Start program died from sudden unexpected infant death (SUID), Healthy Start, FIMR, and CDR conducted a joint case review. Healthy Start program guidelines include enrollment of infants up to 18 months of age. FIMR examines fetal and infant deaths to identify contributing factors and improve systems to improve future outcomes. CDR examines the deaths of children ages birth up to 18-years-old to improve understanding of fatalities and prevent future loss of life.

Joint Death Review

- FIMR reported information on prenatal care and social conditions.
- CDR provided the death scene investigation and autopsy information.
- Healthy Start presented information on maternal and family risk factors.

Shared Prevention Efforts

- Healthy Start developed a distinct protocol for service delivery for families in housing transition, including providing free cribs.
- CDR, FIMR, and Healthy Start partnered to create a local safe infant sleep campaign to educate families and providers.

Together, the teams identified missed opportunities for intervention and implemented new protocols for families in transition.

Need Help Building Your Collaboration?

The National Center for Fatality Review and Prevention (National Center) supports the work of CDR and FIMR teams and provides technical assistance focused on collaboration with Healthy Start Programs.

The National Center Assists Teams by providing:

- Technical assistance.
- Training.
- Communication.
- Resources.
- Data support.
- Capacity building and funding for Tribal fatality review teams.

For additional information, contact the National Center.

The National Center is funded in part by Cooperative Agreement Number UG7MC28482 from the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) as part of an award totaling \$5,149,996 annually with 0 percent financed with non-governmental sources. Its contents are solely the responsibility of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

