Maternal Mental Health Innovation Award Application



- A. Award Category: Innovative Programs in Care
- B. Overview and objectives: POEM (Perinatal Outreach & Encouragement for Moms) is a comprehensive, free-of-charge maternal mental health (MMH) support program in Central Ohio, the only one of its kind in the state. POEM uniquely provides a full menu of specialized services, which have consistently grown since its founding, over 14 years ago. POEM closes gaps in MMH care in a range of ways: mom-to-mom mentoring, support groups online and in-person, access to perinatal mental health clinicians (including free counseling for uninsured/underinsured), and referrals to mental health ombudsman services to aid in housing, legal and case management needs. Through this holistic approach, the primary objectives of the program are to reduce MMH symptoms, increase coping skills, and make verified successful connections to appropriate health and social service programs. POEM is a program of the private, non-profit organization Mental Health America of Franklin County (MHAFC).
- C. <u>Program Details</u>: POEM's services for pregnant and parenting women include:
 - A dedicated Maternal Support Line with both phone as well as text capabilities that provides assessment, informational support, specialized referrals, and ongoing client follow-up.
 - Multiple in-person and online support groups for pregnant and postpartum women and mothers with children who are aged toddlers to teens.
 - Mentor Mom program: one-on-one phone and text-based support by a team of trained volunteers, all of whom
 have recovered from an MMH complication. Mentors have experience and training to understand the culture,
 background or belief system of the participants, which fosters buy-in and ensures that program participants
 feel comfortable and safe. POEM volunteers serve as a model for recovery, and inspire motivation for
 participants.
 - A direct HIPAA-compliant referral interface for providers, including all area hospital maternity and
 postpartum units, obstetric and pediatric practices and clinics, home-visiting programs, governmental
 programs such as WIC and Healthy Start, inpatient and partial psychiatric hospitalization programs, and carecoordination agencies.
 - Direct referrals and connections to a network of specialized MMH clinicians, including perinatal psychiatry
 and specialty community resources. All network providers are tracked based on insurance, location, specialty
 services, and wait time. Referrals are not generally made if wait time exceeds 2 weeks. MHAFC's Pro Bono
 Counseling Program is available for mothers who are uninsured or underinsured. Mothers who have a
 Medicaid-based health plan and transportation or child care barriers are directly connected with in-home
 counselors and case management, if indicated.
 - A professional and community outreach and education program with a comprehensive provider education packet adapted, with permission, from the MCPAP for Moms program in 2014, the first organization to utilize the MCPAP materials.
 - Collaborative client management with the MHAFC Ombudsman program, which assists with client rights issues in inpatient/outpatient psychiatric care, legal aid, housing navigation, etc.

Key Personnel:

Service delivery is managed by the MHAFC Program Director who is a POEM co-founder, as well as a part-time POEM Program Coordinator (10 hours/week). 40 trained POEM volunteers (all survivors of MMH complications) facilitate 36 support groups and provide an average of 540 hours of mentoring services (per year).

<u>Timeline</u>: Three women, all survivors of perinatal mental health disorders, founded POEM in 2003. POEM began as a monthly in-person support group and phone support service using one of the founders' home phone lines. It has rapidly expanded to currently offer 7 different services within the program, all in response to the needs of childbearing women in the Central Ohio community. Two founders also serve as coordinators of Postpartum Support International (PSI), completing annual trainings since 2003. Co-founder and current POEM director, Tonya Fulwider, is a PSI Regional Coordinator, and has served in that role since its inception. The founders were recognized by PSI as recipients of the 2009 Jane Honikman Founder's Award. In 2013, MHAFC recruited POEM in the interest of a merger, viewing the organization as Central Ohio's top source for MMH programming. MHAFC was founded in 1956 as an affiliate of Mental Health America, the country's oldest and largest mental health non-profit organization. All POEM services are now under the umbrella of MHAFC, and is one of the largest programs in the agency. Together, our mission is to transform how people think about mental illness, make it easier to get

help, and give people the support they need to get better and stay better.

- D. <u>Source of initial and sustained funding/support</u>: Following IRS approval as a 501c3 organization, POEM secured a start-up grant from The Columbus Foundation (a local community foundation) to support initial funding. Since then, POEM maintains a diverse funding stream—a key to sustainability. The program has an approximately \$145,000 annual operating budget, supported by:
 - 1. United Way of Central Ohio (3-year grant cycle)
 - 2. The Alcohol, Drug and Mental Health (ADAMH) Board of Franklin County (annual renewable allocation)
 - 3. A Human Services Program of the City of Columbus, Department of Development (4-year grant cycle)
 - 4. HRSA Healthy Start federal grant a contractor of Columbus Public Health (5-year grant cycle)
 - 5. Personal sustaining donors and agency members
 - 6. Annual signature events: Give Mom the Mic, and Columbus Firefighters Golf Scramble for PPD Awareness
- E. Length of time in operation: POEM was founded in 2003 and began operation as a 501c3 nonprofit organization in 2005. In 2012, the CEO of Mental Health America of Franklin County approached POEM about formal acquisition and partnership, and in 2013 POEM merged with MHAFC.

 Sustainability plans: Programmatically, the POEM model functions on an engagement loop. Consumer-operated, POEM incorporates feedback from volunteers (who are program alumni) and participant evaluations. Responses are reviewed and addressed quarterly. Results are examined semi-annually through our agency's CQI program. The development of programs such as Mentor Moms, the online group, and text services itself were instituted based on participant feedback. Fiscally, the POEM program has multiple long-standing renewable funding sources, and consistently meets the outcome projections provided to every funder. POEM also hosts an annual event entering into its 8th year with 11 corporate sponsors, over 100 auction donors, and an average attendance of 250, with the majority attending multiple years.
- F. <u>Summary of results and evidence of impact</u>: The POEM Program served 529 unduplicated participants in 2016, and has a successful track record of impacting positive change in POEM clients. In the last 2 program years, over 92% of responding participants reported improvement in three primary measures:
 - 1) Reduction in score (symptom reduction) on the three-item subscale of the Edinburgh Postnatal Depression Scale (EPDS)
 - 2) Positive increase in self-efficacy within the context of thinking patterns and coping skills (increased ability to deal with daily problems)
 - 3) Positive increase in informational support (knowledge of other treatment options and community services)

Satisfaction with program delivery is collected via each of the program's measurement methods and consistently receives "very satisfied" by 98% of responding participants, on average.

The program model reflects an array of evidence-based research that defines social support as a key factor in prevention, recovery, and maintaining wellness (Dennis, et al., 2006). Mothers who receive peer-support intervention are over four times more likely to have decreased depressive symptoms, compared with mothers who do not receive peer-support interventions (Dennis, 2003).

Driven by data showing poor birth outcomes in certain high-poverty areas in Central Ohio, POEM increased outreach efforts in 2015 to some of the community's most vulnerable moms. Currently, approximately 50% of POEM clients receive Medicaid, a significant increase, reaching more at-risk moms than ever before. Direct referrals and partnerships with agencies providing in-home counseling and case management were implemented to best serve this population, who often face a multitude of barriers to care.

G. <u>Discussion of Scalability</u>: The POEM program model is adaptive to other communities, and components are currently in place in other metropolitan areas across Ohio. Because it is a multi-faceted program, potential program developers are able to focus on various elements of the program based on their community's specific needs. While specialized training is essential, program developers do not need clinical licensure to manage this type of program, allowing leadership by women with a variety of backgrounds. POEM co-founders are regularly asked to speak to other organizations working to build similar support programs in their areas, and were among the authors of the PSI Guidebook, *Developing a Sustainable Perinatal Support Network in Your Community*.