MNO-OB Teams Call:
Strategies for Success: Missed Opportunities Review, OB Education Campaign, and Activating the OUD/SBIRT Clinical Algorithm

December 9th, 2019 *One time date change*
12:30 – 1:30pm
Call Overview

• ILPQC 7th Annual Conference Recap
• MNO-OB Strategies for Success: Missed Opportunities Review, Education Campaign, How do you Activate the OUD / SBIRT Clinical Algorithm, Data Review
• Team Talk- Jaime Kelly, Northwest Community Hospital
• Wrap-up/Key Points
ANNUAL CONFERENCE RECAP
Annual Conference Recap

• 430 Attendees!
• 80 hospitals from across Illinois/Missouri attended
• 7 national & local invited speakers
• 54 Quality Improvement posters (Record number!)
• 50+ Quality Improvement Awards awarded
Annual Conference Discussion

Share your thoughts...
CONGRATULATIONS
MNO-OB QUALITY IMPROVEMENT
AWARD WINNERS
ILPQC MOTHERS AND NEWBORNS AFFECTED BY OPIOIDS INITIATIVE

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<th>QI Champion</th>
<th>Loyola University Medical Center</th>
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SSM Health St. Mary's Hospital - St. Louis
Advocate BroMenn Medical Center
Illinois Valley Community Hospital
Northwestern Medicine Lake Forest Hospital
Northwestern Medicine McHenry Hospital

QI Champion: Loyola University Medical Center
QI Leader: Systems & Culture Change: OSF Saint Francis Medical Center
QI Leader: Systems Change: Northwestern Memorial Hospital
Crossing the finish line with MNO: MNO-OB QI Awards at Face to Face

• **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’ by March 2019:**
  - Screening (L&D)
  - SBIRT
  - Mapping
  - Checklist
  - Patient Education

• **Process & Outcome Measures Achieved by March 2019:**
  - MAT >70% | BH Counseling >70% | Narcan >70% | Hep C >70% | Patient Education >80% | Screening (L&D) >80%

**DATA DUE MONDAY, APRIL 27\textsuperscript{th} by MIDNIGHT**
MNO-OB Initiative Aims: What Must We Achieve to Save Lives

- **≥70% Medication Assisted Treatment**
- **≥70% BH/Recovery Treatment Services**
- **≥80% Universal Validated OUD Screening**
  - Prenatal & Labor & Delivery
- **≥80% OUD Clinical Care Checklist**
  - Narcan provided
  - Hepatitis C screen
- **≥80% Patient Education OUD/NAS**
  - Counseling/Materials
  - Neo/Peds Consult
How to Get to Green:

- Choose a self-reported validated screening tool from the **ILPQC MNO-OB Toolkit**
- Utilize a paper version if waiting for IT/EHR incorporation
- **Share tools and ACOG / IDPH recommendation for universal OUD screening with a validated screening tool with OB providers/prenatal sites.**
- Utilize ILPQC OB & Outpatient Provider Packet, letter from OB Chair to help facilitate buy-in
- Visit outpatient sites and share screening tools/protocol with them
- Provide each outpatient site a few MNO Folders that include: OUD Algorithm/Checklist and patient education materials to use for OUD screen+ patients.
Standardized SBIRT Protocol /Clinical Algorithm L&D (Structure Measure)

How to Get to Green:

- Implement & post the SBIRT/OUD Clinical Algorithm on L&D *Note: if a team implements the algorithm, they are implementing a SBIRT protocol (GREEN structure measure)*
- Distribute OUD Algorithm to OB Providers and affiliated outpatient sites with SBIRT pocket cards
- Create MNO folders stored on L&D/triage that have OUD/SBIRT Algorithm and OUD Checklist. Have nurse obtain folder for OUD screen+ pts and provide OUD Algorithm and Checklist to OB to complete. Algorithm outlines OB role.
- Review OUD Missed Opportunities to provide feedback to providers/nurses
- Provide SBIRT training or Grand Rounds for Providers / Nurses
- SBIRT Training for Providers:
  - ACOG District 6 Min Video: [https://www.youtube.com/watch?v=7S0eUUfXc6o&feature=youtu.be](https://www.youtube.com/watch?v=7S0eUUfXc6o&feature=youtu.be)
Mapping Community Resources (Structure Measure)

How to Get to Green:

- **Utilize** the [IDPH Opioid Use Treatment Resources for Pregnant Women in Illinois](#) Document to complete **mapping** your team’s local resources on the [ILPQC Mapping Tool](#)

- **Share** completed mapping tool with OB providers, affiliated outpatient sites, and social workers

- **Share contact information for new Illinois DocAssist** *(free perinatal OUD/MAT phone consult)* (866-986-ASST) and **Illinois Helpline for Opioids (help with finding OUD treatment locations)* (833-2FINDHELP) with all OB providers, nurses, social workers, & staff

- **Utilize** ILPQC OB & Outpatient Provider Packet to help facilitate buy-in
Standardized OUD Clinical Care Checklist on L&D (Structure Measure)

How to Get to Green:

- Share and post the OUD Clinical Care Checklist on Labor & Delivery (goal to incorporate EMR)
- Determine workflow for checklist implementation on L&D (system to ensure all OUD patients have checklist activated on admission and completed before discharge) – engage SW and nursing to activate checklist for every screen + OUD
- Create MNO folders: OUD Algorithm and OUD Checklist for L&D, system that reminds nurses to pull folder for every OUD screen+ pt and give Algorithm/Checklist to OB provider to complete. Postpartum nurse confirms at discharge checklist completed.
- Distribute to OB Providers, social workers and affiliated outpatient sites for use with every OUD pt when identified prenatally or postpartum
- Use Missed Opportunities Review to provide regular feedback to providers and nurses re checklist completion
Standardized Patient Education (Structure Measure)

How to Get to Green:

- Implement standardized neonatal/pediatric consult prenatally and on L&D
- Standardize Education materials for women with OUD prenatally & on L&D. Create MNO folders including OUD Algorithm/Checklist and MNO Patient Education Material (see below) to store on L&D and provide to prenatal sites to pull for every patient with OUD.

Information for Women with OUD

- General patient education: Pain medications, opioids and pregnancy
- Pregnancy and MAT one-pager
- Are you in Treatment or Recovery? Contraception Counseling for Women with OUD, from OPQC

Increase maternal participation in the care of opioid exposed newborns

- NAS booklet (you are the treatment for your baby)
- NAS what you need to know one-pager
Sample of Documentation of OUD Screening - Prenatal

MNO-OB Monthly Sample of Documentation of OUD Screening Prenatally
All Hospitals, 2018-2019

BENCHMARK = ≥ 80%
Sample of Documentation of OUD Screening- L&D

MNO-OB Monthly Sample of Documentation of OUD Screening on L&D
All Hospitals, 2018-2019

BENCHMARK = ≥ 80%
Women with OUD on MAT by Delivery Discharge

ILPQC MNO Initiative
Percent of Women with OUD Connected to Medication Assisted Treatment (MAT) prenatally or by delivery discharge
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
Women with OUD at Delivery Connected to Behavioral Health Counseling/Recovery Services

ILPQC MNO Initiative
Percent of Women Connected to Behavioral Health Counseling/Recovery Services prenatally or by delivery discharge
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
OUD Clinical Care Checklist Included in Chart (Prenatally or by Delivery Admission)

ILPQC MNO Initiative:
Percent of Women with OUD with an OUD Clinical Care Checklist Included in the Medical Record
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
Narcan Counseling & Documentation

ILPQC MNO OB:
Percent of Women with OUD who Received Narcan Counseling and Prescription Offer, Documented Prenatally or During Delivery Admission
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
Hepatitis C Screening & Documentation

ILPQC MNO OB:
Percent of Women with OUD who Received Hep C Screening, Documented Prenatally or Prior to Delivery
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
Maternal OUD/NAS Education & Documentation

ILPQC MNO Initiative:
Percent of Women with OUD Receiving Education on OUD and NAS Infant Care Prenatally or During Delivery Admisison
All Hospitals, 2018-2019

BENCHMARK = ≥ 80%
OB Provider and Nursing Education

ILPQC MNO Initiative:
Average cumulative proportion of providers and nurses educated on OUD care protocols (including stigma & bias)
All Hospitals, 2018-2019

BENCHMARK = ≥ 70%
How do we help every team achieve MNO initiative aims

- How can we help you achieve success with system changes – and get to green on all structure measures?
- How can we help teams achieve success with engaging OB providers in clinical culture change?
  - Are MAT, Recovery Treatment Services, Screening, and OUD Clinical Care Checklist including Narcan, patient education getting to goal?
  - Are OB Providers being engaged in active clinical culture change when OUD patients are identified (screening, Brief Intervention and assess readiness for MAT, fast-track MAT, clinical care checklist, Narcan)?
  - Are the key messages getting to providers/nurses / social workers (OUD is a life threatening illness with effective treatment, urgent OB issue with action needed and close follow up)?
  - Are teams using the Missed Opportunities Review Form for every patient with OUD to debrief cases and provide feedback to clinical team?
Key Strategies for MNO Success

MNO success means saving moms lives and improving outcomes for moms & babies

- Universal Screening for OUD L&D and Prenatal
- System to activate for every OUD screen+ patient
  - OUD / SBIRT Clinical Algorithm completed by OB
  - OUD Clinical Care Checklist completed by OB
  - Patient Education on OUD/NAS provided
- OB Provider Education Campaign
- Missed Opportunities Review & Debrief every case
Validated Screening Tool

- Implementation of universal validated self-reported screening for OUD for all pregnant patients prenatally and on Labor & Delivery

MNO-OB Folders

- Create MNO folders: (1) OUD Clinical Algorithm and OUD Clinical Care Checklist, (2) Narcan quick start, (3) Patient Education Material. Store L&D/prenatal clinics. Nurse pull for every OUD patient and engage OB provider with key tools and provide materials to patient.

OB Provider Education Campaign

- Hang posters, magnets and laminated OUD Algorithm / Checklist on L&D/postpartum, hand out flyers, and provide online training, Grand Rounds and MNO talks at OB provider meetings

Missed Opportunity Review/Debrief

- Implementation of a Missed Opportunity Review and Debrief with the Clinical team for every patient diagnosed with OUD.

Key Strategies for MNO Success - What every hospital needs to achieve aims
MNO Success means engaging OB Providers in Key Strategies

- Screen every patient for OUD
- All OUD + patients assessed for readiness for treatment
- Start MAT/link to Recovery Treatment Programs
- OUD Checklist completed: Counsel for Narcan, Hep C Screen

Debrief every OUD patient for **Missed Opportunities**

Review give provider/nurse feedback
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

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** for OB to review and prescribe to patient
- **OUD Protocol**
- **Nurse Workflow *NEW**

IL & PQC Illinois Perinatal Quality Collaborative

Give to and review with Moms

Give to OB to complete

For nurse

*NEW*
MNO Folder: MNO Nursing Workflow
New Nursing Resource

Include the Nursing Workflow in the MNO Folder to engage L&D and Postpartum Nurses in key clinical steps needed to reduce risk of maternal death from OUD.
OB provider to see patient, provide brief intervention to assess diagnosis, counsel risks, assess readiness for treatment (SBIRT Counseling)

Withdrawal symptoms &/or ready to start MAT

Unclear if MAT indicated, Not ready to start MAT or Outpatient MAT available

Admit to hospital for Fast-Track MAT start

Stabilize MAT and discharge to Recovery Treatment Program

Inpatient Treatment Program
Intensive Outpatient Treatment
Behavioral Health Treatment Support Peer Support Program

Have you hung up the laminated algorithm yet?

Provide Universal SUD/OUD screening with validated tool

Screen positive SUD/OUD + Risk factors: provide brief intervention discuss risk reduction

Provide Universal SUD/OUD screening with validated tool

SBIRT Counseling

Start OUD Clinical Care Checklist

Hep C screen
Narcan Counseling
Serial Tox screen w/ consent
Neo/Peds consult
Social Work Consult
Anesthesia consult
MFM consult
Contraception counseling

Document OUD in problem list: 099.320

Provide standardized patient education: OUD/NAS, mom’s important role in care of opioid exposed newborn (breastfeeding, rooming in, eat-sleep-console)

How is your team engaging OB Providers to activate the OUD SBIRT/Clinical Algorithm?

Have you hung up the laminated algorithm yet?

Close OB follow up every 1-2 weeks (pregnancy and postpartum)

Hep C screen
Narcan Counseling
Serial Tox screen w/ consent
Neo/Peds consult
Social Work Consult
Anesthesia consult
MFM consult
Contraception counseling

Provide standardized patient education: OUD/NAS, mom’s important role in care of opioid exposed newborn (breastfeeding, rooming in, eat-sleep-console)

IL OUD Hotline
MAT/Recovery Treatment locations: 1-833-2-FINDHELP
IL Doc Assist for free Perinatal OUD Addiction Med Consult: 1-866-986-ASST (2778)
ILPQC OUD Clinical Care Checklist

DO your OB providers & nurses know to complete OUD Checklist for every pregnant/postpartum patient with OUD?

Examples of checklist items:

1. Assessed for readiness for MAT
2. Link to Recovery Treatment Program
3. Narcan counseling and prescription
4. Contraception counseling and plan
5. Hep C screening
6. Pediatric/neo consult completed
7. Social work consult completed
8. Standardized education provided on NAS and role in newborn non-pharmacologic care

How is your team standardizing the processes to insert the checklist in the patients chart?

Are you ensuring every component is completed?
MNO Folder: Include Narcan Quick Start Guide or other Narcan Resource

- Include Narcan Quick Start Guide in MNO Folder to share with OB provider to support Naloxone/Narcan counseling & prescription for every patient with OUD or uses opioids regularly.

- Counsel ALL patients with OUD that having Naloxone/Narcan in their purse / home can be a life saving medicine and reduce risk of overdose, postpartum highest risk period for overdose.

- OB providers should use Quick Start Guide to help with Naloxone counseling.
Missed Opportunities Review / Debrief Form

Is your team using this form to debrief every patient with OUD?
NEW OB Provider Education Campaign Strategies

- IL DocAssist & IL Helpline for Opioids Magnets

- SBIRT Simulations Guide and e-training
  - 1hr SBIRT IRETA Training e-Module
  - ACOG District II SBIRT Training 6 Min Video

- Provider Education Campaign Posters & Flyers

- MNO-OB Grand Rounds or OB Provider Meetings

- Implement stigma & bias education
  - Words Matter e-Module from ILPQC Annual Conference
  - Trauma-Informed Care e-Modules
  - CDC Opioid Use and Pregnancy e-Module
Breakdown of Provider Education Campaign Posters

• **What**: Provides key messages and strategies every OB provider needs to know

• **How to use**: Post this in your common area to be seen by ALL OB Providers (e.g. doctors lounge, charting areas)

• **What**: Provides key messages about MAT as a life-saving strategy for all providers to know

• **How to use**: Post this in your common area to be seen by ALL OB providers along with the Key Messages Poster

One set of posters for each team provided today!
What every OB Provider needs to know to save a mother’s life

Overdose is now the leading cause of maternal death in Illinois

Opioid Use Disorder (OUD) is a life-threatening chronic medical condition with lifesaving treatment available. Every OB Provider needs to know how to screen for OUD, assess readiness for treatment and complete an OUD Clinical Care Checklist to reduce risk and improve outcomes for every pregnant/postpartum woman with OUD.

Key steps to improve maternal outcomes

Screen every pregnant patient for OUD with a validated screening tool
Assess readiness for Medicated Assisted Treatment (MAT)
Start MAT and link to Recovery Treatment Programs
Provide Naloxone (Narcan) counseling and prescription
Reduce stigma across clinical team

**Important Resources for OB Providers**

- **Illinois OUD Hotline**
- **MAT/Recovery Treatment Locations**: 1-833-2-FINDHELP
- **IL-DOEHS**: Free perinatal OUD Addiction Med Consult for provider OUD/MAT questions 1-866-980-ASSIST
- **ILPQC Toolkit & Resources**: Mothers and Newborns Affected by Opioids (MNO) Initiative www.ilpqc.org Email: info@ilpqc.org

SAVE A MOTHER'S LIFE

Opioid Use Disorder and Medicated Assisted Treatment (MAT)

Start MAT, provide Naloxone and link to Recovery Treatment Programs

- Reduces risk of maternal death
- Improves pregnancy outcomes

For resources visit ILPQC Mother and Newborns Affected by Opioids (MNO) Toolkit www.ilpqc.org or email info@ilpqc.org
Are you screening all pregnant patients for SUD/OUD with a validated screening tool?

For validated screening tools see ILPQC Mothers and Newborns Affected by Opioids Initiative Toolkit

Overdose is now the leading cause of maternal death in Illinois

“...You can save a mother's life.”

For resources see ILPQC’s Mothers and Newborns Affected by Opioids (MINO) Toolkit

www.ilpqc.org  email: info@ilpqc.org
Other Important Resources to Engage OB Providers

• **Distribute 2 NEW magnets** on units promoting resources for providers:
  1. Illinois DocAssist
  2. Illinois Helpline Resources

• Set up a **MNO-OB Grand Rounds** or a presentation at **OB Provider Meetings**

  “Grand Rounds increased our private provider participation in screening and facilitation of resources for our patients with OUD.”

  “Our providers and associates learned a lot of new information that was unknown before [Grand Rounds].”
MNO Regional Strategies for Success Calls/Meetings Coming Soon

- ILPQC is working with the perinatal network administrators, network hospital QI teams, and mentor hospitals in each perinatal network to hold a regional network call/meeting for all MNO teams
- Call will focus on Key Strategies for Success with data review, mentor support, and discussion of regional strategies to help ALL hospitals in each perinatal network achieve the MNO AIMs
- Goal is for every network to achieve highest % of teams possible receiving MNO QI Award Plaques at Face to Face
- Stay tuned for more information from your network
TEAM TALK- NORTHWEST COMMUNITY HOSPITAL
Northwest Community Healthcare

- 489 bed hospital with main campus in Arlington Heights, Illinois. Non-profit independent facility with additional outpatient sites and immediate care centers.
- Level III Perinatal services
- Joint Commission Perinatal Care Certified
- 2494 births in 2018
- 325 NICU admissions in 2018
- 16 bed single room NICU with 8 designated level III beds
- 12 bed Labor and Delivery unit with 3 OR suites
- 9 bed Antepartum/Triage
- 34 bed OB postpartum/gyne
Northwest Community Healthcare MNO Teams

• OB MNO Team:
  – Team Lead- Educator of L&D, MBU
  – OB Provider Lead- OB Hospitalist
  – Nurse Champion- L&D nurse
  – Neo/Peds Rep- Neonatology department director
  – Addiction Specialist

• Neonatal MNO Team:
  – Team Lead- Educator for NICU, Peds, Peds ED
  – Neo/Peds Provider lead- Neonatology department director
  – Nurse Champion- NICU nurse
  – OB representative- OB Hospitalist

• Both teams:
  – Outpatient representative- Pediatric PT
  – Lactation consultant
  – Social Worker
  – Patient Safety Officer
Education Campaign

- Initiative info placed in doctors lounge including MNO-OB Posters from ILPQC Annual Conference

- Checklist, Doc Assist and OUD Algorithm placed at charting desk for OB providers to reference
Accessibility

- Folders available in LD for patients identified with OUD
- Folders will be distributed to the private practices
Missed Opportunity
Clinical Care Team Debrief

- Review each case to identify missed opportunities
- Care Alerts
- Meeting with prenatal offices
  - Will provide MNO-OB folders and MNO-OB education campaign flyers
- Grand Rounds with Dr. Borders
# Upcoming MNO-OB Teams Calls

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<td>January 27th, 2020</td>
<td>Activating the OUD / SBIRT Clinical Algorithm and linking patients with OUD to MAT prenatally or by delivery discharge</td>
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<td>February 24th, 2020</td>
<td>OUD Clinical Care Checklist: The Nurse’s role on L&amp;D</td>
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<td>March 23rd, 2020</td>
<td>Strategies to Cross the Finish Line</td>
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<tr>
<td>April 27th, 2020</td>
<td>Preparing for Sustainability (Sustainability Plan, Compliance Monitoring, Ongoing &amp; New Hire Education, Mapping Resources)</td>
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REGISTER NOW!
December 13th ASAM OUD Course

Friday, December 13th 2019
Carle at the Fields, Champaign, IL
(8am – 12:30pm)

https://elearning.asam.org/p/ILPQC1213

At least 3 more training dates coming in January 2020!
Upcoming ASAM Treatment of OUD Training Courses

• Monday, March 2\textsuperscript{nd}, 2020 8am – 12pm | University of Chicago Medical Center (Registration Coming Soon)- Chicago, IL

• Friday, April 20\textsuperscript{th}, 2020 | 10am – 2:30pm | OSF St. Francis Medical Center (Registration Coming Soon)- Peoria, IL

• Memorial Hospital- East (Date & Time TBD)- Shiloh, IL

• Memorial Hospital Carbondale (Date & Time TBD)- Carbondale, IL
Contact Us

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

ILPQC website is going through a transition in response to your needs and feedback

Our soft launch was at the end of November to ensure you have continued access to active initiative toolkits

We are working to finish the transition by the end of December and to manage future updates at ILPQC Central by the end of January

- Ilpqc.org has a new look with new functions coming soon!
  - Direct link to REDCap
  - Quick access to webinars
  - Provider/clinical quick start resources
  - News and event tabs
THANKS TO OUR FUNDERS

IDPH
Illinois Department of Public Health

CDC
Centers for Disease Control and Prevention

DHS
Illinois Department of Human Services

JB & MK PRITZKER
Family Foundation