

# Pilot Postpartum CAP Session

## Background on the Community for Antepartum Patients (CAP) model:

Our program is based on the **CenteringPregnancy model**—an innovative, outpatient, group prenatal care model which has been shown to improve outcomes.

- ❑ CAP worked with **Duke Hospital Antepartum Service** to bring patient together for sessions
- ❑ 2019 pilot study results:
  - ❑ Participants enjoyed the sense of community where they could share and receive advice.
  - ❑ Participants had **better pregnancy outcomes**, with greater effect seen among Black women.

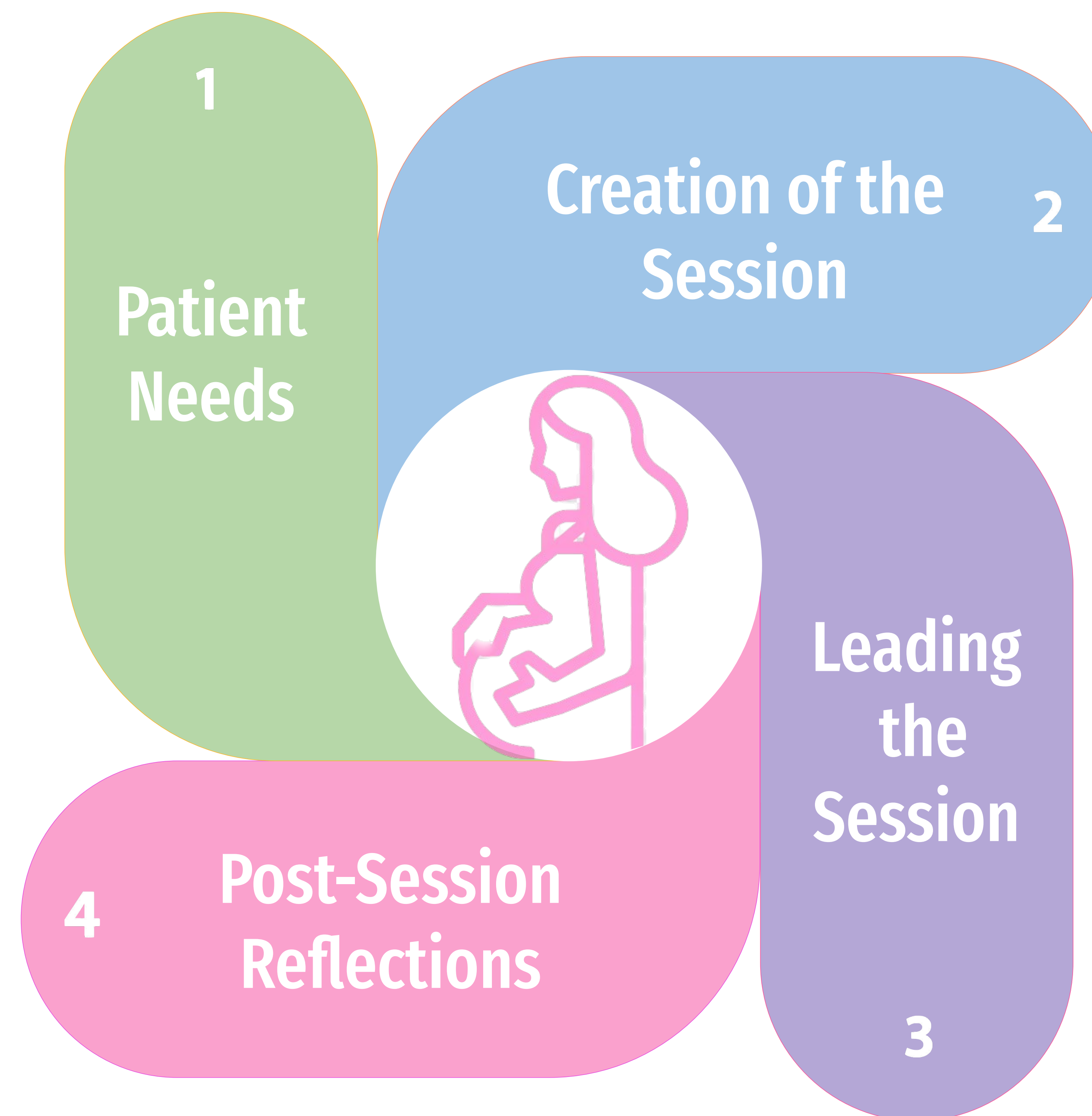
## Objective for this Year's CAP Team:

- ❑ **CAP team** consisted of Duke medical students, masters students, and undergraduate students
- ❑ **Objective:** expand pilot study from 2019-2020
- ❑ Team members recruited patients and guest speakers for weekly virtual Centering group sessions
- ❑ **Undergraduate goals:** organize an intervention specific to patient feedback of previous CAP sessions. The students will then collect feedback and use it to refine the intervention for use in future CAP sessions.

## Identified gap in our sessions: postpartum at-home care.

- ❑ **Reinforced by pregnancy community:**
  - ❑ *"When my husband had to go back to work it just became too much for me. I had the chance of staying with my parents-in-law for 2 weeks. This allowed me to spend my time with the baby and to establish a better connection between us. I got into something like a rhythm and then the whole thing became a bit more structured."* (Esther, 31 years, first child, 4 months, caesarean delivery).
  - ❑ *"In the hospital one learns quite a few things about baby care, how to wash, dress and feed the baby. Can this still be guaranteed after an early discharge?"* (Anna, 35 years, first child, 3 months, vaginal birth).
- ❑ Patients wanted more **structure** during sessions

Student Personal Reflections	Group Reflections
<ul style="list-style-type: none"> <li>- Sometimes felt <b>unprepared to explain risk factors of conditions</b></li> <li>- <b>Worried about connecting with patients</b></li> <li>- Felt nervous to present information the patient already knew</li> </ul>	<ul style="list-style-type: none"> <li>- Happy with the <b>detailed presentation and collaboration throughout</b></li> <li>- Changes for future sessions: <b>pause and speak slowly, minimize asking the same questions to the patients, and understand all risk factors of conditions</b></li> </ul>



- ❑ Presentation was made **collaboratively**
- ❑ Guided by **evidence-based and reliable resources**
- ❑ Slides were kept simple, with **clear, accessible language**
- ❑ Included topic slides to let patient choose points to discuss

- ❑ Interactive pilot CAP session led by **undergraduate students, with a medical student in patient role**
- ❑ Each student presented on one part of postpartum at-home care: **mother, baby, and resources.**
- ❑ This session was customized to address the **patient's specific needs and preferences.**

## CAP Postpartum Period Presentation



## Sample Slides

**Potential Topics**

- ❖ Wound Care Essentials
- ❖ Cesarean Birth (C-Section) Wound Care
- ❖ Asking for Help
- ❖ Self Care & Mental Health
- ❖ Breastfeeding

**Cesarean Birth Wound Care**

- If steri-strips are used, those will most likely fall off on their own
- Change bandage if it gets wet or dirty or as often as the provider recommends
- Don't soak incision in the tub
- Don't use hydrogen peroxide or rubbing alcohol to clean the wound

What to expect:

- Some inflammation and redness at incision site
- Small amount of fluid or blood may leak a few days after the incision is made



STERI-STRIPS



HEALING

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## Next Steps:

- ❑ Feedback was categorized into 2 main aspects: **informational** and **presentation-based**.
  - ❑ **Informational:** Create a comprehensive summary sheet of presented topics
  - ❑ **Presentation-based:** Let the patient lead the session and present topics of their choice.

## Conclusion:

- ❑ Main limitation: **lack of in-person meetings and low engagement**
- ❑ Plans moving forward:
  - ❑ **Switch to in-person sessions**
  - ❑ **Expansion of CAP curriculum** to include postpartum at-home care
  - ❑ Invite a **guest speaker** to address specific questions

## References

