Stories from the field: Preconception Healthcare Screening in Practice

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MAHEC Background – how did we get here?

- "The 5 things" Dr. Blake Fagan (2010)
 - Multivitamins with folate, birth control, condoms, plan B, pap smears
- North Carolina Multivitamin distribution program
 - Free vitamin program for any reproductive aged woman (patient or not)
- IMPLICIT ICC Model (2012)
 - Depression, MVI, Smoking, Family planning at well child visits birth to 2
- Education on PCC and the PCHHC Toolkit "at your fingertips" (2015)
- Standardized EHR documentation of family planning
 - Ability to create a registry
- Creation of a comprehensive WHA with OKQ as foundation and incorporation of IPV screening (2018)



IMPLICIT Stories

- Mother with Type 1 Diabetes at 6 month WCV: not on contraception, not on MVIs, had been DC'd from primary care practice for financial reasons
- Identified and reconnected
- Emergency contraception prescribed and started on OCPs that day to bridge to next appointment - *risks averted*





IMPLICIT Stories

- Mother of a 10 month old, bringing child in for "ER follow up." Had missed the 9 month WCV.
- IMPLICIT ICC risks performed all 4 positive
 - Restarted smoking
 - Stopped birth control pill
 - Screened positive for depression with increased stress at home
 - Stopped multivitamins
- Intervention performed that day, given MVIs, connected with beh health for assessment and support, reinforced smoking cessation and family planning risks
- Came in 2 weeks later for Nexplanon placement
- At 15 month WCV all 4 screens are now negative



IMPLICIT Stories

5 new OB visits in a row which were intended, appropriately spaced, on MVIs for >3 months prior and emotionally well!

Most of these were uninsured prior to pregnancy

Free Clinic experience – I know you...MVIs and OCPs in purse!



Key concept:

Frequent, consistent messaging of certain preconception healthcare issues seems to have made a difference in our patient population...

> Multivitamins are important Contraception and birth spacing Smoking and depression counselling Mom's health matters...



OKQ stories – at the free clinic (ABCCM)

- 37 yo female, here for "follow up diabetes, needs refills, having diarrhea"
- Diagnosed 2 months prior at ABCCM, sugar was >300, BP was 160/90; started on metformin and lisinopril
- Initial labs took 6 weeks to get, A1C was 7.0 when obtained, Cr was normal
- Today: she is obese, NAD, BP 140/90, on metformin 1000 mg bid, lisinopril 2.5 mg qd, not checking sugars
- Plan: ?

Usual Care





OKQ stories – "ER Follow up"

- 32 yo G2P2 with moderate persistent asthma, smoker, here for f/u ER after exacerbation.
- PMH: Bipolar, hypothyroidism, OSA, obesity (BMI 42)
- Meds:
 - Prednisone 40 mg x 5 days
 - Advair 250/50 BID
 - Albuterol MDI prn
 - Depakote 500 in AM, 1000 mg PM
 - Levothyroxine 175 mcg daily
- Feeling better, not yet back to baseline
- Plan?

Usual Care

Asking the OKQ

OKQ stories – "Nurse Visit"

- 23 yo G1P0010 presents for a pregnancy test
- LMP 3-4 weeks ago
- Uses condoms, but partner often takes it off
- Last sexual intercourse was 2 days ago
- Was on depo in the past, but stopped because of weight gain and irregular periods
- Smokes ½ ppd, drinks alcohol on weekends, sometimes >5 drinks at one time
- PMH unremarkable, SAB 1 year ago
- On no meds
- Pregnancy test is negative
- What would you do today?



OKQ stories – "Med Refill"

- 29 yo G4P1031 presents for routine f/u to get amphetamine refilled for adult ADD
- Ran out 3 weeks ago, PCP not available
- Doing well on med, helps focus for work, has noticed worse function since off
- No red flags for abuse or diversion



OKQ stories – "Med Refill" continued

- Meds Amphetamine-dextroamphetamine and prenatal vitamin (no contraceptives)
- VS: BR 157/93, P 71, BMI 33
- ROS: some palpitations, some increased DOE lately some anxiety, LMP 2 weeks ago, last sex 2 days ago
- PMH h/o preE 2 years ago (induced at 37 1/7), has had multiple elevated BPs documented since, no dx of HTN yet, 1 SAB and 2 EABs
- OKQ => YES, trying



What are you going to do?

- Refill the amphetamine?
- Diagnose HTN?
- Start antihypertensive?
- Do any additional testing?
- Recommend contraception?
 - Today?
- Wish you never asked the OKQ????



Case Conclusion

Clinical Action:

- Counselled on risks:
 - HTN, obesity, h/o preE, prior SAB
 - Amphetamine use/choice
- Pregnancy test = negative
- CBC, BMP, TSH, UA, EKG ordered
- Stress ECHO due to her symptoms

- Patient-centered discussion on options
 - Offered emergency contraception declined
 - Decided to hold amphetamine, and not start HTN meds yet
 - Chose abstinence for now and talk with partner
 - Would work on diet, exercise, weight loss, follow home BP
 - Continue prenatal vitamin
 - Follow up in 2-3 weeks for further management



Key Concept:

- By asking OKQ:
 - Missed opportunities for improved reproductive healthcare are *uncovered*
 - Medical management can change significantly...



Women's Health Assessment Tool

Developed through human centered design



45% unglanned. My physical activity My emotions Woold you like to the next yearf My body My vitamins My alcohol or drug use

> Supportive messages, facts on why certain issues are important



Patient Engagement Tool

> Provider screening

> > tool

MAHEC

I know I need to be healthy in mind, body and spirit to reach my goals.

All of these topics are important for my total health.

Pregnancy

Would you like to be pregnant in the next year? Yes No Okay either way Unsure

Body Weight

1 would like to gain weight. I would like to lose weight. I would like to stay at my current weight I don't care about my weight.

Physical Activity

How often do you exercise? None 1-2 inservers 3-5 inservers 6-7 inserver How long do you exercise? 🗌 Less than 15 min. 🛄 15-30 min. 🛄 30-45 min. 🛄 60+ min How intense is the exercise

None Low intensity Moderate Intensity 📋 High intensi What type of exercise do you do

Multivitamin + Folic Acid

Are you taking a multivitamin with folic acid? Yes No

Tobacco

Never smoked E Former smoke Previously quit but smoking again Currently smoking and never quit I chewluse smokeless tob I vape/use e-cigarette:

Are you currently having sex?] Yes] No 1 Yes I No Do you enjoy sex? Yes No

Laminated, reverse side in Spanish



How many times in the past year have you had 4 or more drinks in a d 1 ler men

How many times in the past year have you used a recreational drug or used a prescription medication for nonmedical reasons? None I for more

Depression

Over the past 2 weeks, how often have you been bothered by any of the following problems?

- Little interest or pleasure in doing things Not at all
- Several days
- More than half the days
- Nearly every day Feeling down, depressed or hopeles
- Not at all Several dava
- Avere than half the days I Nearly every day

Intimate Partner Violence

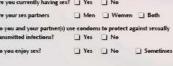
Within the last year, have you been humiliated or emotion in other ways by your partner or ex-partner? [] Yes [] No

Within the last year, have you been afraid of your partner or your Yes No ex-partner

Within the last year, have you been raped or forced to have any kind of sexual activity by your partner or ex-partner?
Yes No

Within the last year, have you been kicked, hit, slapped, or otherwi physically hurt by your partner or ex-partner?
Yes No

Sexuality



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WHA Workflow Video example

- Educational engagement tool "why are we screening"
- Connected one page screening
- Acknowledgement of responses by staff and provider
- Use of the physical tools to reflect upon
- Connect to overall goals of health
- Video



WHA Stories – "Needs Depression meds"

- 21 yo presents with friend "severe depression, would like to restart medication, worried about weight loss, and would like a UPT" – first visit in FM office
 - G1P0010, IUFD at 14 weeks for trisomy 18, 6 months ago
- WHA Answers:
 - OKQ = Okay either way, on no birth control (was on depo 6 months ago)
 - Multivitamin use: No
 - Body weight: I would like to gain weight.
 - Exercise Details: None
 - Tobacco Use: Current smoker ½ ppd
 - Times in past year had 4 or more drinks containing alcohol in a day? 1 or more. (AUDIT 8, negative)
 - Past year use of recreational drug or prescription drug for nonmedical reason? 1 or more. (history of polysubstance use cocaine, last used 6 months ago during pregnancy, current marijuana)
 - PHQ2 pos, PHQ9= 21, positive suicidal thoughts but no plan
 - HARK: negative
 - Currently having sex? Yes, Sex partners are men, Sex partner uses protection against sexually transmitted infections sometimes, Enjoys sex sometimes
- PCP walked in the room with a **broad context** in which to have a conversation to best care for her issues...



In addition to a behavioral health management plan...

- FAMILY PLANNING ADVICE (Z30.09)
- Story: Okay either way on pregnancy in the next year, not taking multivitamin, history of recent IUFD with trisomy 18, challenging relationship, multiple medical issues, substance use, and mental health issues of concern
- Impression: Pregnancy test negative today. Discussed her desire for pregnancy potentially in the future. Discussed the importance of health prior to pregnancy and especially multivitamin with folic acid. She is willing to do this. She is unsure whether she wants to be more proactive around prevention of a unplanned pregnancy. We will continue to work with her and develop relationship to meet her goals.
- SCREEN FOR STD (SEXUALLY TRANSMITTED DISEASE) (Z11.3)
- Impression: Unprotected intercourse, screened for STI's today

Preconception Health+Health Care Initiative A National Public-Private Partnership

Key finding with human centered design for improving women's health was the critical importance of TRUST and RELATIONSHIP

(And time to talk...)

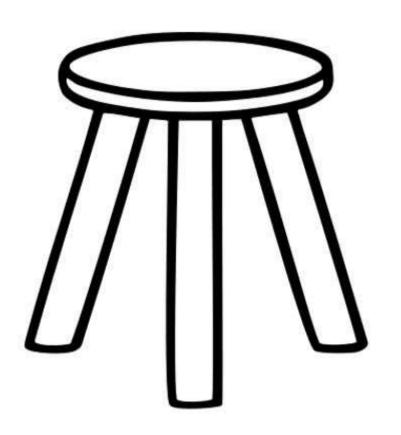
This trust needs to go in all directions:

Patient
Provider



Frayne theory for improved population health: 3 legs of a stool

- Preconception and intergenerational focus of health and healthcare
- Transformation of healthcare delivery
- Dismantle Racism





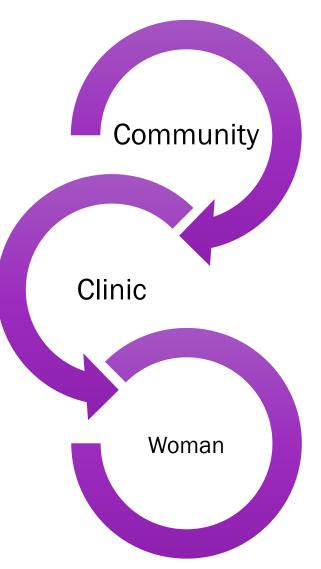
Multi-System Response



Preconception

A National Public-Private Partnership









What can we do together?





