



# REGION 6

## PERINATAL QUALITY COLLABORATIVE BIRTH EQUITY ASSESSMENT SUMMARY



**SEPT**

**20<sup>th</sup>**

**2023**

## Region 6 Perinatal Quality Collaborative

GENESEE-HURON-LAPEER-SANILAC-SHIAWASSEE-ST. CLAIR-TUSCOLA



## REGION 6 PERINATAL QUALITY COLLABORATIVE

# Let's Talk about Maternal and Child Health

*Genesee - Huron - Lapeer - Sanilac  
Shiawassee - St. Clair - Tuscola*

R6 is a group of community members (including parents like you!) who want to improve the health of mothers and babies in Michigan.

Each meeting, guest speakers discuss current efforts, members provide updates on community outreach, and community members share their experiences and thoughts.

Join us at our next meeting!

*\*Community members – R6 Thanks You for attending collaborative meetings by providing you with a gift card*



**Register  
using the QR  
code above!**

### **DATES & TIMES**

Nov 21, 2023 @ 10 AM to 12 PM  
Feb 20, 2024 @ 10 AM to 12 PM  
May 21, 2024 @ 10 AM to 12 PM  
August 24, 2024 @ 10 AM to 12 PM

Join our mailing list!



**Visit [Region6PQC.org](https://Region6PQC.org) for more information about R6 and our current Birth Equity Assessment!**

Questions? Shannon Lijewski, Region 6 Coordinator  
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# YOUR HEALTH YOUR BABY



[www.region6pqc.org](http://www.region6pqc.org)

Your Health, Your Baby is an initiative aimed to improve health outcomes in the Region 6 area by encouraging and promoting vaccination during pregnancy and childhood.



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Genesee - Huron - Lapeer - Sanilac - Shiawassee - St. Clair - Tuscola

<http://www.region6pqc.org/>

REGION 6 PERINATAL QUALITY COLLABORATIVE  
BIRTH EQUITY ASSESSMENT SUMMARY  
Center for Healthy Communities – MPH  
September 2023

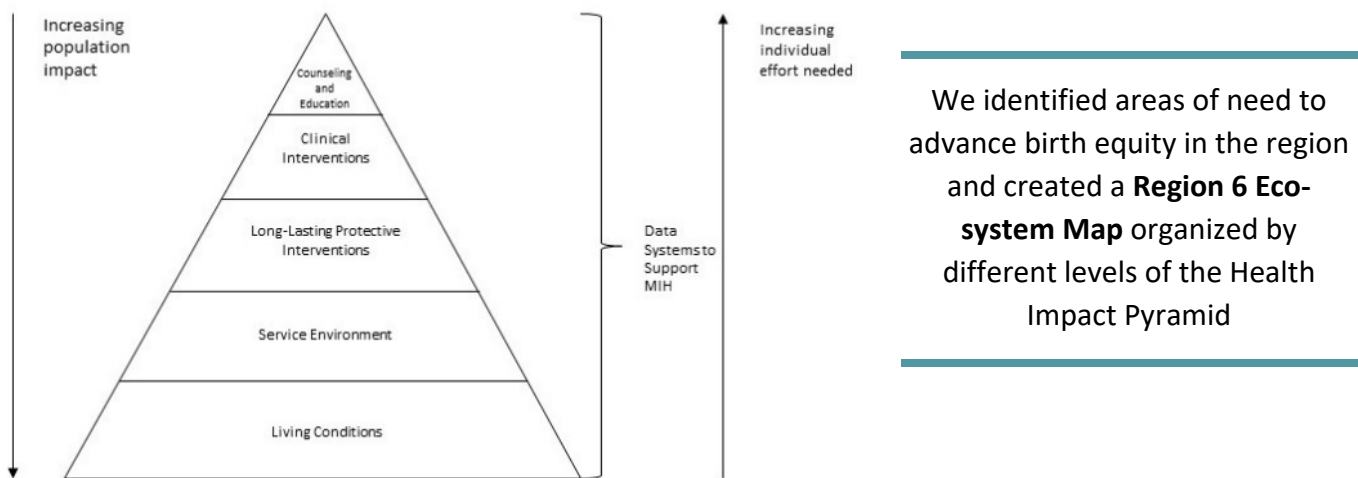
## Overview

- In fiscal year 2023, the Region 6 Perinatal Quality Collaborative worked with the Michigan Public Health Institute (MPHI) to conduct a **Birth Equity Assessment** and develop a plan for birth equity action to address maternal infant health (MIH) disparities in the region.

## How We Learned

- Administered a Birth Equity Capacity Survey to **23** Region 6 Perinatal Quality Collaborative members
- Conducted Focus Groups with **13** parents/caregivers from counties across the region
- Administered a Birth Equity System Assessment Survey to **69** professionals in the MIH field in Region 6
- Conducted an Environmental Scan of **130** organizations/agencies in the MIH field in the region

## What We Learned



- *What is needed at the **Counseling & Education** level?*
  - More accessible, comprehensive health education about pregnancy, birth, and postpartum
  - Increased health education that acknowledges structural factors that impact health and empowers people to connect to resources and advocate for themselves
- *What is needed at the **Long-lasting Protective & Clinical Interventions** level?*
  - Increased trust building between providers and their patients
  - Capacity building among providers, especially in mental and behavioral health
  - Increased provider workforce, especially in specialty prenatal care
  - Expanded postpartum care with frequent check-ups and a focus on mental health





- What is needed at the *Service Environment* level?
  - Increased accessibility through telehealth and transportation support
  - Increased care navigation throughout prenatal and postpartum care
  - Greater workforce development that includes non-physician providers
  - Improvement in quality of care through training and organizational change
  - Stronger integration of care across health systems and between urban and rural areas
- What is needed at the *Living Conditions* level?
  - Greater multi-sector collaboration (i.e. housing, employment, education, etc.) to focus on root causes of MIH disparities
  - Increased provider capacity to identify and connect patients with needed resources
  - Expanded health system understanding of how racism and discrimination impacts MIH care seeking

## What We've Done (so far!) with What We've Learned



Organized 5 strategic planning sessions with R6 Perinatal Quality Collaborative members.



Selected *Expanding postpartum care with frequent check-ups and a focus on mental health* as a priority area for the Collaborative to work toward.

Identified equity-focused **strategies** to address the priority area

1

*Build stronger reciprocal partnerships between medical and community services for postpartum people to incorporate postpartum mental health screenings into well child visits and other community programs.*

2

*Group prenatal care with built-in support (i.e. women supporting women).*

3

*Storytelling to normalize PMAD that provides anyone with the opportunity to tell their story in a safe space and in a medium that works best for them (e.g., video, written).*

## Strategic Action Planning

- The R6 Perinatal Quality Collaborative began strategic action planning for each strategy. We invite you to review and reflect on each action planning table below.



**Strategy 1: Build stronger reciprocal partnerships between medical and community services for postpartum people to incorporate postpartum mental health screenings into well child visits and other community programs.**

<b>Initial Workgroup:</b> Shannon Lijewski, Nicole O'Brien, Christina Suber, Jackie Surant, Miranda Stoneman					
<b>Goal:</b> Incorporate parent Edinburgh/GAD7/PHQ9 screenings into well-child visits throughout the first year of life, initial screen within first two weeks at pediatric appointments, family practice appointments, health department appointments and additional places where birthing people may receive pediatric care.					
<b>Objective/s</b>					
1. Early screening and intervention; e.g. initial screen to take place within the first two weeks.					
2. Increase funding and insurance coverage to support.					
3. Advocate to increase the number of postpartum behavioral health provider visits to greater than 12 (1 per month).					
<b>Objective #1: 1. Early screening and intervention; e.g. initial screen to take place within the first two weeks.</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Decide which depression and anxiety screening tool(s) Regional providers will be required to use.					
Identify resources and providers to support identified needs.					
Extend screening and interventions throughout the first year.					
Provide education to providers to support screening.					
<b>Objective #2: Increase funding and insurance coverage to support.</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below.</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Convene stakeholder conversations to discuss supporting additional screenings					



and appointments, gain buy in and develop reimbursement.					
Write grants and/or align with RPQC funding.					
Provide MDHHS and payers with data to support expansion of services.					
Recruit new providers.					
<b>Objective #3: Advocate to increase the number of postpartum behavioral health provider visits to greater than 12 (1 per month).</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Develop a grant funded pilot to gather data to support.					
Expand HT2 capacity for postpartum screens.					
Work with MDHHS and other RPQCs to develop an education and communication campaign.					

**Strategy 2: Group prenatal care with built-in support (i.e. women supporting women).**

<b>Initial Workgroup:</b> Amy Helal, Megan Mason, Leann Clink, Amy Hughes, Kassandre Alexander
<b>Goal:</b> Peer support through women supporting women. Goal - that our patients have prenatal care.
<b>Objective/s</b>
1. By fiscal year 2025 we will establish at least one group prenatal care in each county within Region 6
2. Within one year will establish a committee to prepare for and launch a prenatal group within each county. Including some or all of the following: a provider, local health department representative, social worker, infant mental health, faith-based partner, parent, doula, midwife, and a mental health representative.
3. Reduce the barriers within the prenatal community Ex. Continuity of care, local resources, access to meetings and improving access to IMH



<b>Objective #1: By FY 2025 we will establish at least one group prenatal care in each county within Region 6</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Assess the interest level of each county	6 months	survey tools	County Health Dept or WIC	Group style- in person v virtual	Provider interest needs to be determined as well
Assess for a location within each county	6 months	survey tools	County Health Dept or WIC	Location in each county - centrally located	access to public transportation
Assess the mode that fits each county or a combination of delivery modes.	6 months	survey tools	County Health Dept, WIC or Great Start	each group determines style	each county would determine that
Survey about mode of attendance (in-person, zoom)	6 months	see above			
<b>Objective #2: Within one year will establish a committee to prepare for and launch a prenatal group within each county. Including some or all of the following: a provider, local health department representative, social worker, infant mental health, faith-based partner, parent, doula, midwife, and mental health representative.</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Recruit volunteers and partners	6 months	determined by objective 1	determined by objective 1	determined by objective 1	
Train volunteers and partners	1 year	guidance to lead group	TBD	staff trained in prenatal assessment for group care	train nurses in assessment & prenatal screening for nursing
Establish the 1st committee meeting	15 months	location & time and information dispersal	members of region 6	committee date, time and content for training	
<b>Objective #3: Reduce barriers within the prenatal community</b>					





<b>(Ex. Continuity of care, local resources, access to meetings and improving access to IMH)</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Convene an information meeting to identify the who, what, when and why of the group.	1 year	location site, equipment, urine test strips, scales	medical director or ER director per county?	group prenatal clinic for each county or area within region 6	
Identify and administer Incentives and supports for prenatal people	6 months	\$, sponsor, Insurance company?	?	gas card, safe sleep items, safety items	safe kids, part of 1st prenatal care visit - car seat fittings

**Strategy 3: Storytelling to normalize PMAD that provides anyone with the opportunity to tell their story in a safe space and in a medium that works best for them (e.g., video, written).**

<b>Initial Workgroup:</b> Rebecca Nielsen, Ashley Gieraltowski, Kristi Villalobos, Nicole Jones						
<b>Goal:</b> <i>Storytelling to normalize and support perinatal mood and anxiety disorders (PMAD)</i>						
<b>Objective/s</b>						
1. By January 1, 2024, we will form a committee broadly representative of Region 6 to develop waivers, processes, and protocols relating to the birth equity storytelling campaign.						
2. By June 2024, the committee will identify five avenues (social media, print, in person, etc.) that are readily available for individuals in Region 6 for the sharing of prenatal, PP, and PMAD stories.						
3. By February 2024, the committee will determine how to proceed finding individuals in Region 6 to share their stories.						
<b>Objective #1: By January 1, 2024, we will form a committee broadly representative of Region 6 to develop waivers, processes, and protocols relating to the birth equity storytelling campaign.</b>						
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>	
Identify committee members that are a diverse representation of Region 6	Oct 1, 2023	lists of potential contacts and their contact info	Region 6 Steering Committee	Diverse group on the committee		



Hold first meeting; develop plan, subcommittees if needed	Mid Oct 2023	Contact info, documents from BEA meetings, note taker,	Strategy 3 Planning Committee	Roster of members and roles	
Hold 2 <sup>nd</sup> meeting; draft waivers, processes, protocols	Nov 2023	Samples, meeting 1 notes	Strategy 3 Planning Committee	drafts	
Hold 3 <sup>rd</sup> meeting; finalize draft waivers, processes, protocols	Dec 2023	Drafts, meeting 1&2 notes	Strategy 3 Planning Committee	Final documents	
<b>Objective #2: By June 2024, the committee will identify five avenues (social media, print, in person, etc.) that are readily available for individuals in Region 6 for the sharing of prenatal, PP, and PMAD stories.</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Committee members bring media suggestions from their county; details	Nov 1, 2023	List of media outlets by county	Strategy 3 Planning Committee		
Obtain price quotes	Jan 15, 2024	Contact info for media outlet and the quote	Strategy 3 Planning Committee	prices	
Determine available dates	Jan 15, 2024	Contact info for the media outlet and dates of availability	Strategy 3 Planning Committee	Dates available	
Revisit media chosen after individual storytellers identified to ensure that we are meeting the needs of participants.	June 2024		Strategy 3 Planning Committee	Media outlet meets needs of participants	
<b>Objective #3: By June 2024, the committee will determine how to proceed finding individuals in Region 6 to share their stories.</b>					
<b>Action steps</b> <i>List out the specific steps to make progress toward the objective below</i>	<b>Target Date</b>	<b>Resources Required</b>	<b>Lead Person/ Organization</b>	<b>Anticipated Product or Result</b>	<b>Progress Notes</b>
Create potential ways to get the message out that we are looking for storytellers	Jan 2024	People, contacts, CBOs, medical community	Strategy 3 Planning Committee	Diverse group of storytellers	
Create a checklist of criteria for participation	Feb 2024		Strategy 3 Planning Committee		



Decide if limiting number of participants and if so determine what that is	Feb 2024	Committee input	Strategy 3 Planning Committee	# of participants	
Select participants and contact them	March 2024	Criteria checklist	Strategy 3 Planning Committee	Diverse group of storytellers	
Determine what media outlet is the best fit for the participant	June 2024	List of media outlets, Input from participant	Strategy 3 Planning Committee		
Provide incentives/ stipend/ recognition to participants	June 2024	funds	Strategy 3 Planning Committee		

What Are We Doing Next?



In fiscal year 2024, the R6 Perinatal Quality Collaborative will **implement action plans** to advance the 3 selected strategies in our region.



We encourage you to **join an implementation workgroup** for fiscal year 2024. Scan the code to sign up!



