

Improving Emergency Preparedness in Community Birth

April 2024



Our Mission: To enable integrated, high quality reproductive and perinatal care by strengthening systems for patient engagement, quality improvement, value-based payment, and community-based care delivery.

Clients Include

American Association of Birth Centers

Black Women's Blueprint

32BJ Health Funds (NY/NJ)

CHOICES Memphis

Community of Hope (DC)

Connectus Health (Nashville)

Community Health Network of CT

Every Mother Counts

Purchaser Business Group on Health

United Healthcare Community & State

Women's Health Connecticut

Positive Patient Experiences of Community Birth Transfers

"I was treated with respect, dignity, and options/ choices in a difficult situation."

"Our midwife anticipated the best time to transfer to allow for a vaginal birth."

"I felt very supported and validated by my care team and everyone seemed to communicate well." "I delivered in the ER and even though the setting was not anticipated the staff still allowed for delayed cord clamping and immediate skin to skin contact."

"The nursing staff were so kind and responsive and tender." "We brought our hospital birth plan that we had prepped just in case...The nurse told us she read it and felt really connected and in love with our story and plan. And she had an **energy of honor**."



Negative Patient Experiences of Community Birth Transfers



"Treatment felt **punitive**."

"I was **pressured to** have a C-section using fear-based language."

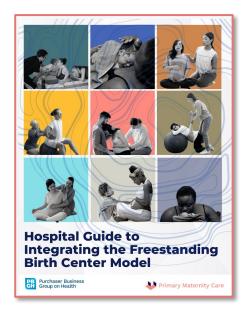
"They called the cops on me."

"Wanted to have a natural birth at the birth center, ideally in a tub. Instead the hospital transfer led to an episiotomy, birthing on my back, no doula allowed, overnight stay."

"I didn't expect to be treated so badly. I think people just don't believe Black women when we talk about what's happening to our bodies."

A Comprehensive Program to Drive Hospital-Birth Center Integration









The 3 Delays Framework

In community-integrated maternity care models, **preventable** morbidity and mortality are often related to one or more **delays**.

1. Recognizing a problem and seeking a higher level of care

2. Reaching the appropriate level of care

3. Receivingcare after
reaching
facility



Action Collaborative 2024

Overall Learning Objectives:

- Strengthen relationships between hospital and community birth practice
- Develop dyad-specific transfer guidelines, policies, and protocols for OB emergencies
- Be able to conduct, execute, and debrief a Full
 Transfer Drill that starts in the community, uses
 emergency transport, and ends up in hospital
- Increase competence in practice-specific components of drills, with firm understanding of interdisciplinary roles, responsibilities, and quality improvement measures





About Step Up Together Action Collaborative







Partners and Funders:

- Purchaser Business Group on Health
- Skyline Foundation
- UnitedHealthcare Community & State



