

Implementing the AIM Perinatal Mental Health Conditions Bundle in MA

**A Focus on Provider Education,
feat. BMC Brighton Team
Presentation**

June 17, 2025



WELCOME!

- Please type your name and institution into the chat.
 - **Optional share: Favorite summer food!**
- Please mute yourselves when not speaking.
- Feel free to type your questions into the chat during the webinar.
- We will record this session and upload the recording and webinar slides to our website afterwards!

Agenda

12:00–12:10 Welcome & PNQIN Announcements

12:10–12:40 BMC
Brighton Team
Presentation

12:40–12:50 PMHC Pearl:
ACOG Modules

12:50–1:00 Discussion,
Q&A



AGENDA

12:00-12:10

Welcome & PNQIN Announcements

Kali Espinola

12:10-12:40

BMC Brighton Team Presentation

12:40-12:50

Pearl: ACOG eModules

Tiffany Moore Simas

12:50-1:00

Discussion, Q&A

All



Reminders & Announcements



Kali Espinola, MPH
PNQIN Senior Project Manager

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12:40–12:50 PMHC Pearl:
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12:50–1:00 Discussion,
Q&A





PNQIN PMHC BUNDLE WORKGROUP



Tiffany Moore Simas, MD
UMass Memorial Health



Kali Vitek, MPH
PNQIN



Brooke Fortin
PNQIN



Amanda Small, RN
MGH/PPD Survivor



Beth Buxton
DPH



Bonnell Glass, MN
PNQIN/UMass



Candice Belanoff, ScD
BUSPH



Cheryl Slater, RN
PNQIN/BMC



Christin Price, MD
PNQIN



Elizabeth Howell, CNM MS
UMass



Elysia Larson, ScD
HMS/BIDMC



Hannah Bonoyer
Sturdy/PMHC Survivor



Jelia Frano
Deloitte/PPP Survivor



Jess Gaulton, MD
FamilyWell Health



Jessie Colbert
Mass PPD Fund



Julia Prentice, PhD
BLC



Karen Manganaro, DNP
PNQIN/BWH



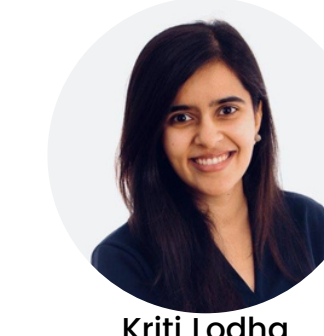
Karen Franklin, MD
Holy Family



Kettie Louis, DNP
BMC



Kristie Leeman, MD
PNQIN/BCH



Kriti Lodha
PSI-MA/PPP Survivor



Leena Mittal, MD
MCPAP for Moms



Maithri Ameresekere,
MD, BMC



Melissa Abell-Bardsley,
RN, CHA



Molly Fraust-Wylie
PNQIN/BIDMC



Pratiksha Yalakkishettar, MD
UMass



Richard Seeber, MD
MGH



Ron Iverson, MD
PNQIN/MGH



Salma Mohamed
MassHealth



Shaniqua Choice
Infinity Equity Consulting



Stephanie Crawford
Propa City
Community Outreach



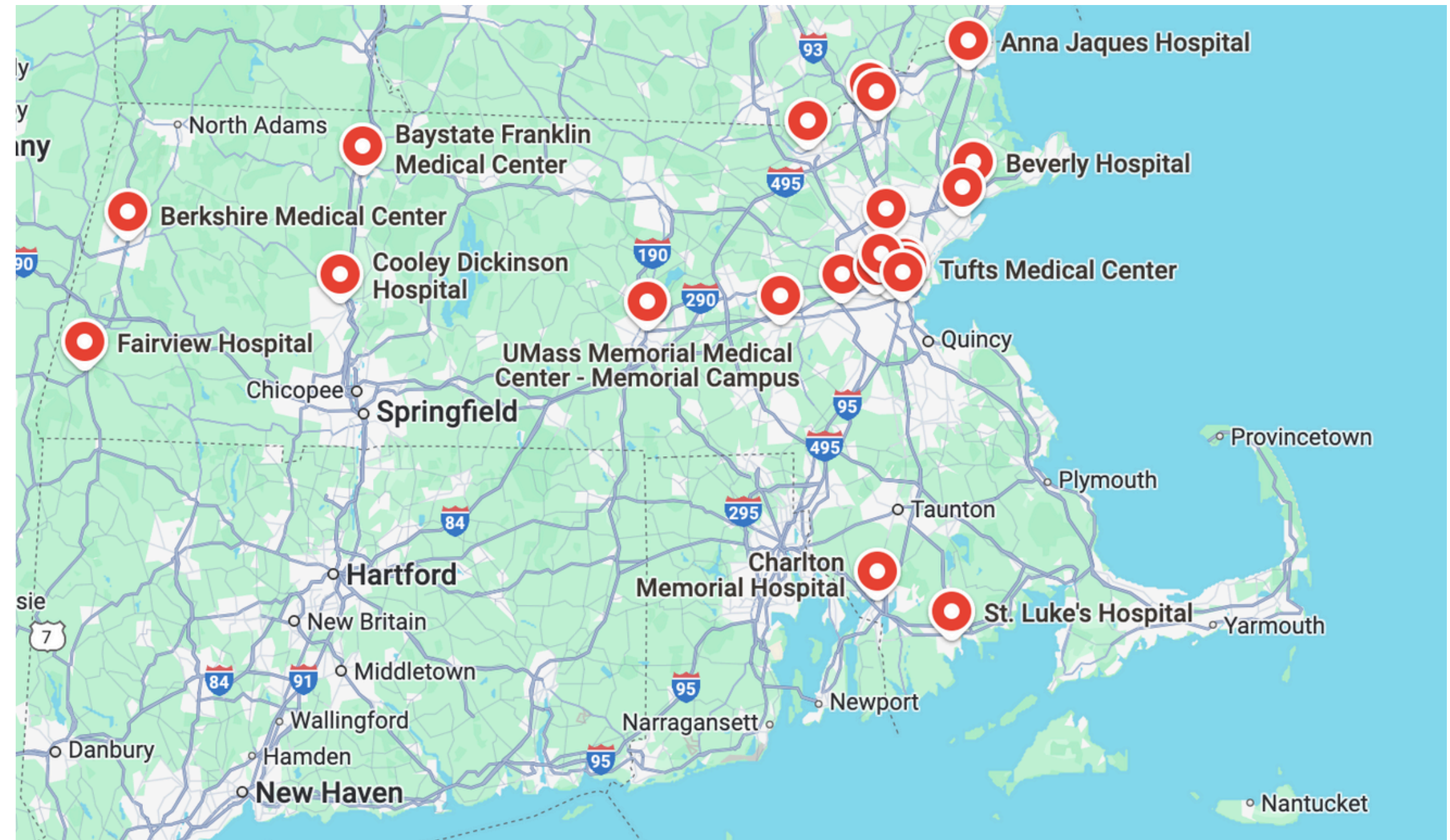
Swathi Damodaran
MassHealth



Uruj Haider, MD
MCPAP for Moms

PMHC BUNDLE: PARTICIPATING HOSPITALS

1. Anna Jaques Hospital
2. Baystate Franklin Medical Center
3. Berkshire Medical Center
4. Beth Israel Deaconess Medical Center
5. Beverly Hospital
6. Boston Medical Center
7. Cooley Dickinson Hospital
8. Fairview Hospital
9. Holy Family Hospital
10. Lawrence General Hospital
11. Lowell General Hospital
12. Massachusetts General Hospital
13. MetroWest Medical Center
14. Mount Auburn Hospital
15. Newton-Wellesley Hospital
16. Salem Hospital



17. Southcoast Charlton Memorial Hospital
18. Southcoast St. Luke's Hospital
19. St. Elizabeth's Medical Center
20. Tufts Medical Center
21. UMass Memorial Medical Center
22. Winchester Hospital



Participation Checklist (Updated)

To be considered fully participating in this bundle between Sept '24 and Feb '26, we ask that you complete:

1. Onboarding steps
 - a. Team Roster, Pre-Implementation Survey, data sharing agreement
2. Monthly data submission (Goal: 9 months or more)
3. Monthly webinar attendance (Goal: 9 months or more)
4. Implementation feedback survey @ 6, 12 and 18 months)
 - a. **Next survey coming in August!**
5. Draft or final sustainability plan
6. Sharing opportunities (webinar presentation, summit poster)



PNQIN Announcements

PNQIN 2025 Spring Summit Highlights



Thank you to the 280+ attendees of this year's Spring Summit!!!

Shout-out to the teams who won PNQIN Awards for their perinatal mental health work:



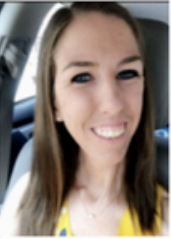
- **Tufts Medicine Lowell General Hospital Perinatal Mental Health Team**
- **Boston Medical Center OBGYN Integrated Behavioral Health Program Team**

Slides and materials from the summit will be posted to the PNQIN website in the coming weeks; thank you for your patience!



Please complete the eval by 6/30 to receive CE Credit or a Cert of Attendance!



OB Integrated Behavioral Health (IBH) Team			
<p>Maithri Ameresekere, MD, MSc, PMH-C She, Her, Hers</p>  <p>Psychiatrist Director of the Women's Mental Health Program</p>	<p>Cassandra Shuffain-Tobin, LMHC, ATR, ECMH-E® She, Her, Hers</p>  <p>IBH Licensed Mental Health Clinician</p>	<p>Resham Gellatly, PhD She, Her, Hers</p>  <p>Psychologist (RWHC)</p>	
<p>Genevieve Williams, MPH, MHC She, Her, Hers</p>  <p>IBH Clinician</p>	<p>Sarah Kirshenbaum, LICSW She, Her, Hers</p>  <p>IBH Clinical Supervisor</p>	<p>Cat Foscaldo She, Her, Hers</p>  <p>IBH Operations Manager</p>	<p>Kala Jennissen MPH She, Her, Hers</p>  <p>Program Coordinator</p>

PMHC Bundle: Toolkit – NOW AVAILABLE!

The Perinatal-Neonatal Quality Improvement Network of Massachusetts

PNQIN Perinatal Mental Health Conditions (PMHC) Bundle Toolkit


Version 2, February 2025



For the most up to date version and resources please refer to the [Perinatal Mental Health Conditions Bundle Website](#).

The Perinatal-Neonatal Quality Improvement Network of Massachusetts

American College of Obstetrics and Gynecology (ACOG) Alliance for Innovation in Maternal Health (AIM) Patient Safety Bundle: Perinatal Mental Health Conditions



[What are AIM Patient Safety Bundles?](#)
A collection of evidence-based best practices developed by experts from many disciplines to address specific conditions in pregnant and postpartum people, especially those which may lead to severe maternal morbidity and mortality. The bundles include action steps and tools, and are built to be adapted to facilities and institutions of all resource levels.

[What is the Perinatal Mental Health Conditions \(PMHC\) Bundle?](#)
The Perinatal Mental Health Conditions Bundle provides a blueprint to improve the quality of care and outcomes for patients with perinatal mental health conditions. This initiative aims to improve the identification and treatment of all perinatal mental health conditions for all patients throughout the entire perinatal period. For the purposes of this bundle, PMHC includes mood, anxiety, and anxiety-related disorders that occur during pregnancy or within one year of delivery, including conditions that may have started prior to conception.

For a full list of conditions, please review page 8 of the [AIM PMHC ICD-10 codes list](#).

Video: [Introduction to Perinatal Mental Health Conditions](#)



The Perinatal-Neonatal Quality Improvement Network of Massachusetts

ACOG AIM Patient Safety Bundle: Perinatal Mental Health Conditions - Links to Materials

[Patient Safety Bundle](#)

- Format: PDF
- Content: Describes the primary drivers of changes in quality of care for Perinatal Mental Health Conditions, with review of AIM's "5 Rs" framework:
 - Readiness,
 - Recognition & Prevention,
 - Response,
 - Reporting & Systems Learning, and
 - Respectful, Equitable & Supportive Care.
- This can be used as a high-level summary of the implementation goals for the PMHC Bundle.

[Element Implementation Details and Guide](#)

- Format: PDF
- Content: Further explores AIM's "5 Rs" Framework by sharing core strategies, aims, implementation phases, and steps to integrate obstetric and mental health care for each of the "Rs" in their framework. This document provides additional context for the Patient Safety Bundle (above).

[Implementation Resources](#)

- Format: PDF
- Content: Utilizing the "5 Rs" Framework, this document provides specific resources that correspond to each R and is an adjunct to the bundle and implementation guide noted above. Resources in this document include, but are not limited to, links to toolkits, webpages, publications, and training modules.

[Data Collection Plan](#)


- Format: PDF
- Content: This document outlines the structure, process, and outcome measures that we ask hospital teams to submit each month via REDCap to track participation in and implementation of this bundle.

[Change Package](#)

- Format: PDF
- Content: This document, developed and published by the Institute of Healthcare Improvement (IHI) and AIM and co-authored by PNQIN's Bundle Lead, Dr. Tiffany Moore Simas, covers the motivation for designing this bundle. More specifically, the Change Package matches resources to "change ideas," which are interventions that are defined to achieve the goal of integrating obstetric and mental health care and is directly aligned with each bundle element.

[Learning Modules](#)

- Format: Webpage, e-Modules
- Content: This webpage acts as a landing pad for free e-Modules, hosted by ACOG and Nursegrid that can be completed for CME/CE credit. Modules are hosted by ACOG and Nursegrid and are specific to each AIM Patient Safety Bundle.



The toolkit is now available on the PNQIN Website at [this link](#).

PMHC Bundle: Community Resources



Home → PNQIN Perinatal Mental Health Conditions (PMHC) Toolkit Resources

PNQIN Perinatal Mental Health Conditions (PMHC) Toolkit Resources

A number of resources included in our toolkit may be updated often, as a result, we have posted them here on our resources page for ease of updating and reference. Please see below! *The links included on this page are intact as of 2/14/2025.*

Resource Mapping/ID of Community Resources

Provider-Specific Resources

- MCPAP for Moms
 - [MCPAP Clinician Resource Page](#)
 - Toolkits
 - [Obstetric Provider Toolkit](#)
 - [Pediatric Provider Toolkit](#)

The resources can be found on the PNQIN Website at [this link](#).

MA Announcements

BCBS Foundation Call for Proposals (due 7/8 at 12pm)

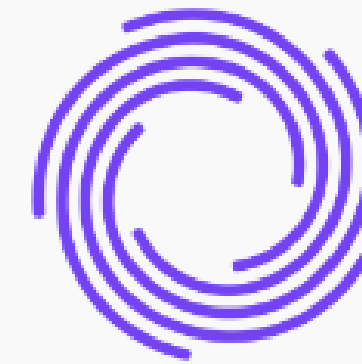
The Blue Cross Blue Shield of Massachusetts Foundation is pleased to announce a call for proposals for the Perinatal Health Initiative grant program.

The Perinatal Health Initiative grant program will provide organizations with grants ranging from \$30,000-\$60,000 a year for two years to support efforts to improve perinatal health outcomes in Massachusetts. These grants are intended to fund work in one of these three categories: Community Education & Support; Policy & Advocacy; Build, Support & Sustain Perinatal Care Team.

For more information about this grant program, including Frequently Asked Questions & Grant Guidelines, [please visit our website.](#)



MASBIRT TTA Motivational Interviewing Virtual Course



HEALTH
RESOURCES
IN ACTION

Discover the value of Motivational Interviewing (MI) in our intensive **five-week virtual course**, "Motivational Interviewing: Foundations and Strategies," offered by MASBIRT TTA. Empower individuals to make positive change by exploring and resolving ambivalence through MI's evidence-based communication style. Learn about MI principles, processes and strategies through self-paced learning, partner activities, and live sessions, with personalized written and verbal feedback to support your skill development.

This training course will run for five weeks from **July 21 – August 22, 2025**. Expect to dedicate 4-5 hours of your time per week.

[READ THE FULL TRAINING COURSE DESCRIPTION HERE](#)
[CLICK HERE FOR APPLICATION LINK](#)



Get Help Running Your Next Emergency Transfer Drill!



Register once for all cycle events. Get started anytime:

<https://stepuptogether.com/focusedactioncycle/#register>

MPDH is supporting Primary Maternity Care's Step Up Together™ Focused Action Cycle. This program is FREE and provides coaching and support for MA teams to **plan and conduct emergency perinatal transfer drills that start in the community and end in the hospital.**

Addition supports include:

- Plan your drill with Step Up Together Faculty assistance, including free technical assistance meetings with leading perinatal quality improvement experts.
- Free on-the-ground support during the drill, including help running the drill and facilitating the debrief
 - Web-based and on-site technical assistance available through June 30
- Free CE education for drill participants: Intermittent Auscultation Simulation-Based Education from Step Up Together and the Institute for Perinatal Quality Improvement (PQI).
 - Course licenses available for all drill participants to be eligible to receive this FREE education module, while supplies last.

STEP UP TOGETHER™

Focused Action Cycle

Spring 2025 Schedule of Events

- REGISTER TODAY**
Sign up for the Focused Action Cycle
- ACCESS & CHOOSE MAY 5**
Access Drill Kits at StepUpTogether.com. Decide to run either an intrapartum **OR** postpartum drill.
- KICKOFF MAY 12 @ 12-1:30 PM ET**
Attend a virtual Kickoff with Step Up Together Faculty and your Drill Implementation Team.
- RUN A DRILL MAY 12 - JULY 13**
Conduct **ONE** Step Up Together Drill. Choose an INTRAPARTUM or POSTPARTUM topic.

DRILL PLANNING LIVE SESSIONS

- MAY 30 @ 12-1 PM ET - **COMMUNITY PLANNING**
- JUNE 12 @ 12-1 PM ET - **EMS PLANNING**
- JUNE 23 @ 12-1 PM ET - **HOSPITAL PLANNING**

Bring your questions and get feedback on your plans from the Step Up Together Faculty and QI Technical Advisors

- SHARE & LEARN JULY 14 @ 12-1 PM ET**
Join our signature **Community Debrief** to maximize learning across all participating teams.
- KEEP IT GOING**
Participate in other Focused Action Cycles and drills on critical topics. Receive coaching; access new resources at StepUpTogether.com.

Seamless and safe transfers save lives.

Support Funding for the Moms Matter Act in the Final FY '26 Budget

Thanks to your support, the tremendous efforts of Sen. Liz Miranda and our other legislative champions, and a broad coalition effort, the Mind the Gap Coalition was thrilled to see funding for the Moms Matter Act – a new grant program established in the omnibus maternal health bill for community-based programs supporting perinatal mental health – in the FY '26 Senate Budget.

But in order for the program to be funded and issue grants, we need to be sure this allocation is included in the final budget, currently being negotiated by a Senate-House Conference Committee.

Click the link to add your name to [this quick action alert](#) to tell the conferees you care about perinatal mental health and support funding the Moms Matter Act!



MA AWHONN 2025 CONFERENCE “Transforming Maternal and Newborn Health: Nurses as Advocates and Leaders for Change” (October 16-17)

Where: Sea Crest Beach Hotel, 350 Quaker Road, Falmouth, MA 02556

Join us too for the pre-conference: “Safe Use of Intermittent Auscultation to Expand Freedom of Movement in Labor” on 10/16 from 1-4pm.

MEMBERS: \$199 Early Bird by August 1st (\$225 Regular)

NON-MEMBERS: \$250 Early Bird by August 1st (\$275 Regular)

PRE-CON: \$75

**CONFERENCE
REGISTRATION**



**ROOM BLOCKS
LINK**



AWHONN

MASSACHUSETTS

PROMOTING THE HEALTH OF
WOMEN AND NEWBORNS



MCPAP for Moms: Training Opportunity

MCPAP for Moms, the Massachusetts State Perinatal Psychiatry Access Program, is available as a resource to providers providing **prenatal, perinatal, birthing, and postpartum care** to individuals in Massachusetts.

MCPAP for Moms helps to build health care providers' capacity to address perinatal mental health and substance use disorders through: **trainings and toolkits, telephone-access to perinatal psychiatric consultation, and facilitation of referral to community resources.**

You can learn more about their services on their [website](#).

As part of their training offerings, **MCPAP for Moms is available to come to your institution for Grand Rounds and/or trainings with affiliated obstetric practices!**

If you are interested in learning more or would like to schedule a time for Grand Rounds, please contact Beth McGinn at: Elizabeth.McGinn@carelon.com



Trailer Out Now: 'So Glad You Asked' from MGH

The **MGH Center for Women's Mental Health** started a **podcast** called '**So Glad You Asked**' where co-hosts, Dr. Ruta Nonacs, a leading expert in maternal mental health and Alice Hales, a mom of four, answer questions from parents about mental health in motherhood and consult expert guests.

Why This Show is Different:

- Every conversation is led by real moms & their questions on air - whether before or during pregnancy, postpartum, or beyond.
- No vague advice - evidenced-based answers & actionable resources.

Listen & subscribe → Listen on [Apple Podcasts](#) or [Spotify](#).



PCORI Grant Study Recruitment

- A team at UMass Chan Medical School is partnering with Postpartum Support International (PSI) on a project in which they will **implement and compare two approaches for helping OB practices integrate obstetric and mental health care.**
- Funded from the Patient-Centered Outcomes Research Institute (PCORI), they **will implement and test these two approaches with 32 obstetric practices across the US**, including practices in Massachusetts.
- All participating OB practices will receive **\$38,500 in funding across four years** of sustained practice involvement.
- *If you are interested in learning more about the study, please contact Nancy Byatt, DO, MS, MBA, DFAPA, FACLP (Nancy.Byatt@umassmemorial.org)*



National Announcements

AIM Sustainability Community of Learning (6/20)

Join us on **Friday, June 20th, 2025 at 2PM** for session 4 of AIM's Sustainability Community of Learning titled, Sustaining the Gains Amidst Changes in Policy and the Healthcare Landscape.

In this session, participants will discuss considerations and responsive strategies for responding to policy or guideline changes that may affect clinical care delivery. We will also cover best practices for communicating new changes and their impacts on PSB project sustainability.

If you haven't already, please [click here](#) to register.



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH



Pre-Con TeamBirth Masterclass at AWHONN 2025 (6/21)

Time: 8:00am-5:00pm

[Learn more by watching this video!](#)

PC3: TEAMBIRTH MASTERCLASS

ENHANCING TEAMWORK AND PATIENT-CENTERED COMMUNICATION IN OBSTETRIC CARE

AWHONN PRE-CONVENTION | SATURDAY, JUNE 21 | 8AM-5PM

Are you interested in implementing TeamBirth? Join us at AWHONN 2025 in Orlando, FL for a TeamBirth Masterclass and dive into evidence-based strategies for enhancing teamwork and communication during birth and beyond.

TEAMBIRTH 



There will be a Pre-Con TeamBirth Masterclass on June 21st at the AWHONN 2025 Convention. This hands-on session is designed for those who are interested in implementing TeamBirth, those who have already implemented TeamBirth and would like a refresher, and those who are newly working at an existing TeamBirth facility and would like formal training and onboarding to the program.

The one-day session is also a great fit for those who are newly working at an existing TeamBirth facility and would like formal training and onboarding to the program. This applies to any new leaders at the 10 sites PNQIN supported 2 years ago in TeamBirth implementation!

Thank you for your continued partnership and support of TeamBirth!



NICHQ Safe Sleep Webinar (6/26 at 2pm)

Join NICHQ for an upcoming webinar, **Keeping Our Babies Safe: Working Together to Reduce Sudden Unexpected Infant Death (SUID)**, featuring maternal and child health experts and community advocates who will share their experience and strategies for promoting infant safe sleep. This event is designed to ignite Safe Sleep Champions, who are dedicated to advancing safe infant sleep education and reducing sleep-related infant deaths.

What You'll Learn:

- Why Infant Safe Sleep Education is Important
- Strategies from Communities Committed to Preventing Infant Sleep-Related Deaths
- What's Next? – The National Community Partnership to Promote Safe Sleep Initiative

An email with the webinar recording will be sent out after the event.

[Click here to register!](#)



**National Institute
for Children's
Health Quality**



Measles, Mumps, Rubella (MMR) Vaccination and Management of Obstetric–Gynecologic Patients During a Measles Outbreak

We wanted to bring to your attention that ACOG has released an updated practice advisory on the vaccination and management of obstetric-gynecologic patients during a measles outbreak.

This resource provides key recommendations and information on MMR vaccination, measles immunity, and management of patients with suspected and confirmed measles.

[Click here to read the full advisory.](#)



ACOG

The American College of
Obstetricians and Gynecologists

| **Clinical**



Team Presentation: BMC Brighton (formerly St. Elizabeth's Medical Center)



Agenda

12:00–12:10 Welcome &
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12:10–12:40 BMC
Brighton Team
Presentation

12:40–12:50 PMHC Pearl:
ACOG Modules

12:50–1:00 Discussion,
Q&A

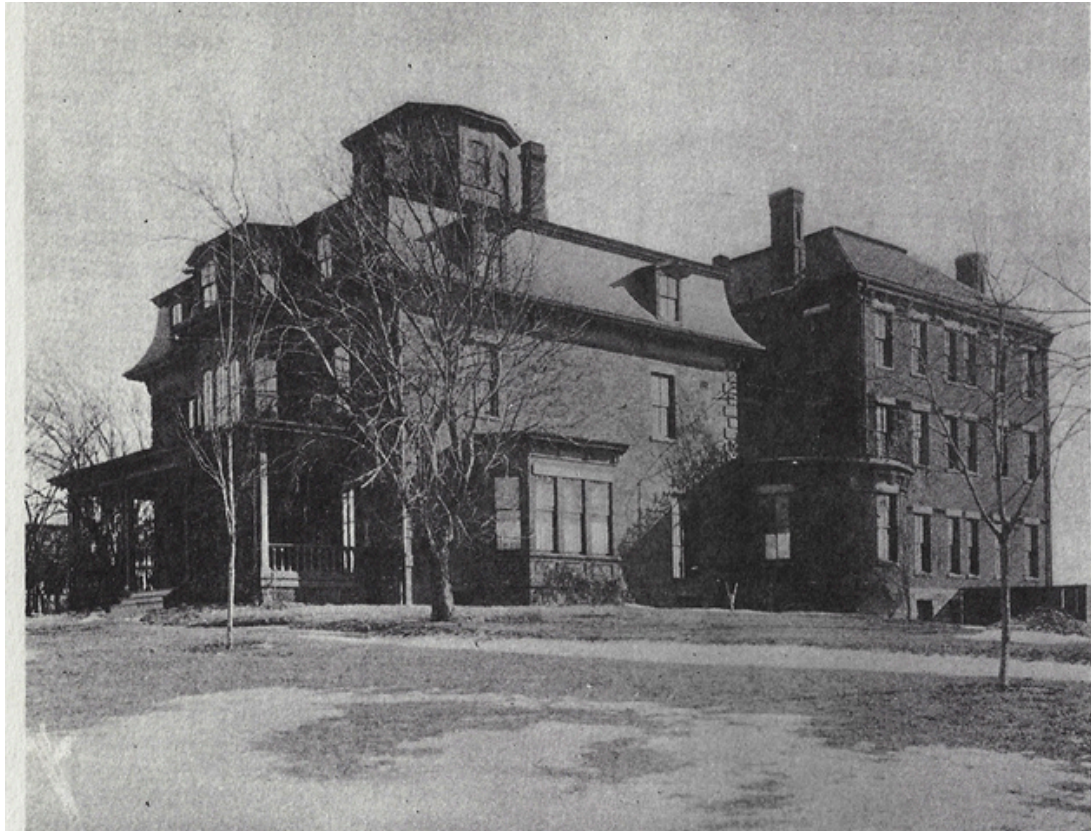


Implementing the AIM Perinatal Mental Health Conditions Bundle in MA



Team Presentation:
Boston Medical Center Brighton
6/7/2025
Noon





St. Elizabeth's
Medical Center is now

BOSTON
MEDICAL
Brighton

Boston Medical Center Brighton

- 11 LDRs, 2 ORs, 15 post-partum rooms
- 15 NICU beds, MFM services
- Teaching hospital: BU & Tufts students, residency programs

- Community: Diverse with large Russian community in addition to Brazilian, Central American, Haitian Creole

- Our team leaders:
 - Dr Rakhil Borshchevskaya, OB
 - Kara LeBlanc, RN, PPD
 - Hannah Fish, LICSW (Outpatient)

Team Members: Jennifer Andrade, CNP, Rita Morrocchio, Practice Manager, Lisa Capra, MD Peds, Anna Rhyne SW student, Connie Shulkin-O'Brien, Colleen Harris RN, Elizabeth Aldridge RN

Mini-Collaborative Spring 2024

- Team:
 - Karen Franklin, OB
 - Kara LeBlanc, RN, PPD
 - Hannah Fish, LICSW
 - Connie Shulkin-O'Brien, RN, Director
 - Katie Matta, OB
 - Lisa Capra, Peds
- Stakeholders
- Focus: TIC training
- Opportunity: Interest, Nurse Appreciation Week, resources
- Thank you - Reid Mergler, Danielle Burton, Jean Hostage

Trauma Informed Care Reference Sheet

3 E's of conceptualizing trauma



The **EVENTS**
The **EXPERIENCE** of the event
The **EFFECTS** of the event
Sometimes the effects are noticed first. You do not always learn about the event or experience via disclosure.

4 R's of practicing TIC

- Realize** • the widespread impact of trauma
- Recognize** • signs and symptoms of trauma
• in patients, families, staff and clinical team
- Respond** • by fully integrating knowledge about trauma into policies, procedures and practices
- Resist** • retraumatization

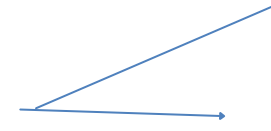
The 6 Principles of TIC



Driver Diagram

AIM
By Aug 1, 2024
70% of the MBU staff will complete formal training in TIC

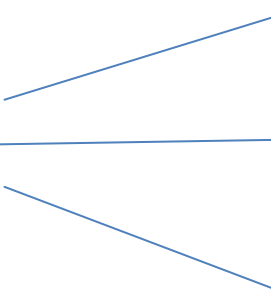
Training Materials



Content

Method

Trainers/Content Experts

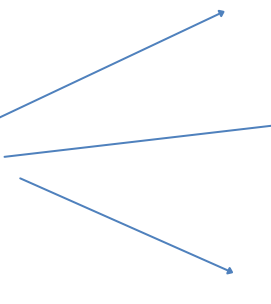


Budget

SEMC Resources

Outside resources

Data Collection

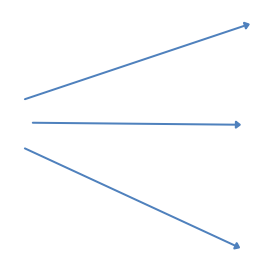


Staff roster

Baseline data

Post-training survey

Staff Engagement



Champions

Communication

Rewards? CEUs?

OB guidelines/PNQIN

On-line vs small group

IHR

Buy-in from C-suite

SEMC modules

Grand Rounds

Psychiatry/SW?

Post-survey

Health stream

Needs assessment

NP counsel

Display on Unit

Weekly reminders



Mini Collab

- Pre-survey on knowledge and comfort with Trauma Informed Care
- Consult with IHR: Laura Sternberger
- May Nursing lecture on TIC as part of a symposium on Mental Health for Nurse Appreciation week
- June 13 OB Grand Rounds by Dr Reid Mergler, Perinatal Psychiatrist on TIC
- Attendees reported increased knowledge and confidence in applying TIC principles
- Challenges: bankruptcy, prolonged medical leave, loss of staff

Project Goals Fall 2024

- Standardize patient education about perinatal mental health conditions
- Standardize screening for perinatal mental health conditions
- Staff training on perinatal mental health conditions
- Multidisciplinary committee: inpatient and outpatient, psychiatry, case management, patient representative?

Patient Education - Thank you Milford

- **By Jan 30, 2025, 75% of patients discharged from the MBU will have PMHC education documented**
- PSI hand-out on Perinatal Mental Health Conditions
- Unit signs with QR code to PSI website
- Bulletin Board to track progress
- Challenge: standardization of documentation
- Intervention: individual feedback
- AIM adjusted to April 30 with goal of 85% of patients
- **Reached 83%**



POSTPARTUM SUPPORT
INTERNATIONAL

MAGNET Project (thank you MW and Lowell)

- To create a tool for patients that will help them **access** perinatal mental health services after they go home
- The tool should be **inclusive**: available in patients' languages and easy to understand even for people who cannot read
- The tool should be **easy** to reference at home – a magnet on the fridge
- The tool should be **cost-effective** and not too burdensome for staff

PNQIN Magnet Project

EMOTIONAL SUPPORT



1-833-852-6262

ENGLISH



ENGLISH

APOYO EMOCIONAL



1-833-852-6262

SPANISH



ESPAÑOL

PDSA #1:
**Distribute magnets and collect
feedback the month of March**

Timeline

- **Feb 18-24:** Educate UC & staff about magnets
 - Bulletin board
 - Email
 - Communication book
 - Huddles
- **Feb 24:** Place magnets next to UC computer
 - start distributing magnets
 - Discuss on daily huddles
- **March 20:** Start collecting feedback at postpartum checks

Process for giving out magnets

UC prints
discharge
summary for family

UC gives RN
envelope and
magnet

RN gives family
magnet while
teaching about
PMHC

RN documents
magnet in
Meditech notes
(same place as PSI
documentation)

Process for collecting feedback

- Dr B's patients will be asked to provide feedback at their postpartum check ups
- Easy Y/N questions on a card
- Bright Yellow Cardstock
- MAs

Perinatal Mental Health Magnet Feedback Card

DATE _____ English Spanish

Did patient remember receiving a magnet?
 Yes No

Did the patient know what the magnet was for?
 Yes No

Did patient use the magnet? (put it on fridge or display)
 Yes No

Did the patient use the information on the magnet (phone # or QR code)
 Yes No

Please add any comments to back of card

PDSA Results

- 10 cards collected
- **None** remembered getting the magnets
- Reasons: "medicated", "too many things going on at the time", "was not handed to them"
- **Adapt:** will try reprinting at a bigger size and giving them out late in pregnancy and again at postpartum visits



Screening for PMHC

- **By Jan 31, 2025, 100% of patients discharged from MBU will have a documented Edinburgh**
- 5 "rights" of patient education/screening
- Book with validated Edinburgh in variety of languages
- Challenge: Haitian Creole tool, prenatal screening
- Adjusted AIM to 100% of patients screened by April 30
- **February ice cream party to celebrate success, continued 100% April**



ThePhoto by PhotoAuthor is licensed under CCYISA.

Staff Education

- Goal was for all staff on NICU, MBU and L&D to receive training on Perinatal Mental Health Conditions
- Thank you Lowell for sharing slide deck!
- Challenges: Platform, change in leadership, competing demands
- Pre/Post-test, video of slide deck with a few TIC slides added
- Progress: 60% took pre-test, 23% have completed training
- Positive feedback: Vast majority found it very helpful, several asked for in-person training as well

NEXT STEPS

- Continue staff education
- Implementation of GAD-7 screening
- Implementation of RHS-15 for our Haitian patients
- Revision of our clinical practice guideline
- Recruitment of inpatient Social Worker
- Continue to refine magnets



Administer Edinburgh and GAD 7 Screens

GAD 7= \leq 5 and Edinburgh
 <10

GAD 7=5-9 **OR** Edinburgh
10-12

GAD 7= \geq 9 **OR** Edinburgh
 >12

Patient answers YES to
question 10 about self-
harm

Put in SW consult for
psycho-social support.
Book 2 week follow up
appointment

Put in SW Consult.
Notify OB *Email
Hannah Book 2-week
F/U

Administer suicide
assessment Notify OB
Consult SW

*email Hannah the
patient's name, MRN
and phone number.
She will call patient
within 2 business
days

Patient answers NO to
suicidal ideation or is
cleared by Psych

Patient screens YES to SI
Implement suicide
precautions Page
Psychiatry Notify OB
provider

Challenges/ Lessons Learned

- Equity – cultural awareness, languages, patients that cannot read
- Data Collection – Meditech/Athena
- Timing is everything
- Importance of having the right stakeholders, patient engagement?
- Great benefit of participating in a collaborative and learning from others!

Thank you!!!

PMHC Bundle Pearl: ACOG eModules



Tiffany Moore Simas, MD, MPH, MEd, FACOG
UMass Memorial Medical Center

Agenda

12:00–12:10 Welcome &
PNQIN Announcements

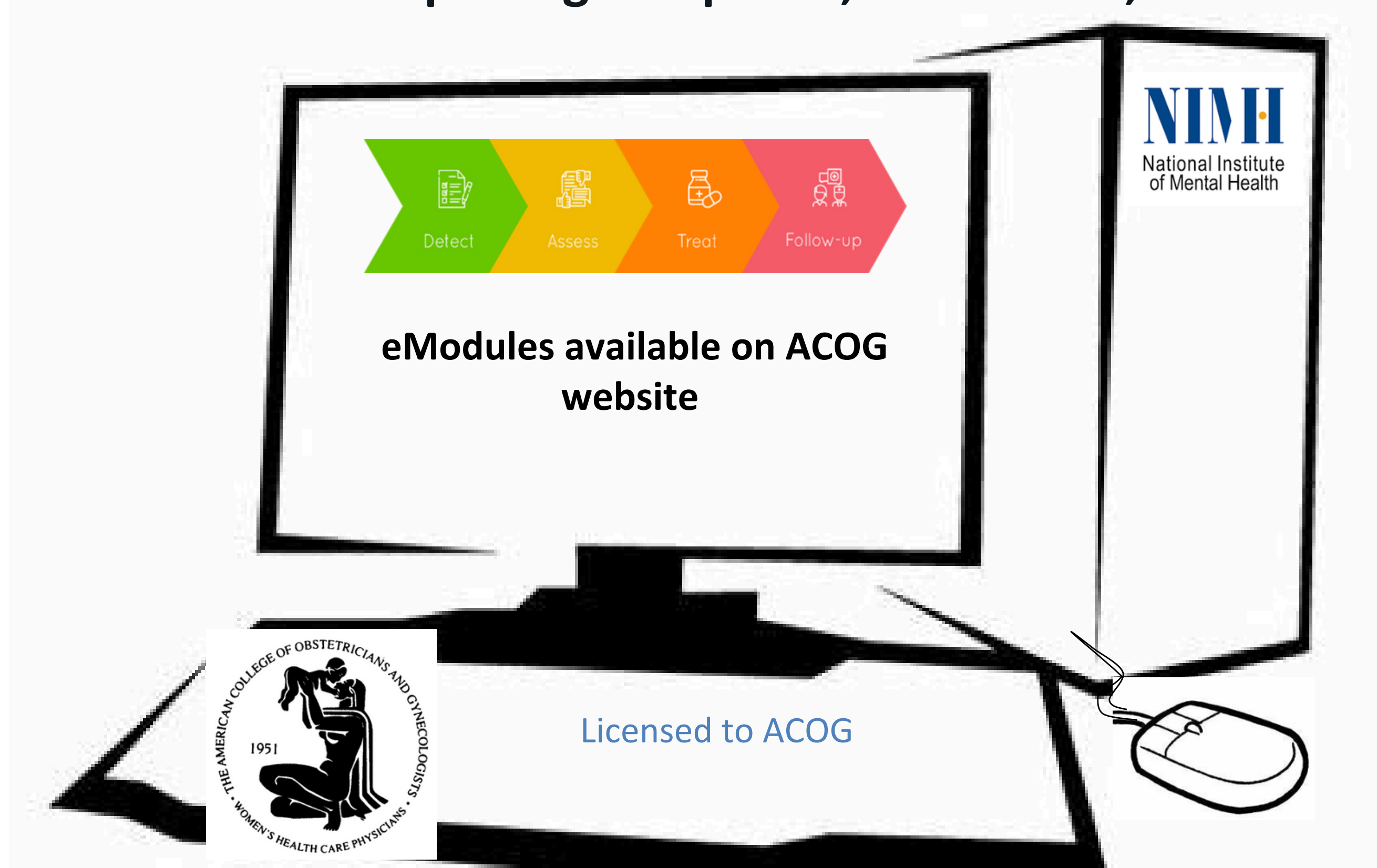
12:10–12:40 BMC
Brighton Team
Presentation

**12:40–12:50 PMHC Pearl:
ACOG Modules**

12:50–1:00 Discussion,
Q&A



Lifeline for Moms eModules provide training in detection, assessment, treatment and follow-up using self-paced, case-based, interactive design







Case-Based

Menu Resources

Screening four of Dr. Silva's patients:

Patients ➔ Detect ➔ Assess ➔ Treat ➔ Follow Up

Patients	Detect	Assess	Treat	Follow Up
 Julie 2nd child 14 weeks GA ● EPDS ● Self-Harm ● MDQ ● GAD-7 ● PC-PTSD-5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Sofia 1st child 6 weeks PP ● EPDS ● Self-Harm ● MDQ ● GAD-7 ● PC-PTSD-5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Adele 1st child 26 weeks GA ● PHQ-9 ● Self-Harm ● MDQ ● GAD-7 ● PC-PTSD-5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 Olivia 1st child 26 weeks GA ● EPDS ● Self-Harm ● MDQ ● GAD-7 ● PC-PTSD-5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

● Positive ● Negative

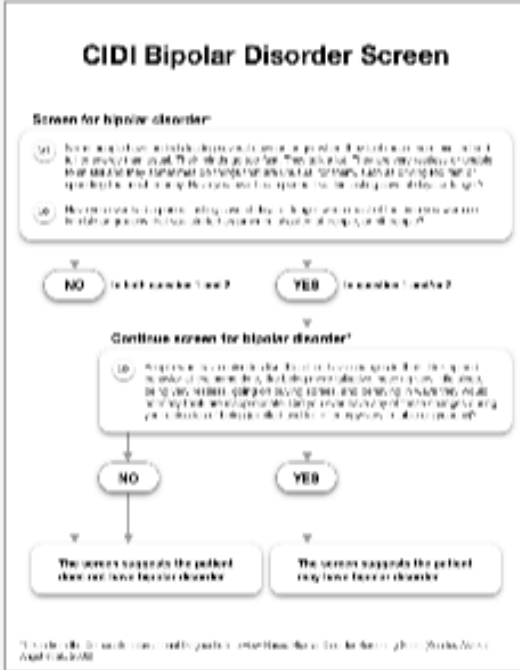

Assessment, a critical next step, will be the focus of the next section.

Suggested resources readily available

Menu Resources

Assessment: Patient 3 - Adele

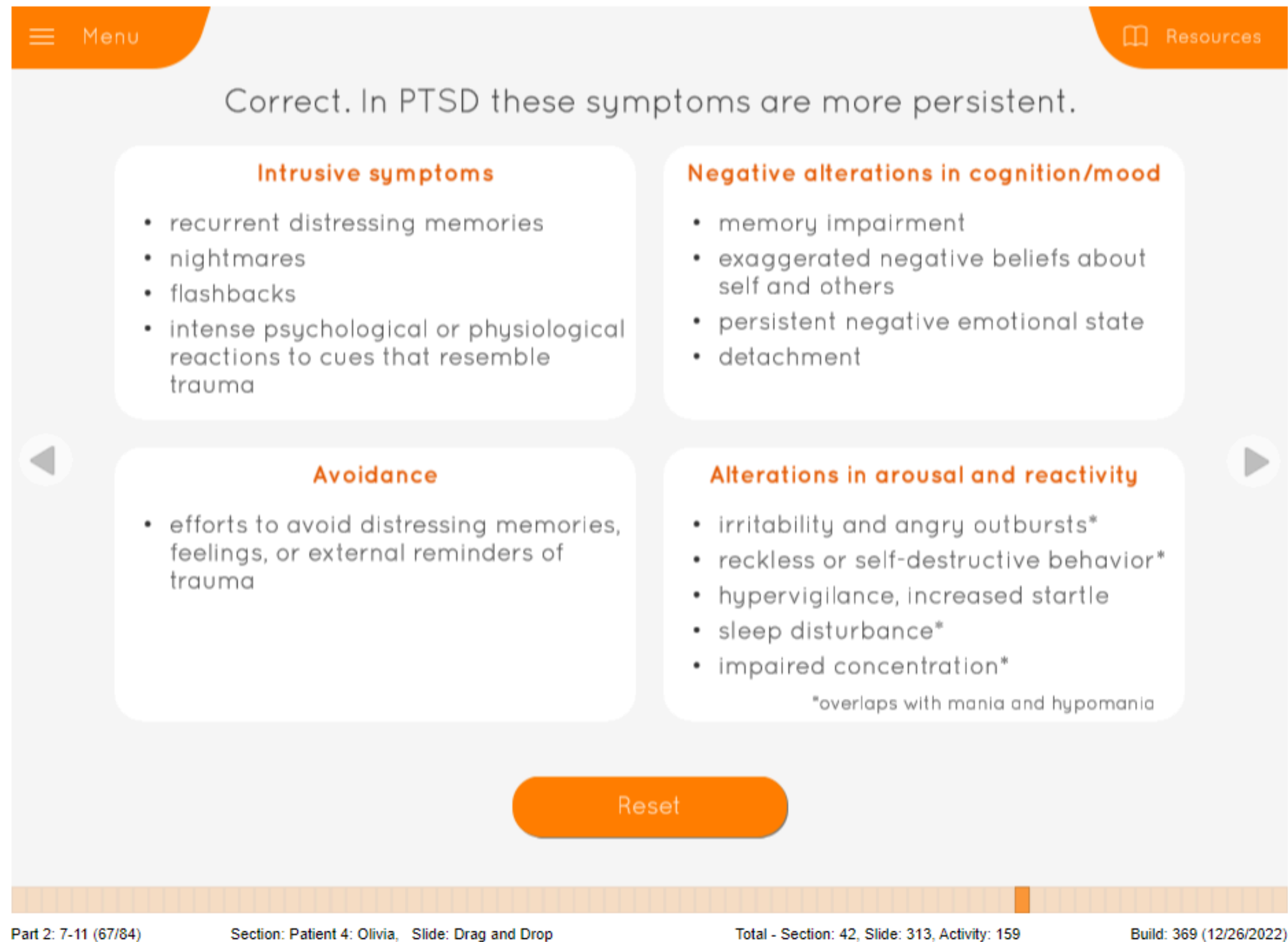
If Adele hadn't completed the MDQ at a previous visit, the **Composite International Diagnostic Interview 3-Question Bipolar Stem** (CIDI, available in Resources) could be administered verbally.



The flowchart, titled "CIDI Bipolar Disorder Screen", is a decision tree for screening bipolar disorder. It begins with the instruction "Screen for bipolar disorder:" followed by two numbered questions: (1) "Have you ever had a depressive episode in which you were sad, lost interest in things you used to enjoy, or had changes in your eating or sleeping habits?" and (2) "Have you ever had a manic episode in which you were unusually happy, energetic, or confident, or had a decrease in the need for sleep?" Both questions have "NO" and "YES" response options. If the answer to either question is "YES", the flowchart proceeds to a "Continue screen for bipolar disorder?" step with question (3): "Have you ever had a depressive episode in which you were sad, lost interest in things you used to enjoy, or had changes in your eating or sleeping habits, or had a manic episode in which you were unusually happy, energetic, or confident, or had a decrease in the need for sleep?" This question also has "NO" and "YES" options. Both "NO" and "YES" paths from question (3) lead to the final outcome: "The screen suggests the patient may have bipolar disorder."

Click to Enlarge

Interactive



The slide features a light gray background with an orange header bar at the top. The header bar contains a 'Menu' icon on the left and a 'Resources' icon on the right. The main content area is centered and contains a text prompt at the top, followed by four symptom categories in rounded white boxes. Each category has a list of symptoms. A 'Reset' button is located at the bottom center. Navigation arrows are on the left and right sides. A progress bar is at the bottom of the slide area.

Menu Resources

Correct. In PTSD these symptoms are more persistent.

Intrusive symptoms

- recurrent distressing memories
- nightmares
- flashbacks
- intense psychological or physiological reactions to cues that resemble trauma

Negative alterations in cognition/mood

- memory impairment
- exaggerated negative beliefs about self and others
- persistent negative emotional state
- detachment

Avoidance

- efforts to avoid distressing memories, feelings, or external reminders of trauma

Alterations in arousal and reactivity

- irritability and angry outbursts*
- reckless or self-destructive behavior*
- hypervigilance, increased startle
- sleep disturbance*
- impaired concentration*

*overlaps with mania and hypomania

Reset

Part 2: 7-11 (67/84) Section: Patient 4: Olivia, Slide: Drag and Drop Total - Section: 42, Slide: 313, Activity: 159 Build: 369 (12/26/2022)

Visuals and voice-overs (minimized)


Menu Resources

Treat at the Highest Level of Symptom Severity

In the example represented below, a patient reports both mild and moderate symptoms (the red boxes). She reports active suicidal ideation (SI) and difficulty caring for herself and baby. Taken together, this would merit concern for and treatment of severe illness.

Indicators	Mild	Moderate	Severe
EPDS score	10-14	15-19	>19
PHQ-9 score	10-14	15-19	>19
GAD-7 score	5-9	10-14	>14
Suicidal ideation	None	Present	Intent and/or plan; Previous attempt(s)
Suicidal attempt	Distant; Pre-adult	Within the last 3 years	Within the last year
Feeling hopeless, helpless, worthless	None	Sometimes	Often
Recent psychiatric hospitalization	None	Yes	Yes; Multiple
Ability to care for self or baby	No difficulty or minimal difficulty	Some difficulty	Often feels unable
Other	Normative stress response to current event	Substance use during pregnancy/lactation	Hallucinations, delusions, or other psychotic symptoms; History of multiple medication trials

Click to Enlarge



Highlighted summaries

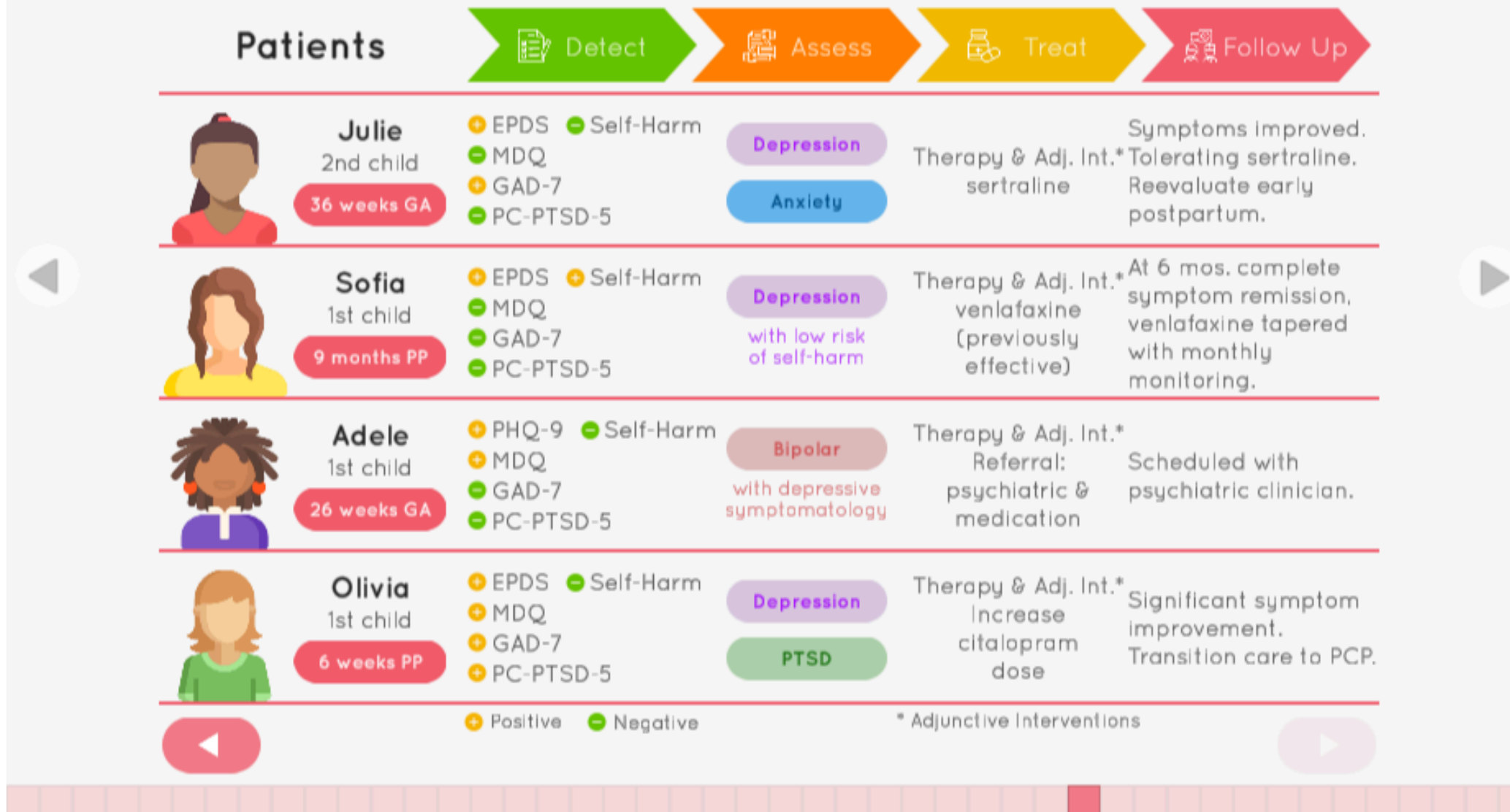
Menu Resources

Summary of Illness Severity

Indicators	Mild	Moderate	Severe
EPDS score	10-14	15-19	>19
PHQ-9 score	10-14	15-19	>19
GAD-7 score	5-9	10-14	>14
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Part 2: 9-2 (82/84) Section: Recap, Slide: Symptom Severity Total - Section: 42, Slide: 313, Activity: 159 Build: 369 (12/26/2022)

Dr. Silva's treatment across four patients:



Instructions for Accessing the ACOG eModules: Addressing Perinatal Mental Health Conditions in Obstetric Settings

1. Navigate to the [ACOG eModules webpage](#).
2. Click “Access Course” button.
3. This course is **free of charge** but requires logging in to access. *Follow the instructions to create an account, if needed.*
4. Complete the 12-question pre-test.
5. Launch the course content (if you use a Pop-up blocker, disable it prior to launch).
6. Take the course, which has 4 modules:
 - a. Detect (~30 mins)
 - b. Assess (~30 mins)
 - c. Treat (~45mins)
 - d. Follow-up (~15mins)
7. Complete the 12-question post-test.

No need to complete in one sitting! If you exit/log out of the course and come back, you will resume where you left off.

OPTIONAL:

- Take eModule feedback survey (5 questions)
- Review the reference list

TO RECEIVE CREDIT:

- Take CME Evaluation (11 questions) and download certificate.
 - 2 AMA PRA Category 1 Credits™.
 - 2 Category 1 College Cognate Credits.

Any Questions?



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UMass Memorial Medical Center

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12:50–1:00 Discussion,
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Thanks for joining, see you on 7/15!

Have questions?

Email PNQINAdmin@pnqinma.org!

