Building Effective Partnerships for Review

January 11, 2017



About the National Center

The National Center for Fatality Review and Prevention is a resource and data center that supports child death review (CDR) and fetal and infant mortality review (FIMR) programs around the country.

It is funded in part by Cooperative Agreement Number UG7MC28482 from the U.S. Department of Health and Human Services (HHS), Health Resources Services Administration (HRSA), Maternal and Child Health Bureau (MCHB).



The Center aligns with MCHB priorities and performance and outcome measures such as:

- Healthy pregnancy
- Child and infant mortality
- Injury prevention
- Safe sleep



HRSA's overall vision for the Center

- Through delivery of data, training, and technical support, the Center will assist state and community programs in:
 - Understanding how CDR and FIMR reviews can be used to address issues related to adverse maternal, infant, child, and adolescent outcomes
 - Improving the quality and effectiveness of CDR/FIMR processes
 - Increasing the availability and use of data to inform prevention efforts and for national dissemination

Ultimate goal: improving systems of care and outcomes for mothers, infants, children, and families

Webinar Goals

Participants will:

- Understand the importance of strong and diverse partnerships
- Understand the role of partnerships within different aspects of fatality review, including reviewing deaths, abstracting information, collecting data, and implementing prevention recommendations
- Understand new methods for identifying and engaging new partners
- Identify a variety of options for engaging and retaining partners



Speaker Panel

Carolyn Cumpsty-Fowler, PhD, MPH Johns Hopkins University

Bethany Miller, M.Ed., MSW Health Resources and Services Administration







Housekeeping

- Webinar is being recorded and will be available with slides in a few days on our website: www.ncfrp.org.
 The Center will notify participants when it's posted
- All participants will be muted in listen only mode
- Questions can be typed into the Chat Window. Due to the large number of participants, we may not be able to get to all questions in the time allotted. The Center will answer all questions and post the answers on the NCFRP web site:

https://www.ncfrp.org/



BUILDING EFFECTIVE PARTNERSHIPS FOR FATALITY REVIEW



Carolyn Cumpsty-Fowler, PhD, MPH
Johns Hopkins University

Foundations of CDR & FIMR



FACT - All CDR & FIMR Achievements Require:



Coordinated

Comprehensive

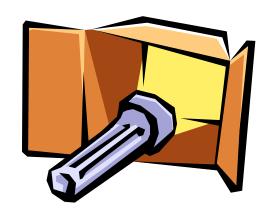
Organized Community Effort

Because of the often "political" nature of effective prevention strategies, working effectively with the right stakeholders is critically important.

Three challenges to effective CDR/FIMR-informed action

- 1. Limited resources
- 2. Non-strategic choices
- 3. Lack of collaboration

1. Limited Resources



The most important resources are not financial.

Having resources does not guarantee success.

2. Non-strategic intervention choices

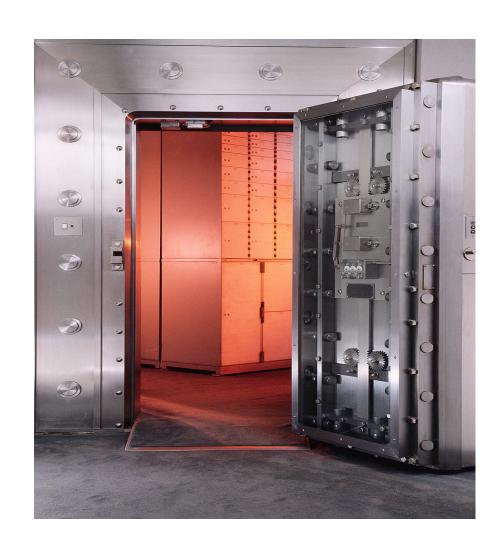


They may seem like a good idea at the time!

3. Lack of Collaboration

"Silo-sightedness"

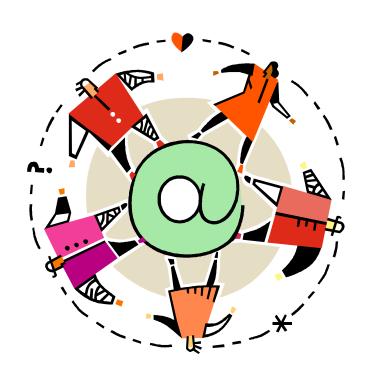
If resources (wisdom, time, skill, influence, etc) are not shared, They can't earn interest



Crisis avoidance:

We must create opportunities to SHARE THE WISDOM -- Early and Often!





WHAT ARE THE STRENGTHS OF PARTNERSHIPS?



Strengths of Partnerships: I

- Conservation of resources
- Achieve more widespread reach
- Can accomplish objectives beyond the scope of any one organization
- Have greater credibility than individual organizations
- Provide a forum for information sharing

Strengths of Partnerships: II

- Provide a range of advice and perspectives to the lead agency
- Foster personal satisfaction and help members to understand their jobs in a broader perspective
- May foster cooperation between grass roots organizations, community members, and/or diverse sectors of a large organization

http://www.preventioninstitute.org/eightstep.html

Partnerships that work:

Connect and mobilize resources





WHY DO
PARTNERSHIPS
FAIL?



The Partnership Dilemma

We like the idea of "it", but:

What should "it" be?

What must "it" achieve?

Until we can answer this question we cannot build "it" or evaluate "its" influence and impact.

PARTNERSHIPS THAT WORK ARE BEST-PROCESS PARTNERSHIPS



Partnerships are also interventions

They need to be approached with the same rigor we promote in best process intervention design.

They are more likely to work when they:

- are convened for a purpose
- are planned strategically
- have the necessary resources
- are managed carefully and respectfully
- are evaluated
- prioritize ongoing quality communication (feedback)
- are willing and able to change (CQI)
- are willing and able to end

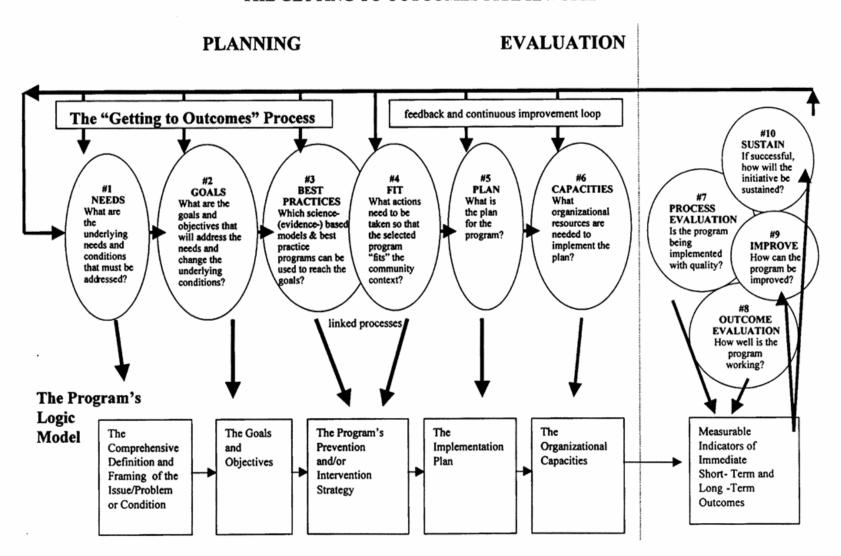
Best Practice – A Definition

Best Practice is a management idea which asserts that there is a technique, method, process, activity, incentive or reward that is more effective at delivering a particular outcome than any other technique, method, process, etc.

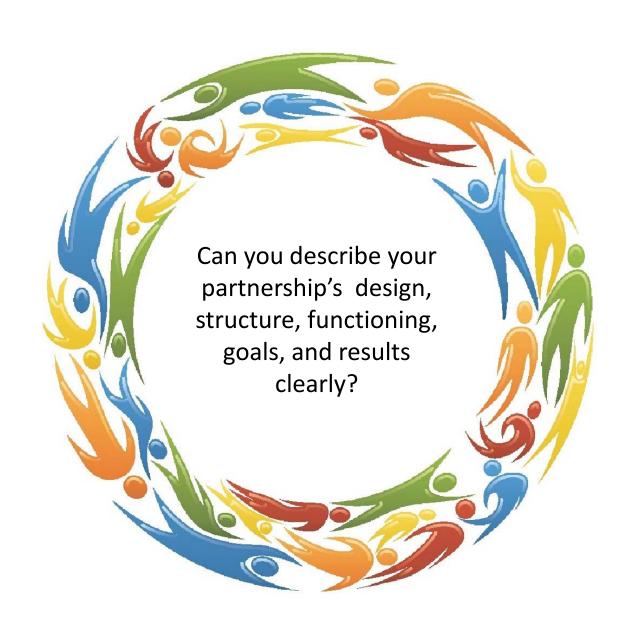
... with proper processes, checks, and testing, a desired outcome can be delivered with fewer problems and unforeseen complications.

http://en.wikipedia.org/wiki/Best_practice

THE GETTING TO OUTCOMES FRAMEWORK



How does this apply to partnerships?

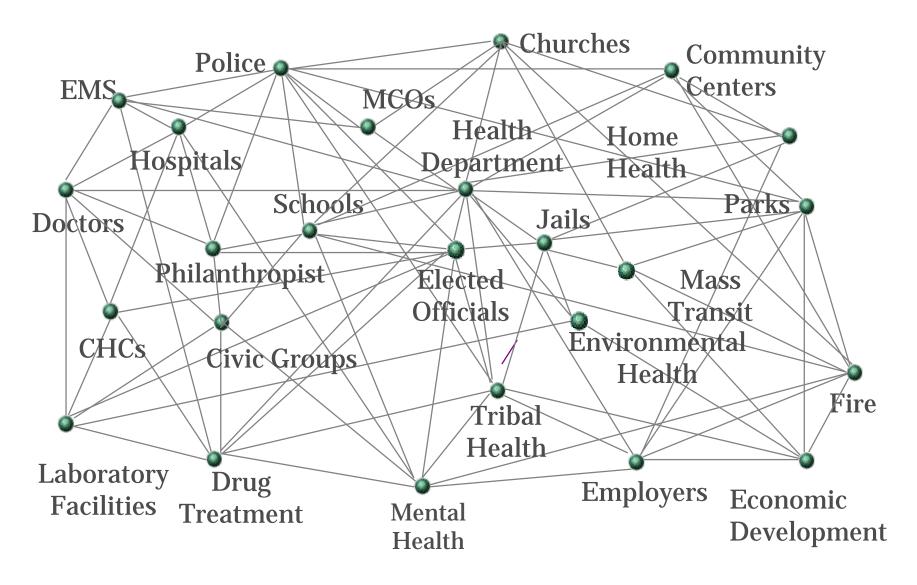


Thinking Activity



- Think about your CDR/FIMR
- Identify 3 of your CDR/FIMR team goals
- How are your current partners helping achieve CDR/FIMR goals?
- Who are you missing in your partnership & why?

Safety Net or Challenge?



Source: Graphic obtained from the NYNJ Public Health Training Center presentation, "A Brief History of Public Health."

To what extent have we made strategic choices about our partnership design?

 All effective coalitions involve strategic relationships

Not all strategic relationships involve coalitions

 We need to learn to manage these relationships effectively

GROWING STRATEGIC, EFFECTIVE COMMUNITY PARTNERSHIPS WITH LESSONS FROM THE GARDEN!



COALITION GARDENING* 101



*The original concept is drawn from the Indian Health Service's Injury Prevention Level-I Curriculum



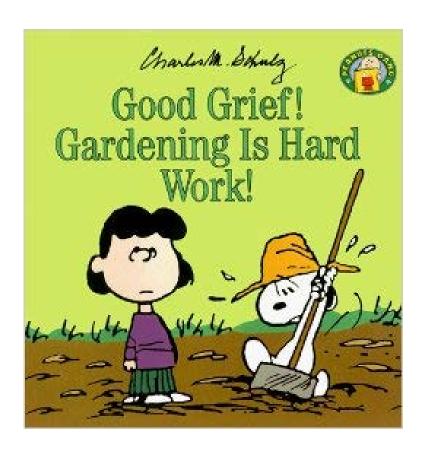
How is building relationships with community partners like gardening?

What must we know?

Do you know what you want to grow, and why? [intended outcomes]



Fact: Even if we have identified exciting community assets maintaining vibrant, productive coalitions is not easy!



Who is going to plan and care for this garden?

- If it's a large garden, you need a team.
- If it's a high-maintenance garden you need resources and expert help

This is your CDR/FIMR partnership's core group or leadership team



What will you put in your garden, and why?



- Perennials
- Annuals
- Other?

Perennials

Your long term members





What can perennials teach us about our long term members?

Annuals



Shorter term collaborators





What can annuals teach us about our shorter term collaborators?

Fill-ins

As-needed contributors





Picture from: Wikipedia Commons

Who, what, when, why?

The investments you make and the impacts you can expect and evaluate will differ depending on the role/place in the garden







Perennials

Annuals

Fill-ins

Gardening is Phasic

- Evaluate before and after each cycle
- What will grow well in this "climate"?
- What grows well next to each other?
- Can you or did you take care of the garden pests?
- Did you protect vulnerable plants?
- Is some plant just too "high maintenance"?
- How will you change next season's plant choice, layout and schedule?

There's so much to learn from our failures!

Gardening involves time, energy, skill, and active

involvement ...



and even then, not everything will grow!

Regular attention and pruning are necessary if you want to promote healthy growth and sustain your garden



Don't Overload Your Garden!

- Don't add partners carelessly
- We may reach a point of diminishing returns, or even overload and collapse

- Stay focused on developing, caring for, and sustaining strategic relationships.
 - These are our resource mobilizers.



"The real voyage of discovery consists not in seeking new landscapes but in having new eyes." Marcel Proust





for everything you do to protect children!

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QUESTIONS



Facebook and Twitter





Save the Date!

February 8, 2017, 2:00 p.m. – 3:00 p.m. Eastern

Fatality Review of Deaths of Infants, Children and Youth with Disabilities and Special Health Care Needs

Guest Speaker: Joan A. Scott, MS, CGC

Acting Director, Division of Children with Special Health Needs

Maternal and Child Health Bureau/ Health Resources and Services Administration



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Thank you!

Additional questions can be directed to info@ncfrp.org



The National Center for Fatality Review and Prevention