

PROJECT UPDATE

The Partners in Inner-city Integrated Prenatal Care (PIIPC) project continues its work towards reducing inequities in use of prenatal care (PNC) in the Winnipeg Health Region.

Information about the PIIPC Project is accessible through the WRHA website at:

<http://www.wrha.mb.ca/community/publichealth/piipc/index.php>

The PIIPC Project Initiatives:

1. Community Based Prenatal Care Initiative

- During the period of June 12- Sept. 4, 2014, 6 women were enrolled in the PIIPC project, all under midwifery care only, with a total of 55 intakes since the project started in September 2012.
- Thirty-two women who attended the 6 HB/HS program sites accessed a prenatal “check-up” from the midwife from June 12- Sept. 4, 2014. One-hundred fifteen women have received “check-ups” without being enrolled in the project. As of Sept. 4, 2014, the midwives reported having done a total of 248 “check- ups” at the HB/HS sites.

2. Street Outreach Initiative

- To date, 11 women have been enrolled in the project through Street Connections (SC), with referrals made for follow-up at either Women’s Hospital (WH) or with a Midwife if they did not have a Health Care Provider (HCP), while other women were reconnected with a HCP from a previous pregnancy. Street Connections staff continue to be involved with women once referred to a HCP by providing transportation assistance with bus tickets, taxi slips, or directly driving women to WH for prenatal visits.

3. Facilitated Access

- Women’s Hospital had 29 women enrolled in the project from June 1- August 31, 2014, with a total enrollment of 86 women since September 2012. Twenty-nine referrals during this period were received from the following sources: Women’s Hospital Out-patient department (8), Obstetrical Triage unit (10), Street Connections (1), Mount Carmel Clinic Midwives/Mothering Project or Nurse Practitioners (3), other programs throughout the hospital and community (5), women themselves (2).
- From June 12 to Sept. 4, 2014, there were 14 pregnant women taken into care through facilitated access with the midwives involved in the PIIPC project. Referrals to the midwives came from PIIPC clients (3), Medical Clinics such as Mount Carmel Clinic (6), Mothering Project (3), Public Health Nurse (1), and walk-in (1). All 14 women were admitted under midwifery care only. To date, a total of 67 women have been enrolled with the midwives through this initiative, four as returning clients. The midwives at Mount Carmel Clinic have provided 26 check-ups to a total of 5 women through the Mothering Project.

TOTAL number of women enrolled in the first 2 years (Sept. 2012- Sept. 4, 2014) through these initiatives is 208.

4. Social Marketing

- Ongoing strategies include posters within the community about where to obtain prenatal care, an information phone line 204-942-BABY, and the website www.thiswaytoahealthybaby.com.
- The distribution of pamphlets at community resource centres such as Ma Mawi, community clinics such as Klinik, walk-in clinics within the Point Douglas, Downtown and Inkster communities, Resource and Community Fairs, and through mail outs with Manitoba Prenatal Benefits have been well received and are continuing.
- Various PIIPC team members continue to participate in Community and Resource fairs such as The Community Fair to be held at Win Gardner Place (North End community) on October 24 and Resource Fair at Women’s Correctional Centre on October 17. This allows for networking with other community programs, as well as an opportunity to meet face to face with women who may benefit from PIIPC.
- Development of a video clip promoting prenatal care (to be used on Facebook and other venues) is currently awaiting approval within WRHA.

RESEARCH UPDATE

- As of September 4, 2014, of 208 women enrolled in the program, 145 consented to chart review (2 consents obtained from women enrolled with PIIPC with a subsequent pregnancy), and 99 women accepted the Invitation to Participate in Research (1 PIIPC client accepting invitation for each of her pregnancies). In the 3 months since our last report, this represents an increase of 53 women being enrolled in the program, 35 consents to chart review and 21 accepted invitation to participate in research.
- As of Sept. 4, 2014, 62 quantitative interviews and 20 qualitative interviews with women have been completed.
- Recruitment remains to be a challenge even with the help of all PIIPC care sites and PIIPC health care providers. Ten women could not be reached because their contact information had changed, and primary care providers have not been able to reconnect with client and have no further leads. One client did not keep the 6 appointments arranged for the interview. One client is incarcerated presenting access difficulties. Four women who accepted invitation were inappropriate for interview and one did not consent to the interview.
- Of the 99 women who accepted the Invitation to Participate, 6 currently have ongoing attempts to be contacted, 15 are still to be contacted near their expected date of delivery (Sept. 20, 2014-Feb. 4, 2015), one who was on the program on subsequent pregnancy has not been recruited for another quantitative interview but attempts are being made to recruit her for the qualitative interview.
- Twenty-six service providers have participated in the qualitative interviews to date. The first 11 interviews focused on process evaluation and the following 15 interviews include a discussion on sustainability of PIIPC.
- Data entry into SPSS for the quantitative interviews and content-analysis of qualitative interviews are ongoing.
- Chart reviews commenced in May 2014, and SPSS data entry has been completed for 43 participants.

PRELIMINARY RESEARCH FINDINGS

Research Question: What is the effectiveness of implementing new health system improvement initiatives in reducing inequities in access to and use of PNC in the Winnipeg Health Region?

- We have analyzed data from the first 55 women who participated in the quantitative interviews to provide some preliminary findings.
- We compared the preliminary findings of the PIIPC clients to the women who had inadequate prenatal care (cases) from the “Factors associated with inadequate prenatal care among inner-city women in Winnipeg” study that provided baseline information for development of the PIIPC program. Refer to the following article for more information about the “Factors” study: Heaman, M., Moffatt, M., Elliott, L., Sword, W., Helewa, M., Morris, H., Gregory, P., Tjaden, L., & Cook, C. (2014). Barriers, motivators and facilitators related to prenatal care utilization among inner-city women in Winnipeg, Canada: A case-control study. *BMC Pregnancy and Childbirth*. 2014, 14:22. This article can be accessed at <http://www.biomedcentral.com/1471-2393/14/227>
- Preliminary findings show that PIIPC clients’ characteristics are similar to those women who had inadequate prenatal care (cases) in the “Factors” study. See Tables 1 and 2. This indicates that the PIIPC project is enrolling appropriate women from the desired target group.
- Preliminary findings also show that PIIPC clients attended prenatal care earlier and more often than the comparison group of women with inadequate prenatal care from the “Factors study”. See Tables 1 and 2. It is noteworthy that women enrolled in the PIIPC project had 11 prenatal visits on average (compared to 3.3 visits) and started prenatal care on average at 13.4 weeks (compared to 21.9 weeks). These findings suggest that the PIIPC program is effective in improving access to and use of prenatal care by selected inner-city women in Winnipeg.
- Congratulations to everyone for their hard work in promoting the PIIPC program!

Characteristic	Cases* in "Factors" study N=202 n (%)	PIIPC clients ** N=55 n (%)
Single marital status	121 (60.2)	33 (60.0)
Income < \$20,000	142 (77.7)	34 (62.0)
Education < high school	151 (75.1)	47 (85.5)
Aboriginal	171 (85.1)	48 (87.3)
Parity >=4	45 (22.3)	14 (25.6)
Weeks pregnant at first PNC visit		
<=13 weeks	50 (30.1)	32 (59.5)
14-27 weeks	71 (42.8)	19 (35.4)
>=28 weeks	45 (27.1)	3 (5.7)
Number of PNC visits		
<=4 visits	156 (91.2)	1 (1.9)
5-9 visits	13 (7.6)	21 (38.9)
10+ visits	2 (1.2)	32 (59.5)

TABLE:1

Characteristic	Cases in the "Factors" study N=202 Mean (SD)	PIIPC clients N=55 Mean (SD)
Maternal age (years)	24.6 (5.8)	25.8 (6.4)
Education (years)	10.2 (1.8)	10.0 (1.7)
Parity	3.2 (2.0)	2.4 (2.4)
Weeks pregnant when sure pregnant	12.0 (8.4)	11.1 (4.5)
Number of PNC visits	3.3 (1.5)	11.1 (4.5)
Weeks pregnant at first PNC visit	21.1 (9.2) *excludes 30 cases who had no PNC	13.4 (7.0)

TABLE: 2
What PIIPC participants said about their prenatal care experience:

- It was convenient.
"it felt like everything was contained in one little area [Women's Hospital OPD] where I wasn't going all over the city for different things, everything was right there, so I felt really comfortable and it was easy for me"
- It was coordinated
"Well the meeting that [nurse] had arranged it was with everyone in a conference room so it wasn't like I was going from one person to the next...nurse] would just arrange it so that I met everybody all at once and they answered all my questions and then they had their questions. So it wasn't overwhelming or had a bunch of different people at different times...it was a good experience"
- It was flexible.
"They [Fetal Assessment] never had a problem scheduling, they would schedule around me."
- It was easier to get to appointments.
Bus tickets: *"if I didn't have the tickets to come back this way or anything then I wouldn't have come [to my prenatal appointment], I would just have to keep rebooking and everything until I had the bus fare and everything to come"*

Experience with their Health Care Providers: *“I looked forward to going to the [PIIPC] appointments and it was important to get to the appointment, ...[referring to previous provider] it was more like forcing myself to go because it wasn't a pleasant experience, (now) they explained everything so I know I was going to get a lot of information.”*

Help making appointments: *“It was a lot easier for me for them to help out in that way just because I have had a lot of trouble getting places, getting people call me back...it's not easy to remember a lot of things “*

What PIIPC participants said they liked about their care providers:

- Helpful, caring, understanding, more personal, friendly, concerned, listened, reassuring, available, respectful, non-judgmental, advocate
“a lot more at ease with the pregnancy because I know that I was getting the care that I wanted and that they were listening to me about the concerns...they explained the complications and just reassured me”

What Service Providers said they liked about PIIPC:

- Improved understanding about other programs.
“PIIPC has definitely changed the way the midwives feel that we are part of the community, ...and there's been some really good outcomes coming from that, just understanding what's in our community “ (Midwife).
- Improved communication between programs resulting in better collaboration.
“staff would make a referral for prenatal care and there wouldn't be any back and forth communication between us and the prenatal care site, so it wasn't a matter of being anything specific around our prenatal clients it was kinda like two separate entities but now there's a lot better communication” (Community Nurse)
- Team work.
“the best thing that's happened, ... has been the links and the relationship building between community and acute care, so our links with street connections, with Mt Carmel clinic, sage house, all our healthy baby sites, midwifery, um has just improved greatly, we feel like a team, we function as a team” (Hospital Nurse)
- Change in service delivery.
“We are certainly more aware of women who haven't been getting prenatal care at all. We have a way of adapting our care to fit those women into our clinic at short notice and to see them when they need to be seen on the days that we're there and trying to get all of their care, all of the critical aspects of their care while we have them in the building so they can get bus tickets, they can get a meal ticket here and they can get their ultrasound, they can get their blood work done and sometimes on the same day so it offers us a chance to do the basics of that kind of care in an expedited sort of fashion”. (Physician)

MEETINGS

July 8, 2014	Social Marketing Working Group
July 17, 2014	Community Based Prenatal Care Working Group
August 27, 2014	Social Marketing Working Group

CONTACT INFORMATION

Principal Investigator:

Maureen Heaman
Phone: 204-474-6222
Maureen.Heaman@umanitoba.ca

Principal Knowledge User:

Lynda Tjaden
Phone: 204-791-3132
ltjaden@rwha.mb.ca

Project Coordinator:

Zorina Marzan Chang
Phone: 204-474-7140
zorina.marzanchang@ad.umanitoba.ca