

2014 Gage Awards

Reference #	7489850
Status	Complete
Name of hospital or health system	The Ohio State University Wexner Medical Center
Name of project	Moms2B
CEO name	Steven G. Gabbe, MD
CEO approval	Check here to confirm that your CEO approves of this project being submitted for a 2014 Gage Award
Submitter name (first and last)	Steven G. Gabbe, MD
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Within which of the two categories does your application best align?	Population Health

<p>1. Provide a brief description of the project. (This section should resemble an abstract for a poster presentation or an abstract for a peer reviewed journal. Include an objective, data sources, study design, findings, and conclusions.)</p>	<p>MOMS2B: A Group Cooking and Nutrition Program for Better Birth Outcomes Patricia Temple Gabbe, MD,MPH; Carmen Clutter MS,RD, LD, CLC — The Ohio State University Wexner Medical Center; Twinkle French Schottke — Nationwide Children’s Hospital; Tanikka Price, JD — Thelma Patrick, PhD, and Rebekah Reno PhD candidate — all from The Ohio State University</p> <p>The Moms2B program addresses multiple social determinants of maternal health through an academic collaborative in two high-risk, low-income neighborhoods. The program provides nutrition and prenatal education, and social support. Moms2B began in September 2010 in a neighborhood that, in the previous year, experienced 122 births, 23 (19%) preterm and two infant deaths occurred. The normal transition of pregnancy was chosen as an intervention opportunity. We assess the risk factors of food insecurity, depression, life stressors, smoking, and encourage breastfeeding and safe spacing. To date, 327 women have attended and more than 133 babies born. Women enter at an average gestation of 20 weeks and attend an average of nine sessions; 86% are African American; 53% have a 12th grade education; 84% have monthly household income below \$800. Major stressors include “being overloaded,” bills, and transportation. Participants are between 14 to 42 years old with an average age of 24. Most women have two or more children. Based on self-reported pre-pregnancy BMI, 55% are overweight or obese, and 60% gained more than the Institute of Medicine recommended weight gain, despite 86% reporting food insecurity. Births include four sets of spontaneous twins and triplets. Thirteen percent have been born low birth weight and 16.5% were premature at less than 37 weeks. An unanticipated but welcome development was attendance following the birth of their babies. We continue to identify unmet health and social support needs for each participant including the need for a safe place to sleep and food insecurity for the infant, and the need for more breastfeeding support. www.moms2bohio.com/</p>
<p>1A. Attachment, if applicable (Applicable examples include a peer reviewed journal article, other content published in the literature, or a presentation at a national meeting)</p>	<p>InnovationspanelfromAspenInstitute-Moms2B.docx (37k)</p>

2. Describe the methods use in this project. Include where, why, and how the project was accomplished.

Infant mortality, that is, babies who die before their first birthday, and preterm births are critical health issues for Ohio. The state ranks 47th in overall infant mortality, with a rate of 7.7 for every 1,000 births and 49th in African-American infant mortality.

Franklin County has an infant mortality rate of 8.2. This is even worse for our minority populations: the mortality rate is 16.0 among African-American infants and 6.2 among Hispanic or Latino infants. Franklin County has a slightly higher percentage of low birth weight babies (9.6 percent), compared to Ohio (8.6 percent). The national average is 8.2 percent.

According to the Ohio Department of Health, the average national hospital cost for a premature baby is \$49,033 versus \$4,551 for a full-term, healthy baby. Premature babies can cost Ohioans more than \$1 billion a year in medical costs. A healthy, full-term pregnancy allows the infant to begin life in optimal health and leads to better growth, development and adult health.

Why: The goal of Moms2B is to help pregnant women deliver full-term, healthy babies by addressing the social determinants of health — education, nutrition, emotional well-being and access to health care — during the critical periods of gestation. Moms2B works to make sure every woman in the program has a healthy pregnancy and that their babies are born healthy.

How: Moms2B started in September 2010 as a Nationwide Children's Hospital research project with a \$42,000 grant from The Ohio State University and led by Dr. Patricia Temple Gabbe. For the current fiscal year, Moms2B has several funding sources including from the Ohio Medicaid program's MEDTAPP (Medicaid Technical Assistance and Policy Program), The Columbus Foundation, Nationwide Children's Hospital, CareSource, Ohio State Outreach and Engagement, Chase, a Morris Grant, Kroger's, a Lurie Grant(Temple Israel) and a Catch Grant.

In September 2013, Moms2B became a program of Ohio State's College of Education and Human Ecology, to address social determinants leading to health disparities in maternal and infant outcomes, especially high infant mortality in African-American communities.

Where: The Moms2B program operates in Weinland Park and the Near East Side neighborhoods of Columbus. These communities have high levels of crime, poverty, preterm births and infant mortality.

Every week, pregnant women and new moms meet for two hours in a structured program that focuses on how to improve their diets for themselves, their babies and their families. During each meeting, the staff leads a discussion on a new, useable subject that's relevant to the women and their lives. Topics include setting small achievable goals, such as keeping a calendar and spring cleaning.

<p>3. Describe the results of the project. What data was used to support improvement results?</p>	<p>The holistic program has been in Weinland Park for nearly four years and in the Near East Side for two years. The Near East Side Moms2B site mirrors Weinland Park in its focus and structure. Women have gained access to vital information on nutrition, health services and emotional support they never received before.</p> <p>When the program began in 2010, about 30 moms participated each month. The number of moms participating grew to 40 in 2011 and this year, the program is serving about 80 moms a month. Since its beginning, over 300 moms have attended Moms2B. Of those, 86 percent were African-American, 53 percent had a 12th grade education and 84.2 percent had monthly household incomes below \$800.</p> <p>More than 133 babies have been born with birth weights that range from less than 2 pound twins to 9 pounds 2 ounces. There have been 3 sets of twins and 1 set of triplets born all but one set at near term. We estimate more than 100 babies have been born healthy who may otherwise have faced complicated and expensive health issues at birth.</p>
<p>3A. Attachment, if applicable (Only graphically displayed data such as charts will be accepted. Data should include baseline and improvement data)</p>	<p>Moms2BIMOutcomesNov2013.pptx (10502k)</p>

<p>4. Describe what happened as a result of the project. Was the improvement related to the intervention? Can the project be duplicated by other organizations?</p>	<p>The Moms2B program is still growing in participation, recognition, funding and services offered to Columbus women. Dr. Gabbe is studying program outcomes and plans to add a pathways model for more integration with prenatal clinical care.</p> <p>The women in MOMS2B have weekly one-on-one meetings with a medical dietitian to talk about what they ate the previous day, and they are given suggestions on how to improve their diets for themselves, their babies and families. At each session, the women learn about shopping for and cooking healthy meals. They are assessed to make sure their pregnancies are going well.</p> <p>Through the course of the program, the women have even developed their own “Moms2B salad,” which is prepared every week. This salad has primarily boiled eggs, tomatoes, cucumbers and crisp green lettuce. Our moms have also created a “Moms2B dip” — a mix of peanut butter and vanilla yogurt that we dip sliced apples in. These are healthy, easy-to-make foods our moms can prepare at home. Along with receiving a healthy meal to eat during the program, all the pregnant and parenting women receive healthy food and supplies, such as diapers, to take home.</p> <p>Moms2B aids in a more efficient and cost-effective use of medical services and provides a venue to train our local nursing, medical, dietetics and social work students. Social workers, nurse midwives, obstetricians, medical dietitians and family and mental health nurse practitioners provide services to the women each week while learning about the challenges faced by people with low incomes.</p> <p>The program has experienced a 166 percent increase in participation from 30 moms a month in 2010 to over 80 moms a month currently attending. From September 2010 through now, more than 300 moms attended MOMS2B. Two Moms2B clinics are open and two more locations are set to open in 2014.</p>
<p>5. Describe how patients, families, and if appropriate, community was included in the work.</p>	<p>The community support for Moms2B has multiplied since the program began. The Kroger Co. has supported Moms2B from the beginning. Every time Dr. Gabbe speaks to a group about the program, they gain more support. Those involved in the program include the Columbus Kiwanis, Temple Israel, churches, the Governor’s Office for Community and Faith Based Initiatives, United Way of Central Ohio, Columbus City Council, Franklin County commissioners and Columbus Public Health. Moms2B also has a robust volunteer base of individuals who give of their time and resources. Many individuals also generously provide financial support to Moms2B.</p>
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