

Background

- ❖ Social and structural determinants of health contribute to disparities in birth and maternal health outcomes.
- ❖ More than 80% of pregnancy-related deaths in the U.S. are preventable.
- ❖ Prenatal and postpartum care are preventive care that can have long-term effects on infant, maternal, family, and community health.
- ❖ **Comprehensive Perinatal Services Program (CPSP)** is a Medi-Cal benefit which provides wraparound services that supplement obstetric care, including health education, nutrition and psychosocial support, from conception through 60 days postpartum.

Project Goals

- ❖ Clinic staff who completed the required CPSP trimester assessments lacked time and resources to comprehensively identify and address barriers to a healthy pregnancy.
 - Assessments and resource referrals initiated remotely by health care navigator (HCN) before first clinic visit
- ❖ Paper forms made sharing information among team members and escalating identified concerns inefficient and challenging.
 - Shared care coordination note
- ❖ Structure and expectations for offering CPSP to eligible patients, ensuring timely assessments, and standard referral and resource sharing practices were limited.
 - CPSP enrollment offered by scheduler
 - Centralized resource referral information

PROBLEM STATEMENT:

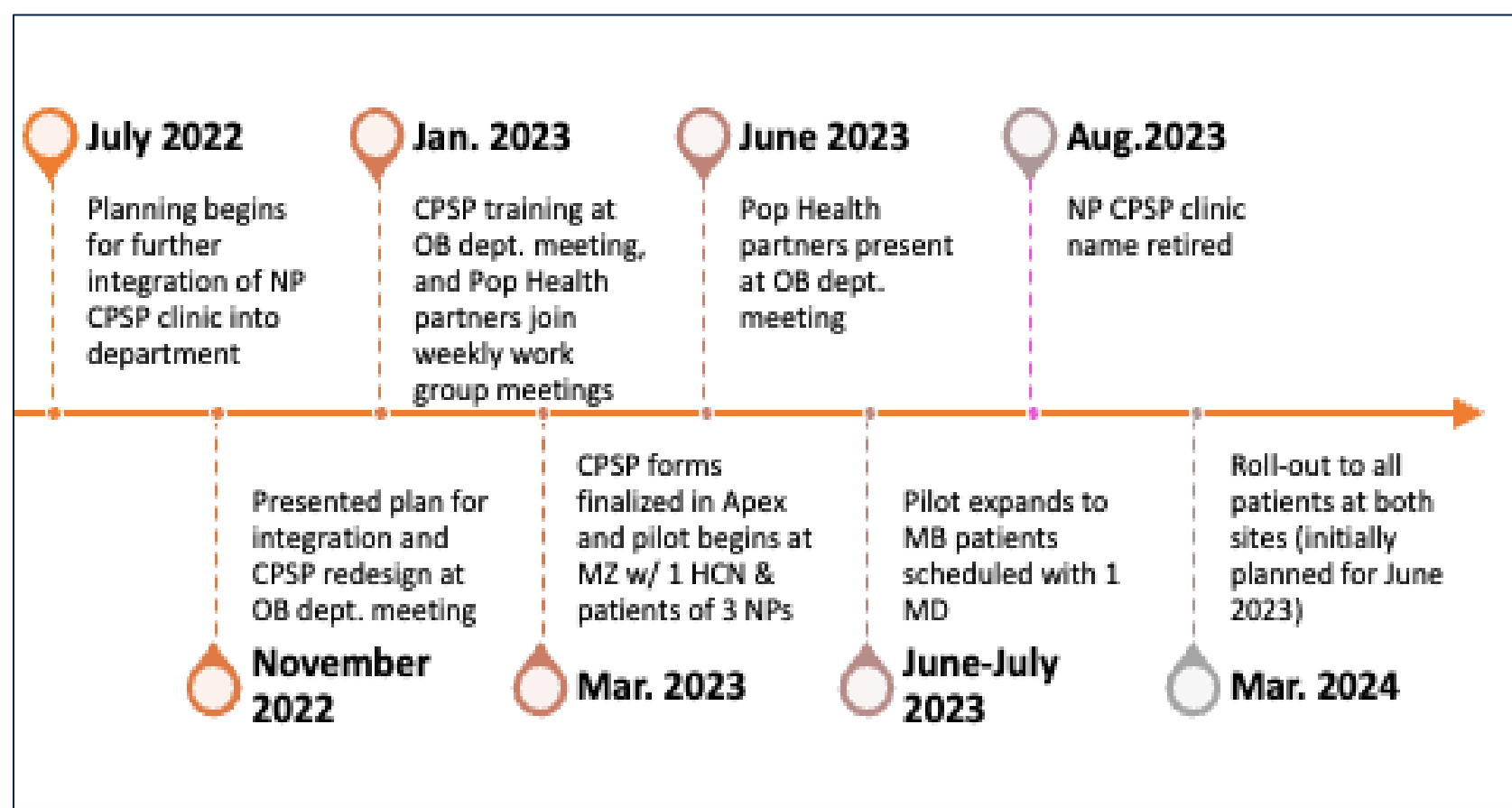
UCSF's publicly insured prenatal patients were not consistently and systematically receiving comprehensive services aimed at improving their pregnancy outcomes.

COMPREHENSIVE PERINATAL SERVICES ARE CRITICAL TO IMPROVING MATERNAL AND INFANT HEALTH OUTCOMES, AS EVIDENCED BY FAVORABLE PRELIMINARY OUTCOMES IN KEY PERFORMANCE INDICATORS: GESTATIONAL AGE AT BIRTH, EXCLUSIVE BREASTFEEDING, AND POSTPARTUM VISIT RATE.

Project Plan and Intervention

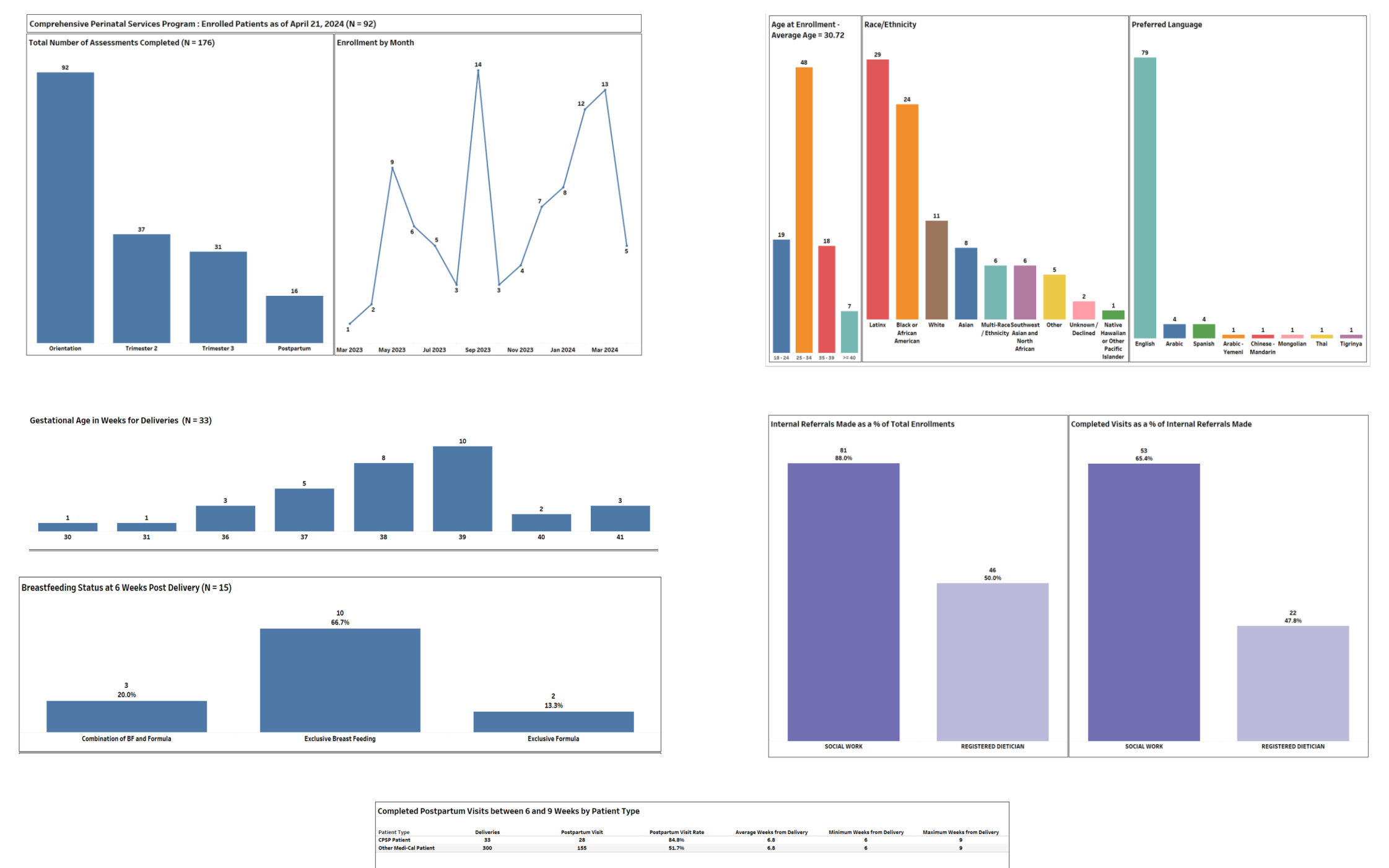
Grounded in the 2021 OB Medi-Cal Care Redesign Work Group report, which emphasized that an equity-focused approach is essential when addressing the structural inequities that result in disparities in perinatal care access, experience, and outcomes:

- ❖ Formed collaborative interdisciplinary work group from OPH and the OB/GYN dept. that meets regularly to identify areas for improvement; develop, pilot, and implement workflows; provide oversight for PDSA cycles
- ❖ Ongoing relationship-building with community organizations to provide a wraparound network of support for all pregnant patients with Medi-Cal and/or limited resources
- ❖ Build systems to monitor strengths and areas for improvement in providing patient-centered care



Project Outcomes, Results & Impact

- ❖ Improved systems for comprehensive person centered and continuous care
- ❖ More accessible resources for Medi-Cal insured patients
 - Connection with these important resources has potential to impact family's physical and psychosocial health and wellbeing during and beyond pregnancy.
- ❖ Increased patient and provider satisfaction with collaborative approach



Conclusions, Next Steps & Lessons Learned

Conclusions:

- ❖ CPSP redesign at UCSF is contributing to a more valuable program which is:
 - Optimized with efficient workflows
 - Offered with deliberate referrals and resources
 - Accessible to all eligible patients
- ❖ Patients with public insurance can benefit from referral to community resources, and continuous engagement with a health care navigator supports their connection with these resources
- ❖ Designing and implementing improved infrastructure for delivering CPSP services may result in improved outcomes for UCSF's publicly insured perinatal population

Next Steps:

- ❖ Develop mechanisms for patient input
- ❖ Incorporate engagement technologies
- ❖ Continue to use metrics to mitigate gaps in care and demonstrate redesigned program's impact
- ❖ Further collaboration with internal & external resources
- ❖ Improve billing and access unrealized income
- ❖ Expand interprofessional training

Lessons Learned:

- ❖ Continuous team care planning
 - Trimester assessments, resource referral and follow-up are time-intensive, and the process elicits and delivers important information
- ❖ Community resource referral and connection
 - Staying up to date with the San Francisco Bay Area's robust and everchanging community resources is challenging
- ❖ All patients benefit
 - Changes such as the updated and translated welcome letter and integrated provider checklist positively impact the system, not just patients with public insurance