# **Adolescent Maternity Care Program**

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## Background

- Current prenatal care is tailored to the adult population. This care often does not meet the developmental needs of a pregnant teen
- Teen pregnancy is associated with high rates of complications and comorbidities
- Teens who become pregnant are more likely to have poor health and socioeconomic outcomes compared to adults
- □ For teens who become pregnant, their likelihood of having repeat teen pregnancies is high
- Connection to community resources, such as Public Health Nurses, is an integral part of a pregnant teen's care

# Objectives

An evidence based Adolescent Maternity Program was initiated in a large rural health care facility with three foundational pillars of care, including

- 1. preventative prenatal care
- 2. developmentally appropriate education
- 3. increased connection to community resources.



#### Methods

- Evidence-based education bundles and patient education materials were developed with the three core pillars forming the framework for each.
- 2. All providers and nurses within the department were educated on the foundational pillars.
- 3. Tools were developed to help providers and nurses integrate the foundational pillars into their care, including standard documentation, scripting, age-appropriate patient educational pamphlets, and customization of a closed-loop referral program that previously existed within the electronic medical record.
- 4. The foundational pillars were implemented into RN and Provider practice

**Program inclusion criteria:** 1) age 19 and younger and 2) currently pregnant and 3) receiving prenatal care at project site of implementation.



#### **Evaluation & Outcomes**

Charts were audited in three categories: 1) percent of adolescents who received education regarding long-acting reversible contraceptives (LARC) during their pregnancy OUTCOME: 62% Compliance 2) percent of adolescents who received age appropriate prenatal education OUTCOME: 80%

**3**) percent of patients who were offered referral to community resources. **OUTCOME:** 81%



## Conclusion

The goal of achieving 75% compliance was met for two out of three pillars. 80% of pregnant teen patients who received care during the project window received age-appropriate education, and 81% were offered a referral to community resources. Education regarding LARC use did not meet target, with only 62% of patients within the window receiving education on LARC use to prevent repeat teen pregnancy. Future phases of this project should include additional efforts around LARC use for pregnant teens.

## References

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