

## Care Provider Collaboration & Standardization

Goal: To create opportunities for maternity care providers to build relationships and explore possibilities for future collaborations

Physician & Midwives Social Event  
(December 2015)

6 Family Physicians and 3 Midwives participated in this event. Participants felt that the event created the opportunity to:

- build upon existing relationships and develop new ones
- discover shared values
- determine opportunities for future collaboration



“Interesting - great to find commonalities”

“Good to bring family physicians and midwives closer”

“An opportunity to connect and see common goals”

“A great start”

PSBC Frameworks for Antenatal Care Event  
(March 2016)

Goal: In collaboration with family physicians, obstetricians and midwives, create or adopt a standardized framework for maternity care in the Comox Valley.

Event details: Collaboration with PSBC to review perinatal guidelines, provide input, and discuss how practice changes may occur within the community. The event was led by Janet Walker, Provincial Lead for Education and Quality at PSBC. Areas that were identified as needing an update and evidence review were discussed. Those practices changes that were within the scope of influence of working group and advisory team members were addressed and will become part of phase 2 work.

18 Maternity Care Providers gathered together to identify and explore gaps between current approaches to antenatal care in the Comox Valley and the “ideal” framework for antenatal care as recommended by PSBC.

Participants felt that the event enhanced future working relationships by:

- Improving collegiality
- Providing an opportunity to improve practice
- Allowing for discussion with colleagues
- Discovery of common values and goals
- Collaboration



Participants agreed that the event will impact future care by standardizing the approach to care and by improving care



“Very useful event that will improve quality of care”

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My Pregnancy Journal Pilot  
(June 2016 to September 2016)

Goal: To ensure that all women are equally equipped with increased knowledge and power to engage in care discussions with their provider with respect to standardized care expectations during pregnancy.

A pregnancy journal was developed in collaboration with obstetricians, family physicians, midwives and maternity ward RNs. 6 family physicians and 2 midwives along with 40 patients participated in a pilot project to assess how the tool met the goal.

Care providers involved with the pilot were surveyed to determine how the journal met the goals of the initiative:

Care providers all strongly agreed that the pregnancy journal provided them with quick reference guide to understand their patient's maternity care over time.

Care providers were neutral (did not agree or disagree) that the journal helped them engage in open communication with their patients about their care. Care Providers interviewed felt that open communication was already a part of their current practice and that the journal did not change that.

Care providers, on average, were neutral that the journal assisted them in providing standardized care. Family physicians that do not practice maternity care beyond 20 weeks agreed more strongly that the journal was a helpful tool that can help provide standardized care.

5 women provided feedback on the use of the journal. 3 of the women, all first time mothers, used the journal throughout their maternity care and agreed that the journal allowed for increased engagement and more open communication with their care provider. One mother interviewed, who was pregnant for a second time, did not use the journal in her care and mentioned other resources that she found useful. Another mother was interested in using the journal but would have preferred to have a mobile one, available on her phone.

“I like a visual. I may have gone to my appointment with the intention to discuss something but this helped as a visual reminder”

“As a first time mom I found the journal to be very useful. To look ahead and to know what to expect. For example, I looked ahead about group b strep and I was able to do my own research”

“You may do research online but the information is not consistent and timelines are different. You may think, why didn't I get that done? But I could look ahead in the journal and see what was coming”

## NEXT STEPS AND SUSTAINABILITY PLAN

Incorporate feedback from care providers and women into a second edition of the journal that can be printed and folded by clinic staff, care providers or women.



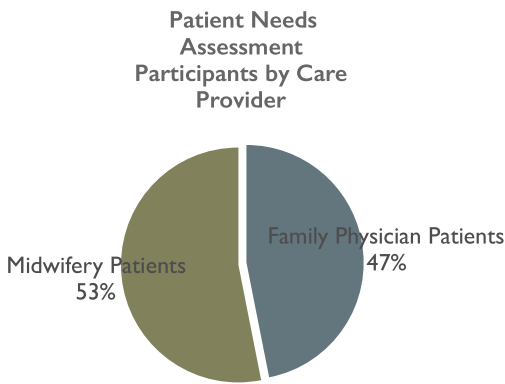
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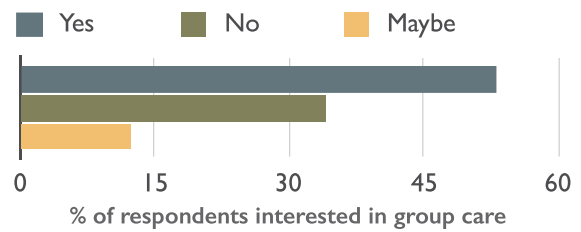
Group Care Model

Goal: To pilot a sustainable group care model with family physician and midwives patients, in which care providers work together to share in providing group care, while women remain under the direct care of their provider.

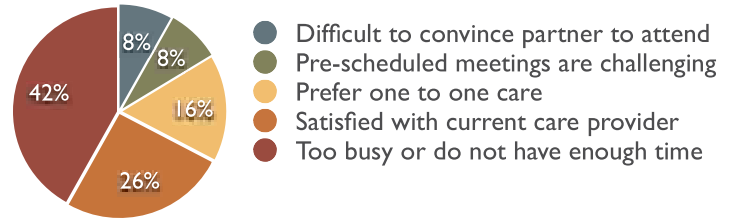
A patient needs assessment took place in July 2016 in order to learn more about how the group care pilot could best meet the needs of women and families.



Patient Needs Assessment results “Are you interested in group care?”



Of those 17 respondents that were not interested in group care:



Have you hear of Group Prenatal Care? If so, tell us what you have heard.

“My friend had group prenatal care and really enjoyed it. It sounds like a good way to connect with other moms”

“Both positive and negative. If I had a question to ask a family physician, I would make an appointment. Some people might connect more in a group setting and it gives people a chance to hear answers to questions they never knew they had”

“As a first time mom I can see it as being very helpful”

“Have heard lots of positive feedback from friends who have participated. Benefits would include meeting and receiving support from other new and experienced moms”

“I like the idea of having the expertise of both a doctor and a midwife”

## NEXT STEPS

Include the Group Prenatal Care Pilot project in the Enhancing Perinatal Care in the Comox Valley Phase 2 proposal and continue to meet with the team to plan for pilot to begin in October 2017.

Development of a collaborative billing model that can be used as a spread model for multidisciplinary team based care.