

Optimizing Maternal Mental Healthcare:

Educating Healthcare Professionals & Enhancing Utilization of the Healthy Beginnings Program for Pregnant & Postpartum Women

Project Leaders:



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Background

Postpartum depression (PPD) is a significant maternal health concern that affects the well-being of mothers, their families, and their ability to cope. Although there are currently established guidelines for screening and management of PPD, there are many gaps in care leaving women with PPD under-recognized and under-treated.

PICO

Among healthcare professionals who provide care for pregnant and postpartum patients at a small Midwest women's clinic, how does the implementation of a postpartum depression education session impact the knowledge and practices of the healthcare staff on the topic of maternal mental healthcare compared to current practice?

Project Interventions

The project aimed to create a consistent process to ensure all mothers and healthcare professionals are well-informed about PPD and that patients receive consistent, thorough, and timely care. Educational initiatives were conducted at both the clinic setting, where women received pre and postnatal care, and the delivering hospital setting. The educational initiative included adherence to current ACOG screening guidelines (which recommends screening for PPD at or before three weeks and again at or before 12 weeks postpartum), Cheryl Beck's Theory on PPD to reduce stigma and better understand how to support women throughout this transition, and the Healthy Beginnings program which enhances education and identification of PPD. The initiative included interactive PowerPoint presentations, discussion, and educational handouts, including a care pathway to better integrate these evidence-based strategies.

Outcomes

Surveys were distributed at the beginning of the educational initiatives to assess changes in healthcare professional knowledge, attitudes, and intended practice changes. The survey results showed increased awareness of PPD screening guidelines (92%), increased commitment to the Healthy Beginnings Program (100%), and increased confidence in identifying and managing PPD through the use of Cheryl Beck's PPD theory. Postpartum follow-up rates were also tracked before and after the educational initiatives, revealing a 13% increase in follow-up within three weeks post-initiative.

Conclusion

This project was successful as it improved healthcare professional knowledge and commitment to postpartum care. The focus should remain on continuing education and improving patient education to better support mothers in this vulnerable time.

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