



Laurie Barajas (pictured center), maternity care coordinator for Samaritan Lebanon Community Hospital's Maternity Connections program, meets every pregnant woman at her first obstetrics appointment.

Overview

In 2001, a Samaritan Health Services (SHS) physician, Dr. Richard Wopat, recognized the need to improve birth outcomes of high-risk pregnant women in the region. In collaboration with various community and state partners, he started a pilot program in 2002 at Good Samaritan Regional Medical Center to ensure that the most vulnerable pregnant women had access to care and to screenings for special issues including medical, obstetrical, and psychosocial concerns. Today, the Samaritan Maternity Connection (MC) program is now implemented at all five of the SHS hospitals and the three county health departments.

In 2009, the maternity care coordinators across the region noticed an increase in Hispanic/Latina women and teenage girls with pre-term and low-birth weight babies. Program leaders immediately began searching for and hiring bilingual/bicultural maternity care coordinators to provide outreach, education, and support to Spanish-speaking women throughout the region, as well as implemented programs that target teenage girls. Maternity care coordinators make certain that all eligible clients are enrolled in the state Medicaid program or other insurance options.

Laurie Barajas, maternity care coordinator for Samaritan Lebanon Community Hospital's Maternity Connections program, meets every pregnant woman at her first obstetrics appointment. Austan

Bailey, a senior at Lebanon High School, participated in the program.

"I wasn't signed up for the Oregon Health Plan," said Bailey. "She (Barajas) went through the paperwork with me and knew what parts to fill out. She was really easy-going and patient."

Bailey is now a new mom, and she plans to train to be a dental hygienist after graduation. She continues to meet with Barajas as part of a class for pregnant and parenting students at the high school. Students receive advice on everything from preparing for childbirth to coping when their baby won't stop crying. Barajas, a social worker for 19 years, has credibility because she was also a teen mom.

"She can relate," Bailey said. "She really does understand."

Impact

The number of women delivering pre-term and low-birth weight babies has decreased for those in the region who participate in the program. The most recent data indicates that the rates change between a low of 5.1 per 1,000 births in Benton County to a high of 19.7 per 1,000 births in Lincoln County. These statistics are countywide and don't separate women who participate in the MC program. The good news is that the teen pregnancy rate in the region is much lower at 0.6/1,000 in Benton County and 5.0/1,000 in Linn County and 14/1,000 in Lincoln County. During 2017, more than 3,900 women and teenage girls were provided prenatal risk assessments, screening, and enrollment in the Medicaid program; were referred to social services; and were provided counseling or treatment for alcohol, drug, and tobacco use.

Lessons Learned

As the MC Program expanded its services to additional hospitals and health care organizations, it was clear that culturally relevant and age-appropriate programs were necessary. One important lesson was the need to have local maternity care coordinators in the rural communities who are bilingual and bicultural to support the Spanish-speaking population the program was targeting. Another lesson learned was that the literacy levels of materials and information, especially for teens and Spanish-speaking clients, required changes to meet client education levels. In addition, program leaders recognized the importance of collaborations and maintaining up-to-date information for clients.

Future Goals

Samaritan Health Services plans to continue to work in collaboration with community partners to reduce pre-term and low-birth weight babies in the region below the state rate of 8.5/1,000 and maintain the low rates of teen pregnancy.

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