

# PASP G G

Pennsylvania Perinatal Quality Collaborative

**PA PQC Successes** 

December 15, 2021

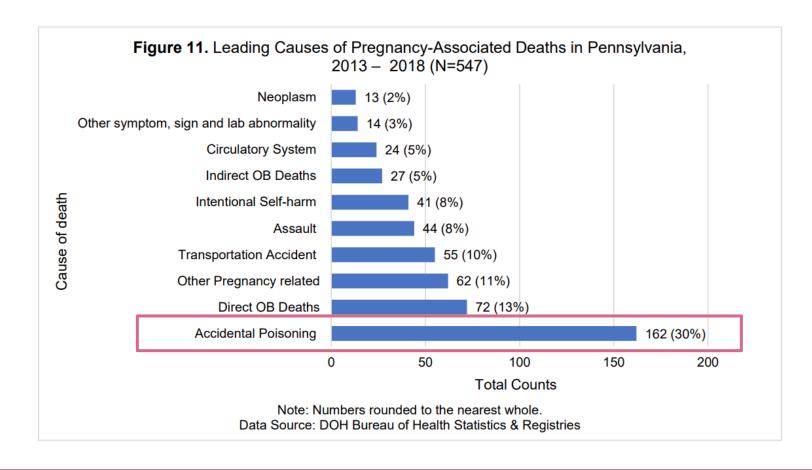
Robert Ferguson, MPH

## PA PQC was formed by...

- PA DDAP, DHS, and DOH as an action arm of the MMRC
- Premie Network and AAP
- West Chester University Pilot Study with the Vermont Oxford Network (VON)
- PA PQC Task Force
- PA PQC Advisory and 10 Work Groups (200 people)
- Northeastern Pennsylvania Perinatal Quality Collaborative

## To Initially Focus on...

Opioid Use Disorder + Neonatal Abstinence Syndrome



## The PA PQC includes...

**60** birth sites and NICUs 86% of live births in PA

14 health plans

## PA PQC Structure & Expectations

Form a Team

Participate in Quarterly Learning Sessions

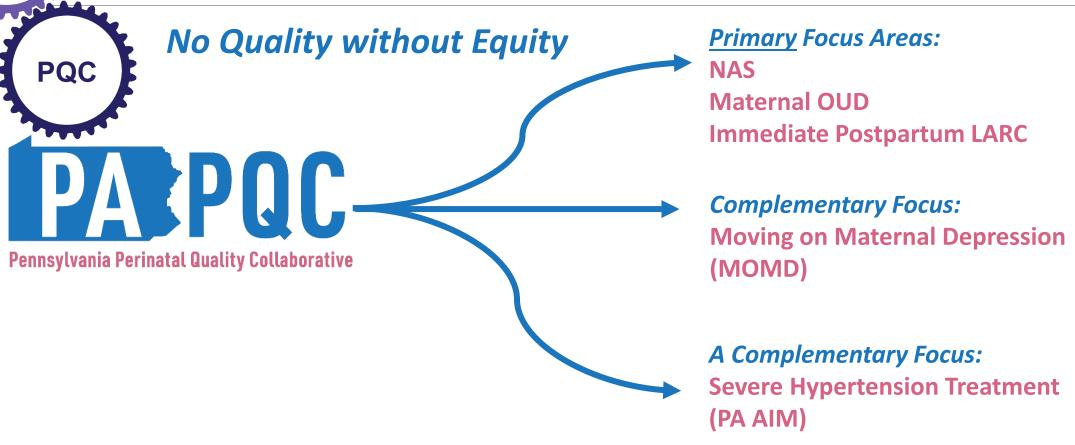
**Launch Quality Improvement (QI) Cycles** 

Access Coaching, Toolkits, Trainings, Funding, Initiative-Specific Virtual Meetings, & Policy Work Groups

Report
Aggregate Data
and Surveys



#### **2021** PA PQC Initiatives



## With Support From...











# **YOU** Led QI Initiatives! Number of unduplicated QI report outs in 2021

- 28 NAS
- 27 maternal OUD
- 19 immediate postpartum LARC
- 14 perinatal depression screening and follow-up and disparities (MOMD)
- 19 teams participating in PA AIM (severe hypertension and disparities)

## **YOU** Received QI Awards!

#### Total historical count

- 13 NAS QI Awards
- 14 OUD QI Awards
- 11 IPLARC Awards
- 1 PA AIM Innovation Award
- 2 JHF Patient Safety Fellowship Awards

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## **YOU** Impacted OUD Structure Measures! Baseline compared to July-September 2021

Provide standardized education material for women with OUD

48% vs. 85% (137%)

Use a validated, selfreport screening tool for substance use in pregnancy

35% vs. 90% (155%)

Develop clinical pathways/order sets for maternal OUD

38% vs. 70% (132%)

Provide opioid pharmacotherapy for pregnant women with OUD

48% vs. 78% (130%)

Develop referral relationships with OUD treatment programs

73% vs. 95% (122%)

10

## **YOU** Impacted OUD Process Measures!



# **YOU** Impacted NAS Structure Measures! Baseline compared to July-September 2021

% NICU or well-baby nurses trained in validated NAS assessments

65% vs. 86% (121%)

Use standardized non-pharmacologic

protocols for NAS

|

61% vs. 92% (131%)

82% vs. 92% (110%)

Use standardized

pharmacologic protocols for NAS

### **YOU** Impacted IPLARC Structure Measures!

As of September 2021

11 of 14 PA PQC IPLARC hospitals are now routinely counseling, offering, and providing immediate postpartum LARC

# PA PQC Moving on Maternal Depression Started in the 2<sup>nd</sup> Quarter of 2021

At baseline, the MOMD healthcare teams used validated tools for universal prenatal and postpartum depression screening.

#### *Improvements to the Follow-up Processes:*

**Diagnosis** 

17% vs. 42% (125%)

Medications

67% vs. 83% (116%)

Referral to Mental Health

83% vs. 92% (19%)

Referral to Community Resources

83% vs. 100% (17%)

#### Improvements to Reducing Racial Disparities:

Stratify depression and follow-up measures by race 10% vs. 60% (\$\bigl\$50%)

Conducting QI project to reduce racial disparities

0% vs. 67% (in progress)

## **MOMD Policy Impact**

#### **PA Doula Advisory and Alliance**

Gained consensus on policy recommendations

#### **PA Doula Commission**

Contact@padoulacommission.org www.padoulacommission.org







Aleta Heard-Vice President



Theresa Pettaway- Treasurer



Lauren Pietrowski- Secretary

Future Policy Goals:
Certification & Reimbursement

# Other Statewide Milestones: PA is Becoming a Leader!

PA 35<sup>th</sup> state with a PA PQC in 2019

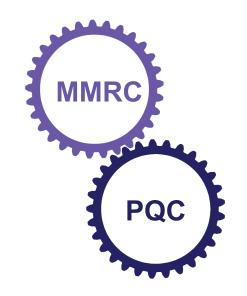
PA 38<sup>th</sup> state to join PA AIM in 2020

PA 4<sup>th</sup> state to receive Vermont Oxford Network's (VON) *State of Excellence in Education and Training for Infants and Families Affected by NAS* 

PA 1<sup>st</sup> state to integrate and launch the AIM severe hypertension bundle with the disparities bundle

PA early adopter of the new AIM SUD bundle in 2021/2022

# **You** achieved this during a <u>pandemic</u> & even launched new initiatives



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**PA PQC Future Directions** 

December 15, 2021

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#### **2022** PA PQC Initiatives



#### **Primary** Focus Areas:

Substance-Exposed Newborns & NAS Maternal Substance Use & OUD Immediate Postpartum LARC

#### **Complementary Focus:**

Moving on Maternal Depression (MOMD)

#### A Complementary Focus:

Severe Hypertension Treatment (Alliance for Innovation on Maternal Health)

## With Support From...









### 2022 Initiatives: General Timeline

Recruitment:
January to March
2022



Implementation:
April 2022 to
March 2023



Sustaining: April 2023 to March 2024

Express Interest by 1/31/22
Join by 3/14/22

# Budgeted Awards for Achieving QI Milestones

#### **Maternal Substance Use or SEN**

Estimated 22 Awards Per Quarter (\$5,000 per award)

\*PA PQC will also organize additional trainings for PA PQC teams

#### Maternal OUD, NAS, or Immediate Postpartum LARC

Estimated 10 Awards Per Quarter (\$5,000 per award)

#### **PA AIM**

Estimated 2 Awards Per Quarter (\$5,000 per award)

#### **MOMD**

The PA PQC is planning to budget for MOMD QI Awards as well

# Express Interest in PA PQC Priorities by January 31

- PA PQC Hospital
- Name and Title
- 3. Which PA PQC initiative(s) would your team like to prioritize in 2022 (please selected continuing or joining)?
  - Maternal OUD
  - Maternal Substance Use (other than OUD)
  - NAS
  - Substance Exposed Newborns (other than NAS)
  - Immediate Postpartum LARC
  - Maternal Depression Screening and Follow-up (MOMD)
  - Severe Hypertension Treatment (PA AIM)

For the initiative topic(s) you selected, please describe why, any key interventions your team is implementing or sustaining, and your 2022 goals for that topic.

4. If you are not prioritizing maternal OUD, maternal substance use, NAS, or substance exposed newborns for your PA PQC 2022 initiative(s), please explain why these topics are not being prioritized for 2022.

# Structure Measures via Quarterly Survey: PA AIM: Hypertension & Disparities

#### Full Survey Available Here

https://www.whamglobal.org/data-collection#PA-PQC-Site-Surveys

What changes?
No changes

# Quarterly Process & Outcome Measures: PA AIM: Hypertension & Disparities

# treated within 1 hour from first severe BP reading with IV Labetalol, IV Hydralazine, or PO Nifedipine

# with acute-onset severe hypertension (SBP  $\geq$  160 or DBP  $\geq$  110) that persists for 15 min. or more (incl. those with preeclampsia, gestational, or chronic hypertension)

PA DOH working with PHC4 to track Severe Maternal Morbidity (SMM) and SMM excluding cases with only a transfusion code (PA PQC AIM hospitals are still encouraged to internally report as well)

What changes?
No changes

All Quarterly

All by Race/Ethnicity Annually

# Structure Measures via Quarterly Survey: MOMD

#### Full Survey Available Here

https://www.whamglobal.org/data-collection#PA-PQC-Site-Surveys

What changes?
No changes

# Quarterly Process Measures: MOMD

# with validated depression screening during pregnancy

# deliveries during measurement period

# with follow-up care within 30 days

# with positive depression screen during pregnancy

# with standardized depression during 84 day period after delivery

# with deliveries 84 days prior to start and end of measurement period

# with follow-up care within 30 days

# with deliveries 84 days prior to start/end of period with positive depression screen during the 84 day period after delivery

What changes?
No changes

All Quarterly

All by Race/Ethnicity Annually

## Structure Measures via Quarterly Survey: Summary of Survey Questions for IPLARC

#### **Primary Structure Measure / Question**

Is your hospital routinely counseling, offering, and providing IPLARCs (either IUDs or Implants) for postpartum women with OUD and for all postpartum women?

What changes?

No changes

#### Full Survey Available Here

https://www.whamglobal.org/data-collection#PA-PQC-Site-Surveys

## Quarterly Process Measures: Immediate Postpartum LARC

# received LARC prior to discharge

# postpartum individuals who desired IPLARC

# with OUD who received LARC prior to discharge

# postpartum individuals with OUD who desired IPLARC

What changes?

All IPLARC measures reported quarterly (not monthly)