



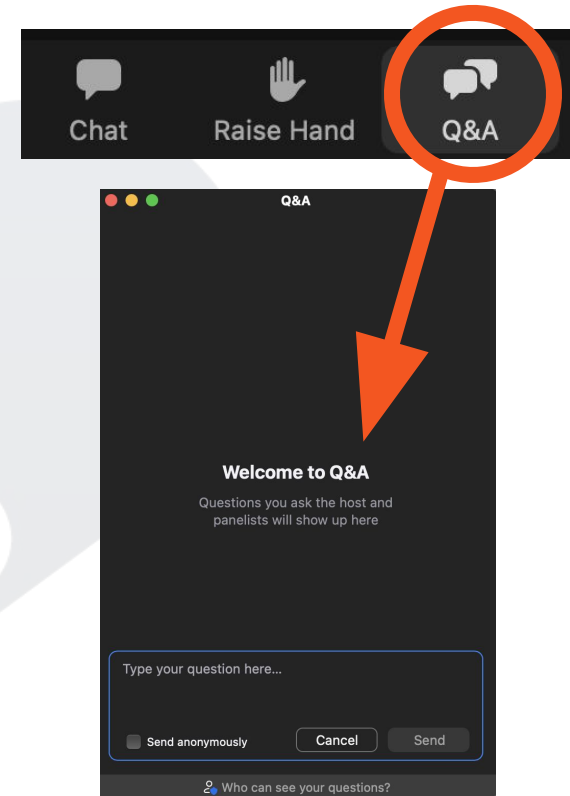
USING LEGAL SERVICES
AS PART OF A
COMMUNITY STRATEGY
TO IMPROVE
MATERNAL HEALTH IN HEALTH CENTERS

2023 LEARNING COLLABORATIVE

• SESSION 3: MARCH 15, 2023

Housekeeping

- Attendees are muted throughout the webinar.
- Type questions into **Chat**.
- To activate captions, select “Captions” and “Show Captions.”
- This webinar will be recorded and shared with participants
- Send your questions into the chat for help.





This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$625,000 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).



About this Learning Collaborative

- Using legal services as a community strategy to improve maternal health in health centers
- 4 sessions
 - 90 mn long
 - Didactic portion and guided discussion
- Overview and Discussion of an MLP model



Today's Agenda

1 Introductions

Objectives
Faculty

2 Presentations

Lessons for the
Day

3 Discussion

Guiding Questions

4 Closeout

Next Session



Learning Collaborative Objectives

1. **Understand MLPs** and their role in maternal health
2. **Understand how to detect and address unmet legal** needs that negatively impact maternal health outcomes
3. **Develop strategies to collaborate across health and legal settings** for integrating civil legal services, e.g, such as MLP activities, with your health center's maternal priorities.



Meet the Faculty



Courtney Mendoza, JD
Mental Health Advocacy
Services



Nola Booth, JD
Legal Assistance of Western New
York (LawNY)



**Amanda Elkanick
Oder**
Texas Advocacy Project



Bronwyn Blake, JD
Texas Advocacy Project



Vicki Girard, JD
Georgetown University Health
Justice Alliance



**Loral Patchen, PhD, MSN,
MA, CNM, IBCLC**
Medstar Washington Hospital
Center



Roxana Richardson, JD
Georgetown University
Health Justice Alliance



PREPARE FOR DISCUSSION QUESTIONS



Nola Booth, JD
Legal Assistance of Western New
York (LawNY)

1. For healthcare providers - what is your current practice for patients/clients affected by substance use disorders? Does your institution require a universal urine drug screen? Verbal screening? What happens when someone screens positive?
2. For legal partners - do you take family court cases? Neglect cases? How do you navigate your relationship with healthcare staff on these topics?
3. What, if anything, is your organization doing to address racial inequity in maternal health?
4. Many MLPs have documented their success in a pediatric context. How can your practice better identify, screen for, and support the needs of pregnant and postpartum individuals?

Icebreaker Activity

Get to Know your Cohort

What is ...

Your Name

Your Title

Your Organization Name &
Location

One major takeaway from
session 2

Nola Booth
Staff Attorney



Legal Assistance of Western New York Maternal-Perinatal MLP

Medical-Legal Partnership



FINGER LAKES LEGAL CARE



A PROJECT OF LAWNY®





LEGAL ASSISTANCE OF WESTERN NEW YORK, INC.®

Legal Assistance of Western New York, Inc. (LawNY[®]) is a non-profit law firm that provides free legal assistance to people in 14 counties in western New York across seven offices.

Finger Lakes Legal Care

A medical-legal partnership project of Legal Assistance of Western New York, Inc. (LawNY®). CMC joins LawNY's Ithaca office to provide referrals for legal services to patient-clients.

FINGER LAKES LEGAL CARE



A PROJECT OF LAWNY®

Extending an Existing MLP



ROCHESTER
REGIONAL HEALTH

- Pre-existing partnerships in Monroe County; pre-existing attorney with full-time MLP responsibilities
- Pre-existing relationship with Tompkins County and Ithaca Office

**Skadden
Foundation**

October 2012 – June 2021 (105 months)

Updated August 11, 2021

Total monthly income recovered for 76 patient/clients: \$55,563 (Social Security Disability (SSD), Supplement Security Income (SSI), Temporary Assistance, Supplemental Nutrition Assistance Program (SNAP), Other: Child Support Adjustment, Medicaid budgeting)

Total retroactive payments recovered for 34 patients: \$144,069 (Social Security Disability, Supplement Security Income, Temporary Assistance, Other: Debt Settlement)

Total discharge of debt: \$75,504 (student debt discharge based on disability; overcame insurance claim denial)



Legal Outcomes (833 patients served, some with multiple legal issues):

Housing stabilized:	111
Guardianship/Will/POA/SNT (also known as Personal & Family starting with July 2015 reporting):	128
Obtained/Maintained Health Insurance or Government Benefit:	522
Employment & Education	29
Legal Status	16
Otherwise Advised:	46
No Case Made (Contact with patient/client, but no response):	40

Identifying the Population

Community Health Assessment 2019-2024

Community Health Improvement Plan 2019-2021

Tompkins County Health Department

Cayuga Medical Center

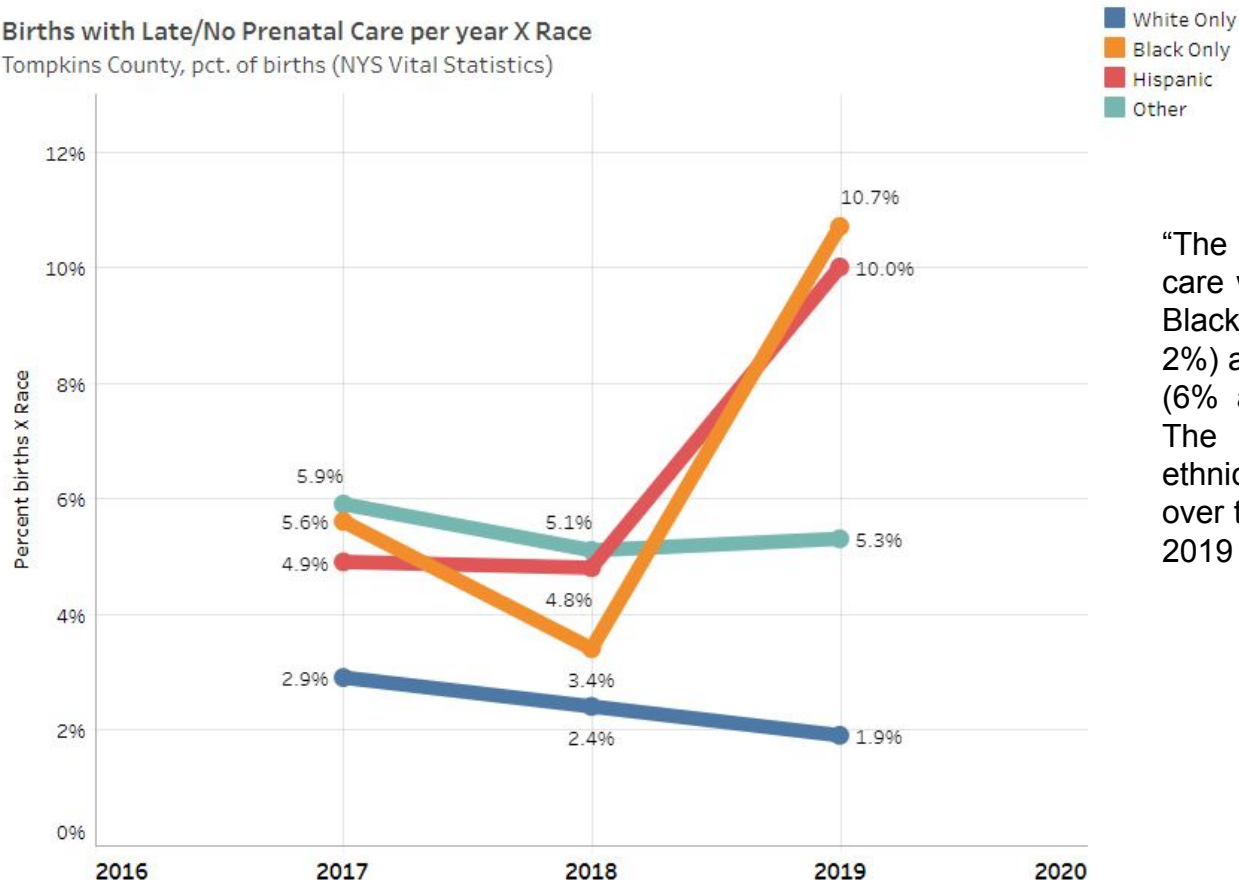
Ithaca, New York

December 27, 2019

Among all households in Tompkins County, 53% are family households, 9% of which are below the poverty level. This is less than half the poverty rate across all households. Narrowing the population to families with a female householder, no husband present, and related children under age 5, the rate jumps to 51%. In Ithaca city, 19% of family households are below the poverty level, while 80% of families with female holder, no husband, and related kids under age 5 are below poverty. [ACS S1702] *(Figure 9)*

Births with Late/No Prenatal Care per year X Race

Tompkins County, pct. of births (NYS Vital Statistics)



“The rate of births with late or no prenatal care was more than five times higher for Blacks in 2019 that for whites (11% and 2%) a striking increase from rates in 2017 (6% and 3%) and 2018 (3% and 2%). The rate for mothers who identify as ethnically Hispanic show a similar jump over the 3-year period of 2017, 2018, and 2019 (5%, 5%, and 10%).”

“Tompkins County Community Health Assessment &
Community Health Improvement Plan, 2022–2024,”
Tompkins County 2023,

<https://tompkinscountyny.gov/health/chachip2224phwic>

How to Start Collaborating

Community, community, community!



THE REACH PROJECT, INC.

We meet you where you are.



Family & Children's
SERVICE OF ITHACA



Cornell University Public Health
Sustainability. Equity. Engagement. The Future of Public Health.

Question 1:

What community organizations are you already collaborating with? Are these organizations a connection to the world of pregnant and parenting folks?

Supporting the legal needs of clients in the perinatal context

- Health-Harming Legal Needs!
 - The subset of a person's social needs that have potential legal solutions.
- Legal Aid Essentials
 - Eviction, Public Benefits, DV, Consumer, Reentry, SSI, etc.
- Pregnant and parenting-specific needs
 - Lactation support
 - Paid Family Leave/Family Medical Leave/Disability
 - Health Insurance
 - CPS/DCFS
 - Special education

Question 2:

What are the biggest health-harming legal needs you are seeing/anticipate seeing in your patient/client populations?

Pitfalls - “Oops” moments

- Time to **prepare** -
 - Be wary in the fellowship context; this goes fast and there may not be time to consult relevant stakeholders.
- Navigating **conflicts**
 - Working with hospitals and doctors can be difficult when everyone is a mandated reporter, and there are limits on who you may be able to represent. Client's interests may not be hospital's.
 - Moving from “zone” to “zone” - understanding when mandated reporter responsibilities do not apply
 - But also, Professional Responsibility & attorney ethics

Pitfalls - “Oops” moments

- Getting **referrals**
 - Signing an MOU with a small hospital may not be enough to get referrals—it’s really about finding the medical providers who want to explore something new, and getting their interest.
- Prepare to be a **generalist!**

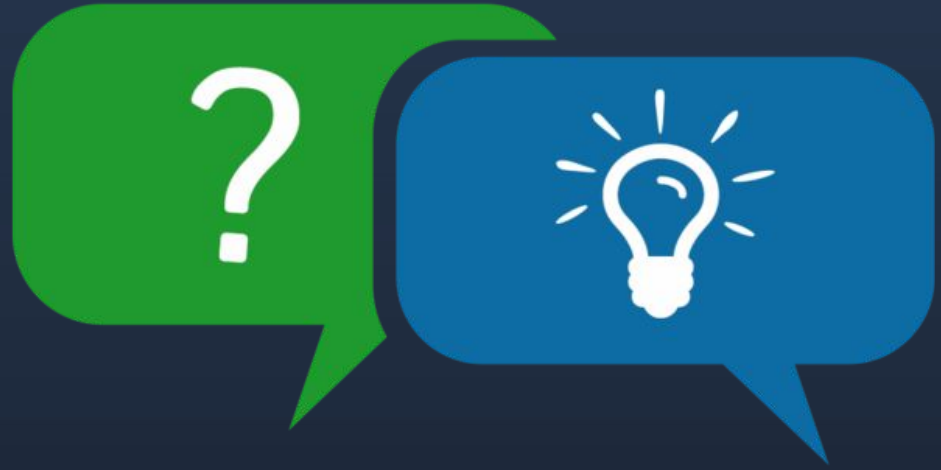
Question 3:

Got any “oops” you feel like sharing?

Impact of MLP Services on Maternal Health

- A lot we don't know yet
 - Research with medical student partners at University of Buffalo has revealed major gaps in the literature from a medical perspective
- We do know there are documented successes in the pediatric literature
 - And we do know from the Rochester data that there are successes in terms of clients served and dollars recovered for both patients and providers
- This is an excellent way for our legal aid organization to develop a better connection with the community.

Guided Discussion





DISCUSSION QUESTIONS

1. For healthcare providers - what is your current practice for patients/clients affected by substance use disorders? Does your institution require a universal urine drug screen? Verbal screening? What happens when someone screens positive?
2. For legal partners - do you take family court cases? Neglect cases? How do you navigate your relationship with healthcare staff on these topics?
3. What, if anything, is your organization doing to address racial inequity in maternal health?
4. Many MLPs have documented their success in a pediatric context. How can your practice better identify, screen for, and support the needs of pregnant and postpartum individuals?

Survey QR Code and Link



<https://www.surveymonkey.com/r/9NSXSKG>



Next Session

March 22, 2023, 1-2:30 PM ET
led by **Georgetown University's Health Justice
Alliance**

Contact the NCMLP Team at ncmlp@gwu.edu for assistance.