

Virtual Healthy Start Grantees' Meeting
Lunch Networking Café: Maternal Mortality
Day 3, June 26, 2020

Gaby Gonzalez: Hello! :)

MARTA WHITE: Hello everyone! 🙌

Linda Littlefield: Thank you for opening this so we can see who is here!

Saydia Hossan: hello everyone

Dianne Browne: Dianne Browne, Project Director Camden Healthy Start

Staci Kaczmarek: Staci Kaczmarek, Evaluator, Ft Wayne, IN

Greg Moore: Greg Moore, Toledo-Lucas County Healthy Start, Program Coordinator, Toledo, Ohio

Pamela Parker: Pamela Parker Syracuse HS Evaluator

Cari Bogulski: Cari Bogulski, Healthy Start for Northwest Arkansas, Evaluator

elizabeth: Elizabeth Kushman, Project Director for Inter-tribal Council of MI

Candice Raines: Candice Raines; Greater Harrisburg Healthy Start, PA; Enrollment specialist

Varonica Caldwell: Varonica Caldwell, Project Manager, Dayton, OH

Jennifer Torres: Jennifer Torres, external evaluator for Inter-Tribal Council of Michigan Healthy Start

Gaby Gonzalez: Gaby Gonzalez. Los Angeles County Department of Health Services MAMA'S Neighborhood. Administrative Assistant.

Carla Cooper: Carla Cooper, Program Coordinator. Clayton County Health District Healthier Generations Project

Health Care Coalition Of Southern Oregon: Lee Ann Grogan, HS Southern Oregon, Project Director

Hope Tackett: Hope Tackett, QA/QI Program Director, REACHUP, Inc. Tampa, FL

Saydia Hossan: my name is Saydia Hossan and I am chw for Bronx healthy start in NYC

kkenyon: Katie Kenyon, The Foundation for Delaware County Healthy Start Program, Community Engagement Director/CAN Coordinator

Lisa Matthews: Lisa Matthews, Project Director, MomsFirst, Cleveland, OH

Peggy Vander Meulen: Peggy Vander Meulen, PD, Strong Beginnings, Grand Rapids, MI

Regina Traylor: Regina Traylor, Gift of Life Foundation Healthy Start, Executive Director

Pam Hanks: Pam Hanks, Virginia Healthy Start Initiative, Project Director

Beyla: Beyla Hood- Five Rivers Healthy Start- Dayton, OH

Linda Littlefield: Linda Littlefield, MSW/ Great Plains Healthy Start/ Program Director

Ah Vang: ah Vang, Babies First-California, PD

Angela M Ellison: Angela Ellison, Project Director, UIC Healthy Start, Chicago, Ill

Ashlynn Wittmann: Ashlynn Wittmann, Chester HS-PA, Social Worker

Paula : Paula Brodie SIHF Healthy Start, East St. Louis, IL Project Director

Joanah Wischmeier: Joanah Wischmeier, BSN, RN; Project Director; Healthy Start Communities that C.A.R.E

hlmabi: Sokhna Heathyre Mabin, Care Coordinator, CLC, Doula, Healthy Babies Healthy Start, Kalamazoo, MI

Ashley R: Ashley Ruiz, Data Analyst, Dayton OH

Brittany D. Gordon: Brittany D. Gordon, Healthy Start Robeson, Pembroke, NC, Case Manager

ccoleman: Constance Coleman, Pregnancy Coach

Heather Carr: Heather Carr, Director of Program Operations, South Georgia Healthy Start

Nichole Lehr: Nichole Lehr, Program Director, Greater Harrisburg Healthy Start

jbarnett: Jada Barnett- Toledo Lucas County Healthy Start- CHW

VWhite: Virginia White, Low Country Healthy Start, Director, SC

Anna Gruver: Anna Gruver, Alameda County Healthy Start Initiative, Oakland, CA

Maria Huynh: Maria Huynh, Evaluator, Philadelphia Dept of Health - Healthy Start

Maxine Reed Vance: Maxine Reed Vance Baltimore Healthy Start Deputy Director

Art Howell: Art Howell, Project Director, Florida Department of Health HS Bellies, Babies and Beyond, Orlando, FL

LaShonda D. Tate: Hello everyone! LaShonda D. Tate, Westside Healthy Start, Maternal and Child Health Intern

Erica Little: Erica Little, Director, Healthy Start Robeson, Pembroke, NC

maria hatch: Maria Hatch , Birmingham Healthy Start Plus. Community Health Resource Worker

jlcooke: Jocelyn Cooke Five Rivers Women Health Center Healthy Start Certified Community Health Worker.

Demia Horsley: Demia-Healthy Start Pittsburgh-Director of Strategic Initiatives directing the Maternal mortality clinical supplement portion of the HRSA grant.

Chemyeeka Tumblin: Chemyeeka Tumblin, Nashville Strong Babies, Interim Program Manager

judithfaust: Judith Faust, Project Director, Einstein Medical Center Philadelphia

owusu: Regina Owusu Family Wellness HS PD, Hartford CT

rebecca: Rebecca Roque, Community Health Worker from Five Rivers Health Centers-Healthy Start-Dayton,OH

Shawn Taylor: Shawn Taylor, Director of Programs, Healthy Babies Strong Families HS Colorado

Jackie: Jackie Ealey

Elena Brizuela: Elena Brizuela Community Health Worker II, Centerstone Healthy Start Tennessee

Andrea Fletcher: Jasmine Project, CAN UM Miami Coordinator

Tracy Enright: Tracy Enright, Healthy Start at Johns Hopkins All Children's Hospital, Pinellas County, FL., Evaluator

Jill Miller: Jill Miller, Alameda County Healthy Start Initiative, CA, CQI manager

Amanda Corder: Amanda Corder, Program Manager, Healthy Start Initiative, Indiana

Theresa Jefferson: Theresa Jefferson, Access Westside Healthy Start Program, MCH Outreach Worker

Gina McFarlane-El: Gina McFarlane-El, Five Rivers Health Centers - Project Director

Su Phipps: Su Phipps, CSC Healthy Start, Central OK Healthy Start Evaluator

Amy Hoskins: Amy Hoskins, Project Manager, UAMS Northwest Arkansas

OteliaGrace: Otelia Grace Pee Dee Healthy Start Florence SC CM Supervisor

Catrina Miller: Katrina Miller - Community Health Worker in Roseburg, Oregon

THoover: Tonya Hoover, Case Manager Supervisor, The Family Tree

gdaniels: Gwen Daniels, Project Director. Institute for Population Health, Detroit Healthy Start Project

dxs99425: Hello! I am LaTasha Melton. Community Outreach Worker at Healthy Start Loving Steps servicing the Crater District Petersburg & Hopewell Virginia

Ronnie Meyers, She/Her/Hers: Ronnie Meyers, Healthy Birth Initiatives, Multnomah County, Oregon, Program Specialist and CAN Coordinator

christy edmonds: Christy Edmonds, Healthy Start Program Manager, Tulsa Health Dept. Healthy Start

Brooke-Lyn LeMaster: Brooke-Lyn, Community Health Worker, Richmond, IN - Healthy Start Initiative - Centerstone

Rose Bishop: Rose Bishop, Program Director, Cobb Healthy Start, Marietta Georgia

Jackie: Jackie Ealey, UIC Healthy Start, Community Health Worker

Jody Sheppard: Jody Sheppard- Gift of Life Foundation in Montgomery, AL

Cristina Rodriguez: Cristina Rodriguez Care Coordinator Family Wellness Healthy Start Hartford, CT

Dr. Jerry Roberson: The Family Tree Healthy Start - Evaluator

Rosemary Fournier: Rosemary Fournier. National Center for Fatality Review and Prevention, technical assistance for Fetal and Infant Mortality Review. Greetings,all!

Linda Wallace: Linda Wallace RN

me1010: Marbella Espinoza Healthy Start Tyler CHW Tyler Texas

davisjoh: Johanna Davis Family Wellness Healthy Start CT, epidemiologist

Tracy: Tracy Golden,Perinatal Manager, Family Solutions, Orangeburg, SC

PaigeWilkins: Hi! Paige Wilkins, Healthy Start Fort Wayne, Project Director.

MARTA WHITE: Marta H-White, LCSW, Psychiatric Social Worker with LAC DHS/Whole Person Care MAMAS VISITS program mobile care team

Juanita Allen: Hello, Juanita Allen Baltimore Healthy start NHA worker

Beverly Mountjoy: Bev Mountjoy RN Case Manager Five Rivers Healthy Start

Dr. Jerry Roberson: Jerry Roberson

Melissa Hallenbeck: Melissa Hallenbeck, Toledo, OH Healthy Start Health Educator

Dr. Jerry Roberson: The Family Tree Healthy Start - Evaluator

Linda Littlefield:I am not sure I understand the question

Miriam:Miriam James-Singley Pee Dee Healthy Start Florence SC Case Manager

Linda Wallace: Linda Wallace RN BSN Birmingham Healthy Start Plus RN Nurse Case Manager/Coordinator

cheryl A Jones: Cheryl A Jones Parent Educator DHSC

elizabeth: Wish we could use the maternal supplement to fund doula training

Dianne Browne:Thanks Demia!

Demia Horsley-Healthy Start, Inc. Pittsburgh: You're welcome!

jazmine white: Jazmine Jones, Family Road of Greater Baton Rouge Healthy Start

Dianne Browne:Thanks Linda, conversations with providers may be key.

hlmabi: I work as a doula in both the community at large and within our Healthy Start program. Its as if providers understand the needs of the 2 populations differently, when really they are all women asking for the same care.

Ah Vang: We teach the clients about their rights, they can change providers and file complaints with the managed care health plans -- this doesn't always help them advocate because they're afraid if they put in a complaint they will get different care

Maxine Reed Vance: in addition to part of case management we have a parent leadership training group

Raeesa: Ra'eesa Sadat - UIC Healthy Start - Program Doula

Linda Littlefield: louder peggy

Lisa Bain: We have a "Participant Advisory Committee" as part of our CAN and try to make that a comfortable space for our mothers (mostly Black) to share stories and document common issues to

Dianne Browne: Some of the feedback in the focus groups suggest the issues are related to the need for systems change in medical birthing practice. Any thoughts?

Demia Horsley-Healthy Start, Inc. Pittsburgh: Would you all be willing to share these tools?

Linda Littlefield: LOVE IT

hlmabi: That's great. We are creating that in our program

Rachel Hansen: love it¹

Ah Vang: I like that Angela, your idea about the report card!!

Maxine Reed Vance: with our Merck grant we have focus groups with Patients as Partners to teach women how to tell their stories

Health Care Coalition Of Southern Oregon: I love that idea! If anybody creates a template of what to ask and how to present it, I'd love to see it. Great thought!

jaxtell: We've had issues where we've tried to educate providers on these subjects and they say things like "well I treat all of my clients the same" and they immediately dismiss the conversation as something that isn't happening in our area, which it definitely is.

hlmabi: That comment is dismissive.

Linda Littlefield: Yes, some of our sites have centering pregnancy and that is true

hlmabi: @jaxtell

Marcia Santiago: childbirth education that teaches informed decisions making

Marcia Santiago: informed consent and informed refusal *

Ah Vang: One of the biggest challenges is that systems change but a 20-year staff will keep doing the same thing

Rosemary Fournier: FIMR is partnering with Dr. Magda Peck on an enhanced project for storytelling - elevating the voices of women who have had a fetal or infant loss and using those stories for social change.

Dianne Browne:Yes Ah Vang! Thanks.

Melissa Hallenbeck: agree with Ah

Health Care Coalition Of Southern Oregon: I'd really like to hear from other programs about what they are measuring with the expansion.

Maxine Reed Vance: Dyad care and SMM review

Violet: Hiring staff who reflect the population being served.

Dianne Browne:It can begin with education through the CAN or outreach in the community. It is important that folks know what it is.

judithfaust: Contact info for Judith Faust - 215-456-8268,

Ah Vang: @Jaxtell - I agree - with that, conversation stops. Often clients are expressing their dissatisfaction with the office staff, not necessarily the OB or Provider

Demia Horsley-Healthy Start, Inc. Pittsburgh: Got it Judith. Thank you. Talk to you soon.

jaxtell: @hlmabi I'm not sure if you're saying I am being dismissive or the providers are. But those are the exact comments I have gotten from providers after events on racial disparities of medical care and maternal mortality.

Demia Horsley-Healthy Start, Inc. Pittsburgh: Linda, id love to connect with you as well.

judithfaust: Judith Faust email faustj@einstein.edu

Dianne Browne:Dr. Roberson can you write the 3 criteria in the chat box?

hlmabi: @jaxtell ~ I'm saying the responsive of the providers is dismissive language <3

Linda Littlefield:linda.littlefield@gptchb.org love to work together!

hlmabi: I have heard it too. Many times

THoover: In our program, we hired a nurse midwife and a nutritionist to work with our high risk mothers to help reduce those barriers that may result in a death. We also are hosting a maternal mortality summit to help address any barriers.

Peggy Vander Meulen: MM is impacted primarily by the same factors that contribute to overall health and inequities in birth outcomes - social and structural determinants of health, including racism and discrimination. To really make an impact we have those systems.

Cristina Rodriguez: after administering the PHQ-9, i keep a count of all my high risk participants so that i am able to pin point my most needed participants and do my family planning with those participants to address their stresses

Peggy Vander Meulen: ...have to address those systems..

Health Care Coalition Of Southern Oregon: Thank you! I appreciate your input.

dmmcghee: I'm here

Peggy Vander Meulen: We are using some of the grant funds to provide free LARCS

jaxtell: @Ah Vang, yes, the conversation immediately stops. We only have two hospitals in our service area, and only one of them do OB care, and it had such a terrible reputation for being rude to clients and literally killing people, we have clients that travel out of state to receive care. They are unwilling to listen to what we tell them.

Demia Horsley-Healthy Start, Inc. Pittsburgh: Got it Linda. Mine is dhorsley@hsipgh.org

Maxine Reed Vance: that's why Dyad care is important

Timika Anderson Reeves: In response to Latte#2 we also use the GAD-7, and now we will be screening all prenatal patients throughout our network, to gain insight on the issues that are causing anxiety among our participants. We also use the PHQ9 to asses for depression.

Linda Littlefield:Yes Jerry

Violet: Forming relationships with medical systems at the management level where decisions can be made and change can happen.

Andrea Fletcher: talk about it

Juanita Allen: improve health outcomes before, during and after pregnancy, and reduce racial/ethnic differences in rates of infant death and adverse perinatal outcomes.

Dianne Browne:I agree Juanita!

Dianne Browne:But where to HS projects start?

Misha Taherbhai: Sorry if I missed this. Are there any performance measures around maternal mortality, will this be forthcoming?

Dianne Browne:Sorry where do HS projects start?

Violet: Totally agree!!!

Maxine Reed Vance: agree

Timika Anderson Reeves: We have also trained all HS staff on the Facilitated Attuned Interactions (Ericksen Institute) to help build stronger relationship with our families and staff. It has helped to understand the underlying issues not always captured when collecting data.

Ah Vang: We worked with one of our Medicaid Managed Healthcare plan to introduce doula services to increase continuity of prenatal care. The plan has current patient data to know who has had a preterm birth, complications

Dr. Jerry Roberson: Situation (circumstances) + Beliefs () + Behaviors (Choices) = Constructivist Evaluation and Transformation for the program participants and the HS site.

Dianne Browne:Thank you Dr. Roberson.

Timika Anderson Reeves: Here is the link for the training if projects are interested:
<https://www.erikson.edu/professional-development/facilitating-attuned->

interactions/#:~:text=Facilitating%20Attuned%20Interactions%20(FAN),-
Early%20Childhood%20Leadership&text=Erikson%20trains%20and%20consults%20with,we%20refer%20to%20as%20FAN.

Peggy Vander Meulen: side from extensive anti-racism / Health Equity-Social Justice trainings, we work with the County on transportation systems; advocating for an end to participation with ICE; affordable housing initiatives and livable wage.

lisaolds: Many components, many of what Healthy Start already touches on - but tracking those components and collaborating with physicians and nurses - to ensure all components are addressed; ie., of physical, social, and psychological well-being.

Violet: We meet quarterly with hospital systems, sharing with them what the experiences have been for our families and what changes they can make. We also meet with hospital L&D staff and Social work staff and talking about racism and how they impact the outcomes of our women.

Timika Anderson Reeves: We have also trained staff on unconscious bias and microaggressions

Dianne Browne: Violet, I'll reach out to you to learn more about what you are doing.

Hope Tackett: Work with partners in your community that are working toward the same goal - Maternal Mortality Review Committee for example

Maxine Reed Vance: undoing racism training via partnership, law passed to mandate implicit bias training, resilience training for participants

Dianne Browne: Maxine, I'll reach out to learn more about what B'more is doing.

Peggy Vander Meulen: The six HS projects in Michigan work with Mich. Dept. of HHS on assessing policies and strategic plans through a racial equity lens.

Maxine Reed Vance: ok Dianne

jaxtell: We encourage providers of many different types attend our educational meetings on social determinants of health and racial disparity, but again, its difficult to get them to engage with the education. I've shown rates in our events and have been "but what about..."--ed until the end of time.

Maxine Reed Vance: research out looking at police violence and infant health

Violet: We make presentations at all of our nursing schools and talk about all of the disparities and how their roles as nurses caring for these families will impact outcome.

Ah Vang: @Dr. Jerry - its a challenge to always include FOB where we're usually focused on what mom wants...ie. sometimes dad wants mom to breastfeed but she doesn't want to

Amanda Corder: Lack of prenatal care and delivery services - we cover 4 counties that don't have either.

Cristina Rodriguez: health care and housing

Rachel (She/Her/s): rural location: transportation, food deserts, housing

Dr. Jerry Roberson: Sorry, I left out one word. Situation (circumstances) + Beliefs (Perceptions) + Behaviors (Choices) = Constructivist Evaluation and Transformation for the program participants and the HS site.

jaxtell: We are very rural, and some of the biggest challenge is access. We only have one OB care hospital in our five county region and clients may have to chose between receiving services from a doctor that completely disrespected them previously or drive more than an hour to another provider. Or even over state lines.

LaToyia: Asking to see if tele health has helped any for OB services?

elizabeth: We cover 33 counties, so our target population is very spread out, and most communities have very little access to specialty care. We see how empowered community and woman-centered services like Doulas and midwives could fill a significant gap and help prevent things from escalating, but it's hard to fund

Elena Brizuela: one of our biggest issues in the rural communities is lack of resources, ob/care and prenatal care available close by, therefore transportation is a huge barrier.

Tracy: Telehealth doesn't work will in rural because of the broadband connections.

Health Care Coalition Of Southern Oregon: Telehealth is a challenge due to internet access and cell phone service. Many of our families live in areas without either.

Tracy: I meant work well in rural due to the broadband

jaxtell: Agree with many others; our clients do not have the internet, devices, or home life capable of sustaining telehealth visits.

Health Care Coalition Of Southern Oregon: Do any programs offer support for hot spots or similar support for access to telehealth?

Rachel (She/Her/s): the OB providers I work with want eyes/ears on the unborn baby and mom so telehealth is not idea for pregnancy

Linda Littlefield:Awesome Peggy

Janina Daniels: You have to educate those who do not know the maternal mortality - some women just knew someone in their family died after child birth but was never told that what is was

Dianne Browne: Camden conducted focus groups with women in the community to learn about their birth experiences. It is our plan to share the findings with the participants, our organizations board and the community thealthcare providers.

Maxine Reed Vance: thru our CAN, partnership advisory committees, Johns Hopkins Mdmom task force

judithfaust: We are using CAN activities to engage community, and our staff members who work in the community. Other agencies for food challenges for our families

Linda Littlefield:Good point Janina

owusur: Serving on our MM Review Committee

Maxine Reed Vance: state legislative MMR community stakeholders group

Linda Littlefield: Great ideas from everyone today.

Dianne Browne: Great job Johannie! Thank you.

judithfaust: Great session thanks to all

Peggy Vander Meulen: Thanks Johannie! good facilitating :)

Misha Taherbhai: thank you

Linda Littlefield: Yes and Johannie We miss you thanks

Elena Brizuela: thank you

Jennifer Torres: thank you!

Varonica Caldwell: Thank you!

Tess Pritchard: <https://nichq.zoom.us/j/96674248653>