



**MOTHER INFANT
HEALTH & EQUITY
IMPROVEMENT PLAN**

**MIHP Coordinators Training
May 2019**

Vision

Zero preventable deaths

Zero health disparities



Key Objectives



Explicitly address inequities

Align public and private sector work

Integrate interventions across the maternal infant dyad

Oversight Groups



**Maternal Infant
Strategy Group**



**Michigan Department of
Health and Human Services**

Together, Saving Lives

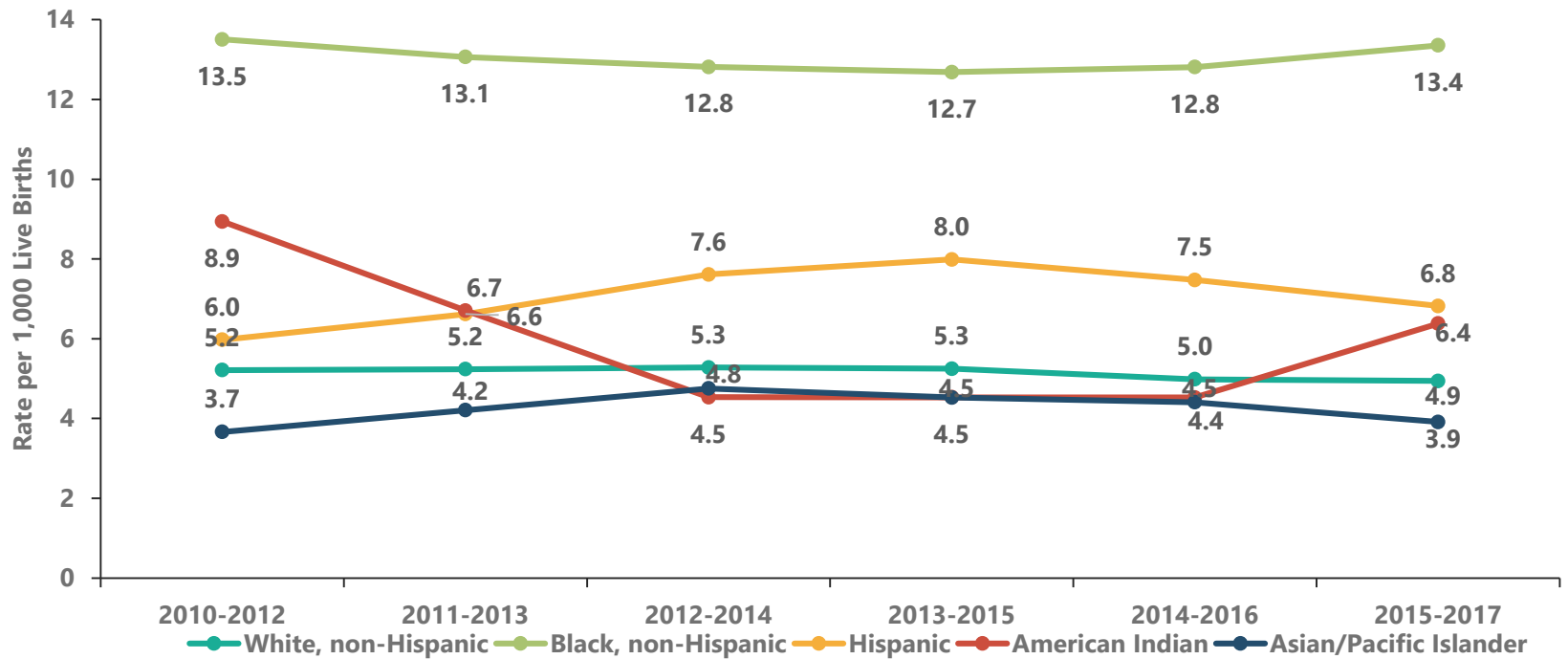


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The data tells the story

Health inequities

Three-Year Average Infant Mortality Rate per 1,000 Live Births by Maternal Race/Ethnicity, Michigan, 2010-2017



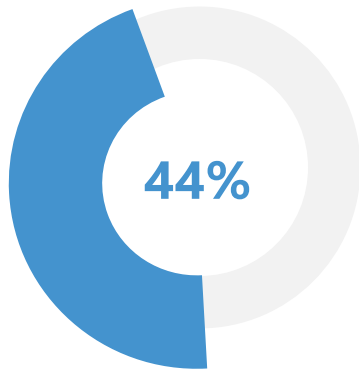
Infant mortality is defined as a death of a baby before his or her first birthday and is expressed as a rate per 1,000 live births.
Data source: Michigan resident live birth files, and infant mortality files, Division for Vital Records and Health Statistics, MDHHS

The data tells the story

Maternal mortality

From 2011-2015, Michigan's pregnancy-related mortality rate was **11.6 maternal deaths per 100,000 live births**.

In 2016, approximately 80 women in Michigan died during pregnancy, at delivery, or within a year after the end of her pregnancy.



A recent analysis by the Michigan Maternal Mortality Surveillance (MMMS) Committee determined that **44%** of pregnancy-related deaths were **preventable**.

[Maternal Deaths in Michigan, 2011-2015](#)

The data tells the story

Infant mortality

In 2017, **more than 760 babies** in Michigan did not live to their first birthday.

Michigan's infant mortality rate overall (6.8 infant deaths per 1,000 live births) was **higher than the nation's rate** (5.9 infant deaths per 1,000 live births).

The state has not yet met the **Healthy People 2020** target of 6.0 infant deaths per 1,000 live births.

Why are moms and babies dying?

Preventable causes of death



**Health
inequities and
unjust
treatment**



**Low birth weight
and preterm
birth**



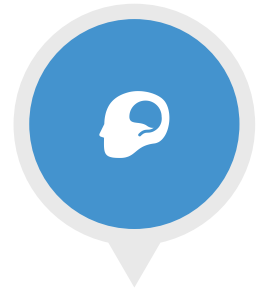
**Unsafe sleeping
practices**



**Chronic health
conditions and
obstetric
complications**



**Unintended
pregnancies**



**Mental and
behavioral health
conditions**



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Strategic Focus Areas



Reducing disparities

**Addressing the primary causes
of preventable maternal deaths**

**Addressing the primary causes
of preventable infant deaths**

Connecting with Communities



Town Hall Meetings



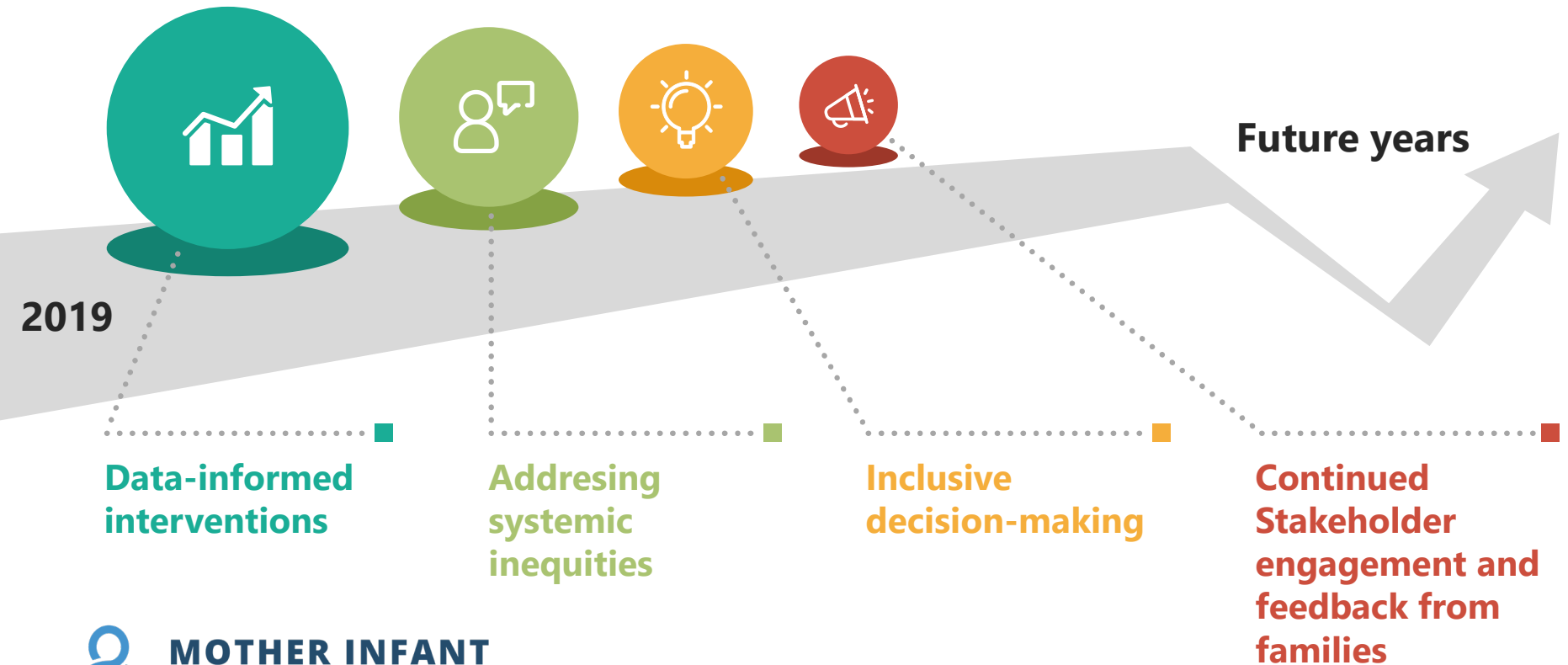
Ambassador Program



Regional Perinatal Quality Collaboratives

Call to Action for Health Equity

Four action steps starting in Year 1 and moving down the road towards Year 3



Implementation

Regional Perinatal Quality Collaboratives

RPQCs implement a quality improvement projects utilizing the Population Health Model, convene diverse regional stakeholders; and authentically engage families.

MDHHS Internal Alignment

Population Health and Medicaid programs align their work with other program areas, and the RPQCs to increase the awareness, reach, and availability of public health resources..



MDHHS Internal Alignment

Bureau of Family Health Services
MDHHS Program Areas
Medicaid
Title V



Regional Perinatal Quality Collaboratives

Seven RPQCs representing eight of Michigan's prosperity regions



External Implementation

Local health depts.
FQHCs
Home visiting programs
Maternal infant health care providers
Faith-based organizations

External Alignment

Clinical and community partners that provide services to moms and babies align their work with the Improvement Plan.



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Evidence-Based Interventions



Improve maternal health

Address pre-existing conditions and increase screening and treatment for substance use disorder.



Reduce the rate of low birth weight and preterm birth with cervical screening and treatment and smoking cessation



Implement MI AIM Safety Bundles

Hemorrhage and Hypertension safety bundles implemented in all birthing hospitals.



Safe sleep practices



Improve the rate of intended pregnancies

Improve birth spacing

Evidence-Based Supporting Interventions



Prenatal care



Well child checks

Including immunizations.



Breastfeeding



Mental health services



Home visiting

Evidence-Based Supporting Interventions



Prenatal care



Well child checks

Including immunizations.



Breastfeeding



Mental health services



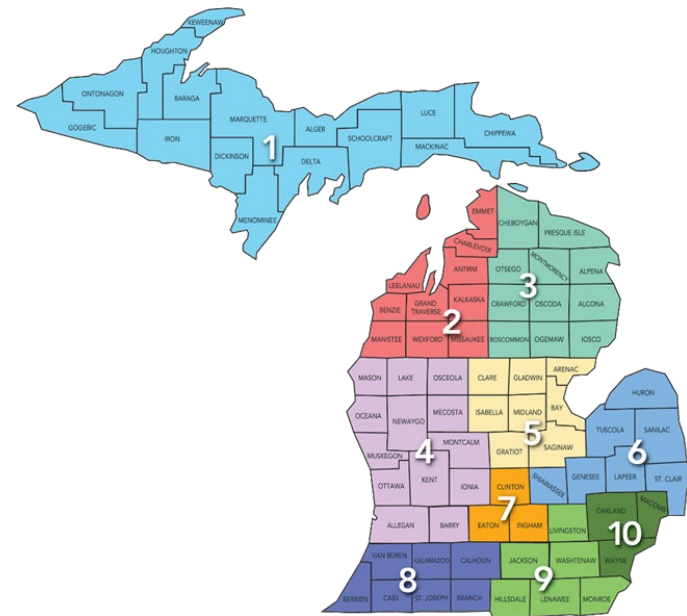
Home visiting

Historical Background of RPQCs

- In 1970s and 1980s, Michigan was a leader in regionalization of perinatal systems
- By 2005, perinatal regionalization no longer existed in Michigan
- Between 2005 and 2009 efforts were made to reinstate perinatal regionalization
- In 2011, Perinatal Care System efforts were initiated in Prosperity Regions 2&3
 - Driven by the closure of birthing hospitals in these two regions

Historical Background of RPQCs

- 2015 MDHHS funded Regions 2&3 as a Regional Perinatal Quality Collaborative (RPQC)
- 2016 Regions 4 and 10 initiate RPQCs
- 2017 Regions 1 and 8 initiate RPQCs
- 2018 Region 5 initiates RPQC
- 2019 Region 6 initiates RPQC
 - Region 7 and Region 9 in planning stages to initiate RPQCs



RPQC Implementation

Quality Improvement Project utilizing the Population Health Management Model



- Each RPQC provides support and resources to clinical and community partners to implement selected evidence-based interventions
- The RPQC is meant to be a collaboration with cross-sector, diverse stakeholders
- RPQCs implement evidence-based interventions utilizing the Population Health Model and quality improvement methodology

Population Health Model

Zero preventable deaths. Zero disparities.

Measurement

Measure outcomes to determine the impact.

Implementation

Clinical and community alignment of interventions using a quality improvement framework.

Interventions

Selection of evidence-based interventions tailored to each tiered population.



Data-Informed

Use qualitative and quantitative data to identify needs in each community.

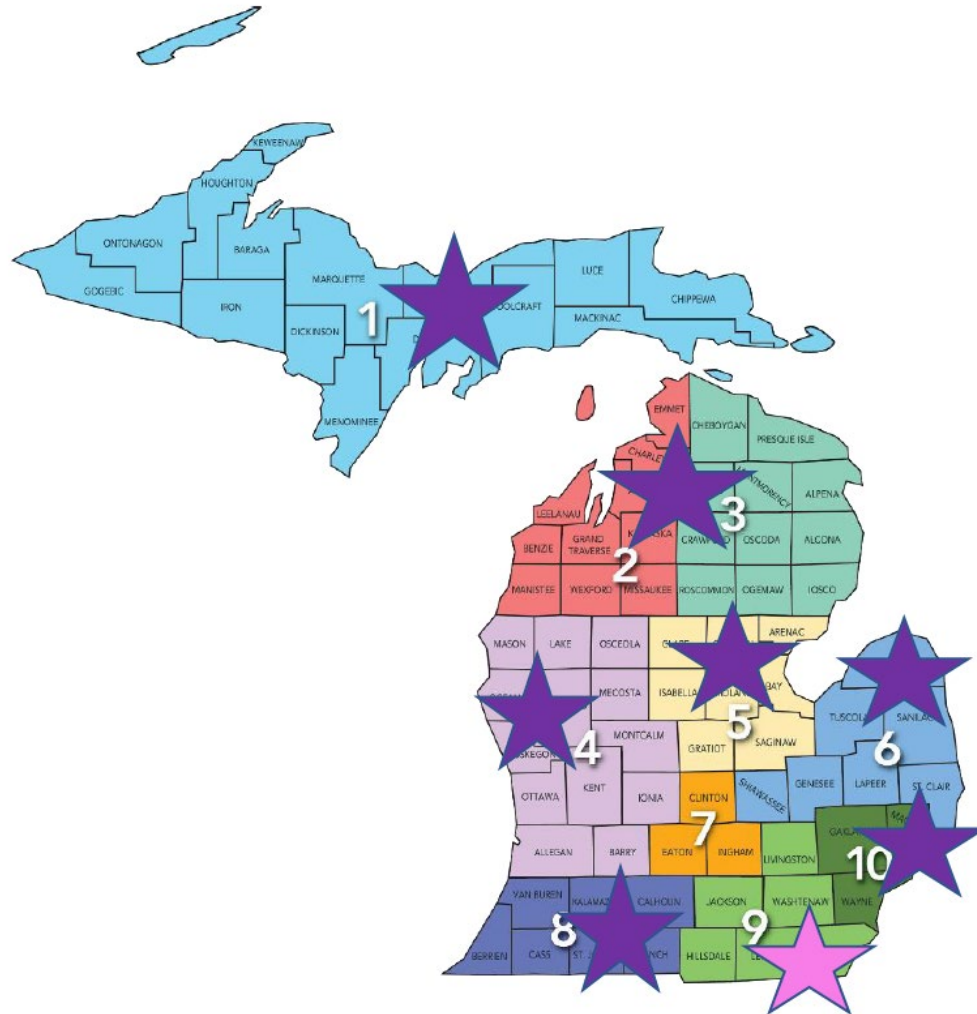
Population Identification

Identify populations made vulnerable by their circumstances.

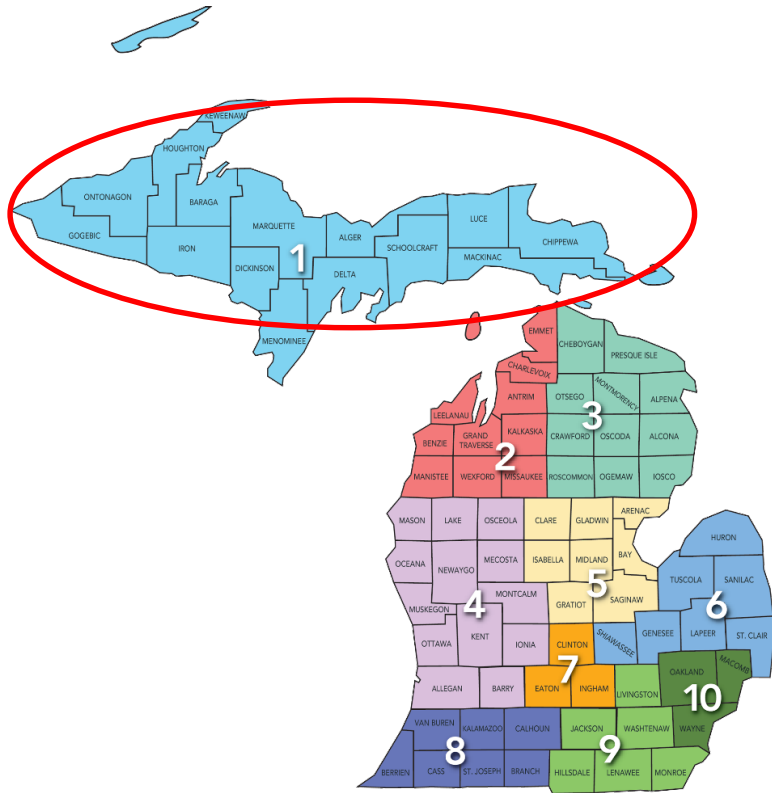
Stratification

Tier the population into high, moderate, and low groups based on the likelihood of adverse outcomes.

RPQC Locations

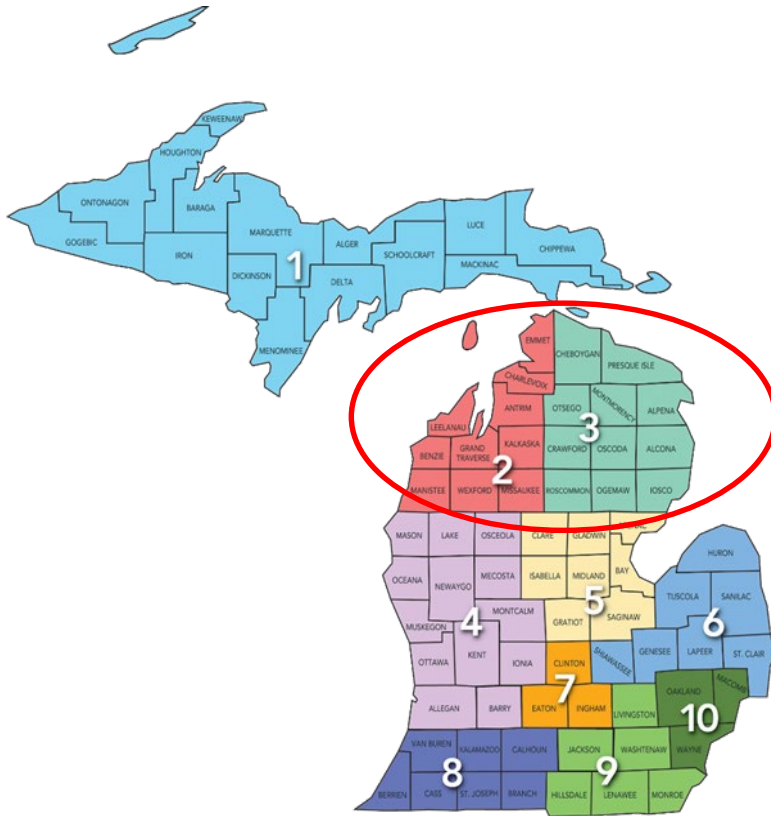


Regional Highlights: Region 1



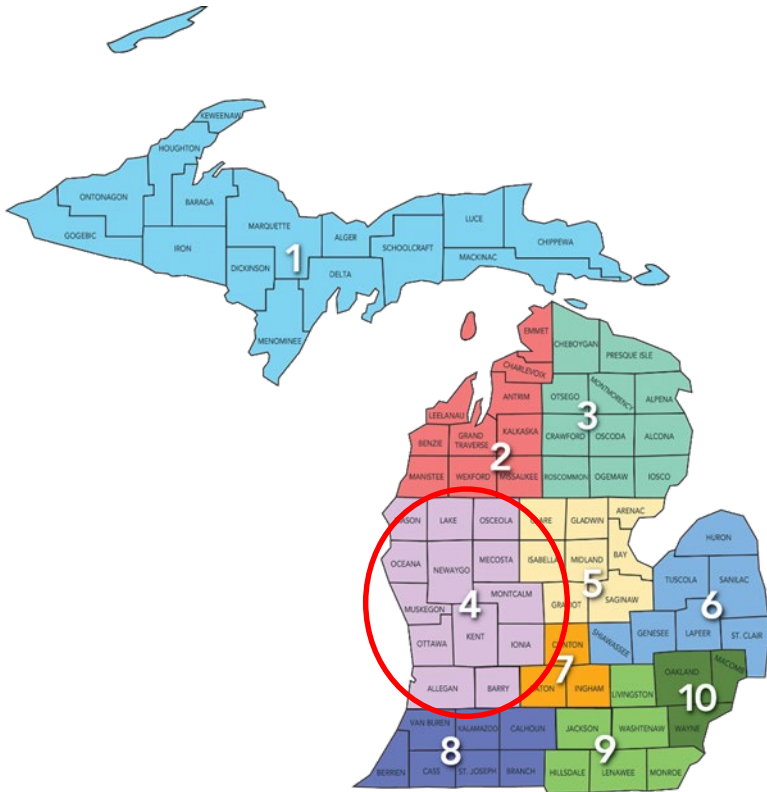
- Smoking during pregnancy
- Access to LARCs
- Perinatal Substance Use Screening and Intervention
- Integrated Care team in Marquette
- Stigma Training and Awareness

Regional Highlights: Regions 2&3



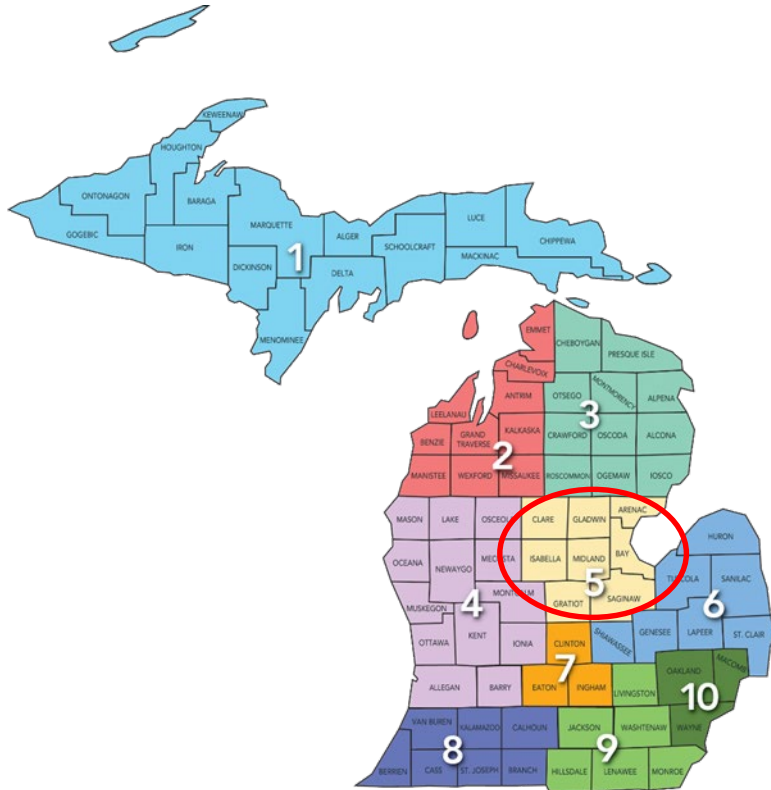
- Perinatal Substance Use Screening and Interventions
- Smoking during pregnancy
- Home Visiting Linkage

Regional Highlights: Region 4



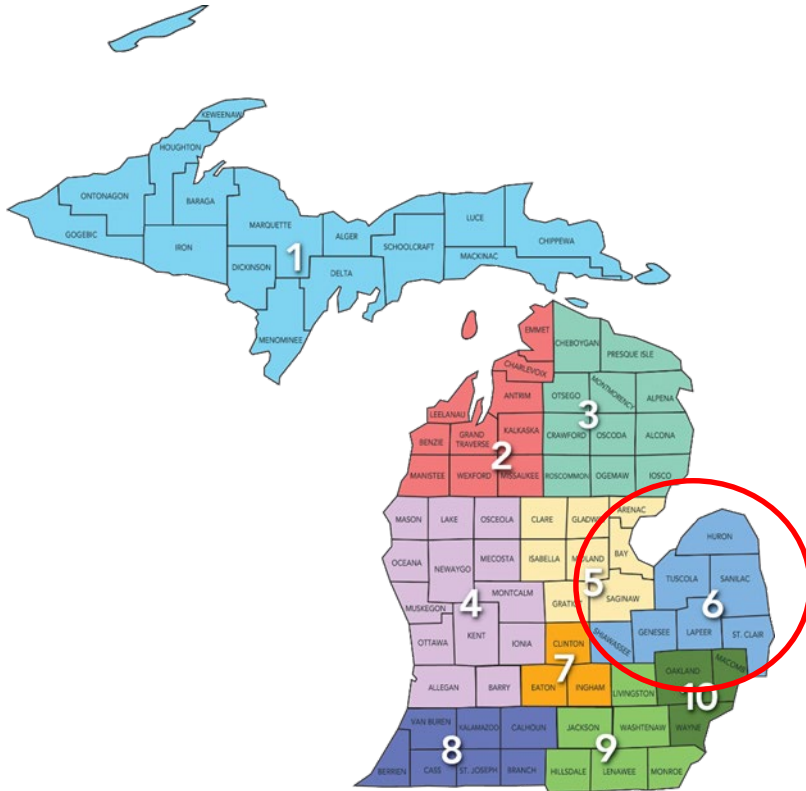
- Perinatal Substance Use Screening and Intervention
- Evidence-based home visiting

Regional Highlights: Region 5



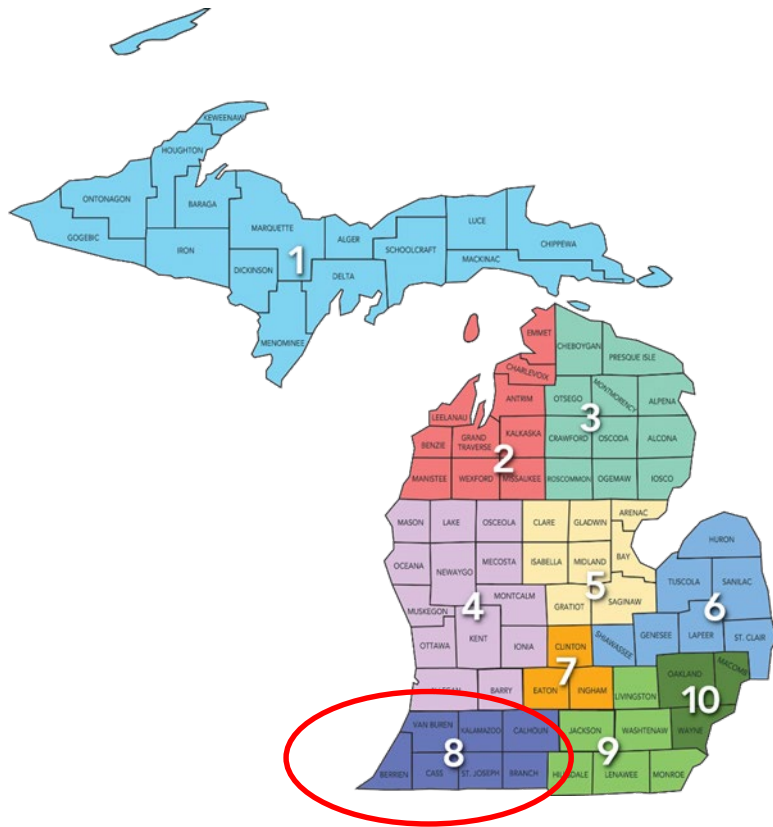
- Collaboration
- Smoking during pregnancy
- Centering Pregnancy & Centering Parenting

Regional Highlights: Region 6



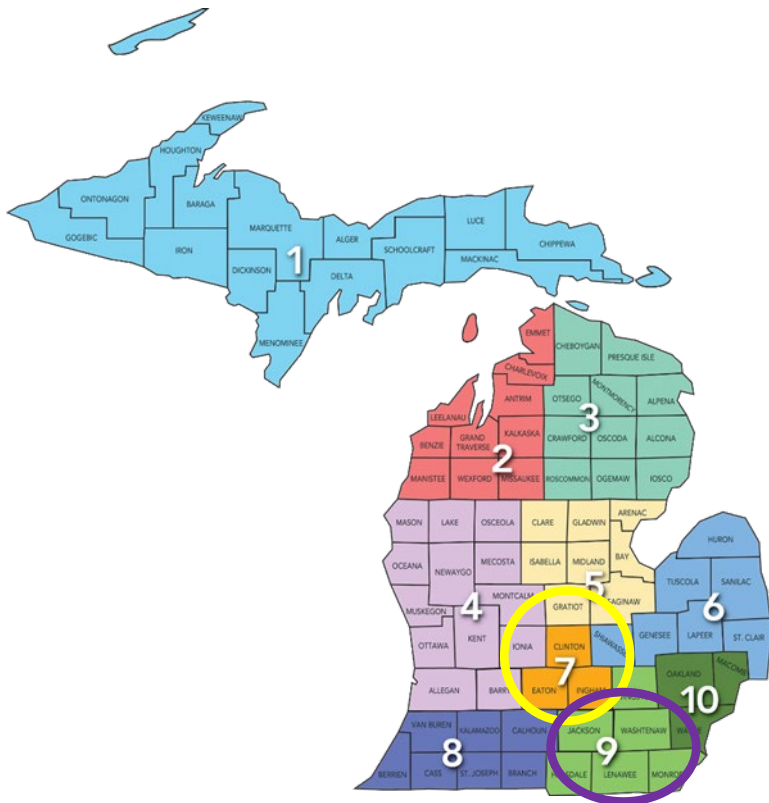
- Establishing RPQC
- Perinatal Substance use Screening and Intervention

Regional Highlights: Region 8



- Early Entry into Prenatal Care
- Evidence-based home visiting

Regional Highlights: Region 7 and Region 9



- Region 7
 - MDHHS met with potential partners in May
- Region 9
 - Working to convene large Collaborative meeting in June

Role of MIHPs in the RPQCs

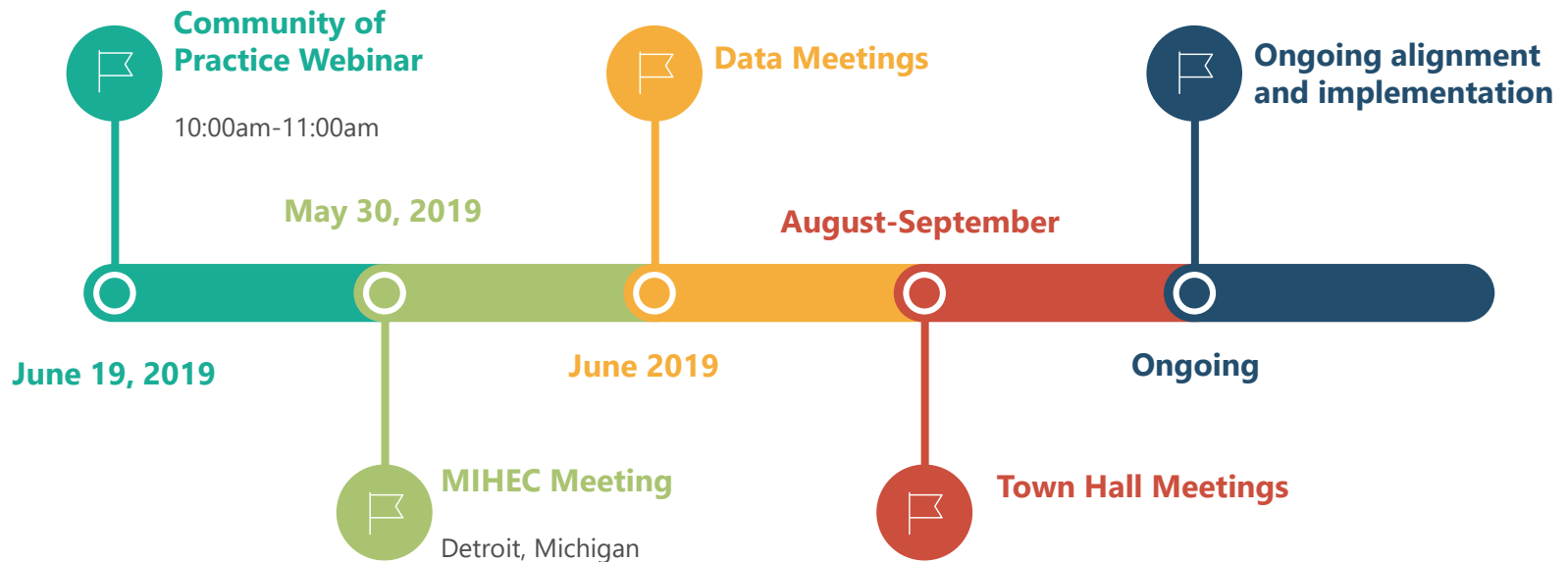
- Involvement with an RPQC and attendance at RPQC meetings
 - RPQCs will benefit from knowledge and experience MIHPs would bring to the table
 - Instrumental in having a pulse on what is occurring in the community and sharing information about strengths/challenges
 - Insight and feedback from diverse, cross-sector partners is of utmost importance to RPQCs
 - MIHPs can assist with the family voice being heard by RPQCs; could do outreach to families inviting them to participate in RPQCs
 - Participate in RPQC's quality improvement efforts – at times direct participation
- Ensuring postpartum mothers see their provider when concerns are noticed (i.e., postpartum depression, hypertensive symptoms etc)

Alignment with MIHEIP

- Sign up to receive the MIHEIP newsletter
 - www.Michigan.gov/MIHEIP
- Attend and participate in a town hall meeting (will occur in August and September in every Region)
- Review own agency data
 - Monitoring outcomes of the families your agency serves
 - Doing quality improvement work within your agency to improve programming and outreach efforts
- Review available data for the Region to ensure interventions and efforts are data driven and tailored to the population your agency serves

Improvement Plan Timeline

Important dates in 2019



Upcoming MDHHS Meetings

- Data meetings
 - Open to RPQC members
 - Held during the month of June
- Town hall meetings
 - Open to RPQCs and broader community
 - Held in August and September in every Prosperity Region

Call to Action

What you can do

01

Sign up for the newsletter

02

April 17, 2019

Participate in the Community of Practice Webinar

03

May 30, 2019

Attend the MIHEC

Detroit, Michigan

04

Connect with your RPQC



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Helpful Websites

- www.Michigan.gov/MIHEIP
 - All things MIHEIP
 - Register for COP webinars
- www.Michigan.gov/MCHEpi
 - Maternal Child Health Epidemiology
- [Michigan Infant Mortality Statistics](#)
- www.ihp.msu.edu
 - Sign up for MIHEC meetings

Contact Information

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