

**Obici
Healthcare
Foundation**

**Healthy
Beginnings
RFP for Convening
Organization**



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Agenda

- Overview of OHF Strategic Focus Areas
- Overview of OHF Maternal and Child Health strategy
- Discuss RFP for Healthy Beginnings
- Amy Paulson, EVMS
- Q&A



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MISSION AND VISION

MISSION STATEMENT

Improve the health status of the people living in the service area by responding to the medical needs of the indigent and uninsured and by supporting programs which have the primary purpose of preventing illness and disease

VISION STATEMENT

The vision of the Obici Healthcare Foundation is good health and wellness for all



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Obici Healthcare Foundation Strategic Focus Areas

- Early Childhood Education
- Capacity Building
- Healthy Behaviors
- Strengthening the Safety Net
- **Maternal and Child Health**

Maternal and Child Health Strategy

- Goal: Improve outcomes in the first year of life for moms, infants and families
- Five year strategy
- Informed by many conversations in the community and around the country
- Informed by a scan of local data obtained from local organizations, the state and local needs assessments

Maternal and Child Health Strategy

Assess and improve capacity of local home visiting programs that focus on improving outcomes related to pregnancy and infancy

Support collaboration to build local community-based plans to address infant outcomes (Healthy Beginnings)

Increase awareness of the impact of poor pregnancy and birth outcomes

Expand opportunities to access and use local data and lessons learned to improve outcomes among women, infants and families

Healthy Beginnings

- Purpose: Provide support to community collaboratives to develop a plan to improve outcomes for moms, infants and families in their community
 - Breastfeeding
 - Access to prenatal care
 - Maternal mental health
 - Safe sleep
- Topics chosen based on data and discussions with organizations in the OHF service region
- Alignment with regional efforts (Minus 9 to 5)

Healthy Beginnings

- Purpose of the RFP: Provide up to \$5,000 to one convening organization (or a partnership) to provide leadership throughout a one-year planning process
- Technical assistance—The Strategy Group (pg. 2)
- Expectations of the convening organization (pg. 2)
- Expectations of collaborative members (pg. 2)

Healthy Beginnings

- Outcome of planning process: All communities participating will have a plan to address one or two of the focus areas
- 2019—Year of learning for OHF and community collaboratives; evaluation
- 2020—Funding opportunity available to fund parts or all of the community plans

Application Process

- Only one convening organization (or partnership) will be accepted per community
- Collaboratives must be formed prior to application submission (December 10)
- Letters of commitment from all partners required
- Requirements:
 - Cover sheet
 - Proposal Narrative
 - Budget Narrative
 - Letters
 - 990



Application deadline:
December 10 at 2PM

Use the online application
system; link is in the PDF RFP

USING A POPULATION HEALTH APPROACH TO MATERNAL-CHILD HEALTH: *CHANGING APPROACHES*

Amy Paulson, MPH, AE-C
Eastern Virginia Medical School



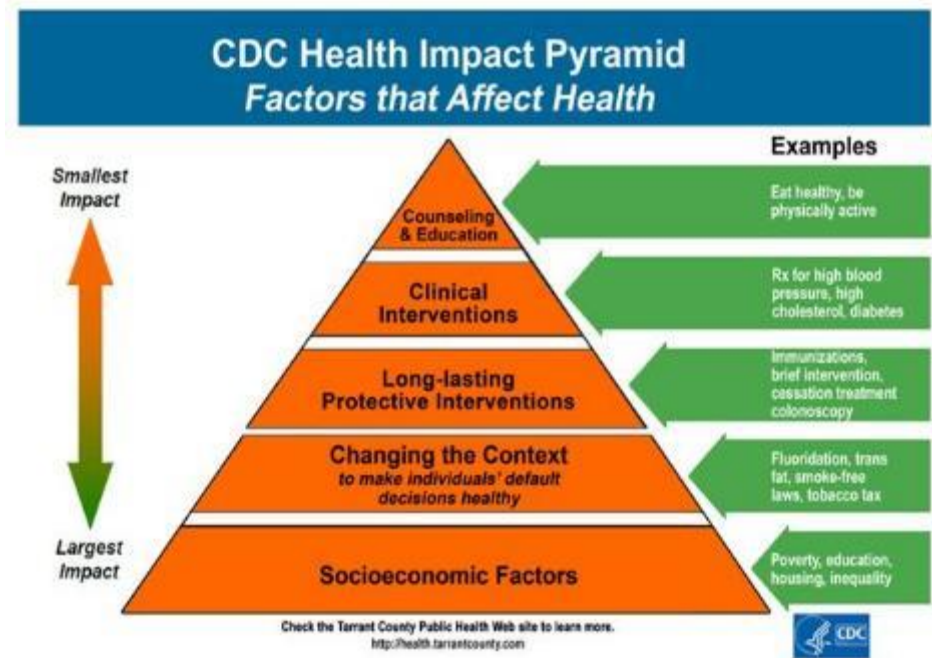
What is a Population Health Approach?

- Uses policy, systems and environmental change to impact individual behaviors, health outcomes and social norms
- Focuses on leveraging resources and creating meaningful, sustainable interventions for large groups of people rather than individual level interventions
- Action is directed at the entire population rather than individuals
- Addresses disparities and inequities in health status between population groups

The Impact Factor

Multi-level Impact:

- Creating healthy environments
- Developing community support
- Influencing social norms
- Facilitating healthy behaviors
- Implementing high impact policies



Making the healthy choice the easy choice

Behavior is Complicated

“It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”

-Smedly and Syme (2000)

Institute of Medicine



Events/Programs vs. PSE Change

Characteristics of Events/Programs

- ❑ One time
- ❑ Additive: often results in only short-term behavior
- ❑ Individual level
- ❑ Not part of ongoing plan
- ❑ Short term
- ❑ Non-sustaining

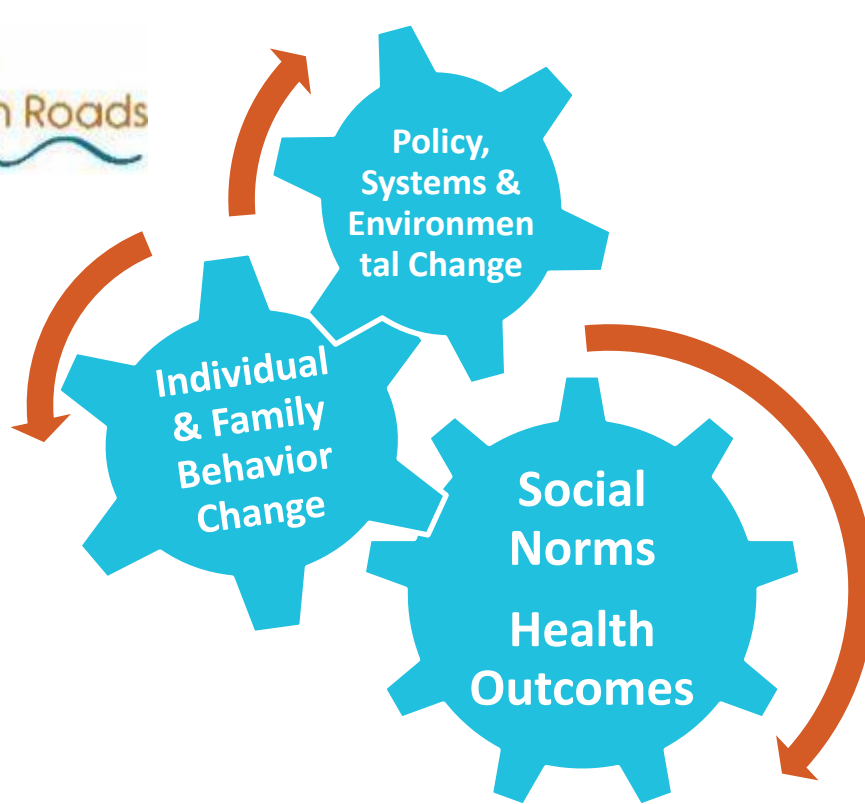
Characteristics of PSE Change

- ❑ Ongoing
- ❑ Foundational: often produces behavior change over time
- ❑ Policy level
- ❑ Part of an ongoing plan
- ❑ Long term
- ❑ Sustaining

Individual versus Population Approach

Programs/Events for Individuals	Policy, Systems, and Environmental Change for Populations
Hold a breastfeeding class	Implement lactation policies and supports in workplaces; implement BF Welcome signage and policies to increase public BF support; Implement BF friendly childcare policies, practices and trainings AND/OR create a sustainable system by which women are educated on BF
Host a health fair for pregnant moms	Create a system of care to ensure moms in need access resources, i.e., early identification and referral through clinical partners (Obs, Health Dept)
Distribute brochures on importance of prenatal care	Collaborate with local employers to implement flexible leave policies to provide time off for pregnant employees to access prenatal care
Provide phone call education on importance of prenatal care to moms who miss appointments	Identify a sustainable system by which to provide transportation to appointments
Provide a staff training on maternal postpartum hemorrhage	Implement a clinical pathway to change staff behavior to improve adherence to evidence-based best practices

HHR Model for Taking Action



What is Policy Change?

- Policy interventions may be a law, ordinance, resolution, or rule (formal – in writing, binding, broad application)
- Example: Organizational policies that provide time and a space to express breastmilk at work



What is Systems Change?

- ❑ Systems interventions are changes that impact all elements of an organization, institution or system.
- ❑ Types of systems include: School, transportation, health care systems, etc.
- ❑ Example: System changes might include changing bus routes to include at risk neighborhoods having access to health services or free transportation to pregnant women with appointment cards or a new pathway or policy to increase staff adherence to safe sleep protocols.



What is Environmental Change?

- Environmental interventions involve physical or material change to the economic, social or physical environment.
- Example: Environmental signage welcoming BF in public, prompts to contact home visiting programs, etc



Examples in History of PSE

- Community Fluoridation of Water
 - 1945, safe & cost effective policy to prevent tooth decay for more than 184 million (CDC 2009)



Did Social Norms Shift?




Even Fido
wears a seat
belt now

30 years ago
we didn't even
use Booster
Seats

is your child ready?
use the seatbelt checklist:

- 145 cm (4 ft. 9 in.) tall.
- knees bend comfortably over the vehicle seat.
- lap belt fits low over the hip bones and under the belly.
- the shoulder belt sits on the shoulder and does not touch the neck.

If the answer is **NO** to any of these questions, your child should stay in a booster seat.



www.childsafetylink.ca

If it can work for water and seat belts
it can also work for improving MCH
outcomes!

Breastfeeding

- **Business Case for Breastfeeding**
 - Adopt lactation policies that provide space and break time for breastfeeding employees (in accordance with the Affordable Care Act) and offer lactation management services and support (e.g., breastfeeding peer support programs)
- **Work with hospitals, early learning centers, health care providers, and community-based organizations to implement breastfeeding policies and programs**
 - Breastfeeding Welcome Here
 - Breastfeeding Friendly Early Childcare Centers
 - Baby Friendly Hospitals

Safe Sleep

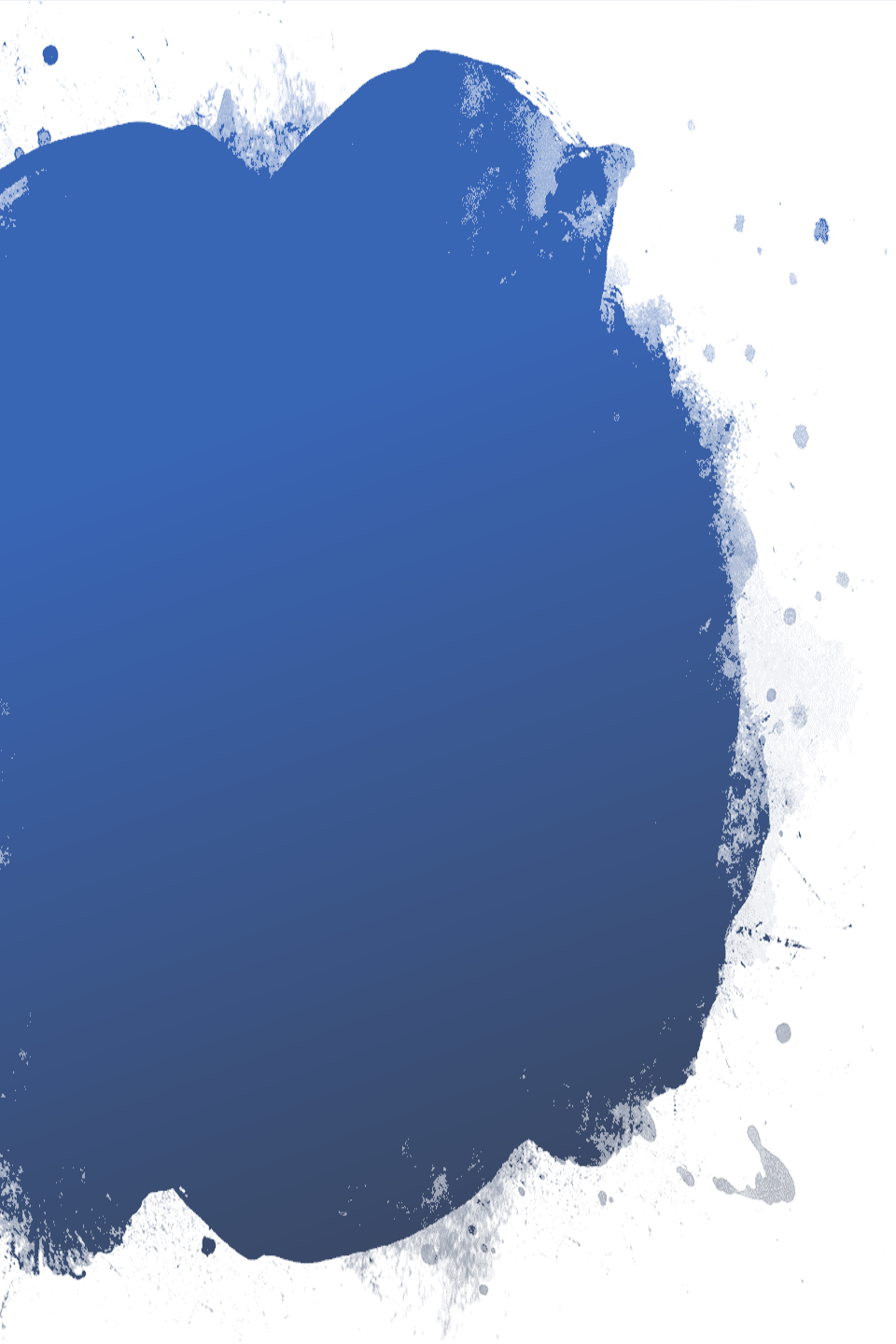
- **Systems/policy to provide safe sleep education**
 - Ongoing systems change via educational interventions/QI with hospital staff to place infants in safe sleep positions, first responders, child care staff
 - Identification of/Intervention with high risk groups – i.e., NICU babies
- **Environmental change to encourage safe sleep**
 - Crib programs, particularly when paired with education
 - Tobacco Use interventions with households

Maternal Mental Health

- ❑ Systems/policy change to improve PPD/mental health through social support, i.e., home visiting
- ❑ Screening is good across multiple agents
- ❑ Reduce systems barriers to access mental health services
- ❑ Reduce stigma for accessing services
- ❑ Improve systems/services for addiction
- ❑ Action plans for maternal depression

Access to Prenatal Care

- Early intervention to link women with prenatal care reduces poor health outcomes, like preterm birth
- Identify and remedy systems barriers in access to health insurance (i.e., enrollment in Medicaid for Pregnant Women)
- Remedy transportation barriers
- QI process to identify barriers/facilitators and systems/policy levers
- Enrollment in home visiting and case management programs that focus on access to care
- Alternative care models, such as group care
- Focus on disparities in access



Questions?