Improving Community Health Through Cross-Sector Partnerships:

Improving the Health of Mothers & Babies in Central Oregon

Cross-sector partners worked together to:

- Create a systematized approach for referring women to prenatal health care
- Connect women with prenatal mental health
- Create a regional tracking and coordination system

Background
Health starts—long before illness—in our homes, schools, neighborhoods, and jobs. Public health agencies in Oregon are collaborating with community partners to make communities healthier and ensure that people have access to critical prevention services. Community partnership development is a foundational capability for state and local public health agencies in Oregon and for many decades, local public health agencies throughout Oregon have demonstrated skill and dedication in forming cross-sector relationships with private, public, and governmental organizations that share many of the same goals. The purpose of this case study is to increase understanding of the effective formation and use of cross-sector partnerships to improve community health.

The Project: Improving the Health of Mothers & Babies in Central Oregon
Crook, Deschutes, and Jefferson Counties, and the Central Oregon Health Council collaborated to develop and implement a regional approach to a perinatal continuum of care model.

For more information: [http://cohealthcouncil.org/](http://cohealthcouncil.org/)
This project addresses goals identified in the Regional Health Improvement Plan to increase the percent of women who receive prenatal care in the first trimester and reduce the percent of low birth weight babies. This approach served as the foundation for a regional referral system that includes: 1) prenatal high-risk nurse home visiting services; 2) linkage to community resources provided by a team of public health care coordinators embedded in specific obstetrics provider clinics throughout the community; and 3) regional coordination and tracking of all Oregon Health Plan pregnant women in the tri-county area.

**Project Goals**
The partnership was formed to improve wellness through a maternal and child health care coordination system that empowers families and maximizes their use of primary care and prevention services. Working towards this goal, the partnership leveraged the best skills and roles for each partner for maximum benefit.

**The Partnership**
Funding for the project, provided by the Central Oregon Health Council*, went to each of the three participating counties. Deschutes County Health Department housed a regional coordinator for the project who supported the work of public health staff from Crook, Deschutes, and Jefferson Counties. The project staff was trained in the tri-county continuum of care model and resource guide, and worked together to share resources. This coordination was warranted because women in this region often seek services in population centers outside their home county such as the city of Bend.

PacificSource Community Solutions CCO staff was instrumental in convening meetings with the three counties in the early stages of the project and supporting the work.

The Oregon Health Authority, Public Health Division’s Oregon MothersCare Program was also a key partner. The tri-county project worked with Oregon MothersCare to add indicators for this project to the existing Oregon MothersCare data system. This allowed project staff to collect and track data on women receiving services through this project.

“We don’t just say, ‘here’s the money for your proposal, go away.’ We keep talking about it, finding out what’s working and what’s not working.”

—CCO Partner

*Note: Central Oregon Health Council (COHC) is the community governing partner of PacificSource Community Solutions CCO. COHC receives funds from PacificSource Community Solutions CCO to fund community projects.
Accomplishments

- The project was successful in linking women who were at higher risk for having low birth weight babies with prenatal care and other services, including the expansion of a county-based prenatal home visiting program with higher-risk women.

- The partnership built a local system of organizations that worked to get women into prenatal care. The partnership led to better coordination and collaboration with Planned Parenthood, local Pregnancy Resource Centers, health care provider offices, and Advantage Dental.

- The partnership has also been effective in helping health care providers connect pregnant women and their families with maternal mental health services; before this project, consistent triage to these important resources was absent.

- Connecting all the resources within the tri-county region greatly benefits the women receiving services; they now have help navigating the system so they can receive the care they need for a healthy pregnancy and baby. Also, the coordination dramatically reduced unnecessary duplication in managing and providing prenatal health care throughout the region, thereby relieving some pressure on an overburdened public health and health care system. Since the start of the project, a dramatic increase has been seen in WIC enrollees in Deschutes and Crook counties, owing to the increase in mothers referred for perinatal care.

Balancing Needs

Within the region, there is a good deal of geographic and demographic diversity and it can be challenging for regional partnerships, such as this one, to truly form trusting relationships where each partner agrees that the unique demographic needs of their population are understood. Continued communication and coordination have been critical in balancing the needs of each county within the partnership.

“"You can take care of your own team and your own county and your own department, but unless you can really target the entire population I think the impact isn’t as great as it could be. I think we took a step back and said ‘how can we reach every pregnant woman in the tri-county area?’”

—Public Health Partner

“"Everyone has heard of this now wants to take part. We’ve got small provider offices that want to be part of this and they want us checking in once a week and picking up surveys so we can contact clients that came in to see a provider. I feel like we’ve expanded our partnerships.”

—Public Health Partner
Lessons Learned

Asking programs to change or modify an established practice, such as adding a prenatal care coordinator, can be sensitive. Taking the time to communicate the rationale, timeline, and benefits is key to success.

Trust and buy-in are essential for successful partnerships. Funding from the Central Oregon Health Council was directed at this project because it aligned with a community priority in the Regional Health Improvement Plan and was put forward by trusted partners in Deschutes, Crook, and Jefferson Counties. The project required buy-in from obstetrics clinics (where public health staff would be stationed) and the funder’s trust in public health’s ability to partner with clinics.

Benefits of Formal Arrangements

While partnerships with health care partners such as St. Charles Hospital in Bend, Oregon were functional, the Deschutes Public Health Department discovered that having a formalized agreement in the form of a memorandum of understanding would have enabled a smoother collaboration. They were able to put one in place, but in retrospect realize they could have benefited from a formal agreement at the onset of the collaboration.

Moving Forward

This partnership will continue to implement a regional approach to an integrated perinatal continuum of care model and will seek continued support from Central Oregon Health Council and other local health care providers. They are also looking at the application of this model to other areas of work, such as a pediatric client care coordination.

“I feel like this project has really helped us engage with other partners in the community that maybe we typically didn’t engage with.”

—Health Care Partner

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