

Addressing Maternal Mental Health from a Public Health Perspective:

**Practical Tips and Community Resources** 

October 30, 2019

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## **DISCLOSURES**

No relevant financial disclosures or conflicts of interest.

## **LEARNING GOALS AND OBJECTIVES**

- 1. Learn about the tools developed by the Cleveland Regional Perinatal Network (CRPN) to increase identification and referral for maternal depression.
- 2. Become familiar with the CRPN's network of community mental health services in Cuyahoga County.
- 3. Learn about the CRPN data tracking system.

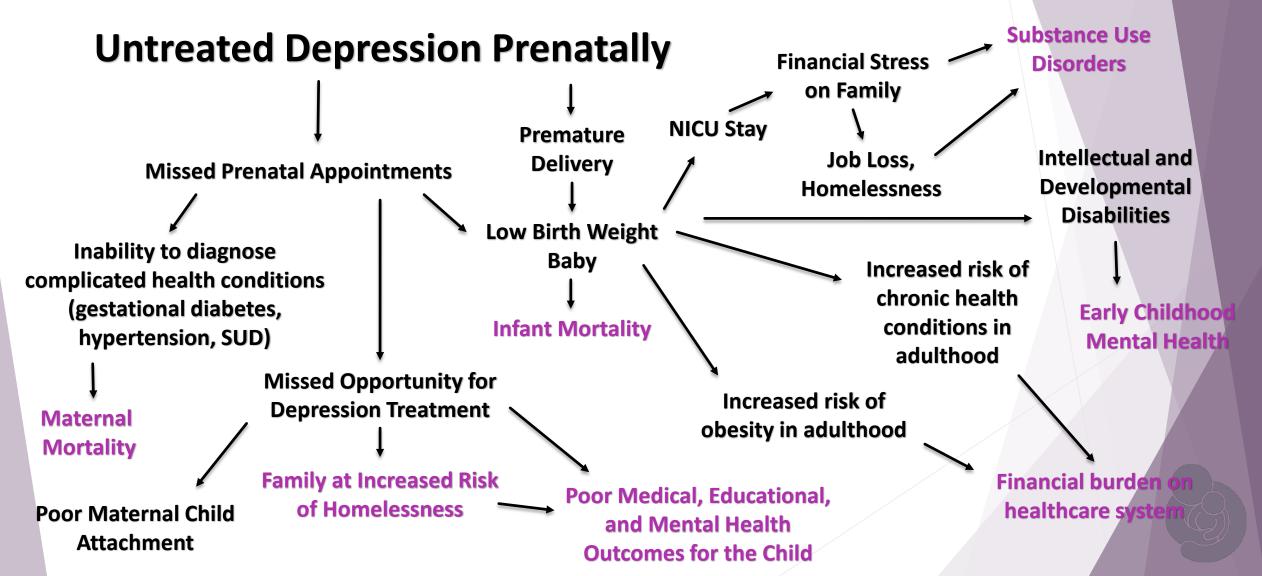
## **BACKGROUND**

- CRPN has been addressing Maternal-Child Health issues since 1975 across Region 5
- Effective 2005, the CRPN has been working within Cuyahoga County to address under-identification and treatment of depressed pregnant and postpartum women
- CRPN project incorporated into ODH/CFHS RFP (2011 2017) as a model of evidence -based practice and duplicated in other Ohio counties
- Supported entirely through grant funds
- University Hospitals Cleveland Medical Center fiscal agent and provides in kind support, office space

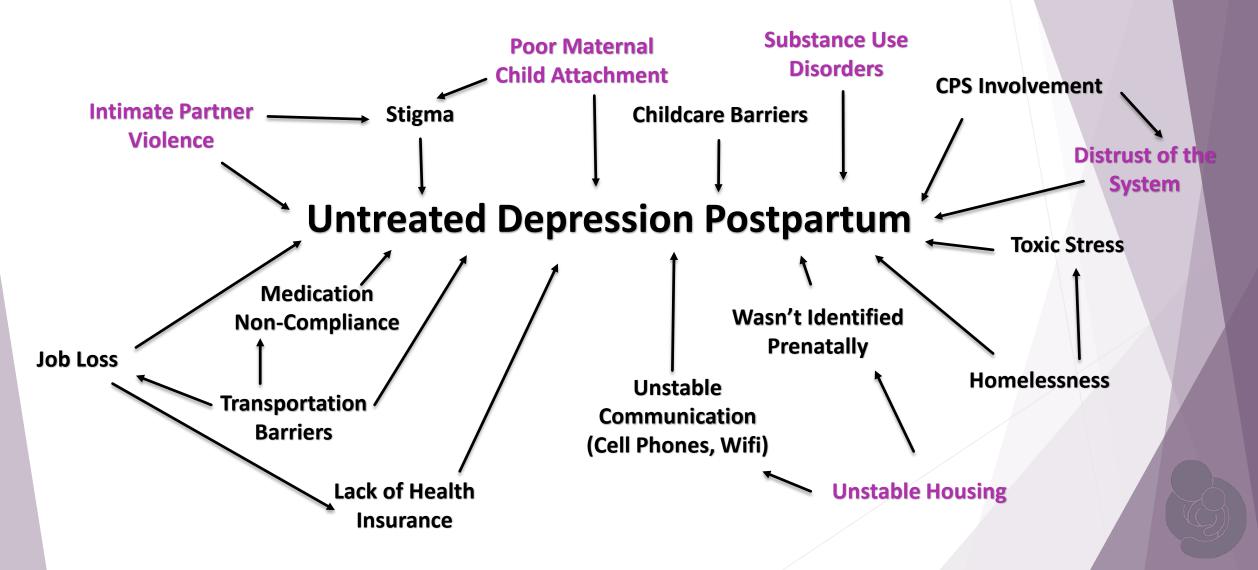
# IDENTIFYING THE PROBLEM IN CUYAHOGA COUNTY- 2002

- Reluctance to screen
- Inconsistent screening
- Knowledge of resources
- Lack of perinatal mental health services
- Poor referral mechanism
- Wait time for appointment between 2-3 months
- Follow up non existent
- Lack of integration between systems
- Stigma unique to perinatal population

# This is more than a Cuyahoga County issue. This is a major public health challenge.



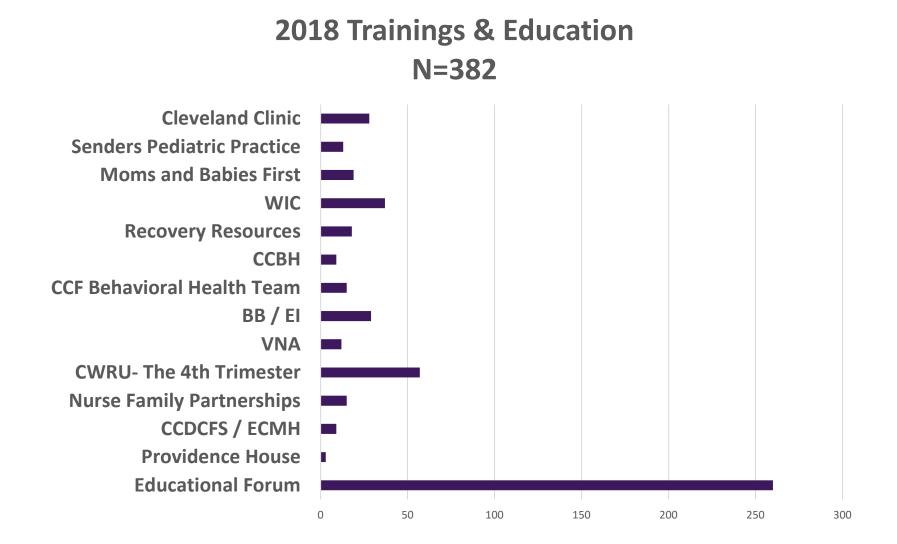
# This is more than a Cuyahoga County issue. This is a major public health challenge.



## **ADDRESSING THE PROBLEM**

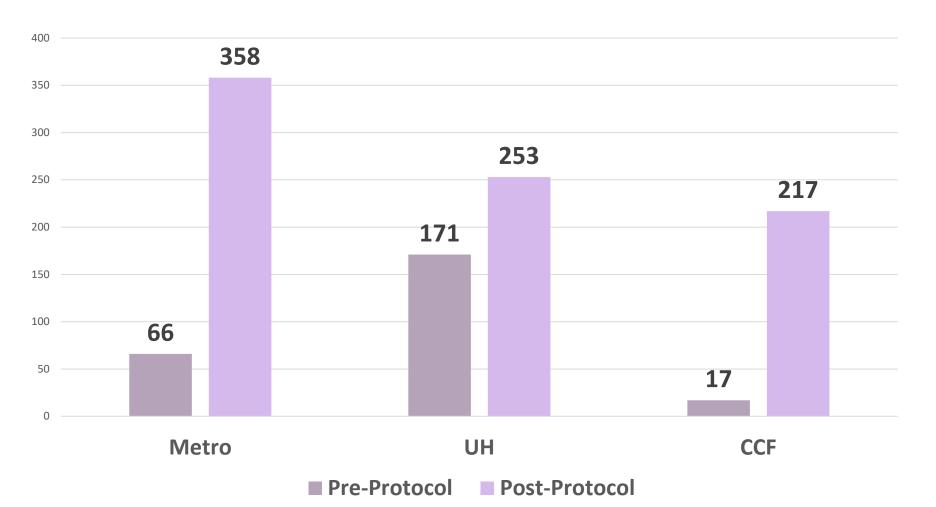
- Provide training and technical assistance
- Convene a dedicated coalition for collaboration and coordination (Cuyahoga County Perinatal Depression Task Force)
- **Develop** materials to raise awareness
- Create network of perinatal mental health agencies and review annually
- Maintain data tracking system
- Provide care coordination to referring providers
- Serve as conduit between community agencies and healthcare institutions

- 1. Provide training and technical assistance
  - u Free on-site training to healthcare and community providers to identify and refer for maternal depression since 2005





Training the major hospital systems to implement universal screening and referral protocol resulted in massive uptick in identification of women experiencing possible perinatal depression.





#### **Depression Screening CRPN Protocol Sample:** EPDS to be completed by the frontline provider Prenatal (24-26 weeks) Postpartum (after 4 weeks) **Client Refuses Screen** Anytime there is a concern Document refusal in record Copy of EPDS kept in client record Attempt to re-screen next visit **Homicidal Risk is checked yes or EPDS Question 10 has response:** 1. Hardly Ever **Screening Results** 2. Sometimes 3. Yes, quite often Score of 11 or less Provide Maternal Depression tear off Score of 12 or moresheet. Intervention Re-screen at later point if necessary. Discuss responses with client and need to assess her safety · Discuss need for further Coordinate on site psychiatric evaluation assessment and referral Contact FrontLine Services at (216) 623-Document interventions in **6888** for crises phone evaluation **Client Refusal** patient's record Document safety plan in client record If client refuses social work or mental health referral, document in record. **Community Mental Health Referral** Provide client with Guide for Complete Maternal Behavioral Health Moms, Maternal Depression Referral Form and fax/email to **Client Self**tear off sheet and Resource **On-Site** appropriate Mental Health Agency. Referral Card. Client must sign consent to release Referrals Offer referral options Review differences between and share. Guide for Moms Social Work baby blues and perinatal Notify mental health provider via Maternal Depression Mental Health depression. telephone about referral. Resource Card Address issue at next visit Copy of referral form kept in record. Guide for Moms and Maternal Depression Developed by: Avril S Albaugh MSSA,, Project Director, Cleveland Regional Perinatal Network Resource card provided. Adjunct Assistant Professor of Psychiatry, Case Western Reserve University School of Medicine

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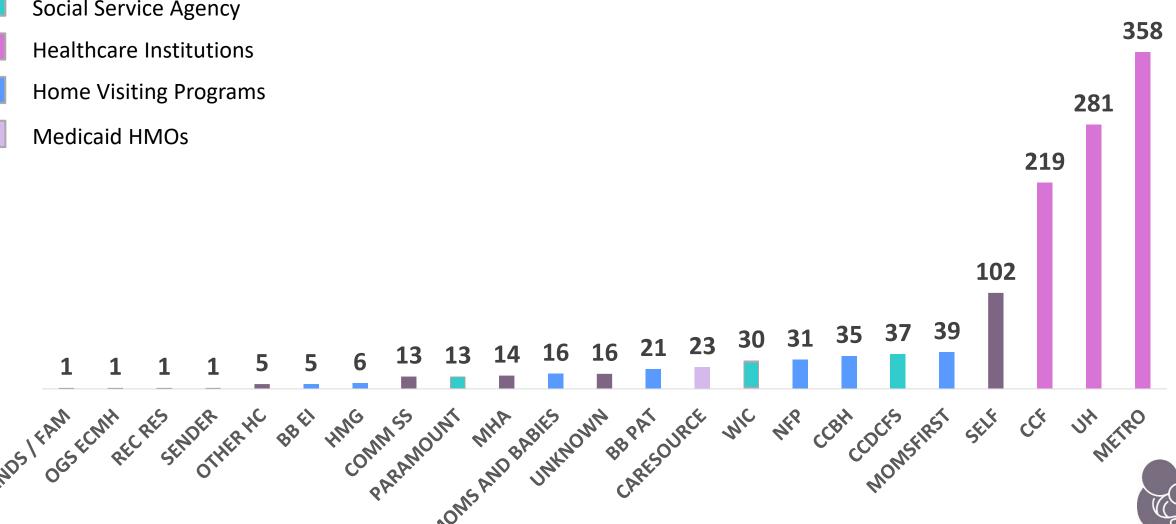
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## **2018 Referral Sources** N=1,268

## **Trained Agencies with Protocol**

- Social Service Agency



### Referral system developed to enhance access to services



#### Maternal Behavioral Health Referral Form

\*\*\*\*Please complete front of form and fax/email to provider selected on page 2 of the form\*\*\*\* For questions or more information about the Cleveland Regional Perinatal Network, call (216) 844-3391 or email CRPN Project Director at Avril.Albaugh@UHHospitals.org 2019 Version This form may be reproduced.

Date	Agency Referred to	Fa	X	(see reverse side)
Patient Name		DOB	SS#	
Address		City		_Zip
Phone	Alt Phone	(	Can we leave a mes	sage? ( ) Y ( ) N
Insurance Info.	Policy # (if available)			
Marital Status_	Currently P	regnant? OY ON	If yes, due date _	
If not currently p	pregnant, infant DOB:			
Reason(s) for Re	eferral:			
	fer in home or office based service			
Edinburgh Score	e: Suicid		Route	Risk: YON
Current Medicat	ion List: Name	Dosage	Route	Frequency
			4	
Referring Provider Phone (in case mental health agency needs add'l information):				
Ref. Provider Er	nail ler Fax			
Referring Provid	ler Fax	(Feedback w	ill only be provid	ed via fax or email)
I authorize the Referring Provider named above and the participants of the CRPN to mutually disclose my personal, demographic, social, physical and mental health assessment, insurance, and appointment information for the purpose of coordination of care, treatment and services. This authorization is valid for one year from the date it is signed unless an earlier date or event is written here:				
Patient/Legal Re	epresentative Signature			Date
Patient / Legal F	Representative Printed Name		Ph	one
Description of A	Authority for Legal Representative _			

#### Commuity Behavioral Mental Health Agencies in Cuyahoga County with specific programs for pregnant and postpartum women. 2019 Version

Please contact the agencies below for more specific information on services available.

Bellefaire, JCB

www.bellefairejcb.org

Phone Intake: 1-800-879-2522 Fax Intake: 216-932-8520 Email: intake@bellefairejcb.org

Healthy Moms, Happy Families: Office based services. Services covered by Medicaid and select commercial

insurance providers. East side office location.

**Signature Health Inc** 

www.signaturehealthinc.com

**Phone Intake:** 216-831-6466 x 11232 Fax Intake: 216-766-6086 Email: bw-access@shinc.org

Women's Program: In home or office based services. Services available for uninsured as well as Medicaid

and Medicare. West side and East side office locations.

Phone Intake: 440-835-6212 x 230

Fax Intake: 440-835-6231

Email: intake@farwestcenter.com

Help for Mom Program: Office based services. Services available for uninsured as well as Medicaid, Medicare, and select commercial insurance plans. West side office location.

**OhioGuidestone** 

**Far West Center** 

www.farwestcenter.com

www.OhioGuidestone.org

Phone Intake: 440-260-8300 Fax Intake: 440-260-8575

Email: intakegroup@OhioGuidestone.org Maternal Depression Program: In-home and office based services. Services covered by Medicaid and select

commercial insurance plans. East and West side office locations.

Applewood Centers Inc.

www.applewoodcenters.org

Phone Intake: 216-452-1153 Fax Intake: 216-521-6006

Email: intake@applewoodcenters.org

Supportive Options and Resources for New Moms: In-home and office based services. Services covered by

Medicaid and select commercial insurance providers. West side office location.

FrontLine Service Mobile Crisis

Phone: 216-623-6888

24 hour Hotline Crisis intervention and suicide hotline. Information, assessment and referral.

Note: List above is for Medicaid, Medicare, and Commercial Insurance. Commercial Insurance may require prior authorization from insurance carrier and referral to specific mental health providers. This does not represent a complete list of community mental health agencies.

For more listings call First Call for Help at 211 or 216-436-2000





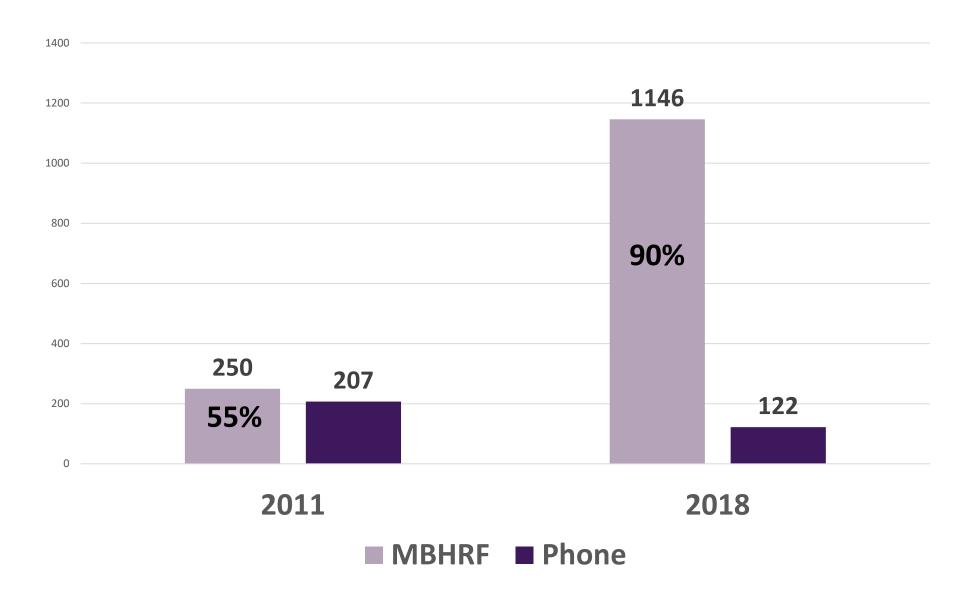








Streamlined approach to making referrals can be contributed to the development of the Maternal Behavioral Health Referral Form





# Screening and Referral Flowchart

Referring Provider identifies 'at risk' woman and has conversation with her about making a referral for services.



Referring Provider fills out referral form, obtains signature from mother, and faxes to one of the perinatal mental health agencies.



Mental health agency receives faxed Maternal Behavioral Health Referral Form which flags client as a maternal depression referral.



purports expertise in perinatal depression and community resources, willing to follow guidelines for outreach and feedback.



Agency connects with mother: schedules intake appointment



Mental health agency begins attempting contact with client (attempts include contact via phone and by mail)

If unable to reach client, client declines, or doesn't attend appointment, case is closed and feedback is provided to referral source

#### **Guidelines for Outreach-**

- Phone contact within 72 hours
- Mental health assessment within 1-2 weeks (priority to suicide risk)
- Psychiatry appointment within 3 weeks



Mother attends intake appointment- feedback regarding the outcome is provided to referring provider

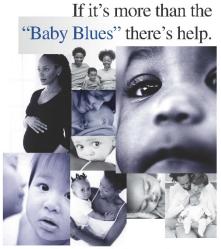




Additional consent required regarding clients treatment progress

- Convene a dedicated coalition for collaboration and coordination (Cuyahoga County Perinatal Depression Task Force)
  - Developed in 2005
  - Meets quarterly
  - Comprised of stakeholders from all major healthcare institutions, home visiting programs, HMOs, community mental health agencies, social service agencies, and local ADAMHS board.
  - Purpose: address gaps and barriers with identification and current referral and intake system
  - Goal of overcoming barriers as a collaborative group

3. Develop materials to raise awareness

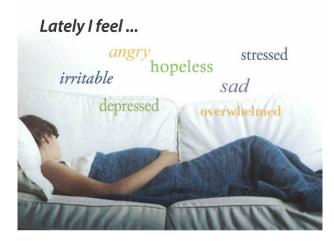


Every new baby deserves a happy start.
Talk to your doctor or health care provider.
For more information and resources, side www.orpu.ast.

CRPN
Control State Control Sta

Maternal Depression Poster

Maternal Depression Tablet



Maternal Depression Resource Card



Guide For Moms



**Child-Adolescent Resource Card** 

## Left untreated, Haternal Depression can affect a whole family. Here's how.

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There are loss of options for treating your depression including medication, talk therapy, support groups and more. So talk to your docur or other health case more life.



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There is help available.

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Call one of the agencies below for more information.

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### **Child-Adolescent Tablet**



4. Create network of perinatal mental health agencies and review annually







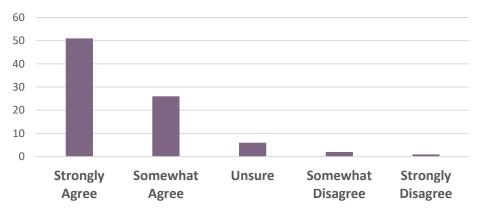




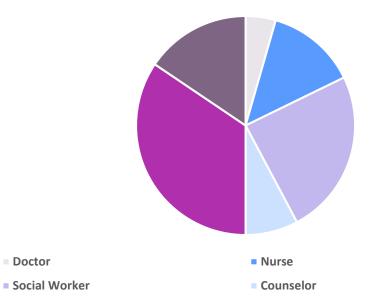




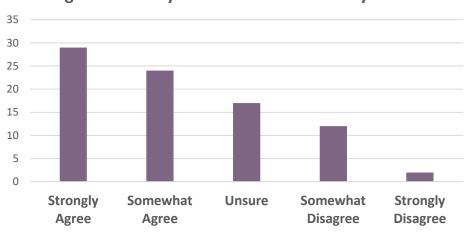
I can connect a client to a perinatal mental health professional by using the CRPN Maternal Behavioral Health Referral Form. (N=86)



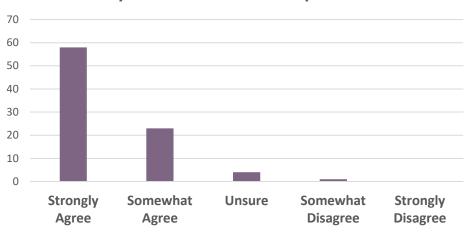
Please identify your discipline.



I am confident in the CRPN mental health agencies ability to meet the needs of my clients.



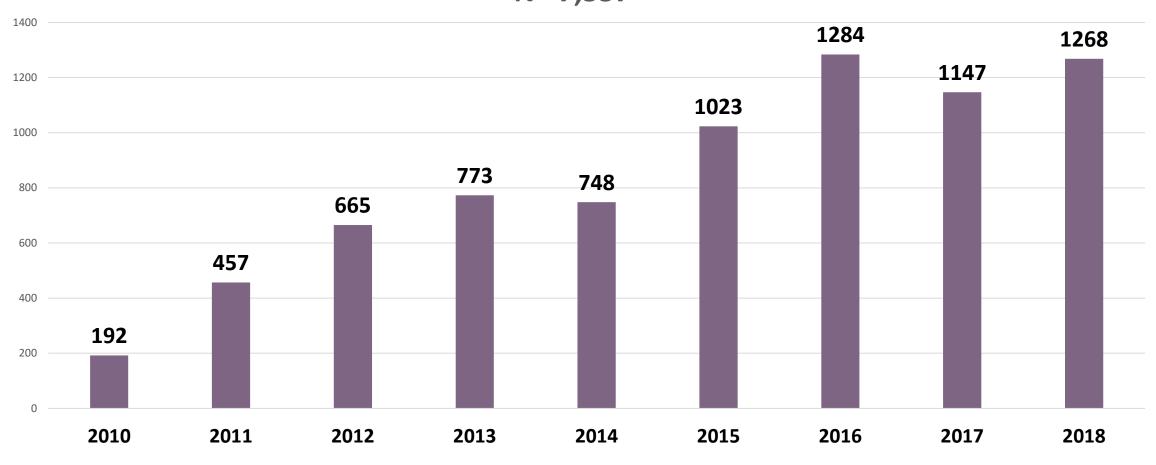
The Maternal Behavioral Health Referral Form is easy to understand and simple to use.



■ Home Visitor / Community Health Worker ■ Other (Please Specify)

u 5. Maintain data tracking system

**Total Referrals 2010-2018** N= 7,557

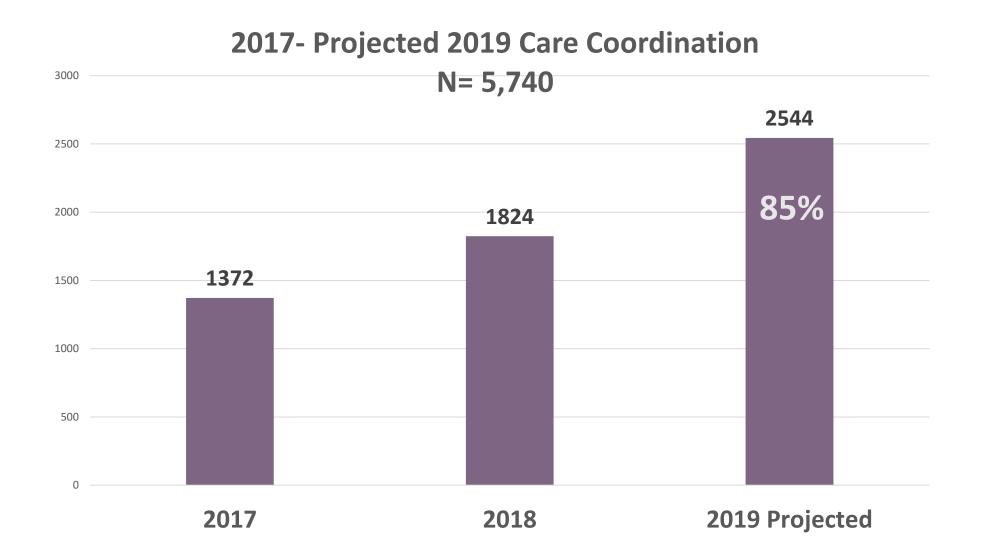


560% change 2010 - 2018

# 2012-2018 Total Intakes N=3,002

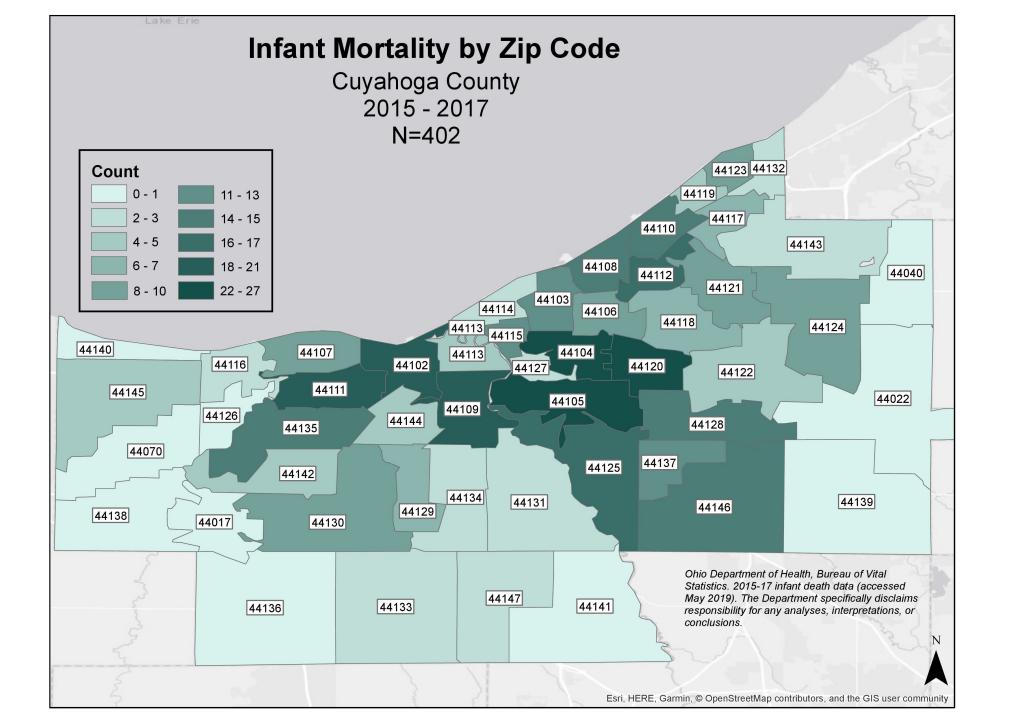


u 6. Provide care coordination to referring providers

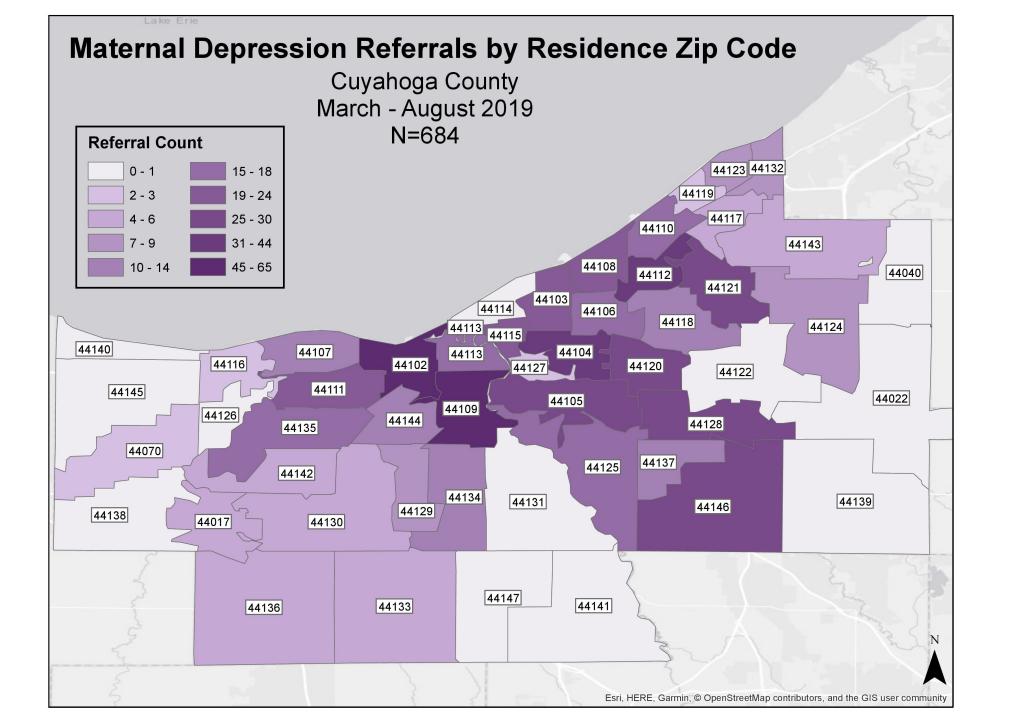




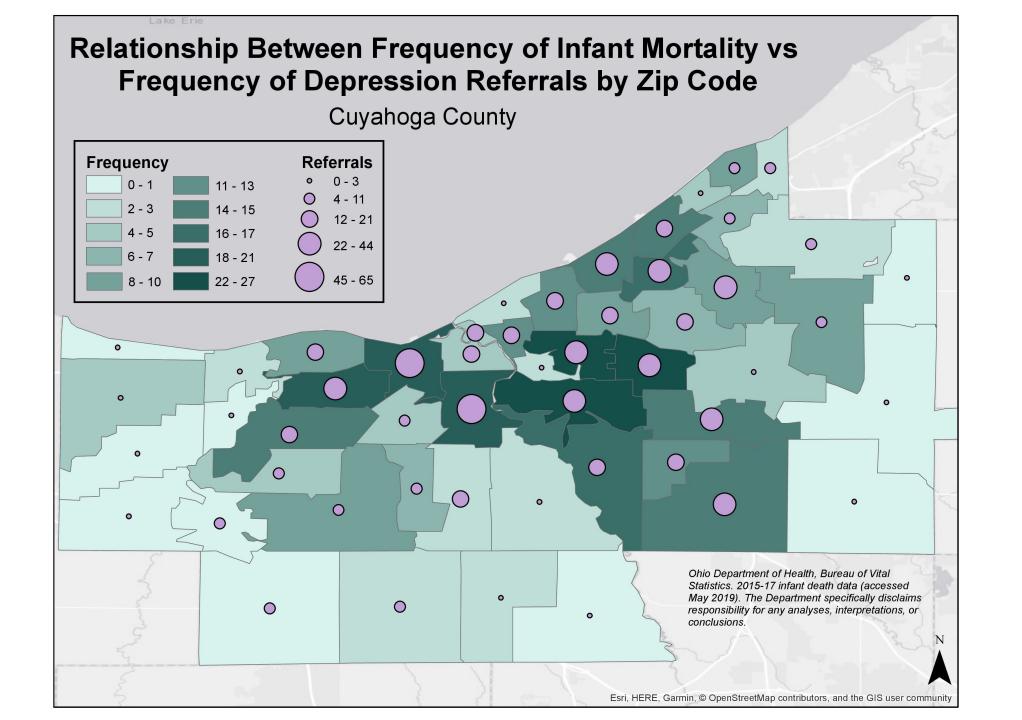
- 7. Serve as conduit between community agencies and healthcare institutions
  - Statewide Pregnancy Associated Mortality Review committee
    - On the individual level, maternal mental health was an associated risk factor for approximately 1/3 of maternal deaths between 2008-2012 in the state of Ohio.
  - Cuyahoga County Fetal Infant Mortality Review committee
    - Maternal history of mental health problems was an associated risk factor for approximately 1/3 of prematurity related infant deaths in 2017.
  - Ohio Equity Institute for Equity in Birth Outcomes
    - Focus on training Community Health Workers and Home Visitors leading the downstream focus to screen and refer for maternal depression.
  - Participation on other committees including Cuyahoga County Suicide Prevention Coalition, Youth Risk Behavior Survey Advisory Committee, MomsFirst Advisory Council, First Year Cleveland Community Action Council, the Healthy Fathering Collaborative, and the ADAMHS Board Early Childhood Mental Health Providers Committee.















## **2018 NETWORK SUCCESS**



454 REFERRALS OUT OF 1,268 RESULTED IN MENTAL HEALTH CARE

■ INTAKE (35.80%) ■ WITHDRAWN (64.20%)

TRAINING & EDUCATION WAS GIVEN TO



PROVIDERS ON IDENTIFYING, SCREENING, AND REFERRING FOR MATERNAL DEPRESSION

**MOTHERS WERE IDENTIFIED AT** RISK IN



DIFFERENT **ZIP CODES** 

ORIGINATED FROM METROHEALTH, UNIVERSITY HOSPITALS, OF REFERRALS OR CLEVELAND CLINIC

HOME VISITING PROGRAMS ACCOUNTED FOR

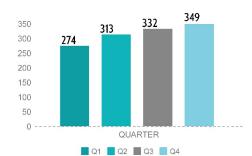
OF REFERRALS



The CRPN provided care coordination on 1,824 referrals in 2018- an increase of 33% compared to 2017



2018 TOTAL REFERRALS N= 1,268





# **Current & Future Initiatives**

- Focus efforts on addressing racial disparities in our system, particularly around treatment initiation rates, by gathering baseline data on race and ethnicity.
- Utilize GIS mapping software to explore relationships between high risk maternal depression zip codes and infant mortality.
- u Develop higher level training (2.0) to focus on the interaction between the referring provider and client to improve intake rates.
- Collaborative initiative with Ohio Department of Mental Health & Addiction Services to provide statewide maternal depression trainings SFY20-21 and develop regional infrastructure to establish a network of perinatal mental health providers.
- u CRPN Expansion
  - U Collaborate with perinatal mental health partner who provides Medication-Assisted Treatment (MAT) for opiate addicted perinatal population.
  - u Develop and pilot CRPN model to streamline referrals and provide care coordination for women in need of MAT program.

# Questions?

# **Contact Information**

### **Avril S Albaugh, MSSA**

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### **Cleveland Regional Perinatal Network**

WO Walker Building 10524 Euclid Avenue, Suite 3000 Cleveland, Ohio, 44106 Website: www.crpn.net

# **Sources**

https://www.health.harvard.edu/womens-health/depression-during-pregnancy-and-after

https://www.nationalhomeless.org/factsheets/addiction.pdf

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4327901/

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4151913/

https://www.addictioncenter.com/addiction/postpartum-depression-addiction/

https://www.marchofdimes.org/complications/low-birthweight.aspx

Ohio Pregnancy Associated Mortality Review

Cuyahoga County Board of Health