

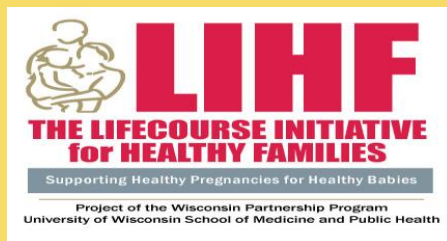
Kenosha LIHF Collaborative

“We hold Our babies future in our hands”



Gwen Perry-Brye, RNC, MS, APN
Black Health Coalition of Greater Kenosha

Pamela Smith, MS
Project Coordinator



Kenosha's LIHF Story

Black Health Coalition of Greater Kenosha

Kenosha County Division of Health

Kenosha Community Health Center

United Way of Kenosha County

Women Infant and Children/Community Action Agency

Introduction

- 2005-06 BHCGK organized to investigate persistent health disparities in Kenosha County
- **Origins in Kenosha County Division of Health**
 - **Granted 501(c)3**
- 2006 Minority Health Grant
- 2008 Approached United Way Community Impact Program – identified persistent infant mortality as a critical health disparity
- Infant Mortality became a focal point of the annual United Way of Kenosha fundraising campaign

Building Blocks

- **Community readiness: 2008-09**

United Way, Kenosha County Division of Health and the Black Health Coalition of Greater Kenosha convened to examine infant mortality as a community problem

Joined with community leaders and stakeholders:

Dr. A.J. Capelli, Aurora Family Medical Center

Jack Waters, ED, Kenosha Community Health Center

Pam Halbach, RD, Women Infant and Children (WIC)

Erin Donaldson, Safe Kids Coalition

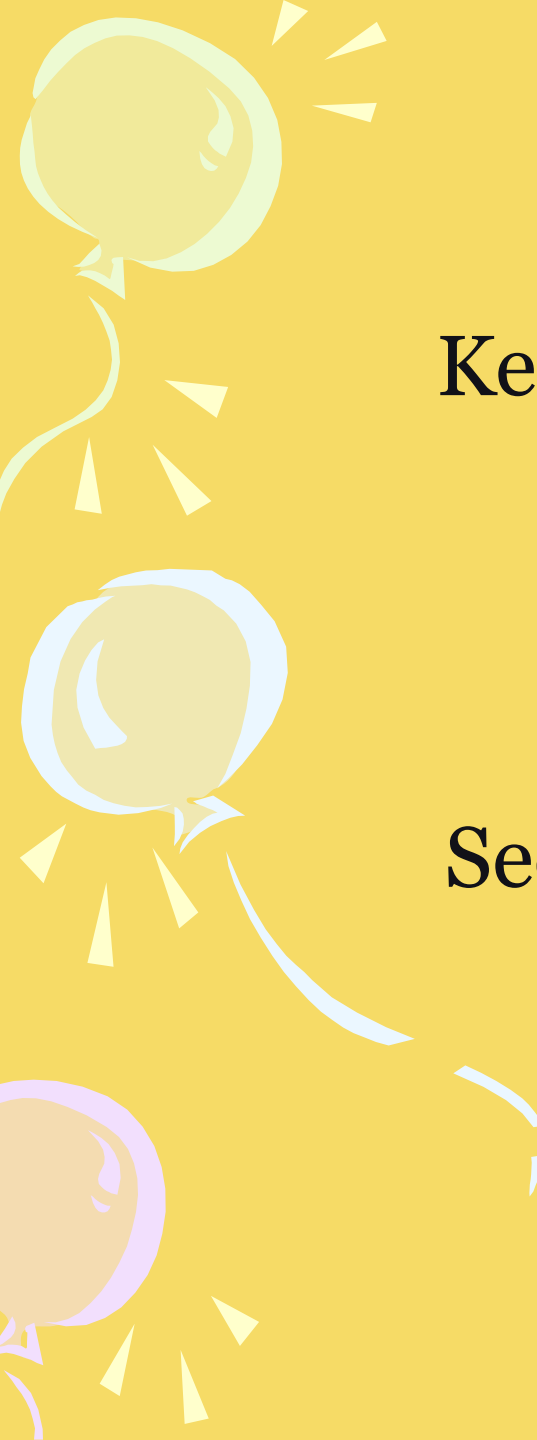
Julie McGuire, SW, Children's Hospital of WI-Kenosha

Infant Mortality Delegation

- Established with the United Way as an expansion and sub-committee of the BHCGK to increase public awareness

Gwen Perry-Brye conducted power point presentations and showing of “Unnatural Causes: When the Bough Breaks” to local organizations and groups.

Simultaneous momentum by the State and regional efforts by notable leaders, Dr. Murray Katcher, DPH Representative Corey Mason that led to the Wingspread Conference in Racine.

Three balloons are positioned vertically along the left edge of the slide. The top balloon is yellow, the middle one is light blue, and the bottom one is light purple. Each balloon has a white outline and a small white highlight on its upper left side. Short, white, triangular streamers radiate from the bottom of each balloon, suggesting they are floating upwards. The balloons are connected to a thin white line that curves downwards from the top balloon, then loops around the middle balloon, and finally extends downwards from the bottom balloon.

**Kenosha Town Hall Meeting
August 1, 2008
Museum**

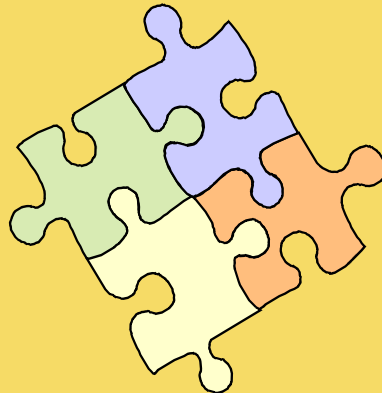
Secretary Karen Timberlake

Infant Mortality Delegation

- **Advocacy** – supported March of Dimes funding to identify women early, coordination of care, prenatal vitamins/folic acid.
- **Access** - Loss of physician provider for OB patients with public insurance.

Hospital systems:

Global payment



Fee for Service

**Division of Health Care Access and
Accountability,
Department of Health Services**

Solution: Medicaid Navigator

- Assists women in securing prompt quality Ob/Gyn care

Nelliemar Musignac
Kenosha Medicaid Navigator
8600 Sheridan Rd
Kenosha, WI 53143
nellye.musignac@wisconsin.gov
262-697-4633

Sarah J. Fraley
Southeast WI Medicaid Liaison
Division of Health Care Access and
Accountability
Department of Health Services
Sarah.Fraley@wisconsin.gov
414-286-6733 Phone
414-286-0886 Fax

Crisis averted

Policy Issue:

Medicaid reimbursement rate

Structural Issue :

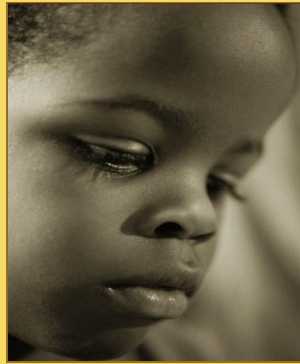
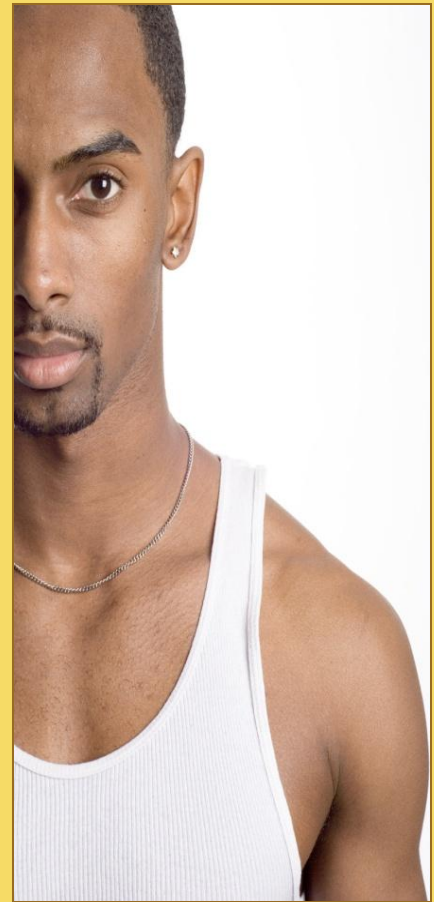
Conventional care became restrictive

Systems Issue:

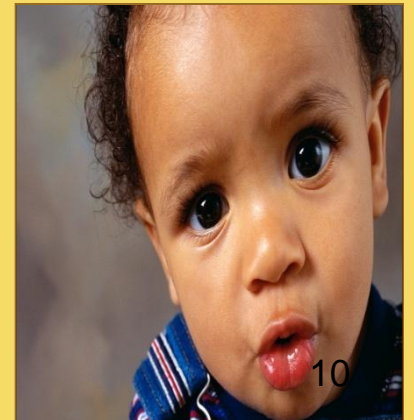
Limits on the number of pregnant women that were on MA and were accepted into existing services

Proposed Solution:

Maintain a reasonable reimbursement rate for Ob/Gyn care that is competitive with private insurance



Why the gap?



Kenosha Demographics

	City	State	USA
Black	7.7	5.9	12.9
Poverty/Individuals	15.6	10.7	13.2
Unemployment	12.4	7.9	9.6
Less than HS Ed	16.4	13.3	17.1
Single HH	34.5	24.0	28.5

US Census, American Factfinder, 2006-08; LAUS, Qtr 3, 2010

City Comparison (%): Black Population, Poverty and IMR

American Community Survey 06-08 Estimates

	Kenosha	Racine	Milwaukee	Beloit
Black	9.2	21.7	38.3	15.5
Poverty	15.6	15.3	24.4	22.1
B/W Ratio	4.7	3.6	2.5	2.7

Infant Mortality Rates, 2004-2008

State/County City	White	Black	Hispanic
Dane	4.1	7.5	5.5
Madison	4.1	8.9	5.2
Kenosha	4.8	15.1	4.6
Kenosha City	4.3	14.7	5.0
Milwaukee	5.7	16.0	7.1
Milwaukee City	6.6	16.0	6.8
Racine	6.5	22.9	10.1
Racine City	6.0	22.3	8.6
Rock	5.1	17.7	4.5
Beloit	7.5	16.8	4.6
Wisconsin	5.2	15.9	6.3

An iceberg floating in the ocean, with a small tip above the surface and a much larger mass submerged below. The text is overlaid on the image. The top part of the iceberg is white and jagged, while the submerged part is a deep blue color. The ocean is a dark blue, and the sky is a clear, light blue.

1,432 Deaths

15,134 LBW

24,146 Premature

Wisconsin 2006-2008

Lifecourse Framework

“Not business as usual....

Protective and Risk Factors:

Socioeconomic status

Race and racism

Health care

Disease status

Stress

Nutrition

Weight Status

Birth weight

Various health behaviors

Lifecourse Initiative for Healthy Families (LIHF)

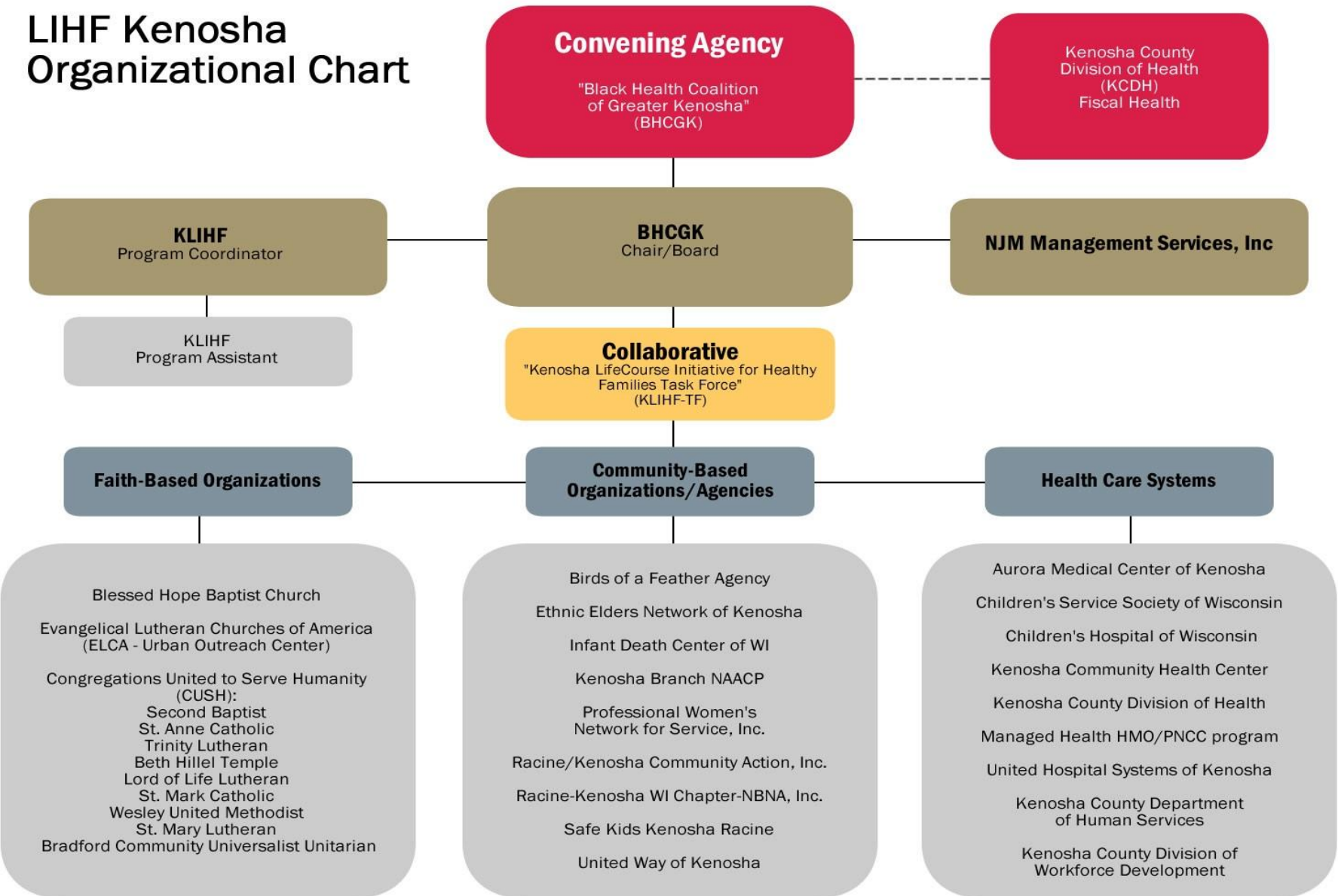
- Examine infant mortality from a different paradigm that views health, racial and ethnic disparities across the life span

BHCGK leadership + Infant Mortality
Delegation transitions...



KLIHF Collaborative

LIHF Kenosha Organizational Chart





Kenosha LIHF Collaborative

Goals

- Look at Kenosha's systems of care and social services from a Lifecourse perspective across the three domains
- Identify unmet needs and barriers to healthy birth outcomes
- Incorporate the Guiding Principles and 12-Point Plan in local strategy

Strategy

- Establish an inclusive multi-sector Collaborative
- Convene Summits to engage stakeholders and residents
- Develop a Community Action Plan

Early Implementation Program

Mom Baby Talk

Began as a collaboration between DOH and WIC 2007 and modeled after components of Centering Pregnancy and Birthing Project USA

- ~ Due to under utilization of Prenatal Care Coordination Services by African American women who were pregnant in Kenosha (5%)**
- ~ Alternative to traditional home visitation model**
- ~ Early identification and management of high risk pregnancies**
- ~ Focus on education, support and group nurturing format**

Goal: promote healthier birth outcomes

- Increase participation of African American women who are pregnant in services for prenatal care coordination by 50%
- Provide a nurturing and supportive group environment for African American new and expectant mothers

Benchmarks

- BHCGK, KCDOH, United Way of Kenosha County formed the Infant Mortality Delegation
- Townhall Meeting with the WPP Oversight Advisory Committee and Secretary Karen Timberlake regarding access and MA issue
- Medicaid Navigator position funded
- LIHF Collaborative accomplishments:
 - Staff hired, 3 Collaborative meetings, 12-Point Plan teams established
 - Early Implementation Grant: Mom Baby Talk
 - Division of Workforce Development Spotlight
 - National Infant Mortality Awareness Month

Next Steps:

- Community Needs Assessment and Summit 10/28

Suggestions

- State of Wisconsin
 - Help identify private funding and partnerships
 - Streamline data – health/human service systems
- Public Health
 - Commit to stabilizing funding for valuable health programs; ensure access to comprehensive health care services for women, children, fathers and families across the life course, i.e. visiting nurses, PNCC, reproductive health
- Medicaid
 - Increase service coordination, systems integration, i.e. policies, waivers, discretion

The true measure of a nation's standing is how well it attends to its children – their health and safety, their material security, their education and socialization, and their sense of being loved, valued, and included in the families and societies into which they are born.

UNICEF, Child poverty in perspective: An overview of child well-being in rich countries, *Innocenti Report Card 7, 2007, UNICEF Innocenti Research Centre, Florence.*

Thank you for caring...

KISS

Keeping Infants Sleeping Safely

