

Tufts Medical
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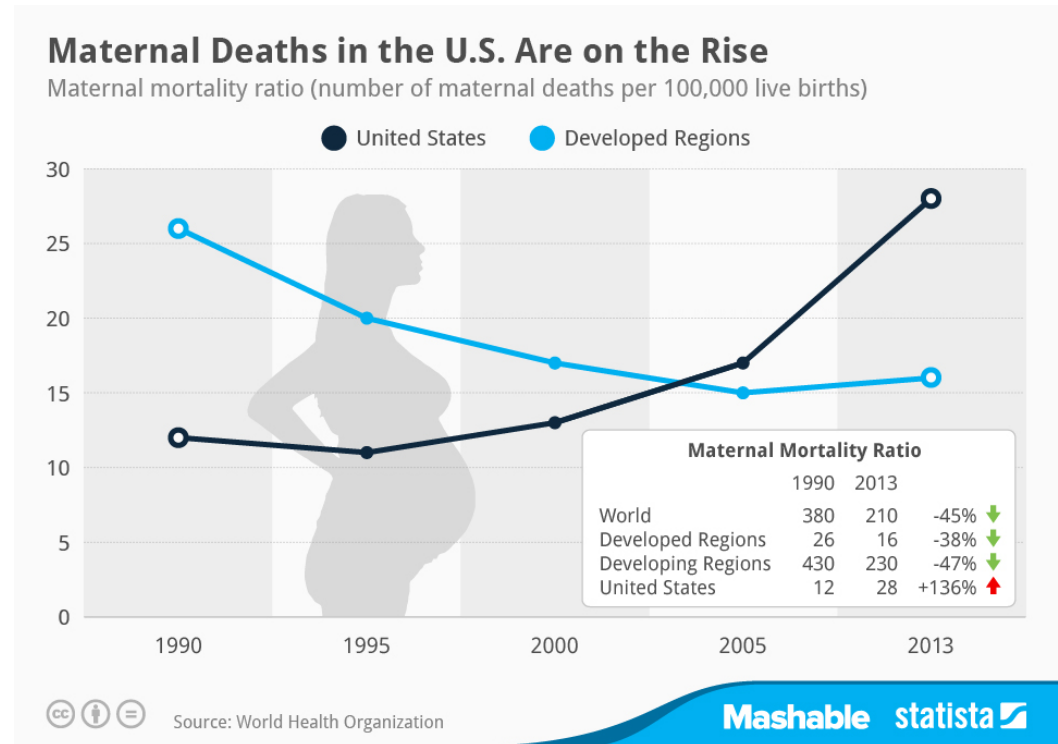
Silver linings: Adaptations in prenatal care undertaken during the pandemic that can launch us to a better prenatal care model

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Traditional Prenatal Care model

- Prenatal care models are being re-designed to:
 - Be more patient-centered
 - Maintain or improve safety and quality
 - Decrease cost



Women prefer alternative models of PNC

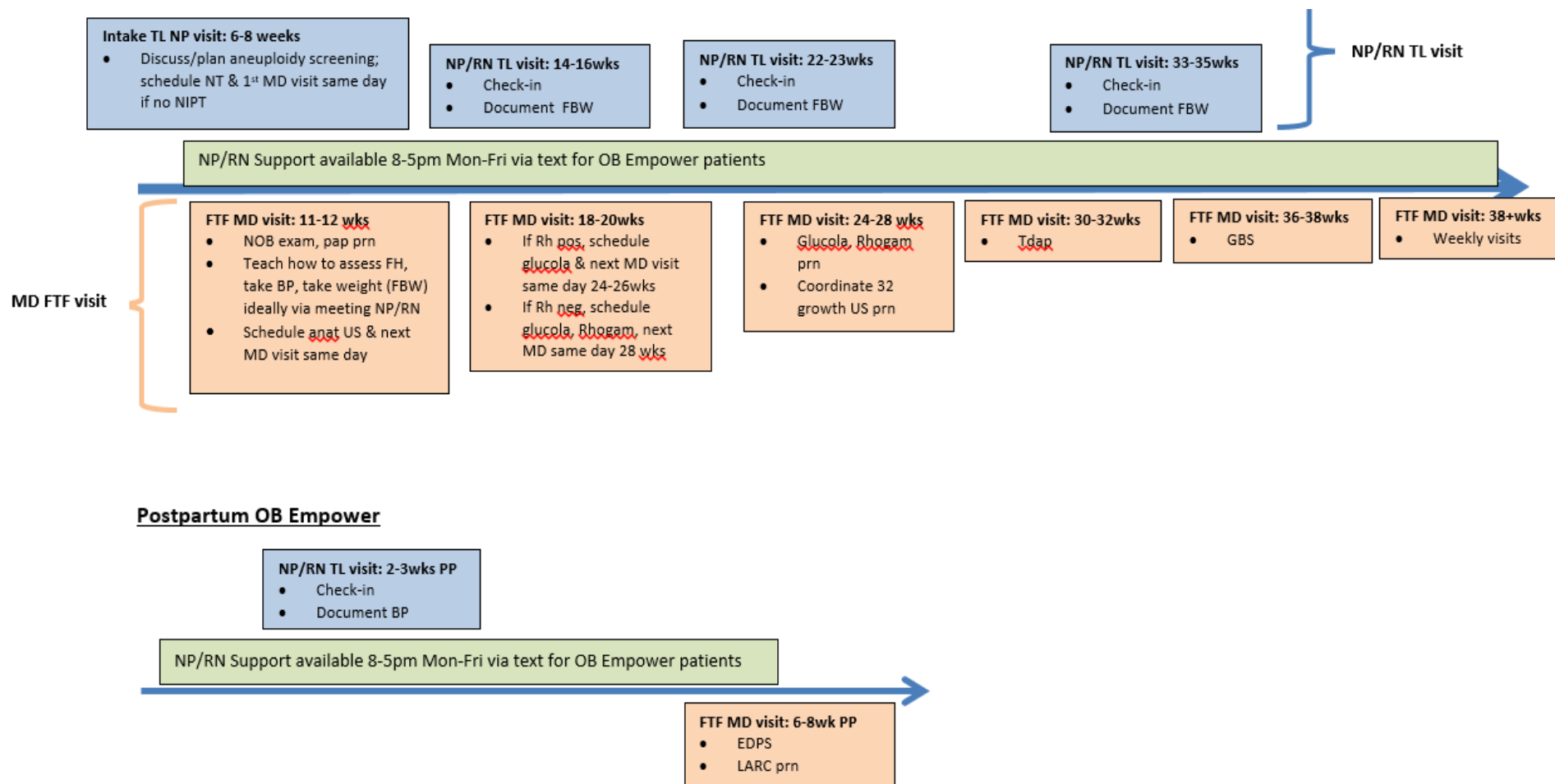
- 94% of women prefer individualized prenatal care
- Women randomized to a OB Nest:
 - Were more satisfied with prenatal care (94 vs 79, $p < 0.01$)
 - Reported less stress during pregnancy (32 vs 41, $p < 0.01$)
 - Reported better care coordination (401 vs 167, $p < 0.01$)
 - No difference in outcomes, consistent with prior data

Peahl AF et al. Patient Preferences for Prenatal and Postpartum Care Delivery. *Obstet Gynecol* May 2020

Butler Tobah YS, et al. Randomized comparison of a reduced-visit prenatal care model enhanced with remote monitoring. *AJOG* Dec 2019

deMooij et al. OB Nest: Re-imaging low-risk prenatal care. *Mayo Clin Proc* April 2018

OB Empower: Women's Care Tufts' vision for low-risk prenatal care



OB Empower accelerated due to the pandemic



- Purchased equipment
- Finalized protocols (low-risk and high-risk tracks)
- Telemedicine prenatal and problem visits
- *Lacked the Nurse Navigator*

OB Empower accelerated: results

- ~80 patients participated to varying degrees
 - Diverse demographics (although all English-speaking)
 - Diverse risk factors
- Maternal and neonatal outcomes unchanged
- Patient satisfaction unchanged



OB Empower: lessons learned and future directions

- Challenges:
 - Variable adherence to protocol
 - Equipment procurement and return
- Future directions
 - Nurse Navigator
 - Expanding to other languages
 - More robust analysis of outcomes including patient satisfaction, maternal and neonatal outcomes



Thank you!

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