# NHPQC Newsletter NHPQ



## **August 2024**

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#### Postpartum Support International

promotes awareness, prevention and treatment of mental health issues related to childbearing in every country worldwide. They have local and specialized volunteers and coordinators that offer a variety of resources to support families and caregivers: PSI Help Line <sup>9</sup>

For resources for pregnancy, postpartum, and post-loss support:

- Call: 800-944-4773, in English or Spanish
- Text: "Help" to 800-944-4773 (EN)
- Text en Español: 971-203-7773
- \* This is NOT a HOTLINE \* If you are a loved one is in crisis, please call 911 or text

National Suicide Prevention Hotline National Maternal Mental Health

## Hotline 1-833-TLC-MAMA

FREE Online Weekly Support

Groups: Led by trained PSI facilitators, 90minute groups

**Online Perinatal Mental Health** 

**Provider Directory** 

**PSI Perinatal Psychiatric Consult** Line (1-877-499-4773) A FREE service provided by PSI for medical professionals PSI Membership (free virtual PMH-C consult group)

PSI Professional Resources

Join the New Hampshire PSI Chapter Facebook Page for Health **Professionals!** 

**PSI NH** training for perinatal mood and anxiety disorders: Manchester, NH September 16-18, 2024!

- **PSI NH Sept Training Flyer**
- **PSI Sept Training -Manchester: Registration link**



## **Adding Lived Experience to your Coalition**

As you build your coalition, it is important to include representation from disproportionally impacted groups who have not historically been included as partners in improvement work. Diversity in your coalition composition ensures that your initiatives and activities meet the needs of everyone, are feasible in a realworld setting and equitable. Persons with lived experience (PWLE) can offer unique insight into the real-world implementation of your ideas.

Start with thinking about your local landscape- who is currently experiencing disproportionally poor outcomes? What voices have not historically collaborated in the process of creating change? Consider your local and regional perinatal data.

Think about avenues for reaching out and establishing a connection through existing networks or organizations.

- **Existing community** workgroups and taskforces
- Social worker caseloads
- **MOUD** clinics
- Homeless shelters
- Foodbanks/WIC offices
- Parole offices or restorative justice programs
- Domestic violence shelters
- **Family Resource Centers**
- Local immigrant/cultural groups

It takes time to make these connections, build trust and create a meaningful partnership. We plan on starting a webinar series and using future newsletters to provide further guidance on how to respectfully engage PWLE with their wellbeing at the forefront of their engagement. We aim to build long-term trusting partnerships and encourage thoughtfulness and intention in all interactions.

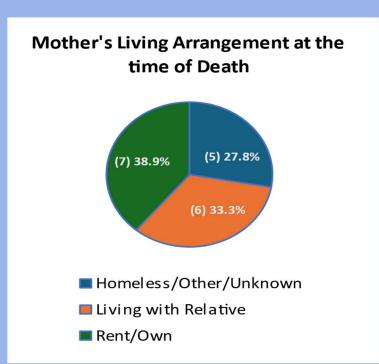
Source: Engaging Community Coalitions To Decrease Opioid Overdose Deaths Practice Guide 2023.

## **ERASE Maternal Mortality**



In 2010 the NH Dept of Health and Human Services established a NH Maternal Mortality Review Committee (NH MMRC). The function of the NH MMRC is to conduct a comprehensive and multidisciplinary review of maternal deaths, identify factors associated with these deaths, and make recommendations to potentially prevent future deaths.

Mental health conditions and substance use disorders continue to be the leading underlying cause of death for birthing people during pregnancy or within 1 year postpartum. As noted, it the pie chart below, between 2018-2022 61% had unknown living conditions, were homeless or living with a relative. One Committee Recommendation was to reach out to homeless shelters to advocate for involvement in prenatal and postpartum care. If you would like to get involved in this initiative, please reach out to Victoria.A.Flanagan@hitchcock.org.



Source: NH Maternal Mortality Review Application. Based on data from 31 NH deaths between 2018-2022.

## Introducing Maddie, NHPQC AIM Coordinator!



My name is Maddie Bridge and I recently moved to NH from WI with my partner and our Mini Bernedoodle, Cleo. I graduated from UW Madison in 2018. My previous work experience involved patient-level data analysis to evaluate eligibility for WI Medicaid and Social Security Disability. In my free time, I enjoy reading, baking, camping, hiking, fly fishing, and being outside! I am excited to be in this new role as the AIM Coordinator because I am passionate about women's health and helping women achieve better health outcomes. I am looking forward to supporting NH birthing facilities with AIM Safety Bundle data collection and implementation, and I will visit sites in person as needed. Please get in contact with me (Madalynne.M.Bridge@hitchcock.org) to let me know how I can support you!

## Upcoming Maternal Health Educational Opportunities>>>

- **August 28**<sup>th</sup> **3-4pm:** Integrating PMHC into Care and Workflows. Register.
- **August 29**<sup>th</sup> **12-1pm:** Integrating Equity into SMM Chart Reviews. Register.
- **September 11<sup>th</sup> 3-4pm:** Data Collection and Use for PMHC Bundle Implementation Register.
- **September 12**<sup>th</sup> **12-1pm:** AIM/ERASE MM Webinar: The legal requirements and approaches for providing linguistically appropriate care. <u>Register</u>
- **September 19<sup>th</sup> 12-1pm:** RMOMs Maternal Mental Health ECHO. <u>Register.</u>

### Finalized NHPQC Initiatives and Activities can be found here.

### Contact us at:

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Visit the NHPQC website here.

