Sessions Related to Maternal Health at the 2015 AMCHP Annual Conference

* As of January 6, 2015 *

Schedule at a Glance

Friday, January 23
8:30 AM – 5:00 PM

A Standard Data System for Maternal Mortality Reviews: Applying Basic and Advanced Techniques and Analyses

Though maternal death reviews have been in place for over a century, and almost half the states in the U.S. have a maternal mortality review process, there has never been a standardized data system available to support essential review functions. Join AMCHP and CDC for a two-part training on a new data system developed by CDC personnel that supports centralized analysis and leverages standard data sources for maternal death reviews.

Content of the Maternal Mortality Review Data System (MMRDS) was originally developed based on decades of work by the CDC Division of Reproductive Health. The MMRDS standardizes information collected by maternal death reviews and defines a core set of information that all users collect; all in a free software package (Epi Info 7) with strong user support and which is easily adapted by reviews. The MMRDS has four primary purposes:

- Serve as a data abstraction tool
- Support case summary development
- Document committee findings and recommendations
- Support analysis (internal to Epi Info and through exported data)

During this two-part daylong training, CDC personnel will provide an introduction to the data system and the Epi Info 7 platform, provide a tour of the forms corresponding to review data sources and introduce the relational database structure, and present basic and advanced analysis supported by Epi Info 7.

Sunday, January 25
9:00 AM – 10:00 AM

Building Communities to Address Disparities in Preterm Birth (Session ID# C1)
Session Track: Women's and Infant Health

The March of Dimes is implementing programs that address disparities in preterm birth by building community, including Healthy Babies are Worth the Wait® and CenteringPregnancy® group prenatal care. Focus groups were conducted to gather information about knowledge and attitudes related to pregnancy, prenatal care and preterm birth. In this workshop, presenters will identify community-level strategies for addressing disparities and increasing access to care through needs assessment, health education and patient navigation. Participants will also discuss strategies to empower women to take charge of their own health during pregnancy and to reach women with health promotion messages around risk factors such as obesity, stress, unplanned pregnancy and pregnancy spacing.

Elizabeth Riggs, MPH, Associate Director, March of Dimes
Sherenne Simon, MPH, Associate Director, Program Services and Advocacy, March of Dimes

Linking Data to Evaluate Prenatal Care Coordination Effectiveness in Addressing Infant Mortality: Indiana’s Approach (Session ID# C3)
Session Track: Epidemiology/Data, Assessment, and Evaluation

The Indiana State Department of Health (ISDH) has been working to create a comprehensive, community based system of care for all children and their families. ISDH understands that many vital public health functions, such as monitoring health status, improving care coordination, and evaluating the effectiveness of clinical and population-based health services, rely on the availability of public health data. In order to more effectively evaluate the impact of the Title V Prenatal Care Coordination program, ISDH has developed and implemented a Prenatal Care Coordination Portal to track pregnant mothers and their birth outcomes. The ISDH MCH Division utilizes the Prenatal Care Coordination Portal to strengthen Title V surveillance, reporting and evaluation of program effectiveness.

Theresa Hunter, MPH, MS, Title V Coordinator, Indiana State Department of Health
Robert Bowman, MS, MA, Director of Maternal and Child Health Division, Indiana State Department of Health
California Black Infant Health Program: Empowering Women, Building Social Support and Strengthening Communities (Session ID# C7)

Session Track: Health Equity
Experts believe that stress including racism play a key role in poor birth outcomes among African-Americans. Current science supports a group approach as a promising way to improve birth outcomes. Within a culturally affirming environment that honors African-American history, the California Black Infant Health (BIH) Program uses 20 prenatal and postpartum group sessions to help women: access their strengths, set health-promoting goals, learn to reduce stress, develop life skills, and build social support, while also addressing other contributors to poor birth outcomes. BIH also provides case management to ensure women connect with needed services. This empowers women to make healthier choices for themselves and their families, ultimately fostering stronger women, families and communities.

Reggie Caldwell, LCSW, Health Equity Analyst, California Department of Public Health/Maternal, Child and Adolescent Health
Susan Egerter, PhD, Senior Epidemiologist and Co-Director, Center on Social Disparities in Health

Sunday, January 25
10:30 AM – 11:30 AM

Enhancing Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance and Partnerships to Reach Special Populations in Four States (Session ID# D3)

Session Track: Epidemiology/Data, Assessment, and Evaluation
In 2012, the CDC Pregnancy Risk Assessment Monitoring System (PRAMS) began a multiyear collaboration with the W.K. Kellogg Foundation (WKKF) to expand PRAMS surveillance in four states with WKKF funded initiatives. During the Workshop, CDC-PRAMS, Mississippi and New Mexico, will share examples of partner engagement, and describe innovations that have been developed to enhance PRAMS data collection efforts among minority and low-income women as part of the WKKF collaboration. Through small group work and interaction with the other audience members and panelists, the participants will have an opportunity to learn and share experiences in building/sustaining community-level partnerships that result in improved MCH programs in the community.

Indu Ahluwalia, MPH, PhD, Senior Scientist, CDC, Division of Reproductive Health, Pregnancy Risk Assessment Monitoring System
Kathy Burke, MSW, Director of Health Services, Mississippi Department of Health
Eirian Coronado, MA, Pregnancy Risk Assessment Monitoring System (PRAMS) Coordinator, New Mexico Department of Health/Pregnancy Risk Assessment Monitoring System

The IMPLICIT Network Prescription for a Healthy Family: Improving Birth Outcomes through Interconception Care at Well Child Visits (Session ID# D5)

Session Track: Women’s and Infant Health
Prematurity and poor birth outcomes continue to impose significant burdens on the health care system and communities. Many modifiable risk factors affecting pregnancy health occur prior to conception. Although preconception care guidelines exist, there is no standardized model and many barriers to their implementation. The IMPLICIT Network, a family medicine residency collaborative, proposes an innovative approach to interconception care (ICC) delivered during well child visits. This workshop will present the IMPLICIT ICC model of maternal behavior assessment, intervention and quality improvement plan. Various approaches to implementation will be shared. Discussion about partnerships with community agencies and programs and the potential for broad adoption will be encouraged.

Daniel Frayne, MD, Assistant Residency Director, Mountain Area Health Education Center (MAHEC) Family Medicine Residency Program
Stephanie Rosener, MD, Associate Residency Director, Middlesex Hospital Family Medicine Residency Program
Jessica Brubach, BS, Project Coordinator, University of Pittsburgh Medical Center

Sunday, January 25
12:00 PM – 2:00 PM

Health for Every Mother Brown Bag Session

AMCHP is currently working with state and national partners on several exciting maternal health initiatives. Examples include development of a systems-based, equity infused approach to enhanced postpartum care; a compendium of options to guide state planning for a comprehensive maternal health initiative; and also...
providing targeted technical assistance to states to strengthen maternal mortality review processes and data-informed action. This brown bag session will provide an open forum where participants can come hear about our maternal health work, and provide input, direction, and vision on exciting opportunities to keep our moms healthy.

**Sunday, January 25
1:00 PM – 2:00 PM**

**State Strategies to Increase Access to Oral Health Care During Pregnancy (Session ID# E7)**
Session Track: Women's and Infant Health
Oral health is critical to a healthy pregnancy, however too few pregnant women access dental care. This session will provide MCHB and CMS resources and two states will share their strategies to address the oral health of pregnant women. Michigan’s Infant Mortality Reduction Plan is focused on integrating oral health promotion and treatment into the medical home model. The Michigan Department of Community Health developed the state’s first Perinatal Oral Health Action Plan and will discuss their progress on their five-year strategies. Connecticut recently launched a MCHB-funded perinatal and infant oral health quality improvement project. The Connecticut Dental Health Partnership (under contract with the state Medicaid agency) is targeting maternity care providers to raise awareness and to assist with referrals for dental care. The Project Evaluator will review the findings of their baseline studies for the project and ongoing performance monitoring through the use of Medicaid administrative data.

Meg Booth, MPH, Director of Policy, Children's Dental Health Project
Emily Carr, MPH, Perinatal Oral Health Coordinator, Michigan Department of Community Health
Mary Alice Lee, BSN, PhD, Senior Policy Fellow, Connecticut Voices for Children

**Monday, January 26
1:45 PM – 2:45 PM**

**Strengthening State Review of Maternal Deaths: Practical Examples of Process Improvement and Action from Ohio and Colorado (Session ID# G7)**
Session Track: Women's and Infant Health
Maternal death and severe maternal morbidity are among proposed national outcome measures for the Title V MCH Services Block Grant. For MCH programs, a formal Maternal Mortality Review (MMR) process offers a mechanism to identify and learn from past cases in order to prevent future deaths. In this session, presenters from Ohio and Colorado will share the changes they have made to strengthen their MMR as part of the AMCHP Every Mother Initiative and will give practical tips for MCH programs interested in starting a review or making similar process improvements. Presenters also will share the work they have done to translate review findings into simulation training at birthing hospitals and interventions to better address maternal suicide and accidental overdose.

Cynthia Shellhaas, MD, MPH, Medical Director, Bureau of Child and Family Health Services, Ohio Department of Health
Karen Trierweiler, MS, CNM, Deputy Division Director, Prevention Services Division, Colorado Department of Public Health and Environment
Brittany Argotsinger, MPH, Program Manager, Women’s and Infant Health, AMCHP

**Tracking Nurses’ Impact on Maternal Mortality and Morbidity (Session ID# G8)**
Session Track: Women’s and Infant Health
In 2014, Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) and AMCHP engaged an expert panel to identify a standardized process to track nursing practice related to maternal mortality and morbidity. This partnership leverages the maternal mortality review process to identify sources of nursing practice breakdown and implement strategies that educate and empower this critical health profession serving women and newborns. During this workshop, presenters will frame the significance of influencing nursing practice related to troubling trends of maternal mortality and morbidity and present the results of the expert panel. The presenters will brainstorm with participants on how clinical leaders and state MCH programs can work together in an integrated approach and on interdisciplinary teams to improve maternal health outcomes.

Andria Cornell, MSPH, Senior Program Manager, Women's Health, AMCHP
Debra Bingham, DrPH, RN, Vice President of Research, Education, and Publications, Association of Women's Health, Obstetric and Neonatal Nurses
Produce Prescription: Collaboration to Improve Fruit and Vegetable Consumption among Low-Income Pregnant Women (Session ID# I3)

Session Track: MCH Systems Building

The Cuyahoga County Produce Prescription (PRx) Program is a partnership between farmers’ markets and public health experts to further increase fruit and vegetable consumption among pregnant women and women of childbearing age, with the intent to curb preventable disease during pregnancy, support local and regional economics, and improve the health of women before, during, and after pregnancy. This workshop will review other model PRx programs and local modifications made for the MCH population; will review the design of the Cuyahoga County PRx program; discuss successes initial successes and program expansion, and will highlight the importance of non-traditional partnerships in addressing local birth outcomes.

Alison Patrick, MPH, RD, LD, Program Manager, Cuyahoga County Board of Health
Erika Trapl, PhD, Associate Professor, Case Western Reserve University