

2022



Learning Forum

March 2022



March Madness!

Name and Agency in the Chat



Agenda

- **Rapid Response**
- **FTI Update**
- **General Meeting information**
- **Featured Speaker: Dr Taylor Bertschy**



Introducing
Ryker Sorell

DOB: 3-16-22

Kasey is now
Fourth Trimester 😊



Speaking of births

Kansas FTI Sites: 26,420

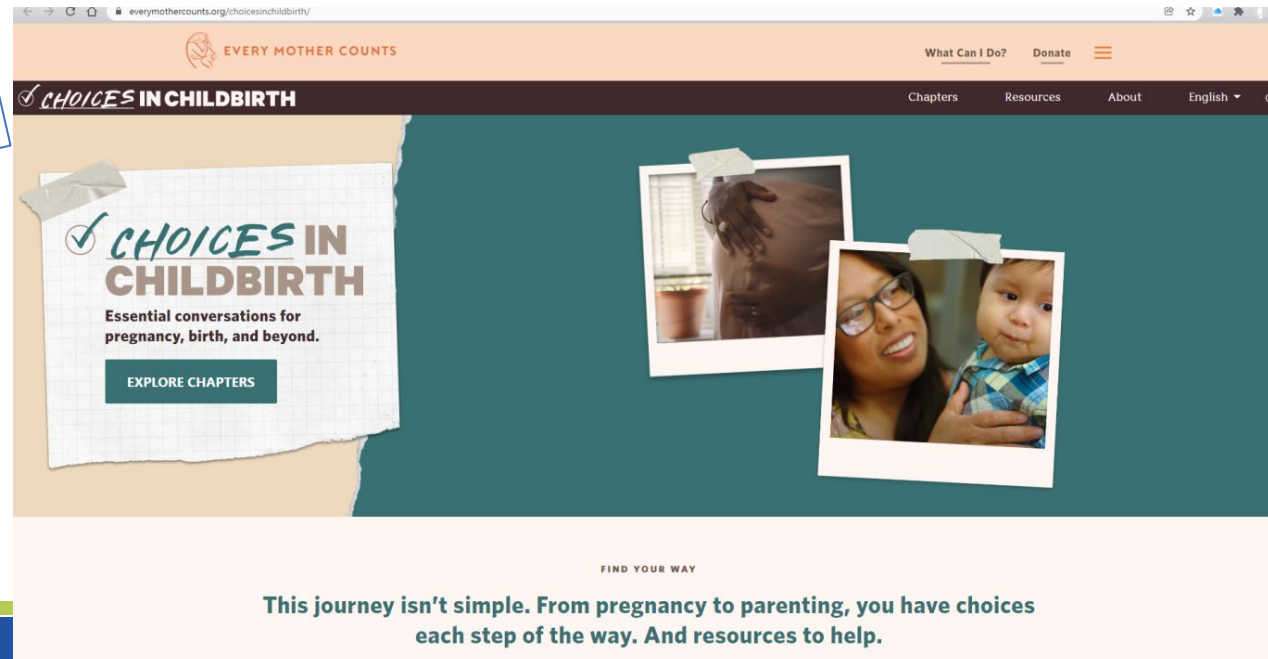


Rapid Response

Every Mother Counts is thrilled to announce the launch of [Choices in Childbirth: Essential Conversations for Pregnancy, Birth, and Beyond](https://everymothercounts.org/choicesinchildbirth/)—an interactive video series and educational resource library designed to provide information, tools, and support for pregnant people and parents.

This first-of-its-kind series brings accessible, engaging information and tools to pregnant people and parents across the country—centering the wisdom of parents, doulas, educators, midwives, and physicians and engaging people in becoming active participants in their own maternity care journey.

<https://everymothercounts.org/choicesinchildbirth/>



Rapid Response: MORE Magnets!

SAVE YOUR LIFE:	
Get Care for These POST-BIRTH Warning Signs	
<small>Most women who give birth recover without problems. But any woman can have complications after the birth of a baby. Learning to recognize these POST-BIRTH warning signs and knowing what to do can save your life.</small>	
Call 911 if you have:	<input type="checkbox"/> P ain in chest
	<input type="checkbox"/> O bstructed breathing or shortness of breath
Call your healthcare provider if you have: <small>(If you can't reach your healthcare provider, call 911 or go to an emergency room)</small>	<input type="checkbox"/> S eizures
	<input type="checkbox"/> T houghts of hurting yourself or your baby
Trust your instincts. <small>ALWAYS get medical care if you are not feeling well or have questions or concerns.</small>	<input type="checkbox"/> B leeding, soaking through one pad/hour, or blood clots, the size of an egg or bigger
	<input type="checkbox"/> I ncision that is not healing
	<input type="checkbox"/> R ed or swollen leg, that is painful or warm to touch
	<input type="checkbox"/> T emperature of 100.4°F or higher
Tell 911 or your healthcare provider:	<input type="checkbox"/> H eadache that does not get better, even after taking medicine, or bad headache with vision changes
	"I had a baby on _____ and (Date) I am having _____," (Specific warning signs)

FTI updates



FTI = Process Improvement

➤ Enroll in FTI:

Maternal Warning Signs

- Baseline Data
- Policy Review
- Train POST-BIRTH
- ☐ Update Policy
- ☐ Standardize Discharge Summary & Education
- ☐ PP Visit Scheduled

Maternal Mental Health

- Baseline Data
- Direct TA Group selection & work
- Training on Standardized Screening, Treatment
- ☐ Establish Referral Network (PP Care Teams)
- ☐ Policy Review/Update
- ☐ Standardized Discharge Summary & Education
- ☐ PP Visit Scheduled

AWHONN POST-BIRTH Training Update

- ✓ Train PP Staff
- ✓ Train OB Staff
- ✓ Integrate POST-BIRTH into EVERY discharge postpartum
- ☐ Train Outpatient Staff
- ☐ Train ER/Urgent Care
- ☐ Integrate ER/Outpatient settings

Maternal Warning Signs: POST-BIRTH Training

TOTAL COUPONS COUNT	250
COUPONS USED	76
COUPONS REMAINING	174

POST-BIRTH: The time is NOW

- ❑ Completion of POST-BIRTH Training: **March 31st, 2022**
- ❑ Additional staff Coupons available until September 2022



MMH Update

FTI Survey & TA Cohort- 2022



CONGRATS to our newest TA members!

- Citizens Medical Center
- Community HealthCare System (Onaga)
- Lawrence Memorial Hospital



Needs Survey Summary

KPQC FTI TA Cohort- 2022

Overall Response

17 total responses

- 6 of the responses were current TA sites

5 sites chose “not interested” in joining next TA cohort

- Next steps: continue to engage through presence at FTI events and offer informal training/education opportunities

6 sites chose “interested” in joining next TA cohort

- 3 of these indicated capacity to meet the TA requirements indicated
- Next steps: email outreach to provide detailed information and set up an initial check-in

Biggest Needs for Site-Specific TA

Current Cohort

Improved Referral Process	2
Improved Follow-up Process	1
Increased Staff Training	3
Policy Development	2
Improved coordination between providers, clinics, and/or inpatient/outpatient settings	2

Other - "Bridging [the] gap with community members."

Ideal TA Sessions Would...

1

Be held virtually and scheduled during the lunch hour when more staff can participate.

2

Include discussion about EHR data.

3

Include 'live' examples and time to complete TA-related work/tasks.

4

Include ideas to coordinate with other team members, including on-call doctors/nurses, to maintain consistency with screenings.

Perinatal Mental Health Goals 2022

Increase Screenings (rate and quality/consistency)	4
Improve Communication with Patients About Difficult Topics	3
Improve Inpatient/Outpatient Communication	2
Get the Whole Team/Community to Prioritize PMH	2
Improve Referral Processes, Policies, and Resource Options	7

Needed to Achieve

General Community Support	1
Connection with Other Facilities	1
Policy Development*/EHR Integration	3
Access to Referral Resources/Networks	4
Staff Education/Training**	5

*Should include not only screening and referral implementation, but also guidance for intervention when a patient is in crisis.

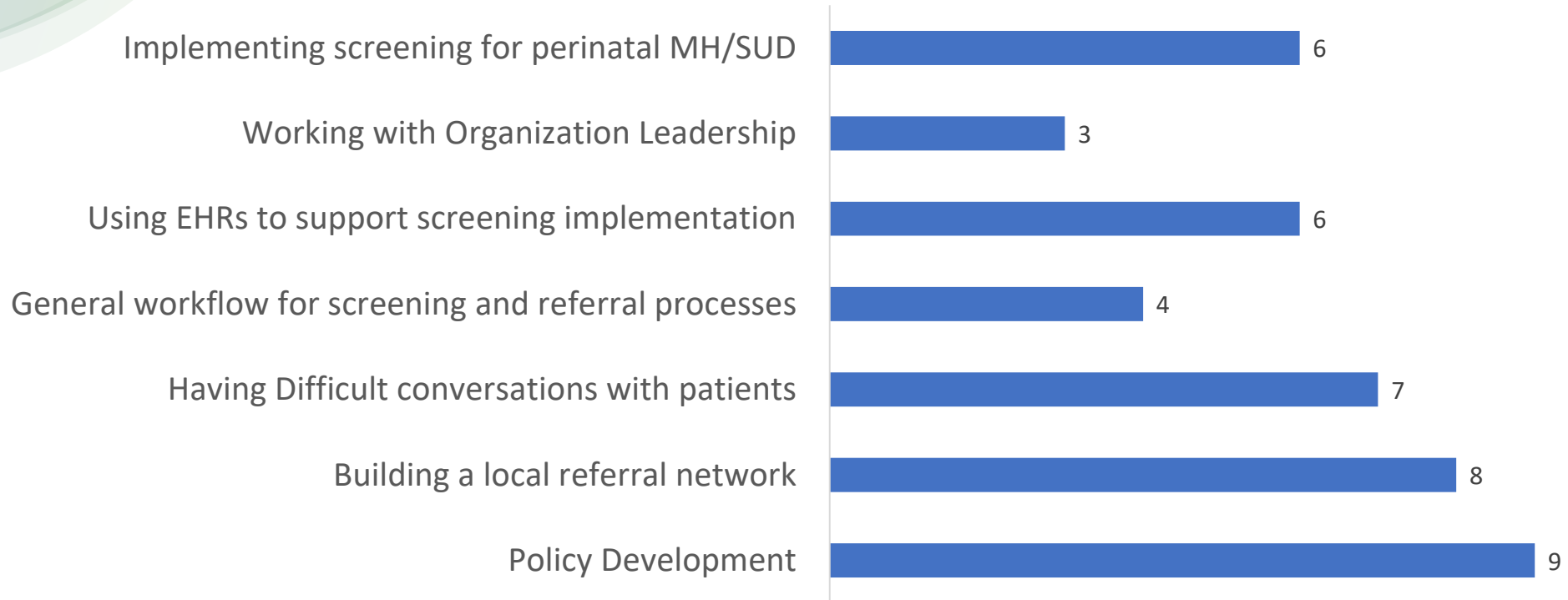
**Specifically mental health training, administering screenings, etc.

Qualitative Feedback

"We are familiar with recognizing the symptoms, but we don't always know what the "first steps" are when we are presented with one of these patients..."

"In order for the screening process to be implemented more consistently, I came up with a procedure that was helping, but it tends to break down when I'm not in the office..."

Workshop Topic Requests



Other – “[Implementing] mental health ok, but no (not ready to implement) substance use screening yet.”

For all sites...

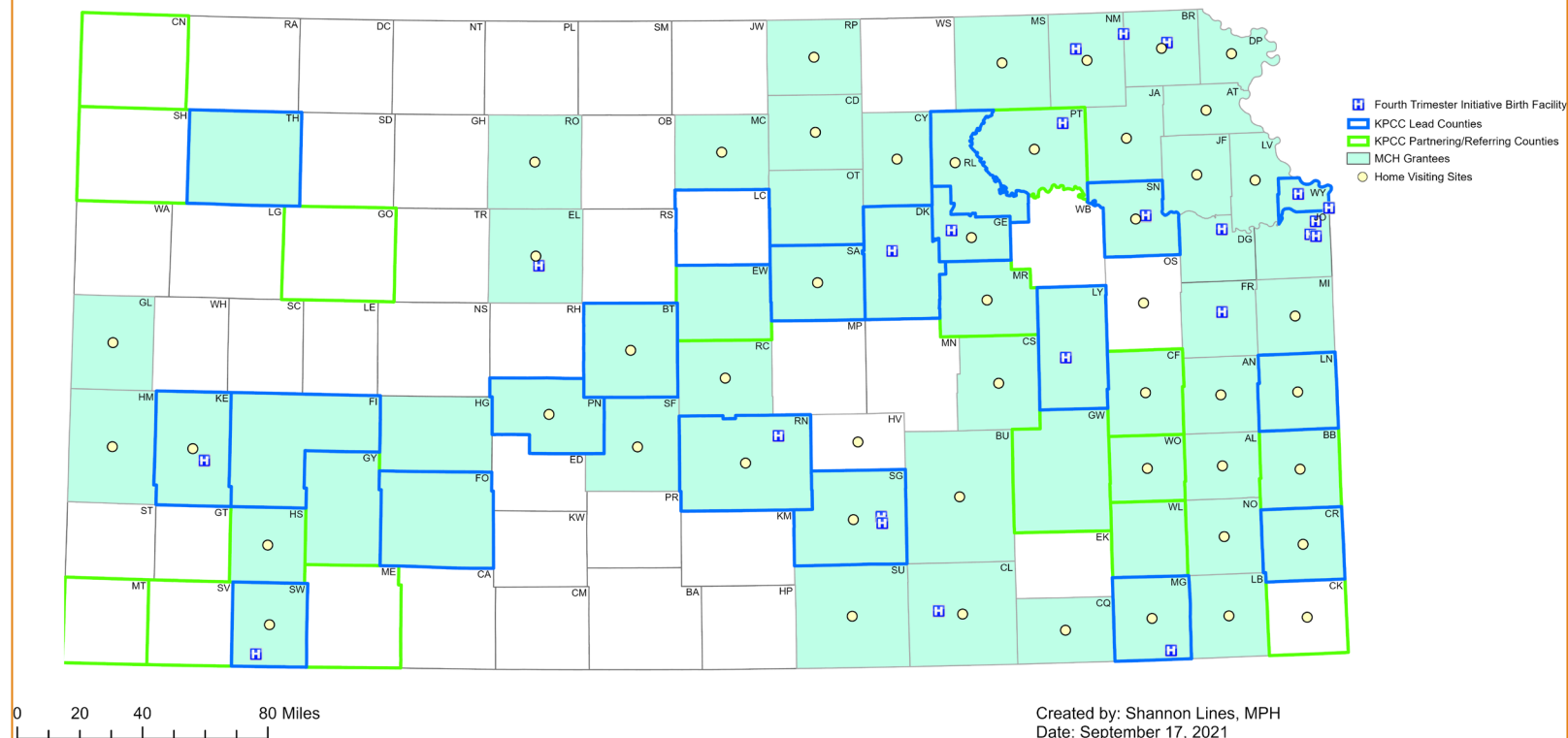
Screen, Educate, Refer, Connect



On your radar:

INpatient
to
OUTpatient

Kansas Perinatal Community Collaborative Sites with Additional Resources (Fourth Trimester Initiative Birth Facility, Maternal Child Health Grantee, and Home Visiting) Map, Kansas, State Fiscal Year 2022



Created by: Shannon Lines, MPH
Date: September 17, 2021
Data Sources: Fourth Trimester Initiative Program Data, KPCC Program Data, MCH Program Data, and Home Visiting Program Data

Parallel Work

FTI

MCH

KPCC

Birth Facilities	County	City	Completed Parallel MCH Training	KPCC Embedded
Advent Health Shawnee Mission	Johnson	Merriam	Yes	
AdventHealth Ottawa	Franklin	Ottawa		
Amberwell Hiawatha Community Hospital	Brown	Hiawatha	Yes	
Ascension Via Christi St. Joseph	Sedgwick	Wichita	Yes	
Atchison Hospital Association dba Amberwell Atchison	Atchison	Atchison		
Citizens Medical Center	Thomas	Colby		Yes
Coffeyville Regional Medical Center	Montgomery	Coffeyville		Yes
Community Healthcare System	Pottawatomie	Onaga		
Geary Community Hospital	Geary	Junction City	Yes	Yes
Hays Medical Center ("HaysMed")	Ellis	Hays		
Hutchinson Regional Medical Center	Reno	Hutchinson	Yes	Yes
Kearny County Hospital	Kearny	Lakin		Yes
Lawrence Memorial Hospital	Douglas	Lawrence	Yes	
Memorial Health System	Dickinson	Abilene	Yes	Yes
Nemaha Valley Community Hospital	Nemaha	Seneca		
Neosho Memorial Regional Medical Center	Neosho	Chanute		
Newman Regional Health	Lyon	Emporia		Yes
Overland Park Regional Med Center	Johnson	Overland Park	Yes	
Pratt Regional Medical Center	Pratt	Pratt		
Providence Med Center	Wyandotte	Kansas City	Yes	
Sabetha Community Hospital	Nemaha	Sabetha		
Southwest Medical Center	Seward	Liberal	Yes	Yes
Stormont Vail Health	Shawnee	Topeka	Yes	Yes
University of KS Health System- KC	Wyandotte	KC	Yes	Yes
University of KS Health System- St Francis	Shawnee	Topeka	Yes	Yes
Wesley Medical Center	Sedgwick	Wichita	Yes	
KS Birth Centers				
New Birth Company-Overland Park, KS	Johnson	Overland Park	Yes	
Sunflower Birth & Family Wellness	Cowley	Winfield		

Featured Speaker

Taylor Bertschy, DO FACOG

OBGYN Hospitalist

Co-Medical Director for Birthrooms & Birth Care Center

Department of Obstetrics & Gynecology

Wesley Medical Center



FOURTH TRIMESTER INITIATIVE INTEGRATION AT A LARGE MIDWEST HOSPITAL

TAYLOR BERTSCHY, DO FACOG
OBGYN HOSPITALIST
WESLEY MEDICAL CENTER

POSTPARTUM CARE IN THE INPATIENT SETTING OLD SCHOOL

- Single encounter at six week follow up despite complications
- Patient's responsible for making follow up appointments
- One size fits all
- Little formal maternal support

POSTPARTUM CARE IN THE INPATIENT SETTING

NEW SCHOOL

- Ongoing process tailored to each woman's individual needs
- Contact with mom 2-3wks after delivery
- Comprehensive visit no later than 12 weeks postpartum
 - Physical, social, psychological wellbeing
- Counseling on increases in lifetime risks due to pregnancy complications
- Establish who will assume primary/ongoing care of chronic illness

READINESS

- Referral resources and communication pathways b/t obstetricians and community-based organizations
- Multidisciplinary care team to design coordinated clinical pathways for patient discharge
- Standardized discharge summary form
- Staff education on optimization of postpartum care and how to screen for life threatening postpartum conditions
- Trauma informed protocols and trainings

RECOGNITION & PREVENTION

Establish	Establish system for scheduling postpartum care visits & needed immediate specialty care visits prior to discharge
Screen	Screen each patient for postpartum risk factors and provide linkage to community resources prior to discharge
Assess and Document	In all care environments assess and document if a patient is presenting pregnant or has been pregnant in the past year
Offer	Offer reproductive life planning discussions and resources, including contraceptive options



RESPONSE

- Provide patient education prior to discharge
 - Life threatening postpartum conditions
 - Early warning signs, mental health conditions
 - How to seek care
- Provide patient with standardized discharge summary that details key info from pregnancy and birth
- Conduct a comprehensive postpartum visit
- Encourage designated support person



FTI AT WESLEY MEDICAL CENTER (OVER 5000 BABIES/YR)

Successes

- Standardized dismissal education
- Maternal Warning Signs magnets
- Printable physician orders
- Flyer for when to call or return to office or hospital
- Patients receive a copy of discharge summary
- Extension to the Emergency Departments

Opportunities

- Nursing education
 - Difficult because of the amount of employees
 - Difficult for employees to log in if not in house
 - Access from home?
 - Healthstream format?
- Little to no time to complete when working
 - Compensation?

- Patient follow up
 - Finding unassigned patients care before leaving hospital
 - Timeframe given, but often no actual appointment made
 - Leaving onus on the patient to call OBGYN office
 - Different offices with different processes
 - At least 9 different offices
 - Over 40 providers
 - None are hospital employed
 - 2 are PSG employed

OPPORTUNITIES



TRANSLATING TO OUTPATIENT SETTING

Inpatient

- Patient is present
- Specialized teams for specific needs
- Case managers
- Nurse navigators
- Standardized education
- Daily provider visits

Outpatient

- “Lost to follow up”
- Rely on communication other than face to face
- Sleep deprivation, fatigue
- Confused between baby and mom appointments
- Oftentimes patients are required to be the one to initiate

A close-up photograph of a purple flower with water droplets on its petals. The image is overlaid with semi-transparent circular graphics, including concentric circles, dashed lines, and arrows, suggesting a technical or scientific theme. The overall color palette is dominated by purples and greens.

IRIS

FREE REFERRAL TOOL RAN BY KDHE

IRIS IN A RESIDENT CLINIC



- Consent form is given to all new OB patients
 - Automatically enrolled in Baby Talk
 - Options to select other resources
- Very easy to use
- One place to keep track of referrals and communication
 - Consistent documentation
- 94% acceptance rate
- Average response is 6 days
- Notified if patient accepts referral appointment
- Can send multiple referrals at once
- Able to attach records

IRIS



- The Good

- Referral system for the state
- Used to schedule postpartum or specialty visits prior to leaving the hospital
- Closed loop communication
- Send and receive referrals

- The Bad

- Can only use program if the office is in the system
- Currently most programs address social aspect of care
- Six offices enrolled

PHYSICIAN PERSPECTIVE



- Bridgeable gap from time of discharge to outpatient follow up
 - Minimize steps
 - Maximize education and reminders
 - Dismissal “package” to include all appointments already made or referral process initiated
 - Prescriptions
 - In house pharmacy
 - Outpatient office follow up
 - Notify OBGYN of ED presentations or readmissions
- Two patient examples
 - Sleep deprived new mom, post op from C/S
 - Pediatric peripartum cardiomyopathy readmission



ENGAGING OTHERS

- Establish a direct line from hospital discharge to outpatient offices
- ED education
- Enrollment in IRIS

WHAT'S NEXT

- Reliable process for appointment generation
 - Calendar reminders for phones
- AWHONN education on multiple platforms
- Tailored follow up
- Initiation of support services prior to leaving hospital
- Discharge package
- Track patient follow up and compliance
 - What's working, what's not
- A way to notify providers of readmissions
- Incorporate Reduction of Peripartum Racial/Ethnic Disparities measures

The background is a dense, overlapping collage of colorful sticky notes in shades of blue, green, yellow, and purple. Each sticky note features a large, bold black question mark. A semi-transparent circular scale with degree markings from 40 to 260 is overlaid on the left side of the image. The text 'QUESTIONS? ANSWERS?' is written in white, sans-serif capital letters on the right side.

QUESTIONS?
ANSWERS?

REFERENCES

- Alliance for Innovation on Maternal Health. *Postpartum Transition Discharge Bundle*. <https://safehealthcareforeverywoman.org/aim/>
- ACOG Committee Opinion No 736. *Optimizing Postpartum Care*. May 2018.

General Meeting

Information &
Registration

**Virtual*
9a-12p
**FTI On-site*
12p-3p



MoMMA's
Voices

Voices of lived experiences.
Partners in maternal health.

About Us



Next Learning Forum

April 26th, 2022

