



MNO- Neo Teams Call: Sustainability

January 4, 2021

1:00 – 2:00pm

Call Overview

- Housekeeping
- MNO-Neonatal Finishing Strong and Preparing for Sustainability
- BASIC Information

PATIENT FAMILY ENGAGEMENT PILOT



- Are you interested in getting small group and 1:1 support from LaToshia Rouse, national patient advisor and QI expert, to engage patients/ families in your QI work?



Capt. Wanda D. Barfield, MD Director, CDC Division of Reproductive Health

“Ms. Rouse is doing amazing work to give parents an audible voice in the Neonatal Intensive Care Unit,” Capt. Barfield says. “She is improving the quality of parental involvement in the care of their critically ill newborns.”

PATIENT FAMILY ENGAGEMENT PILOT



- Don't miss out on our patient family engagement pilot exclusively for ILPQC QI teams
 - A series of 5 monthly sessions with LaToshia Rouse to help your hospital get started with patient engagement starting mid - January 2021
 - Pilot the ILPQC Patient Family Engagement Toolkit
 - Please invite **OB and Neo** team members from your hospital (provider or nurse champion)
- LaToshia will offer a custom education and support program to the hospital team and any patient advisors identified during the process
- Don't miss the amazing opportunity to build your hospital capacity to engage patients and families in your work

Email us at
info@ilpqc.org
by January 7
to participate

ABP MOC Part IV!



- **Reminder for pediatric physicians:** It's not too late for 2020 ABP MOC Part IV Credit for participation in **MNO**. Please submit form to info@ilpqc.org
- **BASIC is qualified for MOC Part IV Credits in 2021**
- It's 25 points! ABP.org: *"...You must earn at least 40 points in Part 4 activities every five years..."*

Meaningful participation is defined by the ABP as having an active role in the QI initiative including:

- Intellectually engaged in planning and executing the project
- Implementing the project's interventions (the changes designed to improve care);
- Review data in keeping with the project's measurement plan; and
- Collaborate actively by attending team meetings

MNO-NEONATAL SUSTAINABILITY

MNO-Neonatal Excellence Award

Criteria for Optimal OEN Care



✓ All Data Submitted
+
✓ 4 Structure Measures In Place (Prenatal Consult, Pharmacologic Care, Non-Pharmacologic Care, Coordinated Discharge)
+
✓ <u>All</u> Process Measure goals met >70% Breastfeeding; <20% Pharmacologic Treatment; >95% Coordinated Discharge



CONGRATULATIONS

MNO-Neonatal Excellence Award for Optimal OEN Care

ILPQC MOTHERS AND NEWBORNS AFFECTED BY OPIOIDS INITIATIVE



- Advocate Children's- Oak Lawn
- Advocate Good Samaritan Hospital
- Advocate Sherman Hospital
- AMITA Alexian Brothers Medical Center
- AMITA St Mary's - Kankakee
- Edward Hospital
- Illinois Valley Community Hospital
- Little Company of Mary Hospital
- Loyola University Medical Center
- NM Central DuPage Hospital
- OSF St Francis Medical Center
- Palos Health
- SSM Health Cardinal Glennon Children's Hospital
- Swedish Covenant Hospital
- West Suburban Medical Center
- St. Louis Children's Hospital
- Advocate Children's - Park Ridge
- AMITA St. Alexius Medical Center

MNO-Neonatal QI Award of Excellence Next Steps



Didn't qualify for MNO-Neonatal Excellence award? Don't worry...

Teams who are working to achieve AIMs will have upcoming opportunities to receive QI Awards of Excellence in Q4 2020 and into 2021

Achieving Initiative AIMs

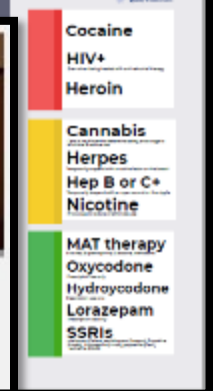
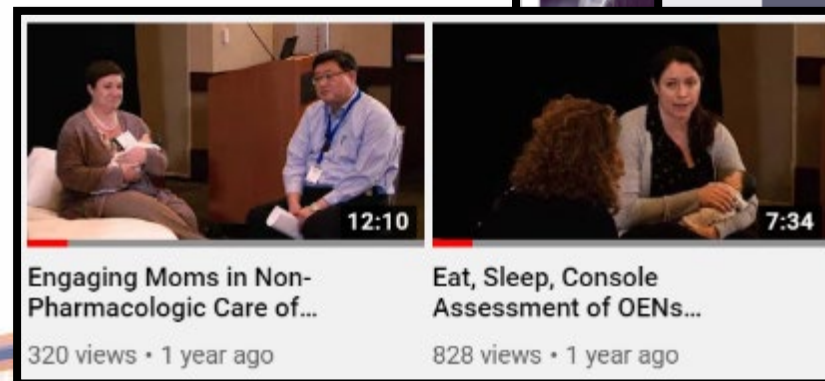
To achieve initiative AIMs, there are specific strategies & systems teams need to have in place to provide optimal care for every OEN

- Prenatal Consults
- MNO-Neo Folders
- Admission Huddles
- Engagement of Mother/Family
- Non-Pharmacologic Care Bundle
- Standardized NAS Assessment Tool
- Coordinated Discharge Checklist



Education Resources for MNO-Neonatal Teams

- Upcoming updated MNO-Neonatal Grand Rounds Slide Set
- Upcoming AAP eModules
- Eat-Sleep-Console Simulation & Debrief Video
- Engaging Mom in Non-Pharmacologic Care Simulation & Debrief Video
- MNO-Neonatal Key Messages and Strategies Poster
- Mothers are the Best Treatment Option Poster
- Supporting Breastfeeding Poster
- AWHONN: Knowledge of and Perceived Competence in Trauma-Informed Care and Attitudes of NICU Nurses Toward Mothers of Newborns With Neonatal Abstinence Syndrome (6/15/2020)
- AAP: Plans of Safe Care for Infants Exposed to Opioids online course



Making Systems Change Happen



100%

of teams have a prenatal consult protocol in place

100%

of teams have a non-pharm protocol in place

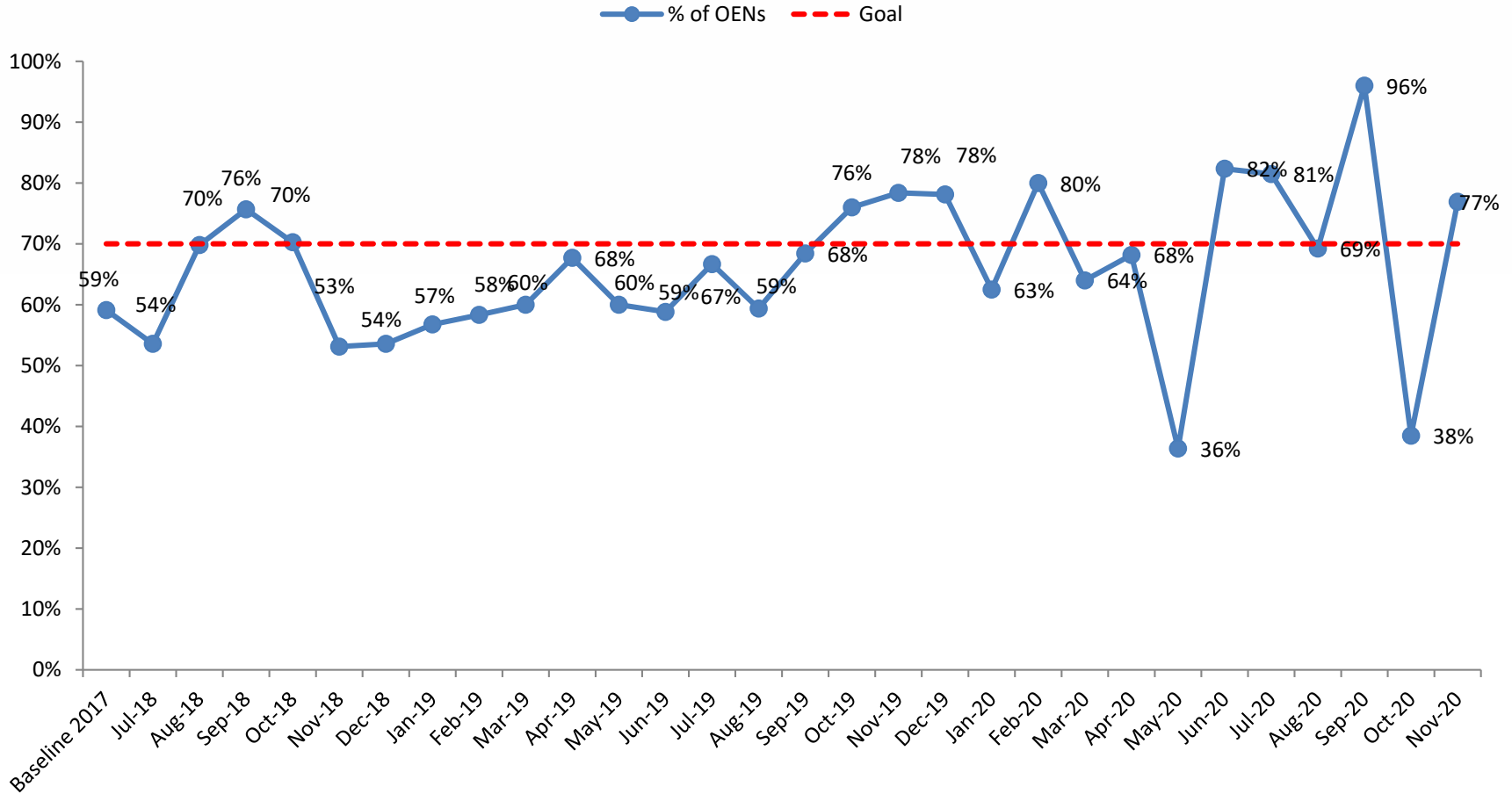
95%

of teams have a pharm protocol in place

100%

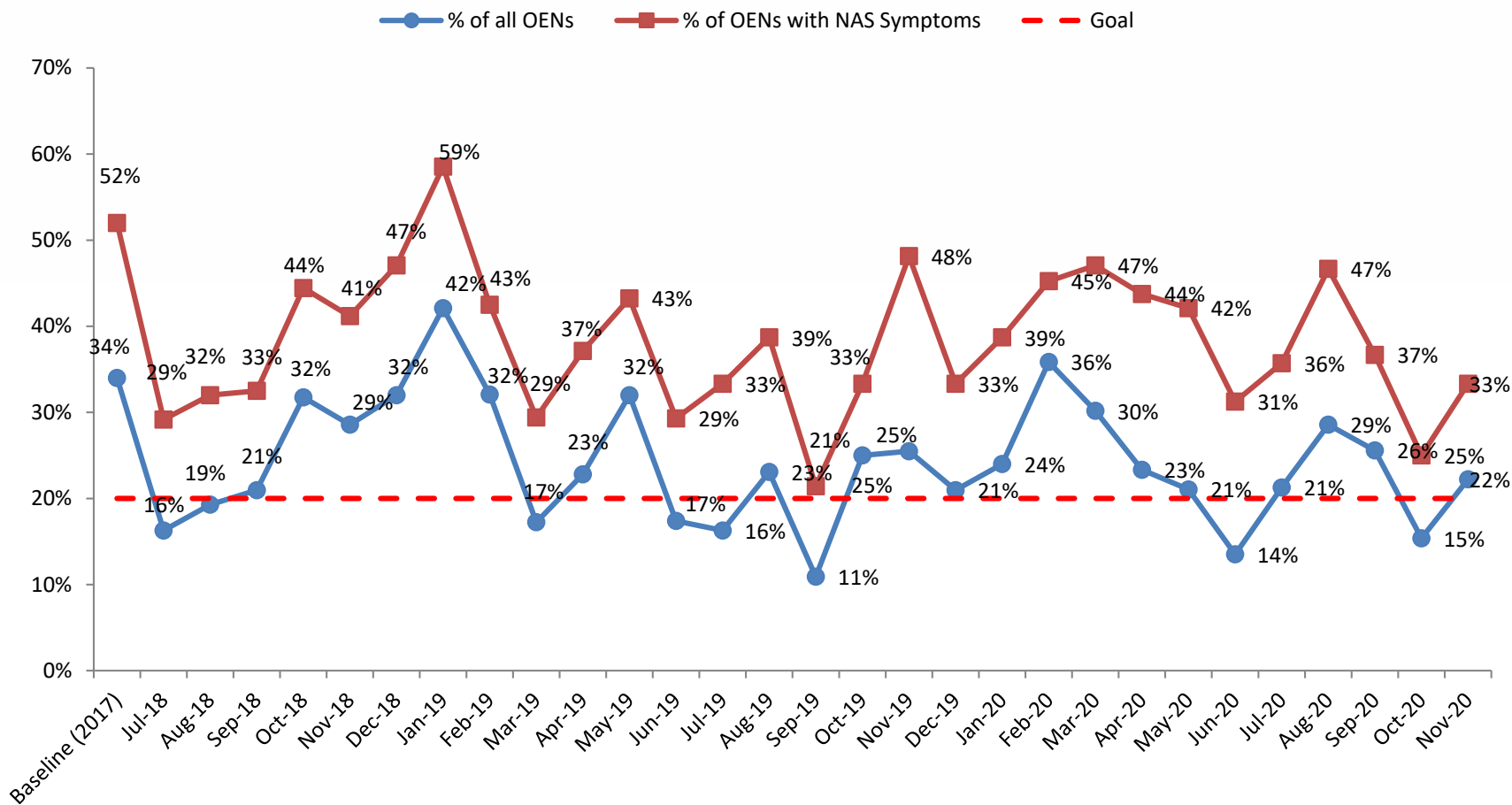
of teams have a discharge protocol in place

Achieving MNO-Neo AIMs Together: Received Maternal Breastmilk from Eligible Mothers at Infant Discharge



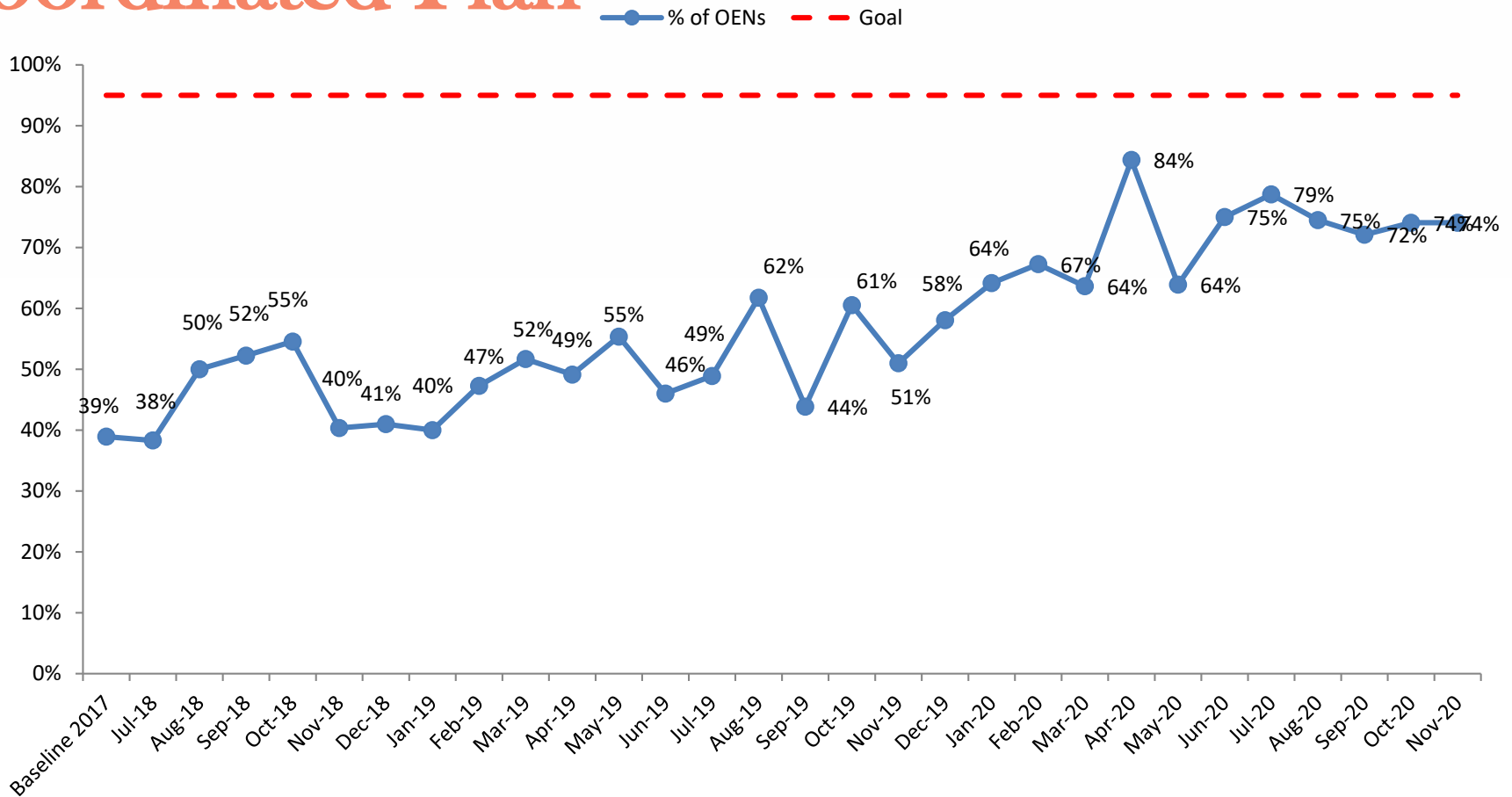
AIM = \geq 70%

Achieving MNO-Neo AIMs Together: Received Pharmacologic Treatment



AIM = ≤ 20%

Achieving MNO-Neo AIMs Together: Discharged with a Coordinated Plan



AIM = ≥ 95%

ILPQC MNO-Neonatal Initiative: Sustainability Plan

Sustained Improvement Tracking of key process measures:

1. Opioid-Exposed Newborns Receiving Pharmacologic Treatment for NAS Symptoms
2. Opioid-Exposed Newborns Receiving Breastmilk from Eligible Mothers at Infant Discharge
3. Opioid-Exposed Newborns Discharged with a Discharged with a Coordinated Plan in Conjunction with Care Team, Family, and Community Pediatrician

How will measures be collected? _____

Will you continue to track additional data internally? Yes No

Team member(s) in charge of reporting in REDCap: _____

How often will your QI team meet to review hospital data reports via REDCap and develop and implement PDSA cycles if compliance on measures starts to slip? _____

Weekly Monthly Quarterly Other

New Hire Education for all new hires

What education tool(s) will you use for new hires?

How will you incorporate MNO-Neonatal education and clinical care policies and protocols into hospital new hire education?

Ongoing Education for all providers and nurses

What education tool(s) will you use for ongoing education for all nurses and providers?

Non-Pharm Simulations NAS Clinical Debrief MNO-Neonatal Toolkit Provider Education Materials

Other: _____

How will you incorporate MNO-Neonatal education and clinical care policies and protocols into ongoing education?

How often will you provide ongoing education? Biannually Annually Other? _____

Sustained System-level Changes

MNO-Neo Folders: How will you ensure that MNO-Neo Folders are replenished and updated?

Coordinated Discharge and Mapping Community Resources: How often will you update your local map of resources to coordinate a discharge plan with the care team, family, and community pediatrician? Bi-annually Annually

Whose job is it to update the MNO- Neo folders? _____ Coordinated Discharge materials and local map of resources? _____

Nursing Champion(s): _____ Provider Champion(s): _____

Drafted Date: _____ Quarterly Review Dates: _____

Hospital Name: _____

Due January 31st

ILPQC MNO-Neo Sustainability Plan

- Helps capture your QI team's plan for MNO sustainability
- Submit plan to ILPQC and your PNA by Jan 31

Sustainability Plan: Compliance Monitoring

Sustained Improvement Tracking of Key Process Measures

- How will measures be collected?
- Team members in charge of reporting in REDCap
- How often will QI team meet to review hospital data reports via REDCap and develop compliance on measures that start to slip?

Reports
Available by
late January



Updated Monthly Patient Data form Available by end of January:

- *% OENs breastfeeding*
- *% OENs receiving pharmacologic treatment*
- *% OENs discharged with a coordinated plan*

Sustainability Plan: New Hire & Continuing Education

How can your team be ready for continuing & new-hire education?

- What education tool(s) will be used for new hires
- How will MNO-neonatal education and clinical care policies be incorporated into new hire education?
- What education tool(s) will be used for ongoing education for all nurses and providers?
- How often will ongoing education be provided



Sustainability Plan: Sustained System-Level Changes

How can your team be ready for sustained system-level changes?

- Plan to ensure MNO-neonatal folders are replenished and updated
- Determine how often team will update local map of resources for coordinating a discharge plan



- *Implement systems changes to ensure optimal OEN care is provided for every OEN, every time- regardless of number!*

MNO-Neonatal Preparing for Sustainability Checklist



- Submit ILPQC monthly MNO-Neonatal Patient & Structure Measure data through December 2020 by March 15, 2021 in ILPQC Data System
- Facilitate completion of education with all providers and nurses, determine plan for continuing & new hire education
- Review data for 3 AIMs with your team
- Connect with your Perinatal Network Administrator if you are not yet at the 70% breastfeeding, 20% pharm treatment, or 95% discharge goals
- Develop sustainability plan with your QI team (draft plan provided by ILPQC), submit to your Perinatal Network Administrator & ILPQC
- Continue to collect / submit data on sustainability measures for compliance monitoring. Compliance data form and reports will be active January 2021

MNO-Neonatal Sustainability and Neonatal Advisory Calls



2021	Calls
January	1st Monday- 12:30-1pm Neo Advisory, 1-2pm MNO Sustainability
February	1 st Monday- 1-2pm Neo Advisory
March	1st Monday- 12:30-1pm Neo Advisory, 1-2pm MNO Sustainability
April	1 st Monday- 1-2pm Neo Advisory
May	No Calls- Face to Face Meeting
June	1st Monday- 12:30-1pm Neo Advisory, 1-2pm MNO Sustainability
July	1 st Monday- 1-2pm Neo Advisory
August	1 st Monday- 1-2pm Neo Advisory
September	1st Monday- 12:30-1pm Neo Advisory, 1-2pm MNO Sustainability
October	No Calls- Annual Conference
November	1 st Monday- 1-2pm Neo Advisory
December	1st Monday- 12:30-1pm Neo Advisory, 1-2pm MNO Sustainability

Sustainability topics to include:

- Cannabis
 - Multi-substance exposure
 - Respectful care
 - Other ideas?
- What are pressing MNO-Neo topics you'd like covered?

MNO-Neonatal Next Steps

OUD Systems

- Continue to cross the finish line and ensure all systems are in place to provide optimal OEN care

Provider Education

- Ensure all clinical team members receive education and know how to activate the OEN Systems and provide stigma free care

Sustainability Plan

- Begin preparing for sustainability and work with your QI team to complete & submit your sustainability plan

BASIC INFORMATION

Don't Forget to Submit Your BASIC QI Team Roster!



- To date, we have 76 ILPQC hospitals signed up to participate in the BASIC initiative
- It is not too late to submit your team's QI roster- if you have not yet please do so today!
<https://redcap.healthlnk.org/surveys/?s=H8P8TAPF33>
- Submitting a QI team roster is a foundational aspect of initiative participation, don't miss out on this opportunity!
- If you have any additions/edits to your roster, please email Dweiss@northshore.org

ILPQC BASIC



Vision: ILPQC hospitals, regardless of perinatal level or past experience with implementing newborn antibiotics initiatives, will implement best practices to provide: the right antibiotics for the right babies for the right duration

AIMs:

- Decrease by 20% (or absolute rate of 4%) the number of newborns, born at ≥ 35 weeks who receive antibiotics
- Decrease by 20% the number of newborns with a negative blood culture who receive antibiotics for longer than 36 hours



DRAFT BASIC

Key Driver Diagram



AIMS

By June 2022, ILPQC Hospitals will:

- A. Decrease by 20% (or absolute rate of 4%) the number of newborns, born at ≥ 35 weeks who receive antibiotics
- B. Decrease by 20% the number of newborns with a negative blood culture who receive antibiotics for longer than 36 hours

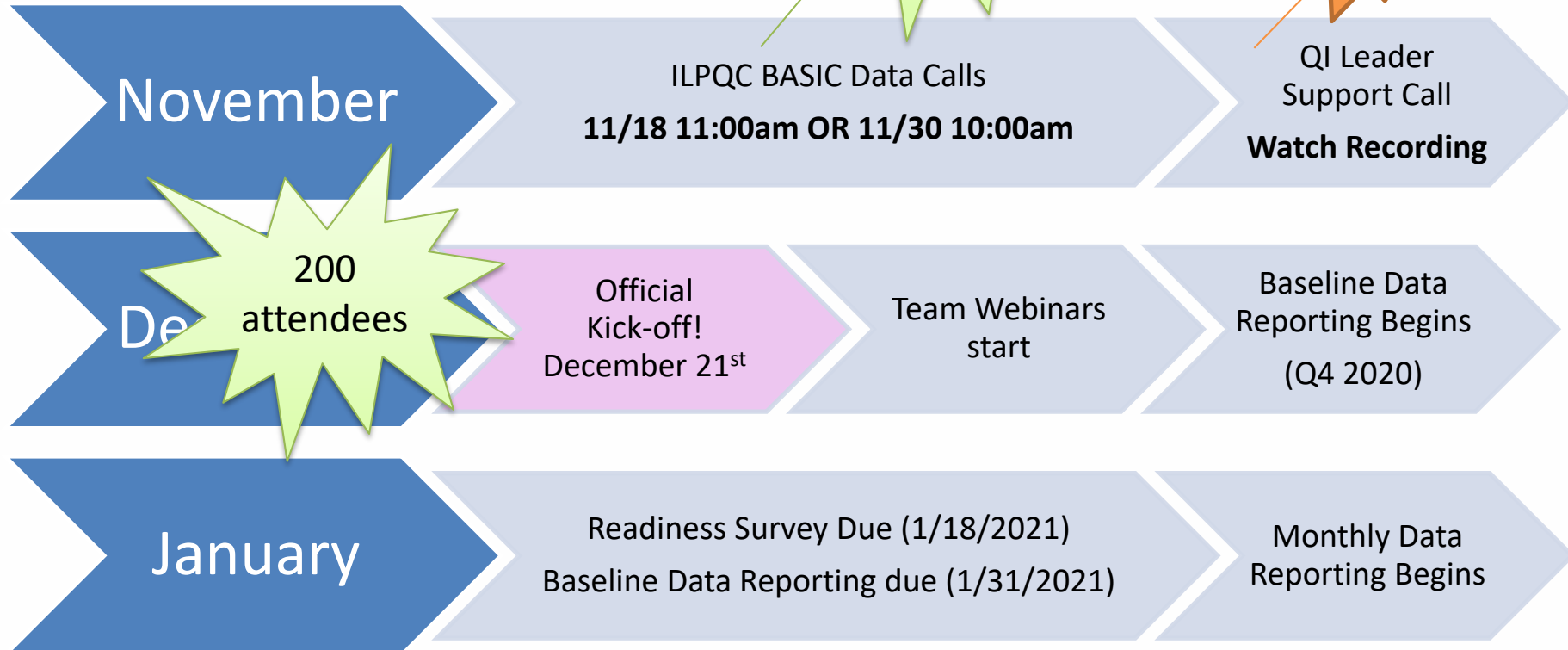
Primary Drivers

- Implement QI infrastructure
- Monitor & share transparent antibiotic data
- Initiate timely and appropriate antibiotics
- Administer and de-escalate antibiotics
- Deliver equitable care

Change Ideas

- Create multidisciplinary antibiotic stewardship QI team
 - Educate healthcare team on best practices
 - Educate and support partners and family
- Coordinate with IT to implement reporting system
 - Review transparent data and debrief with providers
- Standardize risk assessment for early onset sepsis (EOS)
 - Communicate with OBs to share maternal risk for EOS
 - Implement protocols for serial assessment with response to worsening status
- Consistently obtain blood cultures
 - Partner with inpatient lab to process blood culture results
 - De-escalate therapy based on culture and sensitivity results
 - Implement pharmacy protocols to assure appropriate use
 - Standardize dosing guidelines and order sets
 - Implement process to discuss antibiotic duration and course
 - Implement automatic stop order processes
- Provide training and education on social determinants, cultural sensitivity, and implicit and explicit bias
 - Develop QI efforts to ensure care to eliminate disparities
 - Identify social determinant needs of families and link to resources
 - Implement process to assist families after discharge

BASIC Timeline



Recordings and Slides for QI Leader Support Calls and Data Training Calls can be found here

<https://ilpqc.org/basic2021/>

QI Leader Support Call

We are so excited to announce we will be hosting an encore QI Leader Support Call!!

- The webinar will outline what it means to be a QI leader for the upcoming ILPQC initiatives and will share strategies to help lead a successful QI initiative
- We encourage all QI Team Leads, provider Champions and Nurse Champions to attend
- We will discuss strategies to be an effective leader of a QI Team for the 2021 ILPQC initiatives

Mark your Calendars:
January 7th from 12-1PM

BASIC Webinars

Date	Topic
December 21, 2020 1-3 pm	BASIC Initiative Launch Call
2021 Monthly Webinars	Monthly BASIC Teams Calls (3rd Monday of Month from 1-2pm CST) (Starting January 2021)

Register for all upcoming webinars here:

<https://northwestern.zoom.us/meeting/register/tJcpc-qppjMpHdWBNEO8WJsLjfDDUz9ucmt2>



THANKS TO OUR

FUNDERS



JB & MK PRITZKER

Family Foundation



Email info@ilpqc.org or visit us at www.ilpqc.org