

Insights

Case Study: Engagement of Title V, Healthy Start and Families to Increase New Mother Wellness in NJ

Improvement work is most effective when we seek out and engage those who will benefit from the outcomes of the change. When that improvement work involves maternal and child health programs, the engagement of mothers brings unique insight and experience that is critical to success.

[A new issue brief](#), co-authored by the Association of Maternal and Child Health Programs (AMCHP) and NICHQ, explores how New Jersey engaged mothers in its efforts to improve postpartum visit rates as a strategy to increase new mother wellness. The issue brief is a result of a commitment to spread learnings from the NICHQ-led Collaborative Improvement and Innovation Network to Reduce Infant Mortality ([Infant Mortality ColIN](#)).

For
their

10 Key Steps for Engaging Families and Patients

- Assess Team Readiness and Attitudes Towards Patient and Family Engagement
- Build Infrastructure and Develop a Plan to Support Patient and Family Engagement
- Determine Roles Patients and Family Members Might Have in Your Work
- Determine the Demographics and Characteristics of Your Population
- Identify Ways to Reach Out to Populations of Interest
- Provide the Information and Support Necessary for Decisions re: Participation
- Select Patients and Family Members who will be Effective Partners
- Provide Support for Participation
- Work to Build Trust
- Foster Equality

Source: Infant Mortality CoIIN Case Study: [Aligning Title V, Healthy Start, and Families to Increase New Mother Wellness in New Jersey](#)

initiative, New Jersey used several key steps (see box) to engage families and patients. First, the state team recognized the need for family and patient engagement, then identified roles for moms in improving postpartum visit rates, found ways to reach out to moms and created a mechanism for learning from their perspectives via focus groups. As a result, the improvement team learned of barriers to postpartum visits that were different than what community health workers cited.

In interviews, nearly 90 percent of community health workers said women skip postpartum visits because of transportation barriers. Mothers however shared that the most common reason for skipping the postpartum visit was not fully understanding the importance of it for their health. Mothers associated the visit with depression, and saw no reason to attend if they were not depressed.

“By engaging parents in the conversation, the New Jersey team could make better decisions about the interventions that would be most effective to improve postpartum visit rates,” says NICHQ Executive Project Director Pat Heinrich, RN, MSN, CLE. “That’s why patient engagement is so important and so fundamental to improvement efforts.”

The parent feedback led to the pilot of an information campaign about the value of postpartum visits. It included a renaming of the visit to focus more on overall wellness. [Read the full issue brief](#) to learn about interventions the New Jersey team implemented and their success. And be sure to check out [this story](#) on parent engagement from a New Jersey parent partner working with us on the NICHQ-led [Early Childhood Comprehensive Systems CoIIN](#).

Find additional case studies of state efforts to improve infant mortality rates in the [Infant Mortality CoIIN Prevention Toolkit](#).