

# A Community Approach to Women's Health



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# Faculty Disclosure

**Jodi B. Stack** has no financial relationships to disclose relating to the subject matter of this presentation.



# Learning Objectives



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1. Identify strategies for creating an infrastructure of community support for Women's Health
2. Implement enhanced psychosocial and pregnancy intention screenings for women in both Primary Care and Women's Health Clinics
3. Create a network of support for women to promote individual and family wellness



# Brattleboro Memorial Hospital



**Brattleboro Memorial Hospital**  
EXCEPTIONAL CARE FOR OUR COMMUNITY



# Brattleboro Memorial Hospital



- Emergency Services
- Surgical Services
- Oncology Care
- Inpatient
- Birthing Center
- Community Health Team
- 61 bed community hospital located in Brattleboro, VT
- Serves a rural population of approximately 60,000 people in twenty-two towns in Vermont, New Hampshire, and Massachusetts
- Rapid expansion of BMH Medical Group



# BMH Medical Group

- 12 Medical Group Practices
  - 7 primary care
  - 5 specialty
  - Share one EMR-Cerner
  - Care for the greater Windham County area in VT
- 55 Clinicians
- 88,000 visits in CY2017
- Total panel of 13,000 patients
- 10 RN Care Coordinators
- Support by Community Health Team

# Vermont



**Health  
Care  
Reform**

OneCareVermont

VERMONT  
**Blueprint for Health**





# VT Blueprint for Health



# VT Blueprint for Health

State-led initiative transforming the way primary care and comprehensive health services are delivered and paid for.

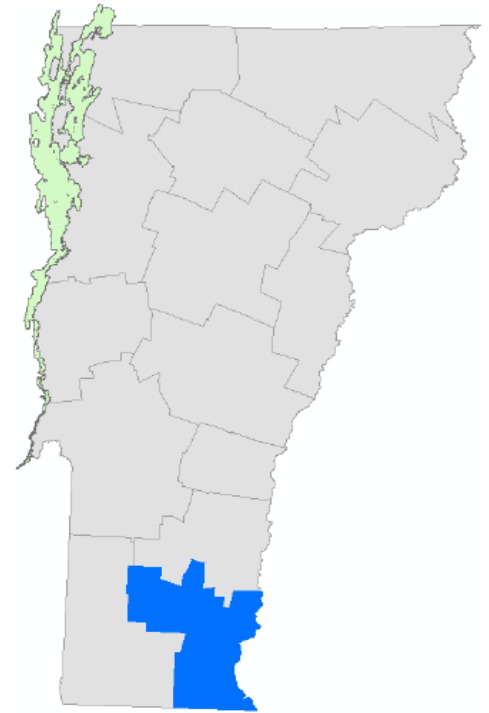
Key components:

- **Administrative Entity:**
  - Coordinates efforts throughout entire Health Service Area (HSA), Grant Funding for Project Management, Quality Improvement, and Self Management Programs
- **Patient Centered Medical Homes (PCMH):**
  - Foundation of the Blueprint, supported by Per Member Per Month (PMPM) payments from insurers
- **Community Health Teams (CHT):**
  - Interdisciplinary teams that support PCMH's. Funding is based on the number of patients served by the PCMH's in the HSA.



# Brattleboro Health Service Area

- **Administrative Entity:** Brattleboro Memorial Hospital
- **Population:**
  - Windham County population of 43,386
  - Blueprint attributed lives: 23,653
  - Nine PCMH's (7 BMH)
- **CHT:**
  - Centrally located,
  - Interdisciplinary team
  - Care Coordinators, Social Workers, Registered Dietitians, Diabetes Educators, Self Management Coordinator



# Blueprint Initiatives

- Patient Centered Medical Home
- Community Health Teams
- Accountable Communities for Health
- Hub and Spoke
- Support and Services at Home
- Self-Management and Healthy Living Workshops
- **Women's Health Initiative**



# Women's Health Initiative



# Women's Health Initiative

Healthier Women, Children, and Families



# Background

- In Vermont, 50% of all pregnancies are unintended
- Unintended pregnancies = increased risk, including:
  - Poor health outcomes for mothers and babies
  - Long-term negative consequences for health and well-being of children, including adverse childhood experiences (ACEs)
- Counseling and health interventions for women who intend to become pregnant can help lower risks, such as through smoking cessation counseling and treatment for alcohol and substance misuse
- Healthy Vermonters 2020 goal for pregnancy intention is 65%



# Program Overview

The Women's Health Initiative (WHI) helps ensure that women's health providers, primary care practices, and community partners have the resources they need to help women be well, avoid unintended pregnancies, and build thriving families





# Program Overview

- In Vermont, many women receive majority of their health care at OB-GYN and women's health clinics
- Women also access family planning and contraception through Patient Centered Medical Homes
- In both of these settings, WHI allows for:
  - Increase comprehensive family planning counseling
  - Provide timely access to long-acting reversible contraception (LARC)
  - Enhance psychosocial screening



# Program Overview

- Practice Support
  - Project Management/QI Facilitation
  - Learning Collaboratives
- Three forms of payment (two additional payments for PCMHs):

## Women's Health and Patient Centered Medical Homes

- WHI Capacity Payment – one time initial funding to help practices cover the costs of initially implementing the program including stocking LARC
- WHI Practice Per Person Per Month - an ongoing payment to support enhanced care and screening

## Women's Health Practice Only

- CHT Staff– WHI supports 1 FTE Social Worker per every 1200 attributed beneficiary for brief intervention and referral.



# WHI Strategies

## **Psychosocial Screening and Brief Intervention in WHI Women's Health and PCMH Clinics**

- Depression
- Current intimate partner violence and adverse childhood experience
- Substance use
- Access to primary care/patient centered medical home (PCMH)
- Food insecurity
- Housing stability



# WHI Strategies

## Family Planning

- Efficacy-based, comprehensive family planning counseling in WHI Women's Health and PCMH practices and Community Organizations
- Onsite availability of the full spectrum of LARC
- Same-day insertion of LARC for women who choose LARC as their birth control method

## Enhance System of Care and Support

- WHI Women's Health and PCMH Practices work to see clients of community based organizations within 1 week of referral
- PCMHs to accept patients who are identified without a primary care
- Community based organizations provide timely access to services such as mental health and substance use counseling, domestic and sexual violence support, housing and food



# Practices and Communities

The initiative is dependent on participation of both women's health practices and community organizations

- Practice

- medical practices work to implement psychosocial screening, offer same day access to LARC, strengthen referral networks, and see clients within one week who are referred from community organizations for family planning.

- Community

- Local organizations who serve women with a particular focus on organizations who work with underserved populations (for example, medical practices, parent child centers, mental health providers, home health providers, etc.) work to building skills and referral pathways for family planning, psychosocial wellbeing, and primary care.



# Enhanced Screenings for Women

- Comprehensive family planning counseling and services:
  - “One key question” screening
  - Timely access to LARC and other forms of contraception
  - Pre-conception counseling and services for women intending to become pregnant within a year such as tobacco cessation, mental health counseling, and treatment for substance abuse/use
- Enhanced health and psychosocial screening assesses:
  - Mental health, substance abuse, and current or past trauma
  - Partner violence
  - Access to food and housing
- Dedicated CHT social workers for women who screen positive for one or more risk factors and further connections to community services and treatment



# Payment

- Payments to women's health providers
- Payment tied to implementing screening and referrals
- Medicaid payments only to start, but other insurers/payers invited to join
- Use a 24-month lookback period for the claims-based attribution
- De-duplicated by WHI practices with patients attributed to the practice that has provided the majority of services during the 24 month look back, with attribution going toward the most recent provider if there is the same number of visits to two or more providers



# Statewide Implementation

- Nineteen Women’s Health Clinics in VT signed on immediately
- Statewide Learning Collaborative
  - Goals: Establish the necessary workflows, processes, and supports for participants to implement models for screening, brief intervention, and treatment; referrals, and comprehensive family planning
  - Providing expert faculty, skilled facilitators, and a comprehensive curriculum
  - Creating a statewide “Learning Community” that includes peer-to-peer learning
  - Administrative training and facilitation support addressing billing and coding, scheduling, clinical efficiency or workflow, and establishing clear referral pathways
  - In session learning sessions, webinars





# Local Implementation

- Brattleboro HSA:
  - Brattleboro OBGYN (BMH Medical Group) engagement delayed due to new EHR
  - Team formed and engagement in Learning Collaborative prior to go-live
  - Social Worker hired
  - Met every two weeks (now monthly), utilized PDSA model
    - Brattleboro OBGYN (BOG)
    - Vermont Department of Health
    - Community Health Team



# Enhanced Psychosocial Screening

- Population: All Pregnant Women (later added postpartum and well visits)
- Created BOG-specific screening tool
- Workflow
  - RN Care Coordinator screens all women
  - Utilizes EHR and instant messaging to refer to SW
  - Warm handoffs
  - Data tracking by Social Worker



# Psychosocial Screening Tool



Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Once a year, all our patients are asked to complete this form because these factors can affect your health as well as medications you may take. Please help us provide you with the best medical care by answering the questions below.

## One Key Question®

Would you like to become pregnant in the next year?	YES	I'm okay either way	NO	I don't know
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## Substance Use Assessment

1. Do you use any tobacco products?	YES		NO			
<input type="checkbox"/> Office Use Only:	No	Yes (CHT and Tobacco Cessation Resources)				
<b>Alcohol: One drink =</b>  12 oz. beer  5 oz. wine  1.5 oz. liquor (one shot)						
1. How many times in the past year have you had 4 (women)/ 5 (men) or more drinks in one day?	Never	Monthly or less	2-4x month	2-3x week	4+ times per week	
2. How often in the past year have you used marijuana/cannabis?	<input type="checkbox"/> I have a medical marijuana card <input type="checkbox"/> Never	1 day a month or less	2-3 days per month	1 day per week	Several days per week (2-4 days per wk)	Daily or almost daily (5 to 7 days per wk)
3. In the past year, have you used prescription drugs for non-medical reasons?	YES		NO			
4. In the past year, have you used other drugs? (such as heroin, inhalants, cocaine, etc)	YES		NO			
<input type="checkbox"/> Office Use Only:	No and Never	Any Yes or Frequency (CHT & US-AUDIT and DAST - 10)				



# Psychosocial Screening tool



1. Over the last few weeks, has worry, anxiety, depression, or sadness made it difficult for you to do your work, get along with people, or take care of things at home?	YES	NO
Office Use Only:	No	Any Yes (CHT & PHQ - 9)

## Violence

1. Do you ever feel unsafe in your home?	YES	NO
2. Are you scared that your partner or someone else might try to hurt you or your child?	YES	NO
Office Use Only:	No	Any Yes (CHT)

## Food Security

Please let us know if either of these statements is true for you or your family.		
1. Within the last 12 months we worried whether our food would run out before we got money to buy more.	TRUE	FALSE
2. Within the last 12 months the food we bought just did not last and we did not have the money to get more.	TRUE	FALSE
Office Use Only:	No	Any True (CHT & Review Resources)

## Housing Stability

Please let us know if either of these statements is true for you or your family.		
1. In the past 12 months, have you been homeless, missed rent or mortgage payments, or worried about where you would live?	YES	NO
2. During the next 12 month, do you anticipate any problems related to where you will live?	YES	NO
Office Use Only:	No	Any Yes (CHT & Review Resources)
CHT Screen for ACE and trauma upon intake when psychosocial risk		

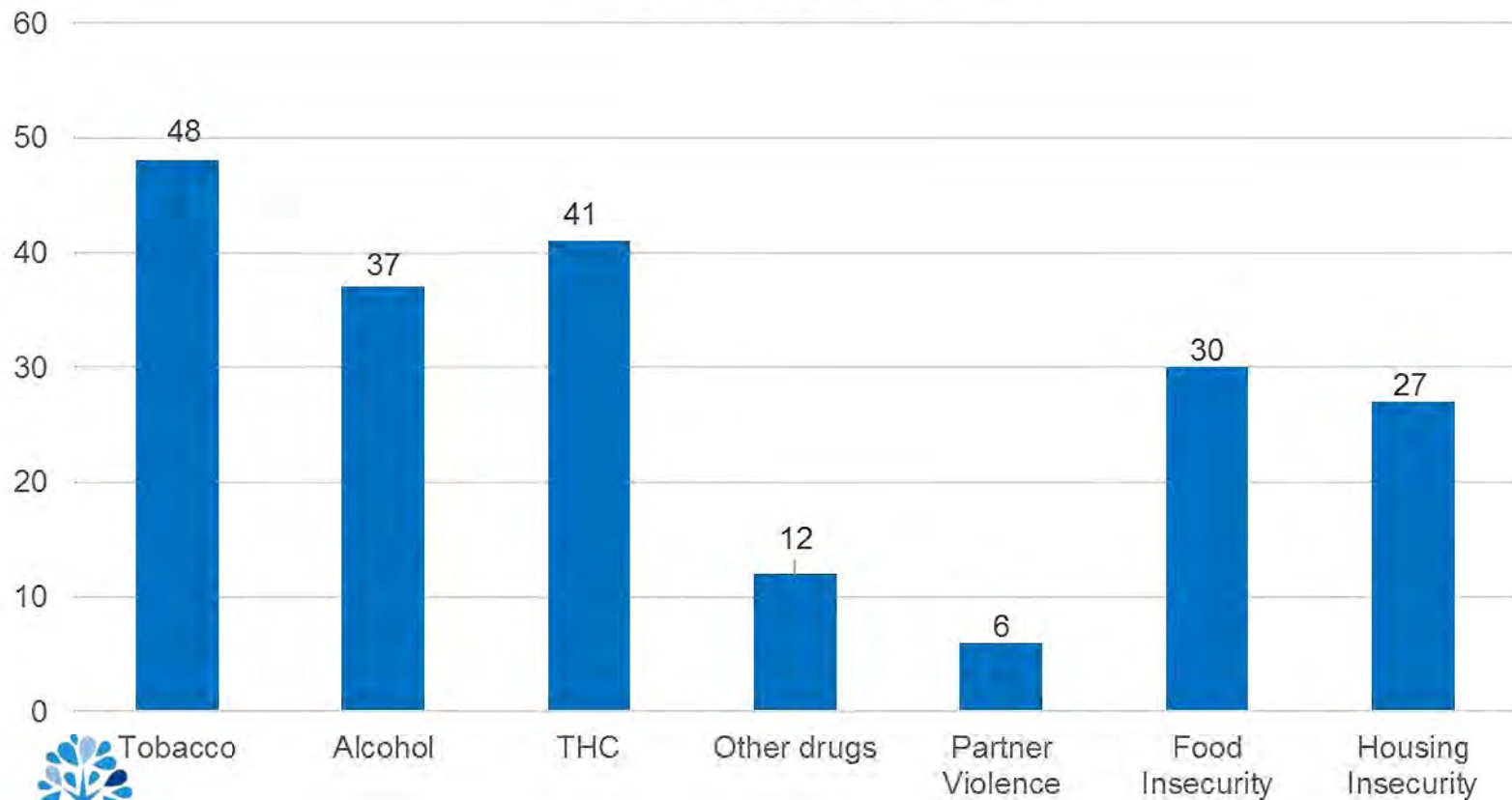
Any urgent issues you would like to discuss today?	YES	NO
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# Pre/Post Partum screens

- 9/2017-8/2018
- 430 screens
- 128 referrals to Social Worker

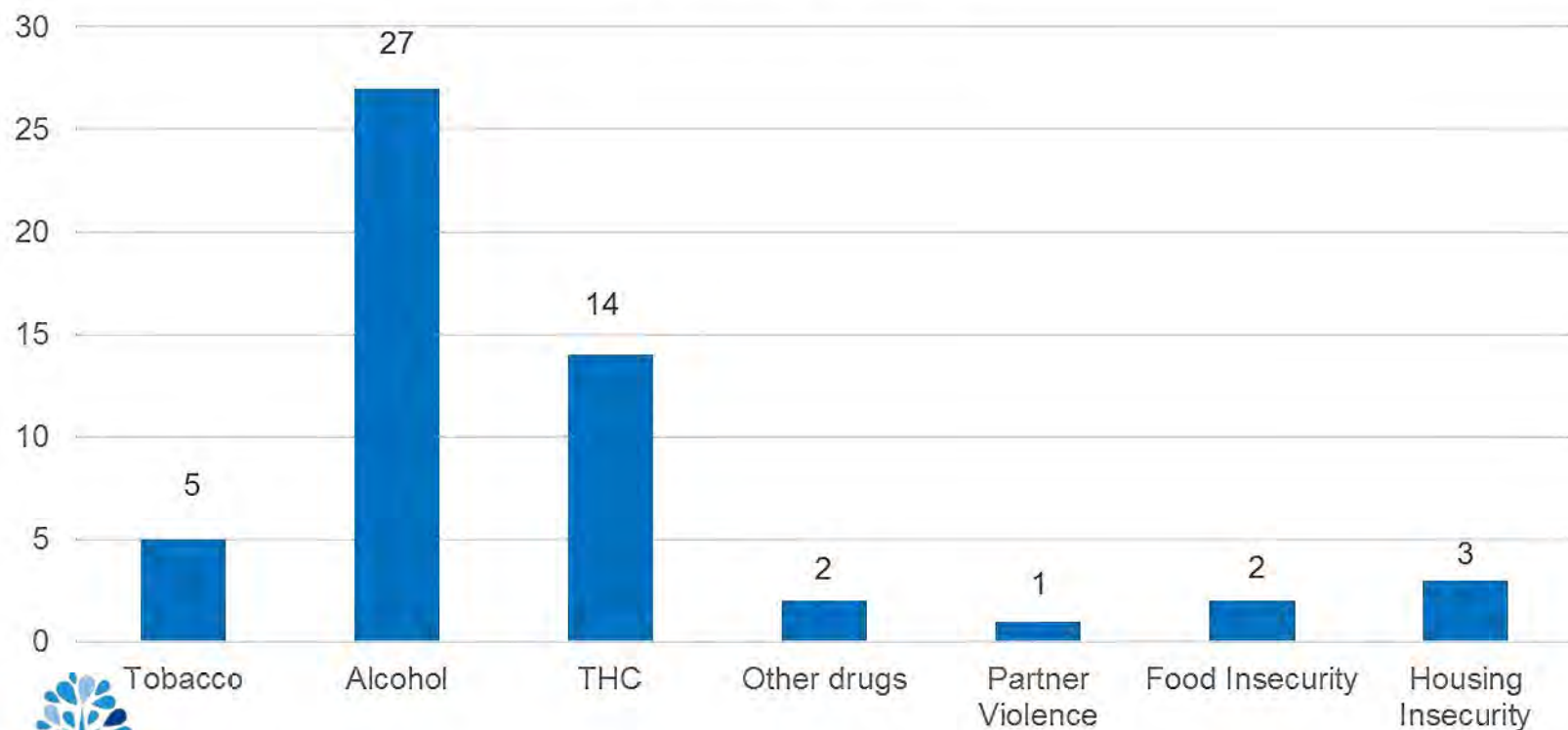
Positive Screens



# Annual Well visit screens

- 11/2017-8/2018
- 98 Screens
- 13 Referrals to Social Worker

Positive Screens



# Pregnancy Intention Screening

- Engagement of community partners
  - Housing
  - Medication Assisted Treatment (Spoke)
  - Children’s Integrated Services
  - BMH Primary Care and Pediatrics
- “One Key Question”
- Referral to BOG for family planning or contraception, including LARC





# Pregnancy intention screening

“one key question”

**FAMILY PLANNING REFERRAL FORM**

**DO YOU PLAN TO HAVE ANY (MORE) CHILDREN AT ANY TIME IN YOUR FUTURE?  
WOULD YOU LIKE TO BECOME PREGNANT IN THE NEXT YEAR?**

If YES or "I'm ok either way" = Consider talking to your provider about health recommendations before you are pregnant.  
If NO or "I don't know" = Consider talking to your provider about family planning and birth control options (see below).

## HOW WELL DOES BIRTH CONTROL WORK?

Effectiveness	Method	Duration
★★★★★ Really, really well	The Implant	3-5 years
	Hormonal IUD	3-9 years
	Non-hormonal IUD	12 years
	Sterilization, for men and women	Forever
	Works, has the best, for up to...	
★★★★☆ Pretty well	The Pill	Every Single Day
	The Patch	Every week
	The Ring	Every Month
	The Shot	Every 3 months
	For it to work best, use it...	
★★★☆☆ Not as well	Withdrawal	
	Fertility Awareness	
	Internal Condom	
	Condom	
	For each of these methods to work, you as your partner have to use it every single time you have sex.	

**What is your chance of getting pregnant?**

Less than 1 in 100 women

1-3 in 100 women, depending on method

12-14 in 100 women, depending on method

PVL without birth control, over 30 in 100 women women get pregnant in a year

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# Same Day Insertion Referrals

- Partners:
  - Groundworks
  - Children's Integrated Services
  - Primary Care (informal)
- Nov 2017-June =14
- Barriers:
  - Time
  - Lack of standard tracking form
  - Process *already* efficient in Brattleboro HSA



# Birthing Center



# BMH Birthing Center

- ~325 Births per year
- Recent remodel
- Highly trained Physicians, Certified Nurse Midwives, and Registered Nurses
- Doula Program
- Birthing Tubs
- Pharmaceutical and Alternative options for pain
- Classes for entire family
- New moms group



# Recent Changes

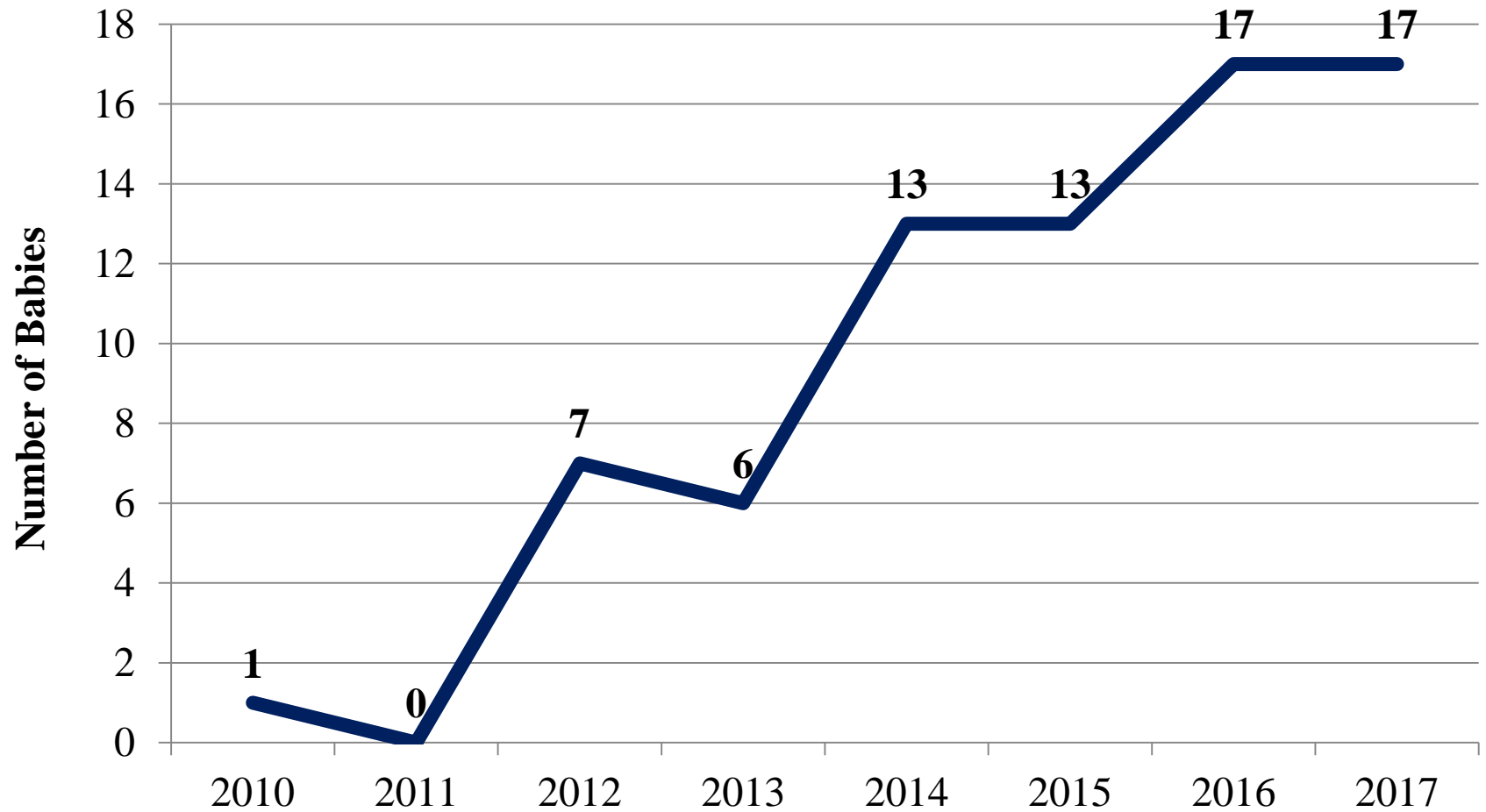
- Increases in families with complex social issues
- Increase in babies born with Neonatal Abstinence Syndrome
- Department of Children and Families (DCF) involvement

## A Little Baby with Big Needs

A guide to help parents care for babies with Neonatal Abstinence Syndrome or those who were exposed to drugs before they were born.



# Babies with Neonatal Abstinence Syndrome



# Response

- Utilize community Infrastructure
  - Maternal Child Health Coalition
  - Perinatal Wellness Initiative
  - Substance Use, Recovery, & Perinatal Health (SURPH) Coalition
- Early outreach
  - Connection with services via WHI/SURPH
  - Initial meeting/tour of Birthing Center prior to birth
- Cuddler Program
  - Trained volunteers cuddle and sooth medically stable babies
  - Program allows Nursing staff to focus on more complex tasks
- Education for staff and patients



# Next Steps





# Focus on Women's Health

- Enhancing BMH Women's Health service line
- Utilization of Care Coordination tools for families at risk
- Consider sharing staff across continuum of care
- Marketing efforts
- Ongoing competency training (low volume/high risk)



Are you pregnant or planning a baby?

**Brattleboro OB/GYN**  
provides individualized care and support for you and your baby.

and the  
**BMH Birthing Center**  
offers years of experience caring for generations of local families.



Pregnancy should be a happy and healthy time of your life.

Did you know we offer a free doula service - providing support to help you stay calm and comfortable during labor.

Let our family help grow your family.

[bmhvt.org](http://bmhvt.org) • 802-251-9965



# Healthier Women, Children, and Families



Are you pregnant or planning a baby?

**Brattleboro OB/GYN** provides individualized care and support for you and your baby.

and the  
**BMH Birthing Center** offers years of experience caring for generations of local families.



Did you know that we offer Centering Pregnancy?

This prenatal care program brings women due at the same time out of exam rooms and into a comfortable group setting.

Let our family help grow your family.

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Are you pregnant or planning a baby?

**Brattleboro OB/GYN** provides individualized care and support for you and your baby.

and the  
**BMH Birthing Center** offers years of experience caring for generations of local families.



Pregnancy should be a happy and healthy time of your life.

We offer a variety of prenatal classes to help you prepare from diapers to breastfeeding, our team is here for you!

Let our family help grow your family.

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# How is this work replicated?

- Enhanced Screening in Primary Care (including Women's Health Clinics)
- Fee for service
  - [https://www.integration.samhsa.gov/sbirt/reimbursement\\_for\\_sbirt.pdf](https://www.integration.samhsa.gov/sbirt/reimbursement_for_sbirt.pdf)
- Shared care plans via EMR
- Invest in community relationships
- Set metrics, collect data and track success
- SBIRT now SBINS- expanding the WHI model to primary care and the ED with embedded LICSW and screenings
- Administrative and clinical support



# A few good...WOMEN

**Amy Ripley, LICSW**



**Jessica Bird, BSN, RN**



Thank You!  
Any Questions?

