Barriers to Care Initiatives Toolkit

To assist providers in developing a "Barriers to Care" initiative as part of the BabyReady Program, we've created a comprehensive toolkit. Barriers to Care initiatives must be implemented within six months of the provider receiving their first caseload.

Key Points

Here are a few key points to remember about Barriers to Care Initiatives:

- 1. All BabyReady providers are required to do a Barrier to Care initiative.
- 2. Initiatives may be developed at the health system level or clinic level but must be available to assist women served by individual participating providers.
- 3. Initiatives must either be new or an expansion of an existing initiative and must not duplicate activities that are otherwise required of BabyReady providers.
- 4. Initiatives do not have to be elaborate or complex. They just need to help participants overcome a barrier to care or to healthy pregnancy outcomes.
- 5. Clinics must submit an <u>annual report</u> on their Barrier to Care initiative annually by June 30th.

All requirements for the Barriers to Care initiative can be found in detail in the <u>BabyReady</u> <u>Provider Manual</u>.

Barriers to Care

In developing the BabyReady program, information about barriers to care experienced by pregnant women on Medicaid was collected. Identified Barriers to Care included:

- Transportation
- Childcare
- Work/School Commitments
- Appointment Availability

How to Use the Toolkit

This toolkit includes a fillable template to help providers design and implement effective initiatives tailored to their patients' needs. If you're needing help designing an initiative, page three contains concepts and ideas for providers.

The toolkit also includes "ready to use" initiatives. The "ready to use" initiatives require the provider to fill in details but contain the groundwork for implementing an initiative.



How to Develop a Barrier to Care Initiative

A barrier to care initiative involves these four steps.

1) Determine a Barriers to Care to Address:

- Identify obstacles that pregnant women in your community experience or select one identified by South Dakota Medicaid such as transportation issues, childcare needs during appointments, or social determinants of health (SDoH) impacting their ability to access prenatal and postpartum care.
- Choose at least one initiative to reduce identified barriers. Examples include:
 - Implementing incentive programs to encourage attendance at prenatal and postpartum visits.
 - Providing transportation solutions, such as partnerships with rideshare services.
 - Offering on-site childcare during medical appointments.
 - Establishing clinic-based food pantries to address food insecurity.

2) Develop a Specific Goal:

- Craft a clear and concise AIM statement outlining the goals of the chosen initiative, the target population, and the expected outcomes.
 - AIM statements are broad, concise declarations of what you want to achieve in a project or initiative
 - SMART Goals are specific, measurable, achievable, relevant, and time-bound goals that outlines the exact steps needed to reach that aim, essentially providing a more detailed roadmap to achieving the desired outcome

3) Develop an Implementation Plan:

• Detail the steps required to execute the initiative, assign responsibilities, and establish a timeline for completion.

4) Monitor and Evaluate the Impact:

• Define metrics to assess the effectiveness of the initiative and outline methods for data collection and analysis.



Barriers to Care Concepts

BabyReady providers are able to choose a Barrier to Care initiative that meets program requirements. To assist providers in developing an initiative we are providing information about concepts that meet BabyReady program requirements:

Transportation

BabyReady providers are required to help arrange transportation to medical appointment for recipients. Examples of Barriers to Care initiative concepts that go above and beyond this requirement include:

- 1. Providing recipients bus passes or otherwise covering the cost of public transportation.
- 2. Arranging and paying for Lyft or Uber rides.

Incentive Programs

Implementing incentive programs can effectively enhance patient attendance at medical appointments by addressing barriers such as financial constraints and motivational challenges. By offering incentives, healthcare providers can encourage patients to prioritize and adhere to their scheduled visits, leading to improved health outcomes. Examples of incentive programs include:

- 1. Attendance-Based Reward System where patients receive points for attending prenatal and postpartum appointments, which can be redeemed for essential baby care items.
- 2. Priority Scheduling and Reduced Wait Times for Baby Ready participants who consistently attend their scheduled appointments to gain access to priority scheduling, shorter wait times, or extended appointment options.

Food Insecurity

Addressing food insecurity can significantly improve health outcomes for patients by ensuring they have access to nutritious food that supports their overall well-being. Examples of initiatives include:

- 1. On-Site Food Panty stocked with non-perishable, high-nutrition foods accessible during prenatal and postpartum appointments.
- 2. Meal Kit Programs providing expectant moms with pre-packaged meal kits with easy to make meals tailored to meet the nutritional needs of prenatal and postpartum women.

Dental Care

Access to dental care is a common barrier for many patients, particularly Medicaid recipients and underserved populations. Poor oral health can lead to complications during pregnancy, chronic disease exacerbation, and overall reduced well-being. Below are examples of initiatives to help address this barrier:

- 1. On-site or mobile dental clinics providing basic dental care on a quarterly basis to pregnant and postpartum women.
- 2. Pregnancy & Dental Health Incentive program to offer a baby care package including diapers, wipes, or a small gift card for completing a dental appointment.



Barriers To Care Initiative Template

Instructions: Providers participating in the South Dakota Medicaid BabyReady Program may use this template to develop their Barriers To Care Initiative. If additional space is needed, providers may attach another sheet of paper.

Provider Information

Clinic/Provider Name:	BNPI:
Address:	
Contact Person (Name and Email):	
Phone Number: () ext	

Initiative Details

Section 1 – Identify the barrier: Describe the specific barrier(s) your patients face (e.g., transportation, childcare, food insecurity, etc.).

Section 2 – Outline the initiative: Describe the initiative chosen to address the barrier(s). If this initiative builds on an existing service already being provided, please outline how this initiative expands the service in an impactful way.



Barriers To Care Initiative Template

Section 3 – AIM Statement and/or SMART Goal: State the objective of the initiative, including the target population, desired outcome, and target date.

Section 4 – Implementation Plan:

- Action: List the steps to implement the initiative
- Responsible Parties: Assign team members to each action
- Timeline: Establish a deadline for each step



Barriers To Care Initiative Template

Section 5 – Monitoring and Evaluation:

- Metrics: Define how success will be measured
- Data Collection Methods: Describe how data will be gathered
- Evaluation Plan: Explain how data will be analyzed and used to inform whether to continue to the initiative



Barriers To Care Initiative – Food Insecurity

Instructions: Providers participating in the South Dakota Medicaid BabyReady Program may use this template to develop their Barriers To Care Initiative. If additional space is needed, providers may attach another sheet of paper.

Provider Information

Clinic/Provider Name:	BNPI:
Address:	
Contact Person (Name and Email):	
Phone Number: () ext	

Initiative Details

<u>Identified Barrier</u>: Many prenatal and postpartum women across South Dakota face food insecurity, which can negatively impact maternal and infant health outcomes. Contributing factors include limited financial resources, transportation challenges, and lack of access to nutritious food options.

<u>Initiative</u>: The above provider/facility will establish an on-site food pantry within the facility to provide nutritious food options to prenatal and postpartum patients in need.

<u>AIM Statement/SMART Goal</u>: Within 12-months we aim to reduce food insecurity among prenatal and postpartum patients by implementing an on-site food pantry. The goal is to provide at least 50% of prenatal and postpartum patients access to the food pantry per month and improve patient-reported food security by 2%.

Implementation Plan:

- Action Steps:
 - Designate a space within the facility for the food pantry.
 - Develop guidelines for food distribution, including eligibility criteria and access procedures.
 - Train staff on pantry operations and patient referrals.
 - Launch a pilot phase to test the initiative and gather feedback.
 - o Adjust operations as needed and fully implement the pantry.



Barriers To Care Initiative – Food Insecurity

- Promote the food pantry through patient education materials and provider referrals.
- Responsible Parties:
 - Project Lead _____: Oversee implementation and coordination
 - Clinic Staff _____: Screen patients for food insecurity and refer to the pantry
 - Community Partners _____: Provide food donations and logistical support
 - Administrative Team _____: Manage budgeting and compliance
- Timeline:
 - _/_/__: Identify pantry location and develop operational procedures
 - _/_/__: Complete staff training and initiate pilot phase.
 - o __/_/__: Evaluate pilot phase, adjust as needed, and expand pantry services

Monitoring and Evaluation Plan:

- Metrics:
 - Number of patients utilizing the food pantry per month: _____
 - Patient-reported improvement in food security status (via surveys): _____
 - Provider referrals to the pantry: _____
 - Amount of food distributed (measured in meals or pounds):
- Data Collection Methods:
 - Patient intake forms and screening questionnaires
 - Tracking food distribution logs
 - Pre- and post-initiative patient surveys
 - Feedback from clinic staff and community partners
- Evaluation Plan:
 - Conduct a quarterly review of program data to measure impact on food insecurity among prenatal and postpartum patients.
 - Collect patient feedback through surveys to identify areas for improvement.
 - Adjust the program as needed based on data trends and patient input.



Barriers To Care Initiative – Appointment Incentive

Instructions: Providers participating in the South Dakota Medicaid BabyReady Program may use this template to develop their Barriers To Care Initiative. If additional space is needed, providers may attach another sheet of paper.

Provider Information

Clinic/Provider Name:	BNPI:
Address:	
Contact Person (Name and Email):	
Phone Number: () ext	

Initiative Details

<u>Identified Barrier</u>: Low appointment attendance among prenatal and postpartum women can be caused due to barriers such as lack of transportation, work schedule conflicts, or limited perceived value in regular check-ups. Missed appointments can lead to gaps in care, increasing risks for complications during the perinatal period.

<u>Initiative</u>: The above provider/facility will implement an incentive program to encourage consistent prenatal care attendance.

<u>AIM Statement/SMART Goal</u>: Within 12-months we aim to improve appointment attendance among prenatal and postpartum patients by implementing an incentive-based program. Our goal is to increase attendance rates by 5%.

Implementation Plan:

- Action Steps:
 - Develop a structured incentive distribution plan.
 - o Educate patients about the incentive program at their first prenatal visit.
 - Track attendance and distribute incentives accordingly.
 - Collect feedback from patients and providers to assess program effectiveness.
- Responsible Parties:
 - Project Lead _____: Oversee implementation and coordination
 - Clinic Staff _____: Track attendance and distribute incentives



Barriers To Care Initiative – Appointment Incentive

- Community Partners _____: Provide funding or donations for incentives
- Administrative Team _____: Monitor program effectiveness and compliance
- Timeline:
 - _/_/___: Finalize incentive program details.
 - \circ _/_/__: Educate patients and begin tracking attendance.
 - __/__/___: Monitor progress and collect patient feedback.
 - _/_/__: Assess effectiveness and adjust program as needed.

Monitoring and Evaluation Plan:

- Metrics:
 - Appointment attendance rates before and after incentive implementation
 - Number of patients completing all recommended prenatal visits
 - Patient satisfaction with the incentive program (survey or qualitative feedback)
- Data Collection Methods:
 - Attendance tracking through the clinic's scheduling system
 - Patient surveys on program effectiveness
 - Feedback from providers on patient engagement
- Evaluation Plan:
 - o Collected data will be analyzed quarterly to assess improvements in appointment
 - o attendance.
 - Adjustments to incentive offerings or distribution methods will be made based on
 - \circ findings.
 - o Results will be shared with stakeholders, including South Dakota Medicaid to
 - o ensure sustainability and continuous improvement of the initiative.



Barriers To Care Initiative – Transportation

Instructions: Providers participating in the South Dakota Medicaid BabyReady Program may use this template to develop their Barriers To Care Initiative. If additional space is needed, providers may attach another sheet of paper.

Provider Information

Clinic/Provider Name:	BNPI:
Address:	
Contact Person (Name and Email):	
Phone Number: () ext	

Initiative Details

<u>Identified Barrier</u>: Many patients across South Dakota face transportation challenges, preventing them from attending prenatal and postpartum appointments. This has led to missed care opportunities and worsened health outcomes for both mothers and infants.

<u>Initiative</u>: The above provider/facility will establish a Transportation Assistance Program to provide free or subsidized rides to patient for their healthcare visits.

<u>AIM Statement/SMART Goal</u>: Within 12-months we aim to reduce missed prenatal and postpartum appointments by 5% among Medicaid recipients through the implementation of a Transportation Assistance Program.

Implementation Plan:

- Action Steps:
 - \circ Identify and secure partnership with a local rideshare service (e.g., Uber or Lyft)
 - Develop a process for patients to request transportation, either through phone or during scheduling.
 - Train front-desk staff on the process to book rides for patients and educate patients on accessing the service.
 - Allocate a budget to cover transportation costs for Medicaid recipients.
- Responsible Parties:
 - Project Lead _____: Oversee implementation and coordination and train staff.



Barriers To Care Initiative – Transportation

- Clinic Staff _____: Track attendance, schedule rides, and educate patients.
- Community Partners _____: Provide funding or donations
- Administrative Team _____: Monitor program effectiveness and compliance
- Timeline:
 - _/_/__: Finalize program details.
 - \circ _/_/__: Complete staff training.
 - _/_/__: Launch initiative.
 - _/_/__: Track appointment attendance.

Monitoring and Evaluation Plan:

- Metrics:
 - Number of patients using the Transportation Assistance Program monthly.
 - Percentage of no-shows for prenatal and postpartum appointments.
- Data Collection Methods:
 - Track appointment attendance in the electronic health record (EHR) system.
 - Maintain logs of transportation requests and usage.
- Evaluation Plan:
 - Conduct a quarterly review of program data to measure impact on missed appointment rates.
 - Collect patient feedback through surveys to identify areas for improvement.
 - o Adjust the program as needed based on data trends and patient input.

