



September 2022 Learning Forum



KPQC **MAJOR** Learning Forum Event

Tuesday, October 25th from 12:00 – 1:00 pm

Call to Arms:

Family Planning in the Immediate Postpartum Birth Setting



Sridevi Donepudi, MD, MMM, FAAFP
Medicaid Medical Director,
Kansas Department of Health &
Environment

Madhuri Reddy, MD, FACOG
Department of Obstetrics & Gynecology,
University of Kansas Health Systems



Meeting registration: [HERE](#)




Rapid Response: KBC Conference

Register for one or BOTH days


DAY 1
Hot Topics in Lactation
\$139 Registration Fee

DAY 2
Community Day
Registration is FREE




The Kansas 2022 Breastfeeding Conference

October 13 & 14
Wichita, KS



Lydia O. Boyd, IBCLC, CBC, CLE, BPC



Lisa Marasco, MA, IBCLC, FILCA

Register online at ksbreastfeeding.org/2022-conference/

Location:
Holiday Inn Wichita East 135, 549 S Rock Rd, Wichita, KS 67207

Reserve your room at our special rate.



DAY ONE

Thursday, October 13

The first day of the conference will focus on "hot topics" in lactation to provide clinical skills and breastfeeding knowledge for healthcare professionals and others who serve families. The registration fee for Day 1 is \$139 and will include continuing education for nurses, dietitians and lactation support providers (CERPs).

Program Agenda:

8:00 - 8:15	Registration and Welcome
8:15 - 9:30	Recognizing When Things are Heading South: Investigating for Low Milk Production —Lisa Marasco
9:30 - 9:45	Break
9:45 - 11:15	Is It Their Hormones? Hormonal Imbalances and Insufficient Milk Supply —Lisa Marasco
11:15 - 11:30	Break
11:30 - 12:45	Counseling for the Lactation Professional in a Diverse World —Lydia Boyd
12:45 - 1:30	Lunch
1:30 - 2:45	Milk Let-Down Reflex —Lisa Marasco
2:45 - 3:00	Break
3:00 - 4:30	Can You Really Eat Your Way to Making More Milk? A Look at Lactogenic Foods —Lisa Marasco
4:30	Closing

A lactation room will be available for those needing to express breast milk during the conference. Infants in arms are welcome.

DAY TWO

Friday, October 14

The second day of the conference will focus on the policies and systems needed to successfully create communities supporting breastfeeding. Registration for Day 2 will be FREE. Continuing Education will NOT be provided.

Program Agenda:

8:30 - 8:40	Welcome & Orientation
8:40 - 9:40	Emerging Leaders: Success Stories Across Kansas —Panel Discussion
9:40 - 9:50	Break
9:50 - 10:50	Breastfeeding in the Black Community: An Act of Resistance —Lydia Boyd
10:50 - 11:00	Break
11:00 - 12:00	Professional Lactation Education: Dismantling Racial Disparities in the Lactation Field —Lydia Boyd
12:00 - 1:00	Lunch
1:00 - 3:00	<ul style="list-style-type: none"> • State of Breastfeeding in Kansas • Celebrations • New KBC Programs • First 1,000 Days Kansas: An Introduction into Advocacy • Mini-Grant Reports
3:00 - 3:15	Break
3:15 - 3:45	Annual Meeting - Board transition, Section Updates
3:45 - 4:00	Closing

Continuing education for nurses, dietitians, and lactation support providers has been applied for with the accrediting organizations for Thursday's sessions ONLY.

Conference funded in part by:



REGISTER NOW at ksbreastfeeding.org/2022-conference

Rapid Response: *Women's Health Symposium*

HAYSMED

Women Health Symposium 2022

9 a.m.–3:15 p.m., Friday, November 4, 2022

HaysMed, Hadley Rooms, 2220 Canterbury Drive, Hays, KS 67601

Joint providership with HaysMed and The University of Kansas Medical Center Continuing Education and Professional Development and Area Health Education Center - West.

Program overview

This program is designed to improve the care of women health including, but not limited to, Kansas Morbidity and Mortality data, Maternal Mental Health, Maternal Complications in the Postpartum Period and Infant feeding and followup.

Objectives

Following this program, the participants can be expected to:

- Examine the state of maternal morbidity and mortality in Kansas.
- Identify key factors in MMH for Kansas women in pregnancy and the first year after birth.
- Identify the importance of screening women during childbearing years with Edinburgh Postnatal Depression Scale.
- Examine resources, treatment options, and care considerations for maternal mental health.
- Explore postpartum risk factors to new mothers related to POST BIRTH Warning Signs and importance of awareness in identifying signs and symptoms.
- Explore implications of pregnancy complications and how they can affect a woman's health across her lifespan.
- Identify key assessment findings in infant follow up in the early weeks following birth related to feeding and development.
- Examine ways to support the new mother faced with feeding challenges and frequent follow up.

For more information

785-623-5500

haysmed.com/education



Rapid Response: *Professional advocacy*

WANTED: Individuals or organizations from the *birthing world* in Kansas who might be interested in joining the **Immunize Kansas Coalition**

- Contact: **Heather Braum, Health Policy Advisor**

www.immunizekansascoalition.org/

KPQC/KDHE Site Visits



Can we visit YOU?

2022 - 2023
KPQC Fourth Trimester Initiative
Champion Timeline

FTI Project	Start	Finish	Sept '22	Oct '22	Nov '22	Dec '22	Jan '23	Feb '23	Mar '23	Apr '23	
POSTBIRTH Training	Current	Dec 2022									
KBEN Training	Current	October 2022									
Maternal Mental Health TA	Current	Ongoing thru 2023									
PP Appointment Prior to Discharge	Current	Ongoing thru 2023									
AIM Data Entry	Nov 2022	Ongoing thru April 2023									
PP Care Team/PP Referrals/Community Resource List	Sept 2022	December 2022									
Breastfeeding: High 5 & Baby Friendly	Current	Ongoing thru 2023									
Reproductive Family Planning	Oct 2022	Ongoing thru 2023									
ED/EMS Triage Policy	Current	Ongoing thru 2023									
SSDOH Screening & Referral to CRL	TBD		TBD								
Implicit Bias Training	TBD		TBD								
Standardized Discharge Summary	TBD		TBD								

KBEN Training

Deadline: October 31st

Completed (YEAH!)	In Progress 😊
Jessica Gier- Univ of KS KC	Jill White- Hutchinson Regional Med
Jessica Seib- HaysMed	Kristin Perez- Stormont Vail Health
Kari Smit- AdventHealth Shawnee Mission	Dr Taylor Bertschy- Wesley Med Center
Katie Kufahl- Community Healthcare System	Toni Carter- Neosho Memorial Med Center
Kayla Schroeder- Geary Comm Hospital	
Kimberlee Dick- Stormont Vail Health	
Dr Kimberly Brey- Stormont Vail Health	
Missy Mourek- Olathe Med Center	

Maternal Mental Health

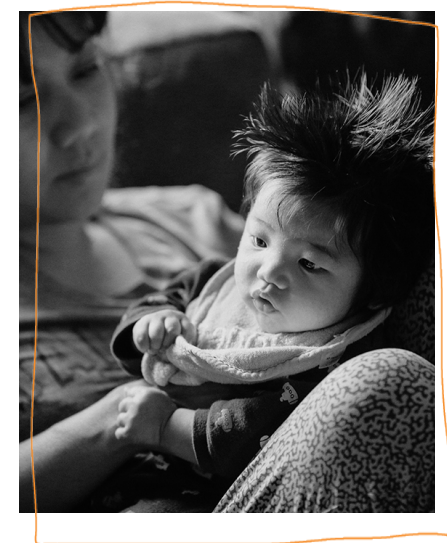
As of 9/30/22, all FTI facilities/centers will be included in Kansas Connecting Communities technical assistance.

Current FTI MMH Technical Assistance Facilities/Centers - No changes!

- ✓ Continue to submit screening data quarterly for CQI & receive stipend.
- ✓ Continue to complete annual surveys.
- ✓ Continue to participate in training & TA events.

All other FTI Facilities/Centers - Now will have access to...

- ✓ Small group technical assistance workshops that delve into specific pieces of screening implementation, including policy development, referral process, and patient interventions.
- ✓ One-on-one technical assistance as needed to implement perinatal behavioral health screening at your organization.
- ✓ Option to provide KCC with quarterly screening data and receive a \$500/quarter stipend for submitting data and engaging in data-driven continuous quality improvement.
 - *Limited stipends are available, so if you're interested, let us know ASAP!*



Have questions?
Email kcc@ku.edu



Additional Resources

Postpartum Support International (PSI)

This organization promotes awareness, prevention, and treatment of mental health disorders that impact mothers and fathers during pregnancy and the 12-month postpartum period. PSI offers a toll-free Help Line, online support groups, connections to Support Coordinators in Kansas, and resources.

Website: postpartum.net

Family Advisory Council

Made up of family members and consumers who are interested in helping drive change to maternal and child health services and inform programs for women, children, and families.

Website: kansasmch.org/fac-about.asp

Infant-Toddler Services

A variety of services are available for infants and toddlers with developmental delays or disabilities, ages birth through 36 months, and their families. Services are free of cost and available statewide.

Website: kdhe.ks.gov/677/Infant-Toddler-Services

Special Health Care Needs

Special Health Care Needs is here to help if your child has special medical needs.

Website: kdhe.ks.gov/747/Special-Health-Care-Needs

Supporting You

Helps families connect with a peer who has experienced a similar situation and/or circumstance in life. Learn more about what peer support could do for you.

Website: supportingyou.ks.gov/

Didn't find what you were looking for? Check out the links below to help you find resources and services available in your area.

1-800-CHILDREN

1-800-CHILDREN staff are in your corner providing anonymous, judgment-free support. Families can easily connect with the information, local resources, and support they need 24/7, even if what they need is just a listening ear. No question is off limits! 1-800-CHILDREN is available in English, Spanish and 200 additional languages.

In addition to calling, you can reach 1-800-CHILDREN by sending a text or email to: 1800Children@ks.gov.

1800ChildrenKS.org is a searchable database of statewide resources. Find the 1800ChildrenKS app in your phone app store for a mobile friendly version of the resource database.

Kansas Quality Network (KQN)

Provided by the Kansas Department for Children and Families with information about services for children and families. This includes child care assistance, food assistance, Temporary Assistance for Needy Families, and early childhood education programs. KQN also supports parents with information about how to choose child care that goes beyond health and safety.

Website: ksqualitynetwork.org/



For questions about or ordering information for this brochure, email kdhe.newbornscreening@ks.gov or



Guide to Kansas Family Supports

Programs & Organizations to Support You & Your Family

Rapid Response: New KDHE resource!

Prenatal Resources

Becoming A Mom®

Becoming a Mom® is a free prenatal education program, utilizing the March of Dimes Becoming a Mom curriculum, that helps pregnant women learn all they need to know about pregnancy and how to improve their chances of having a healthy baby!

Website: kdhe.ks.gov/1836/Information-For-Interested-Pregnant-Pers

Women, Infants & Children (WIC)**

WIC is a free nutrition program that helps pregnant women, new moms, infants and children up to age 5 with supplemental foods, breastfeeding support and access to nutrition education. WIC offices are located throughout the state.

Website: kdhe.ks.gov/1000/Nutrition-WIC-Services

KanCare**

KanCare ensures that pregnant women and families with children receive the preventative services and screening they need and provide ongoing support with managing chronic conditions.

Website: kancare.ks.gov

Home Visiting**

Kansas Home Visiting is free & flexible! Home Visiting programs are as unique as the families they serve. All Kansas families with pregnant mothers and/or with children ages birth to five years, can participate in our programs.

Website: kshomevisiting.org/

Children & Family Resources

(Birth to 18 Years)

Breastfeeding

Breastfeeding information for parents & searchable directory to find local breastfeeding support.

Website: ksbreastfeeding.org/resources/

Newborn Screening

Kansas is one of 3 states in the country to provide free universal newborn (bloodspot) screening. To learn more information about programs under Newborn Screening, visit our website.

Website: kdhe.ks.gov/NewbornScreening

Sound Beginnings - Early Hearing Detection & Intervention (EHDI)

Ensures that newborns complete the hearing screening process and provides resources to families of a child newly identified deaf or hard of hearing.

Website: www.soundbeginnings.org

Safe Kids

Simple safety steps can make sure bumps and bruises don't turn into more disabling injuries or death.

Website: www.safekidskansas.org/

Safe Sleep

Safe Sleep is as easy as ABC (Alone, Back, Crib). Learn more about infant safe sleep environments on our website.

Website: safesleepkansas.org/

Immunize Kansas Coalition

For information on immunizations and the immunization schedule from birth through 18 years of age.

Website: immunizekansascoalition.org/parents.asp

Child Care Aware

To see a full list of licensed child care providers in your area, visit our website.

Website: ks.childcareaware.org/child-care-search/

Kansas Birth Certificates

Kansas birth certificates are the basis for identification and are needed for enrollment for school, sports, insurance, and day care.

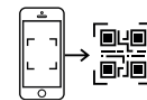
Website: kdhe.ks.gov/1186/Birth-Certificate

Kansas Head Start/Early Head Start

Kansas Head Start/Early Head Start programs promote the school readiness of infants, toddlers, and preschool-aged children. Services are provided in a variety of settings including centers, family child care, and home visits. Head Start programs also engage parents or other key family members in positive relationships, with a focus on family wellbeing.

Website: www.ksheadstart.org/

***Please note these programs are available to women and families after the prenatal period as well.*



For more information on any of these programs, visit their website or scan the QR code with your smartphone.

- For digital copies: Terrah
- For printed copies: Drew (Drew.Duncan@ks.gov)

SAVE THE DATE

Kansas Perinatal Quality Collaborative

GENERAL MEETING



11.15.2022

Meeting details
coming soon!



The NEW Postpartum Model

**Educate
Screen
Refer**

In every patient, in every birth setting, in every protocol:

❑ **Maternal Warning Signs**

1. POSTBIRTH Education & Recognition
2. Identify Medical Red Flags prior to discharge, PP Appt

❑ **Maternal Mental Health**

❑ **PP Appointment(s)** prior to discharge

❑ **Breastfeeding**

- High 5 for Mom & Baby, Baby Friendly

❑ **Family Planning**

❑ **SSDOH**

❑ **PP Care Team:** Pt included

- Who? How? When?

❑ Pt debriefs for Adverse Outcome Events

❑ ED/EMS Triage (Universal question, POST-BIRTH, ACOG Algorithms)

❑ Link Up! (MCH, Outpatient clinics, etc)

Protocols!

In every patient, in every birth setting, PRIOR to discharge:

- PP Appt made prior to DC
- PP Care Team, as indicated
- Referral to Navigator, as indicated
- Screenings completed
 - SDOH
 - Mental Health
 - Medical risks
 - Breastfeeding
 - Fam Planning
- Referrals Made
 - SDOH
 - Mental Health
 - Medical indications
 - Breastfeeding
 - Fam Planning
- Standardized Discharge Summary

MATERNAL HEALTH & IPV

An Introduction to the MAVIS Project

DISCLOSURE

The MAVIS Project is supported by the Office on Women's Health of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$300,000 with 100 percent funded by OWH/OASH/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by OWH/OASH/HHS, or the U.S. Government. For more information, please visit womenshealth.gov.



MAVIS PROJECT
Maternal Anti-Violence Innovation & Sharing

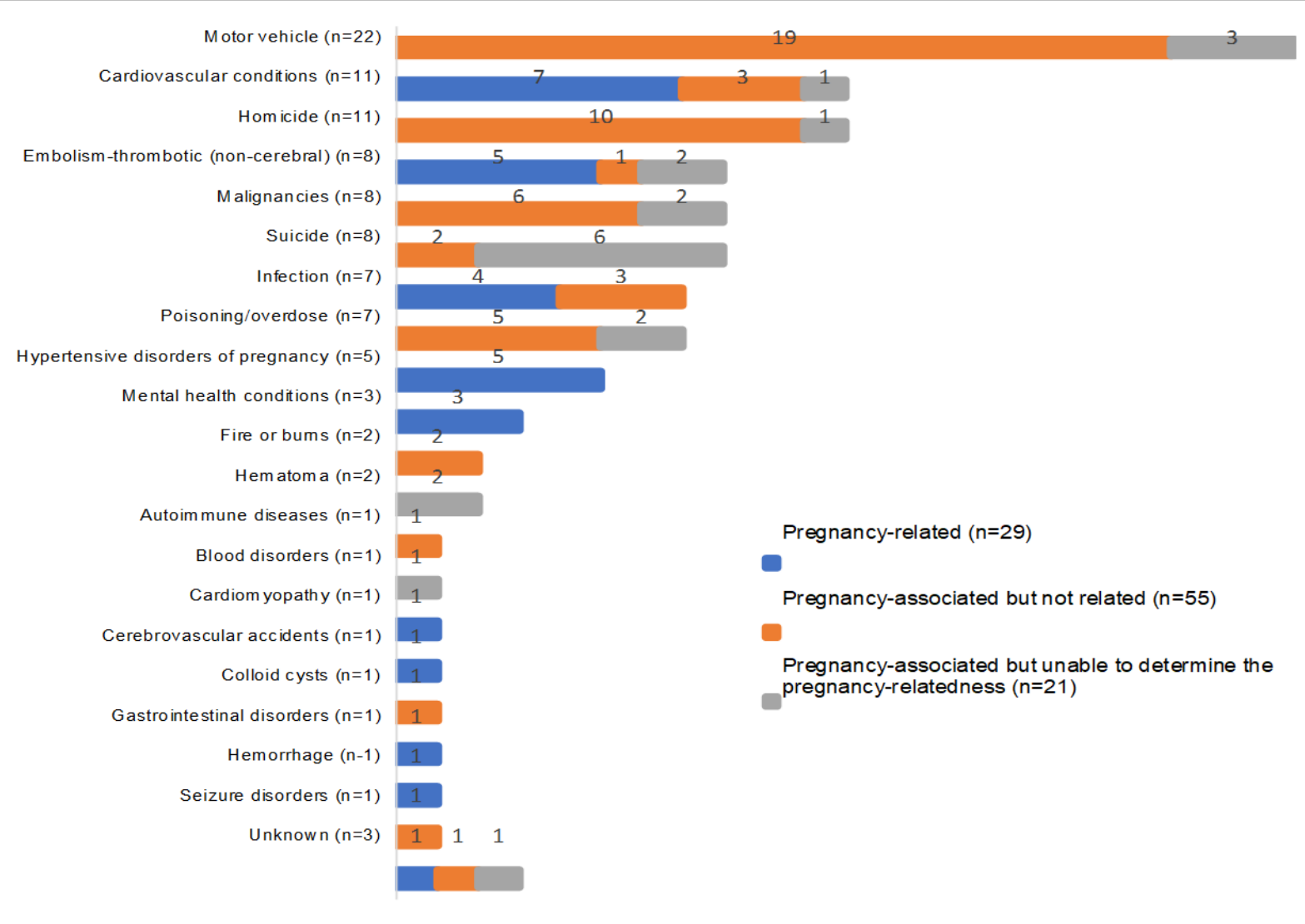
LEARNING OBJECTIVES

1. Describe the health impacts of domestic violence
2. Identify benefits of using universal education about IPV in the healthcare setting

MATERNAL MORTALITY IN KANSAS

- Between 2016-2020, 11 homicides accounted for 10.5% of the 105 pregnancy-associated deaths.
- Six of the 11 homicides occurred during pregnancy (54.5%), four occurred between 43 to 365 days postpartum (36.4%) and one occurred within 42 days postpartum (9.1%).
- When the relationship was known, the perpetrator was most often a current or former intimate partner.

Figure 13. Number of underlying cause of death for pregnancy-associated deaths by pregnancy-relatedness, Kansas, 2016-2020



Note: For Figure 13, the underlying cause of death categories listed above are mutually exclusive – meaning that each case is classified into only one of the groups. In the death that a suicide was completed by intentionally overusing a drug or medication, these cases are included in the "Suicide" category and not the "Poisoning/overdose" category.

Source: Kansas Maternal Mortality Review Committee

KMMRC RECOMMENDATIONS

Recommendations for Action, Preventing Pregnancy-Related Deaths:

1. Screen, provide brief intervention, and refer for co-morbidities and chronic illness, such as:
 - Intimate Partner Violence (IPV)
 - Pregnancy Intention
 - Mental Health Conditions (including postpartum anxiety and depression)
 - Substance Use Disorder
2. Increase communication and collaboration among providers, including referrals
3. Educate and empower patients



MAVIS PROJECT

Maternal Anti-Violence Innovation & Sharing

A **partnership** between Kansas Department of Health and Environment (KDHE), Kansas Coalition Against Sexual and Domestic Violence (KCSDV), Kansas Connecting Communities (KCC), Kansas Perinatal Quality Collaborative (KPQC) and Kansas Maternal Mortality Review Committee (KMMRC) **to reduce maternal deaths in Kansas due to homicide and suicide.**



PROPOSED INTERVENTIONS

Continue to build and expand on the success of the KMMRC to **gather additional data** related to violent maternal deaths through establishment of a KMMRC SDOH Subcommittee.



Provide **cross-training** to perinatal care providers (KPQC/Fourth Trimester Initiative birthing facilities) and intimate partner violence service providers (KCSDV members) related to perinatal moods and anxiety disorders (PMADs), perinatal substance use, and intimate partner violence.

Increase **collaboration and referrals** between perinatal care and intimate partner violence providers resulting in coordinated care and support services for pregnant and postpartum women. Includes facilitating **MOUs** between providers that outlines resources and services provided by each entity, referral process to each organization, and crisis intervention protocols.



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DEFINING INTIMATE PARTNER VIOLENCE (IPV)

Intimate Partner Violence

- Domestic violence that occurs between intimate partners
- A pattern of abusive and coercive behavior used to gain dominance, power, and control over an intimate partner
- Undermines the victim's sense of self, free will, and safety
- Includes the use of *illegal* and *legal* behaviors and tactics

The Power & Control Wheel

Source: [Domestic Abuse Intervention Programs](#) Duluth, Minnesota



1 in 4 women have
experienced physical
violence by an intimate
partner in their lifetime.

Source: Centers for Disease Control and Prevention (CDC). [National Intimate Partner and Sexual Violence Survey: 2015 Data Brief](#)

2020 KANSAS DV STATISTICS

- 23,143 incidents reported to law enforcement. Offender was arrested 48% of time.
- 34 domestic violence homicides, making up 17.6% of all homicides.

Source: [2020 Domestic Violence, Stalking, and Sexual Assault in Kansas As Reported by Law Enforcement Agencies](#), Kansas Bureau of Investigation

HEALTH IMPACTS OF IPV

IS YOUR RELATIONSHIP AFFECTING YOUR HEALTH? FUTURES WITHOUT VIOLENCE

- Asthma
- Diabetes
- Chronic pain
- High blood pressure
- Cancer
- Smoking
- Drug and alcohol abuse
- Unplanned pregnancies
- STDs
- Trouble sleeping
- Depression
- Anxiety
- Inability to think or control emotions

PREGNANCY AND IPV

- More likely to receive no prenatal care or delay care until later than recommended
- 3x more likely to report symptoms of depression in the postnatal period
- Associated with increased risk of low birth weight and preterm birth
- 3x more likely to suffer perinatal death

Source: [Moms & Babies: Intimate Partner Violence](#) – National Partnership for Women & Families, National Birth Equity Collaborative (2021).

RACIAL DISPARITY IN MATERNAL HEALTH

- Black women are 3-4x more likely to die from pregnancy-related causes than white women
- Disproportionate impacts of IPV with less access to care and resources that would prevent and mitigate harm

Source: [Black Mamas Matter Toolkit \(2018\)](#).

CUES: Using An Evidence-based Intervention To Address IPV In Healthcare Settings



BARRIERS FOR PROVIDERS

- What barriers make it hard to talk about IPV with patients?
- Have you ever had a patient disclosure of violence and didn't know what to do?

BARRIERS FOR PROVIDERS

- Time constraints
- Discomfort with the topic
- Fear of offending the patient or partner
- Need for privacy
- Perceived lack of power to change the problem
- A misconception regarding patient population's risk of exposure to IPV

Source: Centers for Disease Control and Prevention (CDC). (2013). [Intimate Partner Violence During Pregnancy: A Guide for Clinicians.](#)

SCREENING WITHOUT UNIVERSAL EDUCATION

“No one is hurting you, right?”

“You aren’t being abused, are you?”

“Have you been experiencing any domestic violence?”

“Are you being abused by your partner?”

“Are you safe in your home?”

Source: Futures Without Violence, [Assessment and Safety Planning for Domestic Violence in Home Visitation \(2011\)](#).

LIMITATIONS OF SCREENING WITHOUT UNIVERSAL EDUCATION

- Low Disclosure Rates
 - Disclosure rates in clinical settings range from 1-14%.
- Non-Differential Outcomes
 - Without universal education or warm referrals, there is no significant difference in outcomes for survivors who receive screening.

Source: [The Evidence Behind CUES, Futures Without Violence](#)

PATIENTS' REASONS FOR NON-DISCLOSURE

Fear of judgment

Fear of not receiving adequate support

Religious beliefs

Language barriers

Having children in the home

Concerns about mandated reporting

Concerns about privacy

Source: [The Evidence Behind CUES, Futures Without Violence](#)

WHAT SURVIVORS OF IPV WANT FROM HEALTHCARE PROFESSIONALS

Autonomy

- Survivors want to make their own decisions.

Empathy and Compassion

- Survivors want their experiences to be validated without judgment.

Informed Providers

- Survivors want health professionals who understand the depth and complexity of domestic violence.
 - Impact of trauma on health
 - Long-term nature of violence
 - Intersection with accessing other needs

Source: [The Evidence Behind CUES, Futures Without Violence](#)

VALUE OF UNIVERSAL EDUCATION (UE)

- Providers exposed to a UE curriculum have more **confidence** in discussing domestic violence
- Patients receiving this intervention have **positive feedback**, reporting it to be more helpful than comparable interventions
- Patients also share their **information** with their peers
 - Research shows that participants who received UE were almost twice as likely to share the DV hotline number with someone.

Source: [The Evidence Behind CUES, Futures Without Violence](#)

CUES INTERVENTION

C: Confidentiality

- Privacy and transparency about any limits of confidentiality

U/E: Universal Education + Empowerment

- Use safety cards, share resources and information regardless of disclosure

S: Support

- Patient-centered care plan and warm referral to DV program

Source: [The Evidence Behind CUES, Futures Without Violence](#)

CATEGORIES OF SAFETY CARDS

& RESOURCES FROM FUTURES WITHOUT VIOLENCE

- American Indian/Alaska Native Health
- Campus Health
- Child and Adolescent Health
- HIV Testing and Care
- Home Visitation
- Primary Care
- Reproductive and Sexual Health
- Lesbian, Bisexual, Gay, and Trans/Gender Non-Conforming



www.ipvhealth.org/resources/

Resources are available in multiple languages, in PDF and in hard copy.

REFERRAL BEST PRACTICES

Cold Referral

- Giving a phone number
- Not knowing anything about what services are provided
- Not familiar with staff
- Not knowing anything about the quality of services provided

Warm Referral

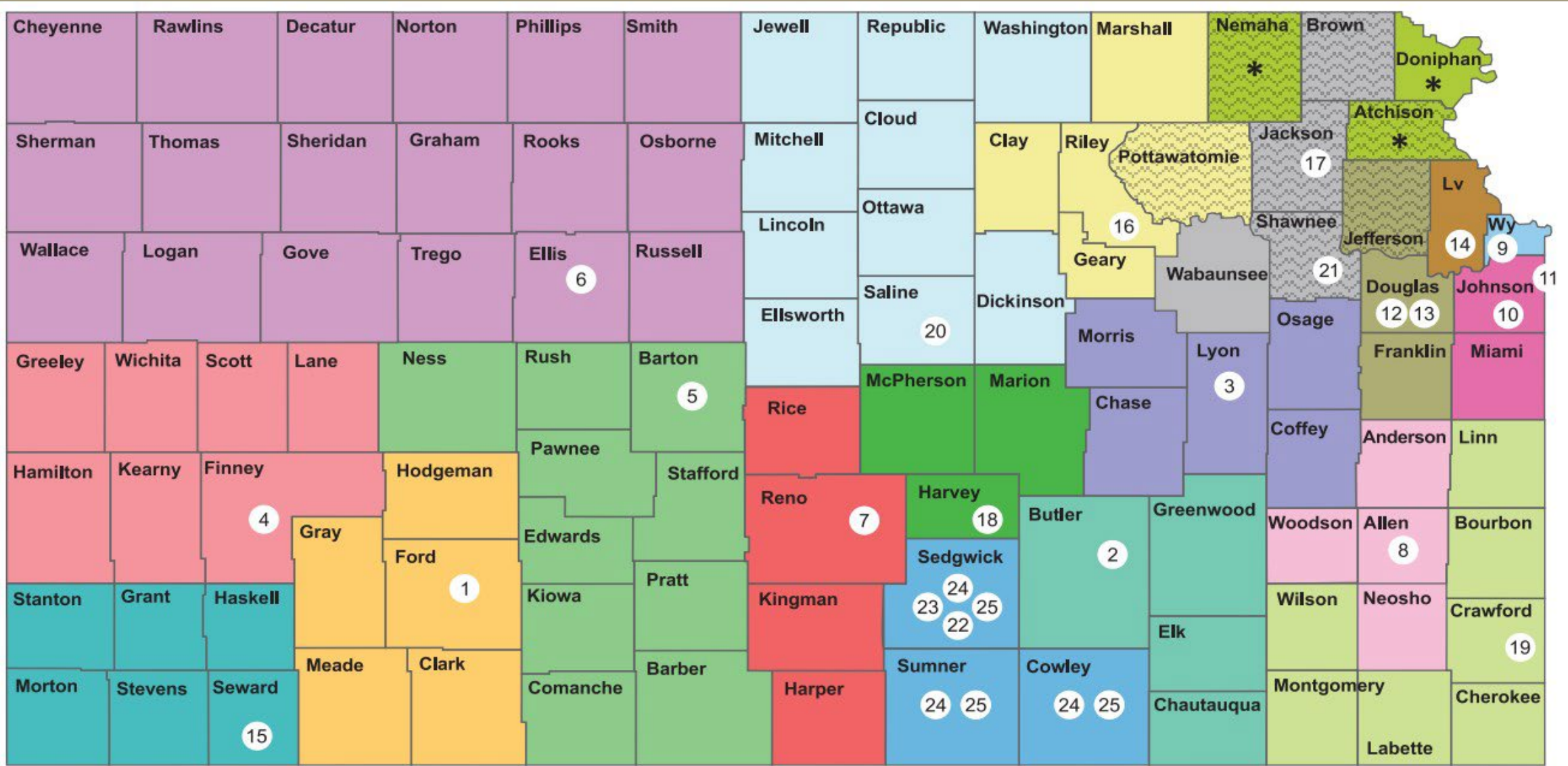
- Making the call together
- Having an advocate's name or point of contact
- Knowing the services and being able to tell someone how they can help
- Knowing how to make referrals, or if and when an advocate can respond in-person
- Being able to speak to the quality of services

- Crisis intervention
- Support groups
- Hotline services
- Personal advocacy
- Shelter
- Resource and referral
- Community awareness and education

All services are free and confidential.

KCSDV Member Program Services

Kansas Crisis Hotline: 1-888-END ABUSE
(1-888-363-2287)



 Tribal Victim Services

* Call the 24/7 Kansas Crisis Hotline at 1-888-363-2287 or one of the neighboring programs.

NEXT STEPS



Survey



Training



Memoranda of
Understanding (MOUs) with
DV/SA Service Providers

RESOURCES

- Kansas Crisis Hotline: 1-888-END ABUSE (1-888-363-2287)
- KCSDV: www.kcsdv.org
 - Map of local DV/SA programs: <http://www.kcsdv.org/find-help.html>
- Futures Without Violence: www.futureswithoutviolence.org
 - Safety Cards: <http://ipvhealth.org/resources/>

Sarah Hachmeister

Director of Advocacy

Kansas Coalition Against Sexual & Domestic Violence

shachmeister@kcsdv.org

Katie Wade

MAVIS Project Coordinator

Kansas Coalition Against Sexual & Domestic Violence

kwade@kcsdv.org

SAVE THE DATE

Kansas Perinatal Quality Collaborative

GENERAL MEETING



11.15.2022

Meeting details
coming soon!



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Sridevi Donepudi, MD, MMM, FAAFP
Medicaid Medical Director,
Kansas Department of Health &
Environment

Madhuri Reddy, MD, FACOG
Department of Obstetrics & Gynecology,
University of Kansas Health Systems



Meeting registration: [HERE](#)

