



Closing Gaps in Maternal Mental Health
PolicyCenterMMH.org

Hospital Whole Mom™ Survey

Date

Name of hospital

Name of individual completing survey

Title of individual completing survey

Email address and telephone number

Please check 'YES,' 'NO,' or 'IN PROGRESS' for the following to let us know what your hospital currently offers. Programs/policies/processes must be in place and benefiting women/families as of the date noted above.

Standard Key

Basic = white Advanced = light blue

	Training	YES	NO	N/A	IN PROGRESS
1	All nurses working in postpartum, L&D, the ER, NICU, or any other department that may work with perinatal women, lactation consultants, and social workers have received a minimum of 3 hours of training from a recognized MMH training organization. (Offered through programs like The Policy Center for Maternal Mental Health (the Policy Center)/Postpartum Support International (PSI), PSI independently, or other local programs).				
2	All nurses working in postpartum, L&D, the ER, NICU or any other department that may work with perinatal women, lactation consultants and social workers have received a minimum of 6 hours of training from a recognized MMH training organization. (Offered through programs like the Policy Center/PSI, PSI independently, or other local programs).				
3	Psychiatrist trained in reproductive mental health disorders is available/on-call to provide treatment for severe cases.				
4	If a teaching hospital trains residents, students, or post-doctoral students in Maternal Mental Health.				

5	Clinicians working in the Emergency Department complete the <u>Zero Suicide Preventing Suicide in Emergency Departments Training</u> to understand core components of suicide risk assessment, which includes screening, brief interventions, and safety planning.				
Curriculum		YES	NO	N/A	IN PROGRESS
1	Hosts grand rounds dedicated to maternal depression and other mood and anxiety disorders at least one time a year, facilitated by experts in the field.				
2	Includes an overview of maternal mental health disorders in birth class curriculum, including signs, and symptoms, prevalence, and local treatment resources. Content should come from a recognized MMH organization and should include a video or clip from a documentary.				

Resources, Policies, Procedures and Practices		YES	NO	N/A	IN PROGRESS
1	Promotes and protects sleep on postpartum floors (applicable to all staff that service the floor- including housekeeping, engineering, food service).				
2	Materials in discharge packets include maternal depression or other mood disorders signs, symptoms, risk factors, and local treatment resources, if any.				
3	At the time of registration, on postpartum floors, or at discharge asks all patients whether they have been provided a questionnaire about mental health/wellbeing ("screened") by their obstetric provider office (midwife, OB-Gyn or family practice provider who provides prenatal and postpartum care), noting it is the policy of the hospital to support all patients in their mental health and wellbeing, by providing the questionnaire to those who have not been screened previously. If the patient reports that a questionnaire has already been provided and that there is no need to screen again, document the declination due to prior OB provider screening in the patient's chart. If the patient has not been screened, offer the PHQ/GAD or EPDS (or other validated tool(s)). If a patient scores positive, consult with a PMH-C certified staff member to address immediate concerns, who will coordinate treatment plan development with the patient's primary obstetric provider, and direct the patient to immediate treatment resources that may or may not be within the hospital.				
4	Conducts observation and screening of mothers during NICU stay of longer than 48 hours. Results of screening and weekly discussion of mother's mood and affect included in multidisciplinary rounds for NICU patients.				

	Resources, Policies, Procedures and Practices cont.	YES	NO	N/A	IN PROGRESS
5	Published Maternal Mental Health telephone line, staffed by clinicians trained in maternal mental health to serve pregnant and postpartum women, to provide screening and local treatment options (which may or may not be hospital based).				
6	Referral process in place for accessing inpatient treatment programs specific to Maternal Mental Health Disorders for most severe cases.				
7	Has measurable outcome goals for MMH Program(s) in the Quality Improvement Program. Monitors annually and implements interventions to improve outcomes.				
8	Referral process in place to local therapists and psychiatrists (may be provided through telemedicine).				
9	Assesses patient satisfaction with the birth experience.				
10	Hospital has Maternal Mental Health clinical champion who facilitates staff training (provides or contracts with a certificate based MMH training program provider), creates/adopts a screening algorithm including referral process to local treatment providers and the hospital's treatment programs if any, and serves as a resource/consultant for staff to discuss complex cases. May oversee measurement of MMH program outcomes and oversee quality improvement initiatives.				
11	Provides a sample "Postpartum Plan" worksheet which is shared with mothers at discharge and may utilize questions like the Artemis Postpartum Social Support Screening Tool .				
12	L&D and Postpartum rooms have a 24/7 patient support manager available to support patient needs and requests.				
13	Has a maternal patient advisory council with a minimum of three mothers/families served by the hospital and which meets no less than 4 times a year. The Council should be used in addressing quality management complaints, maternity patient satisfaction survey results, and can inform general process improvement efforts.				

	Programs	YES	NO	N/A	IN PROGRESS
1	New parent support group, minimum of 6 weeks including: breastfeeding support, soothing babies' crying, importance of sleep and balanced diet, exercise such as yoga, social support, and more, offered on-site and/or virtually.				
2	Maternal depression/anxiety support group, offered by staff trained in group therapy, and a maternal mental health certificate program (see Training 2 above) offered on site or within the hospital system at site within 30-mile radius of hospital and/or offered virtually.				
3	Outpatient day treatment program specific to Maternal Mental Health Disorders available through the hospital system or contracted hospital partner within 30-mile radius of the hospital.				
4	Inpatient treatment program specific to Maternal Mental Health disorders.				

How to be Recognized as a Whole Mom Hospital

To be recognized as a hospital that has attained minimum or advanced “Whole Mom” hospital status, submit this completed form along with a letter from a hospital administrator requesting consideration as a “Whole Mom” hospital and attesting to the accuracy of this form’s content to: info@PolicyCenterMMH.org

Those hospitals that meet the criteria (answered yes to all basic standards) will be announced through a press release distributed no less than twice a year.