

## Dane County Fetal Infant Mortality Review Home Interview Consent Form

### Purpose of the Interview

Public Health Madison and Dane County (PHMDC) has a Fetal and Infant Mortality Review (FIMR) program. The purpose of FIMR is to:

- Learn more about how and why babies pass away in Dane County
- Improve programs and services for families impacted by pregnancy and infant loss
- Use learnings to prevent pregnancy and infant loss

To do this, PHMDC interviews moms who have recently experienced a stillbirth or the loss of a baby less than one year old. Records only tell us part of a person's story, so we are interviewing moms to help us better understand ways we might be able to help moms and babies in the future. After removing names and other identifiable information, relevant pieces from the interview will be shared with the Fetal & Infant Mortality Review Team to help them better understand your experiences. Common experiences and themes in all the interviews we gather will also be shared in a report to show similarities in families' experiences.

### What will happen during the interview

If you agree to participate, a trained interviewer representing PHMDC will meet with you in person or over the phone to ask questions about the death of your baby. This will include questions about your pregnancy, birth, time before birth, and experiences with services such as health care. The interview will take place wherever you feel the most comfortable and at a time that is convenient for you. The interview will take about an hour and a half, but may be shorter or longer depending on how much information you are able to share. If you are comfortable and agree, we prefer to record the conversation with an audio recorder. This allows the interviewer to focus on the conversation without the distraction of taking notes.

### Confidentiality of Interview Answers

Your personal information will always be confidential. This means we will never share your name, your baby's name, your family's names, or the names of your health care providers. The interviewer and all members of the FIMR team have signed an oath of confidentiality. Therefore, confidentiality will be protected to the full extent permitted by law.

- After removing names and other identifiable information, relevant pieces from the interview will be shared with the Fetal and Infant Mortality Review Team to help them better understand your family's experiences.
- Your de-identified interview will also be analyzed and combined with other interviews to show trends in families' experiences in Dane County. This means that themes and/or quotes from your interview may be included in publically available reports about the experiences of moms who have lost babies in Dane County. These reports may be published by PHMDC, or they may

be published by an external researcher. All of the information you provide will be de-identified before being shared outside of PHMDC.

In addition to the in person interview, you may also be asked to complete a short survey. The survey may be in addition to the interview, or it may be in place of an interview. It may be done online or in person. The online version of the survey will be through SurveyMonkey, which is compliant with HIPAA standards (HIPAA provides data privacy and security for safeguarding your medical information). The answers to any survey questions will be used in the same way interview information will be used, as described in this section. This means that survey answers may also be included in FIMR meetings and in publically available reports about the experiences of moms in Dane County.

### **Benefits and Risks**

The interview may be a positive experience for you. You may find that talking about your baby can help you feel better. The information you provide may help improve the care future moms and babies receive. We hope that this work will prevent the loss of a baby for future families.

No physical risk of harm is expected if you participate in this interview. However, talking about your baby may be hard for you. The interviewer is not a trained therapist and cannot provide therapy. The interviewer will give you a list of community resources that may help you cope with your loss. If you start the interview and do not want to finish, you can stop at any time.

### **Mandatory Reporting Requirement**

If abuse or neglect of a child is suspected or observed, the interviewer is required to immediately report this to Dane County Human Services (Wisconsin State Statute 48.981(2)) or to the local law enforcement agency.

### **Gift (optional)**

An optional \$50 gift card will be offered to you in appreciation for your time and participation in the interview.

### **Voluntary Participation**

Your participation in the interview is completely up to you. You can choose to skip or not answer any question. You are free to end the interview at any time. Your decisions will make no difference in the services you may receive from PHMDC.

### **Questions**

If you have questions concerning the interview or the Fetal and Infant Mortality Review, please call Kat Grande, PHMDC Supervisor, at 608-243-0409.

**Consent to Audio Tape**

Do you agree to the audio from the interview being recorded?

Yes

No

**Consent to Interview**

By signing this document, you are agreeing to the following statements:

- The purpose of this interview, procedures to be followed, and risks and benefits have been explained to me.
- I have been allowed to ask the questions I have, and my questions have been answered to my satisfaction.
- I have been told whom to contact if I have additional questions.
- I understand that any information identifying myself, my family, or our health providers will be protected and kept confidential.
- I understand that my de-identified interview answers will be presented in FIMR meetings and will be included in publically available reports about the experiences of moms in Dane County.
- I have read this consent form and agree to be in this interview with the understanding that I may withdraw at any time.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Interviewer's Name: \_\_\_\_\_

Interviewer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_