Idaho Perinatal Quality Collaborative News

The Maternal and Child Health Program of the Idaho Department of Health and Welfare and Comagine Health have partnered to establish Idaho’s Perinatal Quality Collaborative (IDPQC). IDPQC brings together clinical providers, public health leaders, payers and community-based organizations to improve outcomes for pregnant people and babies.

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Article: Addressing Social Determinants of Health for Pregnant and Postpartum Medicaid Beneficiaries

Social determinants of health (SDOH) are conditions in the environment that impact a wide range of health and quality-of-life outcomes. These conditions are where a person is born, lives, learns, works, plays and ages. There are complex structures that influence a person’s access and environment and impact the health and well-being of pregnant and postpartum people.

As part of longstanding efforts to reduce health disparities and advance maternal and infant health, states are increasingly developing holistic approaches to address the health and social needs of pregnant and postpartum people. Read this article by the National...
Academy for State Health Policy that includes statements by the White House and other government agencies on how they plan to address the health and social needs of pregnant and postpartum people.

Article: Implementing Levels of Maternal Care Improves Access to Risk-Appropriate Care

Risk-appropriate care is a strategy to ensure that pregnant women and infants with high risk of complications receive care at facilities with personnel who offer services at the required level of specialized care. Learn more about CDC’s Levels of Care Assessment Tools, how to implement levels of maternal care, and increasing state participation in this article.
The Policy Center for Maternal Mental Health has released state cards. They gave the nation a grade of D+ with only four states exceeding a C+ (CA, PA, UT and WA) with 29 Ds and Fs. See Idaho’s state report card here: State Report Cards - Policy Center for Maternal Mental Health.

Perinatal mental illness is a significant complication of pregnancy and the postpartum period that includes a variety of disorders such as depression, anxiety disorders, and
postpartum psychosis, which usually manifests as bipolar disorder. Perinatal depression is the most common and underdiagnosed obstetric complication in the U.S.

Perinatal depression affects 15% to 20% of new mothers — almost double that number for mothers living at low income, and triple that for low-income adolescent mothers. Meera Menon, PhD, outlines the recommendations from the U.S. Preventative Services Task Force on how policymakers can reduce stigma and improve systems. Learn more here: Wrap-Around Mental Health Services Needed for Mothers, Birthing People, and Families.

Resource: Task Force on Maternal Mental Health

Learn more about the task force that evaluates federal maternal mental health care programs and identifies practices for implementation across the country.

Read more on the Task Force on Maternal Mental Health webpage.

White Paper: Considerations for the Implementation of Point of Care Tests for Syphilis

An HHS Task Force released the white paper Considerations for the Implementation of Point of Care Tests for Syphilis as a resource for providers who test patients for syphilis. This resource outlines four main differences between syphilis point of care tests and laboratory-based serologic syphilis tests and highlights the best settings to consider use of point-of-care tests.
Follow Us

Follow the IDPQC Activity Summary Basecamp Page to learn more about the development process of the PQC [here](#). For more information about the IDPQC, visit [idahopqc.org](http://idahopqc.org).

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