

### Problem

- According to the Illinois Maternal Morbidity and Mortality Report (Illinois Department of Public Health) released in October 2018, there is a large discrepancy between health benefits provided to non-Hispanic Black pregnant and postpartum women in Illinois vis a vis their White counterparts.
- Cook County Health (CCH) services a culturally and ethnically diverse population. Mostly an underserved population in which most of the patients come from disadvantaged, lower social-economic status, limited access to health care and unfortunately, most are at risk for maternal and infant mortality and pregnancy related health outcomes.
- We noticed during a review of records that SDOH screening and interventions were not being consistently being completed during delivery admission to labor and delivery. Therefore, our multidisciplinary hospital-based quality initiative team will focus on key strategy number 1: Implementing universal SDOH screenings for Labor and Delivery patients.

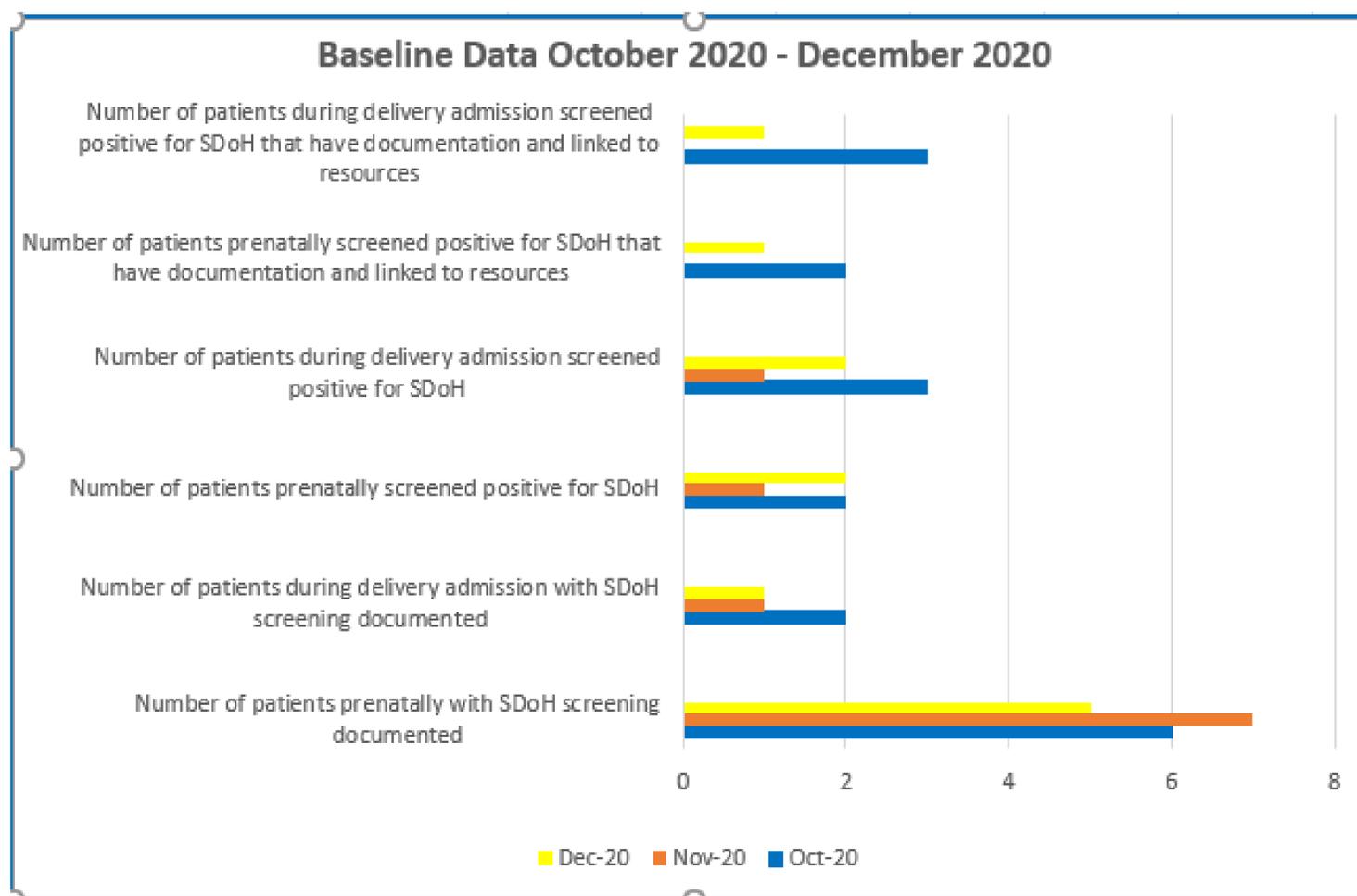
### Project Implementation

- To help eliminate perinatal disparities, we plan to participate in the Illinois Perinatal Quality Collaborative Birth Equity Quality Improvement Initiative. The goal for this statewide obstetric quality improvement initiative is to provide strategies for hospitals to address maternal health disparities and promote birth equity.
- We started working with Nursing Leadership and IT, to update the current Nursing labor and delivery admission assessment template to include more questions for screening for detriments of health during delivery admission to Labor and Delivery; ultimately linking patients to available resources/services.
- A process will also be created to ensure that all patients are screened at the point of entry to labor and delivery.

### Results

We reviewed 30 records of patients who delivered from October to December 2020 (with specified race/ethnicity, insurance status and SMM patients). Data showed that when a patient establishes prenatal care at our site, they were more likely to receive a comprehensive screening for social determinants of health and linked for various social resources/services.

When we looked at patients being admitted to Labor and Delivery, many of those patients were not being appropriately screened for SDOH. Also, patients that were screened with significant screening results were not always linked to resources/services.



### Conclusions

- Our results demonstrate that patients are not appropriately screened for SDOH during delivery admission (L&D), and not always linked to appropriate resources and services. This invaluable early screening of potential problems may result in proper treatment and management; thus, promoting optimal maternal and child health outcomes.

### Acknowledgements/Hospital Team

- A special thanks to Obstetrics and Gynecology, Family Planning and Family Medicine who helped with data collection and improved flow of BE project.
- The support of the CCH BE Committee who helped with implementing BE project