



TIPQC

Tennessee Initiative for
Perinatal Quality Care

October 2020



TIPQC Team!



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Connie Graves, MD
State Project Leader



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State Project Leader



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Officer for Health Equity

3 Key Ideas

1. **OUD & OEN Project**
2. Additional Projects
3. Health Equity and Racial Disparities



Opioid Use Disorder in Pregnancy (OUD) Project



Over 2,600 delivery charts audited through Aug 2020

- 94% had SUD screening documented, only 32% with a validated screening tool (up from 25% in Jan)



Data on over 850 pregnant women with OUD

- 83% received MAT treatment
- 16% have been provided a Narcan prescription (up from 1% in Jan)
- 62% have had their contraception plan confirmed

* Data as of 10/7/20

Results – Maternal Outcomes

Outcome	All	
	Jun-Sep '19	Apr-Jun '20
Received Medically Assisted Treatment (MAT) at any point during the pregnancy	65% (160/244)	83% (99/120)
Receiving MAT at the newborn's discharge	45% (110/244)	72% (86/120)
Contraception plan confirmed prior to maternal discharge	61% (148/244)	62% (74/120)
Provided Narcan prescription prior to maternal discharge (includes prenatal prescription)	2% (4/244)	16% (19/120)

Opioid Exposed Newborn (OEN) Project



995 opioid exposed infants enrolled (up to 9/30/2020)



86% roomed in with caregiver(s) for at least part of the stay



Length of Stay: Median 5 days for OEN and 18 days for those who required pharmacologic therapy (28%)

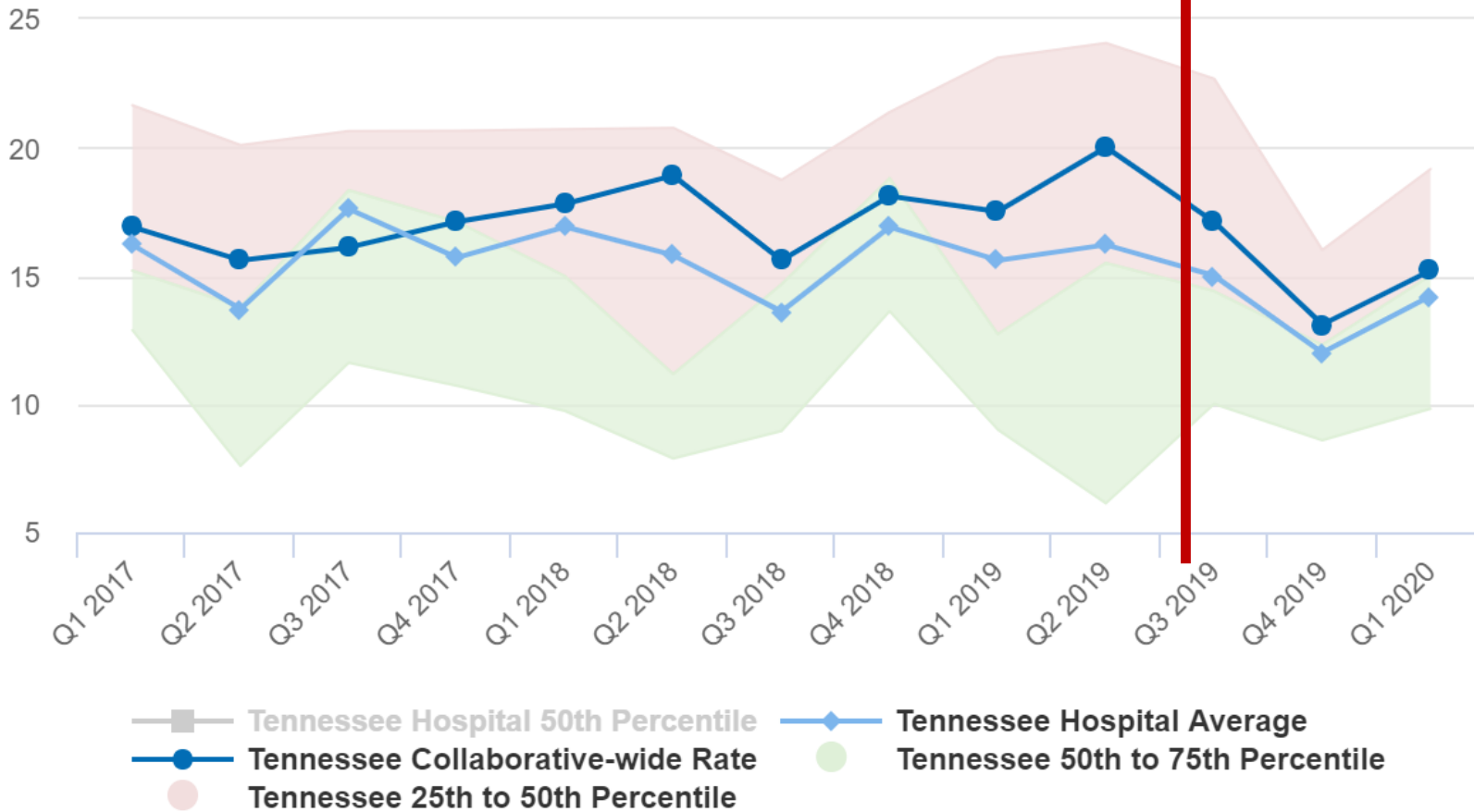
** Data as of 10/1/20*

Status as of Round 4

OUD Progress in Care Survey Aggregate Results <i>(as of 5:30 PM CST 7/13/2020)</i>										
<i>0 = Haven't started yet; 1 = Working on it; 2 = In place</i> <i>N* - Number of items "In place"</i>										
Hospital	Date last completed	Screening process (validated tool) SBIRT protocol Local OUD Treatment Resources Map Standardized management of patients Education - pregnant women w/ OUD (and families) Education - providers & nurses Education - all pregnant/postpartum patients Pain management / overprescribing							N*	
			Jul '20	2	2	2	1	2		2
	Jul '20	2	1	1	1	2	2	1	1	3
	Jul '20	2	2	2	1	1	1	0	0	3
	Jul '20	2	2	0	0	1	0	2	0	3
	Jul '20	2	1	2	1	1	1	1	1	2
	Jul '20	1	2	1	1	1	2	1	2	3
	Mar '20	1	0	2	1	1	2	1	1	2
	Jul '20	2	2	2	1	1	1	1	1	3
	Jul '20	1	1	2	1	1	1	1	1	1
	Jul '20	1	0	1	1	2	2	2	2	4
	Jul '20	1	0	0	0	0	0	0	0	0
	Mar '20	2	1	1	1	1	2	1	1	2
	Jan '20	1	1	2	1	1	1	1	1	1
	N*	7	5	7	0	3	6	3	3	



Average length of stay for newborns with Neonatal Abstinence Syndrome (NAS)

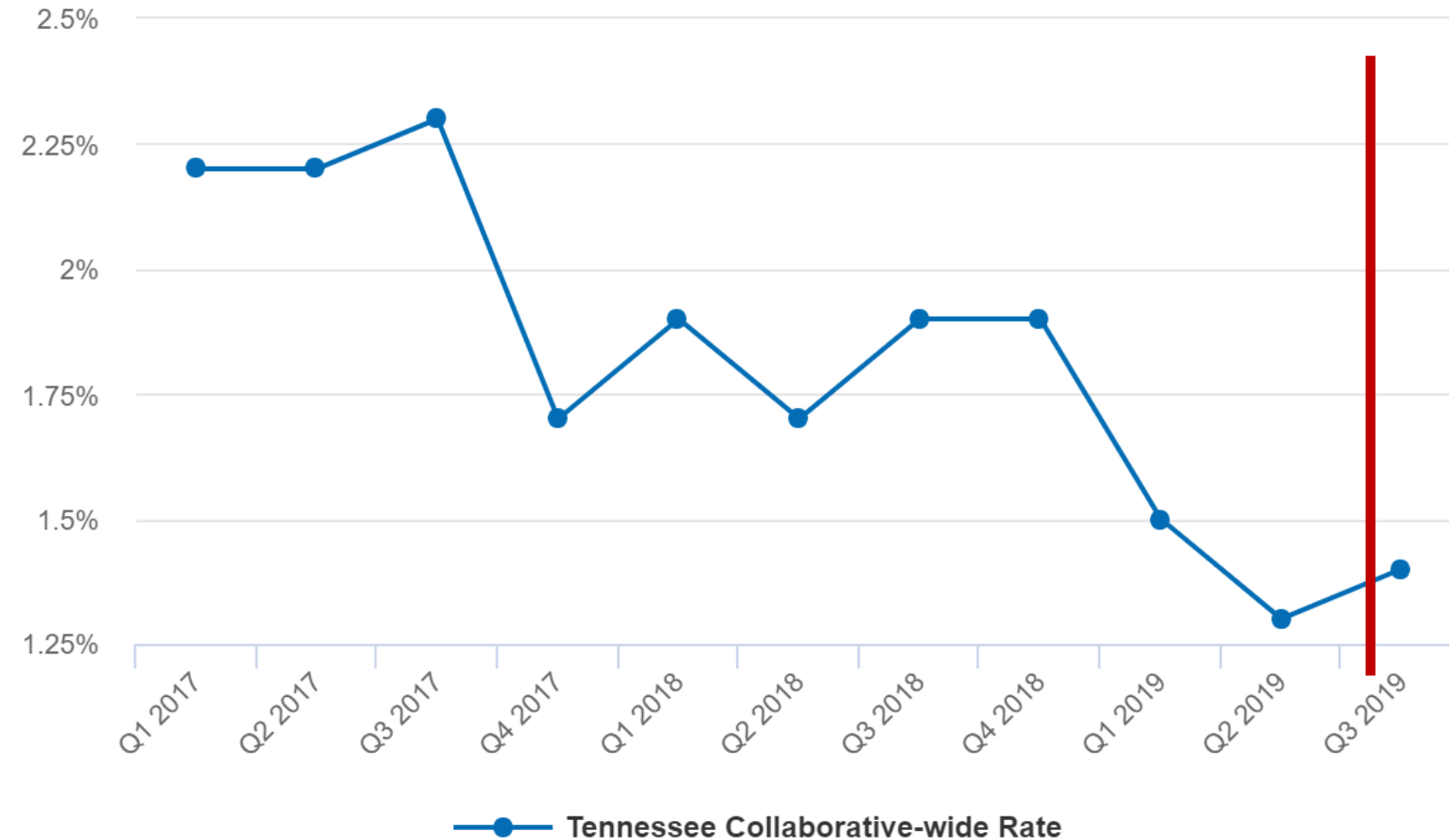


- See the impact of the hospitals with a high avg LOS on the Hospital avg & Collaborative-wide rate prior to Q3 2019
- See the variation in the avg LOS decrease in Q4 2019 & Q1 2020
- Avg LOS before Q3 2019 = 16 days
- Avg LOS Q3 2019 on = 14 days

Hospital Average vs Collaborative-wide Rate

- The **Hospital Average** is the mean of the hospital rates: all hospitals, big or small, count the same towards affecting that rate. It can be thought of as the typical hospital performance. Outlier rates may have a large impact.
- The **Collaborative-Wide rate** is the sum of the numerators from each hospital divided by the sum of the denominators. It is the aggregate rate for all participating hospitals. This can be thought of as the expected risk of SMM for a woman giving birth at a participating hospital -- or as a weighted average of hospital performance (where hospitals count according to their volume -- so big hospitals count more than small hospitals).

Percent of newborns diagnosed with NAS



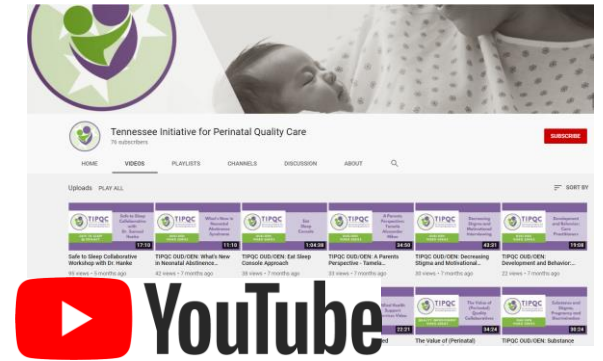
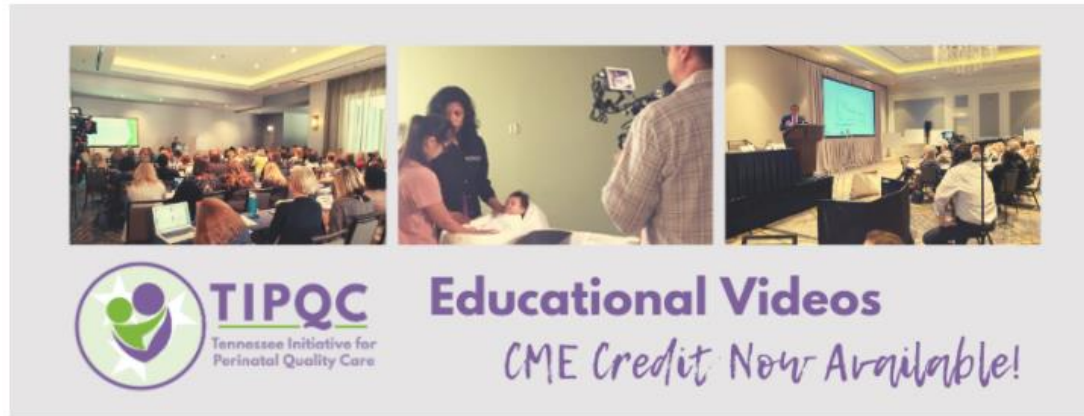
- Unfortunately chart does not include our Q4 2019 or Q1 2020 data points

- The ***Collaborative-Wide rate*** is the sum of the numerators from each hospital divided by the sum of the denominators. It is the aggregate rate for all participating hospitals. This can be thought of as the expected risk of SMM for a woman giving birth at a participating hospital -- or as a weighted average of hospital performance (where hospitals count according to their volume -- so big hospitals count more than small hospitals).

OUD & OEN Educational Videos



Opioid Projects



The 4th Trimester and Postpartum Relapse Prevention

Allied Health Support Services

Care of the Opioid Exposed Newborn: A Panel Discussion

Eat, Sleep, Console Scoring

Development of the OEN and Early Intervention – Parent and Provider focus (2 films!)

Intrapartum Pain Management

Medication Assisted Treatment: A Patient's Journey to Recovery

Motivational Interviewing and Reducing Stigma

Opioid Use Disorder: A Parent's Journey

Opioid Use Disorder: Discussion on Treatment Options

Overview of Neonatal Abstinence Syndrome (NAS)

Safe Baby Courts: Tennessee Courts

Shared Decision-Making Involving Mothers with Substance Use Disorder

Social Services

Substance and Stigma, Pregnancy and Discrimination

Additional Films Coming Soon!

Learning Sessions



Family Cultural Perspectives on Safe Sleep



Patients & Families



CAROLINE ROSE HEARD
8/29/17 - 12-27-17



Projects

39

Teams

1,846

All Learners
(+26 in September)

16,324

Total Completed Modules
(+1,508 in September)

Center of Excellence: 100% of Core Learners must complete all 18 Modules

Completed Teams

- East Tennessee Children's Hospital
- Methodist LeBonheur Germantown Hospital
- Saint Francis Hospital - Bartlett
- Saint Francis Hospital - Memphis
- Saint Thomas Midtown
- Saint Thomas River Park
- Saint Thomas Rutherford
- TriStar Hendersonville Medical Center

> 75% Complete

- Baptist Memorial Hospital 76%
- Tennova Healthcare-Harton 83%
- University of Tennessee Medical Center 83%
- Williamson Medical Center 75%

% of Core Learners completed all modules

* Completion data through 9-30-2020

3 Key Ideas

1. OUD & OEN Project
2. **Additional Projects**
3. Health Equity and Racial Disparities



Other Projects

Maternal Projects

- IPPLARC—Sustainment
- HTN—Piloting with National Preeclampsia Foundation BP Cuff & AWHONN's POST BIRTH Signs



Infant Projects

- Safe to Sleep
- iNICQ Transitions of Care

Potential

- Hepatitis C Screening

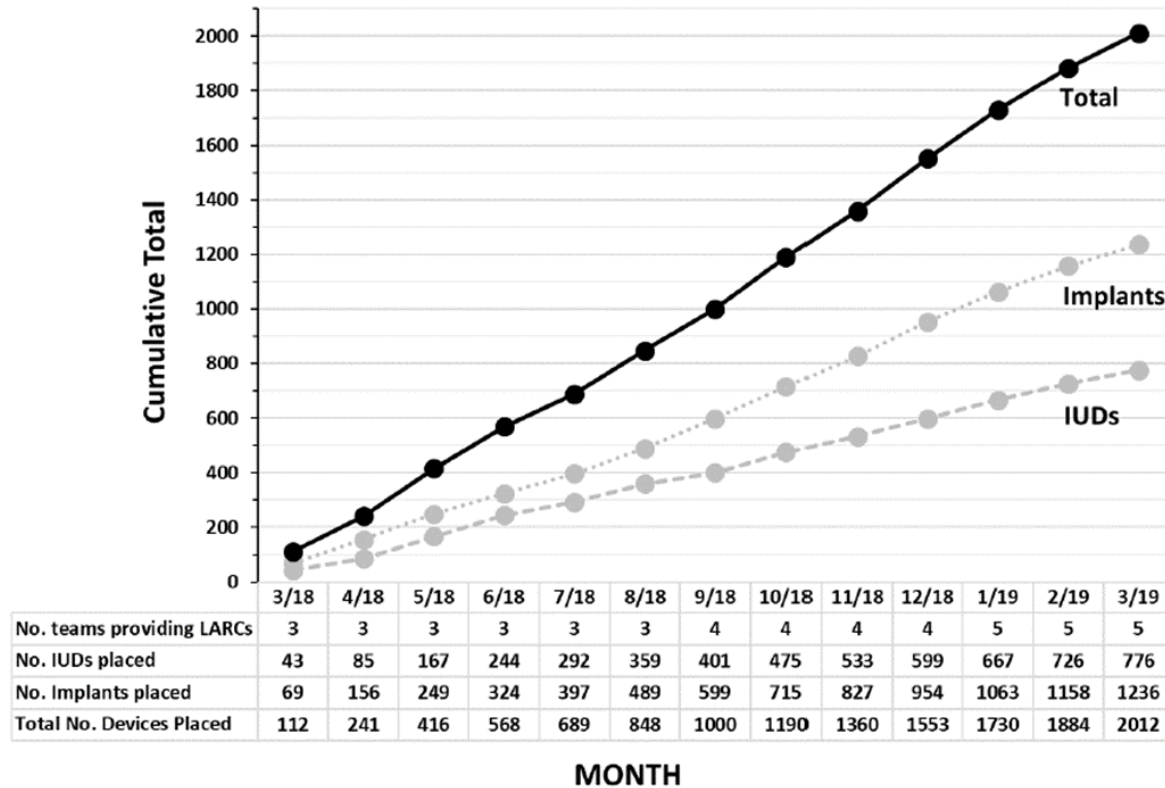


IPPLARC Project



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Total Number of Devices Placed



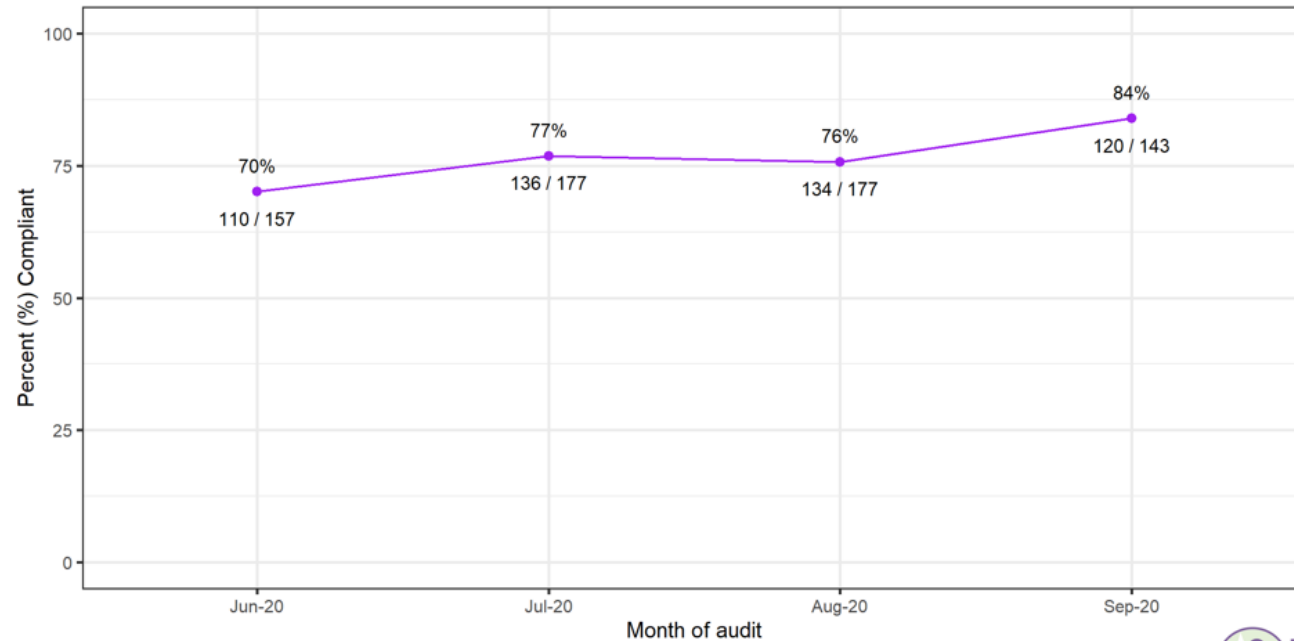
Lacy, M M, Baird, S M, Scott, T A, Barker, B, Zite, N. (2020). "Statewide quality improvement initiative to implement immediate postpartum long-acting reversible contraception" *American Journal of Obstetrics & Gynecology* (2019) DOI: 10.1016/j.ajog.2019.11.1272

Safe to Sleep Project



- 13 teams doing monthly audits
- In alignment with TDH
- 70-84 % improvement with compliant audits

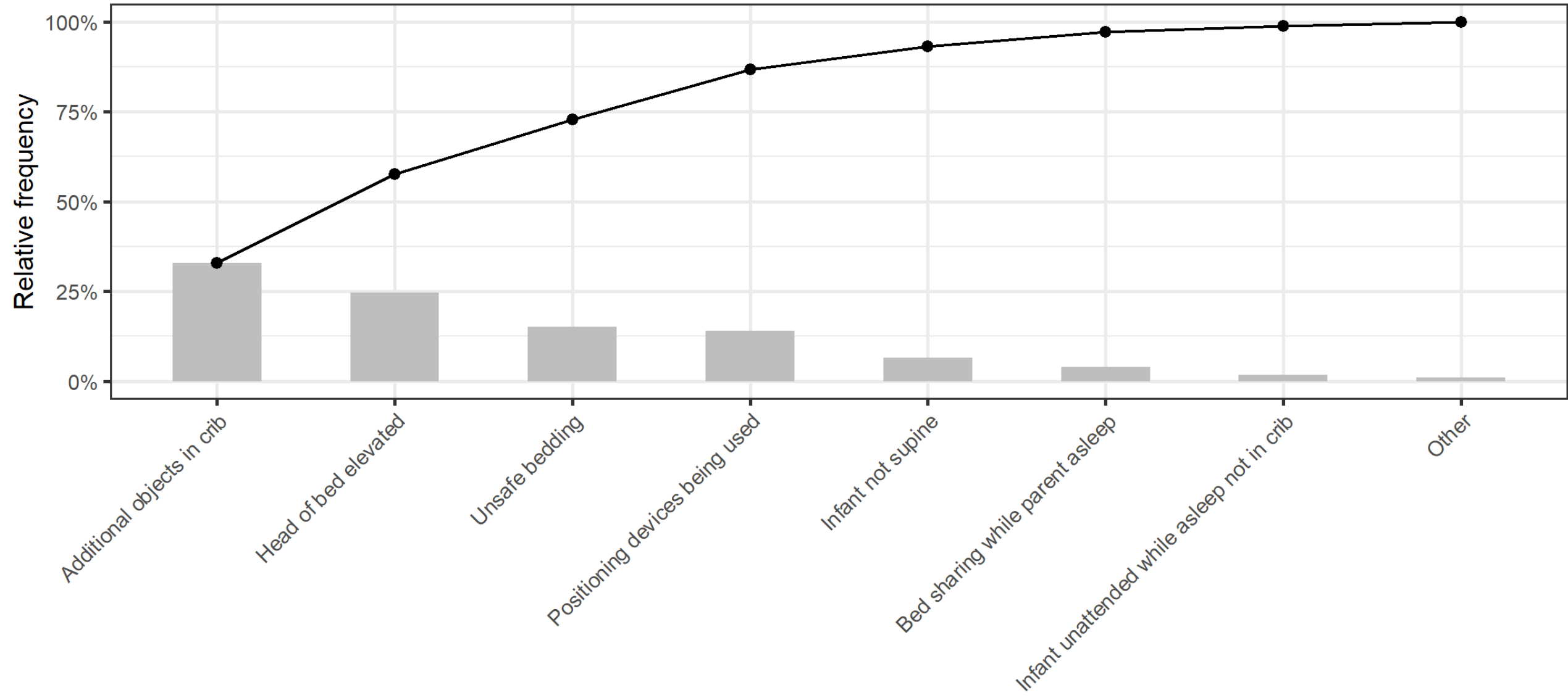
Percent of audits compliant with Safe Sleep recommendations*



* From those teams who audited in June - Sept

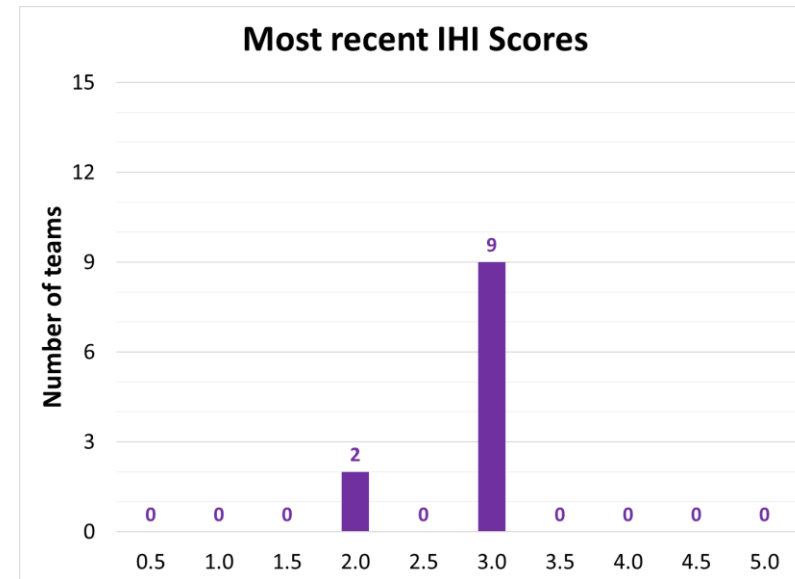
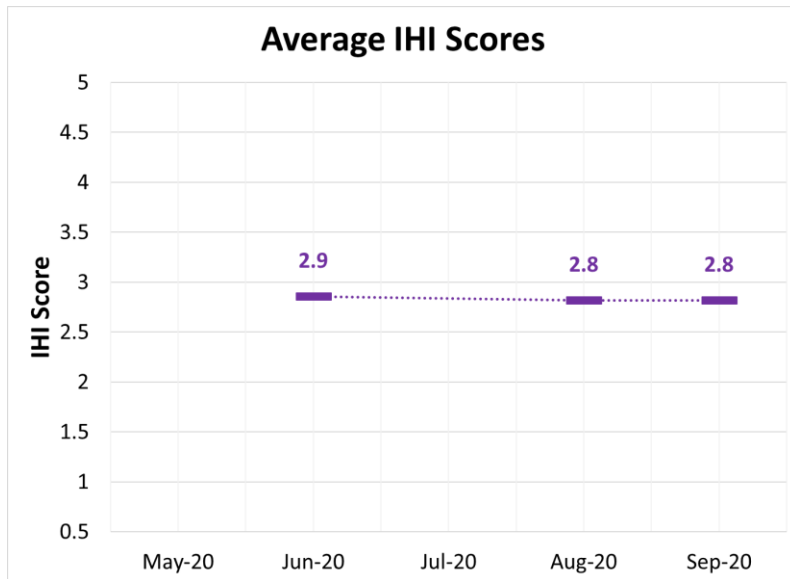
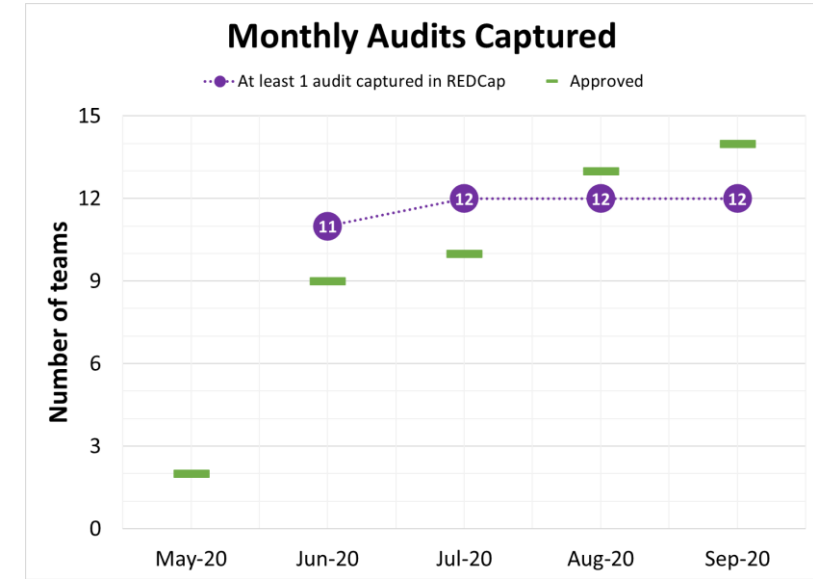
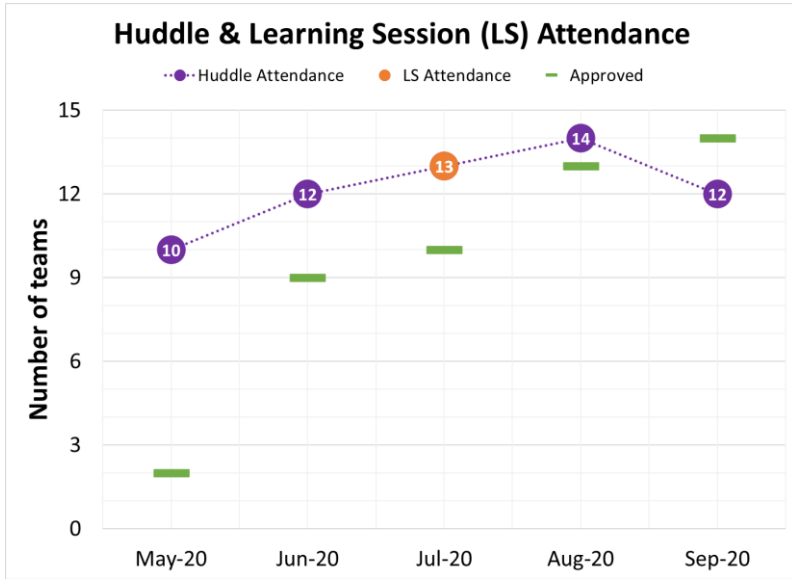


Reasons not compliant



* From those teams who audited in June - Sept

Project Vital Stats

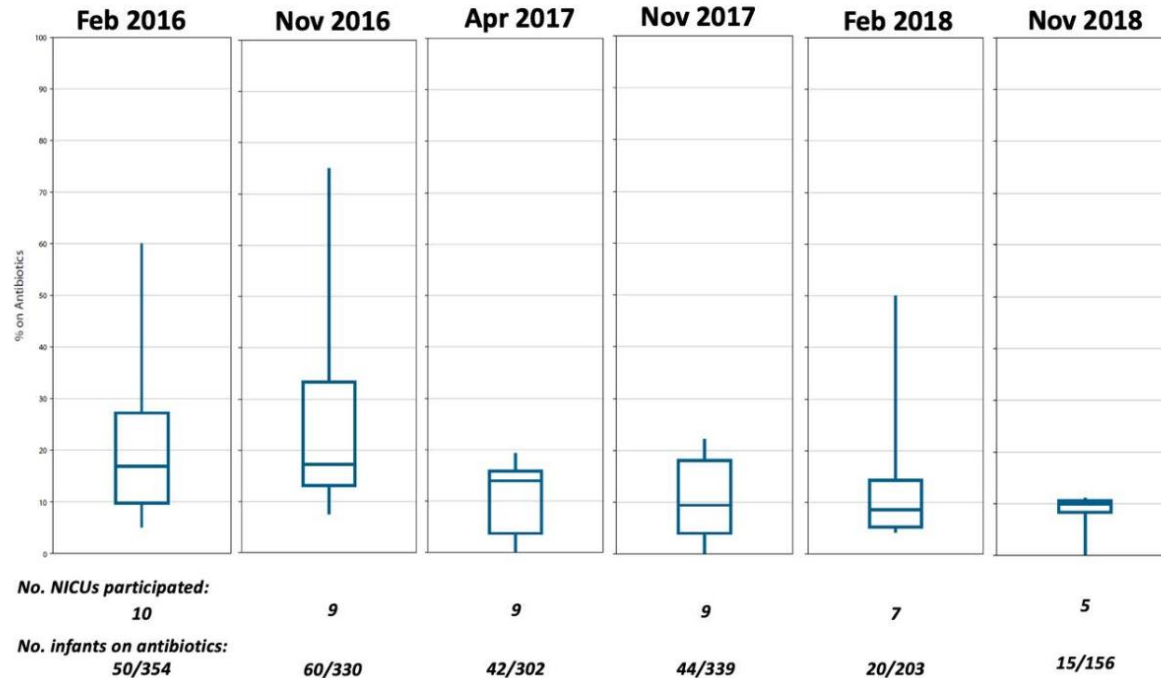


Antibiotic Stewardship Project



- 2016—2018 VON ABX
- 26-7 teams

“Choosing Antibiotics Wisely” VON Day Quality Audits Antibiotic Utilization Rate (AUR)



“The TN Neonatal Antibiotic Stewardship project brought a culture change amongst providers at all levels across the state.

The question 'why do we need antibiotics on this baby?' became a routine on rounds.”

Ajay Talati, MD, University of Tennessee Health Science Center

<https://tipqc.org/inicq-antibiotic-stewardship/>

Digital Resources



Operations



TIPQC Safe Sleep Project

The number of Sleep Related Infant Deaths continues to be unacceptably high in Tennessee. Upon investigation the Tennessee Department of Health feels that many of these deaths were preventable. As health care providers, we are a source of safe sleep education and should model safe sleep practices in our hospitals. TIPQC is excited to announce development of a Safe to Sleep project under the leadership of Dr. Courtney Gutman (UTMCK) that will kick off at the Annual Meeting. This project will be for Newborn Nurseries and for NICUs and have a limited data collection



The 2020 Annual Meeting is fast approaching! Have you registered yet? We have a great line

Monthly Ezine



Facebook (@tipqc1)



HOME PROJECTS MEETINGS QI RESOURCES OUR TEAM EVENTS CONTACT COVID-19



Improving care for mothers and

www.tipqc.org



Twitter (@tennesseepqc)

3 Key Ideas

1. OUD & OEN Project
2. Additional Projects
3. **Health Equity and Racial Disparities**



Health Equity

- Health Equity Officers: **Rolanda Lister, MD & Kristen Nobles, MD, PhD**
- Include racial/ethnic data in projects
- Statewide talks culminating at Annual Meeting
- Staff Training (Nettles)
- Speakers Bureau Talk



Speakers Bureau

- Speaker Training (National Speaker Coach, Matt Moran)
- Talks: OUD, Disparities, Maternal Hemorrhage, Hypertension, Safe To Sleep, OEN
- Resources—prepared talks, tool kits, speaker training
- Networking & collaborating across the state



<https://tipqc.org/speakers-bureau/>



**Feel free to recommend a colleague
Or let us know if you could share!**

Podcasts

Streaming Now

Healthy Mom Healthy Baby Tennessee™



A Podcast
Presented by:



Funded through Supplemental AIM Grant

<https://tipqc.org/healthy-mom-healthy-baby/>

Operations

Part One:
Racial Disparities in
Maternal Health
Outcomes

with Rolanda Lister, MD

Tuesday, September 29
5:00 p.m. – 6:00 p.m. CST



Part Two:
Health Equity:
Through the
Patient's Eyes

with Cornelia Graves, MD

Friday, October 30
2:00 p.m. – 3:00 p.m. CST



Part Three:
Addressing Injustices
in Maternal Care:
A Call to Action

with Danielle Tate, MD

Thursday, January 21
3:00 p.m. – 4:00 p.m.
CST





Special Thanks to Our Partners

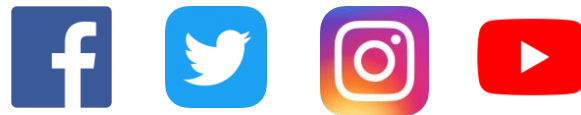


THANK YOU!



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www.instagram.com/tipqc1

www.youtube.com/channel/UCOZ0gpRWzimImh5XfsQdcvg/



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