

Fourth Trimester Initiative

KPQC Vision

To make Kansas the best place to be born, and to be a mother.

Mission

To improve Kansas' maternal and infant health outcomes by assuring quality perinatal care using data-driven, evidence-based practice, and quality improvement processes.

Fourth Trimester Initiative Background

Kansas Department of Health and Environment (KDHE) has teamed up with the Kansas Perinatal Quality Collaborative (KPQC) to launch a maternal health quality initiative aimed at decreasing maternal morbidity and mortality in our state. Data from KDHE Vital Statistics, as well as from the Kansas Maternal Mortality Review Committee, demonstrated that focused evaluation and intentional intervention in the postpartum period should be the primary goal to improve maternal health outcomes. The Fourth Trimester Initiative was designed to be a cutting-edge approach to study and improve the experience of our mothers and families in Kansas.

Fourth Trimester Initiative Purpose

To **engage and empower** patients, their families and support system, providers, and Kansas communities to **intentionally improve** maternal health outcomes with our collective, inspired effort.

Fourth Trimester Initiative Plan Provide guideline-driven, best practice health care Conduct standardized screening of all childbearing-aged **GOAL:** women **Decrease** Provide mechanisms to assure timely referral and follow up maternal Identify each mother's Postpartum Care Team morbidity and Ensure a personalized Patient Plan of Care ("Mom Plan") mortality in Provide reproductive health planning Kansas Establish ongoing insurance coverage Address social determinants of health and health equity

Fourth Trimester Initiative (FTI) Implementation

The FTI will focus on the postpartum period of the mother to:

- ✓ Enhance the education of providers, patients, and her community regarding best practice models
- ✓ Improve utilization of community perinatal collaboratives
- ✓ Improve communication and collaboration between providers
- ✓ Engage all maternal health stakeholders
- ✓ Address racial disparities in maternal health care
- ✓ Implement a targeted quality improvement project, including data collection

What's in it for our birth facility?

The **Fourth Trimester Initiative** will coordinate a statewide collaborative to improve maternal outcomes. The FTI will enroll participating birth facilities in the AIM postpartum transition safety bundle, anticipated to start Fall 2021 and run for two years. Birth Facilities who participate in FTI will receive, at no cost, directional coaching and the provision of this timely and necessary quality improvement project to improve health outcomes at the local and state level. Free resources, training, and constant collaboration with maternal health leaders across Kansas will be provided. This comprehensive and vast improvement in postpartum healthcare will lead to healthier women, infants, and families in our communities and across the state.

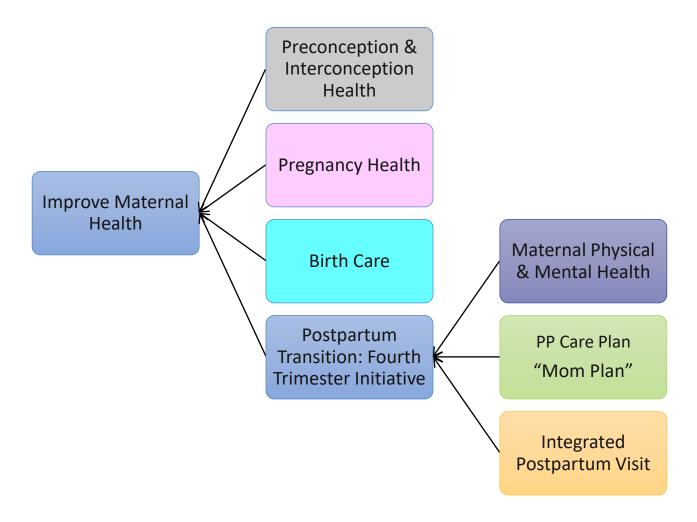
Once enrolled, Birth Facilities can expect to:

- 1. Review and compare baseline postpartum data from birth facilities across the state
- 2. Standardize a feedback loop for assessing attendance at postpartum visits
- 3. Identify the Perinatal Community Collaborative associated with the birth facility
- 4. Complete a County-level data review to identify maternal health disparities in the community
- 5. Identify Postpartum Care Team members
- 6. Receive free regional trainings on maternal health topics specific for birth facilities
- 7. Begin building multidisciplinary partnerships with community agencies to aid in coordination and collaboration of services
- 8. Enroll in the AIM safety bundle for Postpartum Transitions, Fall 2021

For questions or further information on FTI please contact:

Terrah Stroda, CNM

Fourth Trimester Initiative Driver Diagram 1



Fourth Trimester Initiative Driver Diagram 2

Primary

Optimal Maternal Physical & Mental Health

By May 11, 2021, the documented attendance rate of a visit with the OB provider within 12 weeks postpartum will exceed 60%

Performance Measures

- 1. Enroll Birth Facilities in FTI
- 2. Obtain Birth Facility birth numbers, including race demographics
- 3. Track rate of Postpartum **Patients with Visits** scheduled prior to discharge (<12 weeks PP)
- 4. Track Birth Center **Postpartum Care Team** formation
- 5. Identify county-level maternal health risk factors

Postpartum Care Plan

"Mom Plan"

Integrated Postpartum Visits

Secondary

BIRTH FACILITY

Quality Medical Care:

- 1. Immediate PP Care- Best Practice Models
 - PP Hemorrhage
 - **PP HTN Disorders**
 - Breastfeeding
 - Infection Prevention
 - Behavioral Health/SUD
- 2. Identify continued medical needs prior to discharge **Social Determinants:**

1. Identify barriers to F/U visit prior to discharge **OUTPATIENT**

Quality Medical Care:

- 1. Postpartum Care: algorithm of F/U
 - 1-6 weeks, up to 12 weeks with Comp WWE
- 2. Best Practice Models: See above
 - Perinatal Mood Disorder
 - **Family Planning**
 - Chronic Disease (HTN, Obesity, Asthma, Anemia, DM)
 - Abuse/Neglect
 - Infant Care

BIRTH FACILITY

- 1. Create Postpartum Care Team
- 2. Education of Mom-self & infant care
- 3. Discharge Planning by PP Care Team & Patient
 - "Mom Plan"
 - Individualized medical plan
 - **Include Social Determinants**
- 4. Screenings:
 - **Educate all Maternal Health Providers**
 - Coordinate & Provide Standardized Screenings
- 5. Referral for + Screens: inpatient to outpatient
- 6. Connect to Perinatal Community Collaboratives

OUTPATIENT

Private Practice/Public Health:

- Mom Plan/Pt Medical Plan
- Ongoing Screenings & Referrals (incl. F/U)
- **Perinatal Community Collaboratives** connect to Birth Centers

BIRTH FACILITY

Collective Impact Model

Tracks Postpartum Visit Scheduled prior to discharge

Tracks Postpartum Visit attendance

OUTPATIENT

Collective Impact Model

OB Provider office tracks PP Visit not completedrefer to Navigator

Navigator follow up with Pt & Provider to seek completion