

# Improving Postpartum Outcomes and Decreasing Health Care Disparities in Hispanic Patients

Jennifer Cohen, MD, MMSc, Katherine Costantini, MSN, RNC, Rachel J. Whittmann de Rosello, CMI, Lynne Rudderow, MSN, RN, CRNP, WHNP-BC, Melissa Welsh, MSN, RN

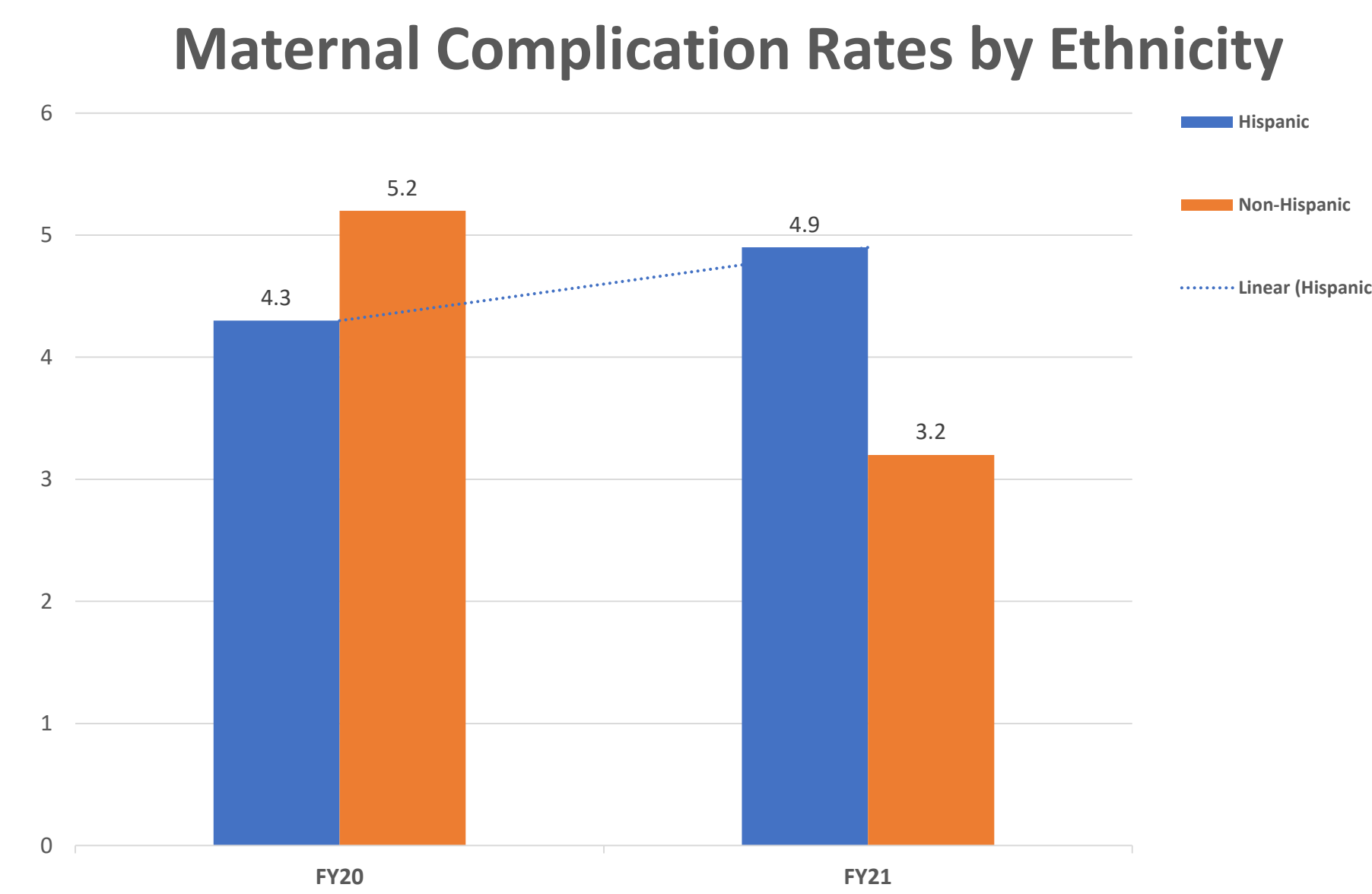


Patient & Family Advisory Council

Rick Stevenson, Migdalia Questell, Charlotte Talman, Evelyn Easter, Paul Socorso, Tracey Simonelli, Barbara Palma

## BACKGROUND

- Approximately 20% of patients delivering newborns at Chester County Hospital identify as Hispanic
- In FY21 complication rates in Hispanic mothers increased by 0.6% (to 4.9%), while a decrease of 2.0% (to 3.2%) was noted in the rest of the population

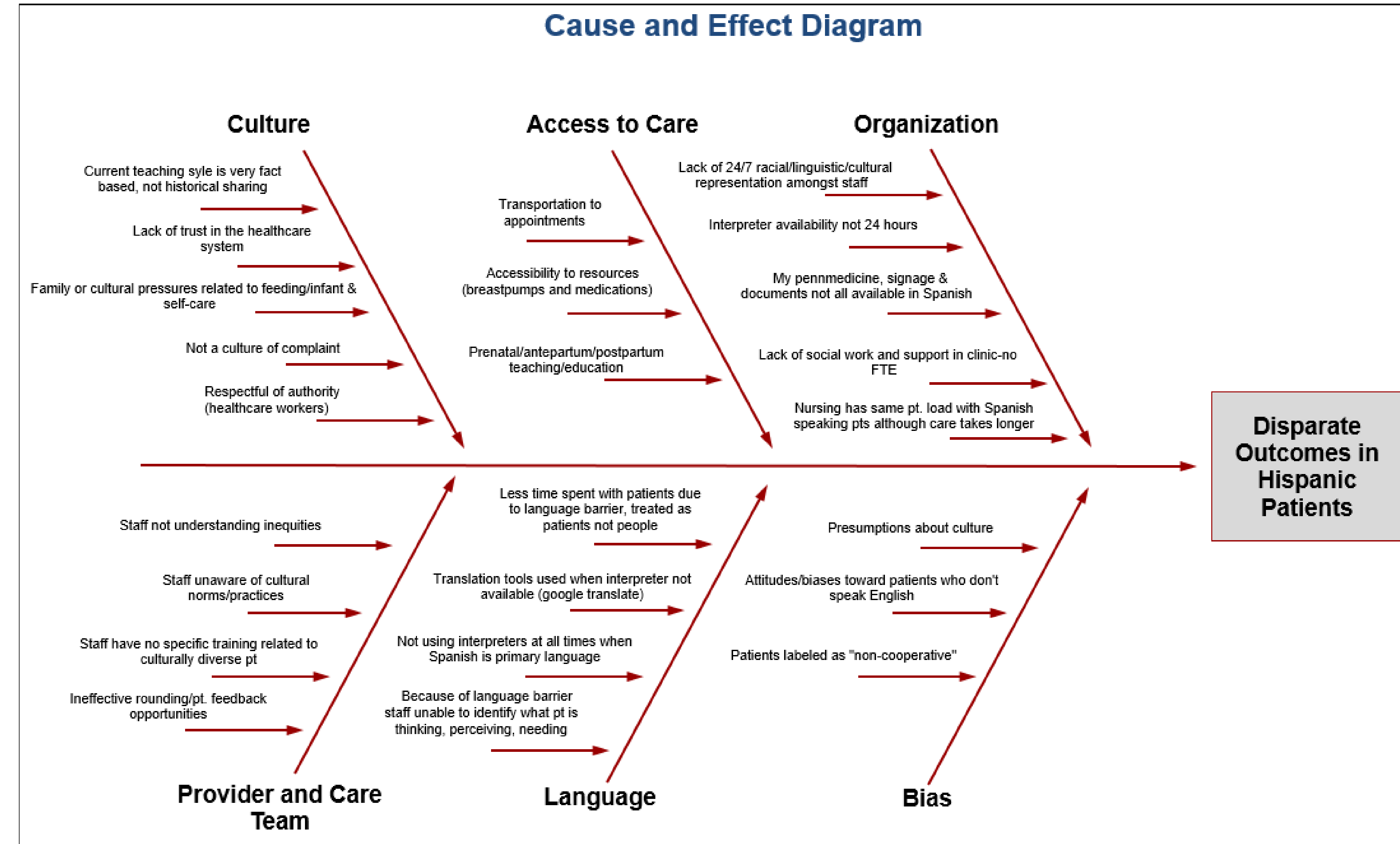


## AIM(S)

- Improve postpartum outcomes and decrease health care disparities in Hispanic patients
- Minimize the impact of social risks on health

## DISCOVERY

- A multidisciplinary team was formed to evaluate health equity across the service line
  - Development of a fishbone diagram
  - Brainstorming meetings
- The team collaborated with the Patient & Family Advisory Council to obtain the “voice of the patient”
  - Hospital based interviews prior to discharge
  - Post-discharge telephone survey
  - Community based interviews
- Considerations
  - Interviews and surveys were led by pairs of PFAC Advisors and Hispanic female volunteers
  - The interviewer that met with the patient during hospitalization conducted the post-discharge phone survey
  - Patient comfort was maximized and potential barriers to participation minimized through utilization of preferred environments for community interviews



## INTERVIEW/SURVEY FINDINGS

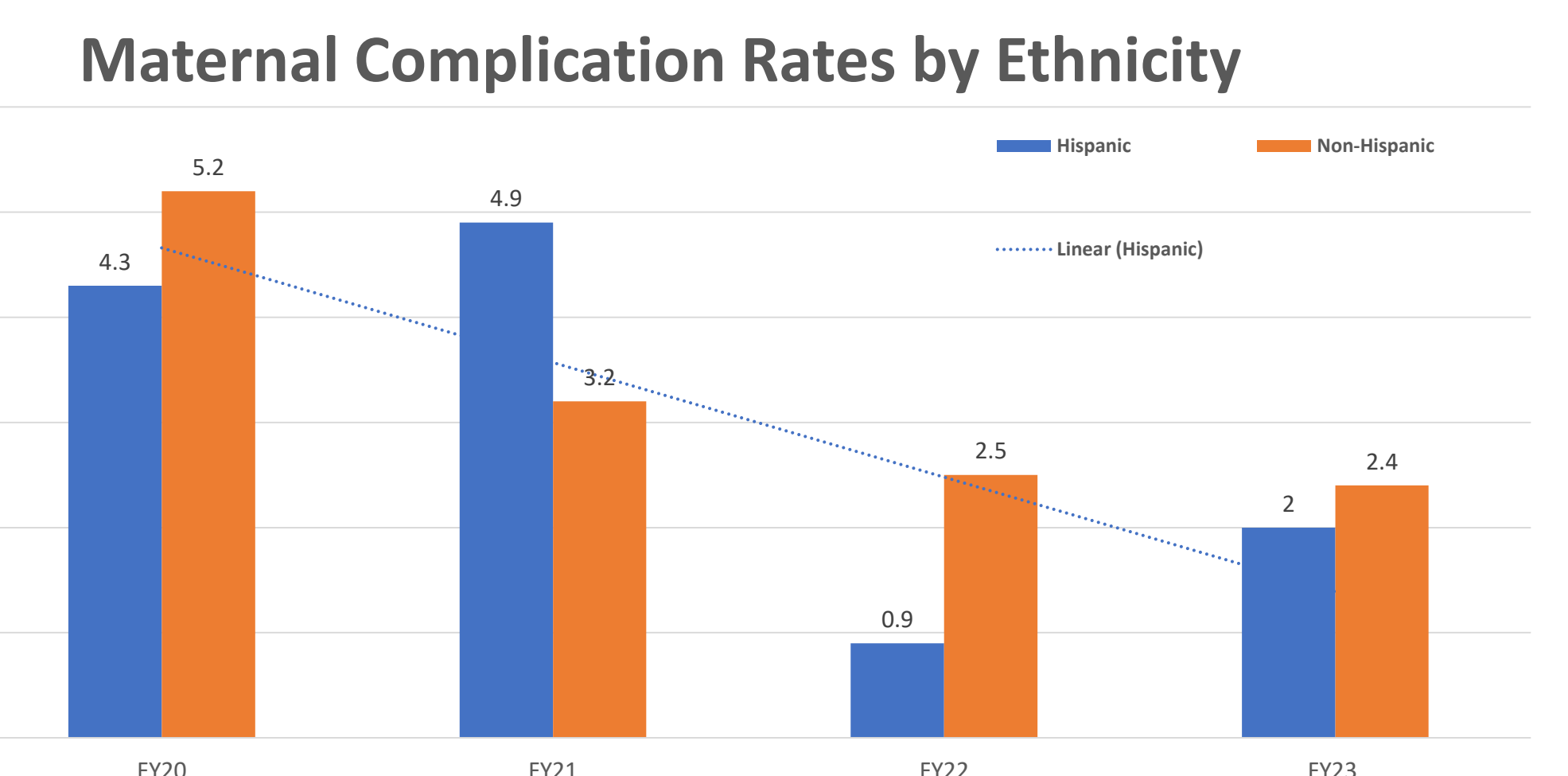
- Our Hispanic patients feel well cared for and respected.
- Chester County Health Department suspended home visits (switched to phone calls) during COVID; visits previously occurred within 48 hours after discharge by a nurse/interpreter team
- Patients do not retain and do not fully understand their discharge information and therefore are not on the lookout for postpartum hemorrhage and postpartum infection.
- Within one hour of being taught (nurse + video) 14% of patients could not remember any warning signs. Within one week of discharge 38% of patients could not remember any warning signs
- In an emergency, transportation (15%), cost concerns (10%), and language (8%) were reported as reasons for not seeking medical care.
- Only 11% of studied patients answered that they “Always” were able to use an in-person interpreter to communicate.
- 51% of patients surveyed do not have a doctor when they are not pregnant

## INTERVENTIONS

- Introduced a clinic-based food pantry through collaboration with the Chester County Food Bank
- Expanded in-person interpreter services to include weekend hours and an on-call service.
- Added an inbound call translation service
- Updated Spanish education materials
- Increased service line Social Work hours
- Offered tours, in Spanish, of the Maternity Department for expecting Hispanic clinic patients.
- Partnered with Maternal Fetal Medicine to provide back-to-back clinic and ultrasound appointments

## RESULTS

- An overall downward trend has been attained with a current Hispanic complication rate of 2.0% (FY23), and a low of 0.9% in FY22.
- For those who had delivered more than one infant at Chester County Hospital, 27% reported an improved level of care. Themes of increased attentiveness, patience, and communication related to education were gained from patient interviews.



## NEXT STEPS

*In accordance with our ICARE Values and BE Standards, we view our work in health equity and patient-centered care as ongoing and fundamental to the provision of thoughtful, consistent, high-quality care.*

- Next Steps
  - Routinely stratify complications & readmissions (maternal & pediatric) by race & ethnicity
  - Expand community based patient feedback opportunities
  - Partner with community organizations to improve access and awareness of medical resources and services