

Exploring MDRBD Programs:

Increasing Provider Capacity, Incorporating Health Equity, and Supporting Quality Improvement



The Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program supports seven states to integrate behavioral health into maternal health care via telehealth. These new or expanded telehealth access programs offer real-time psychiatric consultation, care coordination support, and training to front-line maternity care providers, to expand provider capacity to screen, assess, treat, and refer pregnant and postpartum women for maternal depression and related behavioral disorders, such as anxiety and substance use disorder. An update on program activities in Year 1 using preliminary data from federal performance reports for the seven MDRBD awardees, covering the period of September 2018 to September 2019, is shared below.^{1,2}

Increasing Provider Capacity

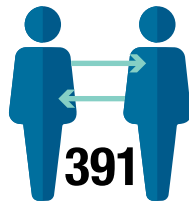
All MDRBD awardees who have enrolled providers or practices into their program reported promoting and/or facilitating provider capacity to screen, refer, and/or treat maternal and child health (MCH) patients.

Activities

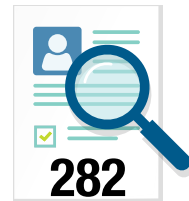
Below are the activities awardees reported using to promote and facilitate increased provider capacity and the estimated number of people they reached; these were the activities that reached the most providers.



**Screening/
Assessment**
(n=5 awardees)



**Outreach/Information
Dissemination/Education**
(n=6 awardees)



**Referral/Care
Coordination**
(n=4 awardees)

Increasing Screening

Below are the activities reported by awardees that reached the most people (e.g., providers/health care professionals, community/local partners, state or national partners).

Mental and Behavioral Health Screening and Follow-Up

Outreach/Information Dissemination/Education



Referral/Care Coordination



Screening/Assessment

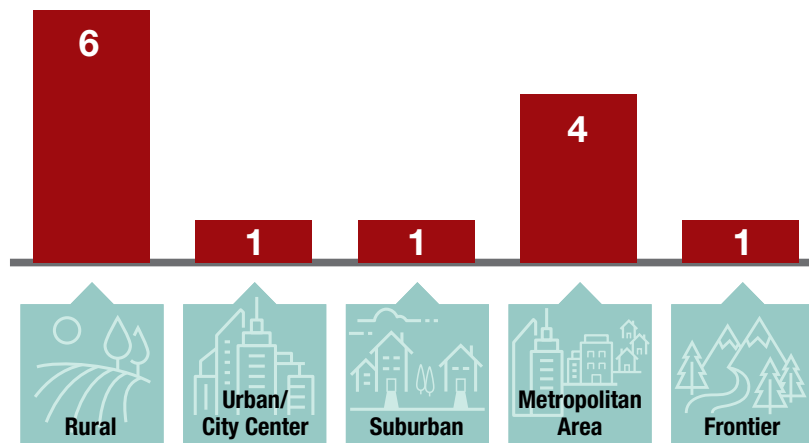


= 100 people reached

Incorporating Health Equity

Below are the number of awardees who have identified the following geographic areas to target for program implementation.

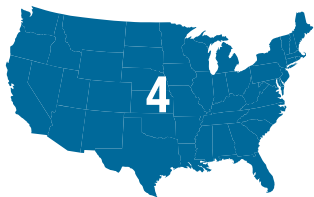
Geographic Target Areas



Health Equity Domains

Health equity is achieved when every individual has the opportunity to attain his or her full health potential and no one is disadvantaged from achieving this potential because of social position or socially determined consequences.

Four MDRBD awardees reported promoting/facilitating health equity in their programs. The following domains were the most commonly reported areas in which awardees were addressing health equity in their programs.



Geography



Socio-economic Status



Income

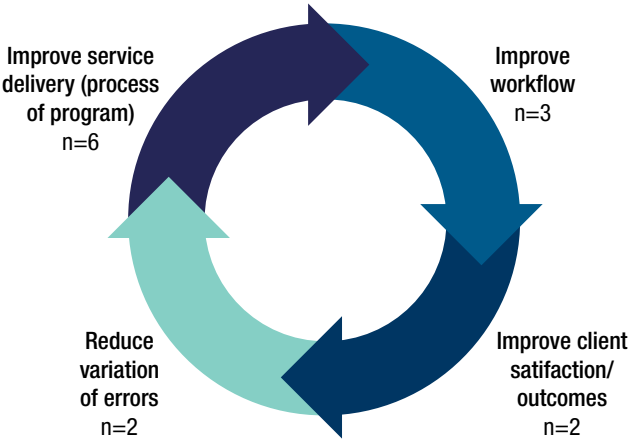
Examples of how MDRBD awardees are addressing health equity

Addressing health equity in technical assistance • Tracking patient race, ethnicity, and language data for calls to teleconsultation line to understand existing perinatal behavioral health services gaps • Improving screening, referral, and access to treatment for rural, underserved populations • Providing support regardless of patient status

Supporting Quality Improvement

Six MDRBD awardees reported implementing quality improvement (QI) initiatives in their programs.

Top 4 Aims of QI Initiatives



QI Structures



Establish Team Within Organization: to improve a process, policy, or program, etc.



Collaboratives: across multiple organizations

1 The MDRBD Program is a cooperative agreement-funded program. Throughout this infographic, the states funded by the MDRBD Program are referred to as "awardees."

2 The FY 2018 MDRBD awardees (N=7) provided updates in their Performance Report and Form 10, reporting period: 09/30/2018 - 09/29/2019.