



Perinatal Resource Mapping Sprint Report

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Executive Summary

In 2025, the Minnesota Perinatal Quality Collaborative launched the Perinatal Resource Mapping Sprint, a three-session initiative to enhance resource sharing and care coordination for pregnant and postpartum patients. The sprint demonstrated the value of cross-disciplinary collaboration and laid the foundation for more equitable and coordinated perinatal care across Minnesota. Looking ahead, MNPQC will continue to assist community members in developing their resource maps and further enhance MNPQC's Resource Map as a valuable tool for healthcare professionals and families.

MNPQC Background

The **Minnesota Perinatal Quality Collaborative** (MNPQC), founded in 2018, is a nonprofit organization dedicated to improving perinatal health outcomes in Minnesota. MNPQC is part of a network of **Perinatal Quality Collaboratives (PQCs)** supported by the Centers for Disease Control and Prevention (CDC), aimed at fostering partnerships among hospitals, healthcare centers, public health institutions, and community organizations. By using evidence-based frameworks from the **Institute for Healthcare Improvement (IHI)**, MNPQC has become a key player in improving maternal and infant health outcomes through quality improvement initiatives.

MNPQC collaborates with a network of **77+ organizations**, including academic institutions, healthcare providers, and local/state agencies. In 2022, MNPQC joined the **Alliance for Innovation on Maternal Health (AIM)** is a national initiative promoting safety bundles to enhance maternal care.

Perinatal Resource Mapping Sprint Introduction

In alignment with Minnesota hospital priorities for 2024, the Minnesota Perinatal Quality Collaborative (MNPQC) introduced the **Perinatal Resource Mapping Sprint**—an innovative three-session program to foster collaboration and enhance resource sharing across healthcare and community settings. This sprint brings together stakeholders, including hospitals, healthcare centers, community organizations, non-profits, government agencies, public health professionals, social workers, doulas, community health workers, students, and others committed to advancing perinatal health.

Unlike traditional learning opportunities, this sprint emphasizes connection, collaboration, and practical resource-sharing to address gaps in perinatal care. By working together, participants will contribute to creating a stronger, more coordinated system of care that meets the needs of pregnant women and their families.

Through this sprint, MNPQC aims to equip participants with the tools and strategies to build a sustainable, community-driven approach to perinatal resource sharing and care coordination.

Tools and Resources

Throughout the sprint, MNPQC provided various tools and resources to participants, including:

- **MNPQC's Resource Map:** A free online tool designed to help families and healthcare professionals find perinatal health resources in their communities. The map offers a comprehensive list of local, state, and national resources on various perinatal health topics.
- **Is Something Missing Form for MNPQC's Resource Map:** A Google Form available on MNPQC's website enables users to request a resource to be added, updated, or removed.
- **Resource Mapping How to Guide:** A comprehensive guide on how to utilize Google Spreadsheets and Google MyMaps to create a personalized, customizable map tailored to the participant's needs and target audience.
- **Google Spreadsheet Template:** A user-friendly template to support participants' creation of their own Google MyMaps. The template included essential fields such as the resource name, address, website link, phone number, resource type, and description.
- **Example Resource Spreadsheet:** A pre-filled template providing participants with a clear example of the required information and layout.
- **Google MyMaps Website:** A free tool offered by Google enabling participants to create their own interactive maps.

These resources helped ensure participants had the tools and knowledge to achieve the sprint goals and objectives successfully.

Results

The Perinatal Resource Mapping Sprint was intentionally designed as a broad, educational offering to engage a wide range of professionals in perinatal care across Minnesota.

Participants brought various experiences and roles, reflecting the many touchpoints influencing perinatal health. The goal was to create a shared space for learning, connection, and innovation in resource mapping- ultimately building capacity for more coordinated and equitable care for perinatal patients and their families.

Over the course of the series:

- **95 individuals registered**, demonstrating a strong interest in resource mapping and coordination.
- **58 participants actively engaged**, attending one or more sessions and contributing to discussions and activities.
- **25 participants attended two or more sessions**, indicating sustained commitment and deeper involvement in the learning process.
- **The geographic reach extended across 36 counties in Minnesota and 3 counties in Wisconsin**, ensuring that rural, suburban, and urban perspectives were represented.
- **Several participants had statewide roles**, bringing insights and influence to support broader dissemination and integration of resource mapping strategies.
- **Participants represented a wide range of disciplines**, including hospital-based clinicians, public health professionals, doulas, social workers, nonprofit leaders,

community health workers, students, and many others. This cross-sector collaboration was a key driver of the sprint's success and is essential to developing comprehensive and accessible perinatal resource maps.

Participants left the sprint equipped with practical skills to create and share customized resource maps, a stronger understanding of the perinatal resource landscape, and new professional connections to support ongoing collaboration and innovation.

Conclusions

The Perinatal Resource Mapping Sprint highlighted the power of cross-disciplinary collaboration in strengthening and connecting systems of care for perinatal patients and their families. Participants gained hands-on experience building customized resource maps, exchanged innovative strategies to address care gaps, and helped lay the foundation for lasting coordination between hospitals and community-based organizations.

A key takeaway from this sprint is clear: **meaningful change in perinatal health starts with relationships**- between providers, patients, and the support systems around them. By creating tools that make resource sharing more accessible and tailored to local needs, participants took critical steps toward reducing fragmentation and advancing equity in perinatal care.

Next Steps

- **Ongoing Support:** MNPQC will continue to offer virtual support for participants refining and applying their resource maps and who may benefit from additional guidance.
- **Map Integration & Expansion:** MNPQC will further develop its statewide resource map and explore ways to incorporate participant-created maps into broader referral systems and collaborative care networks.
- **Sustainability & Engagement:** Participants are encouraged to keep their maps current, share them with colleagues, and use them to spark cross-sector conversations within their facilities and communities.
- **Feedback & Evaluation:** MNPQC will distribute a follow-up survey to learn how participants use their maps and identify ongoing training or support needs. In addition, MNPQC will continue to check in with participants periodically to assess progress and provide tailored assistance as needed.

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