

Perinatal Behavioral Health Guideline Checklist

Birth Hospital
Level 3



The current state of the issue

The perinatal period, **defined here as including the time from conception until the end of the first year after birth**, involves significant physiological and psychosocial change. **The term behavioral health includes both mental health and alcohol or other substance misuse (e.g., opioids).**

Pregnancy and parenting are both life altering events that may result in new or increased behavioral health symptoms for the gestational parent and their families.¹ Postpartum depression is common, impacting 10-15% of gestational parents, while postpartum anxiety disorders are estimated to occur in 21% of gestational parents.^{2,3,4} Pregnant and postpartum individuals with mental health concerns are at greater risk for substance use and abuse.⁵ According to the [Washington State Maternal Mortality Review Panel: Maternal Death 2017-2020 Report](#), the leading underlying causes of pregnancy-related deaths were behavioral health conditions (32%), predominantly by suicide and overdose.⁶

Integrated Behavioral Health

- ☐ Participate in the Washington Health Care Authority's Substance Using Pregnant People (SUPP) Program for individuals who are pregnant, covered through Apple Health and have a substance use history.
- ☐ Align with requirements to become a [Birthing Center of Excellence from the DOH](#). Criteria are below:
 - ☐ Have a provider on-site with skills and scope to begin or maintain medications that treat OUD and/or adjust medications that treat OUD during labor and delivery and postpartum.
 - ☐ If the hospital does not have an on-site/on-call provider, there is a procedure in place to consult with a provider to initiate/adjust medications.



- ☐ Implement the full [AIM Postpartum Discharge Bundle](#), such as educate the birth parent and family on signs and symptoms of behavioral health concerns, resources and support available to them in the community (see non-exhaustive list in **Appendices B&C**) and as appropriate assist the patient and family to establish with a PCP.

Resources

- The Bree Report on Perinatal Behavioral Health is meant to supplement these resources.
- Full Bree Report on Perinatal Behavioral Health: <https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2024/02/Bree-Perinatal-Behavioral-Health-FINAL-012424.pdf>
- Perinatal Support Washington: <https://perinatalsupport.org/>
- Perinatal Psychiatry Consultation Line for Providers (Perinatal PCL): <https://perc.psychiatry.uw.edu/perinatal-pcl/>
- MAP ECHO: Perinatal Psychiatry Case Conference Series: <https://perc.psychiatry.uw.edu/map-echo-perinatal-psychiatry-case-conference-series/>
- Maternal* Mental Health Access (MaMHA): <https://waportal.org/partners/maternal-mental-health-access-mamha/resources>
- Training Interprofessional Teams to Manage Miscarriage: <https://www.miscarriagemanagement.org/get-trained-folder>
- Washington State Perinatal Collaborative (WSPC): <https://doh.wa.gov/you-and-your-family/womens-health/washington-state-perinatal-collaborative-wspc#ParentID-9337>
- 988 Suicide & Crisis Lifeline: <https://doh.wa.gov/you-and-your-family/injury-and-violence-prevention/suicide-prevention/988-suicide-crisis-lifeline>

Read the full Bree Report on Perinatal Behavioral Health online by scanning the QR code:



Connect with the Bree Collaborative at bree@qualityhealth.org

References: 1.Garcia, E.R., & Yim, I.S. (2017). A systematic review of concepts related to women's empowerment in the perinatal period and their associations with perinatal depressive symptoms and premature birth. BMC Pregnancy Childbirth, 17(Suppl 2), 347. 2. Centers for Disease Control and Prevention. (n.d.). Mental health of children and parents — a strong connection. Retrieved from <https://www.cdc.gov/childrensmentalhealth/features/mental-health-children-and-parents.html> 3. Anokye, R., Acheampong, E., Budu-Ainooson, A., Obeng, E.I., & Akwasi, A.G. (2018). Prevalence of postpartum depression and interventions utilized for its management. Ann Gen Psychiatry, 17, 18. 4. Bauman, B.L., Ko, J.Y., Cox, S., et al. (2020). Vital Signs: Postpartum Depressive Symptoms and Provider Discussions About Perinatal Depression — United States, 2018. MMWR Morb Mortal Wkly Rep, 69, 575–581. 5. American Psychiatric Association. (2023). Perinatal Mental and Substance Use Disorders [Whitepaper]. Retrieved from <https://www.psychiatry.org/getmedia/344c26e2-cdf5-47df-a5d7-a2d444fc1923/APA-CDC-Perinatal-Mental-and-Substance-Use-Disorders-Whitepaper.pdf>. 6. Stein, B.S., Sedano, C. Gardner, D., Silverman, E., Mentzer, K., Tibbs Christensen, T. (2023) Washington State Maternal Mortality Review Panel: Maternal Deaths 2017–2020. Washington State Department of Health Prevention and Community Health Division. Olympia, WA. Retrieved from: <https://doh.wa.gov/sites/default/files/2023-02/141-070-MaternalMortalityReviewPanelReport-2023.pdf>