

MoMMA’s Voices Champions Training Center

An Innovation Station Cutting Edge Practice

Purpose: This document supports MCH professionals to implement a practice found in Innovation Station. This resource provides the information needed to replicate the practice and is divided into two sections: the first section provides a high-level overview of the practice while the second section describes how to implement the practice. For additional information on any of the content provided below, please reach out to the practice contact located at the bottom of this document.

Section I: Practice Overview

Location:	<i>National</i>	Title V/MCH Block Grant Measures Addressed
Designation:	<i>Cutting Edge</i>	
Date Submitted:	<i>02/2021</i>	
		NPM 3: Risk-Appropriate Perinatal Care

Practice Description

MoMMA’s Voices is a national coalition of patient advocacy organizations and individuals with “lived experiences” – or those that represent them – using their voice to reduce maternal complications in pregnancy and the postpartum period.

We look at cross-cutting issues such as quality and consistency of healthcare delivery, patient-provider communications, racial disparities, inadequate research funding, and other leading contributors to adverse outcomes in pregnancy and the postpartum period. We invite all those who experienced, or whose love one experienced, any of the leading causes of death, near misses and severe morbidity such as preeclampsia, hemorrhage, amniotic fluid embolism, placenta accrete, cardiovascular disease, maternal mental health, and other complications of pregnancy.

As advocates to eliminate maternal mortality and severe morbidity, the coalition’s overarching goal is to provide a home and platform for the patient voice to actively engage in efforts to make childbirth safer in the United States. The coalition provides training and tools to prepare “champions for change.”

MoMMA’s Voices was created in 2018 from the shared vision that all patient advocacy organizations focused on the top contributors of maternal mortality and morbidity should be able to have a voice at the table. A diverse representation of key stakeholders was priority for forming the coalition’s founding decision making body. The Executive Council began with the following nonprofit organizations: Preeclampsia Foundation, AFE Foundation, National Accreta Foundation, 2020 Mom, Black Women’s Health Imperative, Shades of Blue Project, and Every Mother Counts. Since then, the Executive Council has expanded to include two representatives from Maternal Near-Miss Support Facebook group and Sisters in Loss Support Services. Additionally, we currently have another 10- patient advocacy nonprofit organizations that are members of the coalition.

Through this network of organizations, we are able to offer training that such small organizations would not have the capacity or resources to develop and host on their own. This training is aimed at their constituents, volunteers, survivors, family members, friends, and community members to prepare them to be effective “Patient Family Partners” (PFP). PFPs are also known as maternal health advocates, patient family advisors or lived experience consultants in some areas, but we have tried to encourage the adoption of the “partner” aspect of this work. The goal of patient engagement is a true partnership where both those that represent the lived experience and healthcare providers are working together side by side towards the same goal.

One such training tool is the Champions Training Center that comprises of a community Facebook group and online training platform. The Champions Training Center is intended for those with a lived experience or those that represent

them to come together in a place to support one another in this work that we do as “Patient Family Partners”. Our online training platform takes an in depth look at different ways patients can be engaged to effect change. We produce theme-based modules that include articles, worksheets, presentations, and discussions from topic experts. The core modules include Advocate Readiness, Storytelling, Navigating Media, and Understanding Quality Improvement. Future supplementary modules will include: Understanding Review Committees, Explaining AIM Practice Bundles, Best Practices for Support, Co-Designing Research, How Legislation Impacts Policy and more. The content is created by fellow PFPs and subject matter experts and then reviewed by a committee of seasoned PFPs. All aspects of this process keep a health equity lens on what is being created, who is creating it and who is reviewing it.

Core Components and Activities

The goal of our program is to educate, equip and empower PFPs to be able to work alongside healthcare providers to effect change. We do this through our Champions Training Center that offers training and avenues for PFPs to support each other along with other resources. *See appendix for logic model.*

Table 1. Practice Activities and Core Components

Core Component	Activities	Operational Details
Training	Training course and modules	Development of a training course and modules that take a deeper look at different areas that PFPs can be engaged to offer a better understanding of what they need to know before starting this work.
Support	Facebook Group Community	Create a space where PFPs can connect with one another. They support each other during challenges and cheer on each other successes.
Outreach	PFP Engagement	Network with external stakeholders to share that we are training PFPs to be effective partners, offer to train their current or targeted PFPs and work to find opportunities for further patient engagement.

Health Equity

When MoMMA’s Voices first started, it was mainly the annual in person event. The Executive Council realized that we needed an avenue to make the training more available and thus we developed the online curriculum to improve accessibility. PFPs can get quality training to be prepared for engagement through online, in-person or both training opportunities.

With such a current focus on health equity, we often receive inquiries from healthcare providers and quality improvement teams asking for diverse PFPs. Our training grants PFPs the opportunity to receive training and will be elevated when such inquiries are presented.

We prioritize a diverse representation within our Key Stakeholders and content contributors for our training. Every module is developed with diversity in mind.

Evidence of Effectiveness (e.g., Evaluation Data)

While this program has not been formally evaluated, some initial signs of success are the number of patient family partners that have completed a part of the training. As of the time of writing this, we have released 4 modules comprised of 34 lessons, with 59 patient family partners completing 79 of modules.

Section II: Practice Implementation

Lessons Learned

When we first launched these training modules, we posted them as units in the existing Facebook group. The PFPs were very enthusiastic about the modules and quickly exceeded the reporting capabilities provided by Facebook. In addition, not everyone is on Facebook and in effort to stay as accessible as possible, we made the decision to move the training to a third-party platform. Getting the existing trainees onto the new platform has been a bit of a challenge, but we are starting to see an improvement in enrollments.

We also vastly underestimated the amount of time it would take to produce each module. Since we are working hard to be inclusive of diversity in our content contributors and with COVID-19 impacting everyone's daily lives, it has taken much longer to be accommodating to schedules. We have strived to keep the quality standard high regardless of delays and feel the final product deserves that. Some of the lessons our team has had to do more of the lifting on it and then getting it reviewed and approved by subject matter experts. We are also reevaluating the content of each module before we produce it and make sure that the content topics are still applicable and if there any new pieces that need to be added.

Replication

This training is being offered to each of the MoMMA's Voices coalition organizations for distribution to their memberships. It has not yet been replicated beyond these organizations.

Next Steps

We will continue to create supplementary modules on the topics we have planned. As well as evaluate needs for further modules and updates to existing modules. We will also be creating a marketing strategy to engage and encourage completion of modules by current PFPs and offering of our services to healthcare providers needing a turnkey training curriculum for their PFPs.

Internal Capacity

We began this project with the coalition manager bringing a project manager onboard to work through the outline and development. What started as a long list of ideas for training was evaluated and organized by topic areas. Then potential contributors were identified and invited to participate. Once we had an idea of how to proceed, we had a graphic designer create templates for Word and PowerPoint to be used to keep the style of the articles and presentations consistent with the overall brand. The program manager has done quite a bit of writing and was editing video presentations when we acknowledged we really needed a strong video editor that could turn edits around quickly.

Stakeholder Empowerment & Collaboration

When looking at the distinction between stakeholder engagement and stakeholder empowerment as defined by the Annie E Casey Foundation:

where engagement "...may simply involve getting input or limited participation" and empowerment "...involved taking leadership, making decisions and designing solutions and strategies at every phase..."

This concept was rooted into the creation of the coalition, but not expressed in such a way. Often, we see the word "engagement" used, but we really desire is for PFPs to be empowered by this definition. Keeping that goal in focus has allowed us to elevate our content concepts.

A large focus for this project is the patient family partners that will be using these tools to extend the work of the coalition. From listening to what they wanted to learn about, to our own trial by fire and wanting to have others be better prepared to the content review committee we remain rooted in the community that it serves.

In addition to the PFPs, we also have the Executive Council as well as the leadership of each of the coalition member organizations that have interest in the content created. There is a benefit to each organization to offer this training to their community to create volunteer opportunities, build capacity and create awareness in new areas.

We continue work to promote our training to national organizations and have had interest in working with PFPs and offer them technical assistance from their perspective on how to work with PFPs. We have received interest from groups that are willing to support our efforts to explain their projects in lay terms to PFPs.

Practice Timeline

PPF's should expect to spend approximately 5-6 hours completing the 4 core modules of this training. It is self-paced, and they do not have to complete it in one sitting.

Practice Cost

This training is free of charge to PFP's that have been engaged with MoMMA's Voices or through one of the coalition member organizations.

Resources Provided

N/A.

Practice Contact Information

For more information about this practice, please contact:

MoMMA's Voices Coalition at

mommas.voices@preeclampsia.org or visit

<https://mommasvoices.thinkific.com>

Appendix

• Logic Model

Program: MoMMA's Voices Patient Family Partner (PFP) training

Situation: To equip Patient Family Partners to effect change in maternity care.

