



ILPQC Neonatal Advisory Call

November 6th , 2017

1:00 – 2:00 pm

Overview

- Updates
- Annual Conference
 - Registration
 - Neo Team Survey
 - Abstract Poster Session
- Golden Hour Updates
 - Annual Conference QI Awards
 - Sustainability
- Data Review
- MNO Updates
 - Workgroup
 - OB Advisory
 - State PQC Meetings
 - AIMS, Measures
- Next Steps & Questions

Introductions



- When called on, please tell us:
 - Name
 - Role
 - Institution
- Please also enter this information into the chat box!

ILPQC 5th Annual Conference Save the Date!



Tuesday,
December 19,
2017

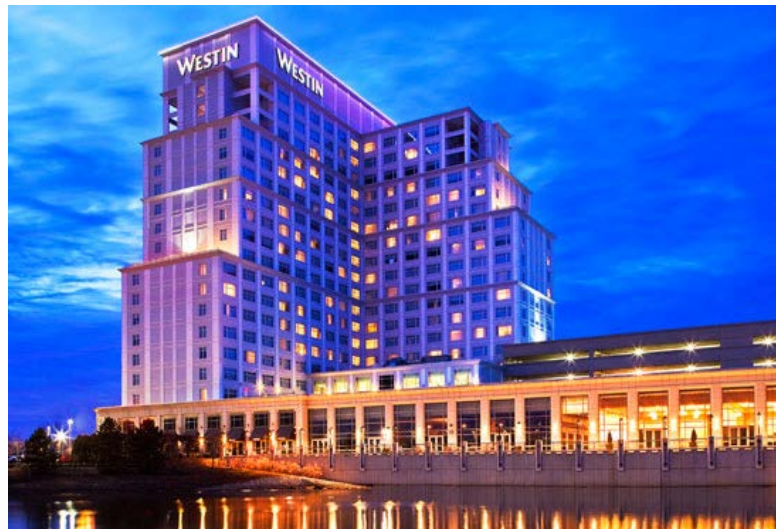
Westin Lombard

REGISTRATION IS OPEN!

<https://www.eventbrite.com/e/illinois-perinatal-quality-collaborative-5th-annual-conference-tickets-39493819076>

Annual Conference Hotel Block Room Reservations Now Available

- <https://www.starwoodmeeting.com/events/start.action?id=1710035949&key=21CC118E>
- Group rate of \$139 single/double available until Nov 27, 2017



NOW ACCEPTING Poster Abstracts

- We are asking **ALL ILPQC TEAMS** to submit an abstract sharing the great Severe Maternal HTN or Golden Hour QI they've done including plans for sustainability / ongoing work in 2018
- Teams are welcome and encouraged to submit additional abstracts regarding mothers and newborns affected by opioids, IPLARC, patient & family engagement or other QI projects teams want to share
- Submit abstracts by **November 13th** to qualify for awards of excellence.
- Late Breaking abstracts may be submitted through Nov 27th



***Submit abstracts online:
https://www.surveymonkey.com/r/ILPQC_5th_ACAbstractSubmission***

2017 Annual Conference Agenda



8:00-8:45	Welcome – TBD & Year in review – Ann
8:45-9:30	Keynote - Matthew Grossman (MNO, Neonatal/Newborn)
9:30-9:45	Break
9:45-11:15	3 leaders from State PQCs (Carole Lannon- OH, Julie DeCesear-OH, Brenda Barker - TN)
11:15-12:00	Plenary- Tamela Milan (MNO, Patient & Family)
12:00-1:30	Lunch & Poster Session
1:30-2:15	Plenary- Melinda Campopiano (MNO, OB)
2:15-3:00	Plenary - Amy Crockett (IPLARC)
3:00-3:15	Break
3:15-5:00	Breakouts: OB, Neo, Patient & Family Engagement
5:00-5:15	Wrap-Up & Evaluation

GOLDEN HOUR UPDATES

Golden Hour: 2017



- All team communications measures (80% or greater)
 - Pre-brief
 - Checklist
 - Debrief
- All family engagement measures (90% or greater)
 - Pre-resuscitation
 - During resuscitation
 - At NICU admission
- Temperature of infants upon NICU admission at 36.5-37.5°C (90% or greater)
- Delayed cord clamping (80% or greater)

ANNOUNCING:

QUALITY IMPROVEMENT RECOGNITION AWARDS



ILPQC GOLDEN HOUR INITIATIVE

GOLD

- ✓ Data submitted for January – October 2017
- +
- ✓ 4 target process measures at goal*

SILVER

- ✓ Data submitted for January – October 2017
- +
- ✓ 3 target process measures at goal*

BRONZE

- ✓ Data submitted for January – October 2017
- +
- ✓ 2 target process measures at goal*

Award Criteria Based on September OR October 2017 Data (Due November 15)

*4 Target Process Measures:

- Delayed cord clamping rate at 80% or higher
- Temperature in target range at NICU admission rate at 90% or higher
- Communications measures (brief, checklist, debrief) rates at 80% or higher
- Family engagement measures (pre, during, and NICU admit) rates at 90% or higher

GH Teams Survey



Due Monday, November 27th

[https://www.surveymonkey.com/r/
NeoTeamsSurvey2017](https://www.surveymonkey.com/r/NeoTeamsSurvey2017)

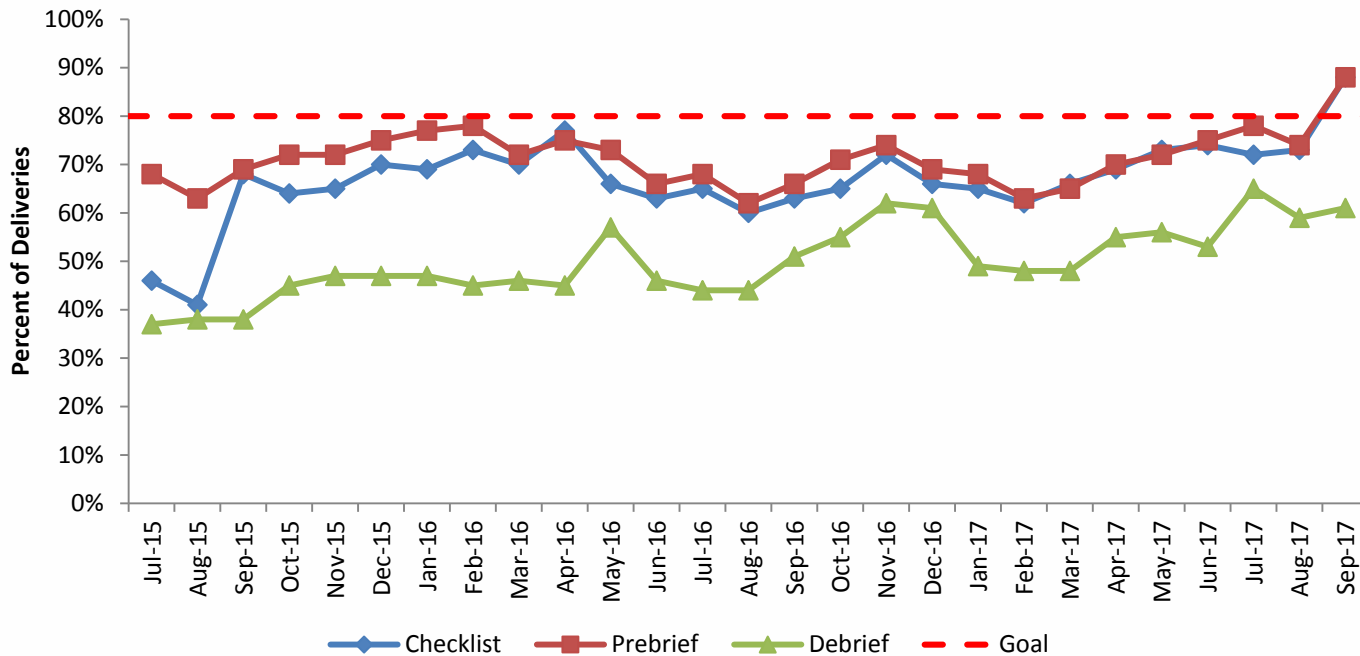
One GH Team member fills out per
team

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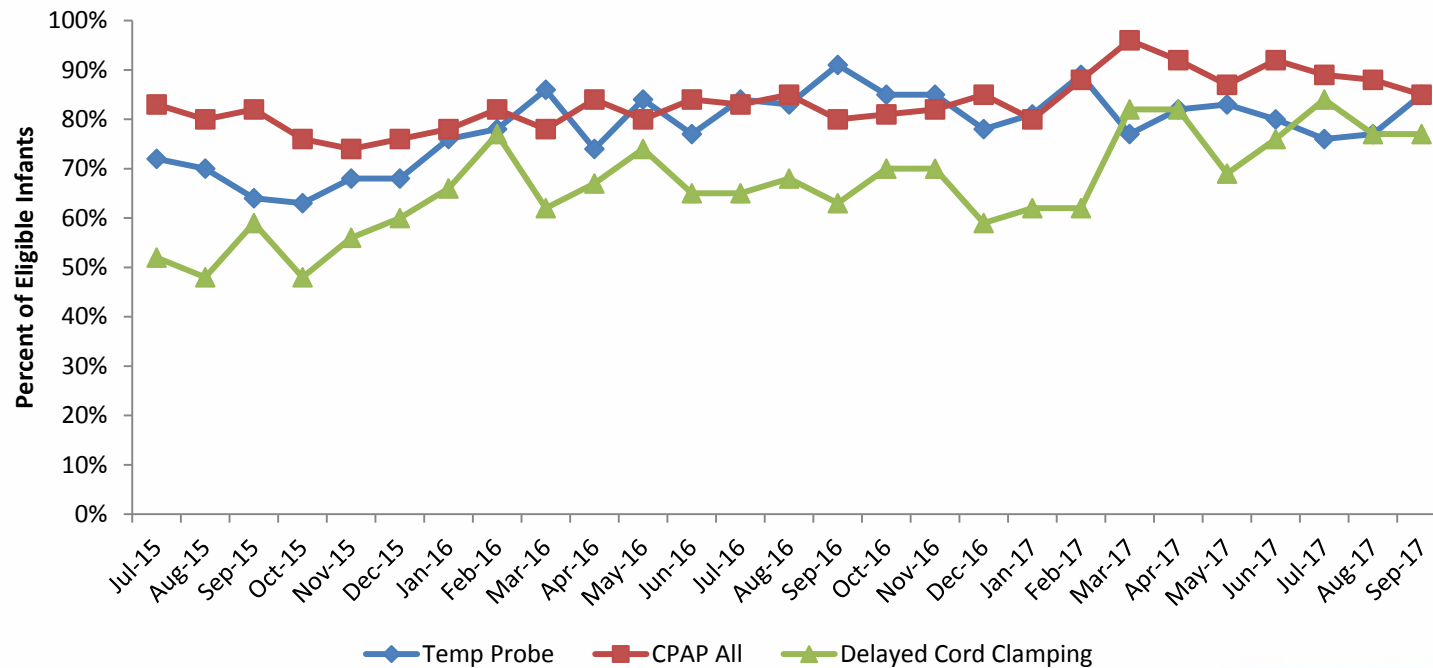
GOLDEN HOUR DATA REVIEW

ILPQC: Golden Hour Initiative

Communication Practices: Percent of Deliveries Utilizing Delivery Room Checklist, Prebrief, & Debrief All Hospitals, 2015-2017

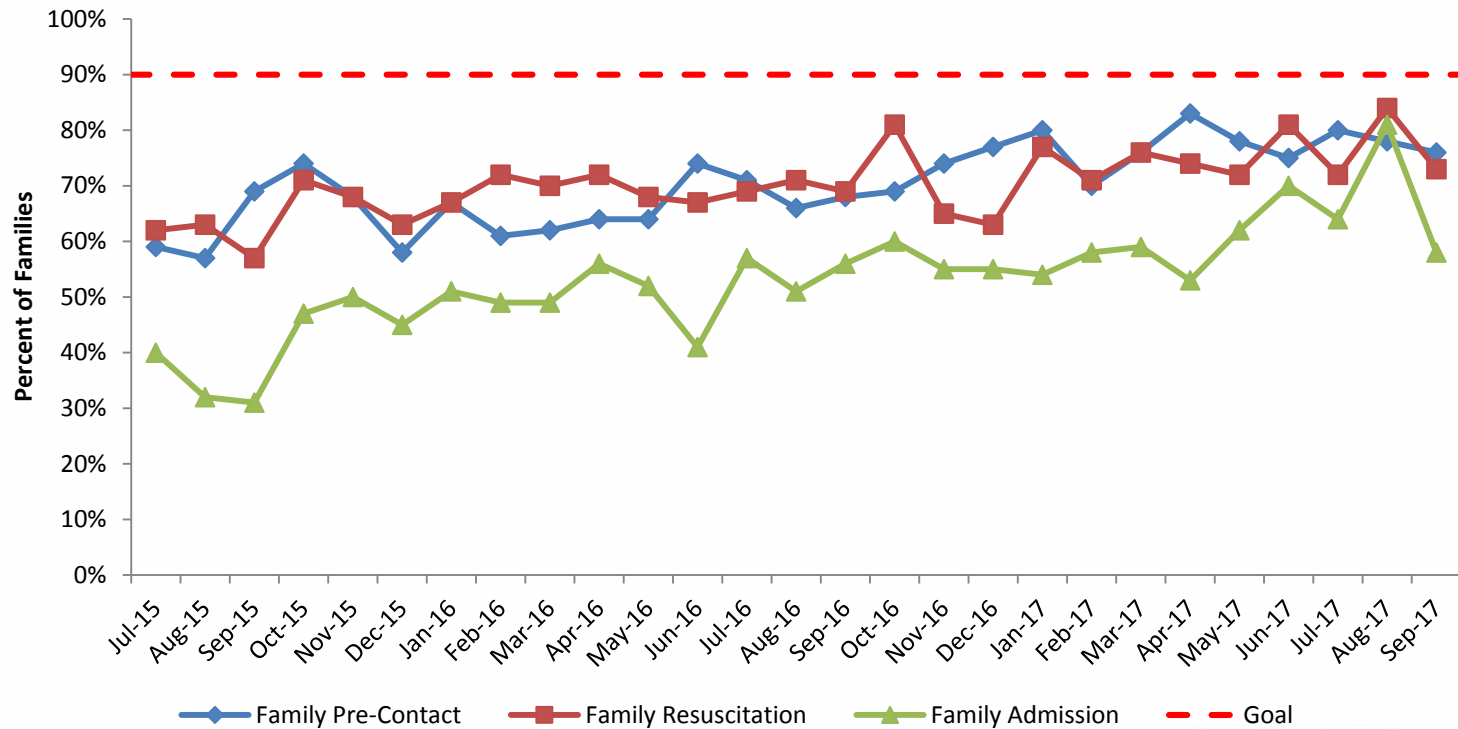


ILPQC: Golden Hour Initiative
Delivery Room Practices: Percent of Eligible Infants with
Temp Probe Initiated within 10 minutes, Initially Stabilized
with CPAP Trial, & Delayed Cord Clamping 30-60 Seconds
All Hospitals, 2015-2017

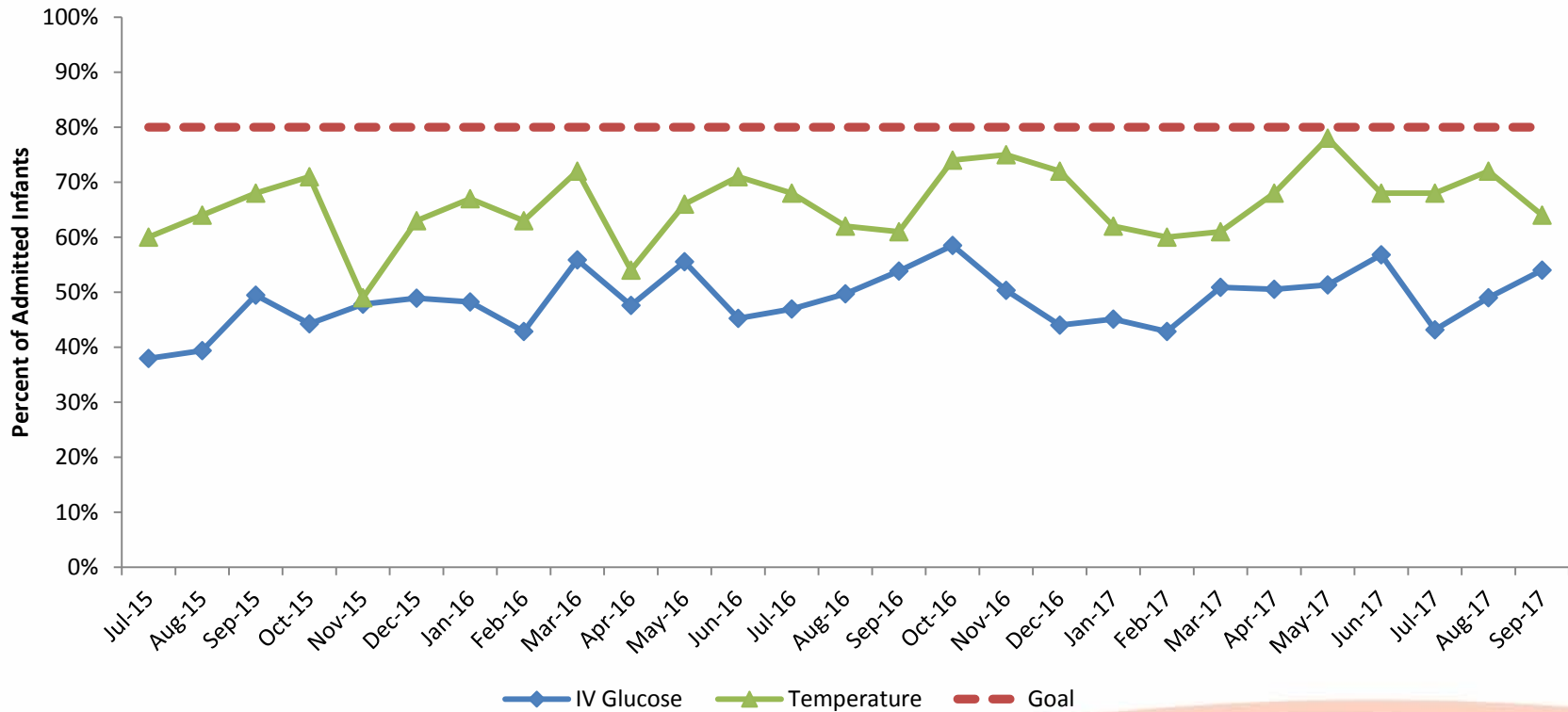


ILPQC: Golden Hour Initiative

Family Practices: Percent of Families Receiving Pre-Contact, Present During Admission, and Present During Resuscitation All Hospitals, 2015-2017



ILPQC: Golden Hour Initiative
Admission Practices: Percent of Admitted Infants who are Between 36.5-37.5°C on Admission (<32 weeks) & who Received IV Glucose within 1 Hour of NICU/Specialty Care Nursery Admission
All Hospitals, 2015 - 2017



Golden Hour Team Calls Schedule

- November 21:
 - Sustainability

MOTHERS AND NEWBORNS AFFECTED BY OPIOIDS (MNO) PLANNING

MNO Alignment with State of Illinois Opioid Action Plan



Prevention: Preventing the further Spread of the Opioid Crisis

Priority	Strategy	ILPQC
Priority A: Safer prescribing and dispensing	Strategy 1: Increase PMP use by providers	Increase the % of prenatal providers using the Illinois Prescription Monitoring Program
	Strategy 2: Reduce high-risk opioid prescribing through provider education and guidelines	Increase % of hospitals with protocols for safe prescribing practices for routine cesarean section and vaginal birth
Priority B: Education and stigma reduction	Strategy 3: Increase accessibility of information and resources	Increase % of hospitals providing primary prevention materials to their outpatient OB clinics
Priority C: Monitoring and communication	Strategy 5: Strengthen data collection, sharing, and analysis to better identify opportunities for intervention	Increase % of participating birthing hospitals having entered any opioid process and outcome measure data into the ILPQC Data & Reporting System to monitor their improvement over time and in comparison to birthing hospitals

MNO Alignment with State of Illinois Opioid Action Plan



Treatment and Recovery: Providing evidence-based treatment and recovery services to Illinois residents with opioid use disorder (OUD)

Priority	Strategy	ILPQC
Priority D: Access to Care	Strategy 6: Increase access to care for individuals with opioid use disorder	Increase % of prenatal providers with validated screening protocols for OUD in pregnancy
		Increase % of birthing hospitals who have identified community resources for outpatient medical management of OUD for pregnant/postpartum women and have created a referral protocol
		Increase % of birthing hospitals who have trained providers and staff on protocols for referring pregnant and postpartum women for outpatient medical management of OUDs
		Increase % of buprenorphine prescribers for pregnant/postpartum women

MNO Alignment with State of Illinois Opioid Action Plan



Response: Averting Overdose Deaths	
Priority	ILPQC
Priority F: Rescue	Increase % of mothers, of newborns with known exposure to opioids, screened in pregnancy
	Increase % of mothers, of newborns with known exposure to opioids, linked to opioid management and follow up during pregnancy and postpartum
	Increase % of newborns with known exposure to opioids receiving reliable newborn screening
	Increase % of newborns with known exposure to opioids receiving consistent, non-pharmacological treatment
	Increase % of hospitals using evidence-based NAS pharmacological treatment guidelines

- To reduce variation in identification and treatment and optimize care (**This is Ohio's**)
- To decrease length of hospital stay
- To decrease the use of pharmacological therapy in substance exposed neonates (SEN)
- To increase the percentage of SENs receiving EI services

- Medication-Assisted Treatment(MAT)
- Prenatal consult
- SW in hospital
- Type of opiod and polysubstance
- Hospital location and maternal residence
- Standardization of screening
- Rooming in and location in hospital
- BM/T22
- Standardization of assessment
- Standardization of non-pharm therapy
- Standardization of pharm therapy
- Non-pharm length
- Pharm length
- LOS
- EI enrollment
- Number of EI visits
- Caregiver attitude
- Family metric
- Readmission and death and DCFS

MNO Timeline



Tasks	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18
Develop QI Initiative (AIMS, Measures, Data Form)								
Recruit and Launch Wave 1: with OB & Neonatal Teams (test data process)								
Launch Wave 2 with all hospital teams								

Ongoing input from IDPH NAS Committee, OB Advisory Workgroup, AIM Maternal Opioid Collaborative

MNO Workgroup Updates



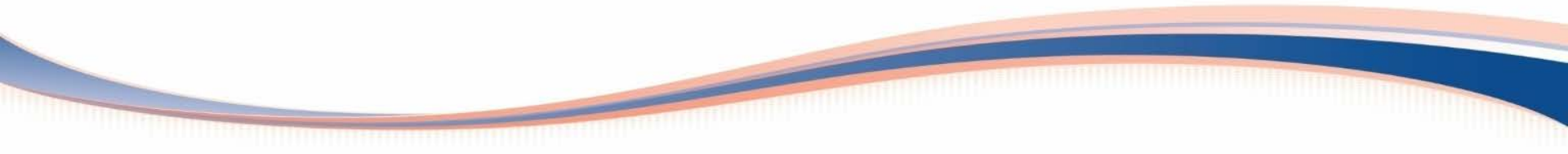
- 50 members of the ILPQC MNO Workgroup
- Two patient/family advisors Tamela Milan and Tracy Patton
- Meet 3rd Monday of month from 1-2pm
- Review of other state PQC NAS Initiatives (July)
- Review of literature by NAS topic area (Aug-Nov)
- QI methodology discussions

MNO Workgroup Updates



- ILPQC Neo and OB leadership meeting with other state PQCs to discuss possible aims and measures for MNO Workgroup
 - OB stakeholders from the MNO Workgroup and Advisory Group will develop OB aims and measures
 - How will Neo stakeholders from the MNO Workgroup and Advisory Group work together and coordinate efforts?

Potential Advisory Group Tasks

- QI science and methodology
 - Develop AIM statements and system, process, and outcome measures
 - Develop data collection and reporting tools
 - Develop data collection with plans for sustainability measures up front
 - Develop improvement roadmaps
- 

- DUE DATES:
 - ABSTRACT SUBMISSION: Monday, November 13th
 - QI AWARD DATA SUBMISSION: Wednesday, November 15th
 - GH SURVEY SUBMISSION: Monday, November 27th
- MNO Call on November 20 & GH Team calls on November 21
- Annual meeting December 19th

THANKS TO OUR SPONSORS



IDPH