Annual Legislative Report October 1, 2023



Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD State Surgeon General



Mission

To protect, promote, and improve the health of all people in Florida through integrated state, county and community efforts.

Vision

To be the Healthiest State in the Nation.

Values

Innovation: We search for creative solutions and manage resources wisely.

Collaboration: We use teamwork to achieve common goals and solve problems.

Accountability: We perform with integrity and respect.

Responsiveness: We achieve our mission by serving our customers and engaging our partners.

Excellence: We promote quality outcomes through learning and continuous performance improvement.



Fetal and Infant Mortality Reviews



Fetal and Infant Mortality Review (FIMR) is a community-based, action-oriented process aimed at improving services, systems, and resources for women, infants, and families. FIMR convenes experts within communities that examine confidential, de-identified cases of fetal and infant deaths to help understand root causes and factors that impact child outcomes. These findings become preventative measures, implemented at the community level, to improve birth outcomes for babies in the state.

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Executive Summary

The Florida Department of Health (Department) presents this inaugural report to the Governor, the President of the Senate, and the Speaker of the House of Representatives, as required by section 383.21625, Florida Statutes. During the 2022 legislative session, section 383.21625, Florida Statutes, was enacted. This legislation requires the Department to contract with Healthy Start Coalitions (Coalitions) for the creation of FIMRs in all regions of the state to improve fetal and infant mortality and morbidity. FIMR is an evidence-based process that reviews fetal and infant deaths, formulates programs, and influences policy that will lead to improving pregnancy and birth outcomes. The goal of FIMR is to assess, monitor, and improve service systems and resources for women, infants, and families. Each FIMR must:

- Review and analyze rates, trends, causes, and other data related to fetal and infant mortality and morbidity in a geographic area.
- Develop findings and recommendations for interventions and policy changes to reduce fetal and infant mortality and morbidity rates.
- Engage with local communities and stakeholders to implement recommended policies and procedures to reduce fetal and infant mortality and morbidity.
- Report the findings and recommendations developed by each FIMR to the Department annually.

The report includes findings and recommendations developed by each FIMR from fetal and infant deaths that occurred in calendar year 2022, reviewed by FIMRs during Fiscal Year (FY) 2022-2023. The report includes:

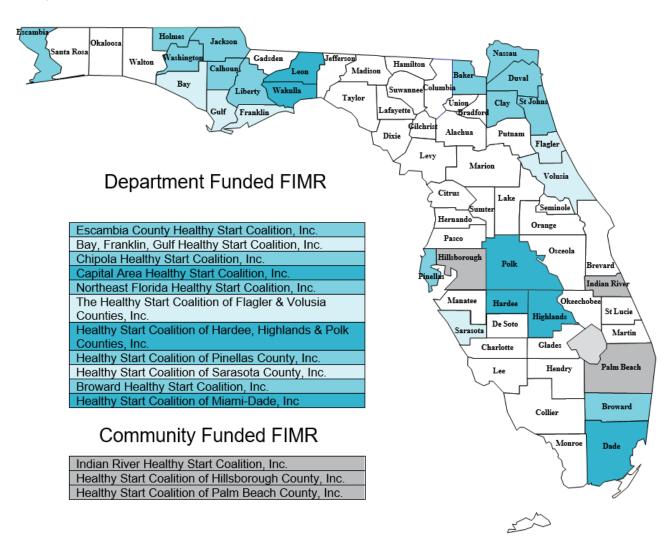
- A background of FIMR and related Florida statutes.
- An explanation of statewide implementation of FIMRs.
- A summary of the FIMR process, including its relevance to improving fetal and infant outcomes.
- Identified factors experienced by families that may increase their risk of poor outcomes.
- A summary of statewide and regional data.

Background

The Department contracts with 32 non-profit Coalitions, and the Desoto County Health Department, for Florida's Healthy Start program. Coalitions provide coordinated intake and referral services (CONNECT); parenting education and support for pregnant and postpartum women, and fathers, through home visits; and connection to community resources. Priorities of Florida's Healthy Start program are to improve health outcomes during and after pregnancy and promote the safe and healthy development of babies and toddlers.

Prior to FY 2022-2023, 14 Coalitions implemented FIMR within their respective service areas, as reflected in Figure 1. Three of the 14 Coalitions funded FIMR using community resources while the other 11 were funded by the Department using funds supported by the Title V Maternal and Child Health (MCH) Block grant. The outcomes of local implementation provided the foundation, including key strategies, for statewide expansion.

Figure 1. FIMR Map Prior to FY 2022-2023



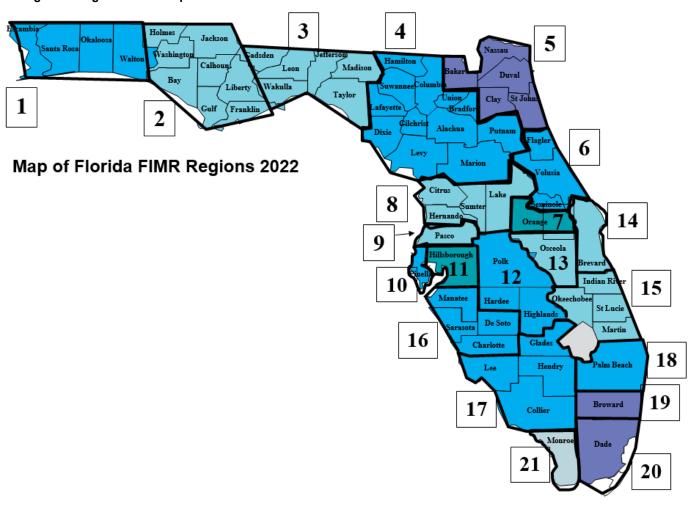
Implementation

FIMR Structure

The Department's Division of Community Health Promotion, Bureau of Family Health Services, MCH Section, is responsible for coordination and oversight of FIMR. Following the enactment of section 383.21625, Florida Statutes, the MCH Section convened a group of internal and external partners, including Coalitions and the Florida Association of Healthy Start Coalitions, to develop a statewide FIMR structure in the state that would include all 32 Coalitions.

It was determined that statewide FIMR expansion would be implemented in 21 regions, covering the entire state, as indicated in Figure 2. Some regions consist of a single Coalition while others include multiple Coalitions. Regional implementation allows FIMRs to maintain case confidentiality and leverage local resources. Multiple factors were considered when determining the regions. These include urban or rural areas, total number of Coalitions, available funding, public access to perinatal health care, and average number of fetal and infant deaths that occur within the region. Of the 21 FIMR regions, 15 are comprised of a single Coalition. The remaining six regions include multiple Coalitions that collaborated to implement FIMR. Additionally, statewide FIMR expansion will more than double the number of fetal and infant cases reviewed from prior years, with the number required varying, based on the number of fetal and infant deaths over a five-year span.

Figure 2. Regional FIMR Map



Allocation Methodology

A goal of the Department was to identify a data-driven allocation methodology for dissemination of funds via contracts with Coalitions. In FY 2022-2023, the Department received general revenue funds to support implementation of FIMR statewide in the amount of \$1,602,000. The Department devised an allocation methodology that contemplates the average number of combined fetal and infant deaths that occurred within each region over a five-year span for proportionate regional funding.

Contract Requirements

In FY 2022-2023, the Department amended contracts with Coalitions for FIMR-related activities. Contract tasks and deliverables were added to include:

- A specified number of FIMR cases to be reviewed annually.
- Participation in required monthly technical assistance calls.
- Identification and assignment of roles and responsibilities for medical record abstractions, coordination responsibilities, and program oversight.
- Implementation of FIMR reviews, to include the development of recommendations.
- Development and implementation of community actions to positively impact fetal and infant outcomes.

Training and Technical Assistance Plan

The Department identified an existing staff member to serve as the Statewide FIMR Coordinator for FIMR-related activities and questions, as well as guide the FIMR process. The Statewide FIMR Coordinator developed and implemented a comprehensive training plan for Coalitions that promotes consistency in statewide implementation. The trainings provided information on the national framework components, contractual requirements, data processes, and best practices. Additionally, the Department contracted with a FIMR subject matter expert to provide one on one training and technical assistance to Coalitions. Further guidance was also sought, and provided, by the National Center for Fatality Review and Prevention (National Center).

FIMR Framework

The Department adopted the national FIMR framework, illustrated in Figure 3, as the guide for implementation in Florida. The framework includes an ongoing cycle of improvement that for health providers, systems, and the community, as a whole.

Figure 3. FIMR Framework

Cycle of Improvement

FIMR is Continuous Quality Improvement

Data Gathering

Information is collected from a variety of sources, including family/parental interview, medical records, prenatal care, home visits, WIC, and other social services.

Changes in Community Systems

As the physical, health care, and social environment for childbearing families improves, outcomes, over time, will be better.



Case Review

The multidisciplinary Case Review
Team reviews the case to identify
barriers to care and trends in service
delivery and ideas to improve policies
and services that affect families.

Community Action

The Community Action Team receives the recommendations from the review team and is charged with developing and implementing plans leading to positive change within the community.

National Center for Fatality Review and Prevention (2021, December 1). Fetal and Infant Mortality Review Manual A Guide for Communities. Https://Ncfrp.org/. Retrieved March 31, 2023, from https://ncfrp.org/wp-content/uploads/NCRPCD-Docs/FIMRManual.pdf



Data Gathering

Information is collected from a variety of sources, through family/parental interviews, medical records, prenatal care records, home visits, and other services accessed by the family.

The FIMR process is built on the foundation of identifying and gathering information on occurrences of fetal and infant loss, referred to as "cases". Fetal and infant case information is obtained from the Department of Health, Bureau of Vital Statistics. In order to assist FIMRs with and shared case identification the Department streamlined an automated process. Prior to statewide FIMR implementation, Coalitions with FIMRs were obtaining fetal and infant death certificates by routinely traveling to their county health departments to pick up printed copies, which were then delivered to medical abstractors to begin case development. Teams at the Department collaborated to identify a method of secure, electronic record identification and delivery to each of the twenty-one FIMR regions. The process provides the most recent fetal and infant death certificates, and the linked birth certificates, monthly.

The Department developed the following guidelines for case selection:

- Cases should first be grouped by the underlying cause of death. The underlying cause of death is the event that initiated the chain of events that led to the loss.
- Cases selected should be diverse based on identified variables such as age at death, birthweight, racial-ethnic background, socio-economic background, and location (county and zip code).
- After cases are selected, they are assigned to a medical abstractor who is responsible
 for identifying the pertinent medical and social histories to tell the story of the family and
 their experiences leading to the loss.

The Department has continued, as well as expanded, its partnership with the National Center, a program housed at the Michigan Public Health Institute. The National Center serves not only as the technical support and data center for FIMR, but also for Child Death Review (CDR) programs throughout the United States. The National Center hosts online learning modules, publishes guidance reports, and facilitates multiple monthly and quarterly online calls for FIMRs and CDRs for collaboration and support.

The expanded Data Use Agreement with the National Center allows all FIMRs operating under section 383.21625(3), Florida Statutes, to input gathered information into the National Fatality Review Case Reporting System (NFR-CRS). The NFR-CRS is the database hosted by the National Center providing data storage and allowing for further analysis at regional and state levels.



Case Review

The multidisciplinary Case Review Team reviews cases to identify barriers to care and trends in service delivery and bring ideas to improve policies and services that affect families.

A multidisciplinary team, called the Case Review Team (CRT), is convened to review the deidentified case details for the purpose of identifying gaps in services, protective and contributing factors. CRT members are then challenged to develop recommendations for enhancements of services at the individual, provider, and community levels to improve fetal and infant outcomes. As cases are reviewed, the CRT identifies factors that are considered either protective or possibly contributing to poor outcomes. Protective factors include services received by the mother or the family that promote healthy pregnancies and birth outcomes. Examples of protective factors include prenatal care, home visiting services, and health insurance. Contributing factors are elements that increase the risk of a poor outcome. Examples of contributing factors include maternal pre-existing conditions, preterm labor, or other fetal or infant medical conditions. The identification of protective and contributing factors guides the development of recommendations to improve gaps in services.

The CRT reviews cases from all counties within the region and includes representation from all Coalitions within the region. It also includes representation of medical and agency professionals that provide health care services and resources to families within the community. Examples of membership include:

- Pediatricians
- Obstetricians
- Maternal Fetal Medicine Specialists
- Neonatologists
- Family Practice Physicians
- Social Workers with MCH experience
- County Health Departments
- Perinatal Data Experts
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) staff
- Medical Examiner
- Hospital Administrators
- Social Service Agencies
- Others with MCH background and experience

Within each of the 21 regions, there is one CRT, coordinated by a designated lead Coalition. The lead Coalition was determined by the Department based on areas that had a previous operational FIMR and/or the Coalition with a greater number of fetal and infant deaths over the last five years. This lead Coalition is responsible for overseeing the completion of tasks leading up to and including case review meetings. This includes the process of case selection, case development, data entry, recruitment of medical abstractors and CRT members, and coordinating meeting events. Figure 4 identifies the Coalitions that are responsible for CRTs.

Figure 4. FIMR CRT Leads

FIMR		N. J. J. W. W. G. J. G. W.
Region 1	Lead Healthy Start Coalitions Escambia County Healthy Start Coalition, Inc.	Non-Lead Healthy Start Coalitions Healthy Start Coalition of Santa Rosa County, Inc. Healthy Start Coalition of Okaloosa & Walton Counties, Inc.
2	Bay, Franklin, Gulf Healthy Start Coalition, Inc.	Chipola Healthy Start Coalition, Inc.
3	Capital Area Healthy Start Coalition, Inc.	 Gadsden County Healthy Start Coalition, Inc. Healthy Start Coalition of Jefferson, Madison, & Taylor Counties, Inc.
4	Healthy Start of North Central Florida, Inc.	N/A
5	Northeast Florida Healthy Start Coalition, Inc.	N/A
6	The Healthy Start Coalition of Flagler and Volusia Counties, Inc.	Healthy Start Coalition of Seminole County, Inc.
7	Healthy Start Coalition of Orange County, Inc.	N/A
8	Central Healthy Start, Inc.	N/A
9	Healthy Start Coalition of Pasco County, Inc.	N/A
10	Healthy Start Coalition of Pasco County, Inc.	N/A
11	Healthy Start Coalition of Hillsborough County, Inc.	N/A
12	Healthy Start Coalition of Hardee, Highlands, & Polk Counties, Inc.	N/A
13	The Healthy Start Coalition of Osceola County, Inc.	N/A
14	Healthy Start Coalition of Brevard County, Inc.	N/A
15	Indian River Healthy Start Coalition, Inc.	 Healthy Start Coalition of St. Lucie County, Inc. Martin County Healthy Start Coalition, Inc. Okeechobee Healthy Start Coalition, Inc.
16	Healthy Start Coalition of Sarasota County, Inc.	 Charlotte County Healthy Start Coalition, Inc. Desoto County Health Department Healthy Start Coalition of Manatee County, Inc.
17	Healthy Start Coalition of Southwest Florida, Inc.	N/A
18	Healthy Start Coalition of Palm Beach County, Inc.	N/A
19	Broward Healthy Start Coalition, Inc.	N/A
20	Healthy Start Coalition of Miami-Dade, Inc.	N/A
21	Florida Keys, Healthy Start Coalition, Inc.	N/A

N/A- there are no additional Coalitions within the region.



Community Action

The Community Action Group receives the recommendations from the CRT and is charged with developing and implementing plans leading to positive change within the community.

The next step in the FIMR cycle is implementation of a Community Action Group (CAG). This group plans and implements local action steps, based on the CRT recommendations, to improve fetal and infant outcomes. Each Coalition is responsible for recruiting and coordinating members for a CAG. The CAG includes individuals with the ability and/or resources to affect large-scale system change and impact on community change. Examples of membership on CAGs include:

- Healthy Start Coalitions
- Obstetric, Gynecologic, and Pediatric Health Care Providers
- Hospital Administrators
- County Health Departments
- Social Service Agencies
- Members of City Council
- Chamber of Commerce
- Local March of Dimes Chapter
- Community Advocates

The 21 FIMR regions include 33 CAGs. Each CAG is responsible for reviewing the recommendations received from the regional CRT, quarterly. During the year, the CAGs identify strategies to implement recommendations into existing programs or develop new initiatives. Each CAG identifies local and regional partnering organizations, agencies, and individuals, that assist with moving implementation of recommendations forward to achieve goals for local system improvements.



Changes in Community Systems

Changes implemented at the community level result in improved outcomes for families.

The final phase of the FIMR process is the enactment of solutions. FIMRs demonstrate process changes at the community level that include improvements in policies, procedures, availability of services, and reduction of barriers to access services. Through the FIMR process, the community is empowered to positively improve fetal and infant health outcomes. Examples include increased home visiting services, expansion of doula services, and increased partnerships with community and faithed-based organizations.

Fetal and Infant Mortality Data

Fetal Data

Fetal mortality, or stillbirth, is the death of a fetus at 20 weeks or more of gestation. The fetal mortality rate is calculated by the number of fetal deaths divided by the number of live births plus fetal deaths x 1,000. Figure 5 displays the state's fetal mortality rates by race and ethnicity. Figure 6 identifies the leading causes of fetal mortality in the state. Figure 7 displays the calculated average fetal mortality rate of the FIMR regions.

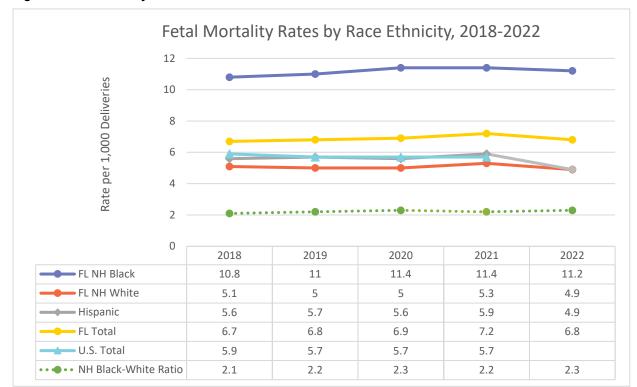


Figure 5. Fetal Mortality Rates

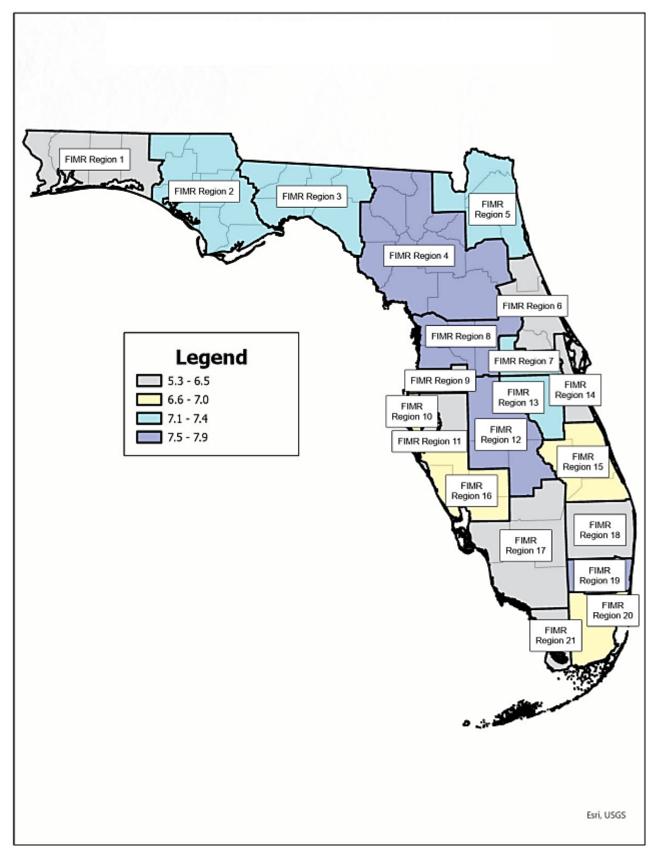
Source: Florida data obtained from FLHealthCHARTS. United States data obtained from CDCWONDER; 2021 data are the most current available.

Figure 6. Fetal Mortality Causes, 2018-2022

Cause of Death	Count	Percent
Complications of Placenta, Cord and Membranes	2,251	29.8%
Maternal Complications of Pregnancy	1,172	15.5%
Unspecified Cause	998	13.2%
Maternal Conditions That May Be Unrelated to Present Pregnancy	952	12.6%
Congenital Malformations, Deformations and Chromosomal		
Abnormalities	706	9.3%

Source: FLHealthCHARTS

Figure 7. Average Fetal Mortality Rate by FIMR, 2018-2022



Infant Data

Infant mortality is the death of a live-born baby during the first year of life. The infant mortality rate is calculated by the number of infant deaths divided by the number of live births x 1,000. Figure 8 displays state infant mortality rates by race and ethnicity. Figure 9 identifies the leading causes of infant mortality in the state. Figure 10 displays the calculated average infant mortality rate of the FIMR regions.

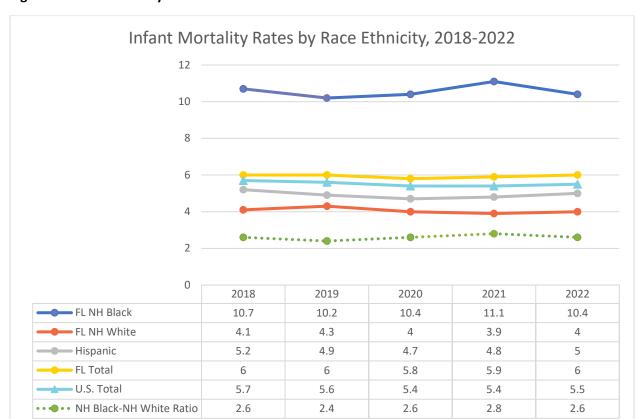


Figure 8. Infant Mortality

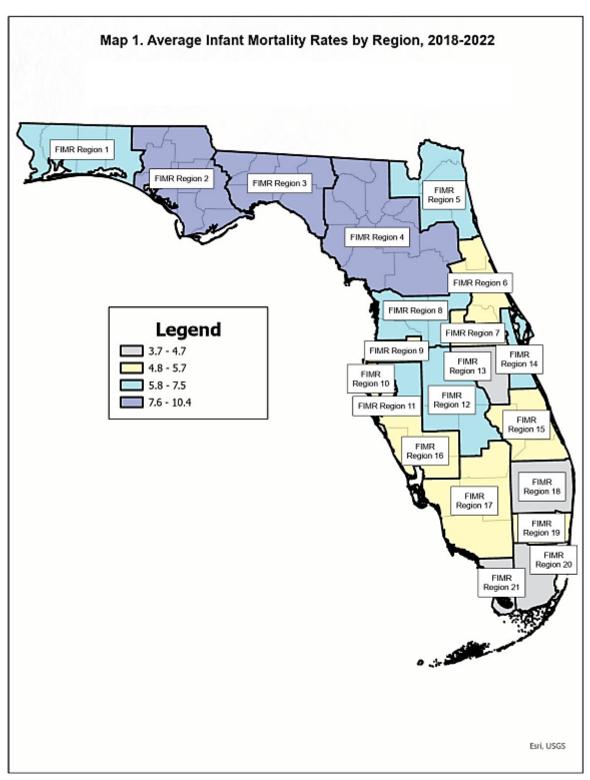
Source: Florida data obtained from FLHealthCHARTS. United States data obtained from CDCWONDER.

Figure 9. Infant Mortality Causes, 2018-2022

Cause of Death	Count	Percent
Perinatal Period Conditions	3,361	51.9%
Congenital Malformations, Deformations and Chromosomal		
Abnormalities	1,178	18.2%
Other Causes of Death	1,003	15.5%
Unintentional Injury	513	7.9%
Heart Diseases	108	1.7%

Source: FLHealthCHARTS

Figure 10. Average infant mortality rate by FIMR region, 2018-2022



Source: Florida data obtained from FLHealthCHARTS. United States data obtained from CDCWONDER.

FIMR Regional Profiles

The following profiles reflect fetal and infant mortality data for each FIMR region. The rates reported in the tables on the left were tested to determine if changes observed between 2018 and 2022 were statistically significant. The data reported in the regional profiles are not statistically significant, unless otherwise noted where applicable. The data used in these tables were obtained from FLHealthCHARTS: birth counts, fetal death counts, and infant death counts.

Listed below are definitions and terms to support the review of the regional profiles.

Term	Definition
Fetal death count	A count of the fetal deaths whose mothers are Florida residents.
Fetal mortality rate	The number of fetal deaths divided by the number of live births plus fetal deaths x 1,000.
Infant death count	A count of infant deaths (0-364 days of life) to Florida residents.
Infant mortality rate	The number of infant deaths divided by the number of live births x 1,000.

Cause of Death	Examples and Definitions
Bacterial sepsis of newborn	Examples: Congenital sepsis, streptococcus, group B, staphylococcus aureus
	Sepsis in newborns, or neonatal sepsis, is a serious medical condition that occurs when a baby younger than 28 days old has a life-threatening response to an
	infection. Bacterial infections are the most common cause of neonatal sepsis.
	Source: https://my.clevelandclinic.org/health/diseases/15371-sepsis-in-newborns
Complications of placenta,	Examples: Placenta previa, placental separation, prolapsed cord
cord and	Complications of placenta, cord and membranes are when the physical condition of
membranes	the umbilical cord, placenta, or uterus affects the developing fetus. This could include placenta previa, prolapsed cord, or chorioamnionitis.
	Source: https://www.aapc.com/codes/icd-10-codes/P02
Congenital malformations,	Examples: Spina Bifida, neural tube defects, down syndrome
deformations,	Congenital Malformations, Deformations and Chromosomal Abnormalities are
and .	abnormalities of body structure, body function, or chromosomes. Congenital
chromosomal abnormalities	malformations and deformations can exist anywhere in the body, and include things like neural tube defects, spina bifida, and epidermolysis bullosa. Chromosomal abnormalities can include conditions such as Trisomy 18, Down Syndrome, and
	Turner's syndrome.
	Source: https://www.who.int/news-room/fact-sheets/detail/birth-defects
Diseases of the	Examples: Rheumatic fever without heart involvement, myocarditis, pericarditis
circulatory system	Source: https://www.aapc.com/codes/code-search/
System	Circulatory system diseases are any conditions that affect your heart or blood
	vessels. A problem with one part of your circulatory system can have a ripple effect
	on your entire system and, ultimately, the entire body.
	Source: https://my.clevelandclinic.org/health/articles/23489-circulatory-system-
	diseases#:~:text=Circulatory%20system%20diseases%20are%20any,blood%20mov
	ing%20in%20your%20body.

Disorders related to short gestation and	Examples: Newborns with a birth weight of 750-1000 grams, newborns with a birth weight of 500-750 grams, newborns with a birth weight of 500 grams or less, newborns born before the 37 th week of pregnancy
low birth weight	,,
Ton Zinar mongrid	Preterm infants are born at less than 37 weeks gestational age and low birth weight infants are born with a birth weight below 2.5 kg regardless of gestational age. Preterm and low birth weight infants have a higher risk of developmental disabilities including cerebral palsy and retinopathy of prematurity.
	Source: https://www.who.int/teams/maternal-newborn-child-adolescent-health-and-
	ageing/newborn-health/preterm-and-low-birth-weight#:~:text=Preterm%20infants%20are%20born%20at,low%20birth%20weight%
114	20each%20year.
Heart diseases	Examples: Acute rheumatic fever, cerebrovascular disease, pulmonary heart disease
	Heart disease refers to any disease or condition that affects the heart. This could include acute rheumatic fever, cerebrovascular disease, pulmonary heart disease, or a number of other conditions. Source: https://www.aapc.com/codes/icd-10-codes-range/I00-I99/
Influenza and	Examples: Influenza due to identified and unidentified influenza viruses, viral
pneumonia	pneumonia, bacterial pneumonia
	Influenza (flu) is a highly contagious respiratory illness causes by viruses. Pneumonia is a serious infection or inflammation of the lungs, which can block oxygen from reaching the bloodstream.
	Source: https://www.lung.org/lung-health-diseases/lung-disease-
	lookup/pneumonia/what-is-the-connection
Maternal complications of pregnancy	Examples: Periodontal disease, Group B streptococcus, or another medical condition.
, ,	Maternal complications of pregnancy are health problems that occur during pregnancy that affect the mother. This can include complications from group b streptococcus infections, periodontal disease, unspecified complications from
	surgery or medical care, complications from prosthetic devices, and more.
.	Source: https://www.aapc.com/codes/icd-10-codes/P00.8
Maternal conditions that may be unrelated to	Maternal Conditions That May Be Unrelated to Present Pregnancy Examples: Related to complications with eclampsia, maternal infection, or maternal existing health condition
present	Maternal conditions that may be unrelated to present pregnancy is when a fetus is
pregnancy	affected by a medical condition of the mother. They can be affected by maternal
programoy	hypertensive disorders, such as preeclampsia, maternal traumatic injury, or an
	infectious disease acquired by the mother, such as salmonella.
	Source: https://www.aapc.com/codes/icd-10-codes/P00
Other causes of death	Examples: Osteomyelitis, Creutzfeldt-Jakob disease, Smallpox
	Other causes of death includes a wide variety of issues. It could involve
	osteomyelitis, smallpox, chickenpox, or a number of other conditions.
	Source:
	https://www.flhealthcharts.gov/FLQUERY_New/Documents/InfantDeathQ_Data_Dictionary.pdf
Perinatal period conditions	Examples: Low birthweight, birth asphyxia, infection
	Perinatal period conditions refer to medical conditions that arise just around the time of birth. For infants, this includes conditions such as low birthweight, birth asphyxia, and infection. Low birthweight can cause several different issues, including respiratory distress syndrome, jaundice, hypoglycemia, and multiple other

	conditions. Birth asphyxia refers to absent or depressed breathing at the time of birth. Source: https://www.ncbi.nlm.nih.gov/books/NBK11742/table/A3602/?report=objectonly
Sudden infant death syndrome	Examples: Cot death, crib death, sudden unexplained or unexpected death in infancy
	Sudden Infant Death Syndrome (SIDS) is the term used to describe the sudden death of a baby younger than 1 year of age that doesn't have a known cause, even after a full investigation.
	Source: https://safetosleep.nichd.nih.gov/about/sids-definition#:~:text=Sudden%20Infant%20Death%20Syndrome%20(SIDS,figure%20out%20what%20caused%20them.
Unknown	Examples: Newborn suspected to be affected by maternal injury, Neonatal cardiac failure, latrogenic neonatal hypoglycemia
	Deaths of unknown cause and group. Source: https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/Downloads/ICD-10-IOCE-Code-Lists.pdf
Unintentional injuries	Examples: Drowning, fall, firearm discharge
injunes	Unintentional injuries are deaths due to accidental or unintended causes. This covers a wide range of causes, and can include drowning, falls, firearm discharge, respiratory tract obstruction, and more. Source:
	https://www.flhealthcharts.gov/FLQUERY New/Documents/InfantDeathQ Data Dictionary.pdf
Unspecified cause	Examples: Causes that cannot be medically determined
Sado	Death due to unspecified cause is a code used when the medical providers attending the case cannot determine the fetal cause of death.
	Source: https://www.aapc.com/codes/icd-10-codes/P95#:~:text=ICD%2D10%20code%20P95%20for,originating%20in%20the%20perinatal%20period%20

FIMR Region 1 Profile

Case Review Team

Escambia County Healthy Start Coalition, Inc.

Community Action Groups

Escambia County Healthy Start Coalition, Inc. Healthy Start Coalition of Santa Rosa County, Inc. Healthy Start Coalition of Okaloosa and Walton Counties, Inc.



	Fetal Mor							
	R	egion 1			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	45	9,184	4.9	1,495	221,508	6.7		
2019	63	9,386	6.7	1,515	220,010	6.8		
2020	41	8,943	4.6	1,445	209,645	6.8		
2021	39	9,451	4.1	1,572	216,189	7.2		
2022	58	9,190	6.3	1,526	223,854	6.8		

rtality Data									
		Top Five Leading Causes of Mortality, 2018-2022 (n=246)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	76	30.9%					
		Maternal Complications of Pregnancy	38	15.4%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	36	14.6%					
		Congenital Malformations, Deformations and Chromosomal Abnormalities	35	14.2%					
		Unspecified Cause	20	8.1%					

	Infant Mortality Data							
	Region 1				Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	71	9,184	7.7	1,334	221,508	6.0		Conge Deform Abnor
2019	66	9,386	7.0	1,328	220,010	6.0		Uninte
2020	54	8,943	6.0	1,213	209,645	5.8		Disord Gesta
2021	61	9,451	6.5	1,267	216,189	5.9		Mater Pregn
2022	69	9,190	7.5	1,335	223,854	6.0		Bacte

 .,							
Top Five Leading Causes of Mortality, 2018-2022 (n=321)							
Cause of Death	Count	Percent					
Congenital Malformations, Deformations and Chromosomal Abnormalities	68	21.2%					
Unintentional Injuries	56	17.4%					
Disorders Related to Short Gestation and Low Birth Weight	29	9.0%					
Maternal Complications of Pregnancy	19	5.9%					
Bacterial Sepsis of Newborn	15	4.7%					

FIMR Region 2 Profile

Case Review Team

Capital Area Healthy Start Coalition, Inc.

Community Action Groups

Gadsden County Healthy Start Coalition, Inc.
Capital Area Healthy Start Coalition of Lefferson Madison and

Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.



				Fet	tal Mort	
	R	egion 2			Florida	
Year	Deaths Count	Births	Rate	Deaths Count	Births	Rate
2018	28	3,505	7.9	1,495	221,508	6.7
2019	25	3,379	7.3	1,515	220,010	6.8
2020	25	3,214	7.7	1,445	209,645	6.8
2021	25	3,415	7.3	1,572	216,189	7.2
2022	23	3,449	6.6	1,526	223,854	6.8

y Data							
Top Five Leading Causes of Mortality, 2018-2022 (n=126)							
Cause of Death	Count	Percent					
Complications of Placenta, Cord and Membranes	52	41.3%					
Unspecified Cause	20	15.9%					
Maternal Conditions That May Be Unrelated to Present Pregnancy	12	9.5%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	10	7.9%					
Maternal Complications of Pregnancy	8	6.3%					

Infant Mortalit								
	R	egion 2			Florida			
Year	Deaths Count	Births	Rate	Deaths Count	Births	Rate		
2018	36	3,505	10.3	1,334	221,508	6.0		Congo Defor Abnor
2019	33	3,379	9.8	1,328	220,010	6.0		Uninte
2020	33	3,214	10.3	1,213	209,645	5.8		Disord Gesta
2021	35	3,415	10.2	1,267	216,189	5.9		Comp and M
2022	39	3,449	11.3	1,335	223,854	6.0		Mater Pregn

Top Five Leading Causes of Mortality, 2018-2022 (n=176)								
Cause of Death	Count	Percent						
Congenital Malformations, Deformations and Chromosomal Abnormalities	35	19.9%						
Unintentional Injuries	20	11.4%						
Disorders Related to Short Gestation and Low Birth Weight	19	10.8%						
Complications of Placenta, Cord and Membranes	9	5.1%						
Maternal Complications of Pregnancy	7	4.0%						

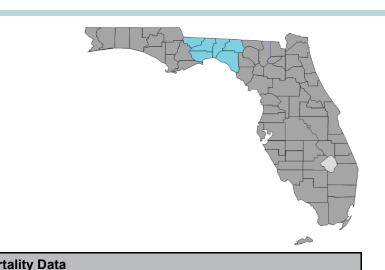
FIMR Region 3 Profile

Case Review Team

Bay, Franklin, Gulf Healthy Start Coalition, Inc.

Community Action Groups

Bay, Franklin, Gulf Healthy Start Coalition, Inc Chipola Healthy Start Coalition, Inc



Fetal Mo								
	R	egion 3		Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	33	4,285	7.6	1,495	221,508	6.7		
2019	26	4,350	5.9	1,515	220,010	6.8		
2020	30	4,270	7.0	1,445	209,645	6.8		
2021	36	4,131	8.6	1,572	216,189	7.2		
2022	32	4,104	7.7	1,526	223,854	6.8		

ιy	Dala								
	Top Five Leading Causes of Mortality, 2018-2022 (n=157)								
	Cause of Death	Count	Percent						
	Complications of Placenta, Cord and Membranes	58	36.9%						
	Maternal Conditions That May Be Unrelated to Present Pregnancy	20	12.7%						
	Maternal Complications of Pregnancy	20	12.7%						
	Congenital Malformations, Deformations and Chromosomal Abnormalities	18	11.5%						
	Unspecified Cause	15	9.6%						

	Infant Mortality Data								
	R	egion 3			Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	42	4,285	9.8	1,334	221,508	6.0		Mater Pregn	
2019	39	4,350	9.0	1,328	220,010	6.0		Conge Defori Abnor	
2020	41	4,270	9.6	1,213	209,645	5.8		Disord Gesta	
2021	43	4,131	10.4	1,267	216,189	5.9		Uninte	
2022	41	4,104	10.0	1,335	223,854	6.0		Sudde	

Top Five Leading Causes of Mortality, 2018-2022 (n=206)							
Cause of Death	Count	Percent					
Maternal Complications of Pregnancy	35	17.0%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	26	12.6%					
Disorders Related to Short Gestation and Low Birth Weight	23	11.2%					
Unintentional Injuries	21	10.2%					
Sudden Infant Death Syndrome	16	7.8%					

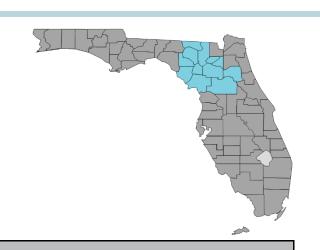
FIMR Region 4 Profile

Case Review Team

Healthy Start of North Central Florida, Inc.

Community Action Groups

Healthy Start of North Central Florida, Inc.



	Fetal Mor									
	R	egion 4			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	58	9,762	5.9	1,495	221,508	6.7				
2019	94	9,756	9.5	1,515	220,010	6.8				
2020	73	9,424	7.7	1,445	209,645	6.8				
2021	86	9,527	8.9	1,572	216,189	7.2				
2022	72	9,678	7.4	1,526	223,854	6.8				

rl	rtality Data								
		Top Five Leading Causes of Mortality, 2018-2022 (n=383)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	89	23.2%					
		Unspecified Cause	72	18.8%					
		Maternal Complications of Pregnancy	51	13.3%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	41	19.2%					
		Congenital Malformations, Deformations and Chromosomal Abnormalities	38	9.9%					

	Infant Mortality Da								
	R				Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	93	9,762	9.5	1,334	221,508	6.0		Congo Defor Abnor	
2019	86	9,756	8.8	1,328	220,010	6.0		Disord Gesta	
2020	85	9,424	9.0	1,213	209,645	5.8		Sudde	
2021	76	9,527	8.0	1,267	216,189	5.9		Uninte	
2022	64	9,678	6.6*	1,335	223,854	6.0		Mater Pregn	

Top Five Leading Causes of Mortality, 2018-2022 (n=404)								
Cause of Death	Count	Percent						
Congenital Malformations, Deformations and Chromosomal Abnormalities	62	15.3%						
Disorders Related to Short Gestation and Low Birth Weight	50	12.4%						
Sudden Infant Death Syndrome	37	9.2%						
Unintentional Injuries	31	7.7%						
Maternal Complications of Pregnancy	27	6.7%						

^{*} Statistically significant

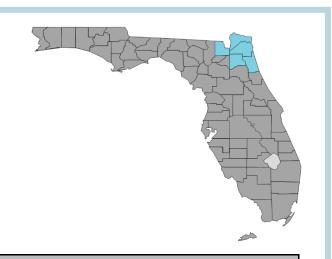
FIMR Region 5 Profile

Case Review Team

Northeast Florida Heathy Start Coalition, Inc.

Community Action Groups

Northeast Florida Heathy Start Coalition, Inc



Fetal Mo										
	R	Region 5			Florida					
Year	Death Count	Births	Births Rate		Births	Rate				
2018	134	18,581	7.2	1,495	221,508	6.7				
2019	132	18,683	7.0	1,515	220,010	6.8				
2020	134	17,920	7.4	1,445	209,645	6.8				
2021	117 18,366		6.3	1,572	216,189	7.2				
2022	158	18,550	8.4	1,526	223,854	6.8				

a	ality Data										
		Top Five Leading Causes of Mortality, 2018-2022 (n=675)									
		Cause of Death	Count	Percent							
		Complications of Placenta, Cord and Membranes	213	31.6%							
		Maternal Conditions That May Be Unrelated to Present Pregnancy	102	15.1%							
		Maternal Complications of Pregnancy	98	14.5%							
		Congenital Malformations, Deformations and Chromosomal Abnormalities	67	9.9%							
		Unspecified Cause	65	9.6%							

	Infant Mortality D									
	R	Region 5			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	147	18,581	7.9	1,334	221,508	6.0		Disor Gesta		
2019	136	18,683	7.3	1,328	220,010	6.0		Cong Defor Abno		
2020	128	17,920	7.1	1,213	209,645	5.8		Sudd		
2021	116	18,366	6.3	1,267	216,189	5.9		Unint		
2022	119	18,550	6.4	1,335	223,854	6.0		Bacte		

Top Five Leading Causes of Mortality, 2018-2022 (n=646)								
Cause of Death	Count	Percent						
Disorders Related to Short Gestation and Low Birth Weight	112	17.3%						
Congenital Malformations, Deformations and Chromosomal Abnormalities	108	16.7%						
Sudden Infant Death Syndrome	84	13.0%						
Unintentional Injuries	35	5.4%						
Bacterial Sepsis of Newborn	32	5.0%						

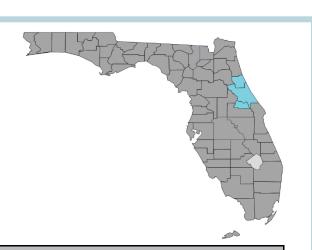
FIMR Region 6

Case Review Team

The Healthy Start Coalition of Flagler and Volusia Counties, Inc.

Community Action Groups

The Healthy Start Coalition of Flagler and Volusia Counties, Inc. Healthy Start Coalition of Seminole County



	Fetal Mortal									
	F	Region 6			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	57	10,329	5.5	1,495	221,508	6.7		Com and		
2019	76	10,314	7.3	1,515 220,010		6.8		Unsp		
2020	68	9,921	6.8	1,445	209,645	6.8		Mate Preg		
2021	70	10,260	6.8	6.8 1,572 216,189		7.2		Cono Defo Abno		
2022	58	10,590	5.4	1,526	223,854	6.8		Mate Unre		

_										
	Top Five Leading Causes of Mortality, 2018-2022 (n=329)									
	Cause of Death	Count	Percent							
	Complications of Placenta, Cord and Membranes	119	36.2%							
	Unspecified Cause	45	13.7%							
	Maternal Complications of Pregnancy	44	13.4%							
	Congenital Malformations, Deformations and Chromosomal Abnormalities	40	12.2%							
	Maternal Conditions That May Be Unrelated to Present Pregnancy	38	11.6%							

Infant Morta								
	F	Region 6			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	63	10,329	6.1	1,334	221,508	6.0		Cong Defo Abno
2019	61	10,314	5.9	9 1,328 220,010		6.0		Diso Gest
2020	55	9,921	5.5	1,213	209,645	5.8		Sudo
2021	48	10,260	4.7	1,267 216,189		5.9		Mate Preg
2022	56	10,590	5.3	1,335	223,854	6.0		Unin

Top Five Leading Causes of Mortality, 2018-2022 (n=646)								
Cause of Death	Count	Percent						
Congenital Malformations, Deformations and Chromosomal Abnormalities	62	9.6%						
Disorders Related to Short Gestation and Low Birth Weight	32	5.0%						
Sudden Infant Death Syndrome	30	4.6%						
Maternal Complications of Pregnancy	24	3.7%						
Unintentional Injuries	18	2.8%						

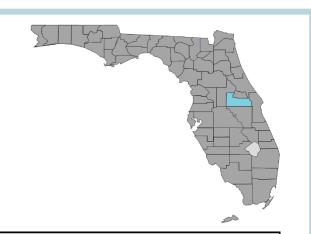
FIMR Region 7 Profile

Case Review Team

Healthy Start Coalition of Orange County, Inc.

Community Action Groups

Healthy Start Coalition of Orange County, Inc.



					Feta	ıl Morta
	R	Region 7			Florida	
Year	Death Count	Births	Rate	Death Count	Births	Rate
2018	103	16,914	6.1	1,495	221,508	6.7
2019	124	16,621	7.4	1,515	220,010	6.8
2020	121	121 15,703 123 16,054		1,445	209,645	6.8
2021	123			1,572	216,189	7.2
2022	121	16,698	7.2	1,526	223,854	6.8

ta	ality Data										
		Top Five Leading Causes of Mortality, 2018-2022 (n=592)									
		Cause of Death	Count	Percent							
		Complications of Placenta, Cord and Membranes	187	31.6%							
		Maternal Complications of Pregnancy	86	14.5%							
		Unspecified Cause	81	13.7%							
		Maternal Conditions That May Be Unrelated to Present Pregnancy	76	12.8%							
		Congenital Malformations, Deformations and Chromosomal Abnormalities	59	10.0%							

Infant Morta										
	F	Region 7			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	104	16,914	6.1	1,334	221,508	6.0		Diso Gest		
2019	96	16,621	5.8	1,328	220,010	6.0		Cono Defo Abno		
2020	82	15,703	5.2	1,213	209,645	5.8		Mate Preg		
2021	93	16,054	5.8	1,267	216,189	5.9		Sudo		
2022	95	16,698	5.7	1,335	223,854	6.0		Bact		

Top Five Leading Causes of Mortality, 2018-2022 (n=470)							
Cause of Death	Count	Percent					
Disorders Related to Short Gestation and Low Birth Weight	83	17.7%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	82	17.4%					
Maternal Complications of Pregnancy	58	12.3%					
Sudden Infant Death Syndrome	48	10.2%					
Bacterial Sepsis of Newborn	24	5.1%					

FIMR Region 8 Profile

Case Review Team

Central Healthy Start, Inc.

Community Action Groups

Central Healthy Start, Inc.



	Fetal Mor									
	R	egion 1		Florida						
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	41	6,490	6.3	1,495	221,508	6.7				
2019	38	6,481	5.8	1,515	220,010	6.8				
2020	55	6,400	8.5	1,445	209,645	6.8				
2021	64	6,651	9.5	1,572	216,189	7.2				
2022	58	6,982	8.2	1,526	223,854	6.8				

.y Data							
Top Five Leading Causes of Mortality, 2018-2022 (n=256)							
Cause of Death	Count	Percent					
Complications of Placenta, Cord and Membranes	72	28.1%					
Unspecified Cause	39	15.2%					
Maternal Conditions That May Be Unrelated to Present Pregnancy	33	12.9%					
Maternal Complications of Pregnancy	32	12.5%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	21	8.2%					

	Infant Mortality Data								
	R	egion 1	1 Florida						
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	38	6,490	5.9	1,334	221,508	6.0		Conge Deforr Abnor	
2019	55	6,481	8.5	1,328	220,010	6.0		Uninte	
2020	40	6,400	6.3	1,213	209,645	5.8		Disord Gesta	
2021	34	6,651	5.1	1,267	216,189	5.9		Mater Pregn	
2022	38	6,982	5.4	1,335	223,854	6.0		Comp and M	

Top Five Leading Causes of Mortality, 2018-2022 (n=205)							
Cause of Death	Count	Percent					
Congenital Malformations, Deformations and Chromosomal Abnormalities	44	21.5%					
Unintentional Injuries	25	12.2%					
Disorders Related to Short Gestation and Low Birth Weight	24	11.7%					
Maternal Complications of Pregnancy	11	5.4%					
Complications of Placenta, Cord and Membranes	9	4.4%					

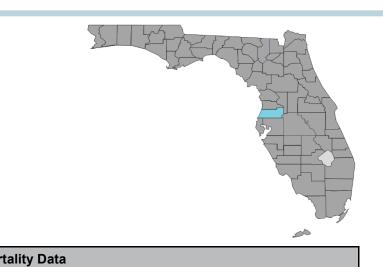
FIMR Region 9 Profile

Case Review Team

Healthy Start Coalition of Pasco County, Inc.

Community Action Groups

Healthy Start Coalition of Pasco County, Inc



	Fetal Mor									
	R	egion 9		Florida						
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	37	5,083	7.2	1,495	221,508	6.7				
2019	29	5,092	5.7	1,515	220,010	6.8				
2020	22	4,968	4.4	1,445	209,645	6.8				
2021	40	5,306	7.5	1,572	216,189	7.2				
2022	35	5,679	6.1	1,526	223,854	6.8				

Top Five Leading Causes of Mortality, 2018-2022 (n=163)								
Cause of Death	Count	Percent						
Complications of Placenta, Cord and Membranes	47	28.8%						
Unspecified Cause	22	13.5%						
Maternal Conditions That May Be Unrelated to Present Pregnancy	21	12.9%						
Maternal Complications of Pregnancy	17	10.4%						
Congenital Malformations, Deformations and Chromosomal Abnormalities	17	10.4%						

Infant Mortality Data

	R	egion 9		Florida		
Year	Death Count	Births	Rate	Death Count	Births	Rate
2018	22	5,083	4.3	1,334	221,508	6.0
2019	26	5,092	5.1	1,328	220,010	6.0
2020	35	4,968	7.0	1,213	209,645	5.8
2021	21	5,306	4.0	1,267	216,189	5.9
2022	28	5,679	4.9	1,335	223,854	6.0

Top Five Leading Causes of Mortality, 2018-2022 (n=132)							
Cause of Death	Count	Percent					
Congenital Malformations, Deformations and Chromosomal Abnormalities	20	15.2%					
Unintentional Injuries	16	12.1%					
Maternal Complications of Pregnancy	14	10.6%					
Disorders Related to Short Gestation and Low Birth Weight	14	10.6%					
Complications of Placenta, Cord and Membranes	11	8.3%					

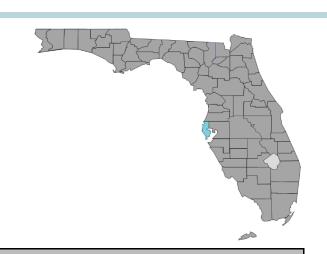
FIMR Region 10 Profile

Case Review Team

Healthy Start Coalition of Pinellas County, Inc.

Community Action Groups

Healthy Start Coalition of Pinellas County, Inc.



	Fetal Mort									
	Re	egion 10			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	52	8,122	6.4	1,495	221,508	6.7				
2019	55	7,894	6.9	1,515	220,010	6.8				
2020	51	7,461	6.8	1,445	209,645	6.8				
2021	60	7,362	8.1	1,572	216,189	7.2				
2022	43	7,383	5.8	1,526	223,854	6.8				

rt	rtality Data								
		Top Five Leading Causes of Mortality, 2018-2022 (n=261)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	75	28.7%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	39	14.9%					
		Maternal Complications of Pregnancy	37	14.2%					
		Congenital Malformations, Deformations and Chromosomal Abnormalities	35	13.4%					
		Unspecified Cause	27	10.3%					

Top Five Leading Causes of Mortality, 2018-2022 (n=219)

Percent

Count

	Infant Mortality Data									
	Re	egion 10			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	44	8,122	5.4	1,334	221,508	6.0		Disord Gesta		
2019	43	7,894	5.4	1,328	220,010	6.0		Conge Deform Abnor		
2020	43	7,461	5.8	1,213	209,645	5.8		Mater Pregn		
2021	44	7,362	6.0	1,267	216,189	5.9		Uninte		
2022	45	7,383	6.1	1,335	223,854	6.0		Comp and M		

Disorders Related to Short Gestation and Low Birth Weight	40	18.3%
Congenital Malformations, Deformations and Chromosomal Abnormalities	31	14.2%
Maternal Complications of Pregnancy	23	10.5%
Unintentional Injuries	23	10.5%
Complications of Placenta, Cord and Membranes	13	5.9%
	Gestation and Low Birth Weight Congenital Malformations, Deformations and Chromosomal Abnormalities Maternal Complications of Pregnancy Unintentional Injuries Complications of Placenta, Cord	Gestation and Low Birth Weight Congenital Malformations, Deformations and Chromosomal Abnormalities Maternal Complications of Pregnancy 23 Unintentional Injuries 23 Complications of Placenta, Cord

Cause of Death

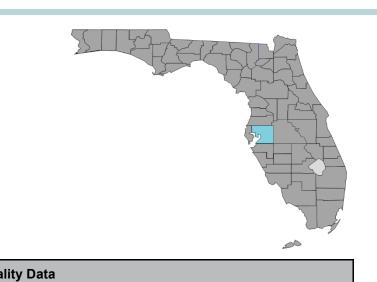
FIMR Region 11 Profile

Case Review Team

Healthy Start Coalition of Hillsborough County, Inc.

Community Action Groups

Healthy Start Coalition of Hillsborough County, Inc.



Fetal Mort								
	R	egion 11			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	143	17,127	8.3	1,495	221,508	6.7		
2019	110	17,178	6.4	1,515	220,010	6.8		
2020	108	16,586	6.5	1,445	209,645	6.8		
2021	115	17,175	6.7	1,572	216,189	7.2		
2022	84	17,178	4.9*	1,526	223,854	6.8		

4	2 0.00							
Top Five Leading Causes of Mortality, 2018-2022 (n=560)								
	Cause of Death	Count	Percent					
	Complications of Placenta, Cord and Membranes	135	24.1%					
	Maternal Complications of Pregnancy	84	15.0%					
	Unspecified Cause	83	14.8%					
	Maternal Conditions That May Be Unrelated to Present Pregnancy	75	13.4%					
	Unknown	51	9.1%					

Infant Mort								
	R	egion 11			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	107	17,127	6.2	1,334	221,508	6.0		
2019	113	17,178	6.6	1,328	220,010	6.0		
2020	119	16,586	7.2	1,213	209,645	5.8		
2021	121	17,175	7.0	1,267	216,189	5.9		
2022	106	17,178	6.2	1,335	223,854	6.0		

ć	ality	Data								
		Top Five Leading Causes of Mortality, 2018-2022 (n=566)								
		Cause of Death	Count	Percent						
		Disorders Related to Short Gestation and Low Birth Weight	112	19.8%						
		Congenital Malformations, Deformations and Chromosomal Abnormalities	87	15.4%						
		Maternal Complications of Pregnancy	68	12.0%						
		Unintentional Injuries	47	8.3%						
		Complications of Placenta, Cord and Membranes	31	5.5%						

*Statistically significant

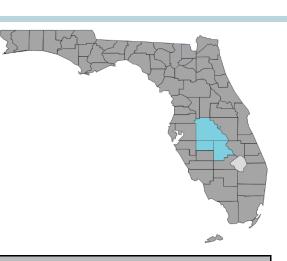
FIMR Region 12

Case Review Team

Healthy Start Coalition of Hardee, Highlands and Polk Counties, In

Community Action Groups

Healthy Start Coalition of Hardee, Highlands and Polk Counties, In



	Fetal Morta								
		R	egion 12			Florida			
Ye	ear	Death Count	Births	Rate	Death Count	Births	Rate		
20	18	71	9,016	7.8	1,495	221,508	6.7		Com and I
20	19	73	9,374	7.7	1,515	220,010	6.8		Unsp
20	20	60	9,100	6.6	1,445	209,645	6.8		Cong Defo Abno
20	21	83	9,653	8.5	1,572	216,189	7.2		Mate Preg
20	22	84	10,316	8.1	1,526	223,854	6.8		Unkr

Top Five Leading Causes of Mortality, 2018-2022 (n=371)								
Cause of Death	Count	Percent						
Complications of Placenta, Cord and Membranes	107	28.8%						
Unspecified Cause	61	16.4%						
Congenital Malformations, Deformations and Chromosomal Abnormalities	42	11.3%						
Maternal Complications of Pregnancy	34	9.2%						
Unknown	31	8.4%						

	Infant Mortal								
	R	egion 12			Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	74	9,016	8.2	1,334	221,508	6.0		Cong Defo Abno	
2019	65	9,374	6.9	1,328	220,010	6.0		Unin	
2020	64	9,100	7.0	1,213	209,645	5.8		Diso Gest	
2021	71	9,653	7.4	1,267	216,189	5.9		Mate Preg	
2022	84	10,316	8.1	1,335	223,854	6.0		Com and I	

Cause of Death	Count	Percent
Congenital Malformations, Deformations and Chromosomal Abnormalities	75	20.9%
Unintentional Injuries	58	16.2%
Disorders Related to Short Gestation and Low Birth Weight	45	12.6%
Maternal Complications of Pregnancy	17	4.7%
Complications of Placenta, Cord and Membranes	16	4.5%

Top Five Leading Causes of Mortality, 2018-2022 (n=358)

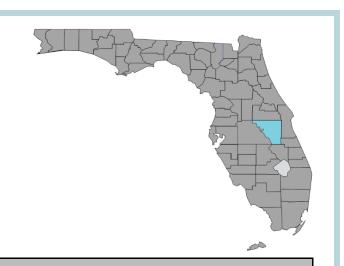
FIMR Region 13 Profile

Case Review Team

The Healthy Start Coalition of Osceola County, Inc.

Community Action Groups

The Healthy Start Coalition of Osceola County, Inc.



Fetal Mo									
	Region 13 Florida				Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	36	4,434	8.1	1,495	221,508	6.7			
2019	30	4,440	6.7	1,515	220,010	6.8			
2020	23	4,482	5.1	1,445	209,645	6.8			
2021	40	4,705	8.4	1,572	216,189	7.2			
2022	35	4,974	7.0	1,526	223,854	6.8			

r	rtality Data								
		Top Five Leading Causes of Mortality, 2018-2022 (n=164)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	50	30.5%					
		Unspecified Cause	29	17.7%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	19	11.6%					
		Maternal Complications of Pregnancy	19	11.6%					
		Unknown	13	7.9%					

Infant Mo								y Data
	Region 13 Florida							
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	25	4,434	5.6	1,334	221,508	6.0		Conge Deform Abnor
2019	21	4,440	4.7	1,328	220,010	6.0		Disord Gesta
2020	20	4,482	4.5	1,213	209,645	5.8		Mater Pregn
2021	17	4,705	3.6	1,267	216,189	5.9		Sudde
2022	18	4,974	3.6	1,335	223,854	6.0		Bacte

Top Five Leading Causes of Mortality, 2018-2022 (n=101)							
Cause of Death	Count	Percent					
Congenital Malformations, Deformations and Chromosomal Abnormalities	14	13.9%					
Disorders Related to Short Gestation and Low Birth Weight	13	12.9%					
Maternal Complications of Pregnancy	12	11.9%					
Sudden Infant Death Syndrome	7	6.9%					
Bacterial Sepsis of Newborn	5	5.0%					

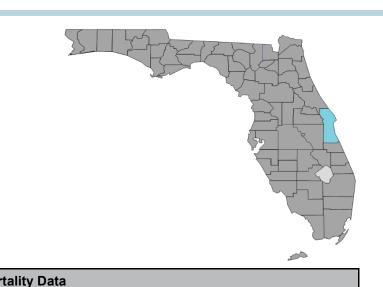
FIMR Region 14 Profile

Case Review Team

Healthy Start Coalition of Brevard County, Inc.

Community Action Groups

Healthy Start Coalition of Brevard County, Inc.



	Fetal Mor							
	Re	gion 14		Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	36	5,309	6.7	1,495	221,508	6.7		
2019	31	5,185	5.9	1,515	220,010	6.8		
2020	30	4,918	6.1	1,445	209,645	6.8		
2021	35	5,064	6.9	1,572	216,189	7.2		
2022	29	5,212	5.5	1,526	223,854	6.8		

Ų	y Data							
	Top Five Leading Causes of Mortality, 2018-2022 (n=161)							
	Cause of Death	Count	Percent					
	Complications of Placenta, Cord and Membranes	47	29.2%					
	Maternal Complications of Pregnancy	30	18.6%					
	Congenital Malformations, Deformations and Chromosomal Abnormalities	22	13.7%					
	Unspecified Cause	18	11.2%					
	Maternal Conditions That May Be Unrelated to Present Pregnancy	16	9.9%					

	Infant Mortality Data								
	Region 14				Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	34	5,309	6.4	1,334	221,508	6.0		Conge Deformation	
2019	29	5,185	5.6	1,328	220,010	6.0		Disord Gesta	
2020	32	4,918	6.5	1,213	209,645	5.8		Mater Pregn	
2021	31	5,064	6.1	1,267	216,189	5.9		Uninte	
2022	36	5,212	6.9	1,335	223,854	6.0		Comp and M	

28	17.3%
16	9.9%
10	6.2%
10	6.2%
7	4.3%
	16

Top Five Leading Causes of Mortality, 2018-2022 (n=162)

Cause of Death

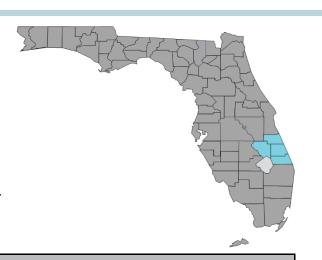
FIMR Region 15 Profile

Case Review Team

Indian River Healthy Start Coalition, Inc.

Community Action Groups

Indian River Healthy Start Coalition, Inc.
Okeechobee County Family Health/Healthy Start Coalition, Inc.
Healthy Start Coalition of St. Lucie County, Inc.
Martin County Healthy Start Coalition, Inc.



	Fetal Mo							
	Re	egion 15	5	Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	42	6,226	6.7	1,495	221,508	6.7		
2019	34	6,067	5.6	1,515	220,010	6.8		
2020	42	5,972	7.0	1,445	209,645	6.8		
2021	38	6,421	5.9	1,572	216,189	7.2		
2022	66	6,797	9.6	1,526	223,854	6.8		

rtality Data									
		Top Five Leading Causes of Mortality, 2018-2022 (n=222)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	62	27.9%					
		Maternal Complications of Pregnancy	32	14.4%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	31	14.0%					
		Unspecified Cause	31	14.0%					
		Congenital Malformations, Deformations and Chromosomal Abnormalities	23	10.4%					

	Infant Mo							
	Re	gion 15		Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	22	6,226	3.5	1,334	221,508	6.0		
2019	36	6,067	5.9	1,328	220,010	6.0		
2020	25	5,972	4.2	1,213	209,645	5.8		
2021	36	6,421	5.6	1,267	216,189	5.9		
2022	43	6,797	6.3*	1,335	223,854	6.0		

rl	rtality Data							
		Top Five Leading Causes o 2018-2022 (n=162)		ity,				
		Cause of Death	Count	Percent				
		Congenital Malformations, Deformations and Chromosomal Abnormalities	39	24.1%				
		Disorders Related to Short Gestation and Low Birth Weight	24	14.8%				
		Unintentional Injuries	24	14.8%				
		Maternal Complications of Pregnancy	21	13.0%				
1		Complications of Placenta, Cord and Membranes	15	9.3%				

*Statistically significant

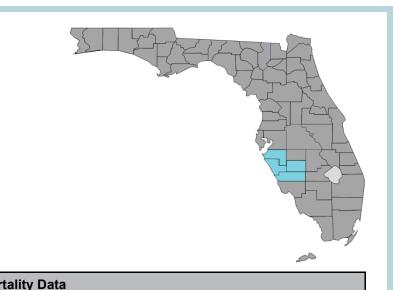
FIMR Region 16 Profile

Case Review Team

Healthy Start Coalition of Sarasota County, Inc.

Community Action Groups

Healthy Start Coalition of Sarasota County, Inc. Healthy Start Coalition of Manatee County, Inc. De Soto County Health Department Charlotte County Healthy Start Coalition, Inc.



				Fe	tal Mor		
	Re	Region 16 Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate	
2018	48	7,763	6.1	1,495	221,508	6.7	
2019	46	7,718	5.9	1,515	220,010	6.8	
2020	61	7,445	8.1	1,445	209,645	6.8	
2021	57	8,013	7.1	1,572	216,189	7.2	
2022	50	8,182	6.1	1,526	223,854	6.8	

٠,			
	Top Five Leading Causes of 2018-2022 (n=262)		ty,
	Cause of Death	Count	Percent
	Complications of Placenta, Cord and Membranes	64	24.4%
	Unspecified Cause	51	19.5%
	Maternal Complications of Pregnancy	37	14.1%
	Congenital Malformations, Deformations and Chromosomal Abnormalities	31	11.8%
	Maternal Conditions That May Be Unrelated to Present Pregnancy	29	11.1%

	Infant Mort								
	Re	egion 16	i		Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	31	7,763	4.0	1,334	221,508	6.0		Conge Deform Abnor	
2019	38	7,718	4.9	1,328	220,010	6.0		Disord Gesta	
2020	42	7,445	5.6	1,213	209,645	5.8		Uninte	
2021	53	8,013	6.6	1,267	216,189	5.9		Mater Pregn	
2022	37	8,182	4.5	1,335	223,854	6.0		Comp and M	

Top Five Leading Causes of Mortality, 2018-2022 (n=201)							
Cause of Death	Count	Percent					
Congenital Malformations, Deformations and Chromosomal Abnormalities	39	19.4%					
Disorders Related to Short Gestation and Low Birth Weight	24	11.9%					
Unintentional Injuries	24	11.9%					
Maternal Complications of Pregnancy	21	10.4%					
Complications of Placenta, Cord and Membranes	15	7.5%					

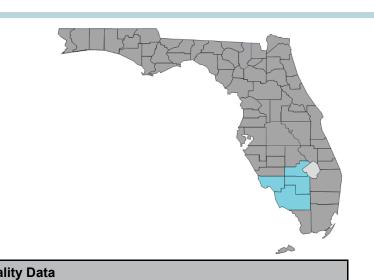
FIMR Region 17 Profile

Case Review Team

Healthy Start Coalition of Southwest Florida, Inc.

Community Action Groups

Healthy Start Coalition of Southwest Florida, Inc.



	Fetal Mortal								
	R	egion 17		Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	67	10,638	6.3	1,495	221,508	6.7			
2019	63	10,713	5.8	1,515	220,010	6.8			
2020	55	10,510	5.2	1,445	209,645	6.8			
2021	83	11,032	7.5	1,572	216,189	7.2			
2022	70	11,602	6.0	1,526	223,854	6.8			

Data							
Top Five Leading Causes of Mortality, 2018-2022 (n=331)							
Cause of Death	Count	Percent					
Complications of Placenta, Cord and Membranes	108	32.6%					
Maternal Complications of Pregnancy	47	14.2%					
Unspecified Cause	37	11.2%					
Maternal Conditions That May Be Unrelated to Present Pregnancy	36	10.9%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	35	10.6%					

Infant Mortalit								
	R	egion 17			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	58	10,638	5.5	1,334	221,508	6.0		Cong Defo Abno
2019	59	10,713	5.5	1,328	220,010	6.0		Diso Gest
2020	44	10,510	4.2	1,213	209,645	5.8		Mate Preg
2021	73	11,032	6.6	1,267	216,189	5.9		Unin
2022	50	11,602	4.3	1,335	223,854	6.0		Com and

Cause of Death	Count	Percent
Congenital Malformations, Deformations and Chromosomal Abnormalities	46	16.2%
Disorders Related to Short Gestation and Low Birth Weight	39	13.7%
Maternal Complications of Pregnancy	32	11.3%
Unintentional Injuries	25	8.8%
Complications of Placenta, Cord and Membranes	21	7.4%

Top Five Leading Causes of Mortality, 2018-2022 (n=284)

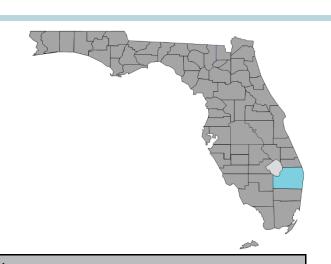
FIMR Region 18 Profile

Case Review Team

Healthy Start Coalition of Palm Beach County, Inc.

Community Action Groups

Healthy Start Coalition of Palm Beach County, Inc.



	Fetal Mor								
	R	egion 18		Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	67	15,064	4.4	1,495	221,508	6.7			
2019	97	14,737	6.5	1,515	220,010	6.8			
2020	89	14,112	6.3	1,445	209,645	6.8			
2021	106	14,489	7.3	1,572	216,189	7.2			
2022	100	15,483	6.4*	1,526	223,854	6.8			

ta	ality Data								
		Top Five Leading Causes of Mortality, 2018-2022 (n=459)							
		Cause of Death	Count	Percent					
		Complications of Placenta, Cord and Membranes	133	29.0%					
		Maternal Complications of Pregnancy	101	22.0%					
		Unspecified Cause	73	15.9%					
		Maternal Conditions That May Be Unrelated to Present Pregnancy	47	10.2%					
		Congenital Malformations, Deformations and Chromosomal Abnormalities	35	7.6%					

	Infant Mortality Data								
	R	egion 18			Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	73	15,064	4.8	1,334	221,508	6.0		Cong Defo Abno	
2019	69	14,737	4.7	1,328	220,010	6.0		Diso Gest	
2020	54	14,112	3.8	1,213	209,645	5.8		Unin	
2021	72	14,489	5.0	1,267	216,189	5.9		Bact	
2022	71	15,483	4.6	1,335	223,854	6.0		Mate Preg	

Cause of Death	Count	Percent
Congenital Malformations, Deformations and Chromosomal Abnormalities	68	20.1%
Disorders Related to Short Gestation and Low Birth Weight	36	10.6%
Unintentional Injuries	31	9.1%
Bacterial Sepsis of Newborn	29	8.6%
Maternal Complications of Pregnancy	13	3.8%

Top Five Leading Causes of Mortality, 2018-2022 (n=339)

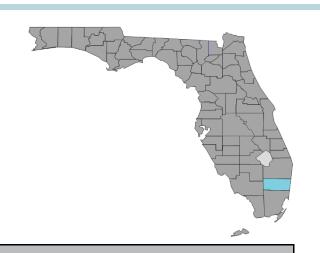
FIMR Region 19 Profile

Case Review Team

Broward Healthy Start Coalition, Inc

Community Action Groups

Broward Healthy Start Coalition, Inc



	Fetal Mortality Data										
	Region 19				Florida			Тор			
Year	Death Count	Births	Rate	Death Count	Births	Rate					
2018	183	21,922	8.3	1,495	221,508	6.7		Com and			
2019	162	21,724	7.4	1,515	220,010	6.8		Mate Preg			
2020	150	19,943	7.5	1,445	209,645	6.8		Mate Unre			
2021	144	20,303	7.0	1,572	216,189	7.2		Unsp			
2022	166	21,287	7.7	1,526	223,854	6.8		Cono Defo			

Top Five Leading Causes of Mortality, 2018-2022 (n=805)								
Cause of Death	Count	Percent						
Complications of Placenta, Cord and Membranes	289	35.9%						
Maternal Complications of Pregnancy	163	20.2%						
Maternal Conditions That May Be Unrelated to Present Pregnancy	118	14.7%						
Unspecified Cause	80	9.9%						
Congenital Malformations, Deformations and Chromosomal Abnormalities	44	5.5%						

Infant Morta								Data
	R				Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	103	21,922	4.7	1,334	221,508	6.0		Cong Defo Abno
2019	114	21,724	5.2	1,328	220,010	6.0		Diso Gest
2020	101	19,943	5.1	1,213	209,645	5.8		Sudo
2021	107	20,303	5.3	1,267	216,189	5.9		Mate Preg
2022	113	21,287	5.3	1,335	223,854	6.0		Dise Syst

2018-2022 (n=538)								
Cause of Death	Count	Percent						
Congenital Malformations, Deformations and Chromosomal Abnormalities	110	20.4%						
Disorders Related to Short Gestation and Low Birth Weight	88	16.4%						
Sudden Infant Death Syndrome	35	6.5%						
Maternal Complications of Pregnancy	29	5.4%						
Diseases of the Circulatory System	18	3.3%						

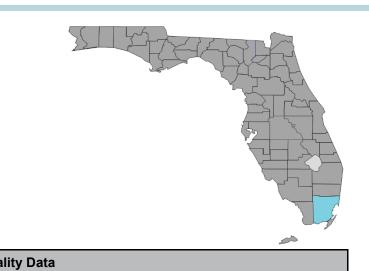
FIMR Region 20 Profile

Case Review Team

Healthy Start Coalition of Miami-Dade, Inc.

Community Action Groups

Healthy Start Coalition of Miami-Dade, Inc



	Fetal Morta								
	R	egion 20			Florida				
Year	Death Count	Births	Rate	Death Count	Births	Rate			
2018	212	31,017	6.8	1,495	221,508	6.7			
2019	202	30,258	6.6	1,515	220,010	6.8			
2020	201	27,663	7.2	1,445	209,645	6.8			
2021	204	28,098	7.2	1,572	216,189	7.2			
2022	175	29,759	5.8	1,526	223,854	6.8			

Top Five Leading Causes of Mortality, 2018-2022 (n=993)								
Cause of Death	Count	Percent						
Complications of Placenta, Cord and Membranes	250	25.2%						
Maternal Complications of Pregnancy	186	18.7%						
Maternal Conditions That May Be Unrelated to Present Pregnancy	131	13.2%						
Unspecified Cause	127	12.8%						
Congenital Malformations, Deformations and Chromosomal Abnormalities	83	8.4%						

	Infant Mortality Da							
	R	egion 20			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	144	31,017	4.6	1,334	221,508	6.0		Cong Defo Abno
2019	142	30,258	4.7	1,328	220,010	6.0		Diso Gest
2020	114	27,663	4.1	1,213	209,645	5.8		Mate Preg
2021	112	28,098	4.0	1,267	216,189	5.9		Bact
2022	176	29,759	5.9*	1,335	223,854	6.0		Unin

Top Five Leading Causes of Mortality, 2018-2022 (n=688)									
Cause of Death	Count	Percent							
Congenital Malformations, Deformations and Chromosomal Abnormalities	134	19.5%							
Disorders Related to Short Gestation and Low Birth Weight	77	11.2%							
Maternal Complications of Pregnancy	35	5.1%							
Bacterial Sepsis of Newborn	33	4.8%							
Unintentional Injuries	30	4.4%							

*Statistically significant

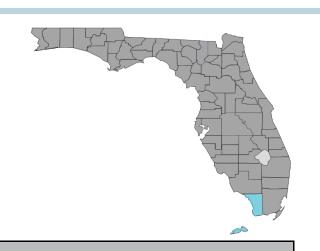
FIMR Region 21 Profile

Case Review Team

Florida Keys Healthy Start Coalition, Inc

Community Action Groups

Florida Keys Healthy Start Coalition, Inc



	Fetal Mortality Data									
	Re	egion 21			Florida					
Year	Death Count	Births	Rate	Death Count	Births	Rate				
2018	2	720	2.8	1,495	221,508	6.7		Comp and M		
2019	5	650	7.6	1,515	220,010	6.8		Mater Pregn		
2020	4	677	5.9	1,445	209,645	6.8		Mater Unrela		
2021	5	696	7.1	1,572	216,189	7.2		Unspe		
2022	5	751	6.6	1,526	223,854	6.8		Unkno		

Top Five Leading Causes of Mortality, 2018-2022 (n=21)								
Cause of Death	Count	Percent						
Complications of Placenta, Cord and Membranes	11	52.4%						
Maternal Complications of Pregnancy	3	14.3%						
Maternal Conditions That May Be Unrelated to Present Pregnancy	2	9.5%						
Unspecified Cause	2	9.5%						
Unknown	2	9.5%						

	Infant Mortality Data							
	Re	egion 21			Florida			
Year	Death Count	Births	Rate	Death Count	Births	Rate		
2018	3	720	4.2	1,334	221,508	6.0		Disord Gesta
2019	1	650	1.5	1,328	220,010	6.0		Congo Defor Abnoo
2020	2	677	3.0	1,213	209,645	5.8		Mater Pregn
2021	2	696	2.9	1,267	216,189	5.9		Disea Syste
2022	5	751	6.7	1,335	223,854	6.0		Influe

2018-2022 (n=13)							
Cause of Death	Count	Percent					
Disorders Related to Short Gestation and Low Birth Weight	3	23.1%					
Congenital Malformations, Deformations and Chromosomal Abnormalities	3	23.1%					
Maternal Complications of Pregnancy	2	15.4%					
Diseases of the Circulatory System	1	7.7%					
Influenza and Pneumonia	1	7.7%					

Top Five Leading Causes of Mortality,

Improvement Strategies

The Department implements programs and initiatives to improve fetal and infant health outcomes, including the following:

- A contract with the Florida Perinatal Quality Collaborative, housed at the University of South Florida, to improve infant and maternal health outcomes through training and support to Florida's birthing hospitals.
- Funds provided to each county health department for Florida's Healthy Babies Program to improve broad social, economic, cultural, and environmental factors that impact the maternal and child health population, including fetal and infant outcomes.
- Implementation of Florida's Healthy Start program.
- Oversight of the state's Child Abuse Death Review.
- A contract with Healthy Birth Day, Inc., and their Count the Kicks campaign, an evidencebased stillbirth prevention campaign focused on educating expectant parents about the importance of tracking fetal movement during pregnancy by counting their baby's movements.
- Services in 42 counties from the Safe Kids Coalitions, including certified child passenger safety training technicians who work with hospitals, first responders, and health care professionals to conduct car seat checks and fittings at events or a car seat inspection station.
- Florida's State Health Improvement Plan that includes goals and strategies to reduce infant morbidity and mortality.

Each Coalition's CAG develops an annual action plan to improve fetal and infant health outcomes, based on regional data and CRT recommendation. Examples of improvement strategies for each Coalition are included in Figure 11.

Figure 11. Regional CAG Action Plans, By Priority Area

CAG Annual Action Plans Priority Area: Safe Sleep		
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
1/Escambia County Healthy Start Coalition, Inc.	Decrease the average number of sleep related deaths within Escambia County by 10% by 2025.	 Direct On Scene Education Program: Training first responders (beginning with fire departments) to recognize unsafe sleep environments and provide education. Infant sleep survey to better understand current caregivers' behaviors. Local community outreach in high impact zones. Training providers in pediatric emergency department including development of pocket card to be used by physicians when speaking with their patients about safe sleep.
1/Healthy Start Coalition of Santa Rosa County, Inc.	Decrease the number of sleep related deaths within Santa Rosa County by 10% by 2025.	 Provide safe sleep education at local events. Educate providers on reinforcing safe sleep practices and proper feeding, especially for those with medical conditions. Continue partnership with the Santa Rosa County Health Department programs, Tobacco Free Santa Rosa, and Santa Rosa County Healthy Babies.
3/Gadsden County Healthy Start Coalition, Inc.	Decrease the number of sleep related deaths within the region by 10% by 2026.	 Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc. will hire a provider liaison to improve relations with local health care providers. Provider liaison will visit prenatal care offices to promote CONNECT services and deliver brochures to improve awareness of Healthy Start services and resources. Meet with other Healthy Start Coalitions within FIMR region to coordinate a luncheon education opportunity for local providers to improve awareness of Healthy Start services and resources.
3/Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.	Decrease the number of sleep related deaths within Jefferson, Madison, and Taylor Counties by 50% by 2025.	 Determine appropriate localized literature for dissemination. Distribute local material on safe sleep messaging at every available community event. Outreach to providers to deliver posters to all prenatal care providers in Leon, and all pediatric providers in Jefferson, Madison, and Taylor Counties. Develop messaging regarding the ABC' of safe sleep to be placed on grocery carts at local stores.
4/Healthy Start of North Central Florida, Inc	Decrease the number of sleep related deaths within the region by 6% by 2027.	Safe sleep crib display will be exhibited at public four locations annually.
5/Northeast Florida Heathy Start Coalition, Inc.	Reduce infant related sleep deaths by 10% by April 2024.	 Provide training to 100 or more parents, family members, and agency members on safe sleep practices. Utilize Safe Sleep Simulation infant models to provide safe sleep training at community events. Provide safe sleep training and infant care items with safe sleep messaging which include a portable crib, sleep sack, onesie, tote, magnets, and other educational items. Partner with local agencies, daycares, and hotels to display safe sleep messaging.
8/Healthy Start of North Central Florida, Inc.	Decrease the number of sleep related deaths within the region by 6% by 2027.	Safe sleep crib display will be exhibited at four locations annually.

9/Healthy Start Coalition of Pasco County, Inc.	Decrease instance of SUIDS by 15% by 2025.	 Enroll caregivers with infants into safe sleep education class. Distribute portable cribs to caregivers with an infant. Distribute safe sleep educational materials at community events.
10/Healthy Start Coalition of Pinellas County, Inc.	Decrease the number of sleep- related death in Pinellas County by 10% by 2025.	 Collaborate with community partners (including obstetricians and pediatricians) to educate our community on safe sleep practices and availability of portable cribs for eligible infants. Publicize and grow Beds 4 Babies Project in underserved populations most likely to experience an infant unsafe sleep death. Use approved messaging on social media platforms to inform, educate and increase knowledge of infant safe sleep practices.
11/Healthy Start Coalition of Hillsborough County, Inc.	Reduce the SUID rate from 0.8523 per 1,000 live births in 2019 to 0.4262 per 1,000 live births by 2026. (Based on the service delivery plan and Healthy People 2030 goals).	 Update education curriculum to include the importance of supine sleep position; a safe sleep environment does not include the use of a pillow; and American Academy of Pediatrics recommendation that infants with reflux should be held upright for 30 minutes after feeding and not propped up during sleep. Provide teaching to all new mothers after delivery at the four major delivery hospitals within Hillsborough County. Provide teaching using revised curriculum to community partners such as registered nurses on Mom/Baby units, Child Protective Investigators, home visitation programs and University of South Florida nursing students. Provide training to Healthy Steps staff and pediatricians at University of South Florida Health clinics.
15/Martin County Healthy Start Coalition, Inc.	Train 90% of Martin County home visitation program staff serving prenatal and 1-year postpartum families in the Safe Baby Curriculum in 2023.	 Solicit funding for Safe Baby Curriculum materials. Train home visitation staff on Safe Baby Curriculum Provide portable cribs and/or car seats to families who complete education with their home visitor.
16/Healthy Start Coalition of Manatee County, Inc.	Decrease number of sleep related deaths in Manatee County by 15% by 2025.	 Collaborate with CONNECT to develop new marketing strategy, including social media, to provide safe sleep messaging to local community and young families. Continue coordination with local organizations to receive community sponsorship for baby supplies provided to high-risk populations. Coordinate with local health care providers and agencies to host quarterly community events in high-risk neighborhoods. Provide safe sleep education at quarterly community events. Provide portable cribs to identified families in need with safe sleep education.
16/DeSoto County Health Department	Decrease the number of sleep related deaths within the region by 10% by 2025.	 Work closely with Healthy Start clients with positive pregnancy tests to encourage and educate for early prenatal care. Educate parents on services provided within the health department for pack-and-plays to encourage safe sleep practices.
19/Broward Healthy Start Coalition, Inc.	To reduce sleep related deaths by 20% in Broward County by April 2024.	 Increase attendance at monthly safe sleep virtual training provided by Broward Healthy Start Coalition, Inc. Enroll more pregnant women and parents people in home visiting services and promote these services. Increase safe sleep messaging within identified high risk neighborhoods. Continue partnership with Cribs for Kids program to distribute up to 550 cribs annually to eligible families without access to a safe sleep space.

20/Healthy Start Coalition of Miami- Dade, Inc.	Increase education provided on sleep related deaths in Miami-Dade County by 3% by 6/30/25.	 Provide 2 "When a Baby Dies" sensitivity trainings to birthing hospital staff by 6/30/25. Distribute 23,600 educational materials on safe sleep in English, Spanish, and Creole to obstetric providers, hospitals, pregnant women, fathers, and members of the maternal, infant, and child health community by 6/30/25. The Moving Crib project will be featured in 2 local hospitals and 1 general community location by 6/30/25.
		Priority Area: Access to Care
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
1/Healthy Start Coalition of Okaloosa and Walton Counties, Inc.	Reduce late and/or no entry to prenatal care from 5.1 % to 4% or less in Okaloosa and Walton Counties.	 Engage local obstetric providers and their office staff to complete online instructional training to improve completion of prenatal risk screen. Increase community and provider awareness of prenatal care program provided by the Healthy Start Coalition of Okaloosa and Walton Counties, Inc. Continue prenatal care program provided by the Healthy Start Coalition of Okaloosa and Walton Counties, Inc. in partnership with a local facility, to provide women with prenatal care who do not have medical health insurance. Disseminate Hear Her campaign materials developed by the CDC to provider offices, medical facilities, community events, and pregnancy support centers in English and Spanish languages. Host community memorial service for families that have experienced a fetal or infant loss.
2/Bay, Franklin, Gulf Healthy Start Coalition, Inc.	Increase rate of women that enter early prenatal care in Bay, Gulf, and Franklin Counties by 5% by June 2025.	 Provide ongoing education and support to health care providers regarding Medicaid application process, benefits, and access to care. Provide education to local social service agencies on pregnancy Medicaid application process, benefits, and access to care. Distribute Medicaid information cards to obstetric provider offices and local birthing hospital to assist families to navigate application process.
2/Chipola Healthy Start Coalition, Inc.	Increase early entry into prenatal care by 5% by April 2025.	 Re-establish transportation voucher program in all counties of the Chipola Healthy Start Coalition to improve access to prenatal care appointments. Improve awareness of medical providers of increasing rate of pregnant women in the region that receive late or no prenatal care during their pregnancy. Identify local medical providers that offer telehealth services. CONNECT specialist will discuss importance of early prenatal care with clients that receive referral for services. Provide education to families about free services offered through Medicaid health plans, including transportation aid. Facilitate coordination of consistent messaging on importance of early prenatal care with partner agencies and organizations.
5/Northeast Florida Heathy Start Coalition, Inc.	Provide education to 50 or more individuals regarding accessing health care services available by April 2024.	 Coordinate with local agencies and organizations to host community events and provide unified wrap around services. Host community events to provide education and linkages to local services. Partner with local public transportation services to increase access to care appointments. Provide education to families and providers regarding Medicaid transportation benefits.

		Provide education regarding contraception services.
6/The Healthy Start Coalition of Flagler and Volusia Counties, Inc.	Increase the amount of home visiting referrals by 10 % by 2024.	 Perform outreach activities to local obstetric offices to increase awareness of local services available through the CONNECT program. Provide training to prenatal care providers on completing and reporting the prenatal risk screen. Share prenatal risk screen quarterly reports with prenatal providers. Compile a comprehensive list of services and resources available, to include the method of referral. Develop and maintain a resource directory on the website of the Healthy Start Coalition of Seminole County that is accessible by providers and clients.
7/Healthy Start Coalition of Orange County, Inc.	Disseminate improved education materials and translation services in 100% of hospitals and Community Health Centers in Orange County by April 2024.	 Partner with identified medical facilities to perform multicultural review of current education materials, including videos, flyers, and brochures. Partner with professional translation services to develop meaningful prenatal education materials in English, Spanish, and Hattian-Creole. Develop focus group of community leaders and neighborhood partners to provide feedback on developed materials to ensure appropriate understanding. Partner with local communication agencies, including radio, to disseminate meaningful maternal and child health related messaging for identified multicultural communities.
10/Healthy Start Coalition of Pinellas County, Inc.	Reduce the number of fetal and infant deaths related to chronic health conditions within cases reviewed (following case selection guidelines as determined by the Department) by 10% by 2025.	 Encourage families to advocate for referrals to specialists for chronic medical conditions. Create a county-wide system of doulas for families wanting additional support and guidance during pregnancy and delivery. Use approved messaging to inform, educate and increase knowledge of the importance of early and regular prenatal care.
12/Healthy Start Coalition of Hardee, Highlands and Polk Counties, Inc.	Increase the percentage of pregnant mothers who enter prenatal care during the first trimester within the coalition area by 2% by December 31, 2025.	 Provide a comprehensive document that states the insurances accepted at local provider offices for pregnant women and families. Host community events targeting local families and providers to provide education on the importance of early prenatal care and local services available.
13/The Healthy Start Coalition of Osceola County, Inc.	100% of birthing facilities and prenatal care provider offices in Osceola County will receive preconception health educational materials in Spanish by June 2024.	 Identify existing approved preconception health education materials available in English requiring Spanish translation. Distribute English and Spanish print media throughout community. Provide education to health care providers regarding the importance of resource handouts in Spanish for Spanish speaking patients.
15/Indian River Healthy Start Coalition, Inc.	100 community members will receive education on "Healthier You" training topics by trained individuals.	 Develop and implement educational and training opportunities for childbirth education on prevention and early intervention through a series of classes for pregnant and postpartum women, their families, and professionals in the community. Target Community: Medical Professionals, including gynecologists, primary care physicians, pediatricians, educators, district teen parent program, WIC; to combat the growing number of Type 2 diabetes, syphilis,

		blood pressure issues, and high BMI in pregnant mothers which are leading causes in Fetal Infant Mortality Review. As well as educate on importance of early prenatal care.
15/Okeechobee County Family Health/Healthy Start Coalition, Inc.	Increase number of women receiving interconception care services by 5% by April 2024.	 Promote interconception care services available through CONNECT. Increase agency and community partnerships as committed members to promote the mission of the Okeechobee County Family Health/Healthy Start Coalition, Inc to improve the health of pregnant women and infants. Develop a collaborative campaign with fellow providers to increase awareness of healthy lifestyle habits for women who are pregnant or thinking of becoming pregnant.
15/Healthy Start Coalition of St. Lucie County, Inc.	10% of obstetric and pediatric providers in St. Lucie County will integrate a model of education to their clients on the importance of wellness and chronic disease management by 2025.	 Develop a resource list of local primary care providers and specialists (i.e., endocrinologists, dentists, nutritionists). Include identified resources in community presentations and social media. Provide a comprehensive list of local wellness resources to obstetric and pediatric providers in St. Lucie County. Train Healthy Start Coalition of St. Lucie County, Inc staff to include wellness education along with resource list during home visits.
16/Healthy Start Coalition of Sarasota County, Inc.	Decrease late entry to prenatal care by 5% by 2025.	 Create a resource directory that identifies community agencies and support services for prenatal, and post-partum women. Provide the resource directory to community partners, and providers to raise awareness of available supports. Identify any gaps in resources or supports that are needed.
16/Healthy Start Coalition of Sarasota County, Inc.	Decrease late entry to prenatal care by 10% by 2026.	 Create a resource directory that identifies community agencies and support services for prenatal, and post-partum women. Provide and promote initiatives within community to decrease fetal and infant mortality. Educate providers on initiatives available to patients.
16/Healthy Start Coalition of Manatee County, Inc.	Increase early access to prenatal care by 10% in 24 months.	 Collaborate with CONNECT to develop new marketing strategy, to provide messaging to local community and young families regarding importance of early and consistent prenatal care. Create survey to identify reasons for late entry to prenatal care and missed prenatal care appointments. Coordinate with local health care providers and agencies to host quarterly community events. Coordinate multidisciplinary calls with Medicaid managed health plan members to discuss barriers to care and education regarding access to services and incentives.
16/Charlotte County Healthy Start Coalition, Inc.	Increase the rate of early entry to prenatal care by 3% by 2025.	 Identify barriers to early initiation of prenatal care faced by families. Collaborate with local providers to identify methods to enroll clients into early prenatal care.
17/Healthy Start Coalition of Southwest Florida, Inc.	Increase prenatal care education through referrals for home visiting and increased outreach by 2% by 2025.	 Promote home visiting services through provider interaction, trainings, and education on referral process. Provide education on weight management and nutrition at outreach events. Distribute Count the Kicks materials to providers and through community outreach. Provide education on folic acid to providers and at community outreach events.
19/Broward Healthy Start Coalition, Inc.	Increase percentage of women in Broward County that receive early and adequate prenatal	 Hire and train community doulas to work with women of reproductive age in the priority census tracts. Develop and implement a group prenatal care program at the community health center that serves the prioritized zip codes.

21/Florida Keys Healthy Start Coalition, Inc	care to match Healthy People 2030 goal of 80.5% by April 2030. Decrease the racial disparity of birth outcomes in Monroe County by 10% by 2026.	 Perform community outreach to prenatal care providers and health centers to encourage Healthy Start screening and home visitation for all patients. Identify and partner with local bereavement support groups and mental health providers that provide wrap around services for families that experience a loss. Seek partner who can provide translation of current English bereavement support packages to Spanish and Hattian-Creole languages. Seek partner who can assist in developing education and outreach materials that include importance of prenatal care and warning signs of pre-eclampsia in English, Spanish, and Hattian-Creole languages.
		 Partner and collaborate with local delivery hospital to develop improved discharge process that includes identifying need of non-medical referral services in English, Spanish, and Hattian-Creole.
		Priority Area: Substance Use
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
2/Bay, Franklin, Gulf Healthy Start Coalition, Inc.	Reduce rate of tobacco use and vaping by pregnant women by 10% by April 2025.	 Develop and air a commercial on the dangers of smoking and vaping during pregnancy. Partner with Learn Upon, an electronic education portal, to develop tobacco use and vaping during pregnancy education module to provide public education. Partner for development of Public Service Announcement to be aired on local radio stations.
10/Healthy Start Coalition of Pinellas County, Inc.	Increase the number of obstetricians and other medical providers that educate patients regarding the dangers of THC use during pregnancy by 20% (self-reported) by 2025.	 Partner with Drug Free America Foundation, Inc to provide educational materials to local health care providers. Create conversation guide for use by CONNECT referral staff to improve participation in home visiting programs by substance using women. Use approved messaging on social media platforms to inform, educate and increase knowledge of the dangers of THC-use during pregnancy.
12/Healthy Start Coalition of Hardee, Highlands & Polk Counties, Inc.	Decrease the number of pregnant women who smoke marijuana and tobacco during pregnancy within the coalition service area by 5% by December 31, 2025.	 Provide educational materials regarding the effects of smoking marijuana and tobacco during pregnancy at health events/fairs. Provide educational materials about the effects of marijuana and tobacco during pregnancy to all provider offices. Provide educational materials about the effects of marijuana and tobacco during pregnancy in newsletters, presentations, etc.
14/Healthy Start Coalition of Brevard County, Inc.	100% of providers and hospitals in Brevard County will receive additional educational materials and resources regarding substance use disorder; minimum of 400 educational materials delivered each month.	 Provide substance use and mental health educational materials and local resource lists to all obstetric providers and birthing hospitals. Create survey for providers to identify practice policy of women identified with substance use disorder and current methods of referral.

15/Indian River Healthy Start Coalition, Inc.	90% of program participants would indicate if they received an increase of knowledge about the effects substances have on the body, before, during, and after pregnancy, along with how to identify, understand and respond to signs of mental illness and substance use disorders. 85 Participant Target Total	 Substance Misuse Training – Training to understand indicators of substance use, dynamics in substance-abusing families, the relationship between substance abuse and child abuse and maintaining healthy boundaries between families and staff. Narcan Training – In-person training that teaches participants how to identify, understand and respond to signs of an opiate overdose. Mental Health First Aid Training – Training to learn the skills needed to reach out and provide initial support to someone who may be developing a mental health or substance use problem and help connect them to the appropriate care.
15/Okeechobee County Family Health/Healthy Start Coalition, Inc.	Partner with two local substance use centers to establish relationship for screening and service referrals by April 2024.	 Obtain Memorandum of Understanding with identified substance use centers. Collaborate with identified substance use centers to develop and establish protocol to screen women for substance use. Collaborate with identified substance use centers to develop process for service referrals.
		Priority Area: Maternal Health
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
2/Bay, Franklin, Gulf Healthy Start Coalition, Inc.	Increase awareness of importance of healthy lifestyle behaviors within Bay, Gulf, and Franklin Counties.	 Utilize smartphone technology to encourage participation during hosted community walk in Bay County for pregnant women and families. Partner with Bay County businesses and organizations to promote community walk and encourage participation. Include educational and interactive activities to promote healthy lifestyle behaviors at the three annual baby showers hosted in Bay, Gulf and Franklin Counties.
16/Healthy Start Coalition of Sarasota County, Inc.	30% of individuals within childbearing years (15-39) will access health related resources, that are made available.	 Create a resource directory that identifies common health conditions that are preventable and have a negative impact to pregnancy outcomes. Create educational campaign that provides information on the importance of health and wellbeing prior to becoming pregnant.
21/Healthy Start Coalition of Miami- Dade, Inc.	Increase education provided on premature births and correlating chronic maternal medical conditions by 3% by 12/31/2026.	 All pregnant and postpartum women who are not receiving WIC, and who provide consent for referral, will be referred by CONNECT staff to the WIC program for nutritional education and supplementary food. Translate preeclampsia materials into Hattian-Creole. Distribute 2,800 educational materials on preeclampsia to obstetricians, pregnant women, and other members of the maternal, infant, and child health community. Disseminate 18,900 Count the Kicks educational materials in English, Spanish, and Creole, to obstetricians, pregnant women, and other members of the maternal, infant, and child health community.

21/Healthy Start Coalition of Miami- Dade, Inc.	Maintain provision of psychosocial counseling services, including Moving Beyond Depression, to 144 pregnant and postpartum women in Miami-Dade County by 6/30/24.	 Provide education to 100% of prenatal providers and birthing hospitals in Miami-Dade County about perinatal mood disorders, including referral process to psychosocial counseling services. Distribute 13,500 educational materials on perinatal mood disorders in English, Spanish, and Creole to obstetricians, pregnant women, and other members of the maternal, infant, and child health community. Train and educate 100% of prenatal providers in Miami-Dade County on the Universal Prenatal Risk Screen.
		Priority Area: Provider Engagement
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
3/Capital Area Healthy Start Coalition, Inc.	Increase awareness of importance of healthy lifestyle behaviors within Bay, Gulf, and Franklin Counties.	 Utilize smartphone technology to encourage participation during hosted community walk in Bay County for pregnant women and families. Partner with Bay County businesses and organizations to promote community walk and encourage participation. Include educational and interactive activities to promote healthy lifestyle behaviors at the three annual baby showers hosted in Bay, Gulf and Franklin Counties.
3/Capital Area Healthy Start Coalition, Inc.	Educate all twelve prenatal providers on resources for women and infants and how to refer them into services.	 Host community resources lunch and learn series with short presentations by topic featuring a partnership with Healthy Families, substance use treatment, housing, food, etc. This series will be recorded and located online. Create and distribute a pocket card for providers that includes the QR code and website URL for the resource directory and videos recorded from the lunch and learn series.
3/Healthy Start Coalition of Jefferson, Madison & Taylor Counties, Inc.	Provide education to the three largest providers in Leon County about local resources in Jefferson, Madison, and Taylor Counties by 2025.	 Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc. will hire a provider liaison to improve relations with local health care providers. Provider liaison will visit prenatal care offices to promote CONNECT services and deliver brochures to improve awareness of Healthy Start services and resources. Meet with other Healthy Start Coalitions within FIMR region to coordinate a luncheon education opportunity for local providers to improve awareness of Healthy Start services and resources.
6/The Healthy Start Coalition of Flagler & Volusia Counties, Inc.	Increase Healthy Start presentations provided to prenatal and infant health care providers by 20% by 2025.	 Participate in at least five community health events in FY 23-24. Increase Healthy Start presence among and within provider spaces. Increase the number of provider offices that a CONNECT referral specialist is located to assist with closing service gaps. Promote awareness amongst community providers of interconception care services offered by the Healthy Start Coalition of Flagler and Volusia Counties, Inc.
14/Healthy Start Coalition of Brevard County, Inc.	100% of providers and hospitals in Brevard County will receive updated education materials that reflect needs as identified in FIMR case reviews; minimum of 400 educational materials delivered each month.	 Provide educational materials in all prenatal packets given to OB offices that include education materials regarding preconception care and pre-eclampsia. Provide educational materials in all postnatal packets given at birthing hospitals to include education materials regarding pre-eclampsia. Increase awareness of maternal and infant health education.

18/Healthy Start Coalition of Palm Beach County, Inc. 19/Broward Healthy Start Coalition, Inc.	Increase use of services provided by Healthy Start Coalition of Palm Beach County by 10% by 2024. Decrease racial disparity rates for Black non-Hispanic and Black Haitians to meet Healthy People	 Collaborate with local organizations and agencies to host community outreach events. Identify additional event opportunities to promote Healthy Start services. Partner with local medical facilities to provide presentation on FIMR process, leading causes of fetal and infant deaths, and importance of bereavement services. Expand FIMR CRT and CAG memberships. Continue to promote participation of health care providers in training to support service access to all families.
	2030 goals.	 Implement a group prenatal care program at local community health centers that serves high risk populations. Hire and train community doulas to work with women of reproductive age in the identified high-risk neighborhoods. Develop partnerships with providers and administration at new community health center to ensure completion of wrap around services.
		Priority Area: Preconception and Interconception Health
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
3/Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.	Educate 200 women of child- bearing age on the importance of a primary care provider by June 2025.	 Attend all local events to disseminate information on the importance of preconception health. Provide women's health workshops in Jefferson, Madison, and Taylor counties twice per year. Identify local partner to provide nutrition education services.
11/Healthy Start Coalition of Hillsborough County, Inc.	Reduce neonatal mortality rate from 5.2 per 1,000 live births in 2019 to 4.58 per 1,000 live births in 2026. (This is based on the service delivery plan and Healthy People 2030 goals by working on interpregnancy interval, postpartum visit, maternal health, and grief counseling).	 Provide Healthy Start case management services to 15 families with an infant in the Neonatal Intensive Care Unit for a long-term stay. Ensure the identified 15 families are linked with services upon hospital discharge including home visitation services. Educate the identified 15 mothers of need for post-partum visit and assist in making appointment prior to hospital discharge.
		Priority Area: Grief and Bereavement
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities
12/Healthy Start Coalition of Hardee, Highlands and Polk Counties, Inc.	By December 31, 2025, 15% of families enrolled in Healthy Start services that experience a fetal or infant loss will receive a grief or bereavement referral.	 Provide 'Resolve Through Sharing Bereavement' two-day training to Care Coordinators of the Healthy Start Coalition of Hardee, Highlands and Polk Counties, Inc. Provide cardiopulmonary resuscitation (CPR) and first aid training for families enrolled in Healthy Start Coalition of Hardee, Highlands and Polk Counties, Inc.

		 Complete engagement activities with local health care providers and staff regarding FIMR, local bereavement resources, and importance of documentation of referrals and family care provided after fetal or infant loss. Provide local providers educational information to promote bereavement and grief services.
13/The Healthy Start Coalition of Osceola County, Inc.	100% of birthing facilities in Osceola County will receive bereavement resources to provide to families that experience a fetal or infant loss.	 Create a subcommittee to identify local bereavement resources available. Create a comprehensive bereavement resource directory. Provide bereavement resource materials to birthing facilities.
14/Healthy Start Coalition of Brevard County, Inc.	100% of birthing hospitals in Brevard County (4 birthing facilities) will receive FIMR and bereavement resource training by the Healthy Start Coalition of Brevard County, Inc. by June 30, 2024.	 Provide hospital staff such as medical team and medical records staff training about what FIMR is, the importance of bereavement support, and the purpose of bereavement packages. Create and deliver bereavement packages to birthing hospitals to provide to families that experience a fetal or infant loss.
15/Indian River Healthy Start Coalition, Inc.	90% of program participants will indicate if they increase knowledge about Perinatal Bereavement Care, and learn techniques in taking a relationship-based, compassionate approach to perinatal, neonatal, and pediatric loss. 50 Participant Target	 Training to provide a relational standard of care for those who provide knowledge, support, and compassion to bereaved patients and families. Participants learn techniques to help reduce fear and uncertainty about what to do and say, compassion fatigue, and feeling overwhelmed. Creating community mapping of resources to provide residents a clear picture of the assets of their community and having a convenient resource for providers to share with clients.
15/Healthy Start Coalition of St. Lucie County, Inc.	Reach 75% of families that experience a fetal or infant loss within 30 days of loss by April 2024.	 Develop form for referral of bereavement services to be used by health care providers. Develop bereavement resource brochure for families that have experienced a loss; including counseling services, support groups, genetic counseling, and summary of services provided by local funeral homes. Develop process to identify families that experience a fetal and infant loss to ensure bereavement support is offered. Institute a dedicated phone line for grieving families.
15/Healthy Start Coalition of St. Lucie County, Inc.	90% of Healthy Start Coalition of St. Lucie County, Inc staff report feeling supported when interacting with families that have experienced a fetal or infant death by April 2024.	 Provide bereavement support training to Healthy Start Coalition of St. Lucie County, Inc staff. Provide motivational interviewing training to Healthy Start Coalition of St. Lucie County, Inc staff. Schedule quarterly internal meetings with staff to offer an opportunity to debrief and receive personal support. Offer an ongoing opportunity for private one-on-one support to staff.
15/Martin County Healthy Start Coalition, Inc.	Increase the number of families who receive bereavement therapy to 80%.	 Provide memory boxes to hospitals. Provide nursing staff and home visitation staff perinatal bereavement training. Solicit funding to provide ongoing bereavement therapy. Refer families experiencing loss to bereavement therapy.

	Priority Area: Water Safety		
FIMR Region / Healthy Start Coalition	Goal	Action Plan Activities	
15/Okeechobee County Family Health/Healthy Start Coalition, Inc.	Reduce any water related injuries or casualties in Okeechobee County by 2 % by April 2024.	 Incorporate meaningful and visual educational component at Okeechobee County Family Health/Healthy Start Coalition's three annual events to increase awareness of home water safety. Collaborate with local EMS and fire safety to develop, market, and operate a free CPR training class. 	