Maternal and Infant Health Bureau

Success Story 1

The Maternal and Infant Health Bureau has a collaborative agreement with Healthy Birthday, Inc, which oversees the Count the Kicks© Program. Count the Kicks is a public health program that teaches expectant parents a simple way to become familiar with their baby's normal movement patterns. Many doctors recommend using this method daily starting at 28 weeks of pregnancy

A mother named Kelsey Dryden (Jackson/Hinds area) credits the Count the Kicks Program for saving her babies life. She said that after monitoring her baby's movement patterns for several weeks, she became concerned that her baby wasn't moving as much as normal. When she reached 26 weeks, she had a nagging feeling that something was not right, so she called the hospital to do a wellness check. While at the hospital, Kelsey and her baby were closely monitored at the hospital, and while everything looked fine at first, Kelsey kept telling her providers that something felt off. She was also experiencing tightness in her chest. "At 10 p.m. my doctor came in and told me that my baby's best chance at life was to have an emergency C-section, because they didn't know what was wrong, but they knew something wasn't right," she said.

Baby Callum was born at 26 weeks, weighing 1 pound and 12 ounces, and had an 80-day NICU stay. "There was a blood clot behind his placenta that was causing him distress, and they determined this was the root of his movement change. If I hadn't seen the Count the Kicks Instagram page, Callum wouldn't be here today," Kelsey said.

By helping expectant parents get to know their baby's normal movement patterns in the third trimester, Count the Kicks empowers expectant parents to speak up if their baby's normal movement ever changes. Regular use of the app is proven to improve birth outcomes for moms and babies. In addition, 77% of app users report using the app daily helped to decrease their anxiety about the well-being of their baby.

A link to the full story can be found below: https://countthekicks.org/babysaves/meet-callum/

Success Story 2

The MIHB implemented a new workforce model aimed at assisting birthing hospitals participating in the AIM Initiative. This project employs and provides stipends to medical [residency] student interns to assist all hospitals implementing the Alliance for Innovation on Maternal Health (AIM) patient safety bundles. They will focus on assisting with data entry for the hospitals' process and structure AIM measures. Students self-selected which hospitals they want to be assigned. The medical students will also assist hospitals by calling families who had recent deliveries 24-48 hours after discharge to assess any needs they may have.

Healthy Moms/Healthy Babies

HMHB Pharmacist Helping to Break Down Barriers to Maternal Health

Pregnant woman of Oktibbeha County enrolled in Healthy Moms/Healthy Babies at 8 weeks gestation. Her risk factors included type 2 diabetes (E11.9), high risk pregnancy due to history of preterm labor (O09.212), and hypertension (O16.1). As a result of the Maternity Comprehensive Assessment, the nurse case manager sent referrals to a licensed social worker, registered dietitian, and pharmacist. During the initial pharmacy assessment, it was identified that the patient was not able to check her blood glucose because she did not have access to a glucometer and in the process of applying for Medicaid. In addition to dispensing medications, a

pharmacist can address any barriers that may prevent a patient from accessing medications and/or medical supplies for their health condition. With the increased risk of complications for women with type 2 diabetes during pregnancy, it was imperative to find resources for this patient until her insurance benefits were approved. HMHB pharmacist found a patient assistance program (PAP) for obtaining a glucometer at no charge and test strips for \$20. The PAP was for a specific brand of glucose testing supplies that required prescriptions from the patient's doctor. After contacting the doctor two prescriptions (one for a glucometer and one for test strips) were sent to the patient's pharmacy and she was able to start self-monitoring glucose daily. Shortly after, the patient's Medicaid was approved, and she received a monthly supply of test strips through a medical supply company. During her pregnancy, the patient checked glucose levels multiple times daily and reported measurements to her medical provider. With the necessary medical supplies, the patient knew how to manage her glucose and was able to effectively communicate with medical providers about her self-management. For increased glucose control, frequent insulin dose adjustments occurred because of the reported measurements that were not at goal. In addition to assistance with testing supplies, HMHB pharmacist sent patient a blood pressure monitor to assist with monitoring of blood pressure during pregnancy. With efforts and collaboration with her medical provider, HMHB team, and the patient she recently delivered a healthy baby at 37 weeks gestation without complications.

Pharmacy Consultant

In August 2023, a pharmacist was secured at 16 hours per week to support HM/HB as a Pharmacy Consultant in helping to lead initiatives aiming to improve prenatal maternal health. The Pharmacist receives referrals and works directly with patients telephonically, who have pre-existing or gestationally diagnosed hypertension and diabetes to help them monitor their health status, access needed testing or monitoring supplies, improve health literacy and comfort to discuss concerns with their medical providers, and interfaces directly with the patients' providers as needed to coordinate care. The HM/HB Pharmacy Consultant has played a vital role in assisting the Program Director in education to the HM/HB staff on numerous health risks and practices concerning pregnant and post-partum women and infants.

August 2023 Healthy Moms/Healthy Babies onboarded a Certified Nurse Midwife. The HMHB Certified Nurse Midwife provides clinical consultation related to maternity and infant health to HMHB staff, she serves as a liaison between providers and HMHB, creates health education, leads Midwife Mondays – clinical updates and training to HMHB staff.

HM/HB and MIHB Partner to Improve Maternal and Infant Health

Blood Pressure Cuffs

Funding provided by the MSDH Maternal and Infant Health Bureau allowed the Healthy Moms/Healthy Babies program to purchase self-monitoring blood pressure cuffs in regular adult and large sizes to be administered to HMHB patients through consultation with the HMHB Pharmacy Consultant. This will assist in monitoring pregnant and postpartum mom's blood pressure, teach and empower patients to learn to monitor and know their own blood pressure numbers in hoping to reduce maternal morbidity and mortality.

Nurse Home Visiting Kits

The MSDH MIHB was able to secure funding to assist the HMHB program in purchasing items for HMHB Nurse Home Visiting Kits. The HM/HB program provides care coordination and home visiting services to assist moms and babies who have identified health risks. The HM/HB Nurse Case Manager provides a comprehensive assessment helping to identify patient's needs,

develop a plan of care, and coordinate services to address medical, social, and dietary needs. The Nurse Home Visiting Tool Kit are for each nurse case manager/extended service provider nurse to assist in maternity and infant nursing assessments, postpartum home visits and monitoring of identified health risks of moms and babies in the HM/HB program. Tools are used at home visits for monitoring mom and baby's heart rates, blood pressure, weight, measurements, and more.

Cribs

After the closure of the MS SIDS Alliance, Cribs for Kids Program, the MSDH MIHB was able to take on some portion of the activities that the MS SIDS Alliance provided such as safe sleep education and providing cribs to families in need. Through MIHB, HMHB were able to secure pack'n'play cribs to give to pregnant women, and caregivers of infants enrolled in the HMHB program to assist in baby having a safe place to sleep.

Access to Care/Effectiveness and Quality of Care/Use of Services

HM/HB developed a Comprehensive Assessment in June 2023 to be completed by the HM/HB Nurse Case Managers when enrolling a maternity or infant patient. The purpose of the initial enrollment and comprehensive assessment interview is to gather immediate information about the patient and family to identify urgent needs and barriers which may impact their short- and long-term health outcomes. This includes access to insurance and medical care. If patient does not currently have insurance, the case manager is assisting patient to apply for coverage. If the patient currently does not have a medical provider, the staff member is actively referring patient to a medical provider for prenatal care. HMHB case managers meet with patients monthly to discuss care plan and to follow up on prenatal visits and concerns. The comprehensive assessment of the individual's needs informs of any medical, educational, social, nutritional and or other services that are needed including the components of the Social Determinants of Health (SDOH).

HMHB Nurse and Early Intervention

A Healthy Moms/Healthy Babies Nurse Case Manager noticed limited movement of an infant's leg while meeting with mom and baby to discuss enrollment into the program. The HM/HB Nurse Case Manager referred the family to First Steps Early Intervention and Medicaid Transportation. Mom enrolled infant in HM/HB and infant is now in physical therapy.

HM/HB Community Awareness and Enrollment

Every month HMHB provides MSDH Communications with graphics and information to provide to MSDH social media regarding maternal and infant health. MSDH leadership have gone throughout the state of MS to promote the HM/HB program and MSDH initiatives to reduce maternal and infant morbidity and mortality. HM/HB Program Director participated in an interview with a local TV news station to discuss maternal and infant mortality and the HM/HB program initiatives. A promotional video was developed for HM/HB and is now on the MSDH HM/HB webpage as well as been advertised on local television across the state of MS.

Healthy Moms/Healthy Babies Response to The Jackson Area Water Crisis
HM/HB purchased over 30 water faucet filters for families enrolled in the HM/HB program.
District 5 Case Managers educated families about lead and its effects on pregnant women and children, they also educated families on how to install the filter on to the faucet.

Healthy Moms/Healthy Babies creation of the Initial Maternity and Infant Comprehensive Assessments in June 2023.

The purpose of the initial enrollment and comprehensive assessment interview is to gather immediate information about the patient and family to identify urgent needs and barriers which may impact their short- and long-term health outcomes. The comprehensive assessment of the individual's needs informs of any medical, educational, social, nutritional and or other services that are needed including the components of the Social Determinants of Health (SDOH). This allows the HM/HB Nurse Case Managers to identify more adverse risks that were not known at the initial referral mark, which allows HM/HB to assist in reducing maternal and infant mortality and morbidity within the perimeters of the patients enrolled.

Genetic/NBS

Success Story 1

With all the positive activities state-wide, one success story hits home in particular. During a visit from IT, an MSDH employee discussed how the Genetics Bureau helped to gain a better awareness of her newborn's rare genetic condition. She shared her gratitude for the referrals and education received. Several weeks after visiting with her, I attended the 2023 SERN/SERG conference in Charleston, SC and visited with a vendor specializing in the rare genetic condition. The vendor provided contact information, education, and extended the invitation for the MSDH IT employee to contact her for continued education, support, and family centered care. The MSDH employee was extremely grateful for the information and for the invite to connect with other families nationally who share their like experiences with the rare condition.

Success Story 2

In efforts to improve Genetic/NBS outcomes St. Dominics hospital conducted a skill building day with MSDH genetics nurses and other members of the health network to improve NBS screening and health outcomes. As a result, St. Dominic maintain 1st, 2nd, and 3rd quarter ranking amongst the hospitals that meet expectations, achieving >1% specimen collection error.

Success Story 3

Due to the tender nature of the job, it is a privilege to collaborate with internal and external partners to increase the reach to extend necessary life changing services. After analyzing the need for support in providing more family centered care to educate and provide awareness to families about Sickle Cell Trait, I created a packet of tips with credible educational information to provide during the regional Sickle Cell Disease and Trait training sessions, in June 2023. The post workshop evaluations revealed that the training provided by St. Jude, along with educational materials were extremely beneficial. The feedback led an internal collaboration with the Office of Work Force Development and EPIC. A workflow, SOP, and training session was established for State Social Workers to support education and awareness efforts. As a result, over 300 Mississippi families received Sickle Cell Trait Counseling.

EHDI-MS Program

Throughout the COVID-19 pandemic many hospitals experienced significant turnover in nursery staffing resulting in a loss of institutional knowledge in conducting newborn hearing screening and reporting results. The EHDI-MS Program undertook an intensive process of individualized training and technical assistance across the state, building strong relationships with hospitals to ensure hearing screening are being conducted using the state protocol and results are being reported accurately and timely to the Mississippi State Department of Health. As a result of these efforts, the MSDH was able to recover data on over 10,000 missing hearing screens.

Mississippi WIC Breastfeeding Program

Through a unique partnership between the Mississippi Public Health Institute, the Mississippi Breastfeeding Coalition and the Mississippi WIC Breastfeeding Program, WIC participants have been afforded access to International Board-Certified Lactation Consultants. Mississippi is among the states with the lowest breastfeeding rates and fewer certified lactation professionals trained to deal with complex breastfeeding issues. Lactation services are inaccessible to many families due to limited providers and the cost of receiving this level of care. This leads moms to discontinue breastfeeding early because her issues go unresolved. Increasing access to IBCLCs is an effective strategy to improving breastfeeding initiation and duration rates. The partnership created an IBCLC Scholarship and Mentorship Program that allowed 28 WIC staff the opportunity to receive financial assistance to complete the prerequisites needed to sit for the IBCLC Exam. Prior to this program, MS WIC had one part-time lactation consultant. With this successful initiative, WIC now has 17 IBCLCs on staff to assist vulnerable populations with expert level breastfeeding care. This is creating systems and environmental changes among a population with some of the lowest breastfeeding rates in the country. Accessibility to this level of care is leading us to an environment of equitable care so that all moms and babies are afforded the chance to have a successful breastfeeding journey regardless of their race or socioeconomic status.

Mississippi Lead Poisoning Prevention and Healthy Homes Program (MS LPPHHP)

Over the years, the Mississippi Lead Poisoning Prevention and Healthy Homes Program (MS LPPHHP) has identified families of children with elevated capillary blood lead levels (BLLs) greater than or equal to 3.5µg/dL who have not returned to their primary care provider for a confirmatory venous BLL. Since the program doesn't provide services to families of children who haven't received a confirmatory venous test, it was imperative for the program to address this issue.

Beginning in July 2020, the program implemented the Request to Follow-up to Primary Care Provider document to increase the percentage of children with elevated capillary BLLs who receive a confirmatory lead test. This document is faxed monthly to providers who tested a child during the previous month with a presumptive positive lead level of 3.5 or higher. This document serves as a reminder to the provider that the child must receive a confirmatory test based on the CDC guidelines. The provider is to complete this form and fax back to the program for documentation purposes. If the provider doesn't fax the document back, the program faxes the form to the provider three more times (14 days apart), for a total of four faxes to request the confirmatory test. Initially, when the first Request to Follow-up fax was sent to the provider, a Parent Follow-up letter was also sent to the family alerting them about the need to have the child retested to confirm the child's lead level. However, in April 2022, the program began sending the Parent Follow-up letter each time the Provider Follow-Up Letter was faxed.

Since this project started the middle of 2020, we have seen an increase in the percentage of children who are receiving a confirmatory venous blood lead tests. Also, since the family now receives a letter each time the provider receives a fax, our office has seen an increase in the number of calls from families who receive the letter inquiring about the purpose of the letter and what they need to do.

Oral Health

Success Story 1

This was shared through the August 2023 MS HPV roundtable listserv:

The maximum age on code 90651 Gardasil has increased from 26 to 45 effective 5/1/2023 now covering ages 9 to 45. Providers are advised to resubmit claims that previously denied due to age. Should you need assistance, please contact the Provider and Beneficiary Services Call Center at (800) 884-3222 or use the Provider Field Representative list on Medicaid's website to identify your designated representative. The Provider Field Representative list includes email addresses and phone numbers for each representative. This resource document is located at https://medicaid.ms.gov/wp-content/uploads/2022/12/Provider-Field-Representatives.pdf.

Applicable to both Male and Female on full-benefit Medicaid and FPWaiver. This provides an opportunity to vaccinate those who missed their opportunity at younger years. Stopping this highly communicable virus, targeting the strains responsible for HPV-related Cancer, at any age, matters for our communities overall.

Success Story 2

We were able to showcase our departmental work on several projects at the 10th Empowering Communities for a Healthy Mississippi Conference, May 23-26, 2024.

- Opening New Pathways to HPV Cancer Prevention through Changes in Practice, Policy and Partnerships; Speakers: Dr. Carolann Risley and Dr. Angela Filzen
- Oral Health Workforce: UMMC School of Dentistry Population Oral Health Collaborative;
 Speaker-Dr. Elizabeth Carr
- Advancing Prevention and Reducing Childhood Caries in Medicaid and CHIP beneficiaries: An Update on Mississippi Efforts; Speakers-Dr. Angela Filzen, Veronica Gates MPA, Carla Bassett, RDH
- Integrating Oral Health Care and Primary Care in Federally Qualified Health Centers for Maternal Child Health; Speakers; Dr. Candice April, Martina McGinty, RDH, Candance Holloway, NP-C and Dr. Angela Filzen

Success Story 3

The 2023 Head and Neck Cancer Screening Event was held on April 4, 2023. For this event the Office of Oral Health collaborates with a host of partners: MS State Department of Health Offices of Community Health Workers, Preventive Health & Health Equity; Pearl River Community College-Dental Hygiene Technology; Forrest General Hospital, FGH Cancer Registry, American Cancer Society, MP3C, Southeast MS Rural Health Initiative, Hattiesburg Community Dental Center, Southern MS SHINE Project, US Public Health Service, MS Public Health Association, MS Public Health Association Pine Belt Chapter, and Head & Neck Cancer Alliance. Fortunate for us, we had members from the United States Public Health Reserve Commissioned Corps able to participate in the event. This group of 41 members were scheduled to serve Hattiesburg, MS and surrounding communities while at Camp Shelby conducting training. They had several team members to assist with logistics and screening for the Head and Neck Cancer event.