### Southern Illinois Health Care – Memorial Hospital of Carbondale

Presentation Subtitle Presentation Date



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# **Memorial Hospital of Carbondale**

Memorial Hospital of Carbondale is the flagship hospital for SIH and regional referral center for the 16 county southern Illinois region. Memorial paves the way to bring big city medicine home. Physicians in over 45 different specialties practice here, bringing expertise and new procedures, but successfully tailoring them to the particular needs of a rural setting.

154-bed tertiary care hospital

Southern Illinois' largest and most spacious birthing center with Level II Plus Special Care Nursery

Only dedicated pediatric unit in the region

The core hospital for SIH's comprehensive, regional heart program, Prairie Heart Institute.

High level surgical capabilities including daVinci technology

Affiliated with SIU School of Medicine through its Family Practice Residency Program

Neuroscience program including neurosurgery and a desiginated Primary Stroke Center

Accredited by the Commission on Cancer for comprehensive cancer treatment

#### ILPQC – OB/NEO MNO & IPLARC Team



Not pictured – Alyssa Davis(MNO Project), Kim Davis (IPLARC project)



Immediate Postpartum Long Acting Reversible Contraceptive



### **IPLARC** Team Composition

- OB provider champion
- Nursing Labor & Delivery Nurse, Mother Baby Nurse
- Perinatal Outreach Coordinator
- Pharmacy
- Billing \*Key partner
- EMR/IT
- Maternal Child Educator
- Lactation consultant
- Social Worker

#### **IPLARC Process Flow**

Provider to Educate/Ask Patient Planning for Contraception after Birth.

> Arrival to hospital – RN to ask patient contraception after Birth (Chart in EPIC) – if IUD or Nexplanon – notify MD for order.

If no contraception after birth identified nurse to educate on possibilities and what will work best for patient

Once order receive – RN to get consent for IUD or Nexplanon

> For IUD: Obtain IUD (Mirena/Paragaurd) from OmniCell Obtain instruments for insertion Scan IUD into MAR Provide education/card to pt.

For Nexplanon: Obtain Nexplanon from OmniCell Obtain insertion kit for provider Scan Nexplanon into MAR Provide education/card to pt.

#### ILPQC 30-60-90 day Plan

#### 30-Day Tasks (1/7/19)

30-Day 18383 (1/7/13)	
	Responsible Party
1. Epic Build (put in ticket)	Keith
2. Develop dot phrase using sample from Northwestern as an example	Dr. Bishop
3. Send Mike release date of order set	Mary Jarvis
4. Receive approval for order set	Mike
60-Day Tasks (2/7/19)	
	Responsible Party
1. Provider education with MamaU models	Dr. Jones
2. Patient education (look into recreating materials from Denver Health specific to IPLARC)	Mary Jarvis
3. Nursing education (add IPLARC to annual proficiency content & add breastfeeding slides)	Kim Davis
90-Day Tasks (3/1/19)	
Task	Responsible Party
<ol> <li>Develop and disseminate communication plan for announcement of IPLARC availability with outpatient providers.</li> </ol>	Dr. Jones
2. Share education resources for outpatient nurses – include in communication plan or speak at nursing staff meetings (if desired/feasible)	Mary Jarvis/Kim Davis
<b>3.</b> Review revenue stream for reimbursement confirmation (send patient info to Keith for review)	Vera/Mary Jarvis
4. Host Grand Rounds (either in-house (i.e. Dr. Jones) or hosted with	Dr. Jones/Mary Jarvis

## **Barriers/Strategy**

Barriers	Strategy
1. Training for Providers in area	1. Asked collaboration hospital to provide training in our area
2. Billing for IUDs/Nexplanons	2. Worked with ILPQC provider to assist with providing codes to MHC Billing Department
3. Review revenue stream for reimbursement	3. Worked closely will with MHC Billing /EPIC to be insure billing/charting correctly

## **OB/NEO Team Composition**

- OB provider champion
- Nursing Assistant Manager, SCN Nurse, x 2 Clinical Support Nurses – Labor & Delivery & SCN/Pediatric
- Perinatal Outreach Coordinator
- Pharmacy
- Billing
- EMR/IT
- Maternal Child Educator
- Lactation consultant
- Social Worker

# MNO OB/SCN 30-60-90 day Plan

#### 30-Day Tasks (1/7/19)

	Responsible Party
1. Monthly Team meetings developed - Key stakeholders identified and assigned roles in the MNO project	MNO OB/SCN team
2. Multidisciplinary Team members identified and invited to the next meeting	MNO OB/SCN team
3. Mappped the process- the process steps as they currently occur	Crystal Tellor
4. Identified the 5 P's as the Screening Tool for SIH	Crystal Tellor
5. Reviewed Discharge Process/ Education plan discussed	Crystal Tellor/Jessica Duncan
60-Day Tasks (2/7/19)	
Task	Responsible Party
1. Have the EPIC analysis add the 5P's to the Triage Navigator	Angie Bowen
2. Maternal/Child Educator set up the education for NAS & Stigma training	Jennifer Williams
3. Determine team tools & Strategies for implement the process – which tools/strategies will be implemented	Crystal Tellor
4. Identify the community resources	Destiny Coty
5. Identify provider education & educational needs for physician offices	Crystal Tellor
90-Day Tasks (3/1/19)	
Task	Responsible Party
1. Checklist developed & will be added to EPIC chart	Crystal Tellor/Angie B.
2. Review the documentation flow in EPIC & how the checklist will be implemented	Crystal Tellor
3. Neonatal Team is to change NAS Screening tool from Finnegan scoring to Eat, Sleep, Console NAS Care Tool	Jessica Duncan/Alyssa Davis
4. Maternal/Child Education to set up education for the Eat, Sleep Console for Nurses and Providers	Jennifer Williams
5. Referral Protocol to create and review	Crystal Tellor/Dr. S. Jones
6. Subutex Protocol for intrapartum Care create and review	Crystal Tellor/Dr. S. Jones

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#### Memorial Hospital of Carbondale OUD Process Flow

ALL Maternal Inpatients are Screen using the 5 P's **Screening Tool** Any confirmed "Yes" Directs you to a checklist "What to do Next" **Obtain Mapping Tool** (Community Resources available after Discharge)

## **Barriers/Strategy**

	Barriers	Strategy		
1.	Eat, Sleep, Console Intervention – Comfort level of nurses and providers with caring for infants with NAS on Mother Baby with PRN Morphine.	<ol> <li>Continuous Education to increase comfort level.</li> <li>Education provide to RN RN &amp; MD MD.</li> </ol>		
2.	Staff Stigma with disease process	2. Keeping an "open door" to allow staff to express themselves about their understandings.		
3.	Community Resources – very limited in our area	3. Working with Social Services to create a mapping tool.		

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## Table Example

CONTACTS						
Name	Network	Region	Date	ID		
Andrew Smith	In	North	6-12-18	1234		
Mark Walberg	In	North	6-10-18	4567		
Amanda Bynes	Out	South	6-1-18	7890		
Carrie Clark	In	East	7-1-18	3210		
Sam Hunt	Out	East	7-12-18	5432		
Bruce Willis	Out	West	7-17-18	6784		
Mary T. Moore	In	West	8-12-18	7893		

### **Chart Example**





