NATIONAL CFRP
Center for Fatality Review & Prevention

Navigating State and Local Reviews

Learning Together, Protecting Tomorrows

Housekeeping

Before We Get Started

Recorded Webinar

This webinar is being recorded and will be made available on the National Center's website.

Questions and Answers

Participants are muted. Use the question-and-answer box to ask questions.

Technology Problems

Email the National Center at info@ncfrp.org if you experience tech problems.

Evaluation

Complete a brief evaluation at the conclusion of the session. Scan the QR code to access.

Speakers

The speakers have no financial relationships or interests to disclose.

Susanna Joy, MA

Project Advisor

National Center

Edege Vales, BS

Senior Project Coordinator

National Center

Chanel Killebrew, MSW

Public Health Educator, Oakland County Health Division

About the National Center

Center for Fatality Review and Prevention

Communicate with fatality review teams.

Provide technical assistance, training, and connection.

Develop actionable resources.

Support the National Fatality Review-Case Reporting Systems.

SMRC Structure

One Size Does Not Fit All

Shaping SMRC Teams

Flexible Structures and Team Collaboration

Different Team Structure

Successful suicide mortality review committees (SMRCs) can be organized in different ways.

No "Correct" Team Structure

Different structures have different strengths.

Local or State Success

Local and state teams can create meaningful impact.

Intentionality and Planning

Planning helps teams stay aligned and effective.

Connect with other Teams

Cross-team collaboration builds an impactful network.

Local Level Team

When an SMRC Operates at the Local Level

These teams are often established through grassroots efforts. A local team autonomously reviews deaths, makes recommendations, and works to catalyze prevention.

State Level Team

When SMRC Operates at the State Level

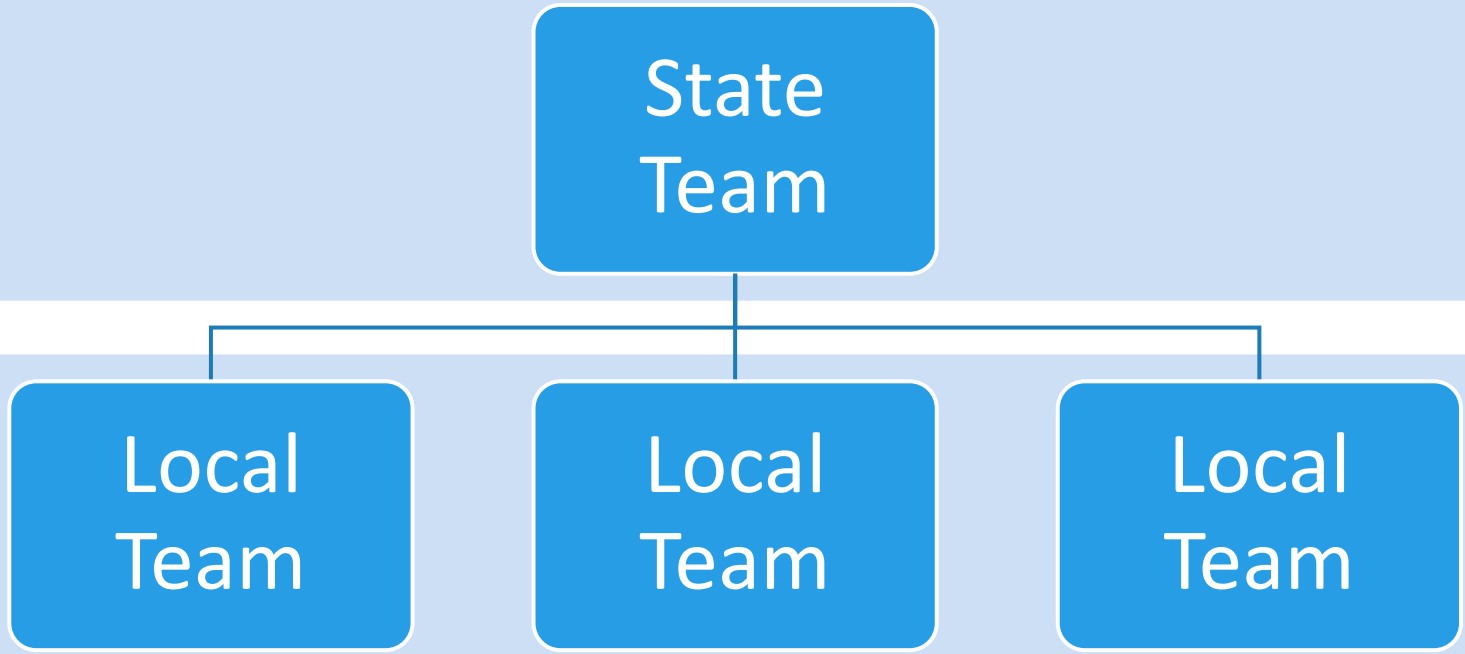
A state team reviews deaths, makes recommendations, and works to catalyze prevention. Their activities are often guided by state or agency policy.

State and Local Team Structure

State Support for Local Teams

State teams may act in an advisory or oversight role. They can review deaths, or work on statewide prevention based on local recommendations.

Local teams review deaths and make prevention recommendations. They may also work on local prevention efforts.



State and Local Partners

Building Alignment Across Agencies

Partners Engaged in SMRC

Common Team Membership

Public Health

Crisis Response Agencies

Schools

District Attorneys

Protective Services (Adult/Child)

Medical Examiners/Coroners

Law Enforcement

Suicide Prevention Coordinator

VA/Military

Emergency Response Agencies

State and Local Coordination

Aligning for Collective Impact

Membership May Differ

Local and state teams differ in membership based on their roles and scopes.

Focus May Differ

The requirements of state and local teams may differ, even if they are in the same jurisdiction.

Coordination is Essential

Ensuring effective alignment can maximize impact in local communities and states.

Local Level Team

Priorities

Local teams focus on specific communities and collaborate with local partners.

State Level Team

Priorities

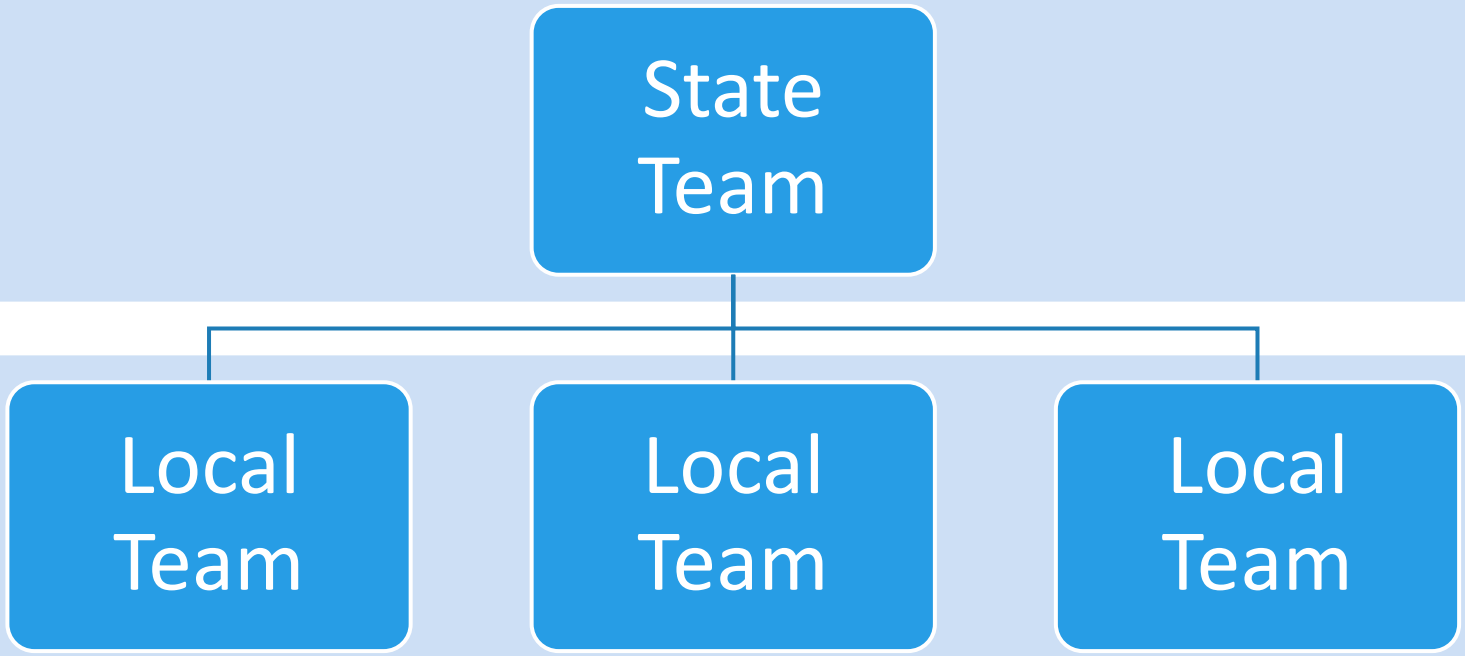
State teams may focus more on statewide prevention and improving policy and practice, including collaborating with state agencies.

Considerations for Collaboration

Understanding Priorities of State and Local Teams

Support local teams by listening, helping address their challenges, building support networks, and identifying resources.

Equip state teams to make large-scale change with quality data and actionable prevention recommendations.



Connecting the Dots

Practice-Based Knowledge

Addressing Suicide Prevention Through Suicide Fatality Review

Chanel Killebrew, MSW
Public Health Educator

OAKLAND COUNTY
SUICIDE FATALITY REVIEW TEAM

OAKLAND COUNTY MICHIGAN
HEALTH DIVISION
DAVID COULTER
OAKLAND COUNTY EXECUTIVE

Objectives

1. Review origins of a local SFR program
2. Learn about IIR Demonstration sites, Framework and Technical Assistance
3. Learn about SFR case reviews and recommendations
4. Identify the challenges of SFR
5. Identify quality assurance strategies to improve effectiveness

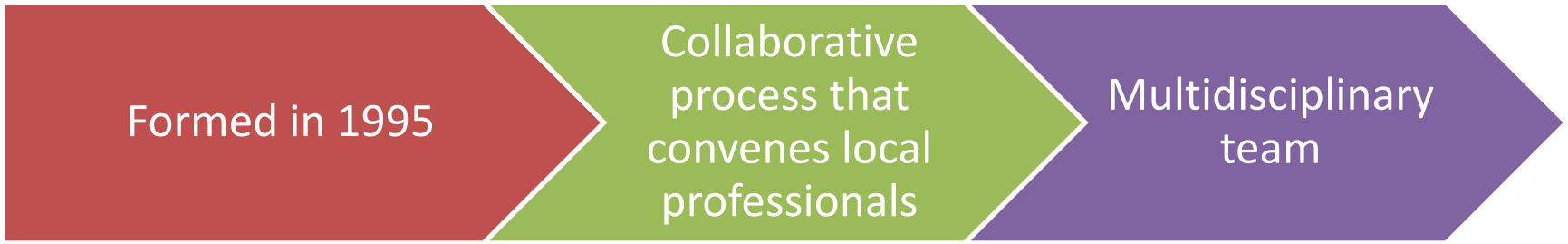
Origins of Oakland County Death Reviews

Conducted by Oakland County Medical Examiner and Oakland County Health Division:

- Child Death Review
- Overdose Fatality Review
- Suicide Fatality Review
- Fetal Infant Mortality Review*

All meetings are confidential and are not subject to the FOIA laws.

Child Death Review



Opioid Fatality Review

Established in 2023

First case review in December 2023

Mission Statement for Michigan Overdose Fatality Review

"The Michigan Overdose Fatality Review Program will prevent drug overdose deaths by examining case-specific underlying circumstances involved, actively seeking feedback from those with lived experience, increasing connections between professionals serving individuals and families affected by substance use, and providing data-driven recommendations to stakeholders at the community, state, and national levels."

Suicide Fatality Review

Established in 2025

Enhance understanding of local suicide trends

Identify missed prevention and intervention opportunities

Implement community-specific suicide prevention strategies

Demonstration Site

One of four organizations selected by the Institute for Intergovernmental Research (IIR)

- Dane County
- Monmouth County
- Ocean County

Case Selection Criteria:

- Justice-involved individuals
- Individuals on community supervision
- Individuals with a history of substance use and mental health conditions
- Law enforcement/public safety professionals

IIR Framework and Technical Assistance

- SFR Framework
- Aggregate Data
- Case Selection
- Data Driven Approach
- Systems Focus
- Accountability and Reporting
- Site Observations
- Monthly Meetings

Establishing SFR

SFR Leadership Team

OFR/SFR Member Roster

Community Partner Engagement

Kick-off Meeting

Interest Survey

Case Review Meetings

SHARED AGREEMENT

LANGUAGE MATTERS

REVIEW OF PRIOR CASE RECOMMENDATIONS

DATA OVERVIEW

Shared Agreement

S **Shared understanding**. SFRs increase members' understanding of area agencies' role and services as well as the community's assets and needs, suicides and suicide trends, current activities and system gaps.

O **Optimized capacity**. SFRs increase the community's overall capacity to prevent future suicide deaths by leveraging resources from multiple agencies and sectors to increase system-level response.

S **Shared accountability.** SFRs continually monitor local suicide death data as well as recommendation implementation activities. Status updates on recommendations are shared at each SFR team meeting and with a governing committee, reinforcing accountability for action.

Language Matters

SAY THIS	INSTEAD OF THIS
Person with a mental health condition	Mentally ill, Psycho, Crazy, Lunatic, Suffers from mental illness
Person with schizophrenia, etc.	Schizophrenic, etc.

Language Matters

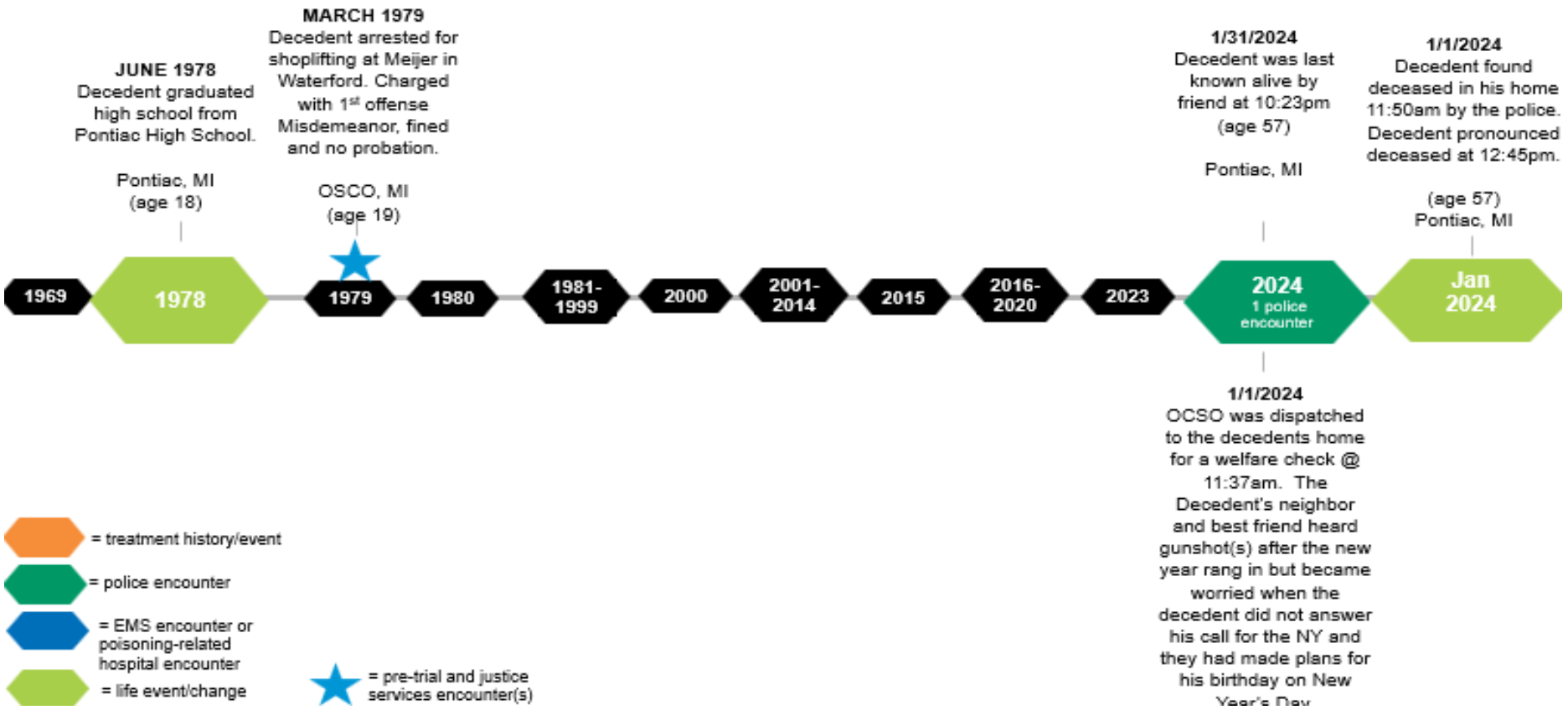
SAY THIS	INSTEAD OF THIS
Died by suicide	Committed suicide, Completed suicide
Took their life; Killed themself.	Successful suicide
Survived a suicide attempt	Failed suicide attempt

SFR Case Reviews as Demonstration Site

Case Review Meetings

- July - October
- 5 cases total (2 were law enforcement cases)
- 3 Males and 2 Females
- Middle-aged (50-65 years old)
- Mixed gender and socio-economic status
- Mixed method of means (firearm, suffocation, etc.)

Decedent Timeline

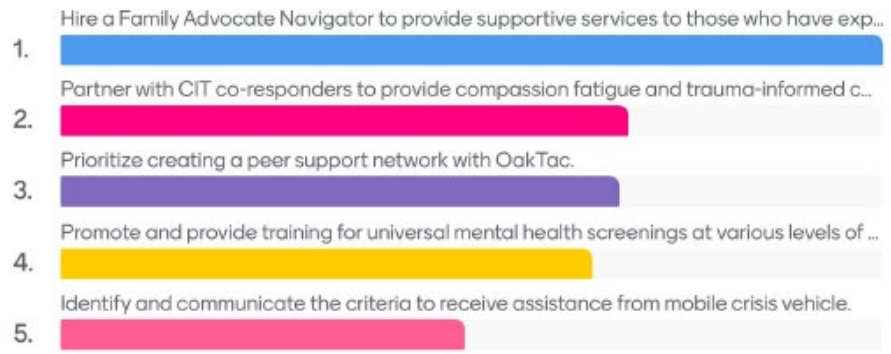


Prioritization Survey Discussion and Activity

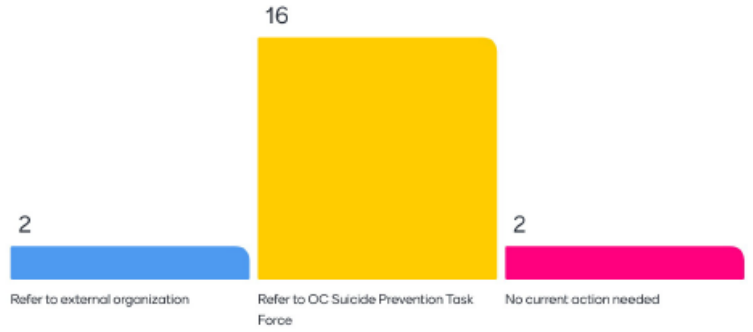
Criteria	1 - Lowest	2 – Medium low	3 - Medium	4 – Medium high	5 - Highest
Resource availability/ accessibility	Resources are sufficient and widely accessible to all	Adequate resources exist and are mostly accessible or barriers exist for some populations	Some resources exist but access is uneven or limited	Few resources exist and are difficult to access for most populations	No resources exist or significant access barriers are present for all or most populations
Urgency/ time sensitivity	Minimal urgency or time sensitivity	Low urgency or time sensitivity	Moderate urgency or time sensitivity	Medium high urgency or time sensitivity	High urgency or time sensitivity
Actionability/ feasibility (i.e. ability to address at local level, connection to necessary stakeholder, barriers for implementation)	Not actionable, major barriers exist and there is little to no local control	Low feasibility, significant barriers exist but may have some actionability at the local level	Some feasibility, moderate barriers but potential for action at the local level	Mostly feasible, likely few barriers and high potential for action at the local level	Highly actionable, clear pathway and strong local control
Existing evidence	Little or no supporting evidence for action	Limited or weak evidence base for action	Moderate evidence base for action	Strong evidence for action	Robust, high-quality evidence strongly supports action
Equity/ reduction of disparities	Unlikely to impact inequities	Minimal impact on inequities	Some potential to reduce disparities	Likely to address key equity issues	Highly likely to directly target and address root causes of inequity

Quality Assurance

Please rank the top 5 recommendations.



Expand community collaborations with Oakland Connects Program.



Challenges


No Legislation/ Protections
Next-of-kin interviews
Obtaining information from providers
Obtaining information on major life events of the deceased

Quality Assurance

2026 Schedule/Structure Overview

Website Conversion

SFR Newsletter

Lessons to Share

RELATIONSHIPS

TIME MANAGEMENT

DESIGNATED ROLES

DOCUMENT SHARING

SELF-CARE TIPS OR DEBRIEF OPPORTUNITIES

Lessons to Share: Self-care tips

Create: Boundaries with media consumption, limit exposure, avoid replaying the review in your mind

Rest: Prioritize sleeping and relaxation

Calmness: Listen to music, Yoga, Meditate, Take a bath, breathing exercises

Connect: Spend time with loved ones, share experiences, spend time with your pet

Engage: Participate in activities that bring you joy - bike riding, skating, journaling, gardening, etc.

Questions???

Contact Information

Chanel Killebrew, MSW
Public Health Educator
Oakland County Health Division
killebrewc@oakgov.com

oakgov.com/SuicidePrevention

OAKLAND COUNTY MICHIGAN

HEALTH DIVISION

North

Oakland Health Center

1200 N. Telegraph Rd

Pontiac, MI 48341

Phone: 248.858.1280

South

Oakland Health Center

27725 Greenfield Rd

Southfield, MI 48076

Phone: 248.424.7000

NURSE ON CALL PUBLIC HEALTH INFORMATION

800.848.5533 NOC@OAKGOV.COM

OAKGOV.COM/HEALTH @PUBLICHEALTHOC

DAVID COULTER

OAKLAND COUNTY EXECUTIVE

The Oakland County Health Division will not deny participation in its programs based on race, sex, religion, national origin,age or disability. State and federal eligibility requirements apply for certain programs.

Please complete an evaluation using the link in the chat, or by scanning the QR code above.

Thank You for Your Time!

SMRC@ncfrp.org

2436 Woodlake Circle,
Okemos, MI 48864

1-800-656-2434

SMRC@ncfrp.org