



Maternal Health Leadership Council

Meeting Minutes : August 25, 2020 : 3:30-5:00 PM : Location: Zoom only

Members Present

Chair, Dr. Tersh McCracken, MOMS Medical Director & OB/GYN with Billings Clinic
Vice-Chair, Judge Mary Jane Knisely, 13th District Court Judge, Felony Impaired Driving Court (IDC), CAMO Court (Veterans Treatment Court)
Kristen Rogers, Family & Community Health Bureau Chief at DPHHS
Ann Buss, Title V Director/Maternal & Child Health Supervisor at DPHHS
Tami Schoen, WIC, CPA at Hill County Public Health Department
Dr. Tim Wetherill, Medical Director at Blue Cross Blue Shield of Montana
Dr. Drew Malany, OB/GYN at Women's Health Care Center, PLLC and Chair of Montana American College of Obstetrics & Gynecology (ACOG)
Dr. Bardett Fausett, Maternal Fetal Medicine Specialist and President/Medical Director at Origin Health
Lisa Troyer, Wellness Consultant at PacificSource
Mary LeMieux, Member Health Management Bureau Chief at Medicaid and Perinatal Behavioral Health/Meadowlark Initiative Project Director
Janie Quilici, LAC, LSWC, Perinatal Behavioral Health Counselor at Community Physicians Group
Jude McTaggart, Certified Nurse Midwife at Northeast Montana Health Services
Olivia Riutta (for Cindy Stergar), Outreach & Engagement Manager at Montana Primary Care Association
Vicki Birkeland, Nursing Director, Women's Services at SCL Health-St. Vincent Healthcare and Chair of the Montana Perinatal Quality Collaborative
Brie MacLaurin, Executive Director of Healthy Mothers, Healthy Babies
Dr. Christina Marchion, Family Medicine/OB at Central Montana Medical Center
Dina Kuchynka, Maternal & Newborn Health Manager at SCL Health – Holy Rosary

Members Absent

Karen Cantrell, American Indian Health Director at DPHHS
Dr Malcom Horn, Medical Director at Blue Cross Blue Shield of Montana

Program Staff Present

Amanda Eby, MOMS Program Specialist at DPHHS
Brenna Richardson, Program Assistant at DPHHS
Stephanie Fitch, Program Coordinator for MOMS at Billings Clinic
Dianna Linder, Director of Grants and Program Development at Billings Clinic
Annie Glover, Lead Evaluator of MOMS at the University of Montana

Public Attendees

Sandra Lloyd, Public Health Analyst- Maternal and Child Health Bureau

Welcome and introductions

Dr. Tersh McCracken opened the meeting and lead roll call, as well as reviewed the agenda and the prior months minutes were approved, with an amendment to add Tami Schoen to the members who were present.



Review the Terms of Reference

Dr. McCracken explained that there was nothing new on this for the council to review because they were still waiting to hear back from the DPHHS legal staff on the requirements of open meeting laws. This item was tabled until the next meeting.

Overview of the Alliance for Innovation on Maternal Health (AIM)

Dr. Tersh McCracken presented on the Alliance for Innovation on Maternal Health (AIM), which is a national data-driven maternal safety and quality improvement initiative. The goal is to eliminate preventable maternal mortality and severe morbidity across the United States. It is funded by a grant from HRSA and is made up of multiple partnerships including national and federal organizations, professional organizations, perinatal quality collaboratives and physicians. AIM offers multidisciplinary groups to work across national, state and facility levels. National organizations are developing quality improvement tools and are supporting a multi-state data platform as well as coordinating interstate collaboration. State level participation includes Montana Department of Health and Human Services (DPHHS), the MTPQC and this council. It is a goal that every hospital has a quality improvement team and that they start implementing some of the safety bundles from AIM and share best practices across the state, as well as with other states. Dr. McCracken feels Montana could be a leader with AIM amongst states like Wyoming, Idaho and the Dakotas.

AIM has rolled out Maternal Safety Bundles which are based on the most common and severe maternal mortality and morbidity occurrences. Each hospital, physician and midwife should know how to address these. The bundles include maternal venous thromboembolism (VTE), obstetrics care for women with opioid use disorder, severe hypertension in pregnancy, obstetric hemorrhage, postpartum basics (from maternity to well-woman care), safe reduction of primary cesarean birth, postpartum basics (from birth to postpartum visits) and reduction of peripartum racial/ethnic disparities. Every AIM Bundle offers four elements, which are called the four Rs: Readiness, Recognition and Prevention, Response and Reporting/Systems Learning. Dr. McCracken expressed the value of utilizing these guidelines to learn from mistakes, learn from what went right, and learning from the processes and systems. Over the next few months, through MOMS and the leadership council, we will educate Montana maternal health providers on the AIM bundles with the goal of selecting one to implement in spring 2021 as it applies to Montana and guided by the PQC. The key to a success is partnership and coordination with AIM, PQC and Maternal Mortality Review Committees (MMRC). Requirements to become an AIM state include a Maternal Mortality Review Committee, the ability to collect data, and have a state-based multidisciplinary coordinating body (PQC).

DPHHS updates on PQC, MMRIA and MMRC

Amanda Eby expressed her enthusiasm for the MOMS program's commitment in supporting the PQC in Montana, which includes administrative support to the PQC which will offer a consistent structure. That is still in development but should be announced in September's meeting and working towards wrapping up the current work the PQC is doing on Safe Sleep certification for hospitals.

Amanda updated the leadership council on Maternal Mortality Review Information Application (MMRIA) and explained in the past all of Montana's maternal mortality data was kept on paper. DPHHS has had a staff epidemiologist and data analyst working to create a database for storing, analyzing and pulling reports on historical data. That database is now live and functioning. The transition to using MMRIA will be slightly more complicated because it requires coordination with local, county and state staff on how



to move forward. The Centers for Disease Control (CDC) prefers a regional approach for states like Montana that have a lower number of deaths. Montana is currently in talks with Utah about joining their Maternal Review Committee (MMRC). Kristen Rogers is leading the discussion with Utah on how the partnership would work. Utah has invited a few members of the council to listen in on a maternal review next month. Kristen also discussed the Montana Code Annotated, that requires county local review to continue in some way. Possibly someone from the local level can participate in a death review and that would suffice the code. This is currently being looked at by a lawyer.

Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis

Amanda explained the plan to conduct a SWOT (Strength, Weaknesses, Opportunities, Threats) analysis in breakout rooms for the top four barriers to best prenatal, labor and delivery and postpartum care that were identified in the needs assessment. The council divided into four groups and each group completed a SWOT worksheet for one of the following barriers:

- In prenatal care in Montana, address the lack of treatment options for substance use disorders and lack of providers or consultation to treat depression/depressive disorders.
- In prenatal care, labor and delivery and postpartum care in Montana, address the lack of patient access to care, distance to care.
- In prenatal care in Montana, address patient domestic situations (homelessness, unsafe housing, domestic violence (social determinants of health [SDOH])).
- In labor and delivery and postpartum care in Montana, address provider skill decay from not treating a sufficient volume of pregnant women to maintain skills.

After the breakout discussion, the small groups reported out to the full group on how they completed their worksheet. The council will continue this discussion at the next meeting for a deeper dive analysis of each SWOT.

Review council page on website, process for meetings

Amanda asked the council for feedback on the website and how the process is going so far for communication, information on the program and materials for meetings. After receiving minimal feedback, she asked if they wanted her to add navigation to the council's page on the website from the main page of the website so that it can be accessed by the public. Dr. Malaney opted for the link to be added and Amanda said she would add it.

Schedule for reports from demonstration project to council

Dr. McCracken and Amanda asked the council if there was a preference for the frequency in which the receive written reports from the demonstration project; hearing no feedback, he asserted that Billings Clinic will consider what is reasonable and they will likely be quarterly.

September – finalize strategic plan and training on implementation science

The September meeting will include a guest speaker on implementation science, which will be helpful after identifying strengths and weakness and how to implement changes through evidence-based programs to ensure sustainability.

Public Comment

No public comments were made. Members of the leadership council had additional comments and questions.



Brie MacLaurin provided information that the Healthy Mothers, Healthy Babies conference registration is now open. Brie briefly went over the agenda, which would include some sessions on perinatal mood and anxiety disorders, substances use and pregnancy, as well as a fatherhood specialist. Some council members may have free registrations available to them through their organization's sponsorship. This conference is also approved for the six credits required for the perinatal mental health certificate.

Dr. Drew Malany asked about the upcoming meeting in Salt Lake City for the ACOG District Eight Regional Committee Summit on Maternal Mortality Review and a representative from Montana to provide a two-minute presentation on Montana's MMR work. Dr. Bardett Fausett volunteered to do the two-minute presentation on behalf of Montana.

Review Meeting Process and Next Steps

Dr. Tersh McCracken and Amanda thanked everyone for their attendance and contributions to the committee. The next meeting was confirmed for September 22, 2020, 3:30-5:00.

Meeting adjourned at 4:59pm.