

GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

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Category of Request

 New Grant Grant Continuation

Previous Council File No. _____

 Change in Previously Approved Grant

Previous Council File No. _____

Project/Program Title: Healthy Wisconsin Families American Rescue Plan Act (ARPA) State & Local Recovery Funds (SLRF)Grantor Agency: Interagency Agreement - Board of Regents of the Univ. of Wisconsin System-UW School of Medicine & Public Health and Wisconsin Department of Health Services (DHS)Grant Application Date: 5/30/2023Anticipated Award Date: 10/01/2023

1. Description of Grant Project/Program (Include Target Locations and Populations):

The Grant Project priority is: *“Enhanced care coordination including the implementation and diversification of the perinatal workforce (e.g., midwives, doulas, community health workers, lactation consultants, others) in the hospital and maternal care delivery models with the specific aim to build policies and practices that solidify the training, development, employment, and systematic and equal access to community aligned support”.*

With this project, we aim to build the care coordination between doulas and targeted healthcare systems (Advocate Aurora and Ascension) to enhance the birthing experience, reduce complications, and improve outcomes for birthing people and infants. The program ultimately aims to use this grant opportunity to build more communities of practice, quality improvement, cross-sector team meetings and trainings, team-centered care approaches and overall diversification of birthing people’s options to quality pregnancy and postpartum support. The partners identified for this grant are existing allies in maternal and child health, but with this opportunity we look forward to more intentional integration to reap the biggest impact in our community.

Our target population is birthing people up to 30 weeks gestation that are City of Milwaukee residents; aiming for 75% of the enrolled families to be Black/African-American identified due to the statistical disparities in Infant Mortality and Maternal Morbidity. Each Community Partner to refer at least 25 birthing people to BOMB Doula Program per year to monitor impact of the integrated care on clients as well as impact on healthcare policy and practice.

2. Relationship to City-Wide Strategic Goals and Departmental Objectives:

Infant mortality is a pervasive issue with the City of Milwaukee – impacting specific zip codes and BIPOC populations the most. The City of Milwaukee has a specific focus on curtailing the infant mortality crisis in conjunction with its declaration of racism as a public health crisis in 2019. The BOMB Doula program was created as a result of this declaration and is built to target the specific gaps in cares for BIPOC birthing persons; particularly Black mothers and babies as they are 3x more likely to die or suffer poor birth outcomes than any other race. The Health Department’s Community Health Assessment identifies Maternal and Child Health as one of its top three priorities of strategic focus. Lastly, this kind of work bridges the program into the Public Health 3.0 modality of MHD’s strategic plan – becoming the informants of practice and drivers of evidence-based service in the community.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

This grant affords the BOMB Doula Program to continue its necessary staffing expansion to serve more families in the community. The BOMB Doula Program started its infrastructure focusing on direct service provision while building important relationships in healthcare spaces to set the foundation for these kind of grant activities. Having this grant affords the program the strategic and intentional integration of doulas into healthcare where there is no pre-existing evidence-based model in Milwaukee. This grant affords for the staff time and administrative expenses to build quality improvement, change management and incorporation of community and stakeholder voices with the end goal of producing a proof of concept and outcomes of the integrated model for targeted dissemination.

This funding supports 3 doula FTEs, partial pay for the Doula Program Manager, Doula Coordinator and temp positions, subawards for Ascension and Advocate Aurora for their staff time and various operational expenses.

4. Results Measurement/Progress Report (Applies only to Programs):

Data Metrics and Strategies/Activities:

- Each Community Partner to refer at least 25 birthing people to BOMB Doula Program per year
- Doulas will attend at least 1 prenatal appointment and 1 postpartum appointment per client
- Community Partners to compare birthing outcomes of a patient group (de-identified) that did not receive doula cares and compare outcomes to those that do within this project.
- Integrated Care Team to establish foundational training list for doulas and targeted healthcare disciplines
- 90% of clients will report satisfactory experience by doulas (specific scale/rating TBD)
- 90% of clients will report satisfactory experience with medical team (specific scale/rating TBD)
- Evaluation of Birthing Outcomes Data – Minimum data to assess for in joint cases (Quarterly):
 - Low Birth Weight
 - Preterm Births
 - Stillbirths
 - Infant mortality

6/15/04

- Maternal mortality
- Breastfeeding Initiation
- Prenatal/Postpartum Appointment Attendance
- Other agreed upon relevant metrics between parties

In addition to the aforementioned data, the Integrated Team will create and administer Professional Stakeholder Interviews, Client Experience Surveys, Joint Team Case Reviews and Focus Groups.

5. Grant Period, Timetable and Program Phase-Out Plan:
10/1/2023 – 9/30/2025

6. Provide a list of Subgrantees:
Ascension
Advocate Aurora

7. If Possible, complete Grant Budget Form and attach to back.
See attachment