OBJECTIVES

• March of Dimes – mission and goals
• New York common agenda and IMPLICIT expansion project
• Introduction to IMPLICIT Interconception Care
• IMPLICIT Network overview
• Resources for follow-up

OJBECTIVES
MARCH OF DIMES LEADS THE FIGHT FOR THE HEALTH OF ALL MOMS AND BABIES.
MOMS AND BABIES ARE FACING AN URGENT HEALTH CRISIS

The U.S. has one of the WORST RATES of maternal death in the developed world. African American women are significantly more likely to die.

<table>
<thead>
<tr>
<th>Infants &amp; Mothers</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>More likely to give birth prematurely</td>
<td>50% of women of color are up to 130% higher infant death rate. Their children can face a 130% percent higher infant death rate.</td>
</tr>
<tr>
<td>Premature birth and its complications are the largest contributors to infant death and is</td>
<td>up to 1 in 7 in the U.S. and globally.</td>
</tr>
</tbody>
</table>

Depression goes undiagnosed. Half of the cases of postpartum depression occur before or after pregnancy. Over some time between the year women are treated for depression precipitating significantly more likely to die. African American women are up to 50% of maternal death in the U.S.; has one of the worst rates.
FOR HEALTHY MOMS, STRONG BABIES.

OUR GOALS

End the Health Equity Gap

Preterm Birth and Infant Death

End Preventable

Death Risks and Maternal

End Preventable
AND WE WON'T STOP FIGHTING.

EVERY DAY WE ARE...

EMPOWERING

families with tools to have healthier pregnancies

PIONEERING

research to find solutions

UNITING

communities to build a brighter future for us all

ADVOCATING

for policies that will protect them

SUPPORTING

Radical improvements to the healthcare they receive
MOM & BABY ACTION NETWORK COMMON AGENDA

Results Statement

All people are healthy before, during, and after pregnancy and if they give birth, they have healthy outcomes.

What we will measure

- % of live births born preterm (before 37 weeks)
- Preterm birth disparity ratio for United States
- Maternal mortality rate
- Chronic hypertension in women aged 15-44
- Chronic severe maternal morbidity in women aged 15-44
- Environmental justice
- Economic insecurity
- Economic connected
- Build safe & connected communities

Overarching Strategies

- Dismantle racism and address unequal treatment
- Increase access to high quality healthcare
- Promote environmental justice
- Disrupt lifelong economic insecurity
- Build safe & connected communities

Severe maternal morbidity

Chronic diabetes in women aged 15-44

Overarching Strategies

- Build safe & connected communities
- Economic connected
- Economic insecurity
- Environmental justice
- Economic connected
- Build safe & connected communities

Severe maternal morbidity

Chronic diabetes in women aged 15-44

All people are healthy before, during and after pregnancy and if they give birth, they have healthy outcomes.
STRATEGIES & SOLUTIONS

• Increase access to high quality, high-value, risk-appropriate, integrated health care.

OUR COLLECTIVE ACTION: Expand Implicit

• OUR COLLECTIVE ACTION: NFL PLAY 360

OUR COLLECTIVE ACTION: Doula Pilot Project

• OUR COLLECTIVE ACTION: CATCH Program

OUR COLLECTIVE ACTION: Childhood obesity prevention

• OUR COLLECTIVE ACTION: Breastfeeding Friendly Initiative

OUR COLLECTIVE ACTION: Racial Equity Impact Analyses training and coaching

• OUR COLLECTIVE ACTION: Childhood obesity prevention CATCH Program

OUR COLLECTIVE ACTION: NFL PLAY 360

• DISMANTLE RACISM and address unequal treatment.

BUFFALO MOM

OUR COLLECTIVE ACTION: Racial Equity Impact Analyses training and coaching

• Reduce the burden of and disrupt lifelong economic insecurity.

OUR COLLECTIVE ACTION: Transportation policy and programmatic changes under Go Buffalo Mum

• OUR COLLECTIVE ACTION: Transportation policy and programmatic changes under Go Buffalo Mum

OUR COLLECTIVE ACTION: Doula Pilot Project

• OUR COLLECTIVE ACTION: Expand Implicit

• Invest in and build safe, supportive, connected neighborhoods.

OUR COLLECTIVE ACTION: Doula Pilot Project

• OUR COLLECTIVE ACTION: Breastfeeding Friendly Initiative
**Interconception Care Workflow for Well Child Visits (Birth - 2 years)**

- **Front Desk:**
  - Gives WCV Mother Questionnaire to mother & New Mother Questionnaire at first visit only

- **Clinician:**
  - Addresses maternal risks
  - Completes Family Assessment section of WCV template

- **Nursing:**
  - Reviews WCV Mother Questionnaire
  - Places intervention materials in room

- **Crisis Team:**
  - Reviews WCV Mother Questionnaire

- **Advice:**
  - Asks mother 2-item depression questions & record score in eCW
  - Give PHQ-9 if positive
    - Folic acid, MVI
    - Smoking
    - Family planning
    - Depression

- **Referral or Appt Rx:**
  - Waiting for WCV Questionnaires while
    - Mother completes WCV Questionnaires

- **Mother:**
  - Places intervention materials in room
  - Reviews WCV template
  - Asks mother 2-item depression questions
  - Completes Family Assessment section of WCV template
ICC Implementation

Key takeaways

- Observe & utilize a team
  - Cannot solely rely on the physician

- Get leadership and staff buy-in
  - Funding helpful, but not necessary

- Building screening tools in the EMR is a challenging process
  - Can be done at pediatric sites

Opportunities for collaboration

- Cannot solely rely on the physician
- Cannot rely solely on the physician
- Need a team

ICC Implementation
Mission: The IMPLICIT Network is a family medicine maternal child health learning collaborative focused on improving birth outcomes and promoting the health of women, infants, and families through innovative models of care, quality improvement and professional development for current and future physicians.

Vision: To help create a future where mothers are fully supported to have healthy babies, families, and communities. The work of the IMPLICIT Network is rooted in the following values:

- Collaboration: Fostering an environment where all specialties can work towards birth equity and health equality for all
- Education: Training future physicians and health care providers to impact the health of women, children, and families
- Innovation: Developing methods to improve the health of women, children, and families
- Commitment: Improving maternal health one woman and a time

Values: The IMPLICIT Network is a family medicine maternal child health learning collaborative focused on improving birth outcomes and promoting the health of women, infants, and families through innovative models of care, quality improvement and professional development for current and future physicians.

IMPLICIT Network Mission, Vision, Values
IMPLICIT NETWORK SITES

- 30 sites total across 8 states
- 27 sites implemented ICC
- 22 sites share ICC data
- Archive
  - active (not sharing data)
  - archive

REDCap
with the Network via

IMPLICIT NETWORK SITES
<table>
<thead>
<tr>
<th>Fall 2019</th>
<th>Spring 2020</th>
<th>Fall 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>78,274 WCV with ICC</td>
<td>55,785 WCV with ICC</td>
<td>46,434 WCV with ICC</td>
</tr>
<tr>
<td>108,107 WCV</td>
<td>74,621 WCV</td>
<td>61,111 WCV</td>
</tr>
<tr>
<td>29,834 mom/baby dyad</td>
<td>21,409 mom/baby dyad</td>
<td>18,411 mom/baby dyad</td>
</tr>
</tbody>
</table>

2019 - PRESENT
### Risk Factor Screening Rate

<table>
<thead>
<tr>
<th></th>
<th>ICC WCV</th>
<th>Risk</th>
<th>Risk%</th>
<th>Inter.</th>
<th>Inter. Screen</th>
<th>Site</th>
<th>ICC WCV</th>
<th>Risk</th>
<th>Risk%</th>
<th>Inter.</th>
<th>Inter. Screen</th>
<th>Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking</td>
<td>2,638</td>
<td>2297</td>
<td>292</td>
<td>12.7</td>
<td>283</td>
<td>194</td>
<td>68.6</td>
<td>68.6</td>
<td>12.7</td>
<td>283</td>
<td>194</td>
<td>68.6</td>
</tr>
<tr>
<td>Network</td>
<td>40,830</td>
<td>27,942</td>
<td>4,116</td>
<td>14.7</td>
<td>3,823</td>
<td>307</td>
<td>80.3</td>
<td>80.3</td>
<td>14.7</td>
<td>3,823</td>
<td>307</td>
<td>80.3</td>
</tr>
<tr>
<td>Network</td>
<td>40,830</td>
<td>28,725</td>
<td>2,214</td>
<td>7.7</td>
<td>922</td>
<td>72</td>
<td>93.6</td>
<td>93.6</td>
<td>7.7</td>
<td>2,214</td>
<td>922</td>
<td>72</td>
</tr>
<tr>
<td>Network</td>
<td>40,830</td>
<td>27,464</td>
<td>8,026</td>
<td>29.2</td>
<td>6,742</td>
<td>579</td>
<td>72.6</td>
<td>72.6</td>
<td>29.2</td>
<td>6,742</td>
<td>579</td>
<td>72.6</td>
</tr>
<tr>
<td>Network</td>
<td>40,830</td>
<td>27,543</td>
<td>12,372</td>
<td>44.9</td>
<td>11,066</td>
<td>579</td>
<td>72.6</td>
<td>72.6</td>
<td>29.2</td>
<td>6,742</td>
<td>579</td>
<td>72.6</td>
</tr>
</tbody>
</table>

Cumulative ICC Phase 2 data: report run on 9/6/18
Hoping to see what sites are having success and then sharing that with other sites

Overall in network have seen the following:

- 20% decrease in smoking over the intervention
- 43% in contraception, larger effect early on
- 35% on MVI use

New work on behavior change data.
IMPLICIT Network Current Projects

• IMPLICIT ICC (New)
• IMPLICIT 4th Trimester (New)
• IMPLICIT Health Disparities Initiatives
• IMPLICIT Network Current Projects
Implicit 4th Trimester Model

Specific Aims of the 4th Trimester Model

Team Care Establishment

Visit The Early

Identify At Risk Patients

substance abuse, disorders, renal disease, or hypertension, disorders, endocrine concerns, thyroid disorders, mood concerns, obesity/weight

As many as 40% of women do not attend a postpartum visit. This

day after delivery, into see their doctor between 7 and 21

Program aims to get the patient back treatment among multiple

Other Wrap around services psychosocial, biomedical, and

aims to connect patients with providers and settings. This program
Beleta Telëning Example ηϮ͗ Woƙfloǁ (Shadyside FHC)

3rd Trimester
Birth
Discharge
RN

Reminders

Schedule for 2-8 week PP visit at prenatal appointment

Schedule 2-week mom-baby appointment before discharge

2 week PP + WCC

8 week PP + WCC

Visit at prenatal appointment

Schedule for 2-week PP
The Midlothian IC model is based on the concept of a multi-sectoral, multi-disciplinary approach to improving health outcomes. The model emphasizes the integration of health, education, social services, and other sectors to provide comprehensive care and support to individuals and communities.

**Why was the tool kit developed?**

The toolkit was developed to help professionals and organizations implement the Midlothian IC model in their local contexts. It provides resources and guidance on how to develop and implement the model, including case studies, best practices, and tools for evaluation.

**Implicit Interconnection Care Toolkit**

- **Guidelines**
- **Tools and Resources**
- **Case Studies**
- **Evaluation Framework**

** Implicit Interconnection Care Toolkit**
QUESTIONS