

TASK FORCE ON MATERNAL HEALTH  
MEETING FIVE SUMMARY  
November 6, 2020  
1:00 pm – 4:00 pm  
Virtual Meeting Conducted Over Zoom

**Attendees:**

Alison Miller, Amanda Brickhouse Murphy, Amy Santin, Belinda Pettiford, Doris Robinson, Dorothy Cilenti, Emily Hooks, Erica Little, Heather Wilman, James Coleman, Janice Freedman, Jennifer Grady, Jessica Noble, Julie Lovingood, Kathleen Jones-Vessey, Katie Borders, Kristin Resnik, Mary Anne Burghardt, Mary Kimmel, Michelle Ries, Nicole McKinney, Rebecca Severin, Sarah Verbiest, Shelby Weeks, Stacy Warren, Starleen Scott Robbins, Sue Lynn Ledford, Susan Robinson, Tara Owens Shuler, Teresa Ellen, Tina Sherman, Tish Singletary, Tomeka Isaac, Tyonna Howard, Velma Taormina, Veronica Piper

**Welcome and General Housekeeping**

***James Coleman, MPH, Research Specialist, North Carolina Institute of Medicine***

Mr. Coleman thanked task members for joining. On behalf of the steering committee, Dr. Velma Taormina thanked the task force and provided an overview of the agenda.

**Upstream USA - Championing North Carolina Preconception and Interconception Health**

***Nicole McKinney, Ph.D., LCMHC, Executive Director, Upstream USA (NC State Project)***

Upstream is a reproductive health organization that utilizes a reproductive justice framework to inform the program. Upstream seeks to expand opportunity by reducing unplanned pregnancies; nearly half of pregnancies in North Carolina are unplanned. Upstream works in partnership with health centers to strengthen reproductive care and increase access to a full range of contraceptive options. Their program integrates a Pregnancy Intention Screening Question (“Do you want to get pregnant in the next year?”) for primary care visits for patients aged 15 – 44 that informs their conceptive counseling and demonstrates impact. There are currently 22 NC agency partners, with plans to scale to 40 agencies.

**Overview of IMPLICIT Network and the IMPLICIT Interconception Care Model**

***Narges Farahi, MD, Associate Professor of Family Medicine & Director of Family Medicine Maternal and Child Health Service, University of North Carolina at Chapel Hill School of Medicine***

The IMPLICIT network was founded in part because preterm birth and birth defects remain high; maternal mortality is rising; preconception visits aren’t realistic for most; and many mothers don’t get care in the postpartum period but do access care for children. The IMPLICIT Network utilizes an interconception care model that incorporates maternal assessments into well child visits. Those assessments focus on four behavioral risks that affect future birth outcomes: smoking, depression, family planning, and consumption of multi-vitamin with folic acid. There are seven IMPLICIT sites around the state that have focused on building an ICC team; developing workflows; addressing positive screens; and implementing data collection and entry.

**Small-group Discussion: Alignment of Maternal Health Task Force Work with Recommendations from PSOC Task Force and North Carolina's MMRC**

***Facilitated by the Maternal Health Task Force Steering Committee Members***

Using a crosswalk table that included topic areas related to maternal health raised and discussed during the first three task force meetings, attendees compared the topic area recommendations that align with the recommendations from PSOC Task Force and MMRC. They sought to find potential areas of alignment, determine how the work of the PSOC Task Force and MMRC can be built upon, and find gaps that still need to be addressed.

**Next Steps**

***James Coleman, MPH, Research Specialist, North Carolina Institute of Medicine***

Mr. Coleman thanked task force members for attending the meeting and reminded them of the next meeting date on Friday, January 22 from 1:00 – 4:00 PM.