



SOUTH CAROLINA OFFICE OF
RURAL HEALTH
FAMILY SOLUTIONS

Laboring Together

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CAN YOU SPOT THE DIFFERENCES?



OBJECTIVE #1

To differentiate the roles of the perinatal community health worker, social worker, and clinical provider within the care team

WHICH IS BETTER?



OBJECTIVE #2

To recognize the benefit of collaboration between healthcare providers and community-based organizations in improving birth outcomes

WHO ARE WE

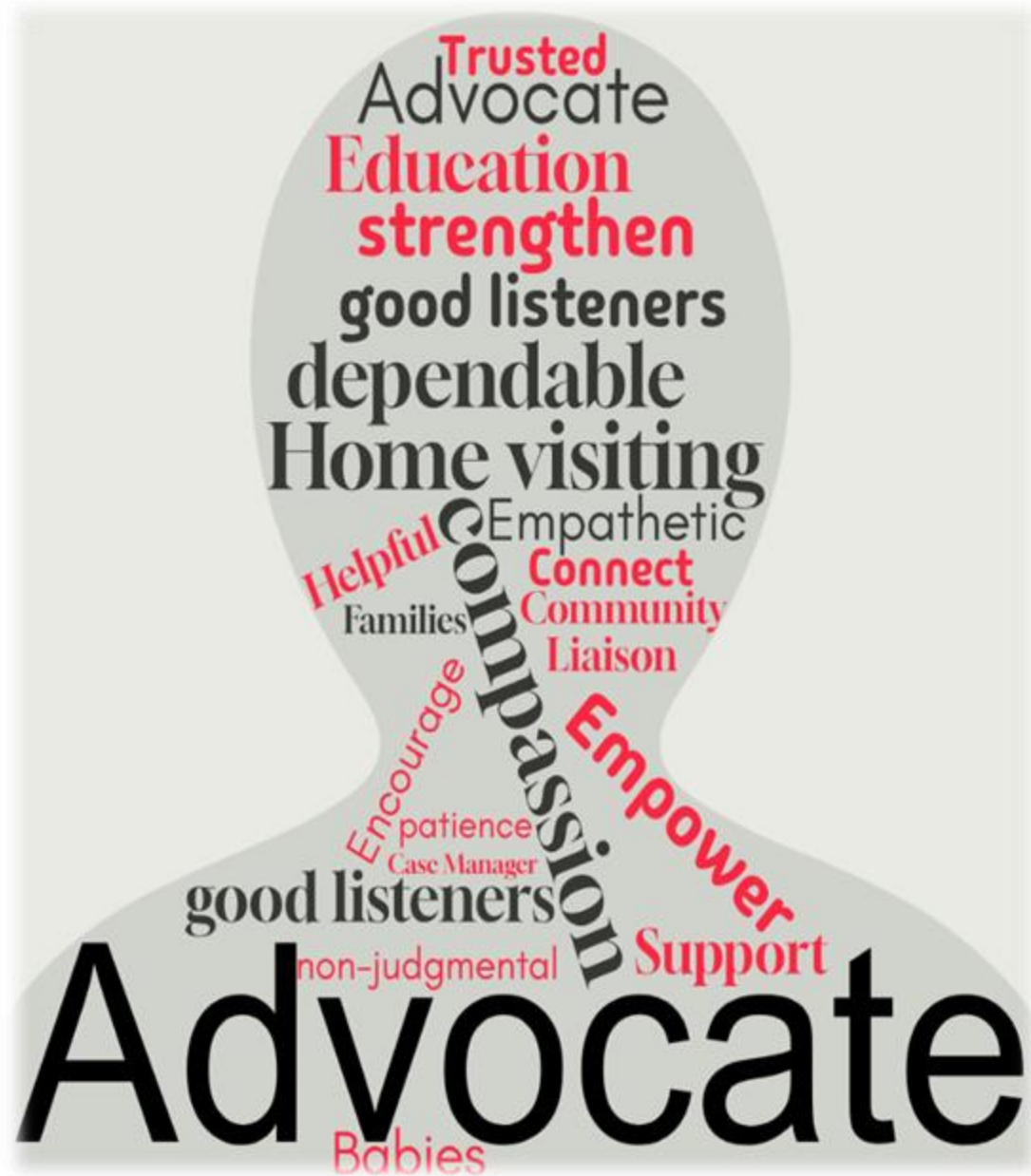
- a community-based program, of the SC Office of Rural Health, with a MCH focus
- program home for Healthy Start, Nurse-Family Partnership, and a Family Resource Center
- Supportive partner of Healthy Steps in SC



WHO ARE WE



- Community Health Workers
- Doulas
- Certified Childbirth Educators
- Male Involvement Coordinator
- Healthy Steps Specialist
- Nurse Practitioner
- Nurses
- Social Workers
- Reproductive Health Specialists
- Certified Lactation Consultants



WHAT WE DO

The background is a vibrant blue watercolor wash. In the center, there is a white, irregularly shaped outline that perfectly fits the geographical shape of the state of South Carolina. The text is centered within this white shape.

Collaborative
Approach to Care:
Tara's Journey

BACKGROUND

Clinical Assessment

- 26 YO African American
- 1ST trimester entry into PNC
- EDD 11/22/2023
- G2P1001
 - NSVD of 3430 g Male @ 38 weeks on 9/27/2017
- Problems:
 - Obesity
 - Chronic HTN (no medications)—on HCTZ in the past
 - Rh negative
- Medications :
 - PNV
 - Started on Low dose aspirin therapy
- Referred to Family Solutions

Family Solutions Assessment

- Unplanned Pregnancy
- Has a 5yr old son
- Lives with FOB
- No drug or alcohol use
- Medically high risk
 - Hypertension
 - Anemia
 - Obesity
- Working FT
- Taking online college classes
- Has a medical home
- Depo previous family planning method
- Breastfed previously
- Scored 2 on EPDS
- Assigned to High Risk Perinatal Social Worker who is also a Certified Community HealthWorker

PRENATAL COURSE

Clinical

- At following visit: BP was elevated
- Pt was prescribed Labetalol
- BP well-controlled
- Comprehensive US: 6/29/2023, Placenta= fundal, fetal presentation=cephalic, CL=3.9 cm, AFI= 10.6 cm, EGA= 20 2/7 weeks, EFW=344 gm, all fetal anatomy WNL
- She was also started on ferrous sulfate 1 tablet PO BID for anemia (hgb decreased to 9.0)
- Received RhoGAM per protocol
- Weekly NSTs started at 36 weeks
- On 11/8/2023 @ 38 weeks, NST was nonreactive in office and US fetal BPP w/ NST was ordered.
- Biophysical profile score 8/8
- Last PNC visit (11/13/2023): BP stable on Labetalol 100 mg PO daily, NST reactive. HELLP labs normal. Pt scheduled for IOL.

Family Solutions

- **Topics Covered:**
 - Nutrition
 - Childbirth
 - Breastfeeding
 - Women's Health
 - Stress/Coping Strategies
 - Identifying a Support System
 - Hypertension Management
 - Safe Sleep
 - Reading to Baby
 - Parenting Skills
 - Family Planning
 - Signs and Symptoms of Preterm Labor
- **Referrals:**
 - Childbirth and breastfeeding class
 - SNAP- ED Nutrition Education Sessions (6 session program)
 - Family Solutions Reproductive Life Course Groups
 - Family Solutions Scholarship
 - Family Male Involvement Coordinator

*** FS Community Health Workers are cross-trained. Services for childbirth and breastfeeding were provide by a CHW who is also certified in those specific areas.

PRENATAL COURSE COLLABORATION

The Family Solutions Consortium is a collaboration of individuals and groups with an interest in improving the health of women, men and children. There is a community group and a provider(clinical) group.

Community Collaboration for Tara:

- Was referred to the SNAP-Ed nutrition education class
- Was awarded an educational scholarship(supported by the consortium and others) during the FS 2023 luncheon

Clinical Collaboration for Tara:

- Weekly maternal mortality case review with the social worker and the nurse practitioner to:
 - discuss medical hx and concerns
 - provide updates from prenatal and postpartum appointments
 - discuss client concerns
 - understand prescribed clinical regimen
 - discuss suggestions for education

Labor and Delivery

39 0/7 wks

OB exam (by MD):

FHR interpretation category: 1

PPH risk factor score, Interp: Low risk

SVE: 2/70%/-3. ROM was clear fluid

Toco: + contractions every 3 mins

- Vacuum assisted vaginal delivery after pushing for 2 hours
- Anesthesia: Epidural
- EBL: 300 cc
- Findings: Viable male infant in OP position
 - APGARs: 8/9
 - Weight: 8 lbs. 8 oz.
 - 1st degree laceration w/ repair
- Initiated breastfeeding at birth
- Received a referral to the FS lactation consultant
- Breastfed for about 2 months.



Postpartum

Clinical

- PP visit w/ MD on 12/29/23
 - Vital signs: BP= 155/110, HR= 73, Wt: 238 lbs.
 - Newborn nutrition: breastfeeding
 - Contraception: desires Nexplanon, pt to return for insertion
 - Coping and adjusting well, no signs of PPD
 - Returned for Nexplanon insertion on 5/22/2024.

Family Solutions

- Postpartum Education and Support
 - Breastfeeding support with latching and pain
 - Four(4) Weekly home visits
 - Postpartum Curriculum: urgent maternal warning signs, anxiety and depression, the postpartum visit, birth control options
 - Monthly visits until program completion
 - FS Peer Support Group
- Postpartum Incentive
 - Birth incentive
 - 6-Week Postpartum incentive
 - Well child visits incentive



Based on Performance
Data for 2022, or FS
Healthy Start served a
total of 463 program
participants

0 deaths

Based on Performance
Data for our FS NFP,
the nurses served 70
program participants

1 Fetal Demise at term



THANK YOU



Any Questions?

SOUTH CAROLINA OFFICE OF RURAL HEALTH

FAMILY SOLUTIONS

CONTACT US








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