Mission
The American Pregnancy Association is a national health organization committed to promoting reproductive and pregnancy wellness through education, support, advocacy, and community awareness.

History
The American Pregnancy Association (APA) was established in 1996 to make motherhood a healthy reality and create positive pregnancy outcomes through education, research, support and access to care. APA headquarters office and call center are based in Irving, Texas. Women and their partners are engaged through the website, toll-free Pregnancy Helpline and online chat. The APA website features nearly 700 educational articles on the complete spectrum of pregnancy. APA educates visitors about the full spectrum of reproductive health - from contraception, abstinence and how to avoid unplanned pregnancies, to how to achieve a healthy pregnancy through labor, delivery and the first year post-partum. APA’s staff includes six experienced labor and delivery nurses and pregnancy educators who guide expectant mothers along their journey into motherhood. APA’s education content team continuously resources late-breaking research, news and products to create articles for the site and a weekly e-newsletter. The APA web site receives more than six million visitors each month. The APA team takes calls and website chats from across the United States and 40 countries.

APA is launching a telehealth program with the first phase scheduled for first quarter 2021. Remote Nurse Monitoring and Education will be implemented in collaboration with Texas Woman’s University School of Nursing and Prism Care. The program will serve low-income women in Dallas/Fort Worth.

Statement of Need
The following trends plus the barriers to care imposed by the COVID-19 pandemic means there are now more high-risk pregnancies than ever before that need to be monitored and managed to help improve access to care, reduce cesarean sections, birth complications and possible birth defects.

Inequitable Care Access - Maternal morbidity and mortality rates in the United States have worsened over the past few decades due in part to: poor access to prenatal care, high rates of chronic disease, and health inequities that lead to skipping necessary health care due to cost barriers. Women in the U.S. have the highest rate of maternal mortality because of complications from pregnancy or childbirth, as well as the highest rates of caesarean sections. Poorer obstetrical outcomes are particularly pronounced among Black, Hispanic, American Indian/Alaska Native, and women in rural areas.

Increase in High-Risk Pregnancies - According to the U.S. Centers for Disease Control and Prevention (CDC), births among women ages 40-44 have been rising since the early 1980s. Older women are at greater risk of having complicating health issues such as diabetes, high blood pressure or heart disease when they become pregnant. They are also at higher risk for pre-eclampsia, a pregnancy condition causing high blood pressure and protein in the urine. These issues are resulting in an increase in cesarean deliveries and low birth weights, which are even higher among women of color.

1 KFF, Women’s Health Policy, February 26, 2020
**THE SOLUTION: Remote Nurse Monitoring and Education**

The American Pregnancy Association (APA) is expanding its team of experienced labor and delivery registered nurses to provide a range of at-home monitoring services for pregnant mothers, including conditions like diabetes and hypertension. Monitoring plus texts and phone consultations with the nurse team will enable pregnant moms to learn how best to control their pregnancy issues, prevent unwanted outcomes, and discuss their questions.

*Telehealth/Telemedicine can reshape healthcare, specifically maternal outcomes.* Urgent questions can be easily addressed. Diagnosis and treatment can be determined and administered in a timely fashion. Telehealth reduces the need for physical consultations, provides access to low-cost services to more individuals, reduces prohibitive barriers (i.e. transportation), provides clearer communication between healthcare professionals and patients and better sharing of medical data/records.

According to the Mayo Clinic, Telehealth is now more widely accepted and, in this age of COVID-19, a more preferred way to access pregnancy-related care and information\(^2\). Studies show that patients value at-home monitoring. Remote patient monitoring collects personal health and medical data from an individual in one location and electronically transmits the data to a physician in a different location for use in care and related support.

APA will work in collaboration with Texas Woman’s University College of Nursing and Prism Care Telehealth Platform to provide a complete solution for pregnant women with the resources and education they need to improve their pregnancy journey and outcome.

**Texas Woman’s University (TWU) College of Nursing** - APA will work closely with two professors in design and evaluation:

- Dr. Mari Tietze, Coordinator of the Graduate Certificate in Interprofessional Informatics; and
- Margarita Menendez-Bobseine, D.N.P. Assistant Clinical Professor, Women’s Health.

TWU’s graduate and undergraduate nursing students will assist with helplines, pregnancy and remote nurse monitoring, drafting website education articles, and crafting reports on stated study objectives. In return, these interns can receive practicum/credit hours.

**Prism Care Telehealth Platform** - Prism Care will provide at-home measurement devices. Their patented medical devices include a contraction monitoring device, fetal heartbeat device, mobile app and telemonitoring platform. The mobile app assists with medication management, tracking and trending weight, blood pressure, blood glucose, kicks, and contractions. The app includes a meal recommender for managing diet and lifestyle, which can help in reducing certain risks like hemorrhages and other conditions. Through Prism Care’s platform, APA nurses will be able to assess a client’s key vital signs, metrics and situation at any specific time; quickly select and provide the appropriate education or suggestions; and provide real-time interaction via text, phone or video conference.

Clients will be able to track key vital signs such as blood pressure, weight, fetal kicks, and contractions as well as fetal heart beat information. Clients will input other metrics such as blood glucose levels (in cases of gestational diabetes) into the software. The remote monitoring platform will have a daily care plan (health assessment questionnaire) for clients to answer, with prompt questions based on their pregnancy week, their health conditions, etc. The telemonitoring platform will track all metrics and flag abnormal readings as well as any unexpected answers to the questions that need attention and alert the monitoring nurse for an intervention. Clients may text, call, or request a video conference to ask questions or report issues. Nurses will provide ‘just-in-time’ education via text, phone or video conference to help clients with abnormal readings or other symptoms, questions, behaviors and conditions in order to maintain/improve pregnancy health. The nurse can also transmit status reports to the client’s healthcare provider.

\(^2\) https://www.mayoclinciproceedings.org/article/S0025-6196(18)30075-2/fulltext
Goals/ Benefits

Remote Nurse Monitoring provide real-time remote monitoring services with the medication team. Engaging and educating patients will help them adhere to their treatment/care plans, manage medications and provide early interventions, such as identifying Braxton-Hicks contractions. This will help reduce urgent care, emergency room visits, emergency doctor visits, and improve data quality/collection to provide proper care.

Benefits:

- Reduce premature/preterm births.
- Reduce the need for cesarean sections.
- Reduce pregnancy complications.
- Improve maternal health through weight management, medication management and management of issues such as hypertension, gestational diabetes.
- Teach breastfeeding and address related issues.
- Share real-time information with the medical team.

Anticipated results include better control of blood sugar levels; fewer visits needed to diabetes specialists; and improved management of blood pressure levels. Studies show the use of telemedicine for blood sugar monitoring is as effective as traditional care in achieving glucose control in pregnancy\(^3\).

Shared Results: Nursing students at graduate and undergraduate levels will create articles based on the most current protocols and research. They will review and update existing articles on the APA website. This will result in more credible website content. The protocols used in the study are potentially beneficial for improving patient outcomes, reducing cost of care, and also may be transferrable to other patient populations.

Funding/Sustainability

APA focuses fund development efforts in several areas for maximum impact and maintains strategic partnerships to leverage funding and support. Development efforts include Government Agency Contracts (fee-for-service, e.g. State of Louisiana Helpline); Other Federal Grant Sources; Private Foundation Grants; Corporate Sponsorships; Research Partnerships; and Social Enterprises. These growth objectives will serve to:

- Further establish visibility and dominance as the go-to resource for pregnancy care information and services, and
- Provide advocacy in the healthcare and government sectors on behalf of low-income and other high-risk or vulnerable patients.

The Association is creating a number of strategic partnerships with service providers, researchers, corporations, healthcare providers and institutions of higher education in order to achieve these goals. Further expansion of the patient database (and engagement of the patients) is also critical to achieving the growth objectives of the organization.

Funding Sources

Our goal is to establish multiple funding sources and lines of revenue:

- Government Grants, including National Institute of Health, Department of Health & Humans Services, State Departments of Health.
- Corporate Grants and Sponsors from companies desiring to serve the pregnancy market.
- Membership from pregnant families.