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Illinois Perinatal Quality Collaborative

10th Annual Conference

Thursday October 27th, 2022





**PLEASE WEAR YOUR MASK for
the DURATION of the EVENT
EXCEPT WHEN ACTIVELY
EATING & DRINKING.**

Happy 10th Annual Conference!

Funders, Sponsors and Supporters
Stakeholders
OB & Neonatal Advisory Workgroups
Leadership Committee
SQC, Perinatal Network Administrators & Educators
Initiative Clinical Leads and Content Experts
Grand Rounds Speakers Bureau
Community Advisory Board
Patients & Family Advisors & Focus Groups
Volunteers
Hospital Teams

Thank you to all who continue to contribute to building a
successful state perinatal quality collaborative for IL!

Disclosures & Joint Accreditation and Credit Designation Statements

Speakers:

Joseph Hageman, MD has disclosed a financial relationship with one or more ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients:

- Owlet, Inc. – Advisory Committee Member - relationship has not ended

Zsakeba Henderson, MD has disclosed a financial relationship with one or more ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients:

- Ferring Pharmaceutical – Research Grant Reviewer - relationship has ended

Drs. Hageman and Henderson's financial relationships have been mitigated and have no impact on the content being presented.

All remaining speakers have no relevant financial relationship(s) with ineligible companies.

Planning Team Members:

Alana Rivera, MSN, RNC-OB, C-EFM, CLC, Deborah Miller, MPH, Keri Benbrook, RN, Andrea Cross, MHS, Sogi Skariah, RN, Donna Lemmenes, APN, Cecilia Lopez, MSN, Daniell Ashford, DNP, Myra Sabini, BSN, Mary Hope, RN, BSN, Joanne Sorce, MSN, Shawn O'Connor, MD, Sherry Jones, MD, Patricia (Patti) Lee King, PhD, Dan Weiss, Ellie Suse, Leslie Caldarelli, MD, Justin Josephsen, MD, and Ann Borders, MD, MSc, MPH have no relevant financial relationship(s) with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients to disclose.

In support of improving patient care, this activity has been planned and implemented by the Illinois Perinatal Quality Collaborative (ILPQC) and SSM Health is sponsoring education credits. SSM Health is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

As a Jointly Accredited Organization, SSM Health is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. Regulatory boards are the final authority on courses accepted for continuing education credit.

*SSM Health Designates this live activity a maximum of 7.25 ANCC Contact Hours, social workers completing this course receive 7.25 continuing education credits and 7.25 **AMA PRA Category 1 Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.*



Obtain your Continuing Education Hours:

NOTE Credits must
be claimed by
November 28, 2022



7.25 education credits available for
nurses, physicians, providers,
and social workers.

Education credits sponsored by:



- Must stay to the end of the event.
- QR codes to be distributed during wrap-up session at 4:15pm.
- Must complete evaluation online to receive your credits.

ILPQC 10th Annual Conference Agenda



8:00-9:00am	<i>Decade of Success: Making a Difference for Illinois Mothers and Newborns</i> Ann Borders, MD, MSc, MPH Leslie Caldarelli, MD Justin Josephsen, MD	11:45-12:00pm	<i>ILPQC Award Ceremony</i>
9:00-9:45am	<i>No Quality without Equity: A Growing Movement to Address Maternal Disparities</i> Zsakeba Henderson, MD, FACOG	12:00-1:15pm	<i>Networking Lunch and Poster Session</i>
9:45-10:00am	<i>Break</i>	1:15-1:45pm	<i>Lessons Learned from Michigan's Obstetric Initiative (OBI): Promoting Vaginal Birth and Birth Equity</i> Lisa Kane Low PhD, CNM, FACNM, FAAN
10:00-10:15am	<i>Planting the Seeds for the Next Neonatal Initiative as our BASIC Efforts Now Bloom</i> Leslie Caldarelli, MD Justin Josephsen, MD	1:45-2:30pm	<i>A Community Approach to Addressing Inequities in Infant Mortality</i> Meredith Shockley-Smith, PhD James M. Greenberg, MD
10:15-10:45am	<i>Accelerating Upstream Together to Eliminate Racial Disparities in Infant Health Outcomes by 2030</i> Michael D. Warren, MD, MPH, FAAP	2:30-2:45pm	<i>Break</i>
10:45 -11:45am	<i>State Quality Collaborative Leaders Panel: National Perspectives on Improving Perinatal Care</i> Lisa Kane Low, PhD, CNM, FACNM, FAAN (Michigan's Obstetric Initiative) Shannon Pursell, MPH (Virginia Neonatal Perinatal Collaborative) Susan Ford, MSN, CPNC-PC (Ohio Perinatal Quality Collaborative)	2:45-4:15pm	<i>We're in the Same Room Again! Harnessing QI Energy through our Togetherness</i> A. OB Teams Breakout Session B. Neonatal Teams Breakout Session C. Patient, Family, Community Engagement Breakout Session
		4:15-4:30pm	<i>Wrap-up & Evaluation</i> Ann Borders, MD, MSc, MPH Leslie Caldarelli, MD Justin Josephsen, MD

ILPQC Poster Session: 12 - 1:15pm

Participate Today!

Celebrate

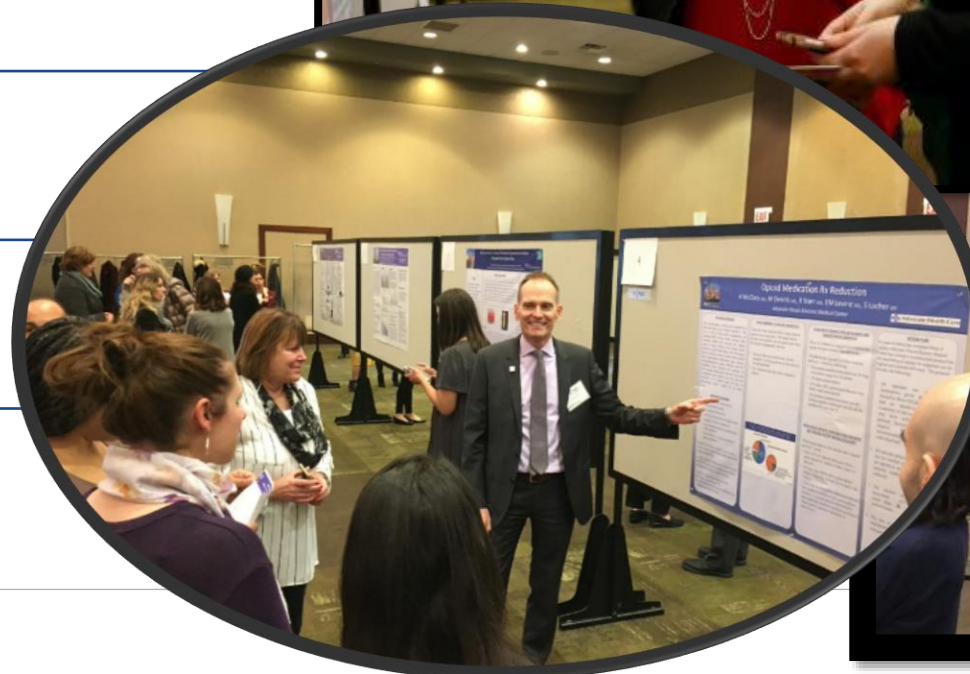
Connect

Learn

Share

Lead

Change



**Make Sure
To
Come & Visit**

2022 ILPQC Resource Tables

Visit March of Dimes &
I-Promote IL Tables

Open during Lunch/Poster Session

Located in the Back of Room

Explore ILPQC
initiative tools and
resources available
to all hospital teams

BE: Laboring with
Hope trailer

PVB: Labor Support
e-modules

BASIC: Family
education video

MNO: NEW Provider
education video and
Opioid Hotline
materials

COVID: NEW Patient
education video and
patient and provider
education flyers

2022 Attendee Resource Folder

- Respectful Care flyer
- Respectful Care sign off
- PREM Survey
- Find Help One Pager
- Early Postpartum Visit Checklist & Provider Billing Notice
- PVB ACOG/SMFM Checklist
- PVB Posters
- Labor Support E-module Flyer
- BASIC Family Education Flyer

Great ILPQC
Resources for
your team

- ILPQC General Factsheet
- Birth Equity Factsheet
- PVB Factsheet
- BASIC Factsheet
- Infant Mortality Factsheet
- MNO-OB Factsheet
- MNO-Neonatal Factsheet
- 30-60-90 Day Plan & PDSA



Located in ILPQC Swag Bag

Annual Conference Raffle

- Every attendee received one raffle ticket during registration today.
- Raffle will be held at the end of the day during wrap-up session today at 4:15pm.
- 6 raffle baskets/chances to win.
- Must be present to win.



- **Extra Raffle Ticket Fun**
- **Self-record and show your completed card to the registration table for another raffle ticket**



Located near back of AC Booklet

But wait there's more...
Opportunity to Get up and BinGO

ILPQC Central Team



**Ann Borders, MD, MSc,
MPH:** Executive Director,
OB Lead



Leslie Caldarelli, MD :
Neonatal Co-Lead



Justin Josephsen, MD:
Neonatal Co-Lead



**Patricia Lee King, PhD,
MSW:** State Project
Director, Quality Lead



Daniel Weiss, MPH
Director of Data & Operations



**Alana Rivera, MSN,
RNC-OB, C-EFM, CLC:**
Nurse Quality Manager



Ellie Suse, MPH, MSN, RN:
Project Coordinator



Ieshia Johnson, MPH:
Project Coordinator



Su Lee, PhD:
Postdoctoral Scholar



**Kalyan Juvvadi &
Emma Hegemiller, MS:**
ILPQC Data System Team

Welcome Address

Tamela Milan-Alexander

Community Engagement Director, EverThrive IL
ILPQC Patient Advisor



Decade of Success: Making a Difference for Illinois Mothers and Newborns

Ann Borders, MD, MSc, MPH

Leslie Caldarelli, MD

Justin Josephsen, MD



Overview

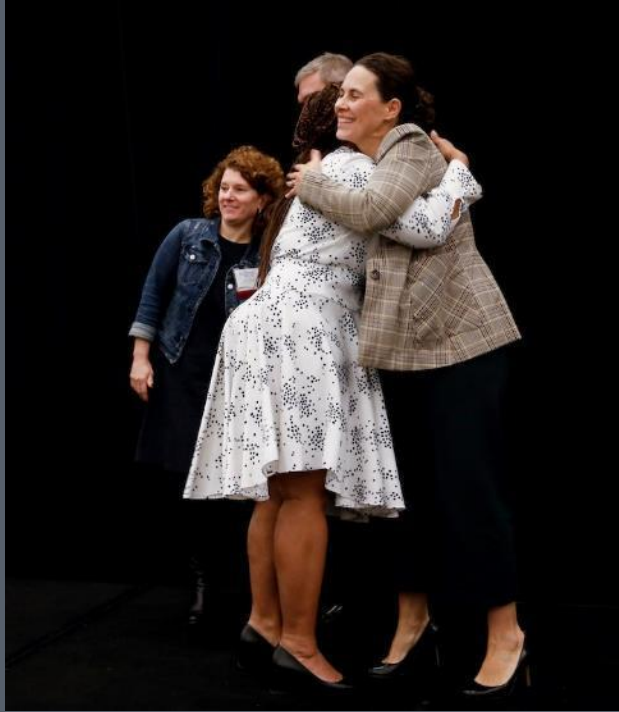
Celebrating 10 Years
of ILPQC

Review of ILPQC
2022 Goals

Celebrating Initiative
Work and Progress

ILPQC Goals for 2023





Celebrating 10 years of ILPQC

- Working together
- Engaging patients and communities
- Making change happen

ILPQC's Story Begins...

Recommendation from the **IDPH Perinatal Advisory Committee** to form PQC to work with the **Illinois Regionalized Perinatal System**

Launched ILPQC Leadership Team and Advisory Groups. Early support from **Perinatal Network Administrators and IHA**.

Initial **CDC** funding with 5 other PQCs

Winter 2012

November 2013

November 2014

November 2012

Spring 2013

September 2014

Perinatal Quality Collaborative Illinois (PQCI) joined OB leadership to form ILPQC supported by **HFS** and **MOD**

Hosted 1st Annual Conference

Hosted 1st patient and family engagement breakout at 2nd Annual Conference

ILPQC's Inaugural Committee Members

Never doubt that a small group of thoughtful, committed citizens can change the world....

ILPQC Leadership Committee 2012/2013

- Marie Cleary-Fishman
- Susan Knight
- Blanca Leon
- Janine Hill
- Akihiko Noguchi
- Madiha Qureshi
- Deborah Rosenberg
- Gwen Smith

Perinatal Network Administrators 2012/2013

- Lenny Gibeault (Stroger)
- Robin Gude (Southern Illinois)
- Cathy Gray, Bernadette Taylor (U Chicago)
- Cindy Mitchell (St. Johns)
- Trish O'Malley (Loyola)
- Pat Prentice (Rush)
- Barb Prochnicki (Rockford Memorial)
- Elanie Schafer (St. Francis)
- Pam Wolfe (Northwestern)
- Maripat Zeschke (U of Illinois Chicago)
- Charlene Wells



Indeed, it is the only thing that ever has....*Margaret Mead*

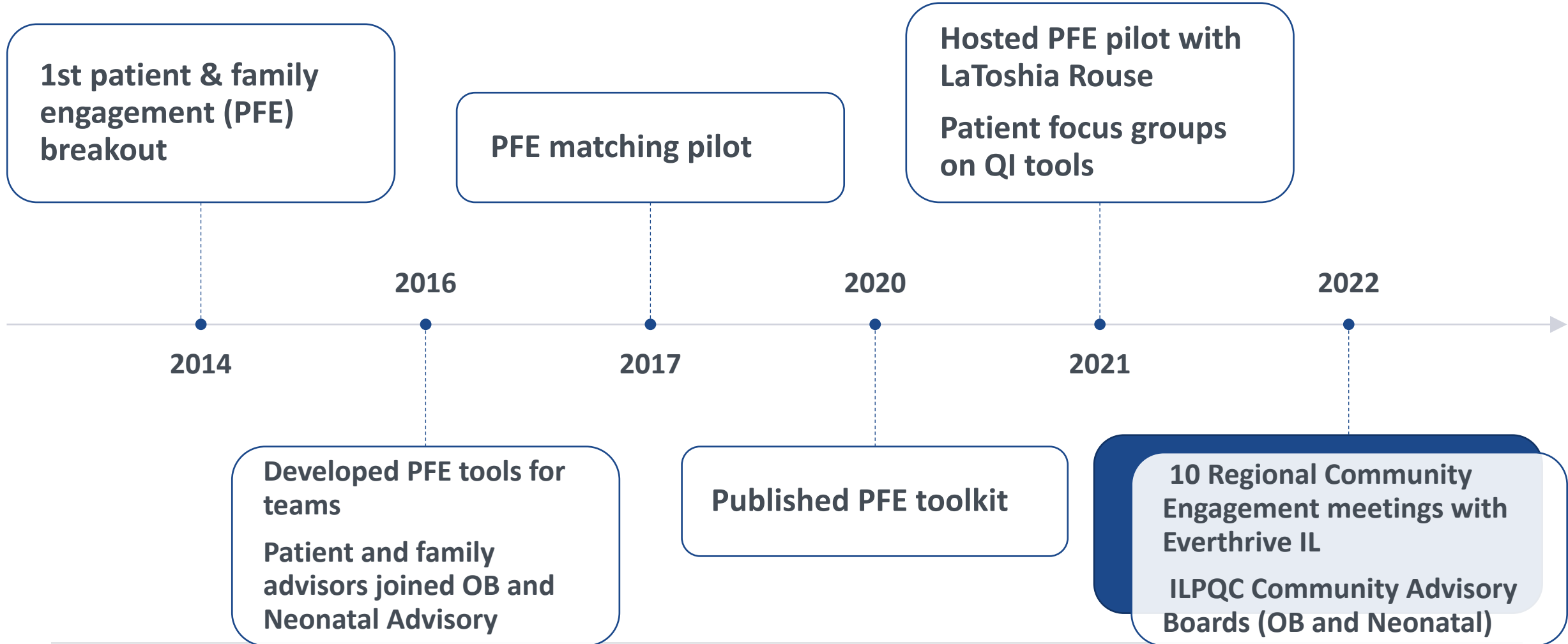
ILPQC is a network of hospital teams,
perinatal clinicians, patients, community
stakeholders, public health leaders
and**YOU!**

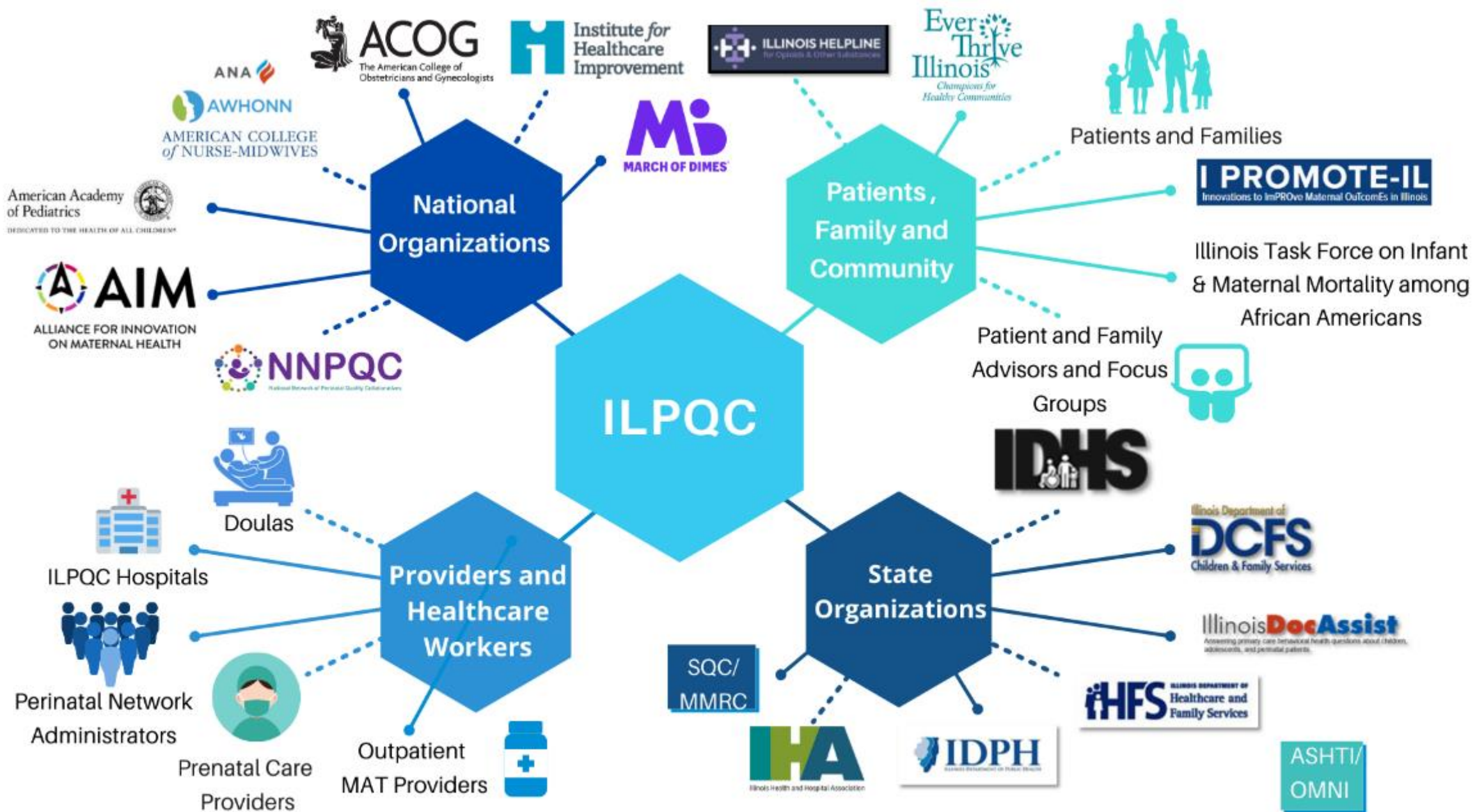


- ILPQC Obstetric and Neonatal Advisory Workgroups
- ILPQC Leadership Team
- ILPQC Planning Committee & Meeting Volunteers
- Illinois Regionalized Perinatal System Perinatal Network Administrators and Educators
- ILPQC Speakers, Experts, and Clinical Leads
- ILPQC Community Advisory Board & additional Patient/Family Advisors
- ILPQC OB and Neonatal Hospital Teams

Together, WE ARE ILPQC!

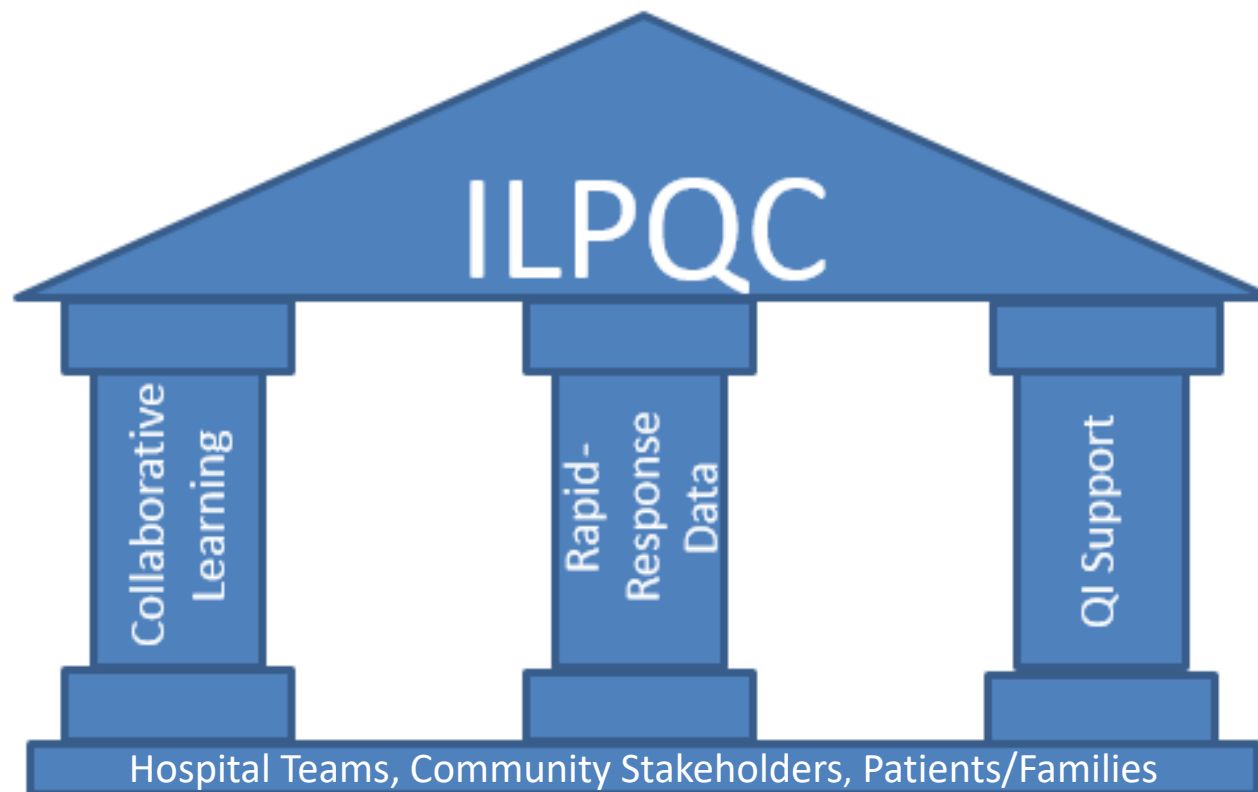
Growing connections with patients, families and communities



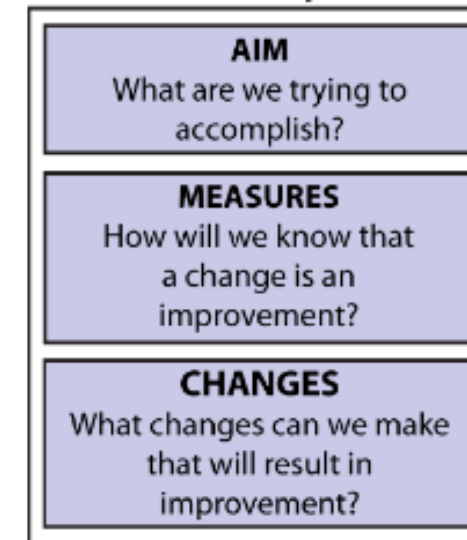


Together, WE ARE ILPQC!

ILPQC helps make change happen



The Model for Improvement



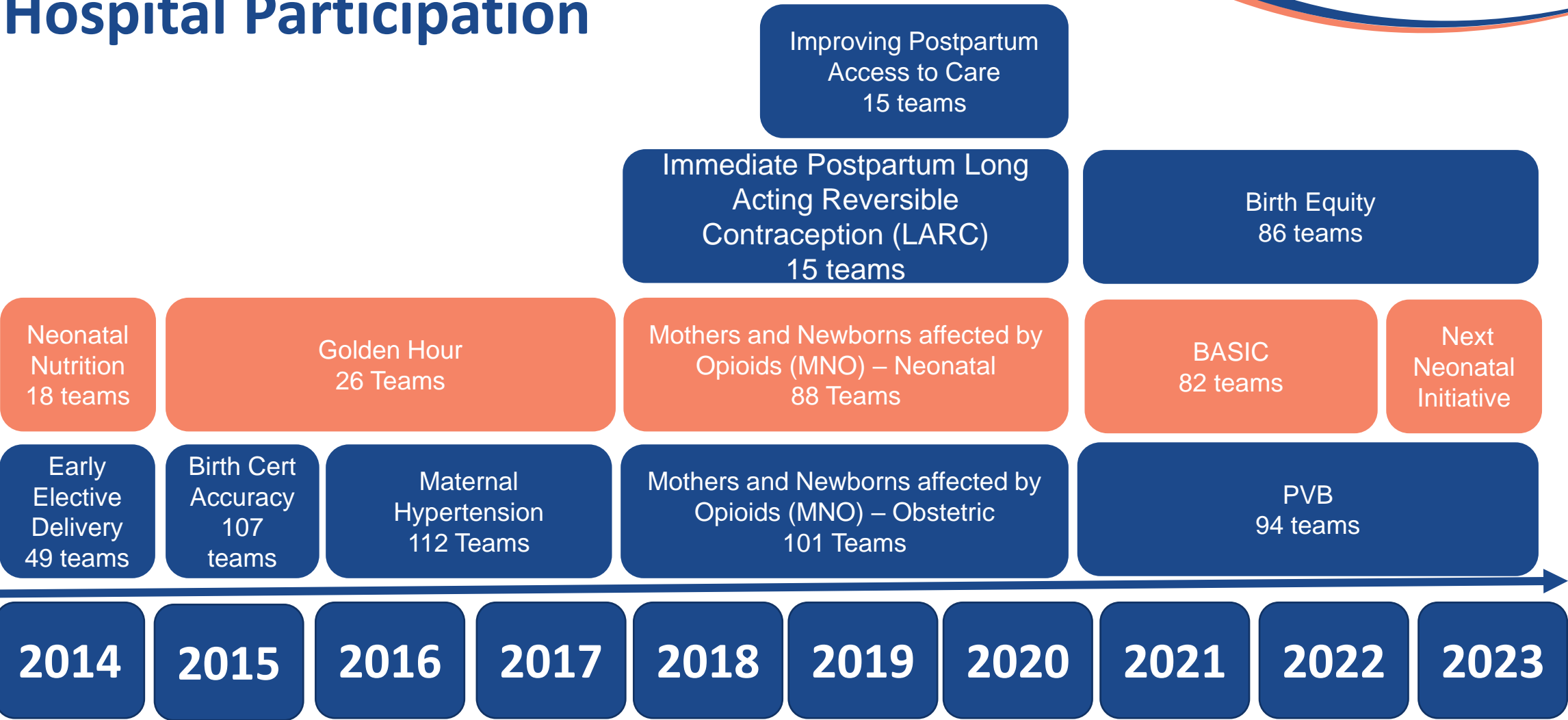
SMART

Structure,
Process,
Outcome,
Balancing

QI Resources

© 2012 Associates in Process Improvement

Timeline of Initiatives & Hospital Participation



Together Making Change Happen across 10 years!

- **2015 – OB Birth Certificate Accuracy Initiative** increasing overall birth certificate accuracy to **95%** on key quality metrics with 107 participating hospitals.
 - **2015 – Neonatal Golden Hour Initiative** increasing the use of best practices in delivery room communications and clinical care, family engagement, and NICU admission transitions with 23 participating hospitals.
 - **2016-2017 – Severe Maternal Hypertension Initiative** increasing the percent of patients with timely treatment for severe maternal HTN from **41% to 85%** and **decreasing risk of associated severe maternal morbidity from 15% to 9%** with 112 participating hospitals.
-

Together Improving Care and Outcomes for 10 years!

- **2018 –OB Immediate Postpartum Long-Acting Reversible Contraception (IPLARC) Initiative** increased access to IPLARC in **100%** of teams by supporting implementation of best practice protocols with 31 participating hospitals.
 - **2019 –OB Improving Postpartum Access to Care (IPAC) Initiative** increased the percent of patients scheduled for **an early postpartum visit** before delivery discharge from **2% to 80%** across 15 participating hospitals.
 - **2018-2021 - Mothers and Newborns affected by Opioids (MNO) OB and Neonatal Initiatives, 1st joint initiative** - increasing the percent of pregnant persons with OUD **connected to MAT from 41% to 85%** and **coordinated discharge for OENs from 25% to 70%** with 101 OB and 88 Neonatal participating hospitals. **Reduced disparities in linkage to Recovery Treatment and coordinated discharge.**
-



ILPQC

**Statewide network of perinatal clinicians,
nurses, hospitals, patients, community
stakeholders and public health leaders**

**Working together to implement data-driven,
evidence-based practices to equitably improve
outcomes and reduce disparities for mothers
and babies across Illinois.**



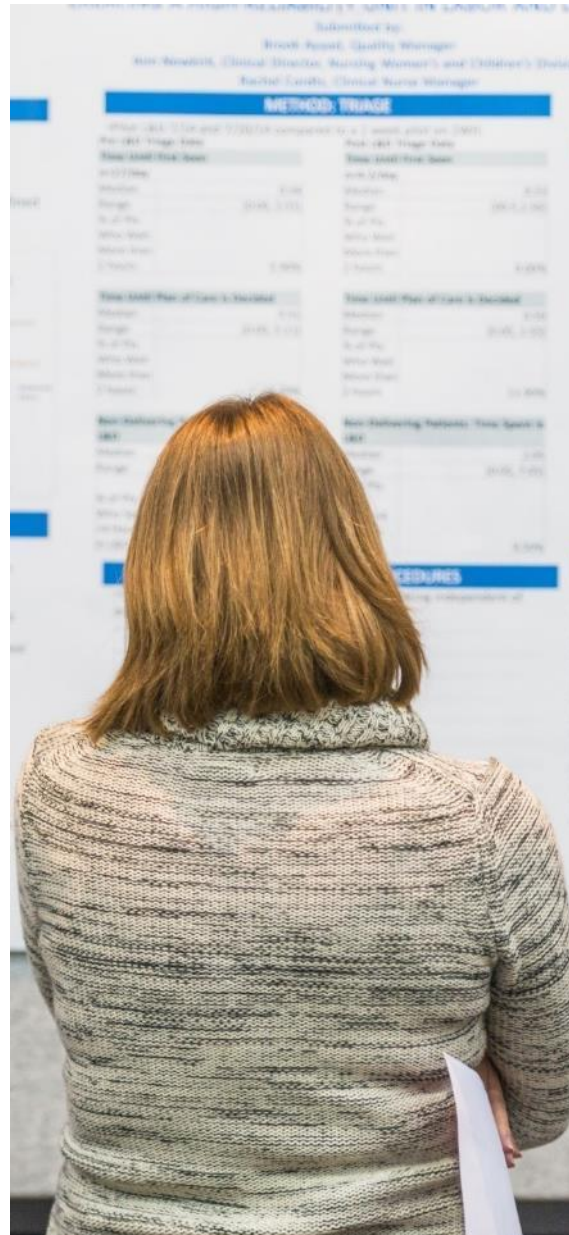


1st Annual Conference: 2013

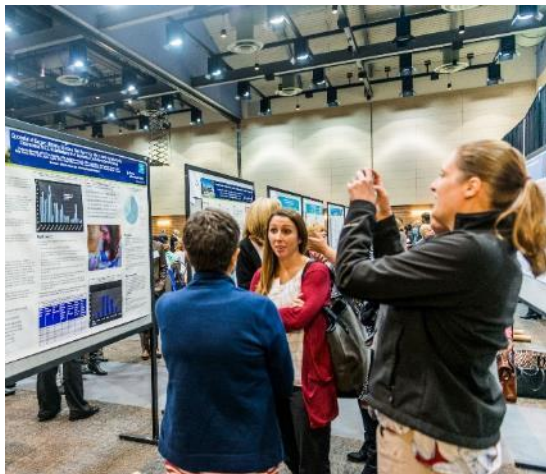


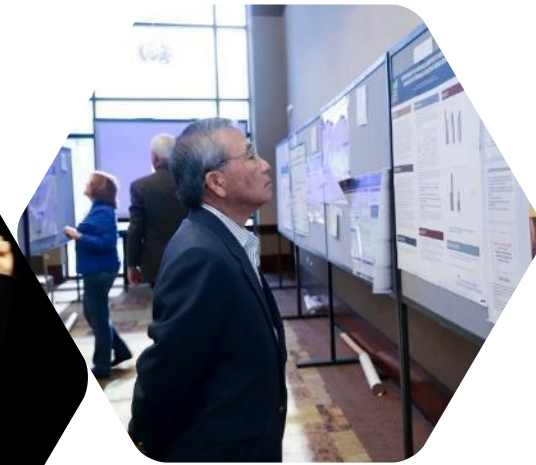
2014 Conference





2015 Conference



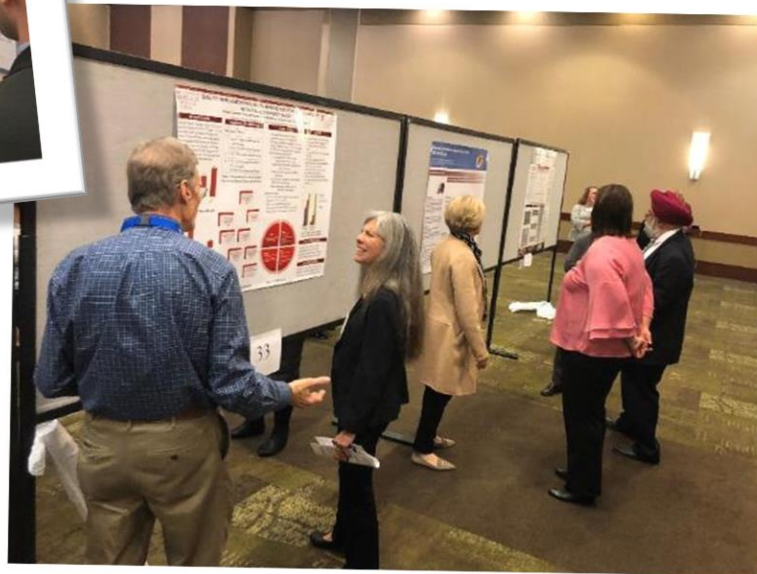
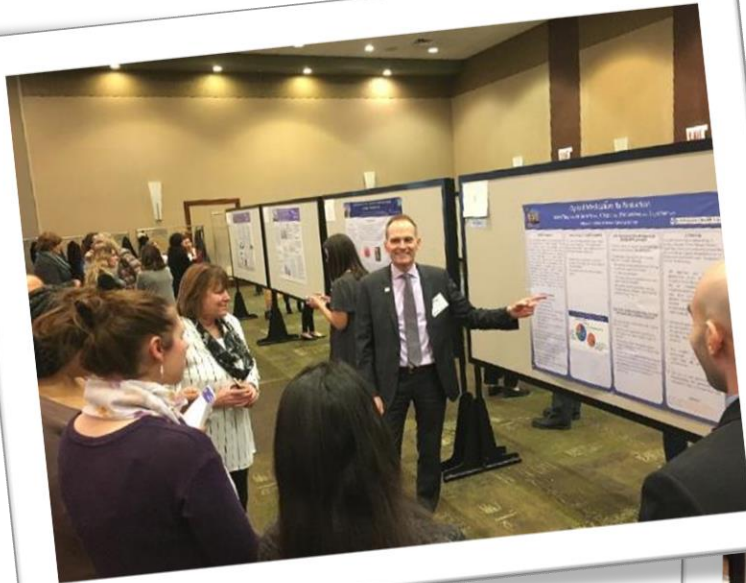


2016 Conference

2017 Conference



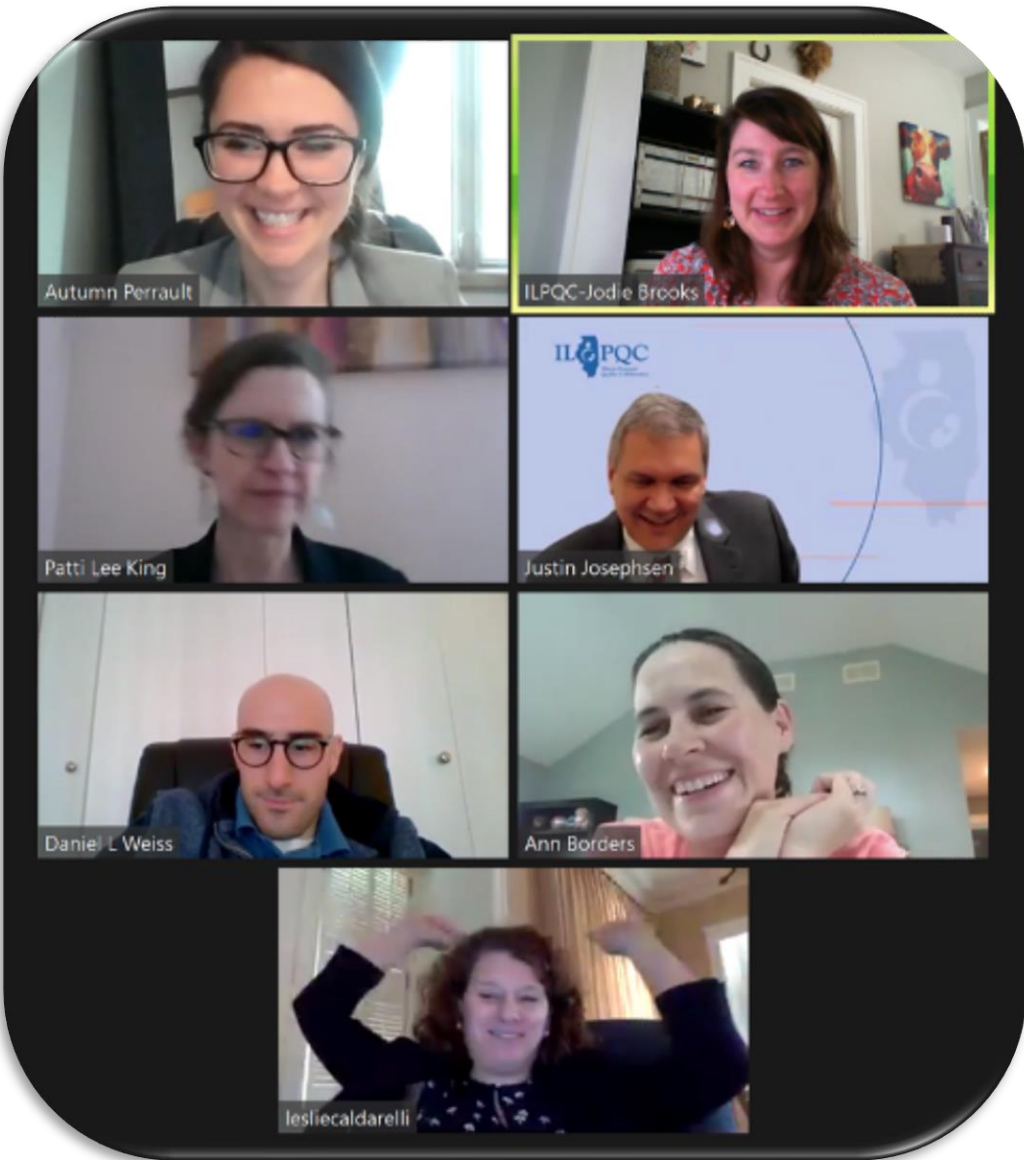
2018 Conference





2019 Conference





2020 & 2021 Virtual Conferences

ILPQC 2022 Journey



Make progress to achieve initiative aims (BE, PVB, BASIC) with the focus on equity



Expanding resources for clinical teams



Building connections between hospital teams, patients, and communities

Promoting Vaginal Birth (PVB) Initiative

Supporting teams to achieve PVB success



PVB Clinical Leads – THANK YOU

- Rob Abrams, MD, IL South Central Perinatal Center
- Roma Allen, DNP, MSN ed., RNC-OB, Loyola University Perinatal Center
- Rita Brennan, DNP, RNC-NIC, APRN, CNS, CPHQ, Northwestern Medicine Central DuPage Hospital
- Lakieta Edwards, DNP, CNM, WHNP-BC, Advocate South Suburban Hospital
- Abbe Kordik, MD, The University of Chicago
- Tina Stupek, MSN, RNC-OB, C-EFM, Northwest Illinois Perinatal Center
- Emily White-VanGompel, MD, MPH, NorthShoreUniversity Health System

PVB Aims and Measures

AIM

≥70% of hospitals will be at or below
the Healthy People goal of 23.6%
NTSV C-Section Rate

Measure

≥80% of NTSV
C-sections meet
ACOG/SMFM criteria
for cesarean

Measure

≥80% of physicians,
midwives, and nurses
educated

PVB Key Strategies

Cesarean Decision
Huddles and Checklist



Clinical Team Education
and Buy-in



Sharing Unblinded Provider-
level NTSV C-Section Rates



Educating patients and
shared decision making



Fallout Reviews of cases not
meeting ACOG/SMFM Criteria

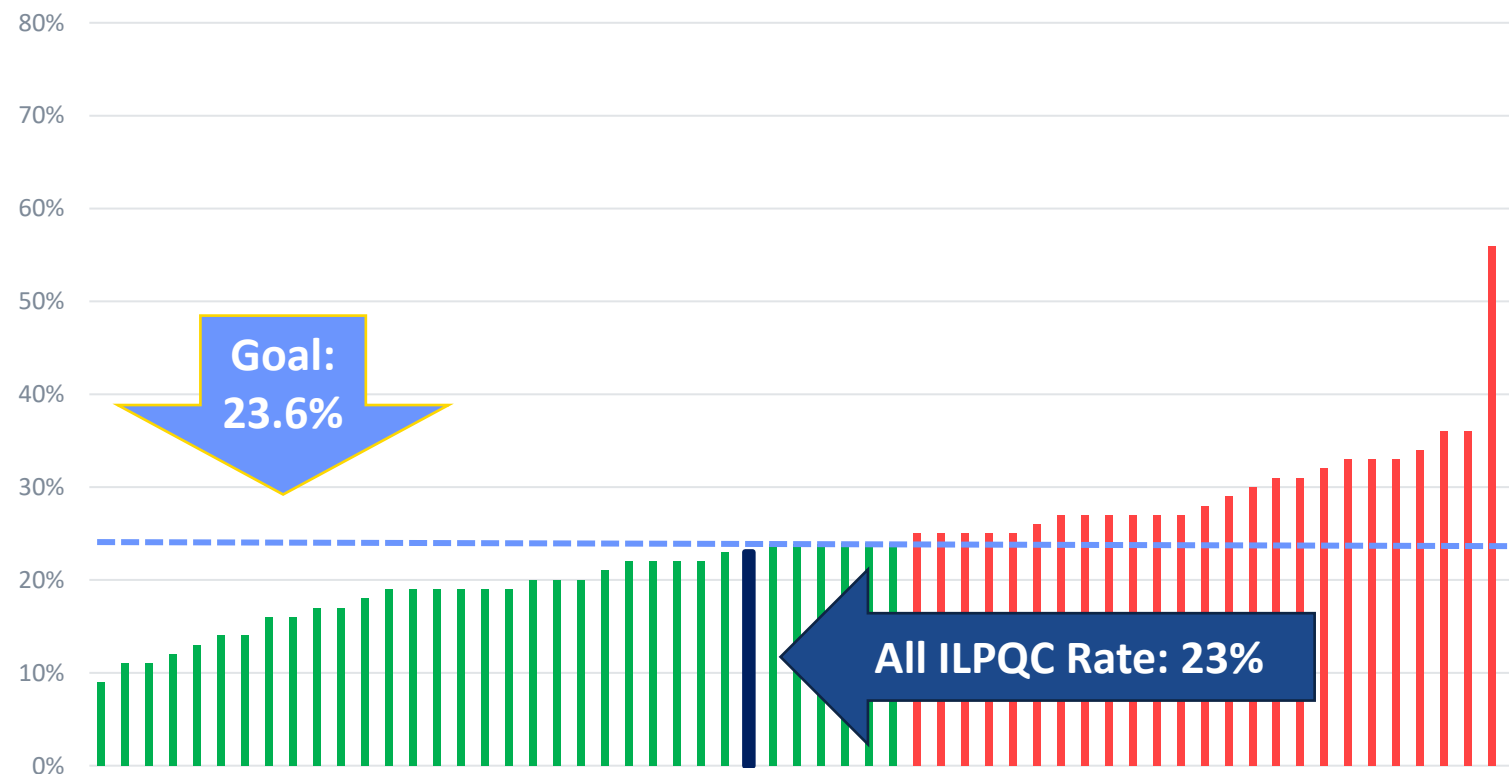


Labor Management
Support



NTSV C-Section Rates for all ILPQC Hospitals

NTSV C-Section Rates by Hospital
June-August 2022



55%

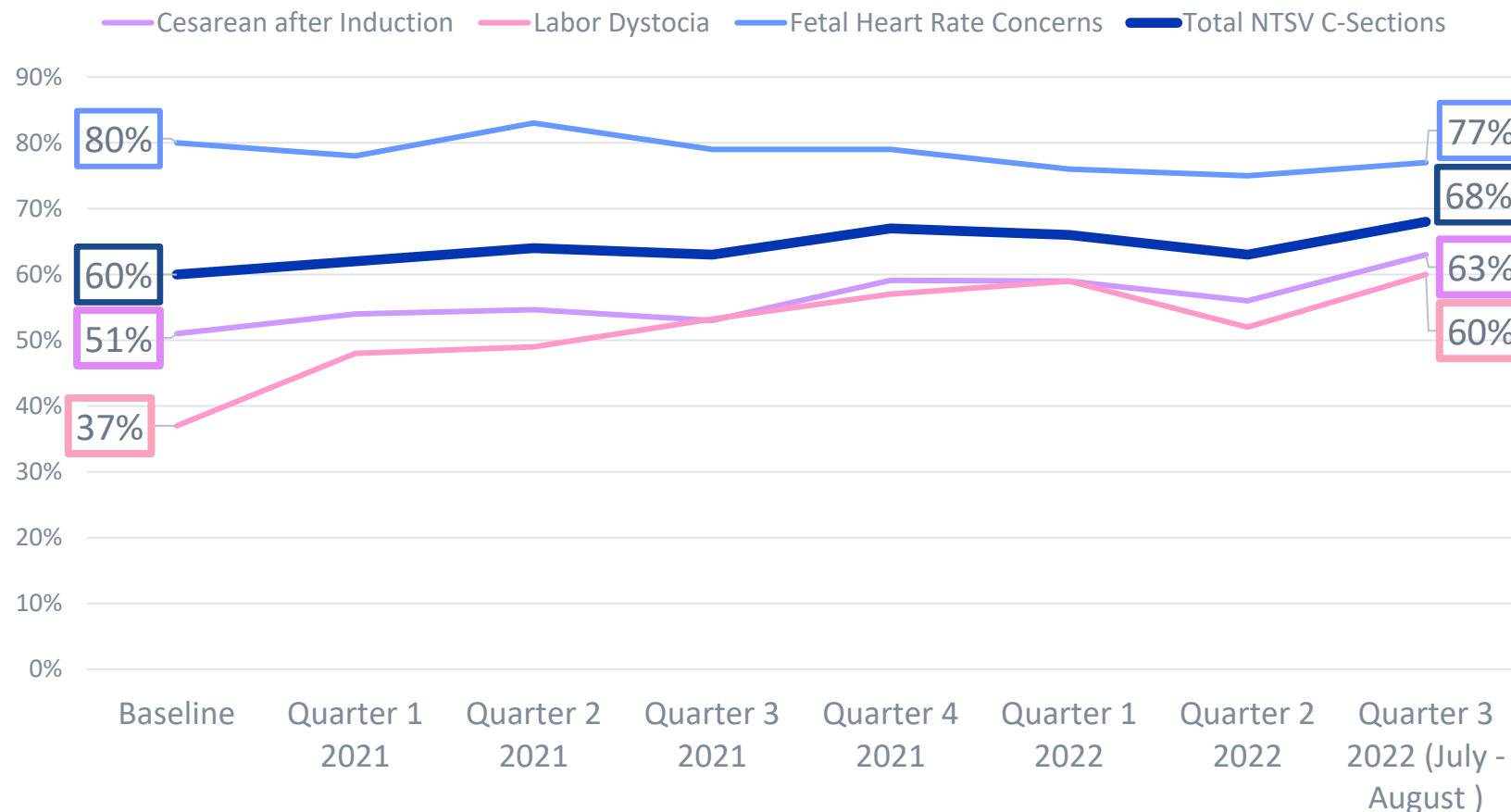
of hospitals are
achieving the
Healthy People 2030
of NTSV C-Section
Rate of $\leq 23.6\%$

Increase from 35%
at baseline!

NTSV C-Sections Meeting ACOG/SMFM Criteria

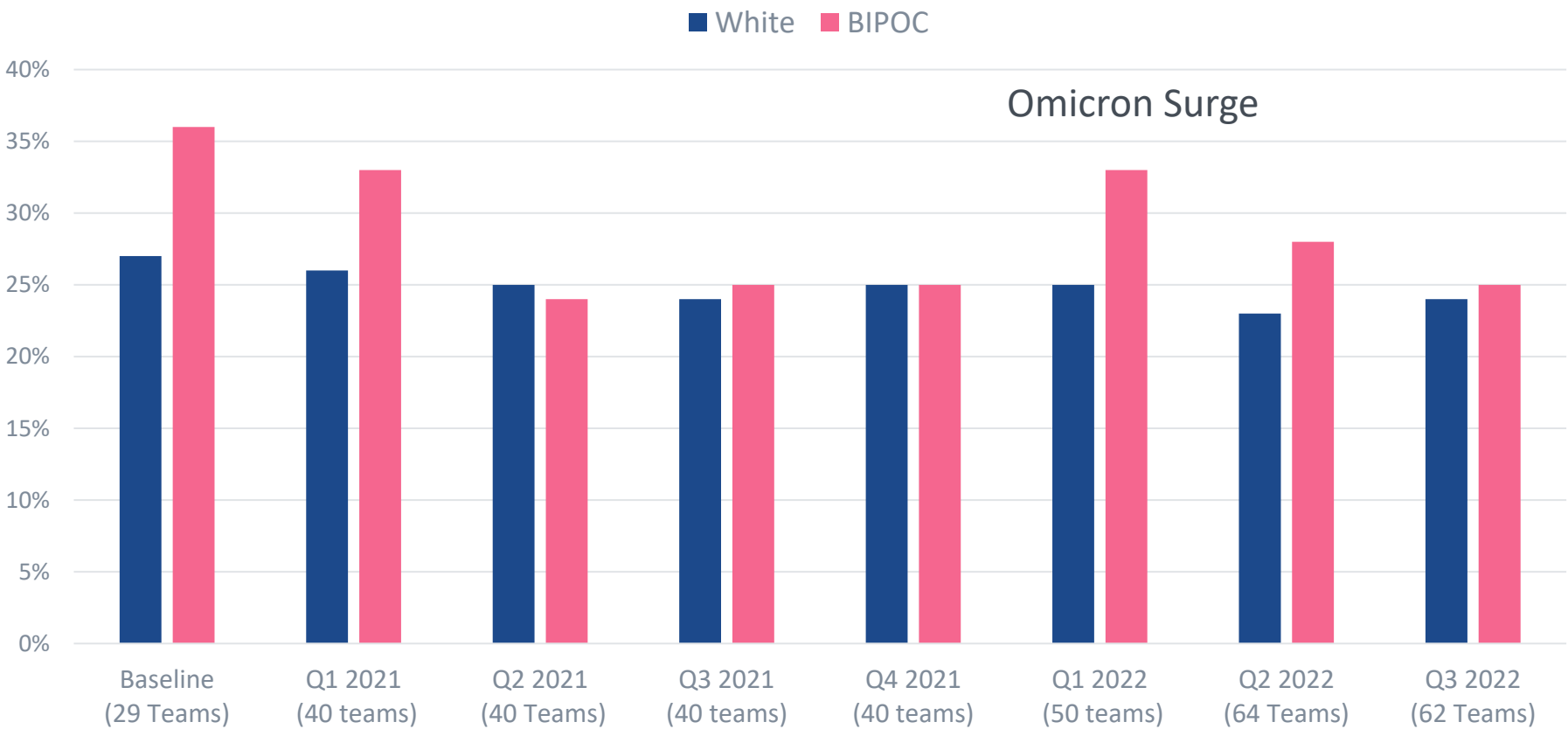
68%
of NTSV C-
Sections overall
are Meeting
ACOG/SMFM
Criteria

NTSV C-Sections Meeting ACOG/SMFM Criteria by Category



Identifying Disparities in PVB

NTSV C-Section Rate by Race and Ethnicity



ILPQC hospital Teams can now view their NTSV C-Section Rates by Race and Ethnicity and insurance status in RedCap.

Making progress this year to reduce NTSV C/S disparity gap, but will need to be sustained!

Birth Equity (BE) Initiative

Helping teams continue to move the important work forward together



BE Clinical Leads – THANK YOU

- Barrett Robinson, MD, MPH, NorthShore University HealthSystem- Evanston Hospital
- Daniell Ashford, DNP, MBA, NE-BC, RNC-OB, CEFM, FNP-BC, LNC, Northwestern Perinatal Center
- Emily White VanGompel, MD, MPH, NorthShore University HealthSystem- Evanston Hospital
- Jamila Pleas, RN, West Suburban Medical Center
- Kai Tao, ND, CNM, MPH, Juno4Me
- Paloma Toledo, MD, MPH, Northwestern Memorial Hospital
- Robin Jones, MD, Rush University Medical Center



3X disparities in IL

Black birthing persons are 3 times as likely to die from a pregnancy-related condition as White birthing persons

Persons on Medicaid are 3 times as likely to die from a pregnancy-related condition as a person with private insurance
(IDPH MMRC 2021)

Birth Equity Initiative 86/100 birthing hospitals
June 2021 to current



We recognize that we – and all care providers – have work to do and are committed to addressing implicit bias and increasing the provision of culturally competent care to our patients

Dr. Lisa Hollier, ACOG's Immediate Past President, during 2019 Congressional Testimony

BE Aim: By December 2023, $\geq 75\%$ will have all key strategies in place



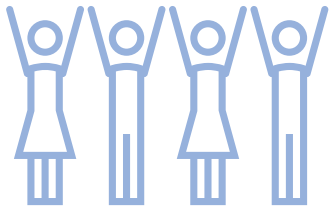
Optimize race and ethnicity data collection and review stratified data



Screen all patients for **social determinants of health** and link to needed services



Standardize postpartum **safety** education and schedule early postpartum visit



Engage patients and community members for input



Implicit bias, respectful care training for providers, nurses, other staff

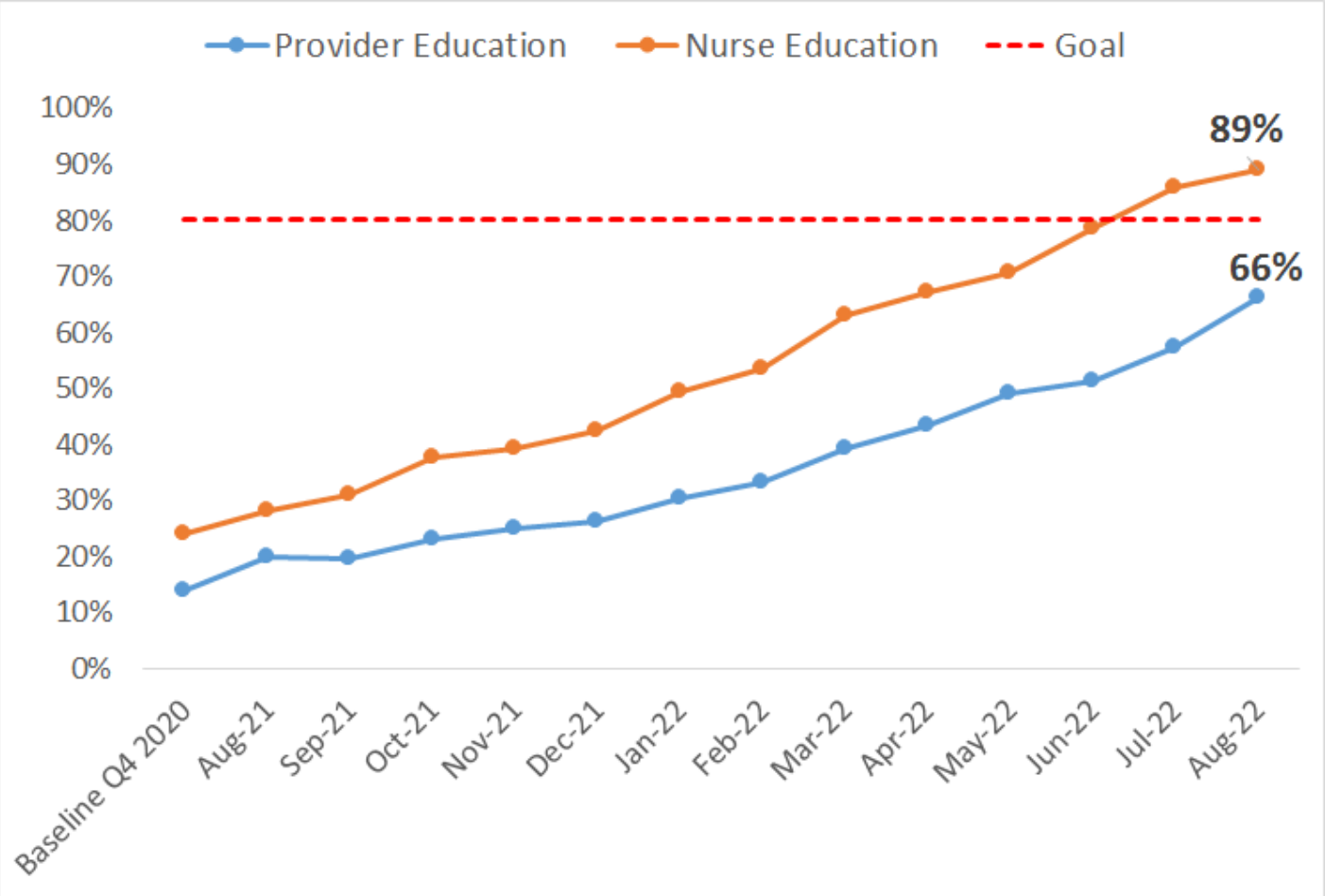


Share **respectful care practices** and survey patients on their care experience

Making Change Happen: Hospital Progress with BE Systems Changes

Structure Measures	Baseline (% In Place)	August 2022 (In Place)
SDOH Screening (L&D)	16%	58%
Identifying local SDOH Resources	3%	56%
Optimize Self-Reported Race and Ethnicity Collection	6%	75%
Engage Patients and Community in QI Work	3%	21%
Sharing Respectful Care Strategies with Healthcare Team and Patients	10%	51%
PREM Implementation	8%	44%
Postpartum Safety Patient Education	54%	89%

Changing clinical culture: Healthcare team Implicit Bias & Respectful Care Education

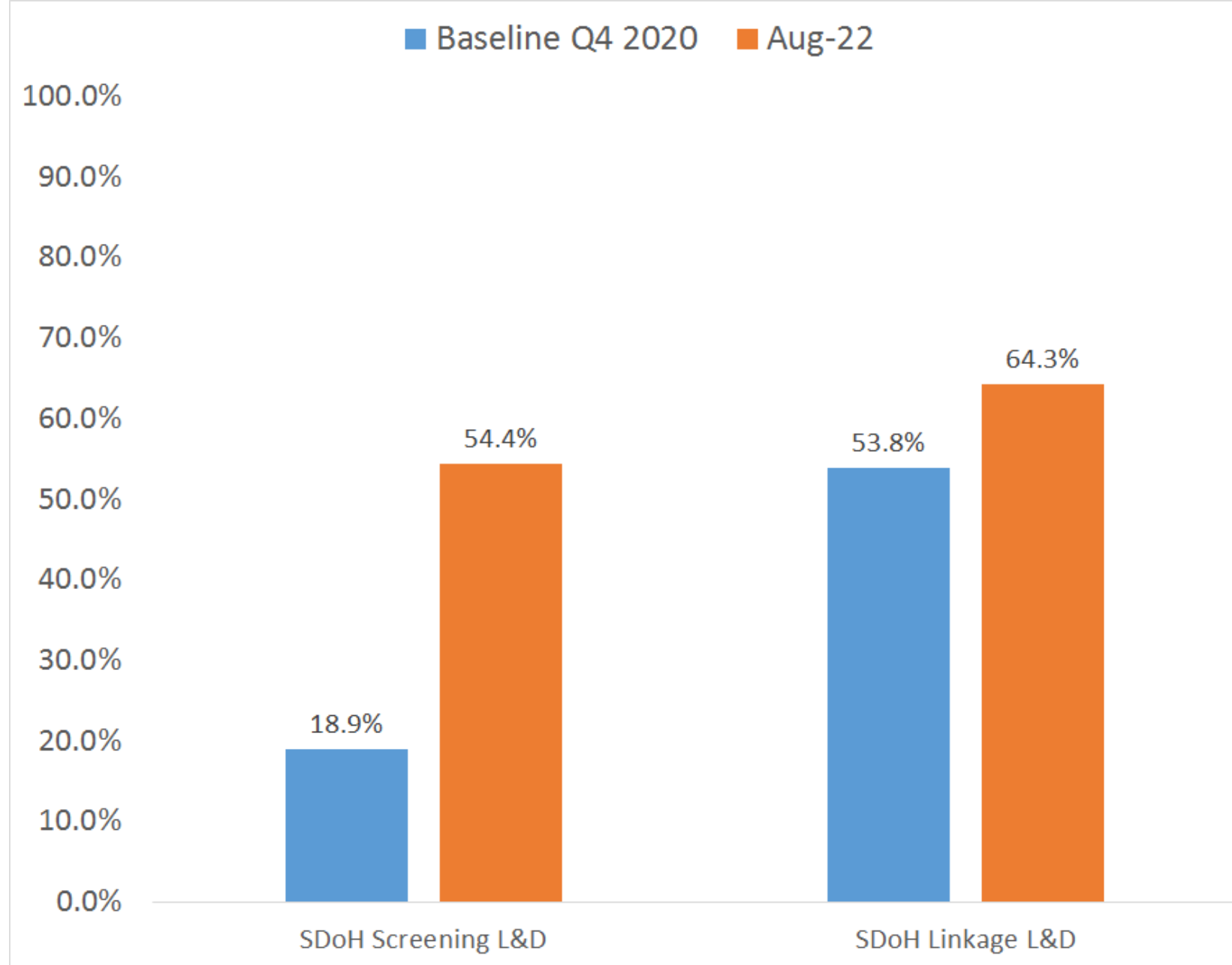


Social Determinants of Health (SDoH): Screening and Linking Patients to Resources

- Since Birth Equity start summer 2021:
- 10,360 patients sampled to check for SDoH screening
- 3,231 (32%) patients with documentation of SDoH screening on L&D
- 1,077 (33%) of patients with a positive SDoH screen
- 667 (62%) of patients with a positive screen for SDoH had documentation of connection to resources and services



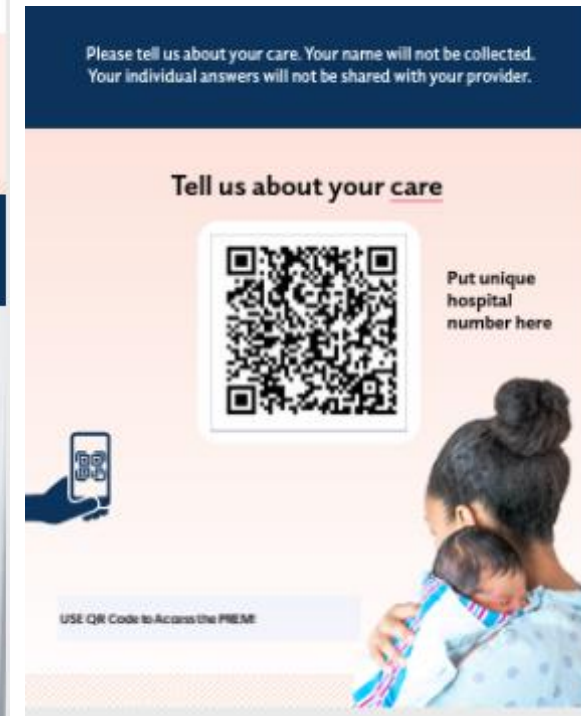
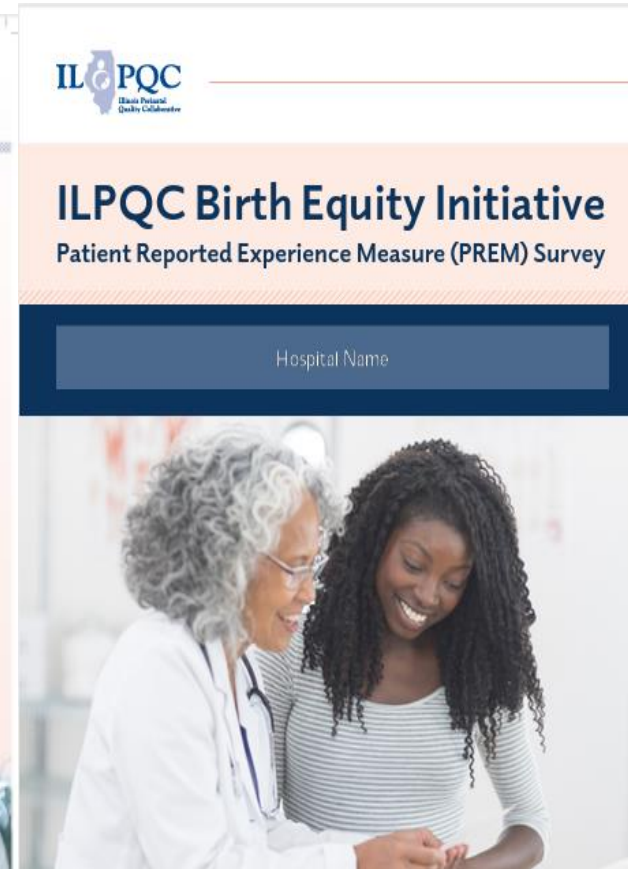
Improving SDOH Screening and Linkage to Resources (L&D)



Addressing Respectful Care



To date,
550 PREM
surveys submitted
across 32 of 34 (94%)
hospitals
reporting live with
PREM Survey



Connecting Hospital teams to patients and communities

- **29 community members / patients** served as panelists
- **66 (77%)** of BE teams participated
- Contributed to the development of relationships between **hospitals and local community stakeholders**
- Nearly **250% increase** in teams working on patient/community engagement from start



**It will take
ongoing
intentional
change to
address
maternal
disparities**

Together we can make change happen

Babies Antibiotic Stewardship Improvement Collaborative (BASIC) Initiative

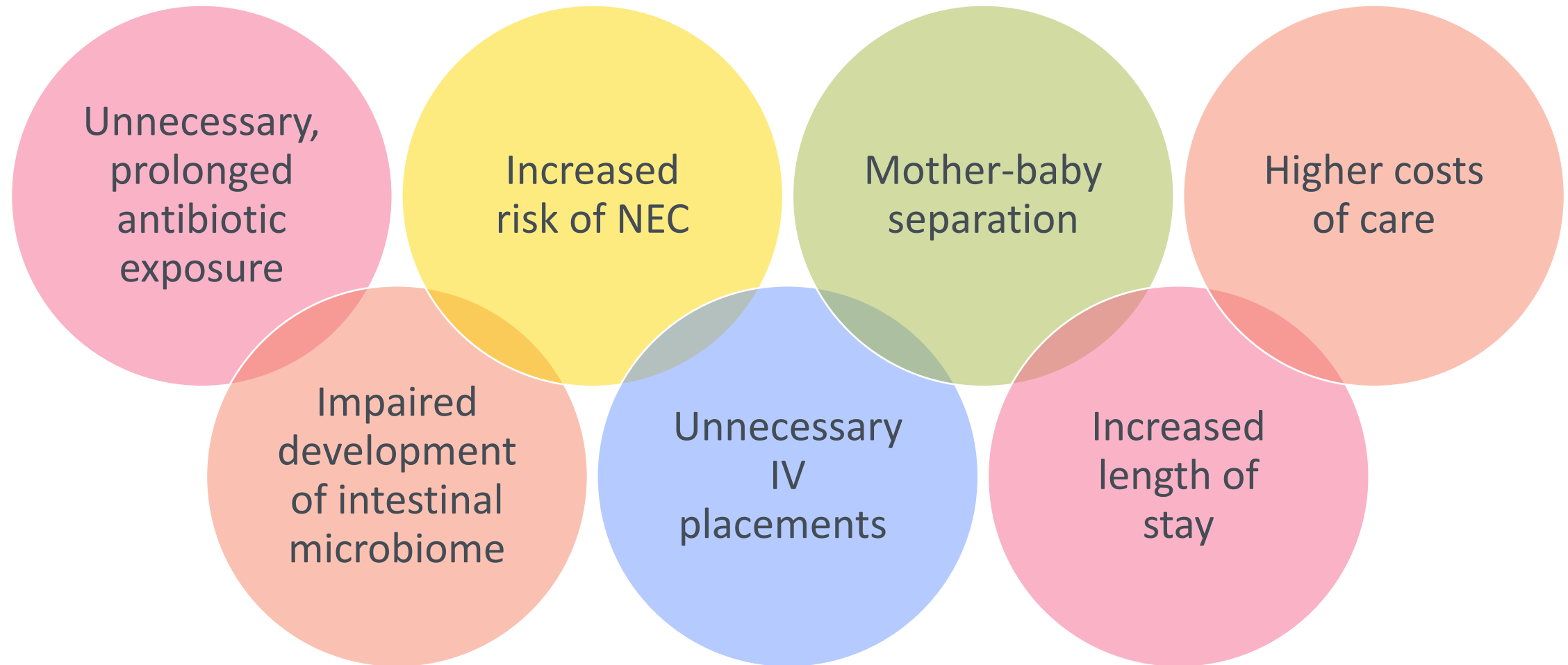
Celebrating achievements and helping teams cross the finish line together



BASIC Clinical Leads – THANK YOU

- Sameer Patel, MD, Ann & Robert H. Lurie Children's Hospital of Chicago
- Kenny Kronforst, MD, MPH, Ann & Robert H. Lurie Children's Hospital of Chicago
- Patrick Lyons, MD, Ann & Robert H. Lurie Children's Hospital of Chicago
- Gustave Falciglia, MD, Ann & Robert H. Lurie Children's Hospital of Chicago

Why Neonatal Antibiotic Stewardship?



Our Key Statewide Aims

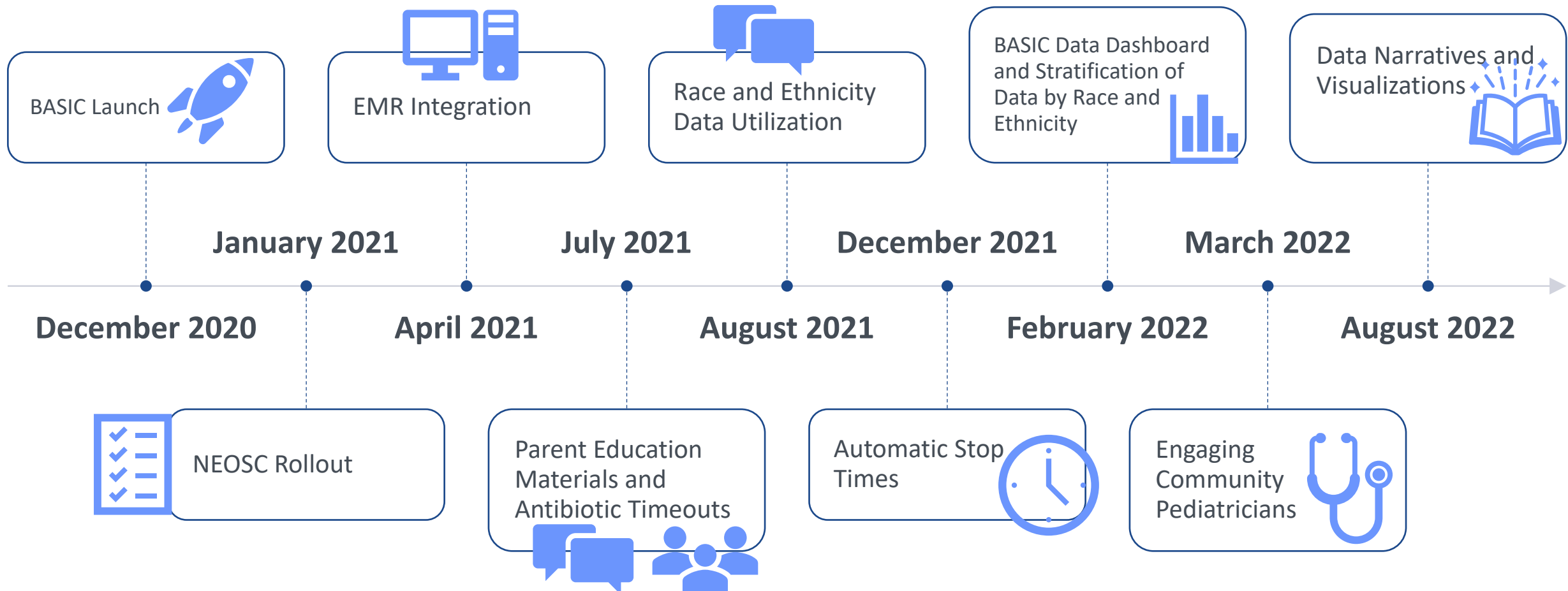
- Decrease the number of newborns born at ≥ 35 weeks who receive antibiotics
- Decrease number of newborns with a negative blood culture who receive antibiotics for longer than 36 hours



The Right Antibiotics for the Right Baby for the Right Length of Time

BASIC Timeline-

Where we have been, where we are going



BASIC Impact over the Last 2 years

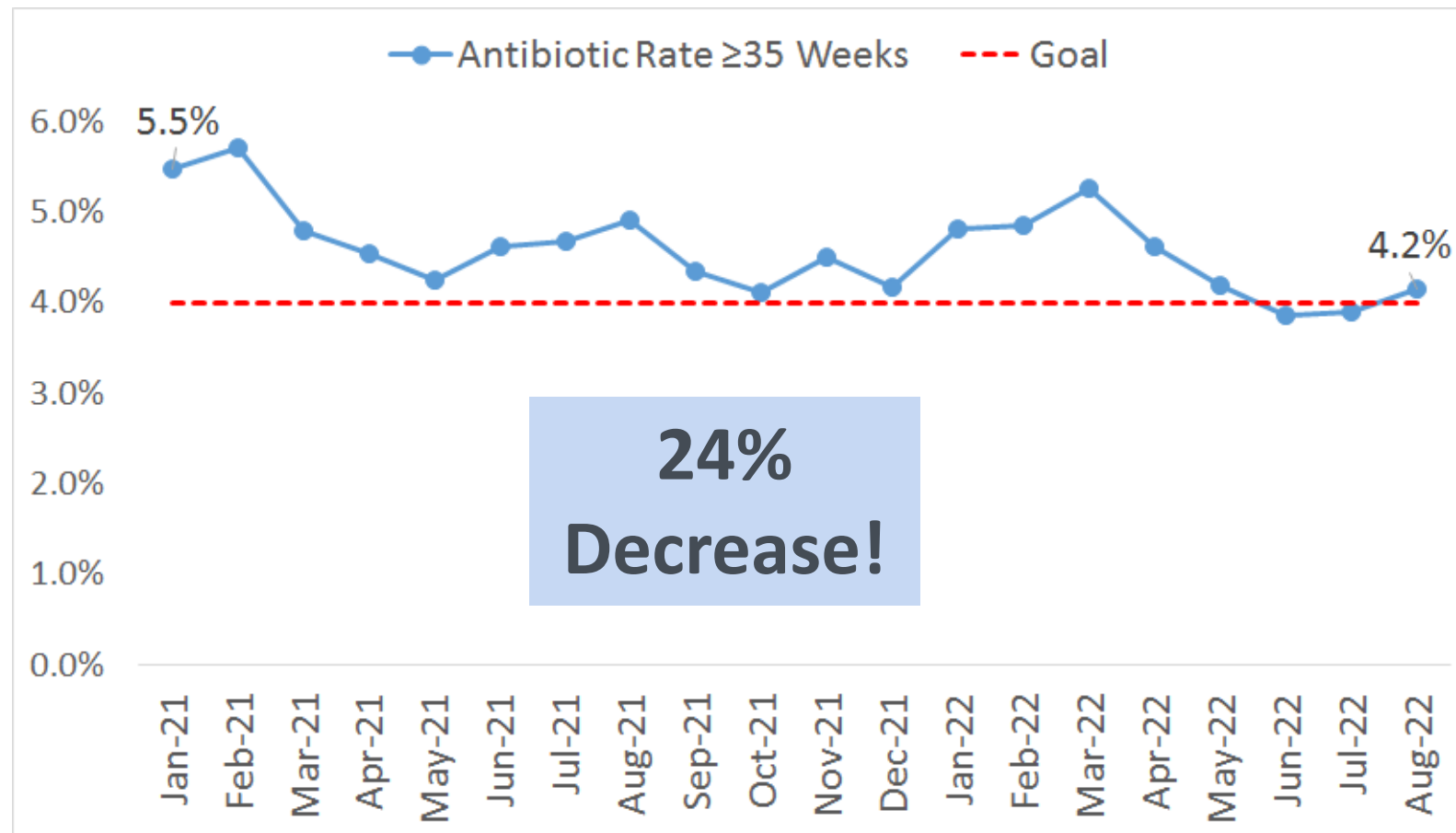
82 teams participating

200,000 babies >35 weeks born

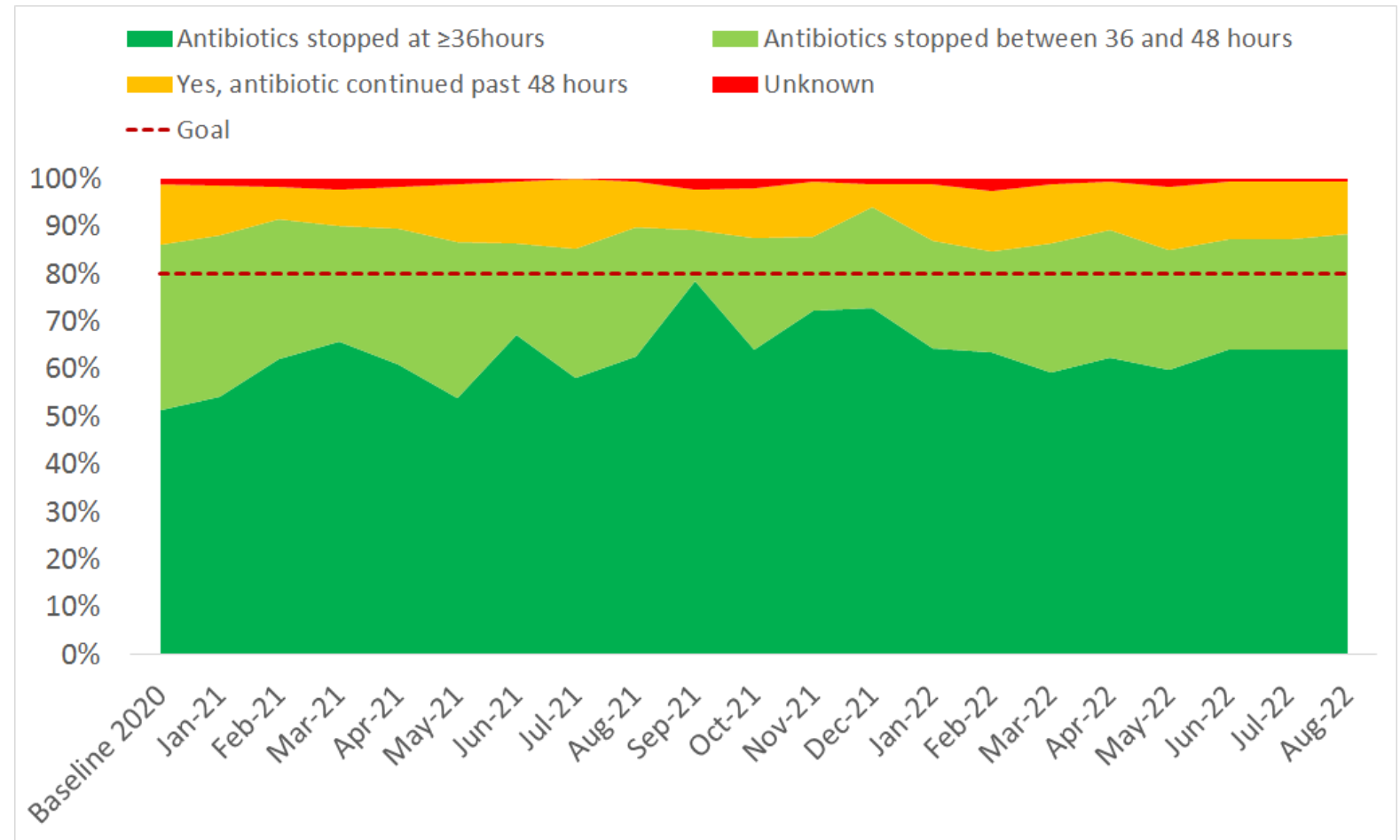
Over 16,000 newborns impacted

At least 7,200 fewer needle sticks!

Making Change Happen: Newborns ≥ 35 weeks who received antibiotics within 72 hours of life



**Making Change
Happen:
Newborns ≥ 35 weeks
with antibiotics
stopped
by 36 hours with
negative blood culture**



Mothers and Newborns affected by Opioids

Continuing our MNO-OB and Neonatal work amidst increasing maternal OUD rates in Illinois



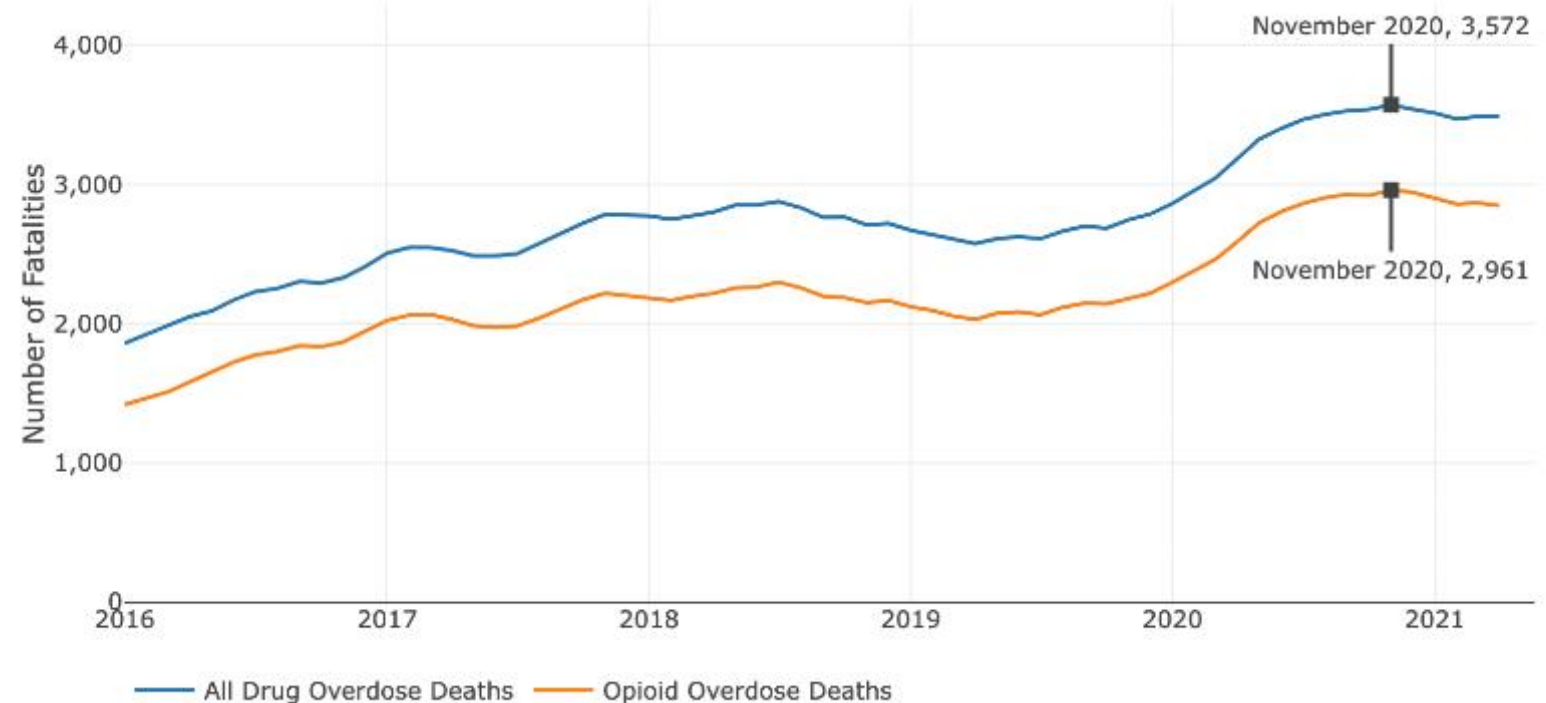
*The country now faces a **fourth wave** of the OUD crisis. Certain individuals are especially vulnerable to overdose and mortality, particularly those with **SUDs/opioid use disorder (OUD) and co-occurring behavioral health (BH) conditions (e.g., depression or anxiety)***

2022 Opioid and Behavioral Health Final Report, National Quality Forum, 2022

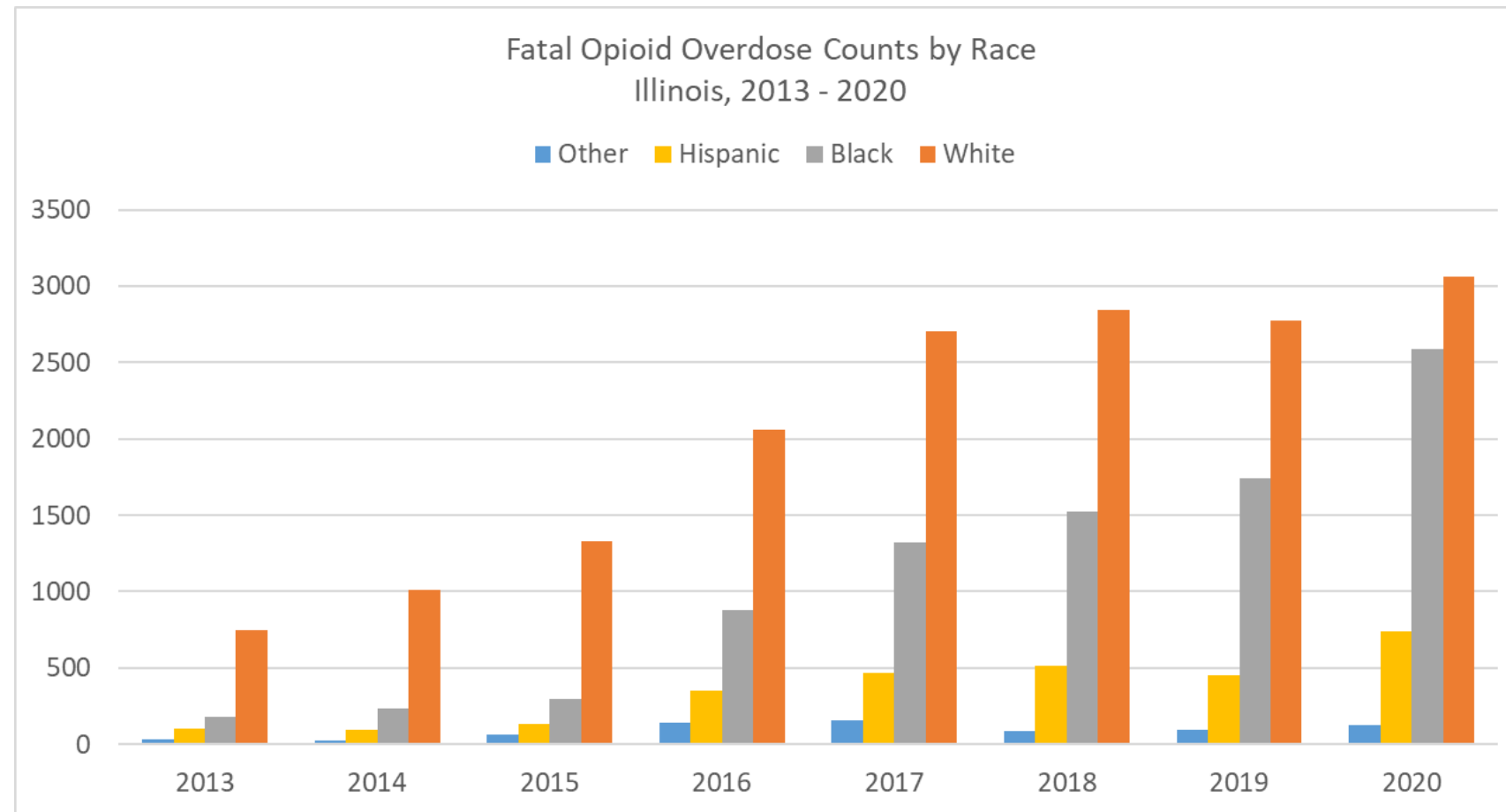
https://www.qualityforum.org/Publications/2022/09/2022_Opioid_and_Behavioral_Health_Final_Report.aspx

The Opioid Epidemic- Illinois Impact

- Opioid overdoses in Illinois increased 33% from 2019 to 2020
- In 2020, there were 2,944 opioid overdose fatalities



The Opioid Epidemic's Disproportional Impact in Illinois



Opioid overdoses have increased disproportionately among Black and Hispanic persons

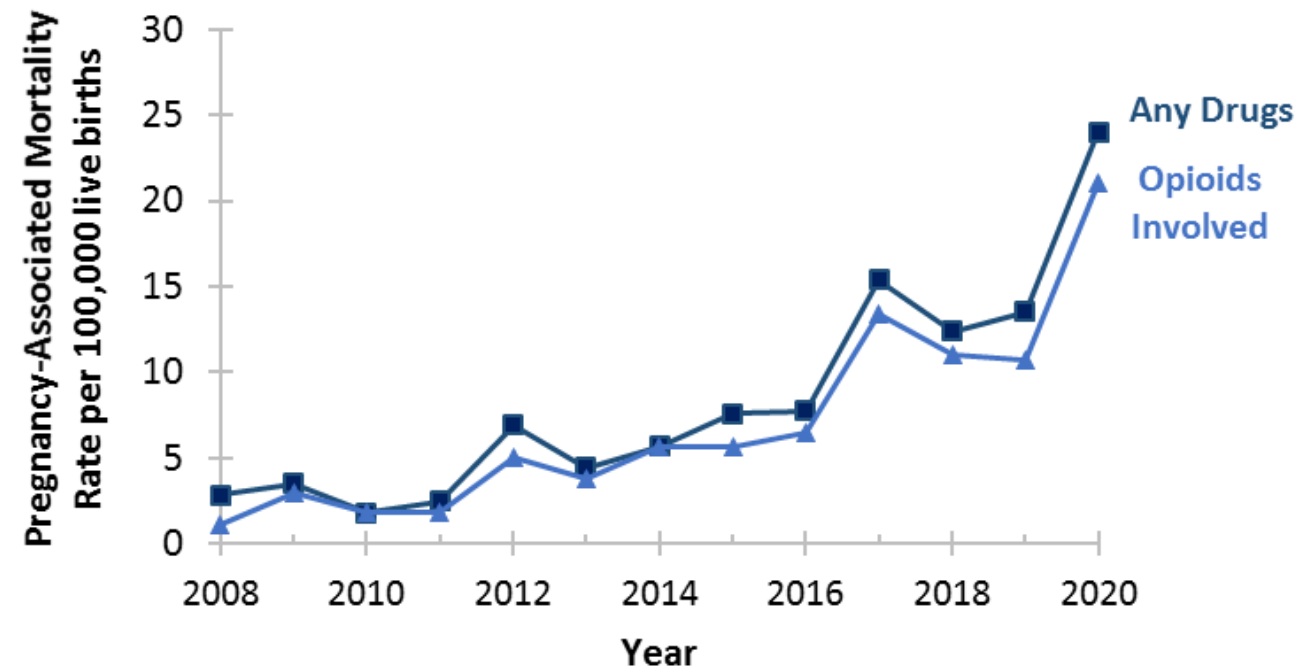
<https://dph.illinois.gov/topics-services/opioids/idph-data-dashboard.html>

Maternal Deaths due to Opioids in IL

In Illinois between 2019 – 2020:

- The rate of pregnancy associated mortality ratio for unintentional drug poisonings involving opioids increased from 10.7 to 21.0 per 100,000 live births.
- **Mental health conditions, including substance use disorder**, are now the leading cause of pregnancy-related deaths and often co-occur (IDPH 2021).

Pregnancy-Associated Mortality Ratio
for Unintentional Drug Poisoning Deaths
among Illinois Residents



Key Strategies in Sustainability to Provide Optimal OUD care every time



Screen every pregnant patient with OUD with a validated screening tool



Assess readiness for Medication Assisted Recovery (MAR)



Start MAR and link to recovery treatment services (RTS)



Provide naloxone (Narcan) counseling and medication



Warm hand-offs for community-based MAT, RTS, OB follow up

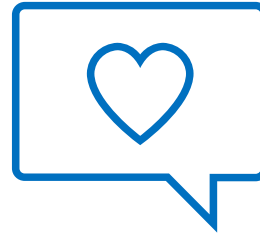


Provide patient education on OUD, NAS, and reduce stigma, promote respectful care across clinical team

Key Strategies to Provide Optimal Opioid-Exposed Newborn care every time



Prenatal Consult



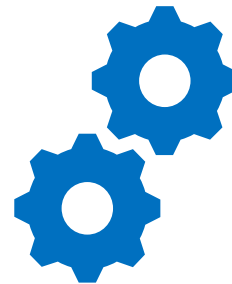
Non-Pharmacologic
Care



Pharmacologic
Treatment



Eat, Sleep, Console



MNO Folders

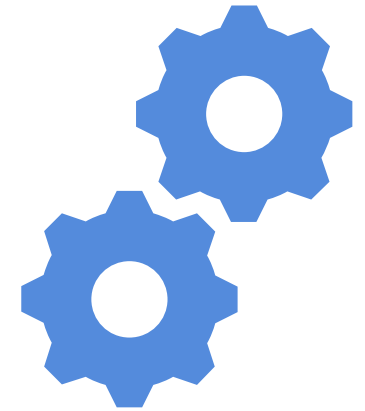
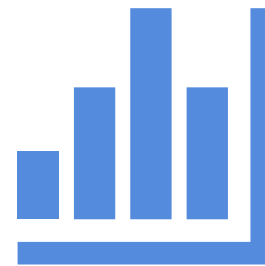


Coordinated Discharge

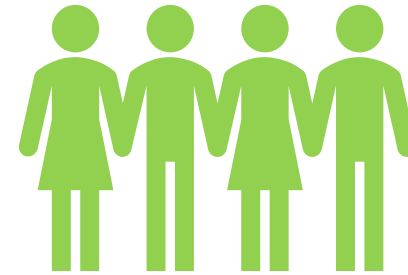


Call to action! What it takes for every team to optimize OUD & OEN care in sustainability

- Compliance monitoring of key patient measures and missed opportunity reviews for patients not receiving optimal care
- New-hire and continuing education for providers, nurses, and staff
- Ensuring systems changes are in place including MNO Folders, mapped community resources, DOPP program for free Narcan kits for patients



ILPQC Goals for 2023



Achieve initiative aims and move to sustainability: BASIC, PVB, BE

Design and launch new neonatal statewide initiative focusing on infant mortality

Expand engagement of patients, families and communities in QI work

Thank you!

This work cannot happen
without all of you.

Thank you for your hard work,
commitment, dedication, and
expertise to make Illinois the
best place to give birth and
be born!

