

# An Evaluation of Continuing Education Programming on The Role of Infection in Maternal/Infant Mortality and Morbidity

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## Background

- A knowledge gap exists in the current disparities of maternal/infant mortality and morbidity along racial, socioeconomic, and geographical lines. Infection plays a significant factor in mortality and morbidity, as the 7<sup>th</sup> leading cause of infant mortality.

- Educational programming serves as a means for care providers to continue their education beyond completion of their degree to best serve the ever-changing needs of the population

- Hypothesis: Educational programming on the role of infection in maternal/infant morbidity and mortality will increase provider knowledge, and improve provider attitudes and practices as it pertains to infection screening and treatment in pregnant women and neonates.

## Methods

- Course/survey research and development took place from April 2019 to August 2019

- Literature search on current maternal/infant mortality and morbidity statistics, current recommendations on infection screening and treatment, and research outlining potential modifiers of disparate health outcomes guided course development

- Modules created using Microsoft PowerPoint and Adobe Premiere Pro CC 2019

- Multi-methodological survey created with Qualtrics Survey Software using Knowledge, Attitude, Practices (KAP) framework with both qualitative and quantitative questions, as well as focus group/directed interview follow-up

- IRB approval for survey collection obtained August 27, 2019

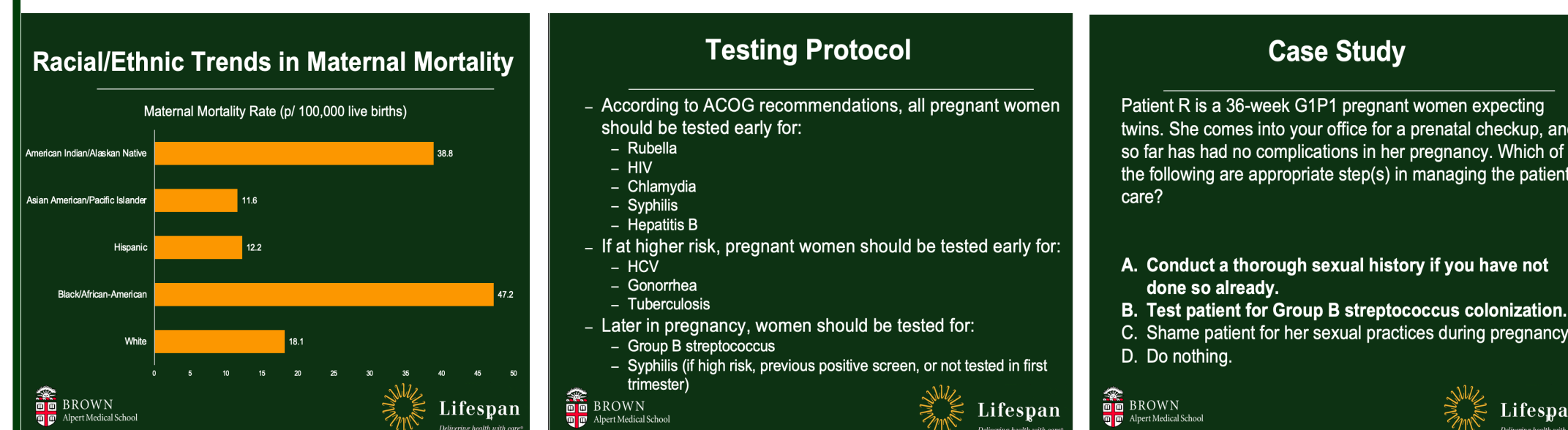
- Applied for CME, CNE, and CE credit through Lifespan CME office

## Results

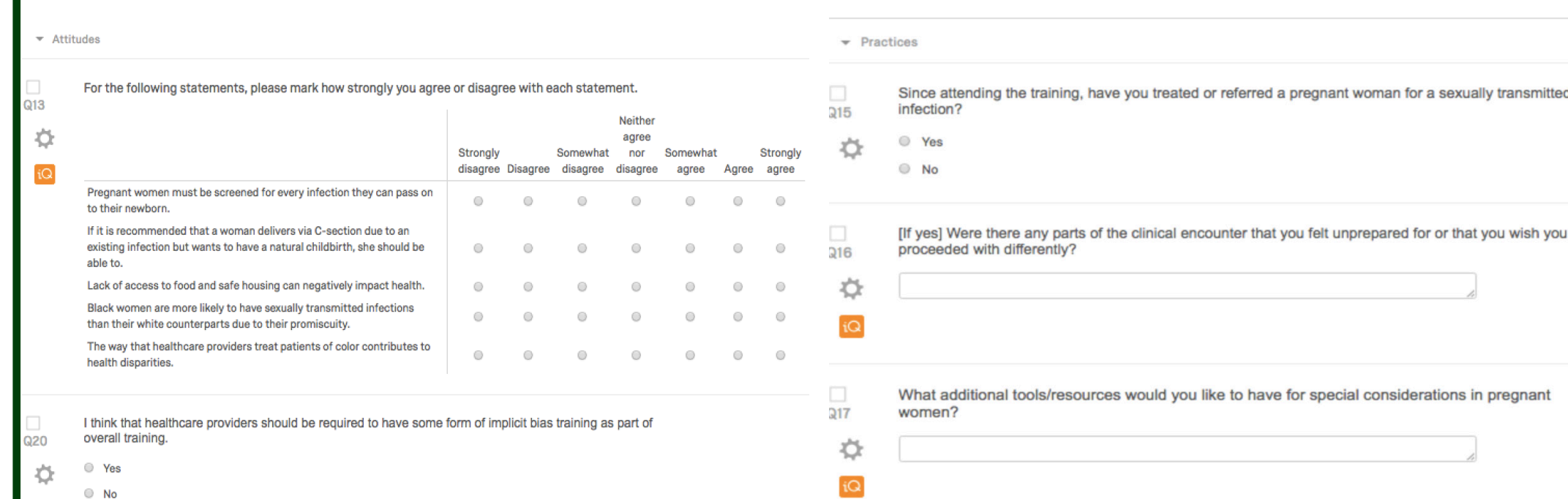
• Literature review identified significant racial and geographical disparities in maternal/infant mortality/morbidity, as well as racial disparities in morbidity due to infectious transmission. Robust guidelines on screening and treatment for common vertically transmissible/teratogenic infections were also identified.

• Development yielded a complete course outline pending secondary review, as well as four 15-minute modules:

- Describing current statistics as they relate to maternal/infant mortality and morbidity as well as infection
- Screening and treatment guidelines for pregnant women at risk of infection
- Screening and treatment guidelines for newborns with increased risk of vertical transmission
- Walk-through of a neonatal GBS case, with discussion of the role of individual and systemic discrimination in perpetuating health outcomes disparities in mothers and infants



- Survey development yielded three mixed quantitative/qualitative surveys with potential for follow up focused interviews. Pre-training survey consists of nineteen questions, post-training survey consists of fourteen questions, and six-month follow up survey consists of eight questions



- Implementation and evaluation of program is pending following Lifespan CME approval

## Conclusion

- Addressing the existing knowledge gap on how to reduce existing health outcomes disparities in maternal/infant mortality and morbidity through educational programming may change provider knowledge, attitude, and practices to positively impact the care of patients, particularly those from marginalized backgrounds.

- It is important to consider the role that individual and systemic biases play in disparate health outcomes among women and infants in the United States, and confront these biases to reduce them.

## Future Directions

- Fully implementing continuing education programs through the Miriam Hospital STD Clinic's online CME platform.

- Applying to national CME platforms for credit in recognition of course completion to expand area of impact.

- Collecting survey data from physicians who complete the training to assess changes in care provided immediately following course and long-term.

- Conducting long-term follow up in-person interviews to assess changes in care provided following training completion.

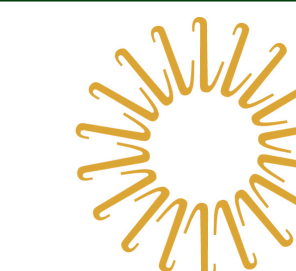
## Additional Information

References can be found using the QR code:



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