

YEAR 1 MOMS EVALUATION REPORT HIGHLIGHTS & RECOMMENDATIONS

Annie Glover, PhD, MPH, MPA
Lead Evaluator, MOMS Grant
Center for Children, Families & Workforce
Development

OBJECTIVE A

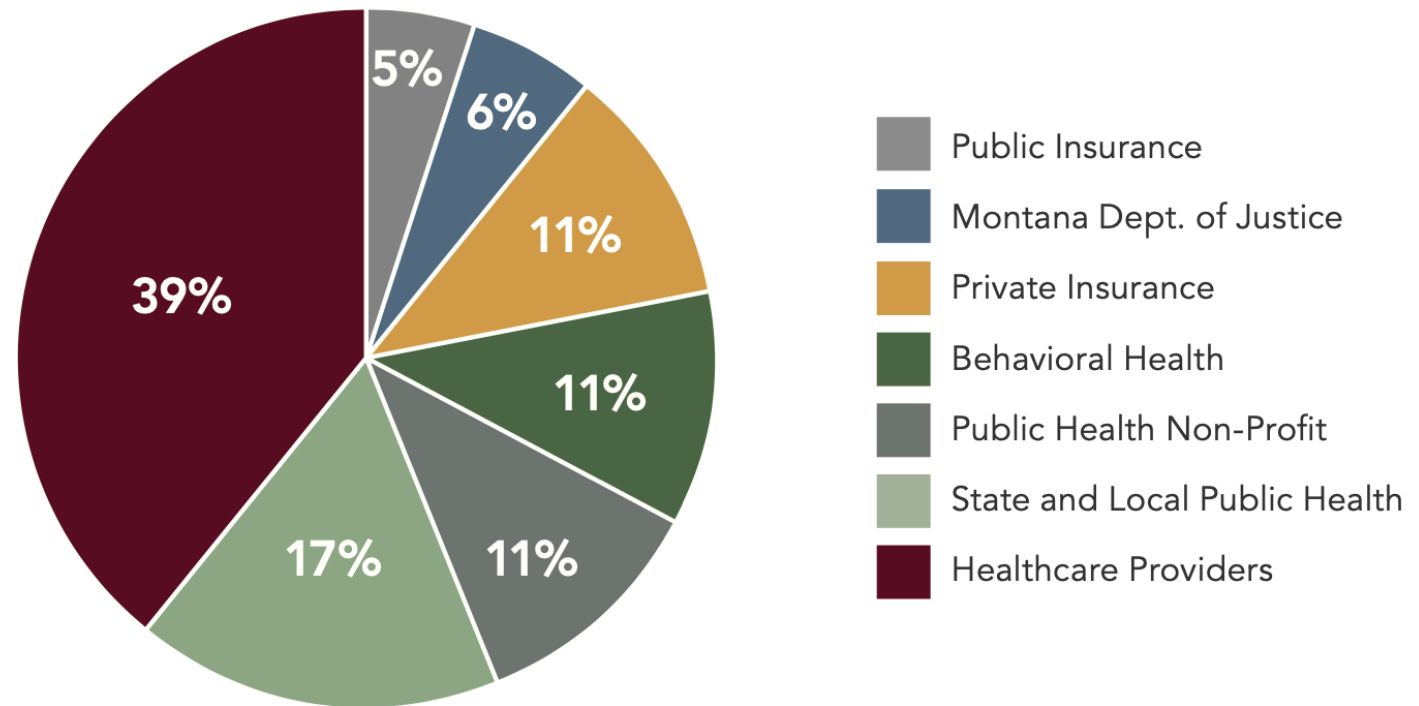
Catalyze Multidisciplinary
Collaboration in Maternal Health

STRATEGY 1 ELEVATE MATERNAL HEALTH IN MT

Figure 1: Maternal Health Leadership Council by Organization Type

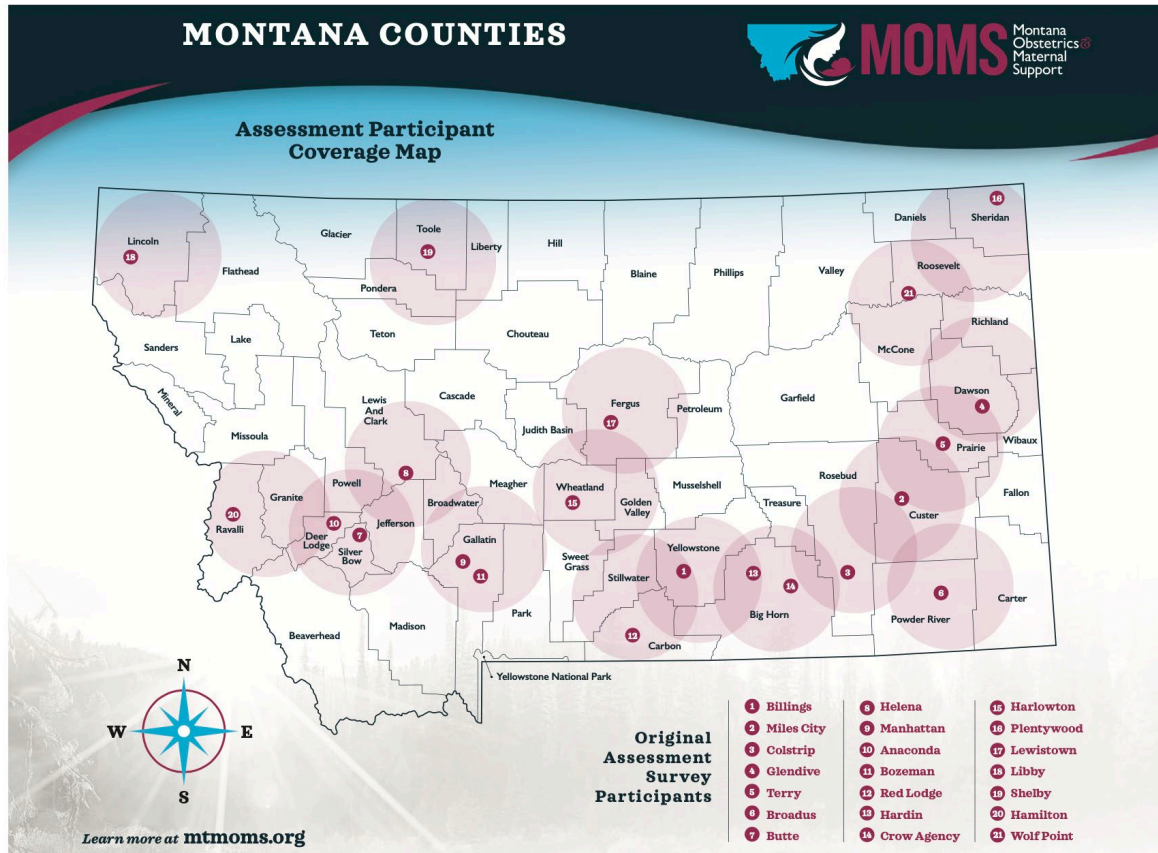
Maternal Health Leadership Council is broadly representative of stakeholders and engaged in improving maternal health.

Despite COVID-19, significant engagement from healthcare providers in needs assessment and strategic planning.



STRATEGY 1 ELEVATE MATERNAL HEALTH IN MT

Figure 2: Needs Assessment Respondents



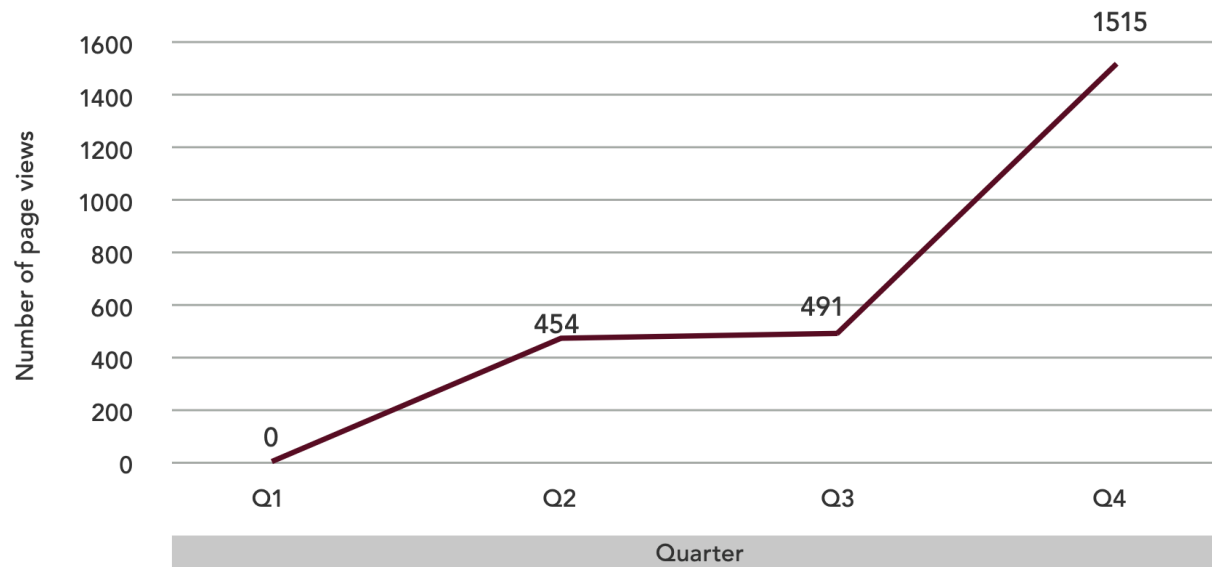
Needs Assessment conducted statewide.

Leadership Council has been using data from Needs Assessment to drive strategic planning process.

Needs Assessment will continue into Year 2, with facility and training needs focus.

STRATEGY 1 ELEVATE MATERNAL HEALTH IN MT

Figure 3: MOMS Website Unique Page View by Quarter



MOMS website launched (www.mtmoms.org) targeting provider community.

Public health education campaign in works for Year 2.

OBJECTIVE B

Measure Maternal Health in
Montana

STRATEGY 2 ANALYZE MATERNAL HEALTH DATA



Mortality Review

- DPHHS working to abstract historical cases for analysis
- Building partnerships with regional partners for mortality review process
- Developing process moving forward to compile investigations into standardized CDC MMRIA program

Morbidity Study

- UM working with MHA and DPHHS to conduct morbidity study
- Will inform AIM safety bundle adoption

Maternal Health Report

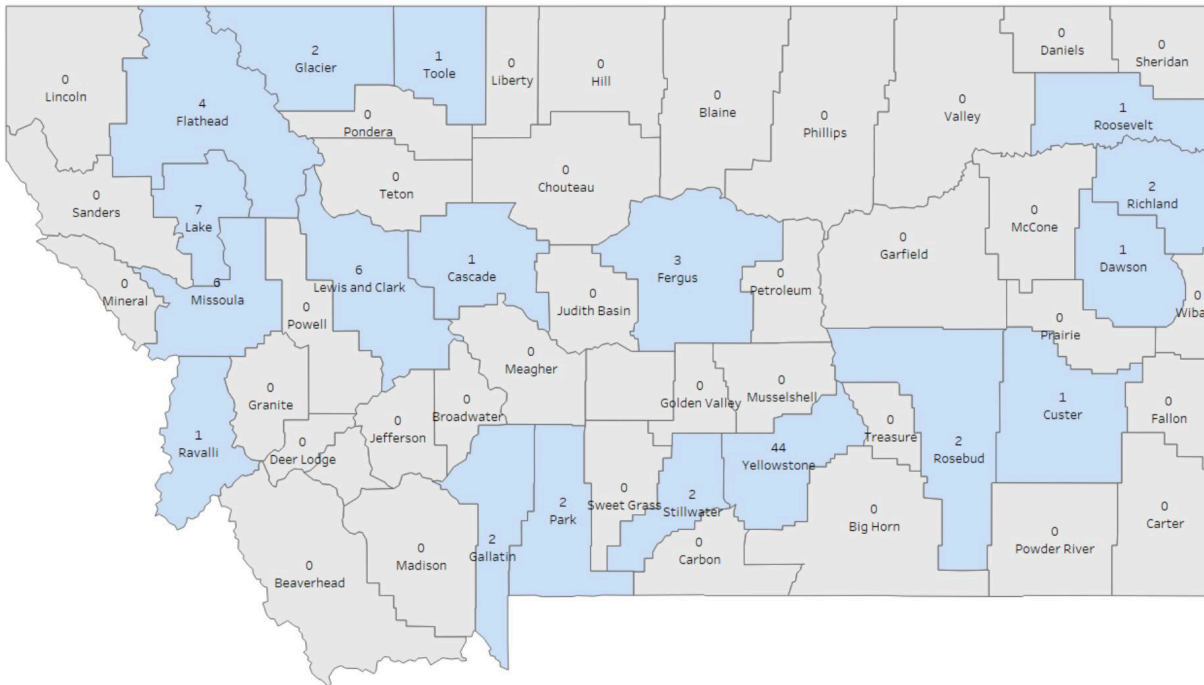
- First annual report in 2020
- Second annual report May 2021, will include in-depth analysis on severe maternal morbidity, environmental health and birth outcomes, Meadowlark Initiative

OBJECTIVE C

Promote and Execute Innovation
in Maternal Health Service
Delivery

STRATEGY 3 TECHNICAL ASSISTANCE AND PROVIDER EDUCATION

Figure 4: ECHO Unique Clinical Spoke Participants by County (N=88) (Y1)



ECHO achieved broad geographic coverage across Montana.

ECHO topics included:

- MOMS Intro & Project ECHO
- Postpartum Hypertension
- Postpartum Depression
- Treatment of Syphilis in Pregnancy
- American Society of Addiction Medicine and the Perinatal/Postpartum Patient: Montana's Continuum of Care
- Intro to AIM Safety Bundles
- Basics of Medication Assisted Treatment Training, Certification and Implementation
- Adapting to COVID-19

STRATEGY 3 TECHNICAL ASSISTANCE AND PROVIDER EDUCATION

Project ECHO Evaluations

Figure 5: Enhancement of Knowledge

Do you intend to make changes or apply what you've learned to your practice as a result of attending this activity?

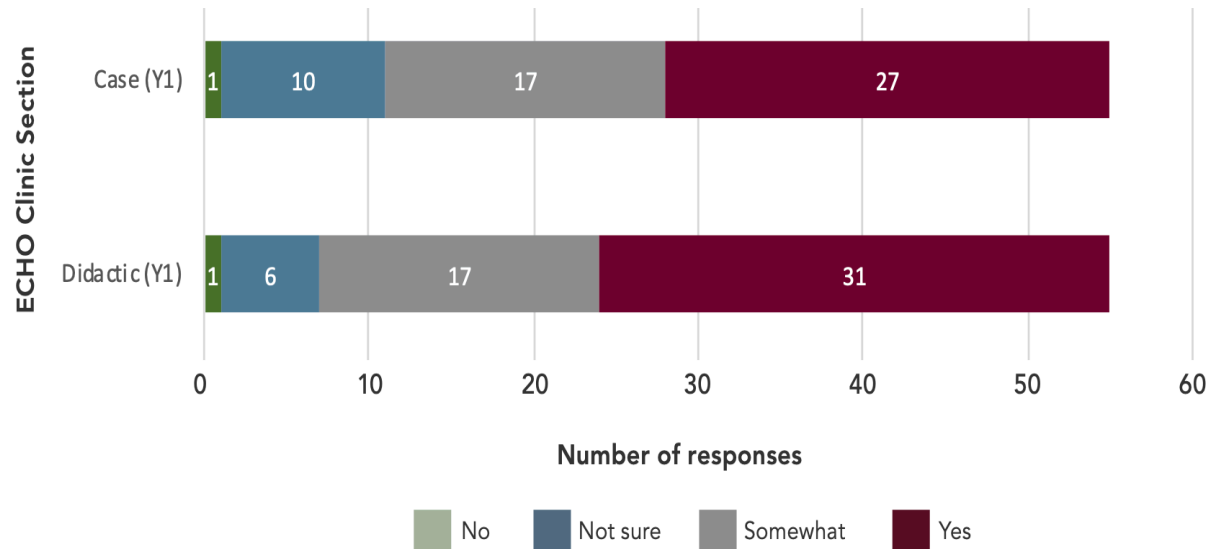
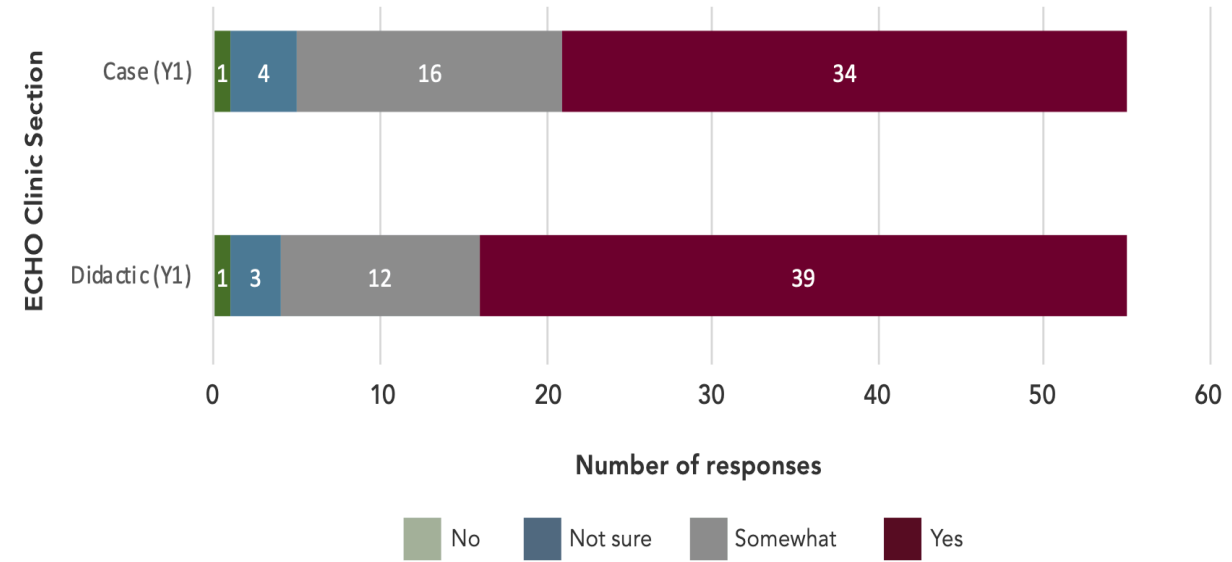


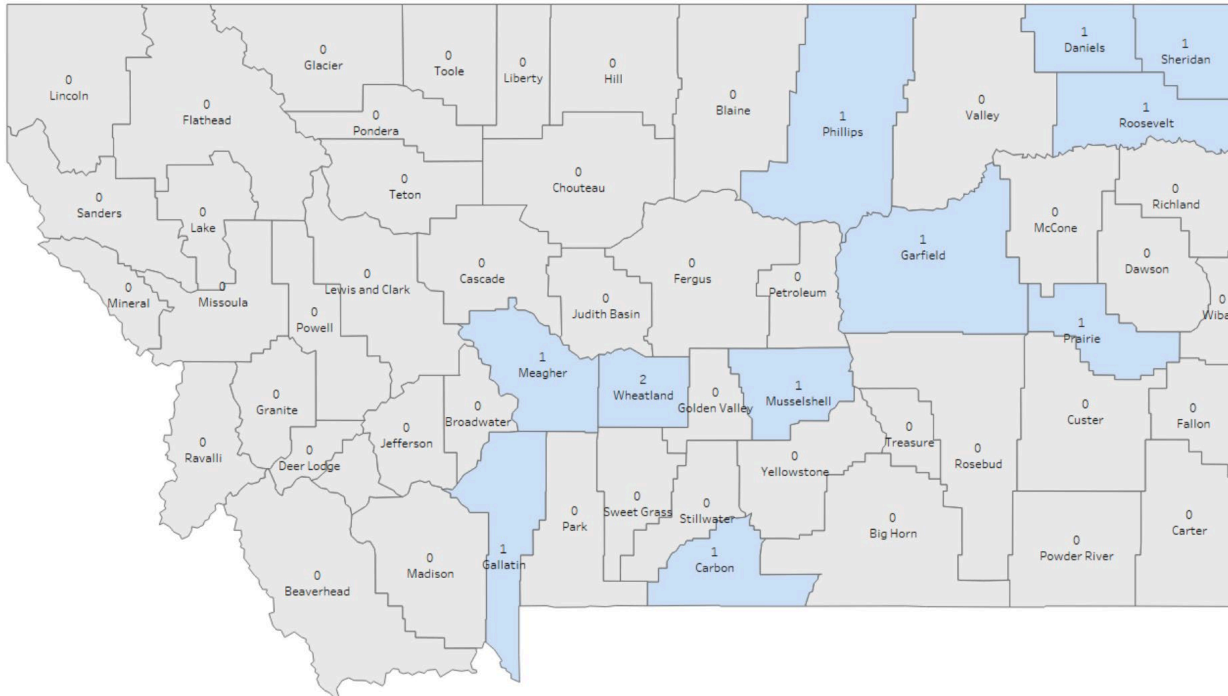
Figure 6: Application to Practice

The information presented enhanced my current knowledge



STRATEGY 3 TECHNICAL ASSISTANCE AND PROVIDER EDUCATION

Figure 7: SIM Training Locations



In Year 1:

- Two simulation modules conducted: Normal Delivery and Normal Delivery Sick Baby
- Twelve total trainings
- 145 individual participants

In Year 2:

- Trainings are continuing to complete delayed Year 1 contract
- Pre/post data collected to assess learning outcomes from simulation trainings
- New American College of Obstetricians (ACOG) Emergencies in Clinical Obstetrics (ECO) simulation model will be rolled out

STRATEGY 4 CONDUCT TELEHEALTH DEMONSTRATION PROJECT

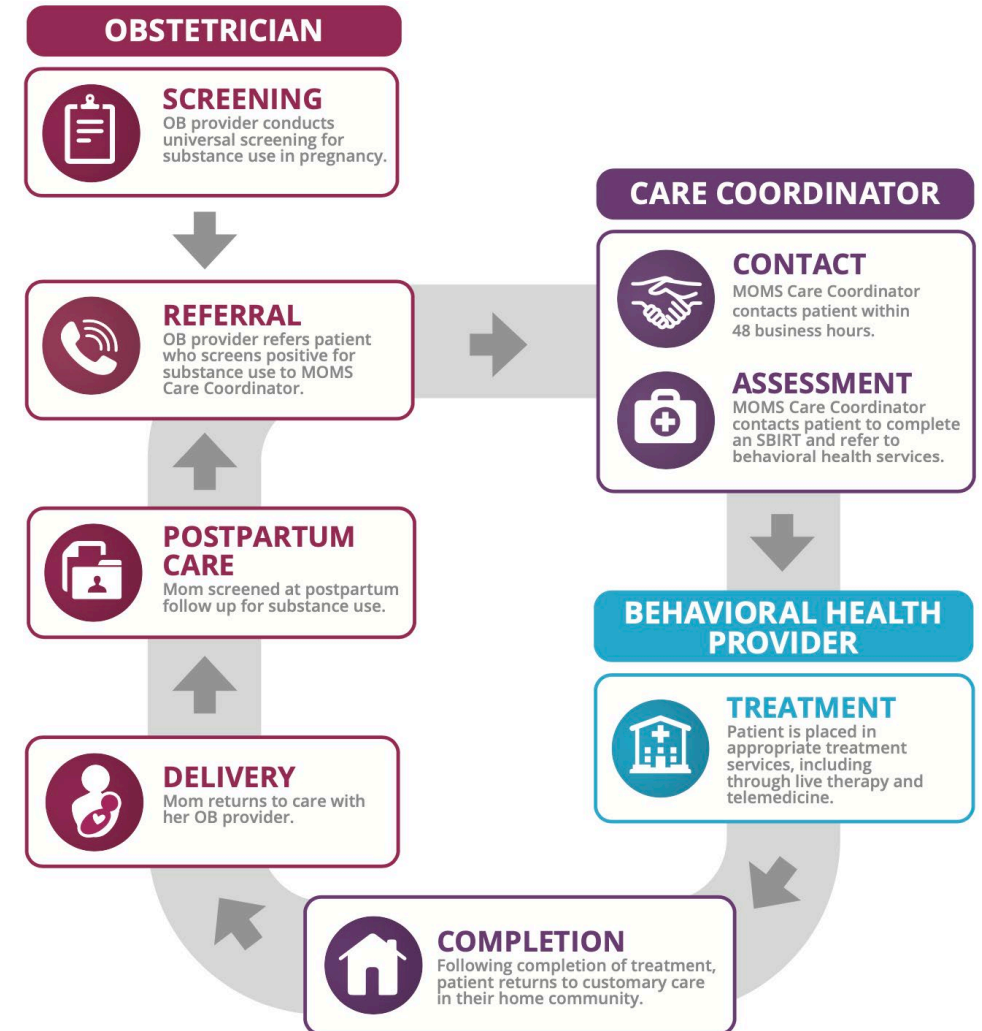
“Eastern Montana Perinatal Addiction
Treatment Health System”

Partnership between Billings Clinic and
Rimrock Foundation.

Includes screening, brief intervention,
and referral to treatment (SBIRT)

Treatment offered in-person or through
telemedicine, depending on needs of
patient.

Planning in Year 1, implementation in
Year 2.



STRATEGY 5 PILOT TELEMEDICINE APPROACHES TO PERINATAL CARE

UM Telemedicine in OB Study

Table 4: Interviews

State	Interviews (N)
Montana	9
Idaho	7
Wyoming	3
Total	19

Research aims:

- Describe experiences of OB providers moving to telemedicine during COVID-19 pandemic.
- Generate clinical delivery recommendations for institutionalization of telemedicine in OB practices moving forward.

Progress:

- Interviews complete.
- 19 interviews completed in Y1; 1 additional completed in Y2 for total of 20
- Data in analysis, with manuscript and report available in early 2021.

CONCLUSIONS

Recommendations

RECOMMENDATIONS

Use public health data to prioritize messaging in public health education campaign, align with AIM/PQC efforts where possible.

Broaden membership of Leadership Council to include Montana Hospital Association for health facility representation.

Use needs assessment and additional data to better target training needs.

Engage Leadership Council partners in organization-driven efforts for maternal health.

Engage Tribal Nations in health disparities work.

Identify policy interventions for maternal health, i.e. Medicaid.