

Women/Maternal Health – Objective 1.4 Pregnancy Intention Screening

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REPORT – October 2021 through September 2022

Reproductive Life Plan (RLP) Workbook: The RLP workbook was developed through a partnership between KDHE, Cradle Kansas City, Vibrant Health, The Unified Government of Wyandotte County Public Health Department, and March of Dimes. Review, feedback and editing was provided by the Cradle Kansas City Community Action Board. The workbook was piloted and tested by community members in Wyandotte County.

Cultural considerations for preconception health education have had an impact on provider comfortability with preconception resource education and reporting. Work emphasizing toolkits from the Reproductive Health National Training Center will be central to upcoming work in the Woman/Maternal domain.

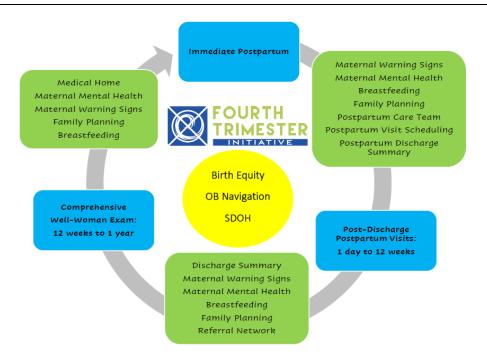
Long-Acting Reversible Contraceptives (LARC): The LARC Toolkit was created through the work of many state and local partners with a shared interest in providing LARC services to women. The toolkit is intended to be utilized by Kansas Title V MCH programs, Kansas Title X Family Planning programs, and local partnering providers to collaboratively develop an adequate system of care. Information in the toolkit is based on sound research and recommendations from The American College of Obstetricians and Gynecologists.

Systemic barriers to accessing preconception healthcare during this year have been considered. These barriers mirror barriers to that of well woman visits and include; costs associated with devices due to pandemic related supply chain issues, provider availability, lack of access to quality childcare, pandemic related restrictions to the number appointment attendees, no consistent state-wide, nation-wide, or employer policy paid-time-off available to attend medical appointments, as well as cultural impacts of well-woman care in Kansas.

Despite coverage of preventative services under the Affordable Care Act through 2021, Kansas had an uninsured rate higher than national average. KS Medicaid Medical Director, hired in 2022, continues to support and provide education around immediate post-birth LARC insertion. A State Plan Amendment to reimburse Medicaid providers for the cost of the LARC devices (including in acute settings) was requested by Medicaid and anticipated decision coming in January of 2023.

PLAN – October 2023 through September 2024

Reproductive Life Plan (RLP): 2016-2020 data from the KMMRC, has demonstrated that focused evaluation and intentional intervention in the postpartum period should be the primary goal to improve maternal health outcomes. The KPQC's FTI is a maternal health quality initiative aimed at decreasing maternal morbidity and mortality in our state by intentionally focusing on the immediate postpartum setting through the first year postpartum.



One of the core components of the FTI model of care is ensuring that postpartum persons receive education and access to reproductive life planning services, including Long-Acting Reversible Contraceptives (LARC) devices. Nationally 40% of birthing persons never attend a postpartum appointment thereby missing a key opportunity and touchpoint for reproductive life planning education and conversation. This in turn leads to higher rates of unintended pregnancy, short pregnancy intervals, and higher preterm birth rates; along with missing a myriad of other leading maternal health indicators that impact maternal morbidity and mortality. As part of the FTI postpartum model of care all participating birth facilities will include reproductive life planning as part of their discharge education; and will schedule a postpartum appointment for the birthing person prior to discharge from the FTI facility. Additionally, FTI facilities will work collaboratively with community partners to connect postpartum persons to local community resources that provide low or no cost reproductive life planning services- including LARC devices (Title X programs, safety net clinics, local providers, etc.).

LARC Toolkit: The LARC toolkit is intended to be utilized by Kansas MCH and Title X/Family Planning programs and shared with local partnering providers serving the same population, in an effort to collaboratively develop an adequate system of care. Information in the toolkit is based on sound research and recommendations from The American College of Obstetricians and Gynecologists. Updates to toolkits and education around LARC devices and support for providers will continue to be made available for MCH programs. Preconception health awareness, education, and resources will be provided through evidence-based partners including, the National Clinical Training Center for Family Planning, the Reproductive Health National Training Center, and with direct connection with field representatives from pharmaceutical companies to provide onsite support when needed.

Local MCH Agencies: This is the second year Objective 1.4 was included in the Aid-to-Local application. While many applicants have been asking about pregnancy intention, they hadn't been monitoring it using DAISEY. Many goals are focused on collecting data around pregnancy intention and referral for services.

 Butler County Health Department will assess all MCH clients for pregnancy intention using the KDHE Program Visit Form in DAISEY. 80% of those will have appropriate referral forms documented in DAISEY.

- Community Health Council of Wyandotte County will assess all clients for pregnancy intention and
 provide reproductive life planning support using My Life, My Plan. Current data shows 80% of clients
 have been assessed for pregnancy intentions. Client pregnancy intentions will be documented in
 DAISEY and referrals will be made in IRIS when a need for further services is indicated. They will also
 distribute reproductive life planning materials at education and outreach events throughout Kansas
 City.
- Delivering Change Navigators and the Universal Home Visitor will increase education on reproductive life planning by 15%, for a total of at least 115 clients receiving reproductive life plan education.
- Pawnee County Health Department will increase their assessment of pregnancy intention from 2% of clients in SFY 2022 to 98% of clients in this grant year. They will assess for pregnancy intention any time there is an MCH visit. They will complete the One Key Question form in DAISEY to monitor this goal.
- Riley County Health Department will assess all their MCH clients for pregnancy intention. All will be
 educated on the importance of preconception and inter-conception care. Each client will complete the
 Reproductive Life Plan at either the 8th month Maternal & Infant visit or 1-month postpartum visit with
 the MCH nurse.
- Saline County Health Department will assess 100% of their home visiting clients for their pregnancy intentions and use the One Key Question form in DAISEY to document responses. This will be an increase from 52%.

Your input matters!

Give feedback on this domain and others by completing our feedback survey.

Give Feedback!

