



**Strategies to Cross the Finish Line-  
Round Robin Part 3:  
Screening, MNO Folders, OB  
Education, Missed Opp. Review**

April 27, 2020  
12:30 – 1:30pm

# Overview

- COVID 19 debrief
- Welcome/introductions
- Face-to-Face Meeting
- MNO-OB Strategies for Success  
Round Robin
- Promoting Vaginal Birth

# ILPQC COVID-19 Webinars



- Weekly COVID-19 OB/Neo Strategies Webinars in coordination with IDPH, Fridays 12-1pm with OB/Neo leaders sharing cases and strategies
- Please see <https://ilpqc.org/covid-19-information/> for future webinar registration, and prior recorded webinars
- Questions from webinars answered by OB/Neo leaders and posted weekly
  - [Q/A from 4.17.2020 webinar](#)
  - [Q/A from 4.10.2020 webinar](#)
  - [Q/A from 4.3.2020 webinar](#)

# ILPQC COVID-19 Webpage

[www.ilpqc.org](http://www.ilpqc.org)



A screenshot of the ILPQC website's 'News / COVID-19' page. The page header includes the ILPQC logo and navigation links: Home, About, Initiatives, News / COVID-19 (circled in red), and Contact. The main heading is 'COVID-19 Information for ILPQC Hospital Teams'. The body text states: 'Given these unprecedented times, we wanted to reach out and express our support to all of you on the front lines caring for patients and your concern for the health of our patients and for the health of each of you, your colleagues and families. We will continue to monitor national and state sources regarding the care of pregnant women and newborns during the COVID-19 crisis and will add to our monthly team webinars, we will also share COVID-19 information as it is available and hold a space for teams to share experiences. We will join us as you are able.' Below this is a paragraph: 'Our thoughts are with those affected and continue to be affected by this crisis. Please stay safe and healthy.' A 'Resources' section follows, listing links: 'Example COVID-19 Hospital Policies/Protocols/Resources', 'CDC Resources', 'ACOG, SMFM, and AJOG Resources', 'Perinatal Mental Health Resources', 'COVID-19 National Registries', and 'Relevant News Articles'. The first link is highlighted with a blue underline.

ILPQC will post national guidelines and OB & Neonatal COVID-19 example hospital protocols & resources  
**please note dates as guidelines are changing rapidly**

<https://ilpqc.org/covid-19-information/>

# ILPQC COVID-19 Webinar Resources



- Please review the recording of ILPQC webinars available [here](#) to learn more about resources available.

## Updated OB/Neo Resources

- IDDT: [Recommended Guidance for the Care of Pregnant Women and Neonates During the COVID-19 Pandemic](#) (3.20.2020)
- AAP: [AAP: Update: Management of Infants Born to Mothers with Suspected or Confirmed COVID-19](#) (4.2.2020)
- AAP: [Initial Guidance: Management of Infants Born to Mothers with COVID-19](#) (4.2.2020)
- NEMM: [Universal Screening for SARS-CoV-2 in Women Admitted for Delivery](#) (4.13.2020)\*\*
- SMFM and SOAP: [Labor and Delivery COVID-19 Considerations](#) (4.14.2020)
- CDC: [COVID-19 Outbreak Care Hubs](#) (4.16.2020)
- ACOG: [COVID-19 FAQs for Obstetrics](#) (4.22.2020)
- ACOG: [COVID-19 Practice Advisory](#) (4.23.2020)
- AJOG: [Coronavirus disease 2019 \(COVID-19\) in pregnant women: A report based on 116 cases from China](#) (4.23.2020)
- ACOG & SMFM: [COVID-19 Algorithm](#) (Shared 4.23.2020)
- FDA W

## New Patient Education Resources

- ACOG: [COVID-19 Pregnancy & Breastfeeding: A Message to Patients](#) (English & Spanish) (4.16.2020)
- Advocate Children's Hospital: [Caring for Your Infant During the COVID-19 Pandemic](#) (4.14.2020)
- ["Is It Safe to Provide Milk for my Baby if I Have, or Have Been Exposed to, COVID-19?"](#) (Adapted by ILPQC with permissions 4/2020)
- ["If Your Doctors Suspect You Have COVID-19"](#) (Adapted by ILPQC with permissions 4/2020)
- March of Dimes: [COVID-19: What You Need to Know About Its Impact on Moms and Babies](#) (4.8.2020)
- [IL EverThrive: Protecting and Caring for Your Family During the Coronavirus Outbreak](#) (4.3.2020)
- [SMFM Information for Women & Families](#) (4.3.2020)
- [The 4th Trimester Project's patient education website on COVID-19 For New Moms](#) (3.2020)

## COVID-19 OB & Neonatal National Registries

### OB Registry:

- **PRIORITY:** Nationwide registry established for pregnant and postpartum women with suspected or confirmed diagnosis. The goal is to gather nationwide data quickly.
- CDC is collecting surveillance data on pregnant women with a supplement to the registry. This registry should be completed on [PRIORITY](#) [can be found online.](#)

### Neonatal-Perinatal Medicine (NPM) COVID-19 (NPC-19) Registry:

...should be completed on [PRIORITY](#) [can be found online.](#)

## IL Perinatal Depression & Anxiety Hotline



- Answered live 24/7
- Staffed by licensed mental health professionals trained in perinatal mood & anxiety disorders



## Maternal Health Resources



- During this crisis heightened awareness of need for mental health resources for our patients and staff.
- IL Perinatal Depression Program Hotline 1-866-364-MOMS (1-866-364-6667)
- Postpartum Depression Illinois Alliance 1-847-205-4455
- NAMI (National Alliance for the Mentally Ill) Help line 1-800-950-NAMI (1-800-950-6264)
- [Mental Health and Coping During COVID-19 | CDC](#)
- [Resources for providers, families, and leaders to support the health and well-being of communities impacted by COVID-19](#)

[Masks for MOMs wants to get reusable cloth face masks to the moms and moms-to-be who need them in the Chicago-land area.](#)

The aim is to ensure that pregnant moms from vulnerable communities have access to face masks at their prenatal visits and when they arrive at hospitals for delivery.

[Find out more & sign-up to volunteer at https://bit.ly/masksforMOMs](#)

# MASKS FOR MOMS

HELPING MOMS &  
BABIES STAY SAFE



DONATE CDC APPROVED HANDMADE MASKS FOR EXPECTANT MOMS IN THE CHICAGOLAND AREA.

GET INVOLVED: [BIT.LY/MASKSFORMOMS](https://bit.ly/masksformoms)

EMAIL [INFO@BLACKGIRLSBREAKBREAD.ORG](mailto:INFO@BLACKGIRLSBREAKBREAD.ORG) FOR MORE INFO.

DONORS SHOULD SPECIFY THE TYPE AND QUANTITY OF MASKS AND WHETHER THEY CAN BE DELIVERED OR PICKED UP, AND INCLUDE THEIR EMAIL ADDRESS AND PHONE NUMBER.

BLACK GIRLS  
BREAK BREAD™

Every  
Thrive  
Illinois  
Department of  
Health & Human Services

IL PQC  
Black Power  
Quality Collaborative

ADDCS COMMUNITY  
HEALTH  
NETWORK  
TRANSFORMING COMMUNITY HEALTHCARE

I PROMOTE IL  
ILLINOIS DEPARTMENT OF  
HEALTH & HUMAN SERVICES

UIC

Office of Community Engagement  
and Digital Health  
Initiatives

IDPH

UIC

Center of Excellence in  
Maternal and Child Health

AllianceChicago  
Partnering for Better Health

WEST SIDE UNITED: Building Blocks  
to Better Health

# 2020 FACE- TO- FACE VIRTUAL MEETING



# You're Invited!

## 2020 OB & Neonatal Face-to-Face Meetings

**Nurses, Providers, & Staff**  
join us for an interactive day of  
collaborative learning for current  
& upcoming ILPQC initiatives!

### **OB Teams: May 20, 2020**

Check-in: 8:00a-9:00a  
Meeting: 9:00a-3:30p

Mothers & Newborns affected by Opioids - OB (MNO-OB)  
Immediate Postpartum LARC (IPLARC)  
Improving Postpartum Access to Care (IPAC)  
Promoting Vaginal Birth (PVB)

### **Neonatal Teams: May 21, 2020**

Check-in: 8:00a-9:00a  
Meeting: 9:00a-3:30p

Mothers & Newborns affected by Opioids - Neonatal (MNO-Neonatal)  
Babies Antibiotic Stewardship Improvement Collaborative (BASIC)

**Register now!** <https://ilpqc.eventbrite.com>

This activity has been submitted to the Ohio Nurses Association for approval to award contact hours. The Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

**NEW VIRTUAL MEETING – FREE!**

Illinois Perinatal Quality Collaborative  
633 N. St. Clair, 20th Floor  
Chicago, IL 60611

# 2020 Face-to-Face Speakers and Panels



**Jessica Brumley,  
CNM, PhD**

*“Promoting Vaginal Birth:  
Lessons Learned from FPQC”*



**Helena Girouard**

*“A Mom’s Recovery Story:  
Helena Girouard”*

*“OB Teams Panel: Sharing Strategies for Success for Obstetric QI Initiatives”*

**MNO X2**



**IPLARC**



**IPAC**



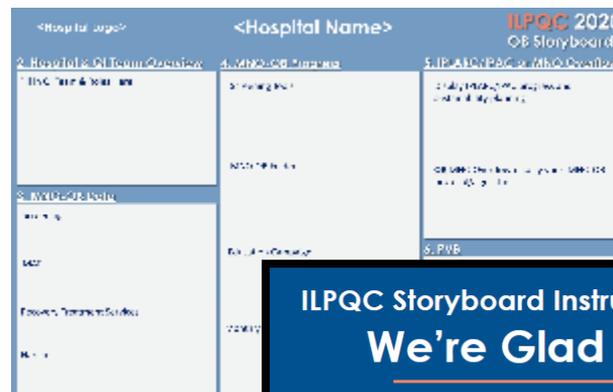
# Breakout Sessions



OB Breakout Sessions	Neonatal Breakout Sessions
MNO-OB: Finishing Strong / Key Strategies for Success	MNO-Neonatal: Finishing Strong
MNO-OB: Preparing for Sustainability	MNO-Neonatal: Preparing for Sustainability
MNO-OB: Optimize Narcan Counseling & Access	MNO-Neo: Engaging Pediatricians
Immediate Postpartum LARC (IPLARC): Sustainability & Billing	QI: Using QI Data to Drive Change
Improving Postpartum Access to Care (IPAC): Sustainability & Billing	QI: Building a Strong Interdisciplinary QI Team
PVB: Data Collection Strategies	BASIC: Preparing your QI Team for BASIC
PVB: Unpacking the Toolkit / Getting Started	State & Community Partner Breakout
Obstetrics Chair / Obstetrics Leadership Breakout	
State & Community Partner Breakout	

# F2F Storyboard Session

- All teams will bring a storyboard to the Face to Face
- ILPQC will provide a template and an instruction sheet to use
- For MNO-OB, share your progress toward crossing the finish line including implementation of the 4 key strategies
- For IPLARC/IPAC teams, share your Go Live success and sustainability plans
- For PVB teams, share your PVB QI Team, and can include if you have ideas for getting started.
- See the diagram for examples of how to lay out your storyboard



## ILPQC Storyboard Instruction Sheet We're Glad You're Here!

<Thank you for participating in the ILPQC Storyboard Project, where teams share their top initiatives to elevate perinatal healthcare around the state... or other inspirational text to summarize importance/participation.>

### OB-Storyboard Instructions

1. Insert your hospital logo and name at the top of the slide.
2. Hospital & QI Team Overview  
List your QI team and roles. Also insert a picture of your QI team and hospital.
3. MNO-OB Data  
Insert structure measures graphs from RedCap for one of more of the following:
  - Screening Tool
  - MAT
  - Recovery Program/Services
  - Narscan
4. MNO-OB Progress  
Fill in MNO-OB progress towards four key strategies for success. The four key strategies are:
  - Screening Tools
  - MNO-OB Folders
  - Education Campaign
  - Monthly Review of all OUD cases
5. IPLARC/IPAC or MNO Overflow  
Use this area to insert IPLARC & IPAC reports or as additional space to share your MNO Progress.
6. PVB  
Tell us about your PVB QI Team and about your 30/60/90 day plan if team has a draft ready to share.

### Neo-Storyboard Instructions

1. Insert your hospital logo and name at the top of the slide.
2. Hospital & QI Team Overview  
List your QI team and roles. Also insert a picture of your QI team and hospital.
3. MNO-Neo Data  
Insert structure measures and graphs for one of more of the following:
  - Breastfeeding
  - Pharm/Non-Pharm Treatments
  - Coordinated Discharge Plans
4. MNO-Neo Progress  
Fill in MNO-OB progress towards four key strategies for success. The four key strategies are:
  - NAS Assessment Tools
  - MNO-Neo Folders
  - Education Campaign
  - Monthly review of all NAS cases
5. Coordinated Discharge  
Share your teams' current discharge process and materials.
6. BASIC  
Share your:
  - Anticipated team members and role on the team
  - Current tools or materials (ex. National Sepsis calculator) your hospital has implemented prior to the launch of the initiative
  - Potential barriers and strategies to overcome them

7. Save the document and send completed storyboard by May XX, 2020 to [jb@thejbccreative.com](mailto:jb@thejbccreative.com).

Thank you for your participation!

Please contact Jodie Brooks at [jb@thejbccreative.com](mailto:jb@thejbccreative.com) with questions.

# F2F Storyboard Session

**Due May 15, 2020**

More information to come in your MNO-OB Newsletter

<Hospital Logo>

<Hospital Name>

**ILPQC 2020**  
OB Storyboard

## 2. Hospital & QI Team Overview

Fill in QI Team & Roles Here

## 4. MNO-OB Progress

Screening Tools

MNO-OB Folders

Education Campaign

Monthly Review of all OUD Cases

## 5. IPLARC/IPAC or MNO Overflow

Display IPLARC/IPAC progress and sustainability planning

**OR** MNO Overflow-display your MNO-OB protocol/algorithm

## 3. MNO-OB Data

Screening

MAT

Recovery Treatment Services

Narcan

## 6. PVB

Fill in QI team & Roles

30/60/90 day plan if draft is ready to share

# 2020 Face-to-Face Volunteer Opportunities



- **F2F Breakout Facilitators**

- NOW RECRUITING with each perinatal network to recruit:
  - 1 RN & 1 OB Provider, for total of 10 pairs
  - 1 RN & 1 Neonatal provider, for total of 10 pairs

Please email: [info@ilpqc.org](mailto:info@ilpqc.org) if interested in being a breakout facilitator or can send a recommendation for someone you think we should ask!

TO BE AWARDED AT THE MAY 2020 ILPQC OB FACE TO FACE

## QI Excellence Awards

ILPQC MOTHERS AND NEWBORNS AFFECTED BY OPIOIDS-OB

### QI CHAMPION

### QI LEADER: CULTURE & SYSTEMS CHANGE

### QI LEADER: SYSTEMS CHANGE

- |  |  |   |
|--|--|---|
| ✓ *All Data Submitted                    | ✓ All Data Submitted                   | ✓ All Data Submitted                    |
| +  | +                                      | +                                       |
| ✓ 6 Structure Measures In Place          | ✓ 6 Structure Measures In Place        | ✓ 6 Structure Measures In Place         |
| +  | +                                      |   |
| ✓ <u>4-6</u> Process Measure goals met** | ✓ <u>1-3</u> Process Measure goals met | (also route for teams with no patients) |

**\*\*DETERMINED BY CUMULATIVE DATA FOR QUARTER 1 (JANUARY - MARCH) OF 2020**

*\*ALL DATA SUBMITTED FOR BASELINE (OCT – DEC 2017) AND JULY 2018 THROUGH MARCH 2020*

*\*MNO-OB MONTHLY PATIENT DATA, MONTHLY OB STRUCTURE MEASURES, MONTHLY SAMPLE OF DOCUMENTATION OF SCREENING*

**Deadline Extended: DATA DUE MONDAY, May 4<sup>th</sup> by MIDNIGHT**

# Face to Face MNO-OB QI Awards

- **ALL Patient, Sample of Screening, & Structure Measures Submitted:**
  - Baseline and July 2018 - March 2020 data

\*note: if any monthly data is missing, including submitting that no patients were discharged that month, a team won't qualify for an award\*

- **Structure Measures 'IN PLACE' / Green by March 2020:**

- Screening (L&D)
- Screening (Prenatal)
- Mapping
- SBIRT Algorithm
- Checklist
- Patient Education

Can get to green by implementing MNO Folders

Goal is to provide **every** patient with OUD optimal care

- **Process & Outcome Measures Achieved by March 2020:**

- MAT >70% | Recovery Services >70% | Narcan >70% | Hep C >70% | Patient Education >80% | Screening (L&D) >80%

**Deadline extended!**

**DATA DUE MONDAY, May 4<sup>th</sup> by MIDNIGHT**



# MNO-OB Teams are Finishing Strong!



MNO-OB teams are making great strides at implementing key strategies for success, entering data into the data system, and moving structure measure to green!

As of April 22<sup>nd</sup>, **41** MNO-OB teams have all of their monthly structure measures, sample of documentation of screening, and patient data in from Baseline (Q4 2017) through March 2020!

Keep up the great work and make sure to submit data by May 4<sup>th</sup> 2020 to be considered for QI Excellence Awards! Remember, completing the 4 key strategies for success helps get your structure measures to green!

# Hospital Team Prep for F2F

- ✓ Register each attendee individually for meeting ([ilpqc.Eventbrite.com](http://ilpqc.Eventbrite.com)) by May 15
- ✓ Enter all data in the ILPQC Data System to be eligible for awards by May 4
- ✓ Put your hospital & initiative-specific information in easy-to-use F2F Storyboard Template by May 15
- ✓ Be on the lookout for virtual agenda, which will include hyperlinks for webinar to attend meeting

# MNO-OB KEY STRATEGIES FOR SUCCESS

# MNO Plan for 2020



After discussion with Clinical Leads, ILPQC Central, Perinatal Network Administrators, and hearing from hospital teams it has been decided that ILPQC will continue to support hospital implementation of MNO during this time understanding there are competing priorities with COVID-19.

ILPQC will work to support teams to cross the finish line (achieve MNO AIMS), help them develop sustainability plans, and provide 1:1 support to hospitals who are still working on achieving the initiative.

As a collaborative we will work together to determine how much time is needed to help all hospitals to cross the finish line, achieve the aims, and move into MNO sustainability.

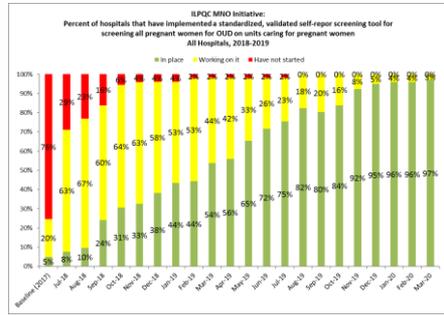
# REGISTER NOW!

## Upcoming ASAM Treatment of OUD Training Courses

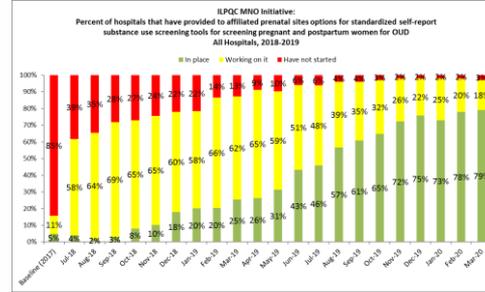


- Make sure OB providers, residents/ fellows, midwives aware of great opportunity to attend online: Treatment of Maternal OUD / Buprenorphine waiver course
- Friday, **May 1, 2020** | 9am – 1:30pm FULLY ONLINE ([Register Here](#))
  - Dr. Mishka Terplan, national leader in maternal OUD, presenter at the 2019 AC is co-presenting!
- Wednesday, **June 24, 2020** | 8am – 12:30pm FULLY ONLINE ([Register Here](#))

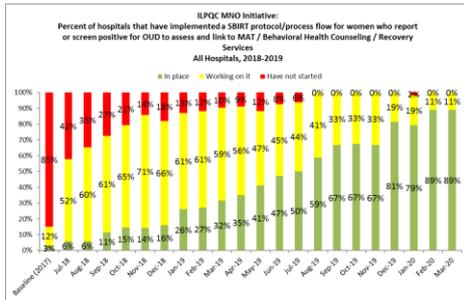
# Making Systems Change Happen



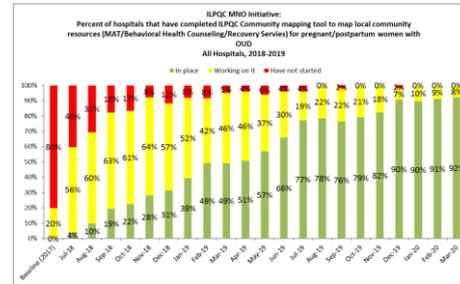
97% of teams have a validated screening tool in place on L&D



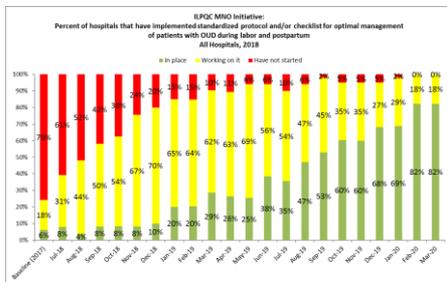
79% of teams have a validated screening tool in place prenatally



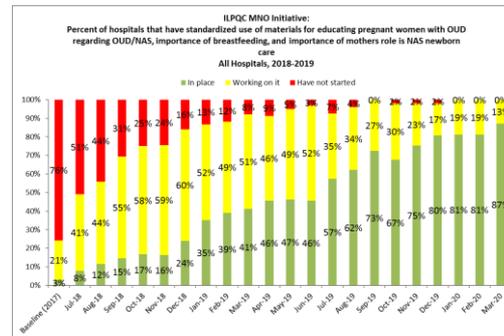
89% of teams have a SBIRT protocol/algorithm in place on L&D



92% of teams have mapped community resources for women with OUD

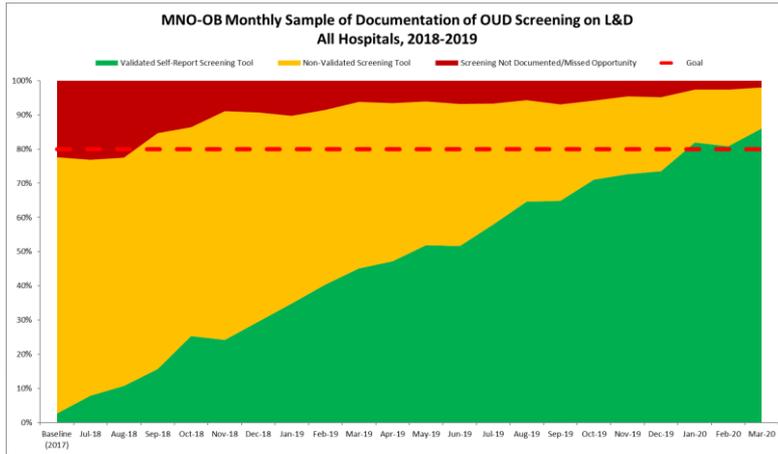


82% of teams have implemented an OUD Clinical Care Checklist on L&D



87% of teams have implemented standardized patient education on L&D

# Documentation of Screening for SUD/ODD with Validated Tool



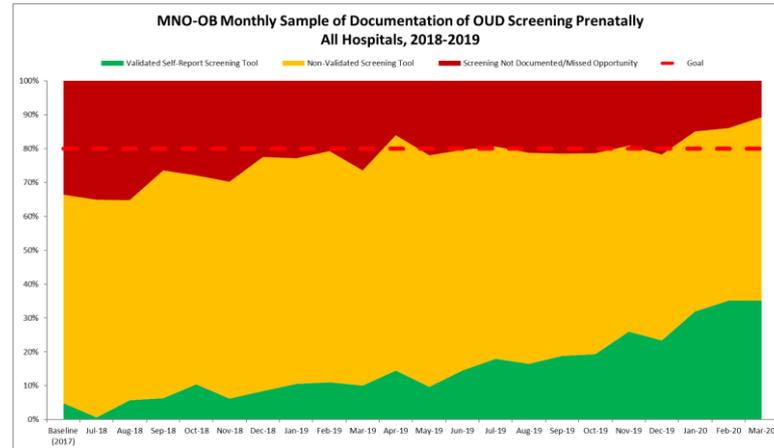
86%

Random sample of 10 deliveries per month reviewed for documentation of SUD/ODD screening  
N = 16,000 to date

Prenatal

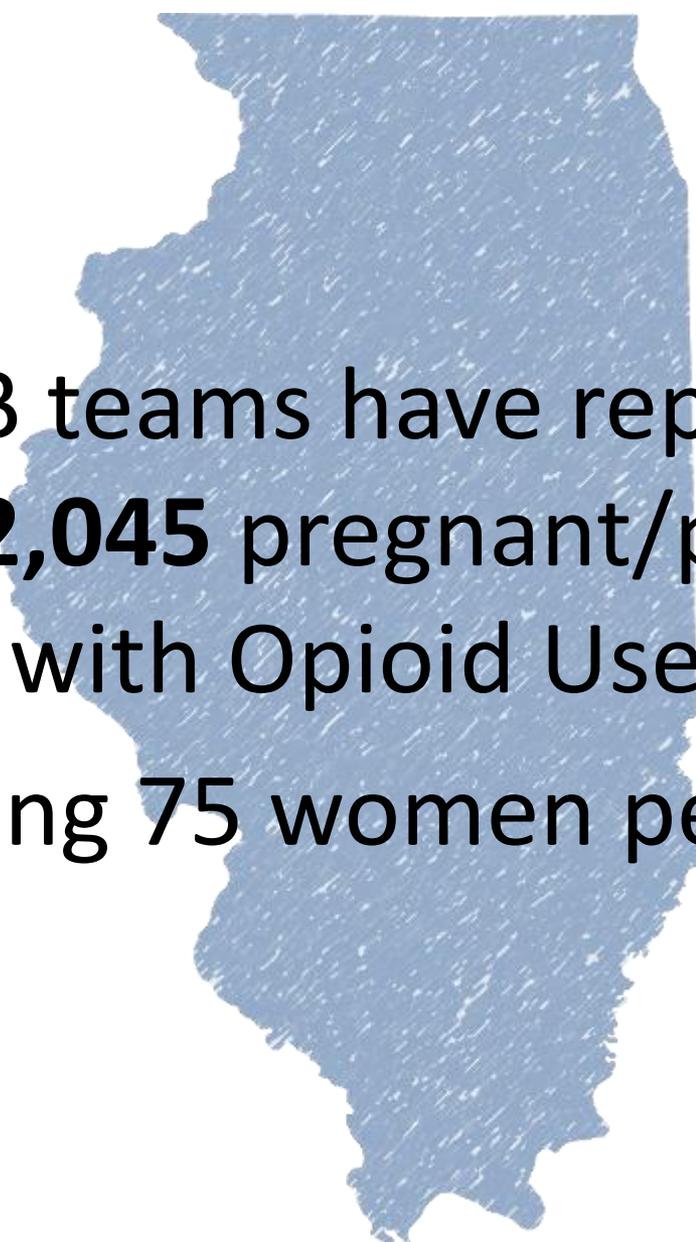
L&D

Red = No screening  
Yellow = Screened single question  
Green = Screened with validated SUD/ODD screening tool



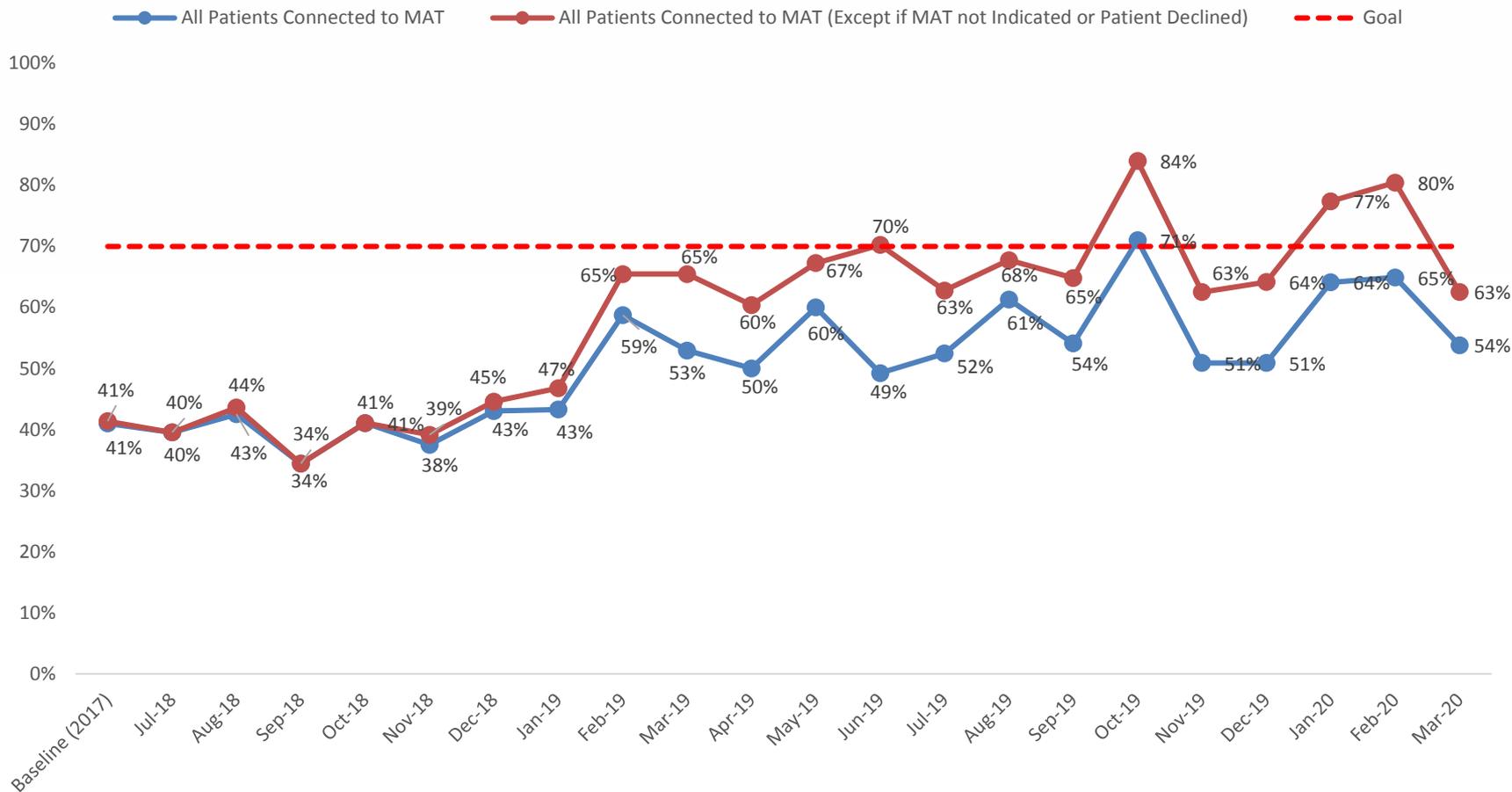
35%

**BENCHMARK = ≥ 80%**



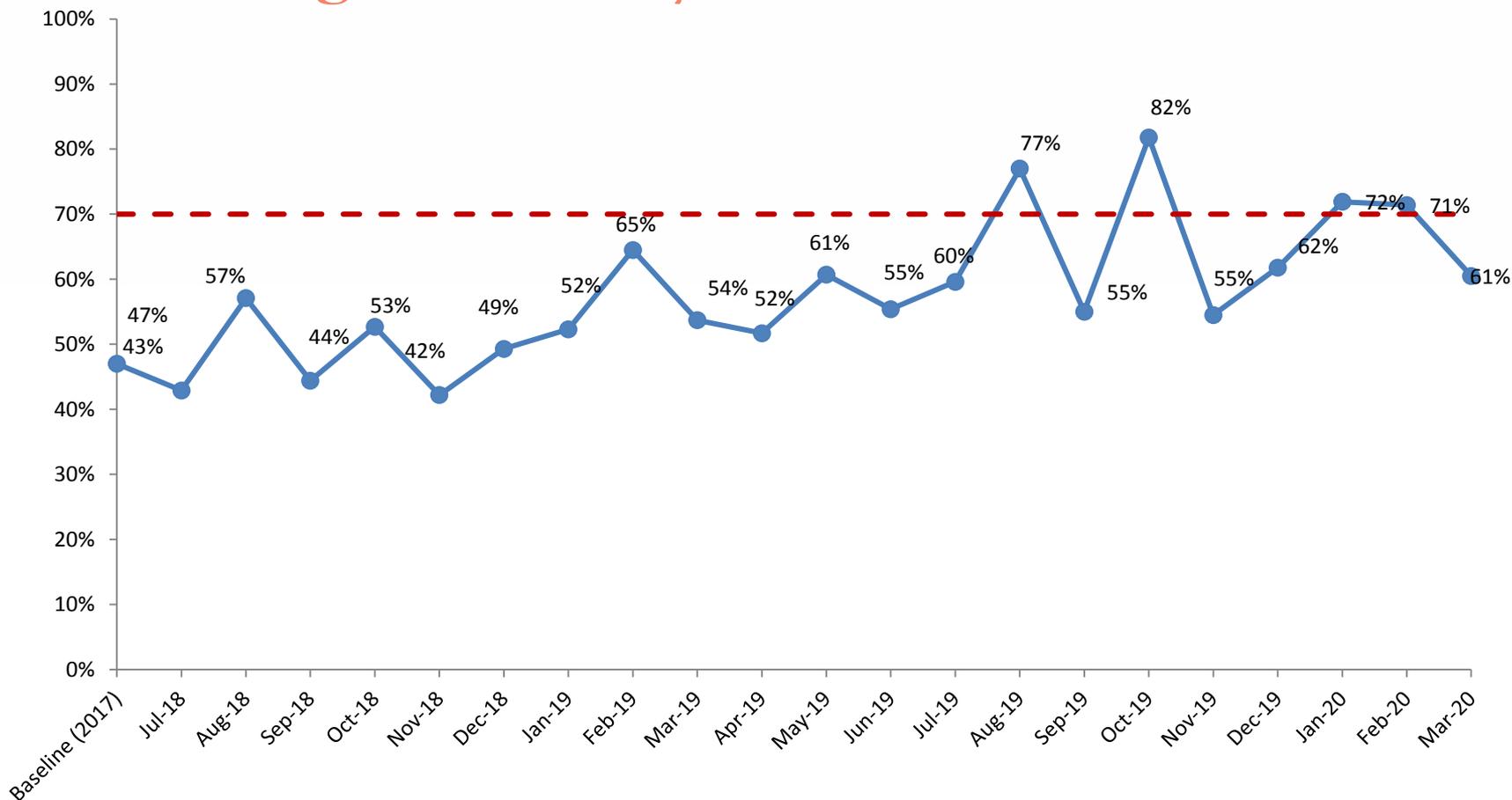
MNO-OB teams have reported data on over **2,045** pregnant/postpartum women with Opioid Use Disorder, averaging 75 women per month

# Women with OUD on MAT by Delivery Discharge



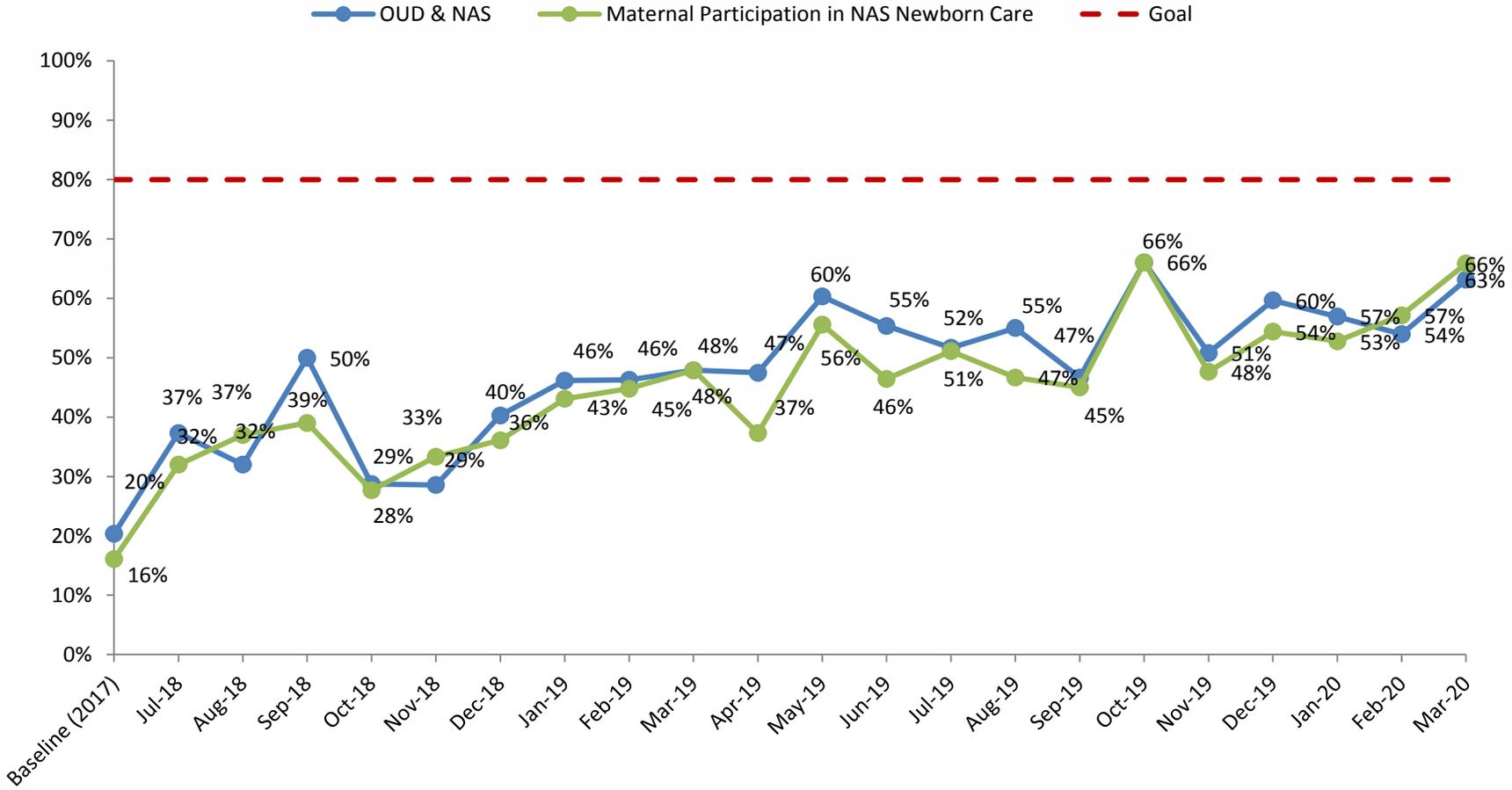
**BENCHMARK = ≥ 70%**

# Women with OUD at Delivery Connected to Behavioral Health Counseling/Recovery Services



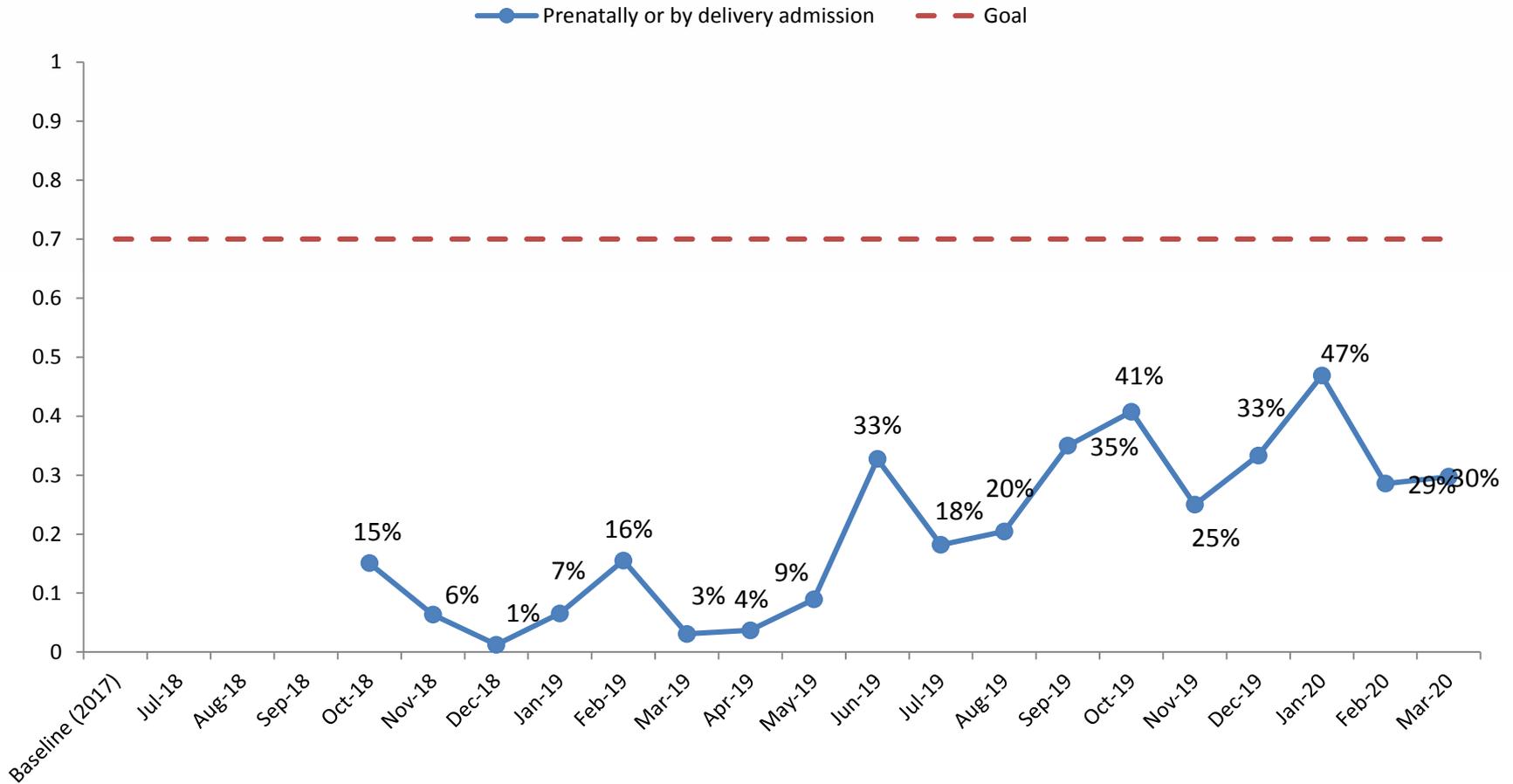
**BENCHMARK =  $\geq 70\%$**

# Maternal OUD/NAS Education & Documentation



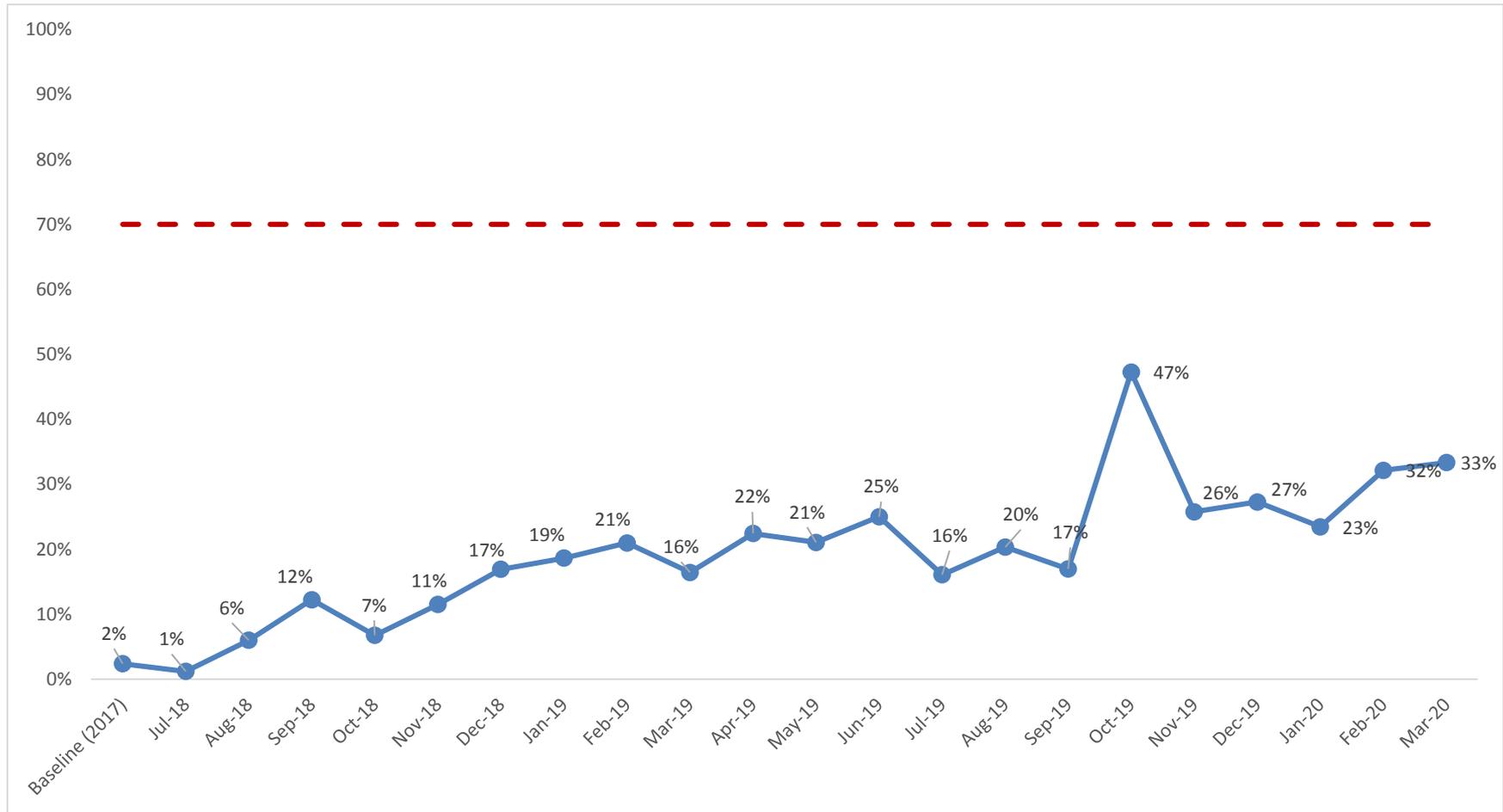
**BENCHMARK = ≥ 80%**

# OUD Clinical Care Checklist Included in Chart (Prenatally or by Delivery Admission)



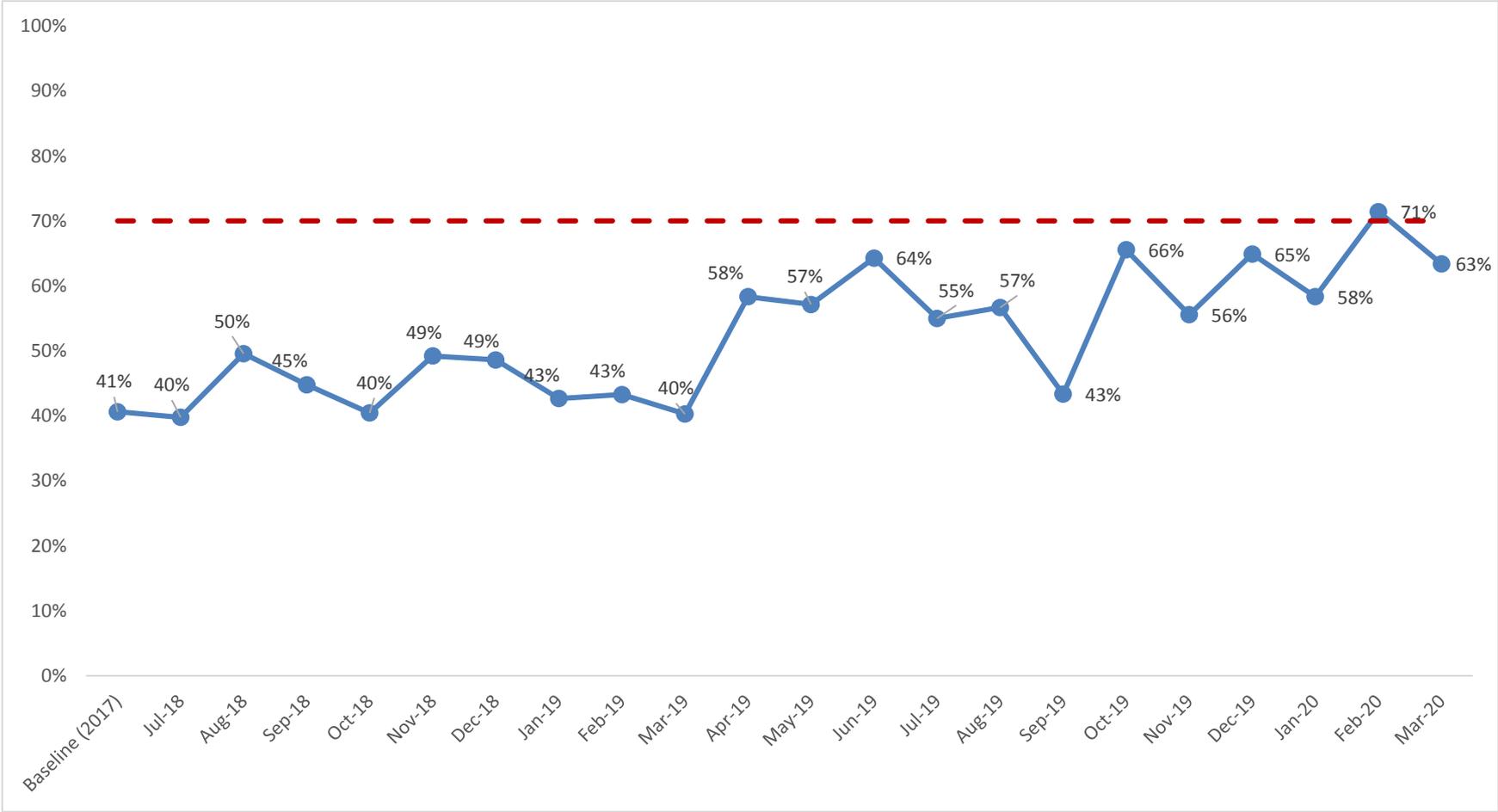
**BENCHMARK = ≥ 70%**

# Narcan Counseling & Documentation



**BENCHMARK = ≥ 70%**

# Hepatitis C Screening & Documentation



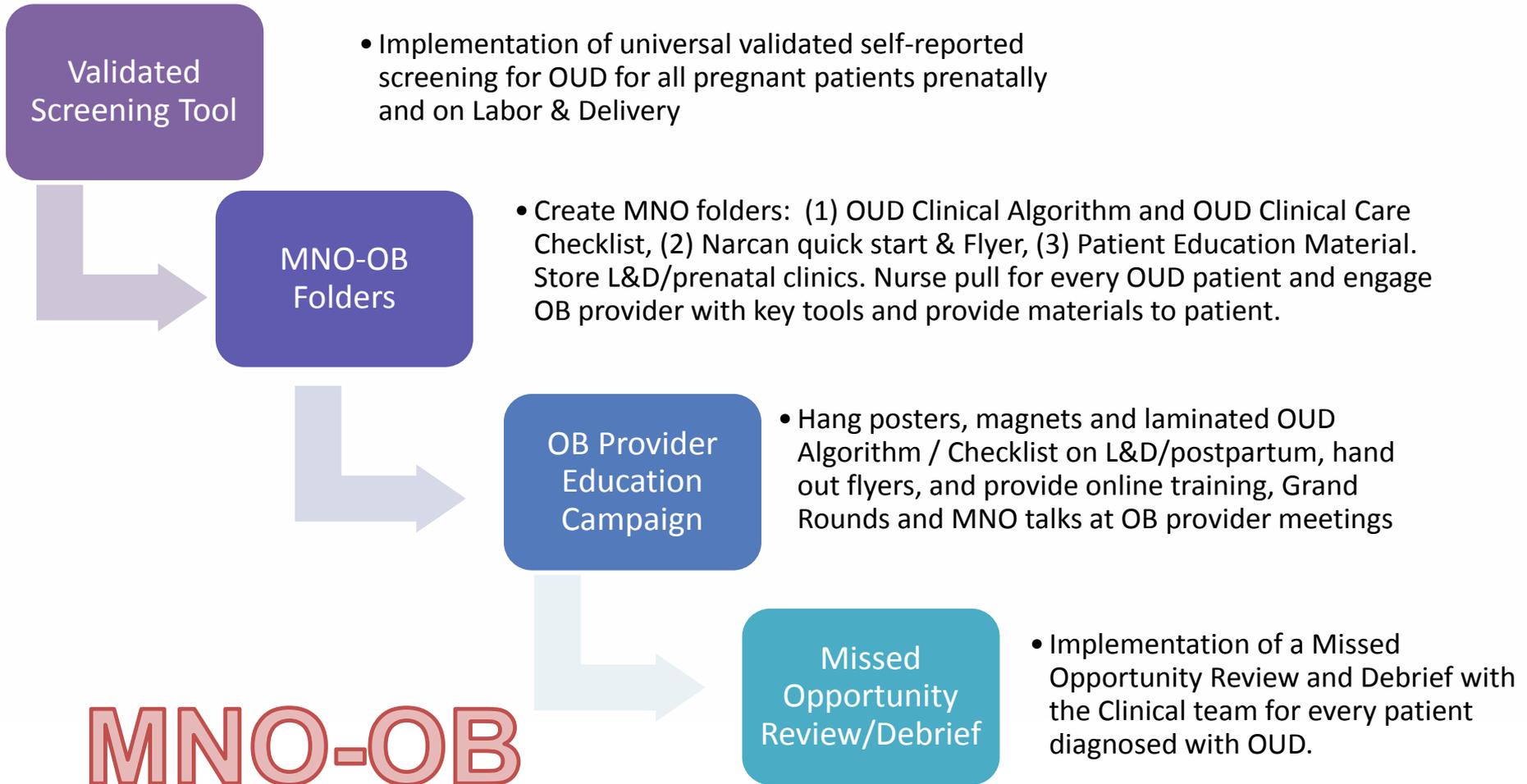
**BENCHMARK = ≥ 70%**

# Steps to Cross the Finish Line For MNO-OB

- ✓ Implement standardized system changes to move structure measures to **GREEN!** (L&D Screening, Prenatal Screening, SBIRT/ODU Clinical Algorithm, Mapping Resources, Clinical Care Checklist, Patient Education) – **use of the MNO Folders can move SBIRT/Clinical Algorithm, checklist and pt education to green**
- ✓ Ensure your team has a process in place to **ensure every woman identified with OUD prenatally and on L&D receives optimal care to reduce risk of maternal death** (link to MAT and Recovery Treatment Services, counsel and provide Narcan/Naloxone, screen for Hep C, provide pt education on NAS and engaging in non-pharm care, warm handoffs and close follow up).

# Key Strategies for MNO Success

## - What every hospital needs to achieve aims



# Implement MNO-OB Folders in 4 Easy Steps

1. **Print** all materials with one click [here!](#)
2. **Print** 5-10 to keep in L&D
3. **Orient & Educate** Providers & Nurses to Folder Contents and **Confirm System** to use for all screen+ patients
4. **Provide** 2-5 folders for each outpatient site/clinic to utilize

**MNO Folder**

- ✓ Make folders & store on L&D
- ✓ Train charge nurses to get folder when OUD screen + identified, engage OB providers
- ✓ Share folders with outpatient sites



The diagram shows a blue folder with two main sections:

- Patient Education Materials**
  - [Prescription Pain Medicines and Pregnant Women](#)
  - [NAS- You are the Treatment](#)
  - [NAS: What you Need to Know](#)
  - [Contraception Counseling for Women with OUD](#)
- Clinical Team Resources**
  - OUD/SBIRT Clinical Algorithm
  - OUD Clinical Care Checklist
  - [Narcan- Quick start guide](#) & Save a Life Flyer for OB to review and prescribe to patient
  - OUD Protocol
  - Nurse Workflow

Annotations for distribution:

- "Give to and review with Moms" points to the Patient Education Materials section.
- "Give to OB to complete" points to the OUD/SBIRT Clinical Algorithm, OUD Clinical Care Checklist, and Narcan- Quick start guide & Save a Life Flyer.
- "For nurse" points to the OUD Protocol and Nurse Workflow.

The IL PQC logo is visible at the bottom of the folder.

If patient screens + for OUD, ask nurse to pull MNO folder for easy access to materials for provider, nurse and patient

# Implement OB Provider / Nursing Education Campaign in 3 Easy Steps

1. **Hang** Provider Education Posters / Flyers and OUD/SBIRT Clinical Algorithm on Units
2. **Require** and **implement** eModules for Providers, Nurses, and Staff. Recommended options:
  - [Words Matter: How Language Choice Can Reduce Stigma](#) (30 Min)
  - ILPQC MNO-OB Simulation Guide
  - Stay tuned for a 30 min ILPQC comprehensive eModule with key strategies and finishing strong for sustainability
  - **Request** a Grand Rounds or OB Provider Meeting



# Monthly Case Review of All OUD Cases in 4 Easy Steps

1. **Identify** all OUD cases at least monthly
2. QI Team **reviews medical record** to identify missed opportunities for optimal care using the form
3. Nurse champion **provides feedback** to patient's L&D and postpartum nursing team as indicated
4. Provider champion **provides feedback** to prenatal and L&D admission provider as indicated

IL PQC MNO-OB Mothers with OUD  
Missed Opportunities Review / Debrief Form

**Missed Opportunity Review/Debrief key steps:**

1. Identify all OUD cases at least monthly
2. Review medical record to identify missed opportunities for optimal care using this form
3. Nurse champion provide feedback to patient's LD and postpartum nursing team as indicated
4. Provider champion give feedback to prenatal and LD admission provider as indicated

**1a. Was patient receiving Medication Assisted Treatment (MAT) prenatally or by delivery discharge?**

- Yes
- No (If unknown assume no and continue to 1b)

**1b. If no, why? Select all that apply (BHC/RTS = Behavioral Health Counseling/Recovery Treatment Services)**

- OUD not identified prior to delivery AND  prenatal care received OR  limited to no prenatal care received
- OUD identified, but patient was not counseled/assessed for readiness to start MAT and referral to treatment (SBIRT)
- OUD identified, patient received counseling (SBIRT), but declined BHC/RTS and MAT
- OUD identified, patient received counseling (SBIRT) and was linked to BHC/RTS but declined MAT
- Providers/staff didn't document
- OUD identified, patient received counseling (SBIRT) and ready for MAT, but MAT treatment providers not available
- MAT not indicated. Describe why not: \_\_\_\_\_

**2. Select all the steps in the OUD protocol that were completed prenatally OR during delivery admission unless otherwise noted.**

- Patient was screened for OUD using a validated screening tool  prenatally AND  on L&D
- OB provider was notified of positive screen and documented provider assessment of OUD diagnosis
- Patient was counseled (SBIRT) on OUD risks, benefits of treatment, assessed for readiness for treatment (MAT)
- Patient was navigated to MAT
- Patient was navigated to Behavioral Health Counseling/Recovery Treatment Services
- Patient received Behavioral Health Counseling/Recovery Treatment Services
- OUD clinical care checklist in chart
- Prenatal pediatric consult (or during delivery admission) to discuss NAS and non-pharmacologic care of newborn
- Patient received education materials / counseling on OUD / NAS and engaging in opioid exposed newborns care

**3a. Does patient have a completed OUD Clinical Care Checklist (completed prenatally or during delivery admission)?**

- Yes
- No

**3b. If no, why? Please select all that apply**

- OUD not identified by clinical care team
- Providers/staff didn't have access to checklist
- Provider/staff didn't know they needed to complete checklist for patients with OUD
- Providers/staff didn't document care received
- Checklist was in chart but not completed

**4. Select all items in the OUD Clinical Care Checklist that were completed prenatally or during delivery admission.**

- Referral to BH Services/Recovery Treatment Services
- MAT provided and documented
- Narcan counseling and prescription offered and documented
- Hepatitis C screening and provided and documented
- Contraception Counseling provided and documented
- Behavioral Health/Social Work Consult provided and documented
- OUD/NAS Neonatal/Pediatric consult provided and documented
- Education on OUD and Engaging in Opioid Exposed Newborn Care provided and documented
- Close OB follow up visit scheduled (if postpartum an early OB postpartum visit scheduled within 2 weeks)
- Warm handoffs / close follow up used to link to services and treatment

Version 2, date 10/31/2019



*Not a Robin*

# ROUND ROBIN: SHARING KEY STRATEGIES FOR SUCCESS

## Please share your MNO-OB Team's status...



- ✓ How is your QI team and QI projects in this new climate?
- ✓ What is left to move all structure measures to green?
- ✓ How is your team doing on achieving aims? Providing optimal care for every patient with OUD prenatal/L&D?
- ✓ How has your team implemented a universal validated screening tool prenatally and on LD?
- ✓ What system(s) have you put into place to ensure success for your MNO Folders?
- ✓ OB Provider/Nursing Education – what have you done so providers/nurses understand optimal OUD care?
- ✓ Monthly case reviews of all OUD cases & providing feedback to the clinical team (Missed Opportunities)

# Hospitals Sharing Today...



Palos Community Hospital  
Passavant Hospital  
Riverside Medical Center  
Roseland Hospital  
Rush University Medical Center  
Rush-Copley Medical Center  
Sarah Bush Lincoln  
Silver Cross Hospital  
SSM Health Good Samaritan  
SSM Health St. Mary's Hospital-  
Centralia  
SSM St. Mary's Hospital - St.Louis  
St. Anthony Hospital  
St. Bernard Hospital  
St. John's Hospital  
St. Joseph Hospital - Breese  
St. Joseph Medical Center - Joliet  
St. Margaret's Hospital

Stroger Hospital of Cook County  
Swedish American Hospital  
Swedish Covenant Hospital  
Touchette Regional Hospital  
Unity Point Health Methodist  
UnityPoint Health Trinity  
University of Chicago Medical  
Center  
University of Illinois Hospital &  
Health Sciences System (UIC)  
Vista Medical Center East  
West Suburban Medical Center  
Westlake Hospital

# Upcoming MNO-OB Teams Calls

Date	Topic
May 2020	No MNO-OB Teams Call (F2F & Memorial Day)
June 22, 2020	MNO-OB Finishing Strong & Transitioning to Sustainability, Round Robin Discussion
August 24, 2020	MNO-OB Finishing Strong & Transitioning to Sustainability, Round Robin Discussion

# PROMOTING VAGINAL BIRTH (PVB)

# Statewide Recruitment Open NOW



## Roster Forms NOW OPEN for ILPQC

### Promoting Vaginal Birth Initiative

- We understand that hospitals need time to focus on COVID 19 and also to cross the finish line with the MNO Initiative for the successful sustainability of this vital work.
- Currently, we have opened hospital team rosters for PVB Wave 2
- We have let teams know that submitting a roster at this time does not mean they will be starting work right now, but ensures their team gets a PVB Toolkit along with the needed communications
- Hospitals can submit team's roster form by [clicking here](#).

# PVB QI Team Roster

## Required

- Team lead
- OB lead
- Nurse lead



## Suggested

- Anesthesia rep
- Outpatient rep
- QI Professional
- Patient/family member
- Doula/midwife rep
- Administrative leader champion
- Other team member

Roster  
forms  
[available  
here](#)

**PVB Smart Aim:** To support vaginal birth and reduce primary cesareans to reach the Healthy People goal for low risk cesarean section target rate of 24.7% by December 2021

## Key QI Strategies

1. Facilitate clinical culture change that promotes and supports vaginal birth

2. Develop standardized processes for induction and labor support

3. Develop standardized protocols for identification and response to labor and/or fetal heart rate abnormalities

# PVB Timeline



Apr	May	July	Sept
<b>Apr 15:</b> Wave 1 Call  Recruit statewide teams	<b>May 4:</b> PVB Launch Call with CMQCC speaker  <b>May 20:</b> OB Face-to-Face Meeting, Springfield, IL	<b>Jul 27:</b> PVB Initiative Webinar	Monthly PVB webinars and Data Collection Begins

PVB Launch Call Webinar Information: May 4, 2020, 11am-12:30pm

[JOIN WEBINAR](#) +1-312-535-8110, access code: 287 886 540

Password (if prompted): ILPQC



THANKS TO OUR

FUNDERS



**JB & MK PRITZKER**  

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**Family Foundation**

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