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## **Overview**

The Wrapped in Hope (WIH) program began offering very limited services to the public in May of 2016, working up to a full program caseload by the end of 2016. The two hospitals (St. Luke Hospital and St. Joseph Medical Center) that provide prenatal care and offer labor and delivery services have been keeping basic data on patients who test positive for drug use at delivery in order to establish a baseline for the program.

Data spreadsheets are provided with this narrative report. The 2016-2017 Summary WIH Data-Final spreadsheet includes two spreadsheets (one for each year of the program) with basic data for 2016, which includes the first 6 months of the program being introduced to the community and the same data points for 2017 through December 31, 2017.

Also included with the WIH final grant report are the individual data tracking documents for both St. Luke Hospital (SLH) and St. Joseph Medical Center (SJMC) for 2017. Each hospital tracks WIH program data with some differences. Consistent data tracking would improve overall program evaluation efforts and is an area for continued dialogue between program partners.

## **General Observations from Overall Program Data**

- Although the percentage of women testing positive for drug use at delivery has not gone down, the overall use of methamphetamines and opiates has decreased significantly.
- The heaviest illicit usage appears *currently* to be THC. Anecdotally, program behavioral health staff indicate that current “conventional wisdom” (according to their patients) is drowning out public health messaging about the dangers of marijuana use, especially during pregnancy. WIH will consider using its remaining outreach resources to develop public education messages about this specific danger in the community for continued education efforts into the future.
- The overall number/percentage of infants being transferred to NICU (Neonatal Intensive Care Unit) for NAS (Neonatal Abstinence Syndrome) treatment has declined. In 2016, 13% of the drug-impacted deliveries were transferred to another facility for NAS treatment. Conversely, during 2017, only 7% were transferred for NAS. This positively represents one of the original WIH program goals.
- An additional program goal was to improve overall health outcomes for mom and baby by increasing prenatal care engagement. In 2016, 46% of the moms testing positive for drugs at delivery had 6 or fewer prenatal exams. In 2017, this percentage had dropped to 31%, potentially indicating that more moms struggling with drug use while pregnant were seeking prenatal care earlier in their pregnancies, increasing their likelihood for positive health outcomes and engagement with recovery.

## **Program Statistics from Behavioral Health Team**

*Year One is defined by the Behavioral Health Team as May 2016-April 2017. Year Two is defined as May 2017-December 2017.*

### **Program Statistics**

#### Number of Women Served

##### **Year 1**

51 total referrals, 13 never engaged = 38 total participants

12 women “completed” (finished some kind of services successfully with WIH)

##### **Year 2**

40 total referrals, 19 never engaged = 21 total participants

\* Note: Additional need identified for patient navigator services; limitations on time needed to connect with individuals referred for engagement and need for more supportive services  
14 women “completed” (finished some kind of services successfully with WIH)

#### Dosage of Wrapped in Hope Services

*Includes both year 1 and year 2 data*

\*Evaluations provided: 32

\*Referrals to inpatient treatment: 11

\*Referrals to residential living facility: 6

\*Referrals to outpatient group treatment: 17

\*Transportation provided to 18 participants

\* Note: WIH is not directly providing transportation services; referrals to Confederated Salish and Kootenai Tribe transit.

\*On-call phone coaching/crisis support provided to 39 participants

\*Mental health therapy provided to 28 participants

**Referral Statistics:** Referral numbers for reference into Wrapped in Hope (by method of referral)

##### **Year 1**

13 referrals from CPS (Child Protective Services)

27 referrals from OB providers

4 referrals from Parole Officers/lawyers

3 referrals from other WIH participants

3 referrals from “other”

##### **Year 2**

6 referrals from CPS

28 referrals from OB providers

3 referrals from Parole Officers/lawyers

2 referrals from WIH participants

1 referral from “other”

## **Outreach & Education**

WIH received additional grant support for community outreach and education efforts from the Montana Healthcare Foundation (MHCF) and Project LAUNCH of CSKT (Confederated Salish and Kootenai Tribes). MHCF provided a grant award of \$9,300 to implement six provider and community education lectures on topics related to the focus of WIH. In 2016, Project LAUNCH of CSKT granted WIH \$50,000 in funding to assist in the development of a public education and program promotional campaign.

After significant community outreach, it was determined that in addition to medical provider education, the biggest “education” needs were in the following areas:

- Program promotional materials (various) explaining services including ability to coordinate with CPS and the Justice Service
- General Education about Drug Use and its Impact on Pregnancy
- What is NAS and what it means for mother and baby

Since May of 2016, WIH has developed, redesigned (based on patient and community input), printed, and distributed the following materials:

- 850 Original Wrapped in Hope Brochures
- 450 Original NAS Brochures
- 500 New General Wrapped in Hope Brochures
- 300 CPS Inserts
- 60 Truth About Drugs and Pregnancy
- 60 New NAS Brochures

Since May of 2016, various members of the Wrapped in Hope group have attended health fairs, community events, luncheons, and participated in other speaking events in order to raise awareness about the Wrapped in Hope program, the issue of drug use in pregnancy, and the need to support recovery programs in the community. Below is a listing of some of the programs, events, and key stakeholders:

- Women for Wellness – May 2016 & 2017. Approximately 1,200 attended yearly from the community
- Providence St. Joseph Medical Center Baby Fair – June 2016 & 2017. Approximately 300 people attending yearly from the community
- CSKT Early Childhood Services Baby Fair – February 2017 -150 people attended from the community
- Polson Rotary Club, 2016
- Polson Chamber, 2016
- Polson Kiwanis, 2017
- CSKT, Tribal Health Wellness Committee, 2016
- Providence Health Foundation Board, 2016 & 2017
- Montana Public Health Administration Conference, 2017
- Providence Perinatal Neonatal Conference - Spokane, 2017
- Tribal public defenders
- SKC (Salish Kootenai College) Health & Wellness
- Lake County Public Defenders

- Lake County Prosecutors: *lead prosecutor and special prosecutor for domestic violence*
- Ronan Housing Authority
- Lake County Probation & Parole
- *Director of Safe Harbor domestic violence shelter*
- The Nest, St. Ignatius
- Western Montana Addictions Services
- Sunburst Mental Health, *Lead therapist*
- DHRD (Department of Human Resources Development), *Director of tribal transportation services*
- Lake County Jail
- Reentry Program CSKT
- Judge Manley and James Lapotka, lead prosecutor
- CSKT, Addictions Services
- CSKT, Mental Health Services
- SKC student coffee hour

In addition to these and other public outreach events, WIH planned, implemented, and evaluated five of the six provider and partner-centered lectures to educate local health professionals and community partners and agencies about the latest discussions in the following areas. The sixth event is being planned and will be implemented prior to March 31, 2018.

- Pain medication prescription recommendations for pregnancy
- When does pain management become addiction?
- Motivational interviewing in a behavioral health setting
- NAS treatment and its impacts

*Videos of these lectures have been recorded, archived, and available for viewing.*

### ***Ongoing Community Collaboration Developed from Year One Outreach***

WIH maintains a representative for the following community/health care-linked groups.

- Tribal Social Services' CPT (Current Procedural Terminology) case staffing meetings
- Judge Manley's Drug Court
- St Luke's OB doctor's meeting, and
- "community roundtable" monthly meeting of case managers comprised of community members

### **Additional Information**

The Implementation of the Wrapped in Hope Program (delivery of Patient Services) began on a limited basis in May of 2016 while the promotional/public education campaign was still being developed. What was being learned during the ongoing implementation impacted the ultimate direction that the promotional/public education campaign eventually took. For example, prior to any patient services being offered, all anecdotal data and community experience predicted that potential patient behavior would be one of distrust of the program once offered in the community. It was assumed that the "campaign" would need to spend much of its energy on "myth-busting," e.g., *just because you enter recovery during pregnancy, doesn't mean CPS will automatically take your baby away or send you to jail.* WIH partners thought it would be necessary to spend significant resources on "patient outreach" to

build trust and engage patients who would be interested in the program. However, once WIH started offering services in May of 2016, simple word of mouth filled the limited services that were initially offered. As the program resources grew, the caseload grew as well, with no formal promotion whatsoever. This completely unexpected turn of events gave WIH the opportunity to change the direction to address other areas of need for public education: e.g., provider education relative to NAS treatment, prescription pain treatment guidelines during pregnancy, etc., as well as consistent promotional/educational materials about the Wrapped in Hope Program that can support women when they enter the program with basic information about navigating CPS, the justice system, the impacts of various drug use during pregnancy, etc.

Since much of the WIH educational materials were created and finalized later in 2017, an evaluation of the materials and project outreach has not yet been formally developed. WIH will be working with Project LAUNCH's evaluation team in 2018 for technical assistance and resources related to the outreach and educational materials effectiveness.