Tarrant County Maternal & Infant Health Coalition

City Council Presentation

February 20, 2024

































Addressing a Critical Issue in Tarrant County

- Texas accounts for 10% of all births in the U.S. (400,000 annually, 27,161 live births in Tarrant County).¹
- Tarrant County has 2nd highest maternal mortality rate among Black women in the state (48.3 deaths per 100,000 live births).²
- Mental health conditions are a leading cause of pregnancy-related deaths.
- 1 in 7 Texas women experience depression within 6 months after pregnancy.

"There is a disconnect between what we strive to provide to our patients and what the data shows are the outcomes, especially for Black mothers. We have to do better, and this coalition can help us do that together."

- Tarrant County Hospital Administrator

Building a Cohesive, Comprehensive System of Care

"Increasing healthy birth outcomes by improving systems of care is a complex process. It requires that state agencies, local groups, and their partners center community voices to build cross-sector relationships, trust, and understanding.

Coordinating such partnerships and initiatives to leverage state and local data sources, identify gaps in services, and improve alignment and integration of partners and programs can help parents and infants live their healthiest lives."

- Pew Research Center, 2022

How the Coalition Will Define Success



18% of success markers



13% of success markers



Navigation

18% of success markers



Data & Metrics

38% of success markers



13% of success markers

- Offer a space to connect and share experiences
- Increase access to care for our patients
- Increase access to reproductive health
- Create a coordinated care model that all partners operate within
- Adopting a "there is no wrong door to care" type of policy
- Increase referrals in targeted geographic areas

- Identify private funding for social programs and supports that could catalyze public investment
- Increase the well-being of mothers in Tarrant County, and move mothers and children out of poverty
- Have more boots on ground in areas where there are resource gaps

- Community-wide navigation and communication systems
- Navigation of resources/supports for mothers and their children
- Ensure gaps in services and care are proactively being addressed
- Developing a closed-loop referral system that is anchored in a continuum of coordinated care

- Improved maternal health outcomes for women – combat the data in the state maternal health report
- Developing a data system to track maternal and infant health outcomes before, during and after birth
- Advocating for critical policy changes at the State level
- Expansion of Medicaid to 12months postpartum

Baseline Data:

- . PRENATAL CARE 1st TRIMESTER: **61%** (Tarrant)
- 2. POSTPARTUM CHECK-UP: 88.6% (Texas)
- 3. WELL CHILD VISIT: 89.2% (Southern U.S.)

Coalition Progress to Date

Maternal & Infant Health Coalition Partner Interviews + Tarrant County Resource Map of Services

Medicaid Renewal Campaign

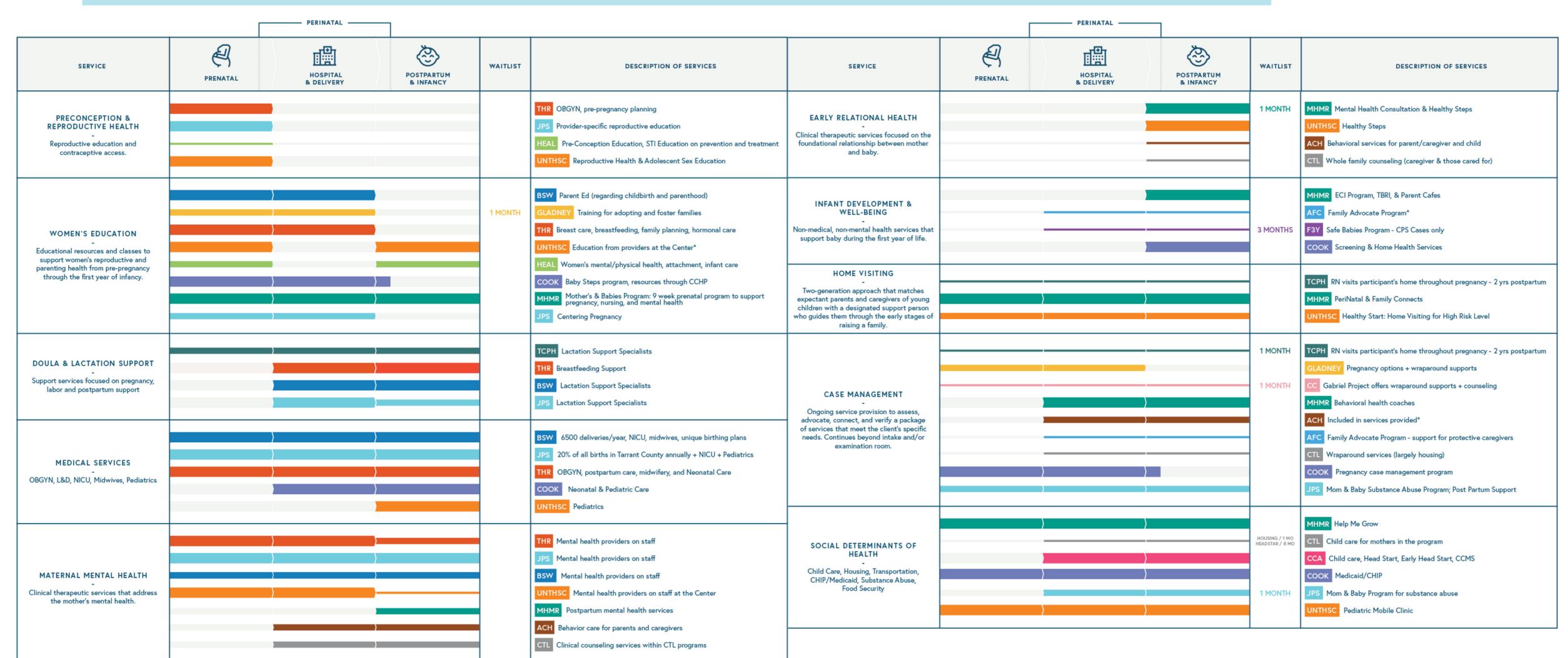
Local Maternal Health Interviews (79 Total) & Key Takeaways

Next Steps: A Closed-Loop Referral System for Tarrant County





Maternal & Infant Health Continuum



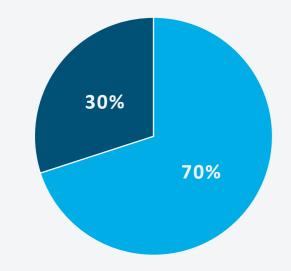
Resource Map: Top-Level Takeaways*

1

Awareness & Access
Are Greater for Those
Already in System

65% reported navigation and understanding of the healthcare system continue to be a significant barrier

70% report that Medicaid and low-income women and families who are attached to a specific program or system are most aware of services



Data points pulled from survey questions 8, 14, 16, 23, and 24.

2

High Referral Rates, Low Post-Referral Connectivity

High volume of referrals: **72%** of providers receive clients from referrals and 86% of providers refer out for key services

75% report being unaware of the process that occurs after their referral is made

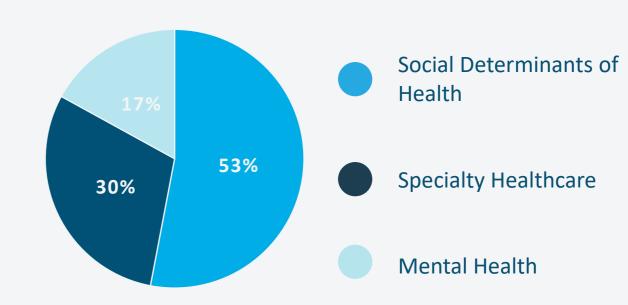


3

Social Determinants of Health are Key Factors of Success

75% of providers attested to the impact of social determinants of health (specifically housing, food insecurity, transportation, and legal challenges)

53% of all client referrals out were barrier-related (SDOH)

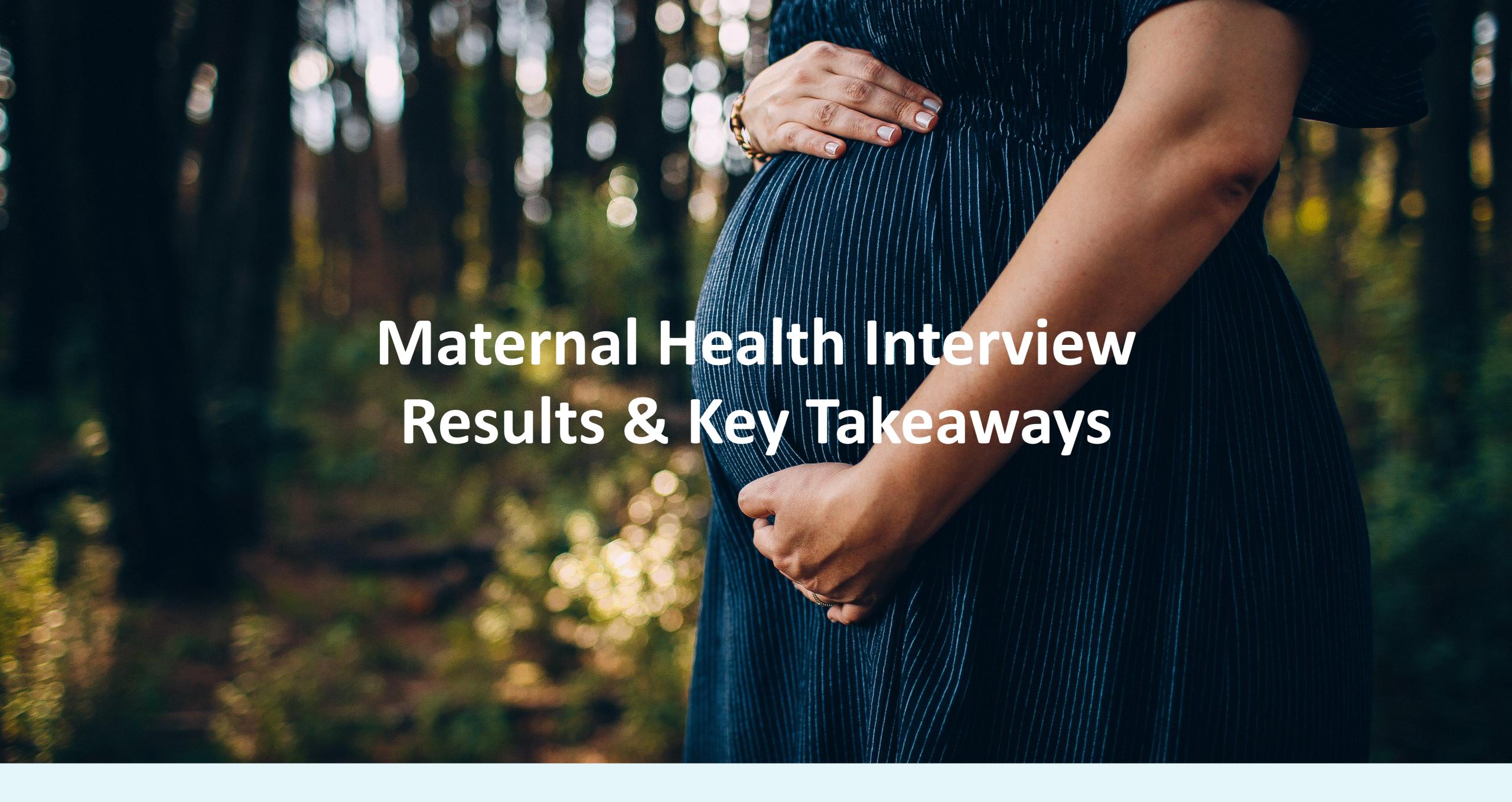




"TAKE 3" Medicaid Campaign







Maternal Health 2023 Interviews







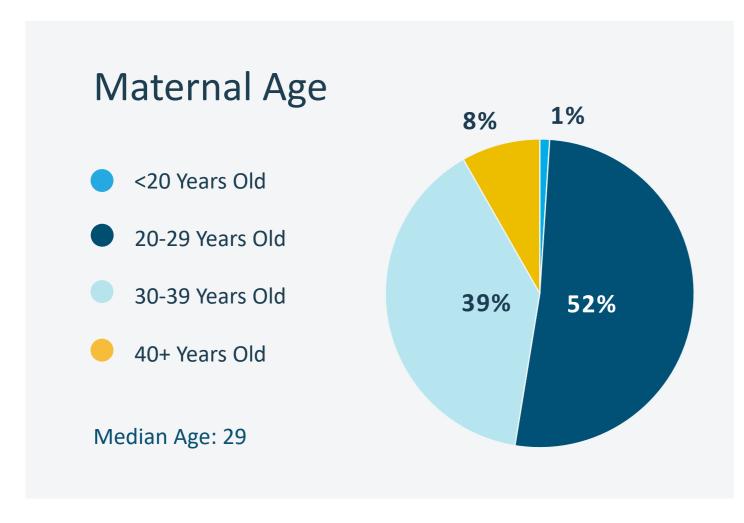
53 Total interviews, 29 Surveys completed

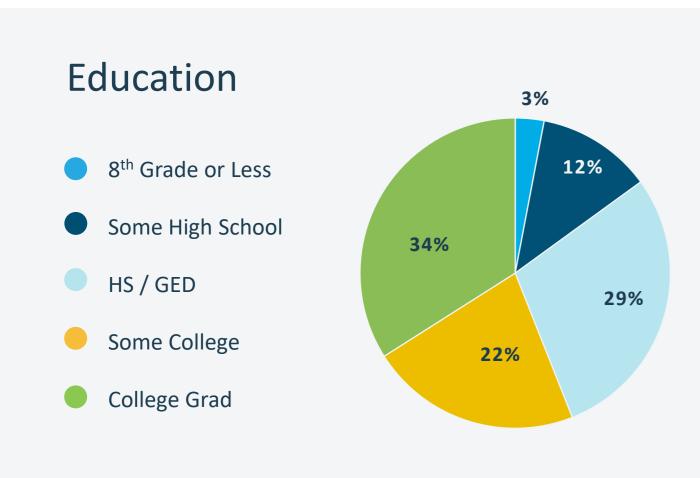
3,200 Minutes listening to 55+ personal experiences of pregnancy and parenting in Tarrant County

9,000+ Experiences codified in data to inform next steps



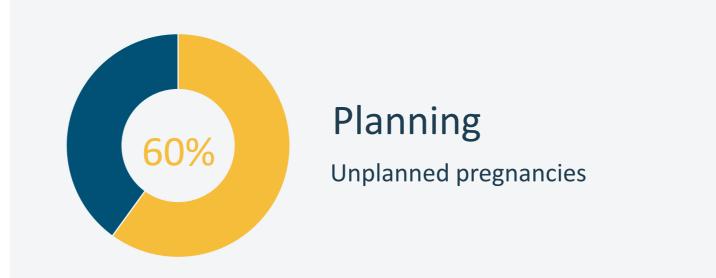
Maternal Health Interview Demographics

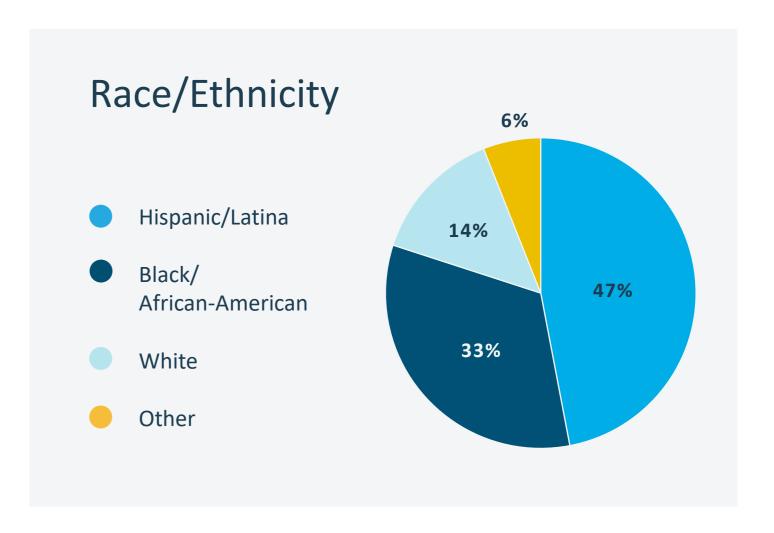


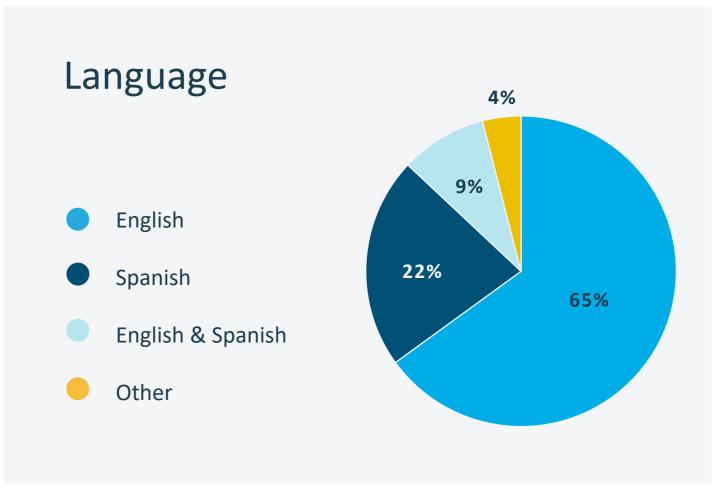












Maternal Interview Key Takeaways

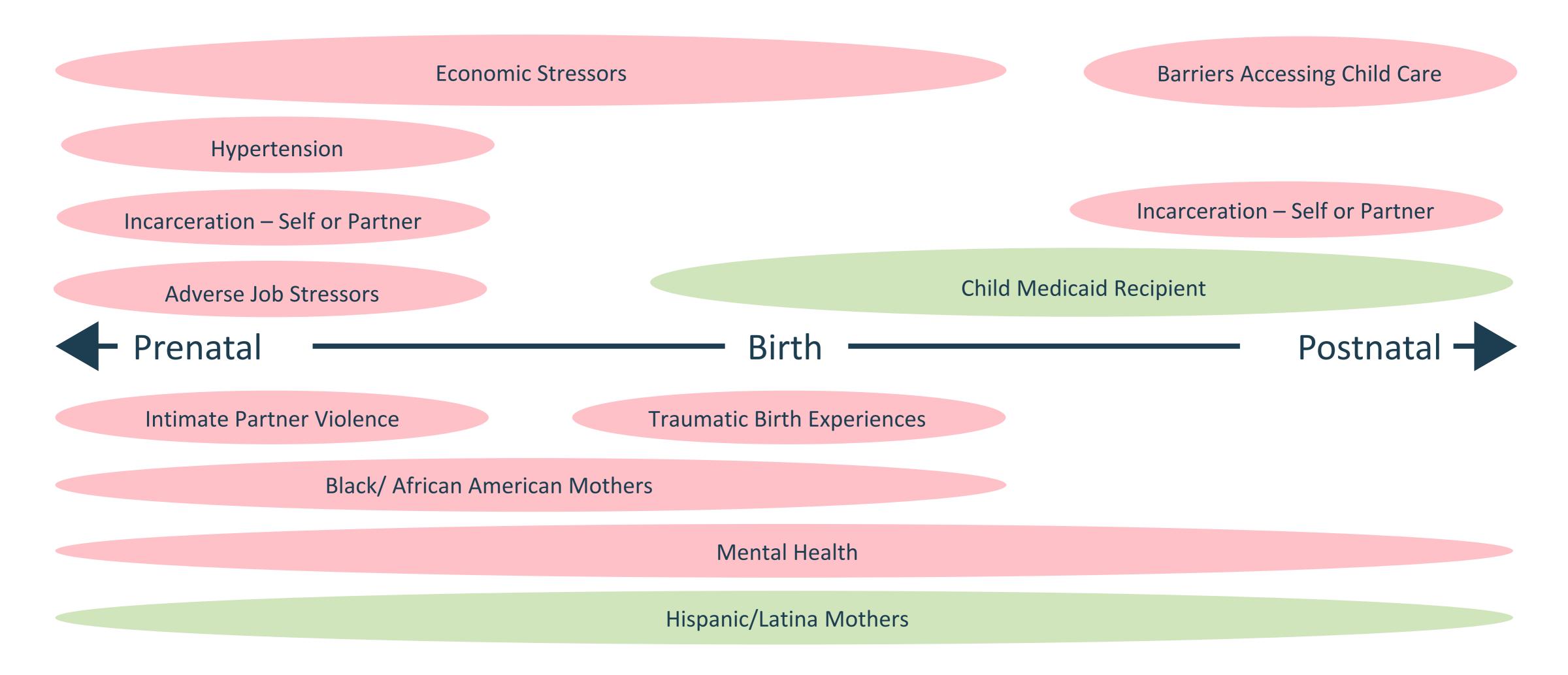
Strengths

- √ 93% satisfied with maternal health experience (pregnancy, childbirth, and postpartum)
- √ 80% said there were services they found especially helpful during their last pregnancy
- ✓ WIC, SNAP, Child Medicaid helps connect mothers to other services

Opportunities

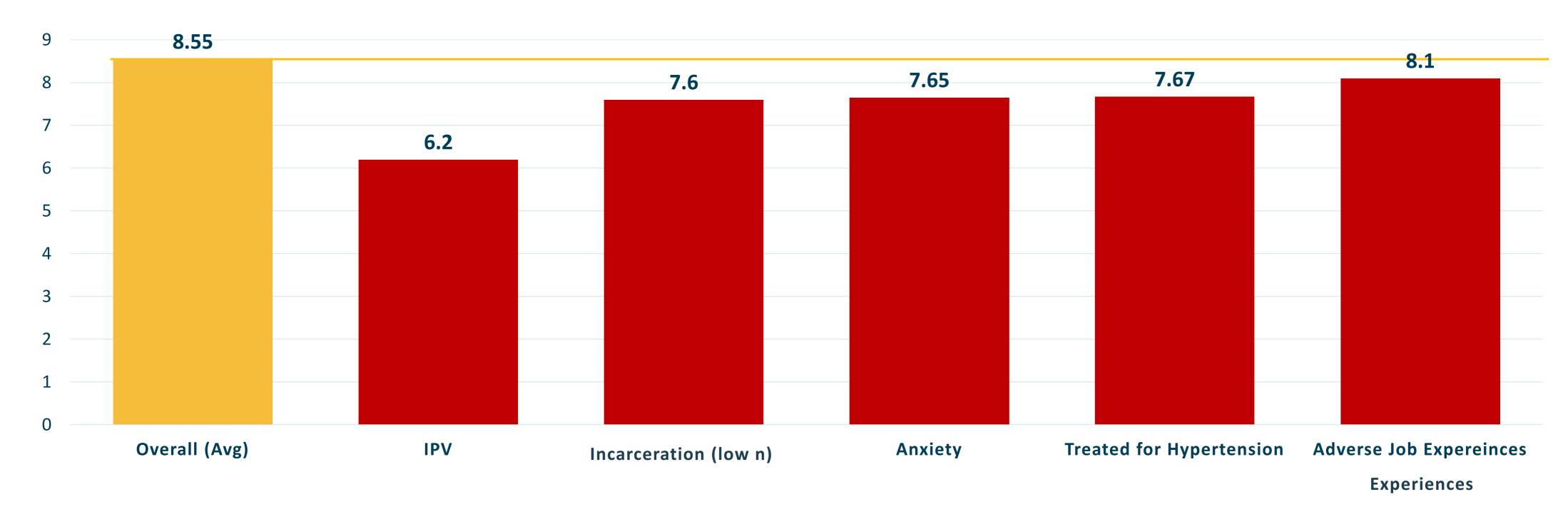
- √ 1 in 5 mothers not accessing prenatal care until after first trimester
- ✓ Hypertension and traumatic birth case management and care
 - 1 in 5 mothers experienced hypertension...80% of those with hypertension prior to pregnancy had a traumatic birth
- √ 56% of mothers wanted more support after child was born, including mental health

Factors Impacting Mothers' Overall Experience*



Overall, how do mothers' pregnancy journeys vary by condition in Tarrant County?

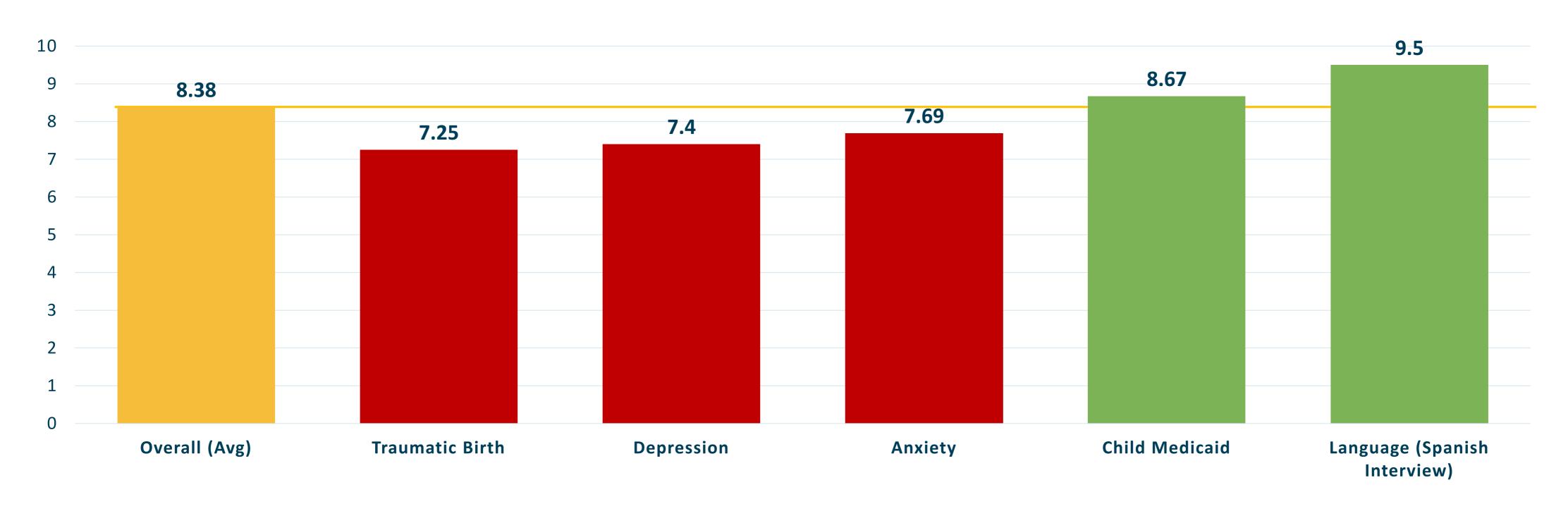
PREGNANCY Level of Satisfaction*



*Statistically Significant

Overall, how do mothers' birth experiences vary by condition in Tarrant County?

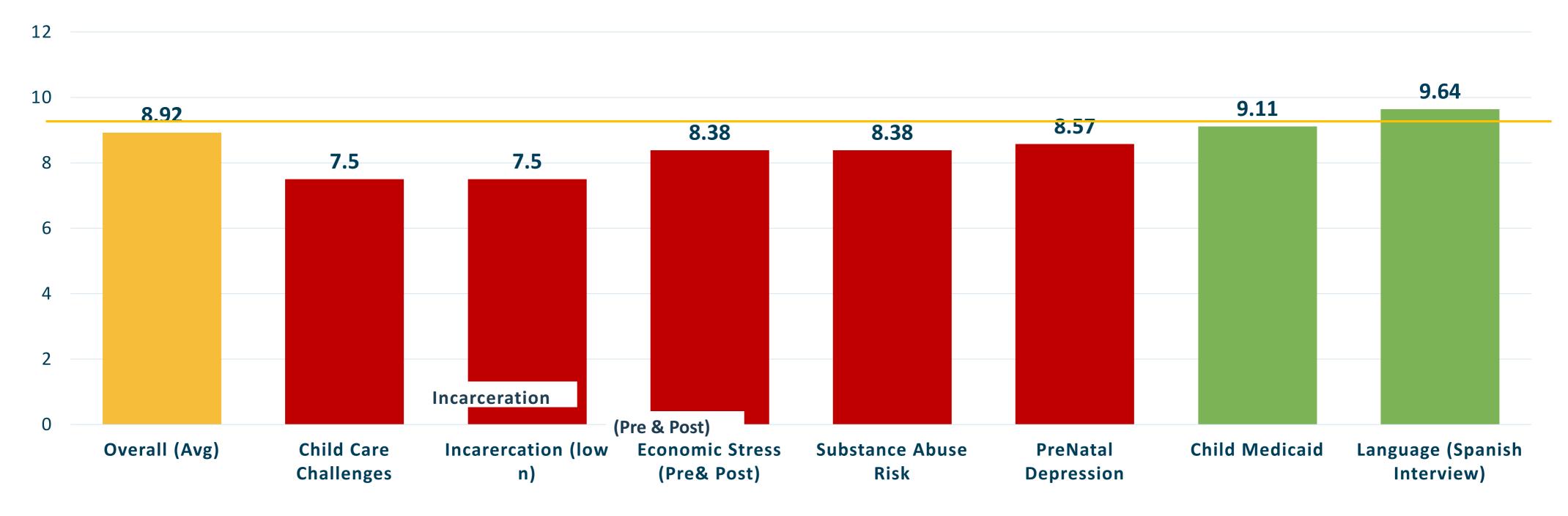
BIRTH EXPERIENCE Level of Satisfaction*



*Statistically Significant

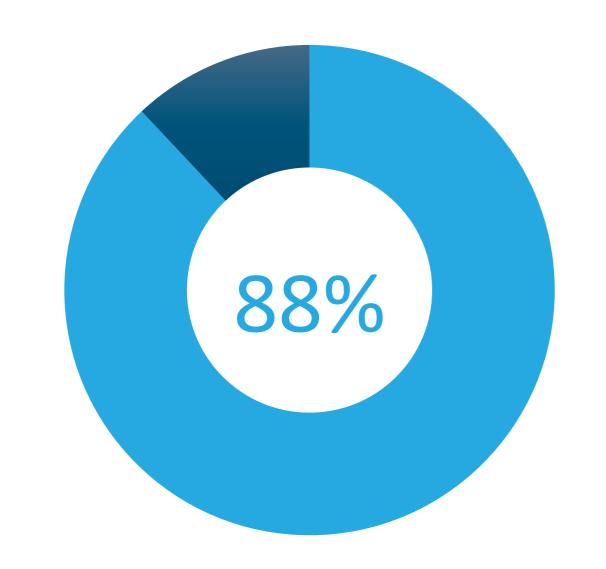
Overall, how do mothers' parenting experiences vary by condition in Tarrant County?

PARENTING Level of Satisfaction*



^{*}Statistically Significant

Where Do Mothers Go for Trusted Information?



88% of mothers indicated that they generally know where or who to turn to for trusted information or guidance

BUT there is no "single source" for accessing this information

30%
Use Family
& Friends

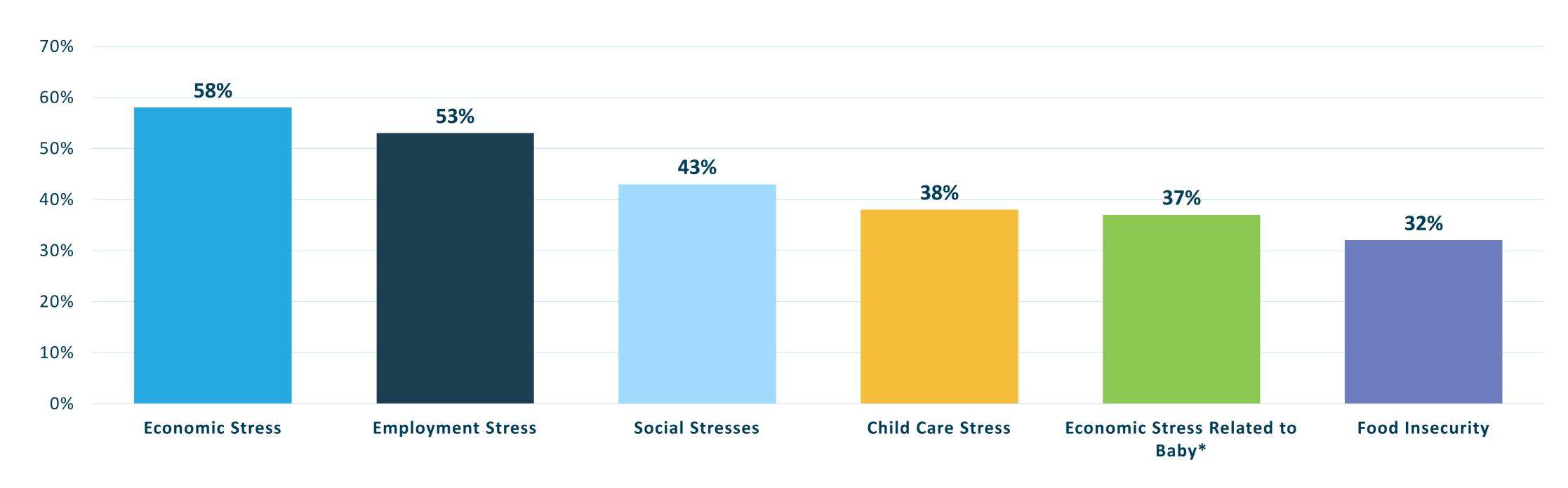
25%
Use Healthcare

Professionals

8% Call 211 8%
Search Online

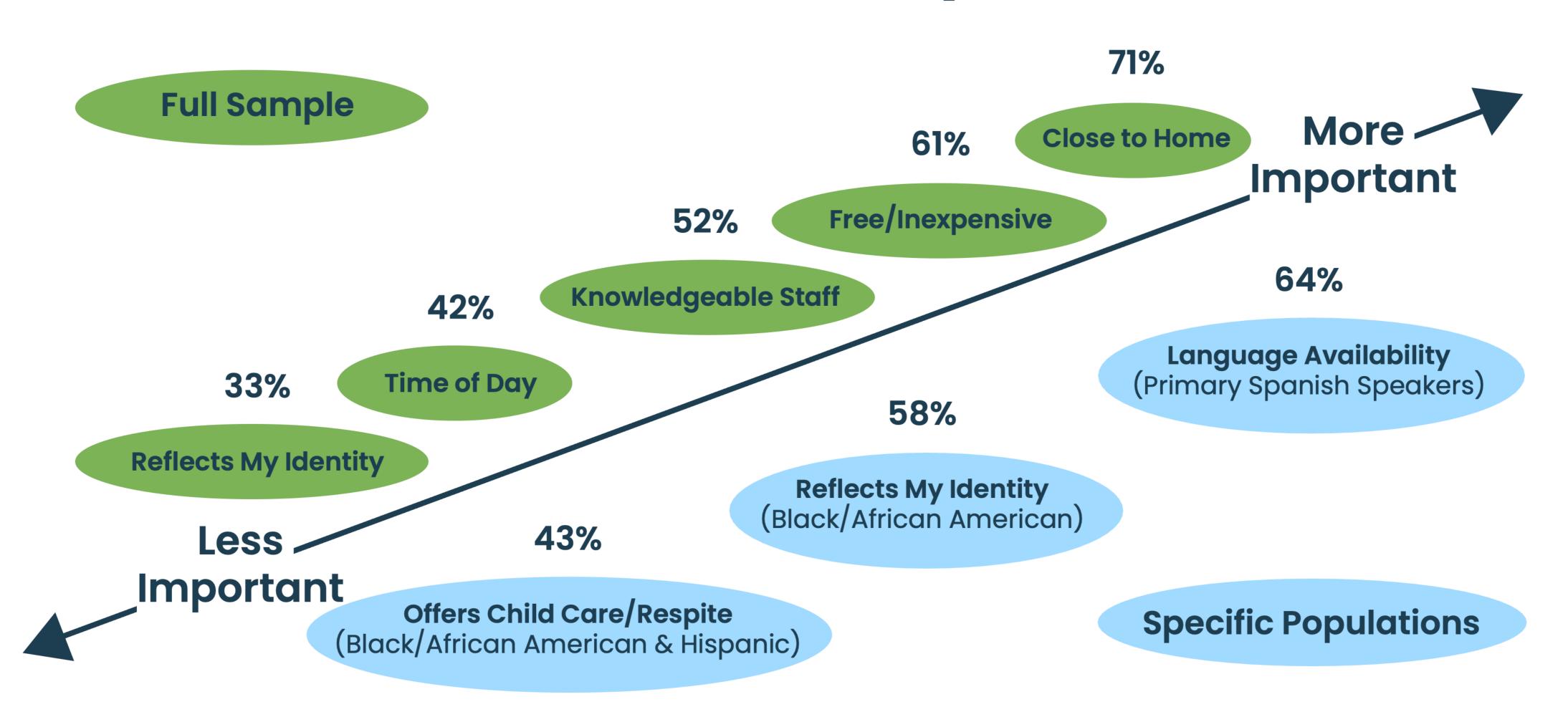
What SDOH Are Mothers Facing in Tarrant County During the Perinatal Period?

Most Cited Social Determinants of Health (SDOH)

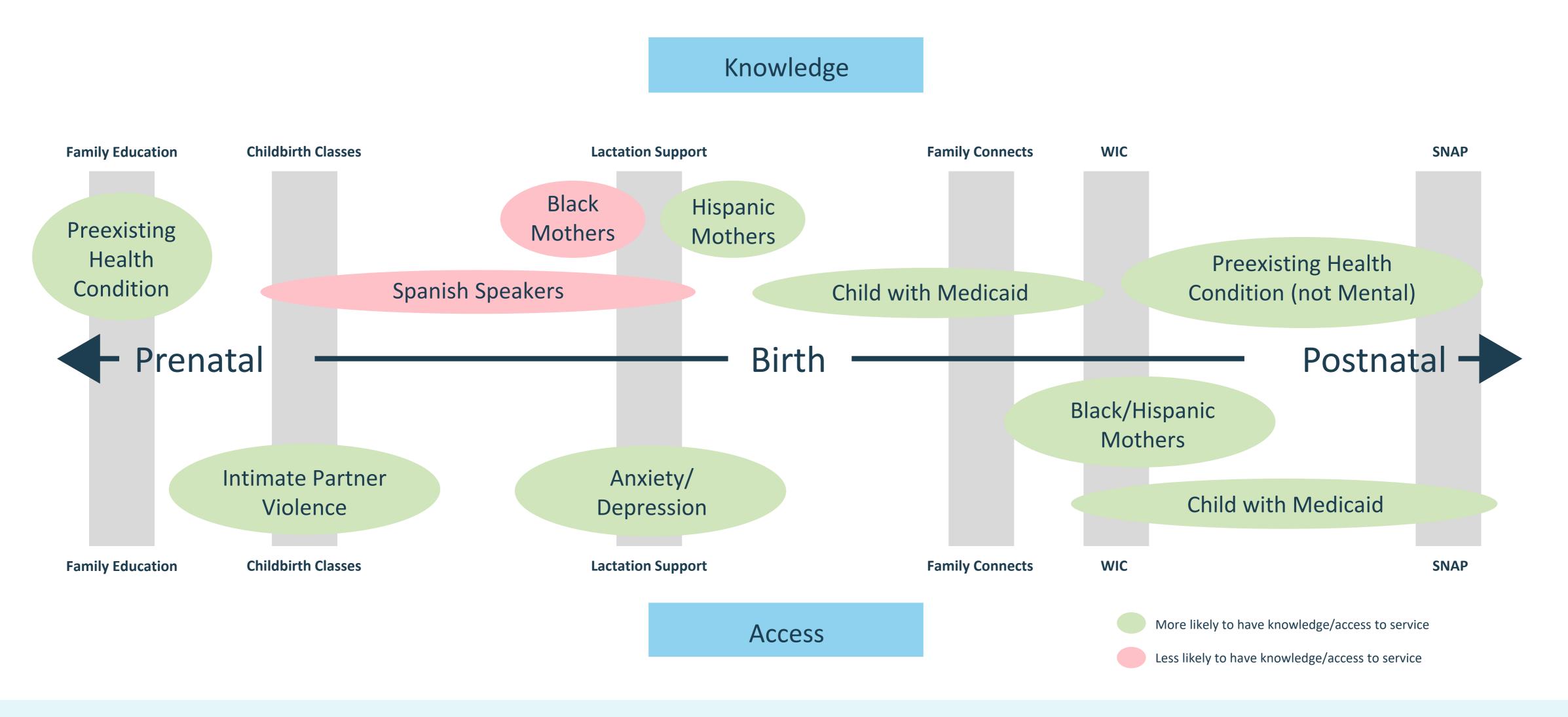


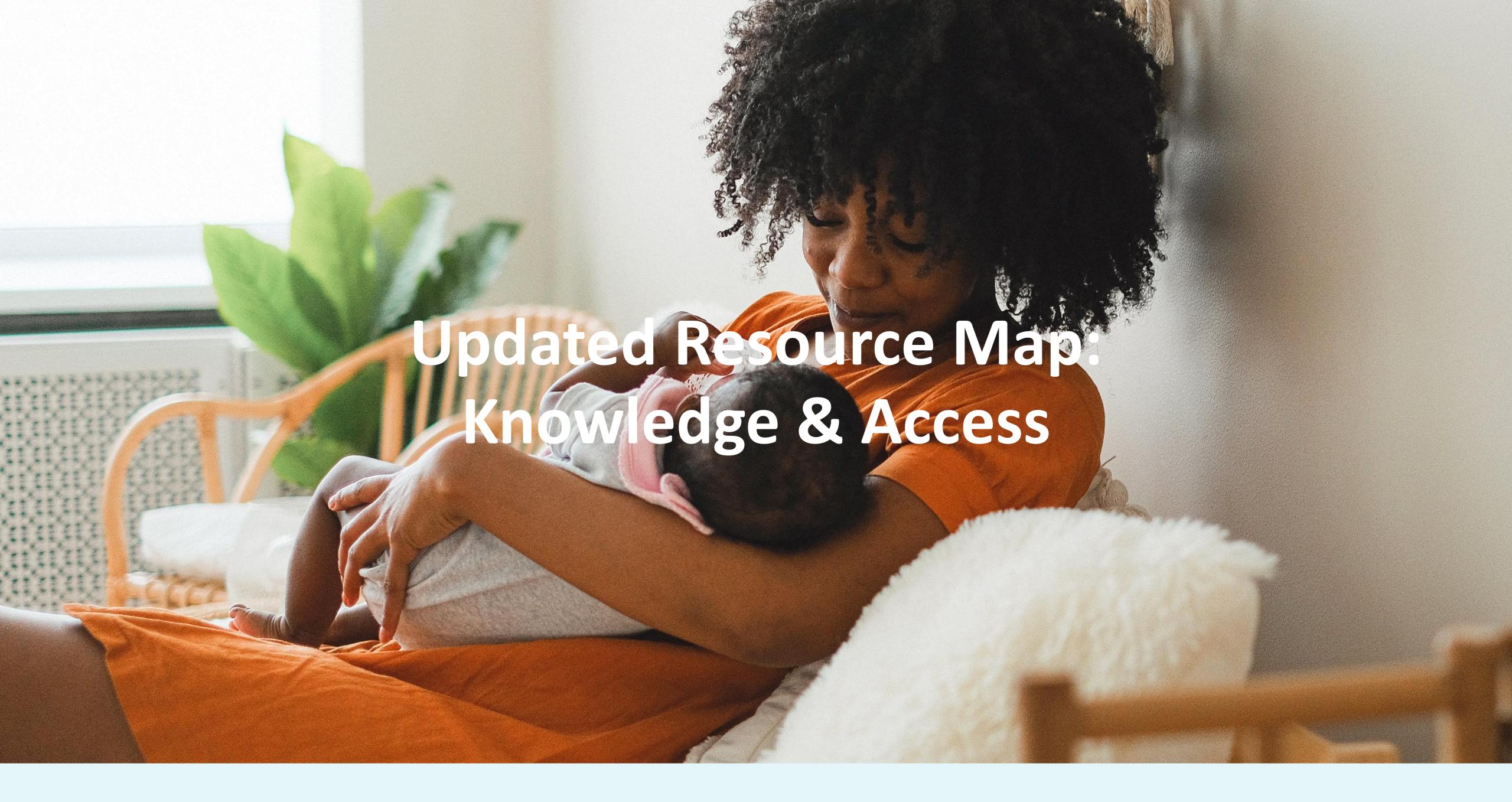
^{*} Trouble purchasing formula and/or diapers

How Do Mothers Rate What's Important in a Provider?



What Factors Impact Mothers' Knowledge & Access of Services?





Knowledge & Usage Continuum





MORE THAN 50%

KNEW OF OR USED SERVICE

NO DATA AVAILABLE

LESS THAN 25%

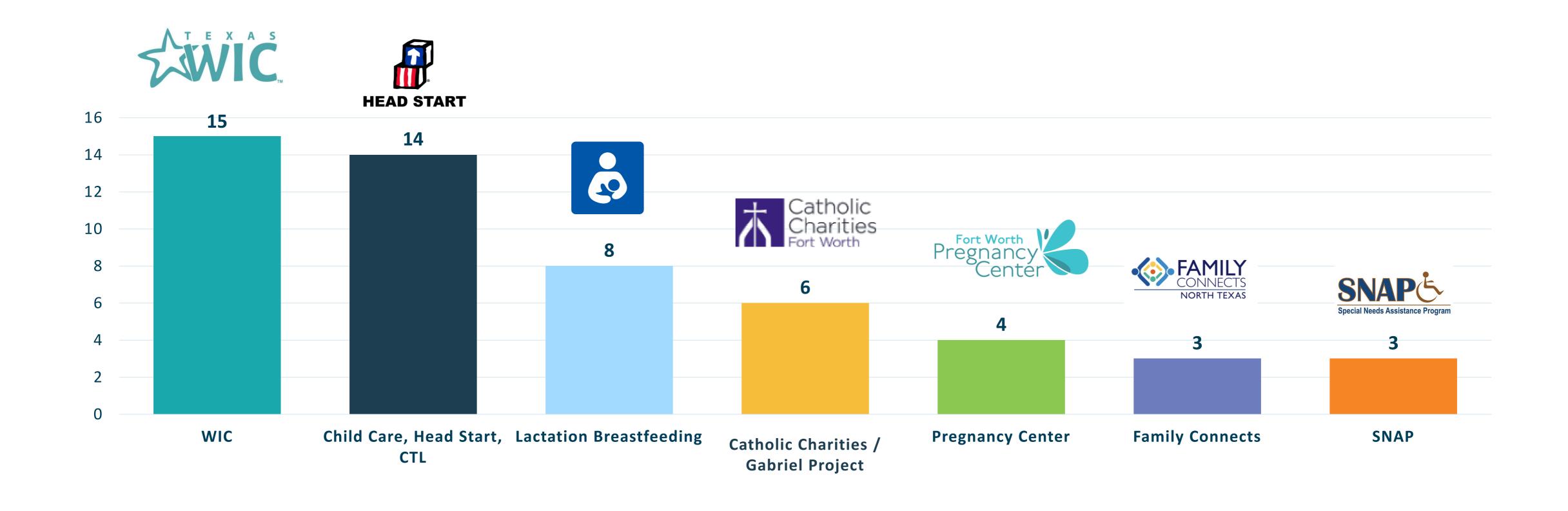
KNEW OF OR USED SERVICE

BETWEEN 26% - 50%

KNEW OF OR USED SERVICE

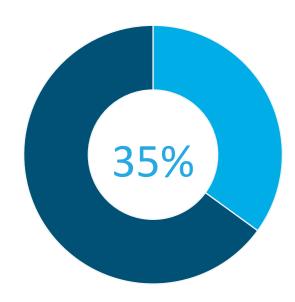
Which Providers Were Cited as Most Helpful?

80% of mothers named a service that was especially helpful

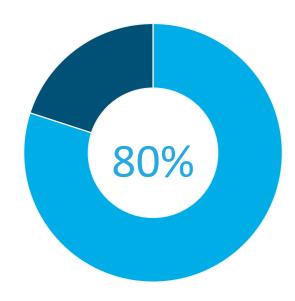


Areas of Concern

Traumatic Birth



While 35% of women reported a traumatic birth, very few received treatment or support for this.



80% (vs. 33%) of women who were treated for hypertension PRIOR to pregnancy reported a traumatic birth.

Disrespectful Treatment*

12% of women in pregnancy

18% of women in labor/delivery

15% of women after the child was born

^{*}Characterized as disrespect based on race, religion, culture, sexual identity, or income level.

How Were the Needs of Mothers Addressed?



All referrals were made directly from the interviewer to the perinatal Help Me Grow navigator at MHMR.

Total Referrals:

36 (46%)

Total Connections Post-Referral:

23 (64%)

Total Referrals to Additional Services:

22 (96%)

Total Closed Loop Referrals:

20 (91%)

(Confirmation that they connected with services)



Potential Areas to Address Moving Forward



Awareness & Access

- 56% of mothers want more support, especially after the birth of a child.
- 39% of mothers wished they had known about all the services they were asked about in the interview.



Usage & Connectivity

- Less than half of mothers who felt they needed mental health support in pregnancy saw a professional.
- 84% of Medicaid recipients with health conditions make it more likely that a family received services.



Mental Health

- 31% of mothers
 described wanting more
 proactive / preventative
 mental health and emotional
 support.
- 44% of the mothers who identified feeling lonely also met the PHQ cutoff for depression



Health Care as Entry Point

- 96% of mothers accessed
 prenatal care
- 89% of mothers had taken their child for a well visit
- Medical facilities account for 50% of referrals

Potential Areas to Address Moving Forward



Awareness & Access

"I have **so many questions**. I wasn't sure what was right or wrong at the end. It felt like the **only solution was calling his pediatrician**which is a great service to have obviously, but not always knowing like if that's the best thing to do."



Usage & Connectivity

"I feel like a lot of the resources that we have are great, we just need more of them. They are limited on the capacity that they can take on for new patients and everything. I just, you know, it'd be nice if there are more, just for everyone."



Mental Health

"[Someone should] like, actually prescribe them a therapist so they can come to their house to see them and help them. Cuz some mothers don't want to get out or are embarrassed by it. Tell them that it's normal, that they are no different. I'd just say more help for the mom going through postpartum".



Health Care as Entry Point

"I appreciated **ECI**, because it kind of opened up a gateway for other things....And you know...hey I'm looking for employment, so she'd say here are the places that are hiring or different work programs. Same things with food, you're in between jobs, so go ahead and apply for SNAP, you know, the different things like that. She'd give me a referral, like she was amazing."

Forward Together: Key Opportunities





Help Me Grow as referral resource navigation for maternal health providers

2



Parent Pass™ free app provides vetted maternal health resources to 8K local parents

3



Aligned outreach & messaging to those populations most at risk

Next Steps: A Closed-Loop Referral System for Tarrant County

1

Hospital Partners

6 Major

Healthcare Systems

2

Impact

54,000

Mothers & Babies per year

3

Community Providers

10+

Local Maternal & Infant Health
Partners











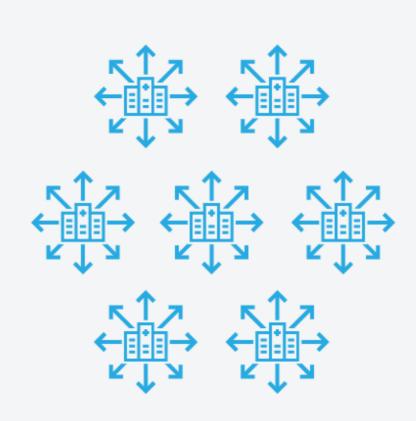


Next Steps: A Closed-Loop Referral System for Tarrant County

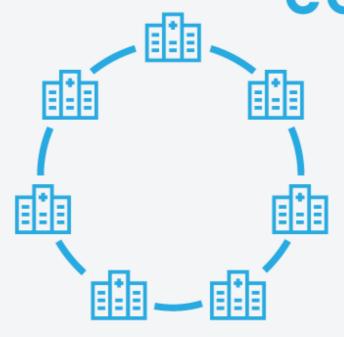
TODAY

Hospital networks referring one-off services

- 1. Baylor Scott & White Health
- 2. Cook Children's
- 3. HSC
- 4. JPS
- 5. MHMR
- 6. THR



CONNECTED TOMORROW



All hospitals connecting with warm hand-off community services helping mothers' biggest challenges

TODAY

TCU School of Medicine students seek meaningful training through connections to community



FORWARD-THINKING TOMORROW



TCU School of Medicine students building community knowledge, closed-loop referral system training before entering the field

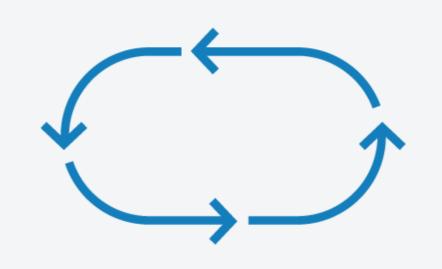
Next Steps: A Closed-Loop Referral System for Tarrant County

TODAY

86% of providers refer out services

 \rightarrow 75% do not know what happens next

DATA-DRIVEN TOMORROW



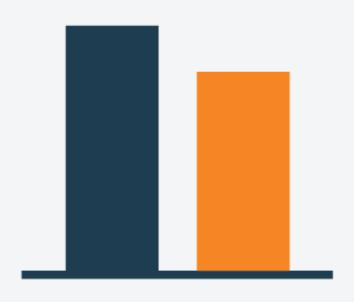
100%

of healthcare providers have referral system and data on connectivity of their referrals

TODAY

2nd Highest Mortality Rate

among Black women in Texas





VIBRANT TOMORROW

54,000 Mothers & Babies

per year THRIVING in Tarrant County through a comprehensive system of care