

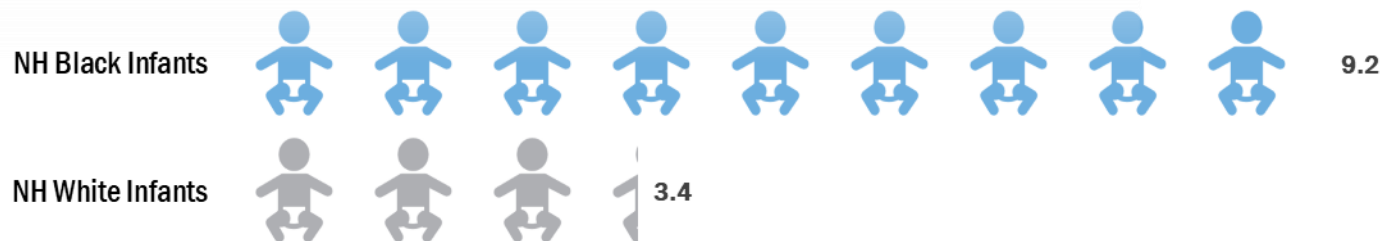
# **Statewide Initiatives to Improve Maternal Health Outcomes**

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Data and Surveillance Administrator  
Bureau of Maternal, Child, and Family Health

# There is a Black Infant and Maternal Mortality Crisis in Ohio.

**Non-Hispanic Black infants are almost 3 times more likely to die than non-Hispanic white infants.\***

Rate per 1,000 live births.



**Almost 33% of feto-infant deaths between 2016-2019 could have been prevented by improving both maternal preconception and perinatal health, and parenting behaviors after birth.**

**Non-Hispanic Black women are almost 3 times more likely to die than non-Hispanic white women from pregnancy-related causes.\*\***

Rate per 100,000 live births.



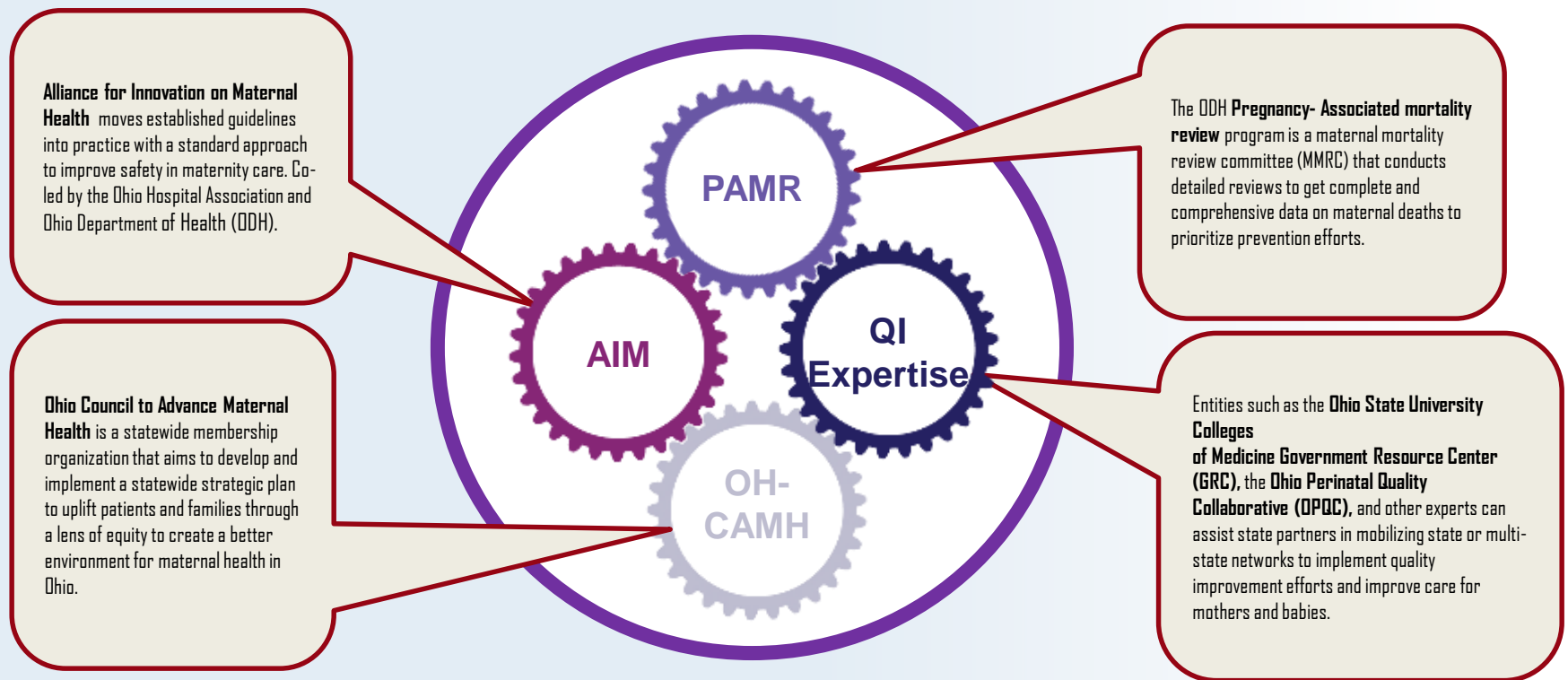
\*Infant mortality rates from 2019.

\*\*Pregnancy-related mortality rates from 2008-2016.

**There is a Black Infant and Maternal Mortality Crisis in Ohio.**

**A healthy mom leads to healthy infant  
outcomes.**

# Aligning Statewide Action: Key Partners to Improve Maternal Health in Ohio



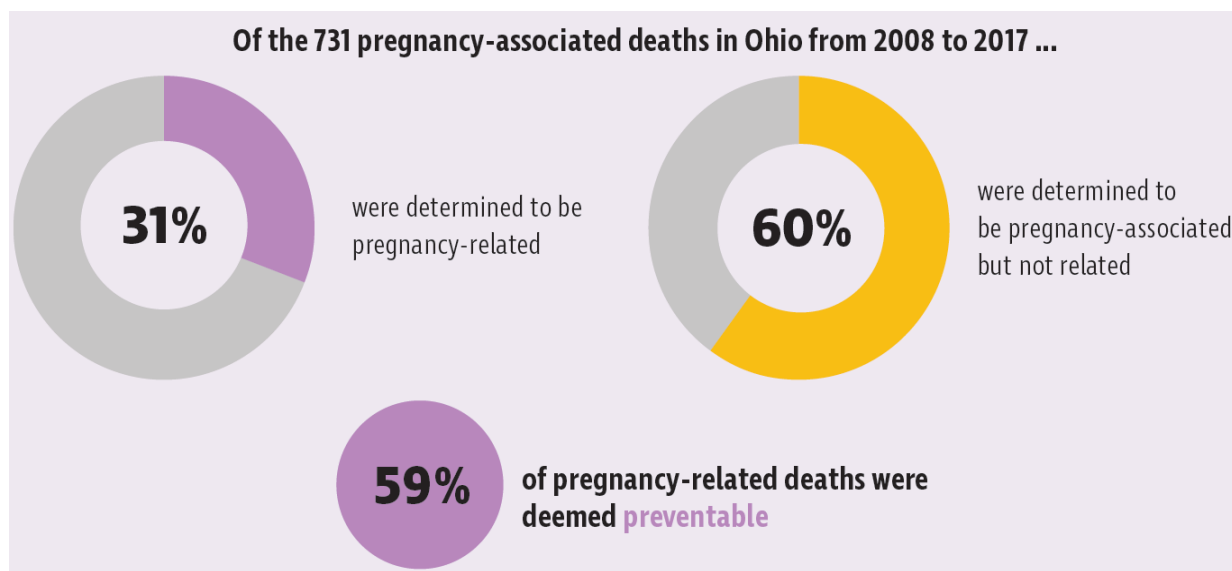
# Ohio Pregnancy-Associated Mortality Review

## Background:

The Pregnancy-Associated Mortality Review (PAMR) program was established in 2010 at the Ohio Department of Health (ODH) as an enhanced surveillance program to monitor maternal mortality in Ohio.

Every year, approximately ...

- 2,000 Ohio women experience a severe maternal morbidity.
- 21 women die of complications related to their pregnancies.



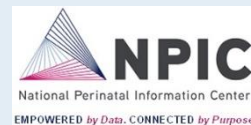
# Ohio Alliance for Innovation on Maternal Health



"...offers a standardized approach for delivering well-established, evidence-based practices to be implemented with complete consistency, for every patient, every time – resulting in improved patient outcomes" based on quality improvement science.

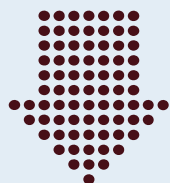
<https://safehealthcareforeverywoman.org/aim/patient-safety-bundles/>

# AIM Partners



Partnership between  
**OHIO HOSPITAL ASSOCIATION** and  
the **OHIO DEPARTMENT OF HEALTH**

# AIM's Primary Objective



Reduce preventable maternal deaths and severe maternal morbidity (SMM) in the United States.

By:

- Promoting safe care for every U.S. birth.
- Engaging multidisciplinary partners at the national, state and hospital levels.
- Developing and providing tools for implementation of evidence-based patient safety bundles.
- Utilizing data-driven quality improvement strategies.
- Aligning existing efforts and disseminating evidence-based resources.





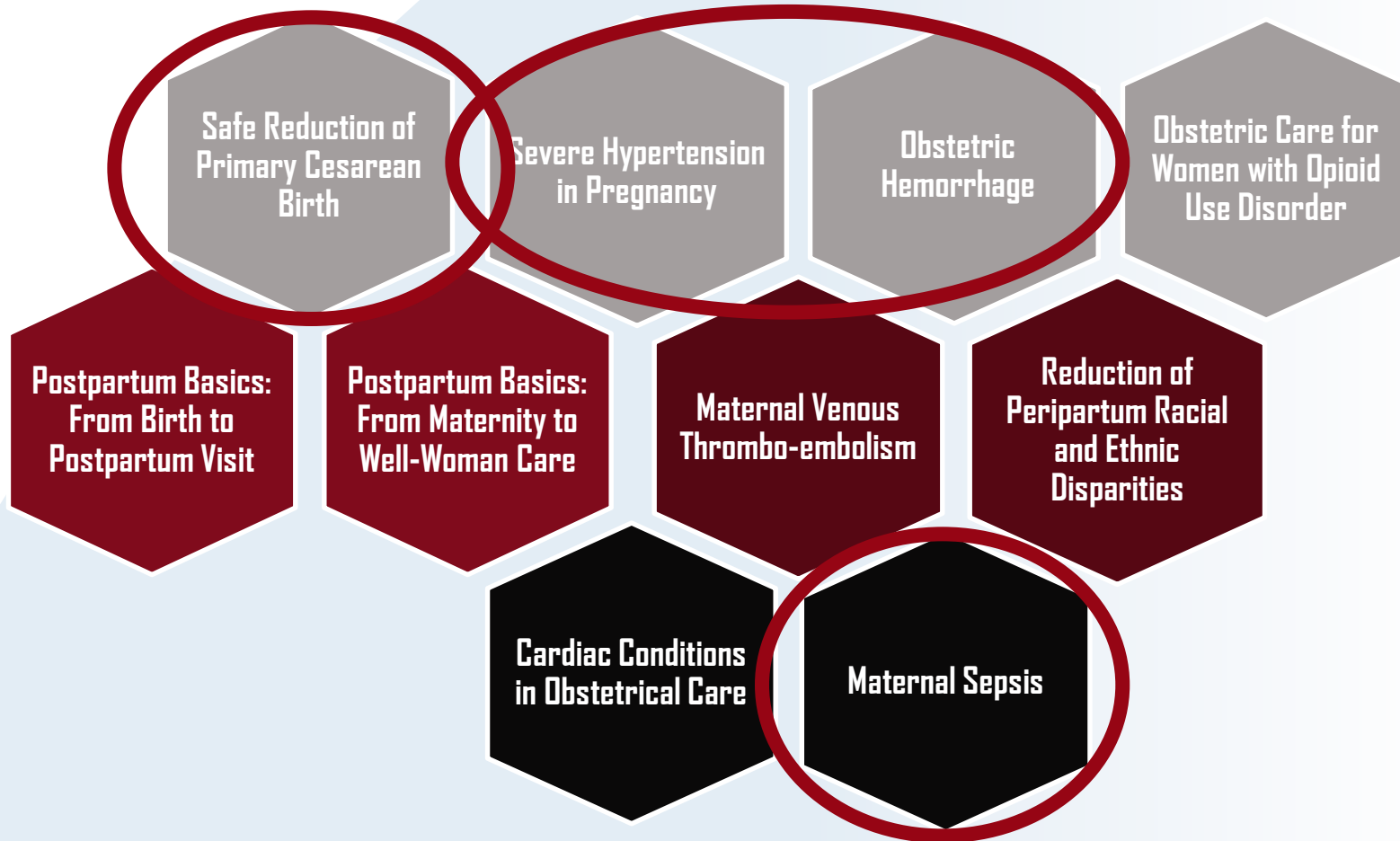
# Ohio AIM Updates

- Kick-off meeting – March 5, 2021.
- Severe maternal hypertension – current statewide bundle.
- Under development:
  - Ohio AIM webpage.
  - Hospital recruitment – letter of commitment.
  - Data collection/dashboards.
    - State dashboards and benchmarking.
    - HIE conversations.
- 2022 meeting.



Partnership between  
**OHIO HOSPITAL ASSOCIATION** and  
the **OHIO DEPARTMENT OF HEALTH**

# AIM Patient Safety Bundles

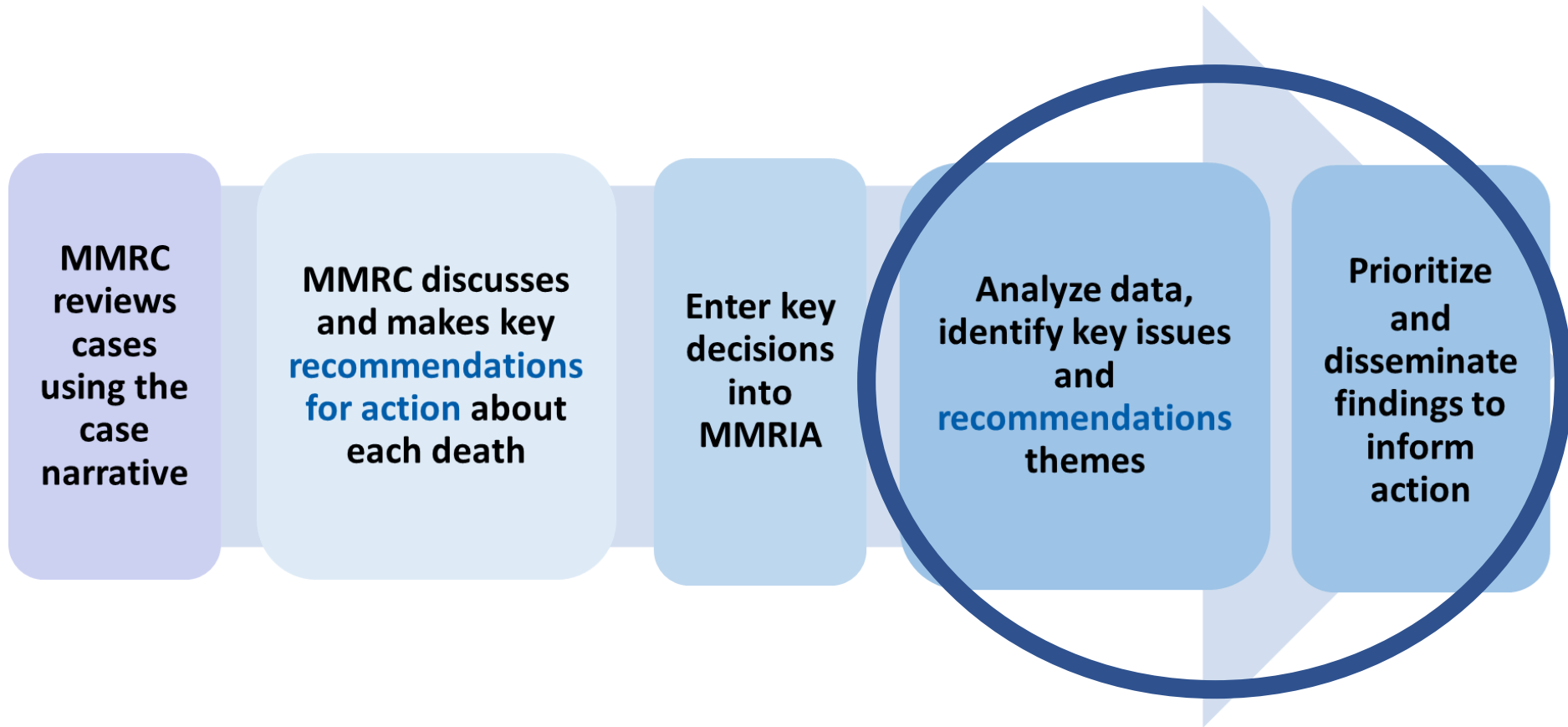


# **Federal Funding Sources (\$12.25 million through Sept 2024)**

**Centers for Disease Control  
and Prevention (CDC)  
Enhancing Reviews and  
Surveillance to Eliminate  
Maternal Mortality (ERASE  
MM) Program**

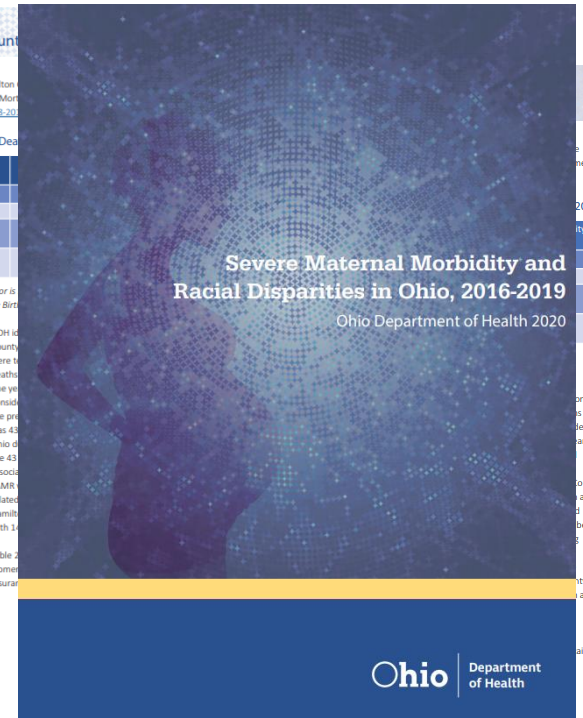
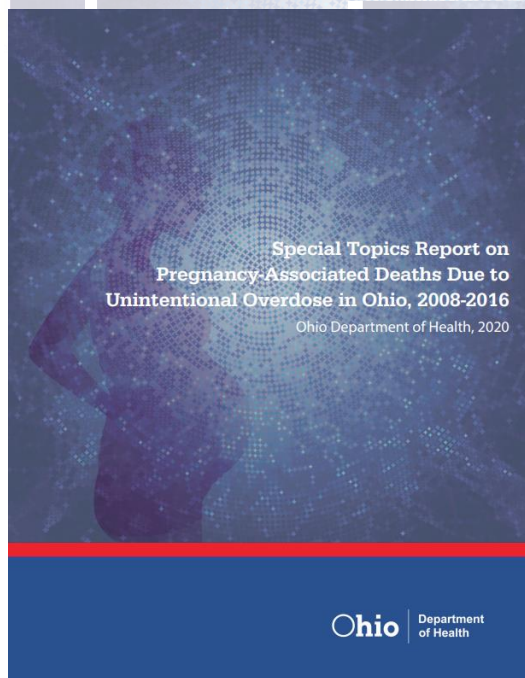
**Health Resources and  
Services Administration  
(HRSA) State Maternal  
Health Innovation (MHI)  
Program**

# CDC ERASE MM data to action continuum



*Adapted from WA State DOH*

# Recently Released PAMR Reports & Data



Master's Degree	2
Total	2

Master's Degree	4
Doctorate or Professional Degree	2
Not Specified	1
Total	68

Associate Degree	1
Bachelor's Degree	1
Doctorate or Professional Degree	1
Total	3

Doctorate or Professional Degree	1
Total	43

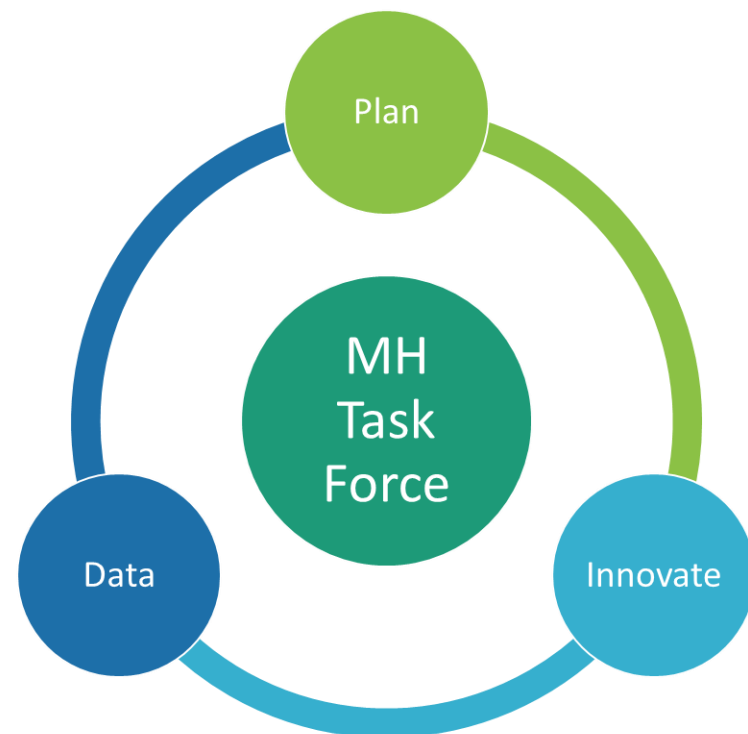
High school grad. or GED completed	24
Some college; no degree	10
Associate Degree	6
Bachelor's Degree	2
Master's Degree	1
Total	48

# HRSA State Maternal Health Innovation Program

Award Recipients: AZ, IA, IL, MD, MT, NC, NJ, OH, OK

Program goal: To improve maternal health outcomes in the United States by:

- Catalyzing multidisciplinary collaboration.
- Collecting and analyzing maternal health data.
- Promoting and executing innovation in maternal health service delivery to advance evidence-informed strategies that achieve a measurable impact.





# PAMR Recommendations

Preventability Theme	Strategies for Local Efforts	Strategies for ODH	Preventability Theme	Strategies for Local Efforts	Strategies for ODH
Optimize the care of patients with chronic conditions	<p>1. Provide staff education on peripartum racial and ethnic disparities and their root causes. <i>For example: Embed training on implicit bias in graduate medical education (Talati 2018) and / or within existing trainings at the unit, and / or hospital level to bring about awareness of personal behaviors that could impact health disparities.</i></p> <p>2. Health systems should consider establishing a mechanism for patients, families, and staff</p>	<p>1. Provide staff education on racial and ethnic disparities and their root causes. <i>For example: Conduct</i></p>	Educate providers and patients on interventions	<p>1. Encourage the use of known standards of care at the hospital / clinic level (e.g., ACOG).</p> <p>2. Encourage the adoption of the corresponding patient safety bundles through the Patient Safety Council on Women's Healthcare, the</p>	<p>1. Partner with internal partners (e.g., maternity licensure) and external agencies (e.g., Ohio ACOG, Ohio Hospital Association, Ohio Department of Medicaid, etc.)</p>
Preventability Theme	Strategies for Local Efforts	Strategies for ODH	Preventability Theme	Strategies for Local Efforts	Strategies for ODH
Optimize the treatment of pregnant and postpartum women with substance abuse disorder, including alcohol	<p>1. Promote the institution of more comprehensive resources and treatment programs for reproductive aged women who are drug and / or alcohol dependent.</p> <p>2. Improve coordination of medical care and substance abuse / mental health treatment.</p> <p>3. Offer prenatal and postpartum education about substance abuse to health care providers. <i>For example: Disseminate and implement the national AIM Opioid Use in Pregnancy Collaborative and disseminate materials.</i></p>	<p>1. Partner with ODH, WIC, and the Ohio Department of Mental Health and Addiction Services regarding WIC's brief intervention model to evaluate alcohol use in pregnancy and making referrals.</p> <p>2. Develop a statewide surveillance system of perinatal substance abuse.</p> <p>3. Perform an environmental scan for care coordination and transition (from prenatal to postpartum) care in resource poor regions.</p>	Build capacity for Emergency Medical Services (EMS)	<p>1. Educate first responders and emergency medicine providers about ACOG algorithm for perimortem Cesarean section.</p> <p>2. Increase the opportunities for CPR trainings to increase bystander intervention.</p>	<p>1. Promote joint simulation training with maternity units, emergency departments, and local EMS for obstetric emergencies.</p>
Improve identification of cause(s) of maternal deaths and underlying causes	<p>1. Promote local level review of severe maternal morbidity cases.</p>	<p>1. Improve the rates of autopsy for maternal deaths. <i>For example: Engage the Ohio Coroners' Association in developing strategies.</i></p> <p>2. Improve data quality by implementing quality assurance system for conducting data checks for completeness and accuracy of data within PAMR's MMRIA system.</p>	Disseminate information regarding "Seatbelt Day" for pregnant women.	<p>Develop policies for EMS transport whereby pregnant women are not taken to facilities without obstetric care capability.</p> <p>Standardize screening, documentation and referral for intimate partner violence. <i>For example: standardize the development of a safety plan once risks are identified.</i></p> <p>Ensure that medical professionals and first responders are trained regarding signs of these risks.</p> <p>Optimize treatment for pregnant and postpartum women with mental health issues.</p> <p>Ensure that anyone with mental health concerns (e.g., history of suicide attempt) have an evaluation during pregnancy, prior to discharge at any hospital admissions and the postpartum period.</p> <p>Optimize case management for mental health particularly between the pregnant and postpartum periods.</p>	<p>1. Partner with ODH Injury Prevention and the Ohio Department of Mental Health and Addiction Services regarding development of resources for patients, families, and healthcare providers, including those for dual diagnosis (substance abuse / mental health) and promote dissemination of mental health resources at the local community level.</p>
	<p>1. Promote development of policies for landlords to have working alarms at the community level.</p>		4. Implement training on suicide risk assessment / depression screening.		



# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Encourage the adoption of the corresponding patient safety bundles through the Patient Safety Council on Women's Healthcare, the Alliance for Innovation on Maternal Health (AIM), Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), and the California Maternal Quality Care Collaborative.

**Initiative:** Implementation of the AIM Hypertension Bundle throughout all delivery hospitals.

12% of pregnancy-related deaths were due to pre-eclampsia and eclampsia; 85% of these deaths were deemed preventable by committee review.



To reduce preventable maternal deaths related to hypertension.

# Wave 1 and Wave 2 Ohio AIM Hypertension Hospital Sites

## Level 1 Care

Label	Name	Site Type
1	PROMEDICA DEFIANCE REGIONAL HOSPITAL	Implementation
2	PROMEDICA FLOWER HOSPITAL	Implementation
3	PROMEDICA FREMONT MEMORIAL HOSPITAL	Implementation
4	UNIVERSITY HOSPITALS SJMC	Implementation
5	UNIVERSITY HOSPITALS GEAUGA MEDICAL CENTER	Implementation
6	UNIVERSITY HOSPITALS PORTAGE MEDICAL CENTER	Implementation
7	UNIVERSITY HOSPITALS SAMARITAN MEDICAL CENTER	Implementation
8	AULTMAN ORVILLE	Implementation
9	CCF UNION HOSPITAL	Implementation
10	LIMA MEMORIAL HOSPITAL	Implementation
11	MARY RUTAN	Implementation
12	HOLZER MEDICAL CENTER	Implementation
13	WAYNE HEALTHCARE	Implementation
14	THE CHRIST HOSPITAL - LIBERTY TOWNSHIP	Implementation
15	MUSKINGHAM VALLEY	Implementation

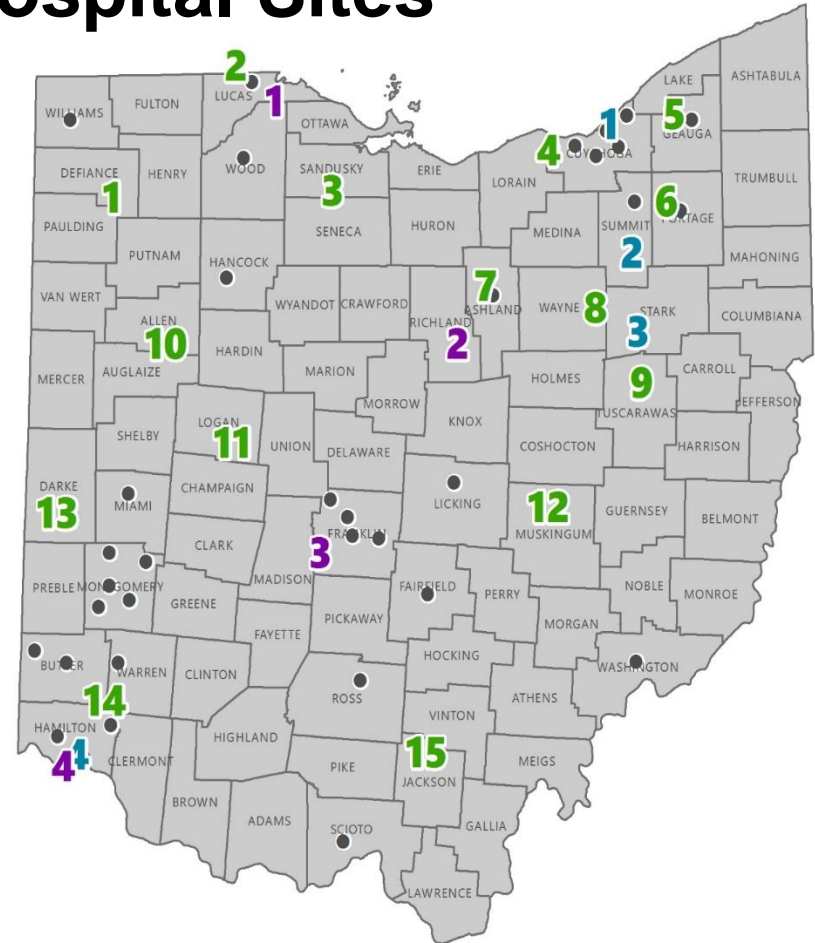
## Level 2 Care

Label	Name	Site Type
1	PROMEDICA BAY PARK HOSPITAL	Implementation
2	OHIOHEALTH MANSFIELD HOSPITAL	Implementation
3	OHIOHEALTH DOCTORS HOSPITAL	Implementation
4	THE CHRIST HOSPITAL	Implementation

## Level 3/4 Care

Label	Name	Site Type
1	CCF MAIN CAMPUS	Mentor
2	SUMMA HEALTH	Mentor
3	AULTMAN HOSPITAL - AULTMAN BIRTH CENTER	Implementation
4	UNIVERSITY OF CINCINNATI MEDICAL CENTER	Implementation

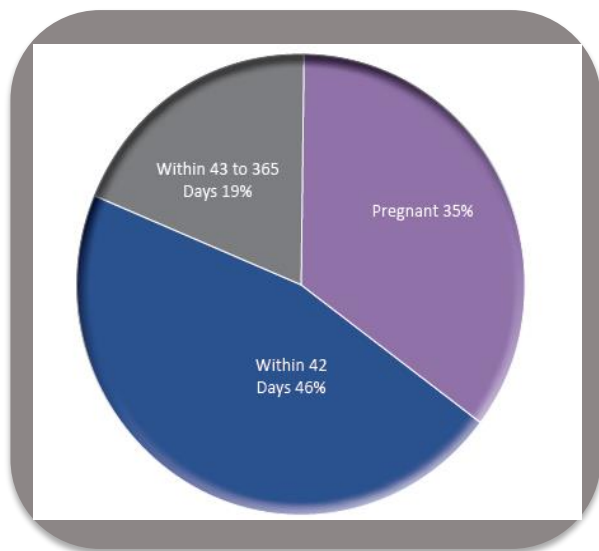
● Inaugural AIM HTN QIP Hospital Sites



# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Educate providers and patients on recognition, treatment, and prevention of obstetric complications.

**Initiative:** Implementation of the Urgent Maternal Warning Signs education in public health settings.



To reduce preventable,  
postpartum maternal  
deaths.

# Urgent Maternal Warning Signs: Participating Sites

## Cuyahoga County

Label	Site	Address
1	East Cleveland	16200 Euclid Avenue
2	Euclid Shore Cultural Centre	291 East 222nd. Street
3	Hough Health Center	8300 Hough Avenue
4	Lee Harvard	4071 Lee Road Suite 270
5	MetroHealth Broadway Health Center	6835 Broadway Avenue
6	Metrohealth Buckeye Health Center	2816 East 116th Street
7	MetroHealth J. Glen Smith Health Center	11100 St. Clair Avenue
8	MetroHealth Main	2500 MetroHealth Drive
9	University Hospital Rainbow Center for Women and Children	5805 Euclid Avenue

## Franklin County

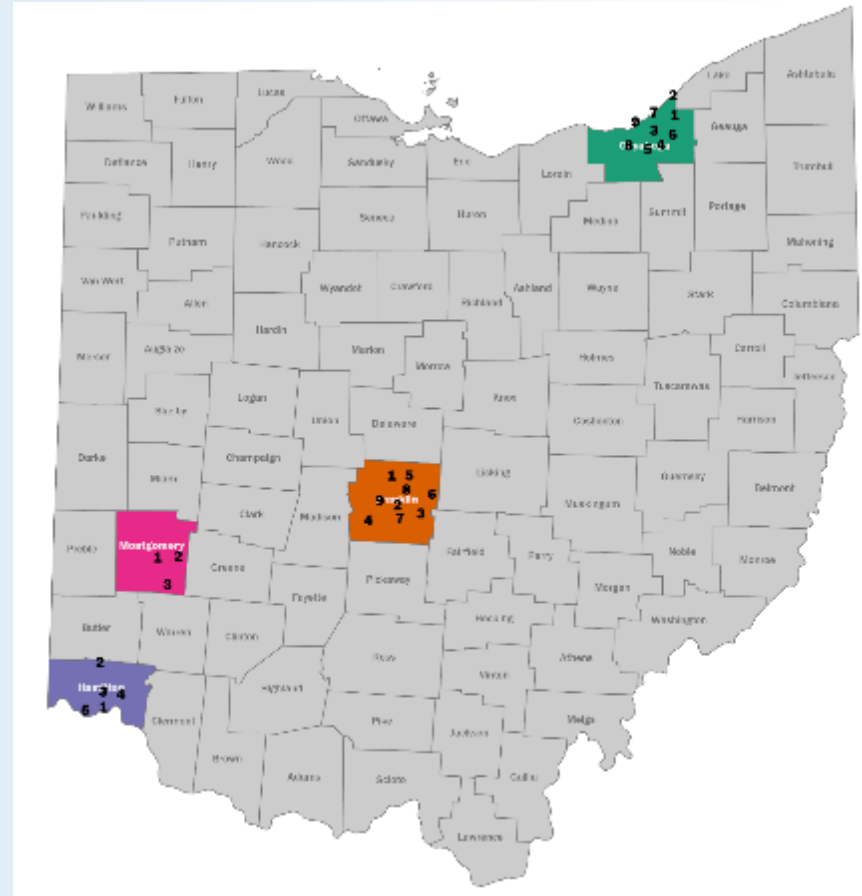
Label	Site	Address
1	Clintonville WIC	4550 Indianola Avenue
2	East Central WIC	1180 East Main Street
3	Eastland WIC	3933 East Livingston Avenue
4	Georgesville WIC	1681 Holt Road
5	Northeast WIC Clinic	4337 Cleveland Avenue
6	Outerbelt East WIC	79 Outerbelt Street
7	Southside Clinic	1905 South Parsons Avenue
8	St. Stephens WIC	1500 East 17th Avenue
9	Westside Health WIC	2300 West Broad Street

## Montgomery County

Label	Site	Address
1	Drew Health Center	1323 West 3rd Street
2	Sunrise Center	1320 East Fifth Street
3	West Carrollton WIC	109 Prestige Place

## Hamilton County

Label	Site	Address
1	Millvale	2750 Beekman Street
2	Mount Healthy/7 Hills WIC Office	10950 Hamilton Avenue
3	Northside Clinic	3917 Spring Grove Avenue
4	Roselawn WIC Office	7162 Reading Road Suite 800
5	Western Hills WIC	4966 Glenway Avenue #301





Urgent Maternal Warning Signs

# Federally Funded PAMR Initiatives: Data to Action

## URGENT MATERNAL WARNING SIGNS



Headache that won't go away or gets worse over time



Dizziness or fainting



Thoughts about hurting yourself or your baby



Changes in your vision



Fever



Trouble breathing



Chest pain or fast-beating heart



Severe belly pain that doesn't go away



Severe nausea and throwing up (not like morning sickness)



Baby's movements stopping or slowing



Vaginal bleeding or fluid leaking during pregnancy



Vaginal bleeding or fluid leaking after pregnancy



Swelling, redness, or pain of your leg



Extreme swelling of your hands or face



Overwhelming tiredness



<https://safehealthcareforeverywoman.org/urgentmaternalwarningsigns/>



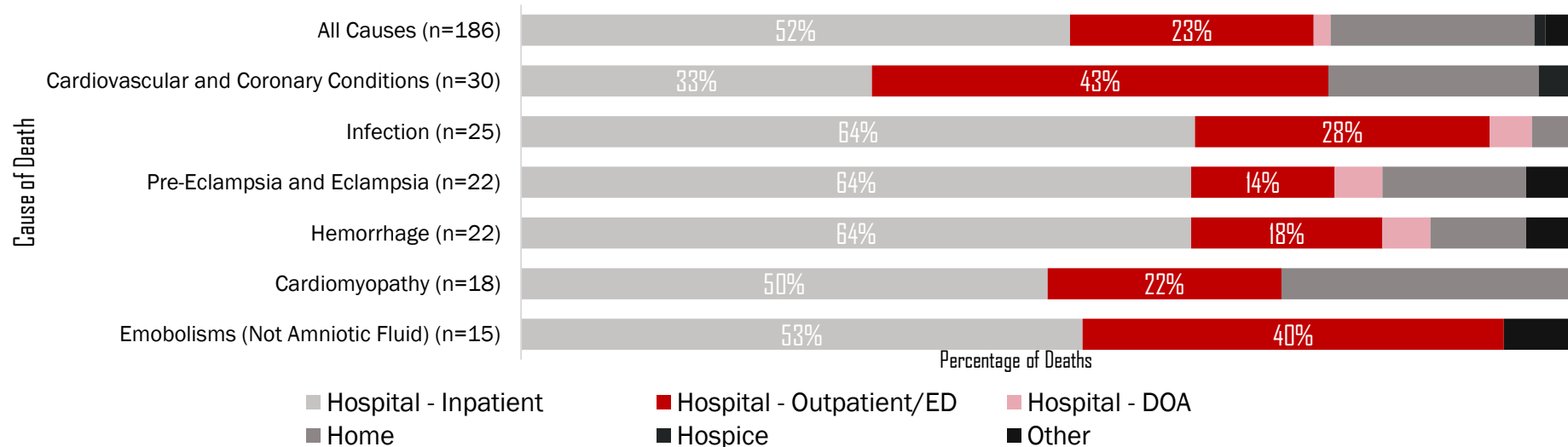
Emergency Obstetric Simulation for  
Emergency Medicine Providers

# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Educate providers and patients on recognition, treatment, and prevention of obstetric complications.

**Initiative:** Obstetric Emergency Simulation Trainings for Emergency Medicine Providers.

## 23% of Pregnancy-related Deaths in Ohio from 2008-2016 Occurred in the Outpatient or Emergency Department Setting.





# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Promote preconception health and prevention of chronic conditions during reproductive aged years.

**Initiative:** Implement the **IMPLICIT Network** (Interventions to Minimize Preterm and Low birth weight Infants using Continuous quality Improvement Techniques Network) throughout pediatric and family medicine practices.

## **Published literature on IMPLICIT outcomes:**

- ~70% of visits mothers were screened for:
  - **Tobacco use.**
  - **Family planning.**
  - **Depression risk.**
  - **Use of multivitamins with folic acid.**
- > 60% of women screened positive for at least one risk factor (Srinivasan et al., 2018).
- More likely to report taking a multivitamin at the subsequent visit (DeMarco et al., 2021).
- More likely to report discussions with their child's doctor about family planning, depression screening, smoking cessation, and taking a folic acid supplement (Frayne et al, 2021).



## Riverside Family Practice







Telehealth Delivery Training for  
Women's Health Providers

# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Explore increased access to telehealth services to optimize care of patients before, during, and after pregnancy.

**Initiative:** Telehealth Delivery Simulation Trainings for Women's Health Providers.

<b>Vendor:</b>	The Ohio State University Clinical Skills Education and Assessment Center (CSEAC), The Center for the Advancement of Team Science, Analytics, and Systems Thinking in Health Services and Implementation Science Research (CATALYST), and Upper Midwest Telehealth Resource Center (UMTRC).
<b>Goal:</b>	To enhance access to quality care, patient safety and maternal health, and reduce maternal mortality/morbidity, by providing training in telehealth use and best practices to women's health care providers.
<b>Time Frame:</b>	Present-September 2024.
<b>Quick Facts:</b>	<ul style="list-style-type: none"><li>• Training curriculum focused on best practices, technology and workflow considerations, virtual visit etiquette, and virtual patient assessment.</li><li>• 11 trainings conducted to date (172 attendees).</li></ul>

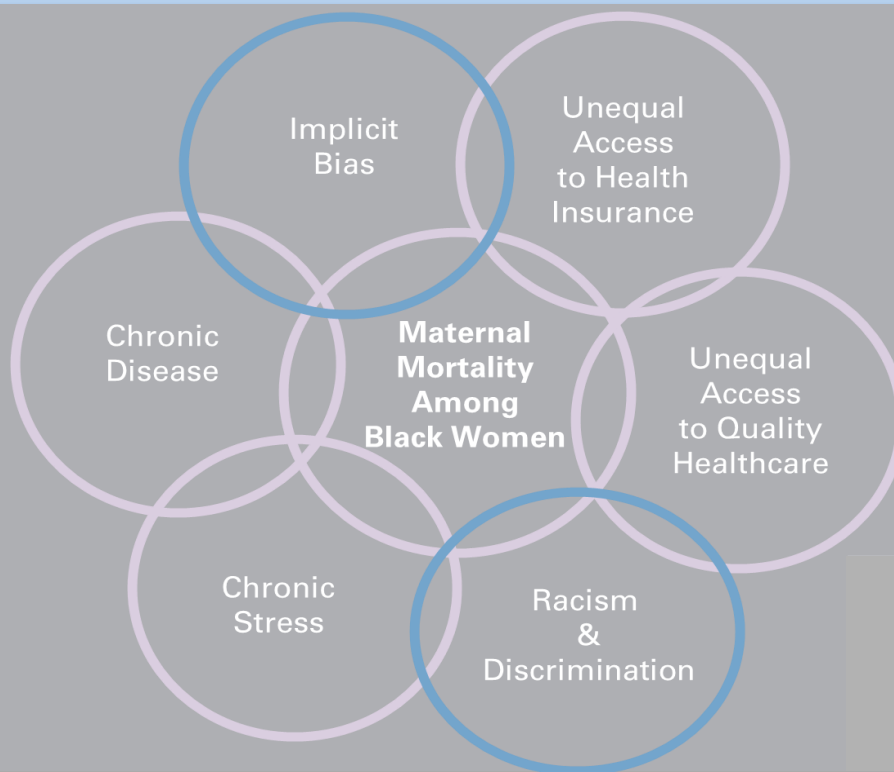


Implicit Bias Training for  
Women's Health Providers

# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Work to recognize potential for disparities at both the personal and systems level.

**Initiative:** Implicit Bias Trainings for Women's Health Providers.





# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Work to recognize disparities at both the personal and systems level.

**Initiative:** Fund solutions identified by communities and address unmet needs through a disparities-focused, equity-driven lens through the Disparities in Maternal Health Community Grant Program.

Year 1 Subrecipients (SFY2021)	Program Goals
The Ohio State University	Characterize medical mistrust and self-reported experiences of racial discrimination in the medical setting and understand the expectations of care among underrepresented minority patients receiving prenatal and postpartum care.
The Cleveland Clinic Foundation	Maternal Health Navigator.
Public Health - Dayton and Montgomery County	At-Home Blood Pressure Monitoring Program.
CelebrateOne	Conduct listening sessions with individuals and their family and friends who have been impacted by maternal morbidity/mortality.

Year 2 Subrecipients (SFY2022)	Program Goals
Public Health - Dayton and Montgomery County	At-Home Blood Pressure Monitoring Program.
Breastfeeding Outreach for our Beautiful Sisters (BOOBS)	Support African American women in the community prenatally and postnatally by providing healthcare access to nutritional counseling and lactation services from a qualified doula and certified lactation counselor.
Community Action Organization of Scioto County, Inc.	Continue its successful patient navigation program previously funded through the Infant Vitality Community Intensive Pilot Project (funded by ODH). An RN patient navigator will continue to provide services in Scioto County to high-risk, Medicaid-eligible pregnant women with medical and socioeconomic risk factors, achieving outcomes for premature births below the average statewide Medicaid rate.

# PAMR and OH-CAMH

## PAMR

- The Pregnancy-Associated Mortality Review (PAMR) is the enhanced surveillance program.
- This group consists of an interdisciplinary committee (~40 members) that reviews maternal mortality cases to determine preventability and provide recommendations to prevent future deaths.
- PAMR has been reviewing cases since 2010.
- The focus of PAMR is surveillance.

## OH-CAMH

- Ohio Council to Advance Maternal Health (OH-CAMH) is the newly formed statewide maternal health task force.
- This group will use data from PAMR to develop and implement a statewide, maternal health strategic plan.
- This is a larger group (~80 organizations), compared with PAMR, focused on broadly addressing maternal health in Ohio.
- The focus of OH-CAMH will be implementation.



# Federally Funded PAMR Initiatives: Data to Action

**PAMR Recommendation:** Convene a Maternal Health Task Force, comprised of stakeholders representing individuals and organizations from across the state in order to identify Ohio-specific gaps and assist in the development of an Ohio-focused strategic plan informed by PAMR data.

**Initiative:** Establish the Ohio Council to Advance Maternal Health (OH-CAMH).



## Major Successes

- Built trust with 84 organizations (178 individuals), including organizations typically reluctant to collaborate.
- Collective recognition that maternal health cannot be improved without multilevel collaboration.
- Draft Ohio Maternal Health Strategic Plan.

# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

## Purpose of OH-CAMH:

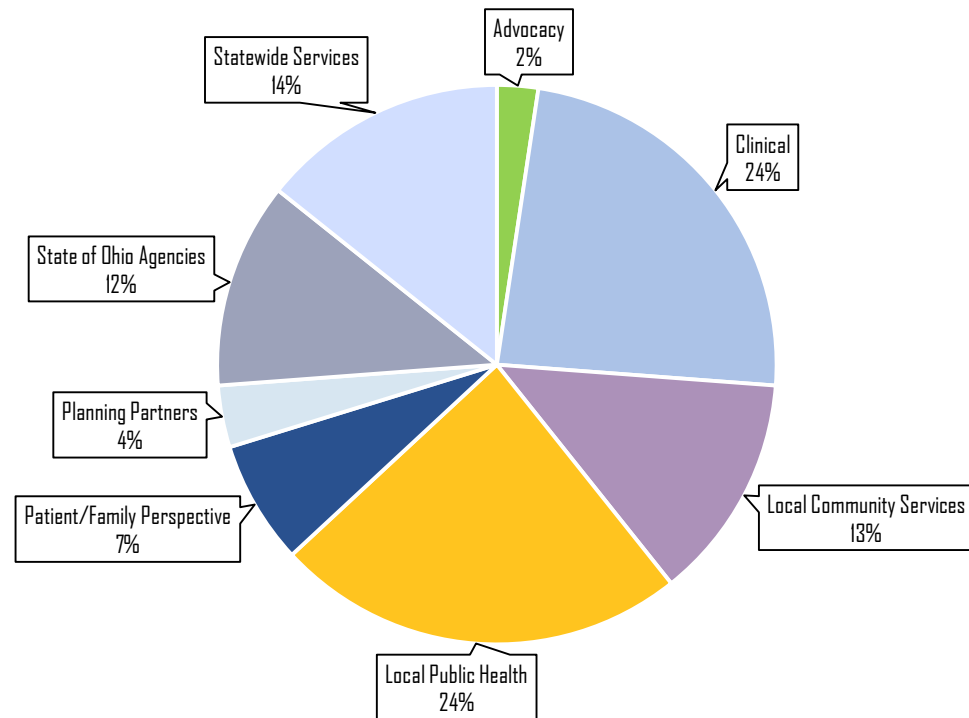
The purpose of OH-CAMH is to:

- Identify and fill gaps in addressing maternal health, both statewide and in local communities.
- Facilitate conversations among various stakeholders across the field, both in clinical and public health settings.
- Build on work already being done in Ohio.
- Collaborate to identify new areas to implement strategies and activities for addressing maternal health needs in Ohio.

## DEVELOP AND IMPLEMENT A STATEWIDE MATERNAL HEALTH STRATEGIC PLAN

(From OH-CAMH Charter co-created with membership during November 2020 Meeting.)

## OH-CAMH Membership Organizations n=84



# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

**June to August 2020**

## **OH-CAMH Needs Assessment**

- OH-CAMH survey.
  - More than 350 current maternal health initiatives in Ohio were reported.
- ~55 one-on-one stakeholder meetings with OH-CAMH members.
  - Possibilities.
  - Challenges.
  - Roles in OH-CAMH.
  - Purpose of OH-CAMH.
  - Needed support.



<b>Advocacy Organizations</b>	<b>Clinical Organizations (cont.)</b>	<b>State of Ohio Agencies</b>
Community Solutions	Ohio State University Clinical Skills Education and Assessment Center (CSEAC)	Governor's Office of Children's Initiatives
Groundwork Ohio	Society for Maternal-Fetal Medicine	Society for OB/GYN Hospitalists
<b>Clinical Organizations</b>	Society for OB/GYN Hospitalists	Department of Housing and Urban Development
Charitable Healthcare Network	<b>Local Community Service Organizations</b>	Ohio Attorney General Office
Ohio Academy of Family Physicians	Birthing Beautiful Cleveland	Ohio Commission on Fatherhood
	Community Refugee & Immigration Services	Ohio Commission on Minority Health
Ohio Association of Community Health Centers	Empowered Mamas of Cincinnati	Ohio Department of Developmental Disabilities
Ohio Association of Family Practice Physicians	Empowered Peace Birth Services	Ohio Department of Education
Ohio Association of Health Plans	Every Child Succeeds	Ohio Department of Health
	Mental Health America for Ohio	<div>• Early Childhood Home Visiting and Maternal Infant Wellness</div> <div>• Office of Health Opportunity</div> <div>• Maternity Licensure</div> <div>• PAMR</div> <div>• State Office of Rural Health</div> <div>• Title V Block Grant</div> <div>• Title X</div> <div>• Violence &amp; Injury Prevention</div> <div>• Vital Statistics</div>
Ohio Chapter of American College of Nurse-Midwives	Moms2B at The Ohio State University College of Medicine	Ohio Department of Job and Family Services
Ohio Chapter of American College of Obstetricians and Gynecologists	ROOTT	Ohio Department of Medicaid
Ohio Chapter of Association of Women's Health, Obstetric and Neonatal Nurses	Rural Action	Ohio Department of Public Safety
Ohio Chapter of National Association of Certified Professional Midwives	Talbert House	Ohio Maternal Newborn Advisory Council
Ohio Coroners Association	Village of Healing	Ohio Mental Health and Addiction Services
Ohio Hospital Association	Williams County Prosecutor	<b>Statewide Services Organizations</b>
	<b>Local Public Health Organizations</b>	Community Shelter Board
	Appalachian Rural Health Institute (Ohio University)	Government Resource Center
	Celebrate One (Columbus)	Health Information Exchange
Ohio Hospital Association Maternal Health Steering Committee	Cincinnati Health Department	Healthy Fathering Collaborative
<div>• Summa Health System</div> <div>• Knox Community Hospital</div> <div>• University of Cincinnati Medical Center</div> <div>• Blanchard Valley Hospital</div> <div>• Licking Memorial Hospital</div> <div>• University Hospitals</div> <div>• OhioHealth</div> <div>• University Hospitals of MacDonald Women's Hospitals</div> <div>• Wayne Healthcare</div> <div>• Grant Medical Center</div> <div>• Bon Secours Mercy Health</div>	Cradle Cincinnati	Kirwan Institute for the Study of Race and Ethnicity
	Dayton and Montgomery County Public Health	March of Dimes (Ohio)
Ohio Perinatal Quality Collaborative (OPQC)	First Year Cleveland	Ohio Collaborative to Prevent Infant Mortality
Ohio Society of Obstetric Anesthesiologists	Five Rivers Health Centers	Government Resource Center
Ohio State Medical Association (OSMA)	Healthy Start	Ohio Department of Mental Health & Addiction Services
	<div>• Cincinnati</div> <div>• Cleveland</div> <div>• Columbus</div>	Ohio Domestic Violence Network (ODVN)
	Ohio Equity Institute	Prosecutor's Association
	<div>• Butler</div> <div>• Cuyahoga</div> <div>• Franklin</div> <div>• Hamilton</div> <div>• Lucas</div> <div>• Mahoning</div> <div>• Stark</div> <div>• Summit</div>	The Women's Fund of Central Ohio
	<b>Patient/Family Perspective</b>	Upper Midwest Telehealth Resource Center
	6 individuals	



# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

## June to August 2020

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  - Roles in OH-CAMH.
  - Purpose of OH-CAMH.
  - Needed support.

## August 2020 to February 2021

- Co-created the OH-CAMH Charter



# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

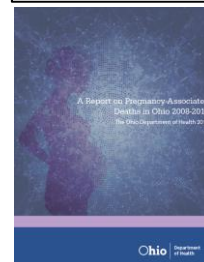
## June to August 2020

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  - Purpose of OH-CAMH.
  - Needed support.

## August 2020 to February 2021

- Co-created the OH-CAMH Charter
- Documented OH-CAMH Needs Assessment alignment with:
  - Title V Maternal and Child Health (MCH) Block Grant priorities.
  - 2020-2022 State Health Improvement Plan (SHIP priorities).
  - 2008-2016 Pregnancy-Associated Mortality Review (PAMR) Report.
  - HRSA Maternal Health Action Plan.



## February to June 2021

# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

## June to August 2020

### OH-CAMH Needs Assessment

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- Co-created the OH-CAMH Charter
- Documented OH-CAMH Needs Assessment alignment with:
  - Title V Maternal and Child Health (MCH) Block Grant priorities
  - 2020-2022 State Health Improvement Plan (SHIP priorities).
  - 2008-2016 Pregnancy-Associated Mortality Review (PAMR) Report.
  - HRSA Maternal Health Action Plan.



## February to June 2021

### OH-CAMH Strategic Plan Workgroup

- 34 volunteers from OH-CAMH.
- Met regularly via Microsoft Teams.
- Discussed OH-CAMH Needs Assessment findings.
- Prioritized strategy areas.
  - 13 strategy areas.
    - 11 complete.
    - Two incomplete.
  - Two levels of influence: systems and community levels.

# Data to Action: Ohio Council to Advance Maternal Health (OH-CAMH)

## DRAFT OH-CAMH Strategic Plan

Strategy 1: Implement provider education and accountability.

Strategy 2: Re-design and prioritize funding for community-based organizations.

Strategy 3: Diversify the racial and ethnic and professional makeup of the perinatal workforce.

Strategy 4: Expand access to post-partum health insurance coverage.

Strategy 5: Institutionalize evidence-based quality improvement interventions to improve maternal safety.

Strategy 6: Improve data collection and quality measures to further examine the maternal health crisis and inform solutions.

Strategy 7: Increase provision of appropriate health services for domestic violence, intimate partner violence, and human trafficking survivors by promoting organizational shifts in culture that support a trauma-informed approach to clinical and public health services.

Strategy 8: Invest in maternal mental and behavioral health services.

Strategy 9: Invest in services for maternal substance use and mental health disorders.

Strategy 10: Increase multidisciplinary communication and collaboration between clinical care providers, community-based organizations, and public health service organizations.

Strategy 11: Improve access to health education for pregnant and parenting individuals to improve health outcomes.

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## DRAFT OH-CAMH Strategic Plan



Eliminating Racial Disparities in Infant Mortality Task Force



Department of Health

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**Thank you!**  
**Questions?**

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**Bureau of Maternal, Child, and Family Health**