



Beth Kelsey

## Maternal Mental Health: Perinatal Depression and Anxiety Patient Safety Bundle

By Beth Kelsey, EdD, APRN, WHNP-BC



In 2015, the Council on Patient Safety in Women's Health Care convened an interdisciplinary workgroup to develop an evidence-based patient safety bundle addressing maternal mental health. The 13-member workgroup was co-chaired by NPWH Director of Policy Susan Kendig, JD, MSN, WHNP-BC, FAANP, and American Congress of Obstetricians and Gynecologists representative John P. Keats, MD. The workgroup collaborated over several months, reaching consensus and approval of the Maternal Mental Health: Perinatal Depression and Anxiety Patient Safety Bundle in 2016.

The bundle has four key components: Readiness, Recognition and Prevention, Response, and Reporting and Systems Learning (*Box*). Rather than introducing new guidance, the bundle summarizes existing recommendations and matches them with specific resources to facilitate the implementation of best practices in all maternity care settings. The bundle is designed to be applicable in any setting where prenatal and/or postpartum care is provided. It can be adapted for implementation in pre-conception/interconception care as well.

### Why is a maternal mental health bundle important?

First, healthcare providers (HCPs) need to know what is meant by the term *bundle* as it applies to healthcare. A bundle is a small set of evidence-based interventions that combines medical and improvement science to achieve improved outcomes. When care processes are grouped

into simple bundles, HCPs are more likely to implement them by making fundamental changes in how the work is done. When the care processes are evidence based, subsequent outcomes will improve. Bundled interventions encourage interdisciplinary teams to organize work, adapt the delivery system, and deliver all of the bundle components. An emphasis is placed on improving process reliability. The endpoint is improvement of clinical outcomes.<sup>1</sup>

Second, HCPs need to recognize the scope of maternal mental health safety issues. Perinatal mood and anxiety disorders are among the most common complications of pregnancy. Perinatal depression affects one in seven women.<sup>2,3</sup> Anxiety disorders affect 13%-21% of women during pregnancy and 11%-17% postpartum.<sup>4</sup> When unrecognized or untreated, these conditions can have a devastating effect on women, their infants, and their families. The spectrum of adverse effects includes poor adherence to healthcare recommendations, smoking, substance abuse, loss of financial and interpersonal resources, and a potential adverse effect on maternal-infant bonding/attachment. Depressive psychosis, an extreme form of perinatal depression, can lead to maternal suicide and/or infanticide. In fact, maternal suicide within a year of delivery is emerging as a major cause of maternal mortality and is probably underreported. Because perinatal mood and anxiety disorders are associated with increased risks for maternal and infant morbidity and mortality, they represent a vital patient safety issue.<sup>5</sup>

### Where can HCPs find information about the bundle?

A commentary, Consensus Bundle on Maternal Mental Health: Perinatal Depression and Anxiety, published in the March 2017 issue of the journal *Obstetrics and Gynecology*, provides information to assist with bundle implementation. This commentary includes a discussion concerning each item within the four key bundle components. In addition, it provides a table listing useful patient/provider educational resources and the websites where these resources can be obtained. Because NPWH provided leadership both in the development of the bundle and in the writing of the commentary (Susan Kendig is the lead author), we at *Women's Healthcare* are able to provide you with a [link<sup>A</sup>](#) to the full article in *Obstetrics and Gynecology*.

### What is the Council on Patient Safety in Women's Health Care?

The Council on Patient Safety in Women's Health Care is a broad consortium of organizations across the spectrum of women's health established for the promotion of safe

## **Box.** Maternal Mental Health: Perinatal Depression and Anxiety Patient Safety Bundle: Council on Patient Safety in Women's Health Care\*

### **Readiness (Every Clinical Care Setting)**

1. Identify mental health screening tools to be made available in every clinical setting (outpatient obstetric clinics and inpatient facilities)
2. Establish a response protocol and identify screening tools for use based on local resources
3. Educate clinicians and office staff on use of the identified screening tools and response protocol
4. Identify an individual who is responsible for driving adoption of the identified screening tools and response protocol

### **Recognition and Prevention (Every Woman)**

5. Obtain individual and family mental health history (including past and current medications) at intake, with review and updates as needed
6. Conduct validated mental health screening during appropriately timed patient encounters, to include both during pregnancy and in the postpartum period
7. Provide appropriately timed perinatal depression and anxiety awareness education to women and family members or other support persons

### **Response (Every Case)**

8. Initiate a stage-based response protocol for a positive mental health screening result
9. Activate an emergency referral protocol for women with suicidal or homicidal ideation or psychosis
10. Provide appropriate and timely support for women, as well as family members and staff, as needed
11. Obtain follow-up from mental healthcare providers on women referred for treatment (this should include release of information forms)

### **Reporting and Systems Learning (Every Clinical Care Setting)**

12. Establish a nonjudgmental culture of safety through multidisciplinary mental health rounds
13. Perform a multidisciplinary review of adverse mental health outcomes
14. Establish local standards for recognition and response to measure compliance, understand individual performance, and track outcomes

Modified from Council on Patient Safety in Women's Health Care. [safehealthcareforeverywoman.org](http://safehealthcareforeverywoman.org)

\*Permission to reuse this Box has been granted by Wolters Kluwer. The Box is derived from Kendig S, Keats JP, Hoffman MC, et al. Consensus bundle on maternal mental health: perinatal depression and anxiety. *Obstet Gynecol.* 2017;129(3):422–430. [journals.lww.com/greenjournal/Fulltext/2017/03000/Consensus\\_Bundle\\_on\\_Maternal\\_Mental\\_Health\\_.4.aspx](http://journals.lww.com/greenjournal/Fulltext/2017/03000/Consensus_Bundle_on_Maternal_Mental_Health_.4.aspx).

healthcare for every woman. The council has a mission to “continually improve patient safety in women’s health-care through multidisciplinary collaboration that drives culture change” and a vision of “safe healthcare for every woman.” The council membership comprises 19 organizations, including NPWH, as well as patient advocates. NPWH participates in a number of workgroups convened by the council.

One of the major accomplishments of the council has been the development and dissemination of evidence-based patient safety bundles to support ongoing

improvement of clinical care and patient outcomes. The council **website<sup>B</sup>** provides access to live and archived webinars on a variety of topics relevant to promoting a culture of safety in women’s healthcare. The website also provides information on all of the patient safety bundles along with safety resources and tools.

### **Recommendations**

I strongly encourage you to read the commentary, Consensus Bundle on Maternal Mental Health: Perinatal Depression and Anxiety, and to share the information with

colleagues who provide prenatal, postpartum, and pre/interconception care. If you provide this care in your own clinical setting, consider using the bundle to facilitate a standardized process to ensure that maternal mental health is always addressed. The bundle is not intended to dictate practice. It is, as described previously, a set of evidence-based interventions that combines medical and improvement science to achieve improved outcomes. The interventions can be adapted in consideration of local resources, but standardization within an institution is important for consistent and safe care.

If you have implemented the bundle in your health-care setting, please consider writing a short commentary for our journal on the process and outcomes thus far. You can submit your commentaries to me at [bkelsey@healthcommmedia.com](mailto:bkelsey@healthcommmedia.com). By sharing our experiences, we can strengthen the resolve to make sure that maternal mental health is always regarded as a safety issue and that it is addressed in an evidence-based manner. ●

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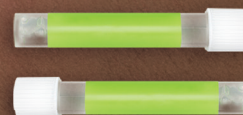
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## Web resources

- A. [journals.lww.com/greenjournal/Fulltext/2017/03000/Consensus\\_Bundle\\_on\\_Maternal\\_Mental\\_Health\\_4.aspx](http://journals.lww.com/greenjournal/Fulltext/2017/03000/Consensus_Bundle_on_Maternal_Mental_Health_4.aspx)
- B. [safehealthcareforeverywoman.org/](http://safehealthcareforeverywoman.org/)

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**References:** 1. Aptima HPV Assay [package insert, AW-12820 Rev.001], San Diego, CA; Hologic, Inc., 2015. 2. Sawaya G, et al. Identifying a "range of reasonable options" for cervical cancer screening. *Obstet Gynecol*. 2015;125(2):308-310.

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