Meeting Results:
By the end of the meeting the CRT will:
- Review the case collectively during the FIMR Abstractor team presentation
- Following the review, deliberate collectively on the contributing factors, strengths and suggestions
- Collectively determine if the death was preventable
- Formulate recommendations to be shared with the Community Action Group (CAG)

Meeting Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Kathy Wall</td>
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<td>Kristin Thomas</td>
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Collective Case Deliberation/Review Notes

Case #52:

Significant Issues/Present and Contributing Factors:

1. Preconception/Medical History of Mother
   - Single parent
   - Smoking/tobacco use
   - Group B strep
   - No documentation of smoking cessation in medical record
   - Unintended/unwanted pregnancy
   - Lack of family support
   - Lack of FOB involvement
   - Missing data
   - Lack of home visiting (eligible)

2. Medical: Fetal/Infant
   - N/A

Strengths:

- Medicaid
- Employed
- Breastfeeding, childbirth, & parenting education
- Early entry into PNC
- Attempted to reduce amount of cigarette smoking

Gaps in Service Delivery or Community Resource Systems:

- No bereavement support/referral noted in medical records. Lack of smoking cessation education/referral in medical file. Missed opportunities for appropriate referrals.
Recommendations:

- Referral for smoking cessation. Provider should refer patient to a
- Educate patients/community on the effects of smoking especially during pregnancy
- Referral to support group for smoking cessation
- Better documentation of issues or concerns during pregnancy and appropriate referrals to needed services in medical records

Was this death preventable: Preventable

Case #53

Significant Issues/Present and Contributing Factors:

1. Preconception/Medical History of Mother
   - Single parent
   - Unsafe sleep practice/location
   - Multiple stressors
   - Chorioamnionitis
   - Obese
   - Previous SABs or miscarriage
   - Recent moved (mom kicked out of parents’ home)
   - Unintended pregnancy
   - Lack of family support
   - Problems with family/relatives
   - Financial stressors (concerns about enough money)
   - Baby should have
   - Lack of home visiting (eligible)

2. Medical: Fetal/Infant
   - Poor weight gain

Strengths:

- Medicaid & WIC
- Employed
- Enrolled in school
- Postpartum visit kept
- FOB involvement
- Updated pediatric appts & immunization
- Family support/FOB family
• Breastfeeding
• Crib in the home
• Attachment & bonding

Gaps in Service Delivery or Community Resource Systems:

• No bereavement support/referral provided in the hospital was not up to date. Mom was unable to make contact because incorrect information. Patient was not aware of Medicaid waiver information. She was not able to follow-up with a medical provider after postpartum visit.

Recommendations:

• Medical case management referral/services after discharge
• Ensure that all bereavement info/resources/referral are up to date
• Providers should ask more probing questions/follow-up to ensure that patient is getting appropriate information and referrals.
• Provide ongoing and comprehensive infant safe sleep education to all caregivers (prenatal postpartum & during pediatric appointments)
• Ensure patient is in optimal health and a healthy weight before, during and after pregnancy