

NYSPQC NEWS

The New York State Perinatal Quality Collaborative (NYSPQC) is an initiative led by the New York State Department of Health (NYSDOH) Division of Family Health (DFH). The NYSPQC aims to provide the best, safest and most equitable care for pregnant and postpartum people and infants in New York State (NYS). This is accomplished by collaborating with teams from birthing hospitals and centers, perinatal care providers, professional organizations, patient advocates, and other key stakeholders to prevent and minimize harm through the translation of evidence-based guidelines to clinical practice.

Learn more about the NYSPQC projects and team!

Page 2: Team Updates
NYSPQC Team Highlight

Page 3: Opioid Use Disorder in Pregnancy & Neonatal Abstinence Syndrome Project

Page 4: Hospital Highlight
QI Corner
Available Webinars

Page 5: Birth Equity Improvement Project

Page 6: COVID-19 Vaccination Efforts

Current Projects: Quick Summary

Opioid Use Disorder in Pregnancy & Neonatal Abstinence Syndrome Project

The New York State (NYS) Opioid Use Disorder (OUD) in Pregnancy & Neonatal Abstinence Syndrome (NAS) Project focuses on identifying and managing the care of people with OUD during pregnancy, and improving the identification, standardization of therapy and coordination of aftercare of infants with NAS in NYS. *To read more, please see **page 3**.*

Birth Equity Improvement Project

The New York State Birth Equity Improvement Project (NYSBEIP) is a collaborative learning project designed to improve the experience of care and obstetric outcomes for Black birthing people in NYS. *To read more, please see **page 5**.*

COVID-19 Vaccination Efforts

The NYSPQC is focused on increasing uptake of the COVID-19 vaccine among people in the perinatal period and their families with an emphasis on Black birthing people. *To read more, please see **page 6**.*

Some updates...

NYSPQC Awarded CDC Funding!

The **NYSPQC** is excited to announce that it has been selected to receive ongoing grant funding from the Centers for Disease Control and Prevention (CDC) among 27 nationally identified Perinatal Quality Collaboratives. This five-year grant award will assist the NYSPQC in increasing capacity to improve the quality of perinatal care for birthing people and infants in NYS. The NYSPQC will utilize this funding to develop and implement a Neonatal Intensive Care Unit (NICU) Equity Project. The NYSPQC will also continue to lead the NYSBEIP and the NYS OUD in Pregnancy & NAS Project.

To learn more about the CDC's PQC grant awards and see the CDC announcement, [click here](#).

The NYSPQC website has moved!

When you go to nyspqc.org, you may notice it looks a little different.

The NYSPQC website is moving from being housed at the University at Albany, School of Public Health to NYS Department of Health! We're excited for this change and the new possibilities for the NYSPQC.



New York State Department of Health (NYSDOH)

New York State Obstetric Hemorrhage Project



Release Date: September 2022



The NYSPQC is pleased to share the [New York State \(NYS\) Obstetric Hemorrhage Project Toolkit](#). The NYSPQC developed this toolkit to assist with improving facility team readiness, assessment, and response to obstetric hemorrhage. This toolkit allows users to learn from hospital teams that participated in the NYSPQC's NYS Obstetric Hemorrhage Project through: sharing relevant educational presentations from expert faculty, hospitals' policies and protocols, professional education materials, data and quality improvement tools, web links, and references. Feel free to share this resource widely.

NYSPQC Team Highlight:



Name: Amanda Roy, MPH

Amanda has been with the NYSPQC for over 8 years. Her favorite part of being on the NYSPQC team is seeing all the great work that is being done by our participating facilities!

Fun Fact: In her personal time, Amanda likes crafting, including knitting, crocheting, and sewing.

Opioid Use Disorder (OUD) in Pregnancy & Neonatal Abstinence Syndrome (NAS) Project

Overview of Initiative

The OUD in Pregnancy & NAS Project focuses on identifying, and managing the care of people with OUD during pregnancy, and improving the identification, standardization of therapy, and coordination of aftercare of infants with NAS in NYS. The pilot phase of the project began in September 2018, and was expanded to all interested birthing hospitals in October 2020, following the success of the project's pilot phase.

Participants

Include a total of:

38 NYS birthing hospitals consisting of:

- ⇒ 14 pilot hospitals and;
- ⇒ 24 expansion hospitals.

Participating hospitals are from across NYS and represent all levels of care.

Project Data

During the pilot phase of the OUD in Pregnancy & NAS Project, between September 2018 and March 2022, the percentage of participating birthing hospitals (n=14) with:

- ⇒ A universal screening protocol for OUD **increased by 58%**, from 21% to 79%; and
- ⇒ A protocol or process flow to assess and link pregnant people with OUD to support services **increased by 53%**, from 33% in place to 86% in place.

The use of non-pharmacologic care for infants with NAS can decrease pharmacologic treatment, hospital length of stay, and costs. Non-pharmacologic care includes things such as maximizing skin-to-skin contact, rooming-in, quiet time, and breastfeeding.

Prioritizing this care involves family engagement. Between January 2019 and March 2022, the NYSPQC has seen a sustained shift in reported data indicating higher percentages of infants with opioid exposure whose mothers/birthing persons were engaging in non-pharmacologic care during their infant's hospitalization.

Both pilot and expansion phase hospitals have reported improvements in the percentage of patients discharged from the birth hospitalization with documented verbal screening for substance use. Since November 2021, both phases have consistently had a higher percentage of patients verbally screened with a standardized questionnaire than with a single item question/part of social or health history.

Summary of Successes

Educational Opportunities

The NYSPQC hosted 11 Coaching Call webinars in 2022 for teams to learn a variety of topics related to the project, in addition to the 30 webinars hosted since the project's inception.

Recent Coaching Call webinars have focused on:

- ⇒ Collaborating with patient advocates and those with lived experience;
- ⇒ Utilizing a standardized questionnaire for OUD in the prenatal period;
- ⇒ Implementing the Vermont Oxford Network's (VON) *Nurture the Mother—Nurture the Child* about trauma informed care; and
- ⇒ Team sharing of successes and best practices.

Involving People with Lived Experience

The project has engaged two patient advocates with lived experience. Each shared their personal stories during Coaching Call webinars and participated in a Coaching Call webinar which featured the patient advocacy coalition MoMMA's Voices (mommavoces.org). The August 2022 Coaching call webinar focused on the importance of engaging people with lived experience in hospital team efforts, strategies and resources for engaging people with lived experience as part of the hospital team, and best practices for engaging and working with people with lived experience. The response to these webinars has been overwhelmingly positive, and several hospital teams have reached out for more information on how they can integrate patient advocates in their work.

QI CORNER

Unsure if a change will lead to the improvement you're looking for?

The Plan-Do-Study-Act (PDSA) Cycle is a simple tool for building your confidence that implementing a change will work. When beginning a series of iterative PDSA cycles, start SMALL. **The "1:1:1 rule" can be a helpful tip for planning your initial testing cycle.** For example, conduct a test with one provider and one patient during one encounter. You may be surprised at how much you learn! Increase the scale (i.e., the timespan or number of events) of each subsequent test and then expand the scope (i.e., conditions under which your test occurs) as your confidence in the change builds. Start with small scale testing instead of putting time and resources into the implementation of a big change that may or may not result in improvement.

Three Cheers for this Team!

The dedication and work of participating hospital teams are crucial to the mission of the NYSPQC. We would like to take the opportunity to highlight one team's amazing work and dedication to the project.



North Shore University Hospital Manhasset, NY

North Shore University Hospital has focused their efforts as part of the NYS OUD in Pregnancy and NAS project on:

- Identify resources for referral to treatment;
- Create policy for universal screening/testing/referral to treatment;
- Education of team members including nursing lectures, webinars, and training courses;
- Having staff members be champions of the initiative;
- PDSA of having Screening, Brief Intervention, and Referral to Treatment; Implementation on Labor and Delivery to lead to Universal Screening; and
- Paper Prescreen to EMR Sustainability.

Let's applaud North Shore University Hospital for their hard work!

Currently Available Webinars

COVID-19 Vaccinations During the Perinatal Period

The webinar included providing resources on talking with patients about the COVID-19 vaccine and sharing additional COVID-19 vaccination related materials and guidance with providers. To view a recording of this webinar, [click here](#).

This webinar qualifies for Continuing Education Credits until March 2023.

COVID-19 Vaccination for Black Birthing People

The webinar enhanced participants' knowledge and competence in relation to improving COVID-19 vaccination rates for people in the perinatal period with an emphasis on Black Birthing people and those disproportionately impacted by COVID-19. To view a recording of this webinar, [click here](#).

This webinar qualifies for Continuing Education Credits until October 2023.

**Do you have an idea for a future Coaching Call webinar?
Please e-mail NYSPQC@health.ny.gov.**

Birth Equity Improvement Project (NYSBEIP)

Overview of Initiative

Starting in January 2021, the BEIP is a collaborative learning project designed to improve the experience of care and obstetric outcomes for Black birthing people in NYS. Participating facilities are working towards the project goals by:

- Using a Patient Reported Experience Measure (PREM) to center the perspectives of Black birthing people to improve their experience of care;
- Collecting and utilizing perinatal data by demographics including race, ethnicity, gender identity and language; and
- Implementing policies and procedures to mitigate subjective decisions based on race and promote respectful and standardized care with shared decision making with Black birthing people.

At the launch of the project, facilities completed a Facility Readiness Assessment (FRA) to assess where they were in the process of addressing racial/birth equity. Some of the key findings included:

- About 60% of facilities have documented, public commitments to equity;
- In 28% of facilities, staff from underrepresented racial, ethnic, linguistic, and gender groups are proportionally represented in leadership and management positions;
- Advocacy on behalf of racial, ethnic, linguistic, and gender equity has been reported to be part of the work in 36% of facilities; and
- 28% of facilities reported the existence of formal partnerships with external organizations from diverse racial, ethnic, linguistic, and gender communities to reduce inequities in programs and operations.

Participants

There are currently 72 birthing facilities participating in the project including:

- ⇒ 17 Regional Perinatal Centers
- ⇒ 25 Level III facilities;
- ⇒ 15 Level II facilities;
- ⇒ 13 Level I facilities; and
- ⇒ 2 birthing centers

Summary of Successes

Since January 2021, the BEIP has hosted six Learning Sessions and sixteen Coaching Call webinars. Equity education during these events has included topics such as:

- Transitioning to a cultural humility model of care;
- Creating an equity action plan;
- Relieving pressure on birthing people; and
- Establishing respectful patient partnerships.

A Grand Rounds template has been provided for teams to use to inform their facility team, unit or leadership about the project.

Data highlights from the project include:

- 77% of participating facilities offer anti-racism training;
- 97% of the birthing people have reported being able to take part in decisions about their care on the patient reported experience measure; and
- There has been an 18% increase in facilities reporting that they stratify data by race and ethnicity since the start of the project.

Highlights from the PREM

The PREM is an anonymous, 11-question survey that participating facilities are giving to birthing people to complete at the time of discharge. The PREM was launched in July 2021.

- 13,149 PREM surveys have been completed by NYS birthing people through June 2022.
- 21% of birthing people who completed the survey have indicated that they “have felt pressured by the health care team into accepting care they did not want or understand”.
- When stratified by race and ethnicity, Asian, Hispanic and Black birthing people report feeling pressured more than white birthing people.

Next Steps

Quality improvement activities, data collection, and analysis will continue at participating facilities. Ongoing Coaching Call webinars include topics such as: staff perceptions and experiences of equity at work and how to use PREM data to inform birthing team to relieve pressure on birthing people.

Improving COVID-19 Vaccination Rates Among People in the Perinatal Period

Overview of Initiative

Funding from the CDC has allowed the NYSPQC to expand its efforts related to the COVID-19 pandemic, with an emphasis on improving vaccination rates among populations disproportionately impacted by COVID-19. This work seeks to improve outcomes for all pregnant people, people who are planning to become pregnant, and people who are breastfeeding or in the postpartum period.

The initiative is focused on:

- Improving provider capacity for equitable delivery of COVID-19 vaccinations to pregnant and postpartum people and their families.
- Increasing the number of facilities with protocols to improve COVID-19 vaccination screening and vaccination of pregnant and postpartum people and their families.

Summary of Successes

The NYSPQC has implemented activities to strengthen and expand the work of the NYSPQC related to COVID-19 vaccination among pregnant and postpartum people. These activities have included:

- Development and dissemination of a current practices survey to all NYS perinatal providers related to counseling, screening, and provision of referral for COVID-19 vaccination among the perinatal population and their families.
- Development of the COVID-19 vaccination and pregnancy [brochure](#) and [poster](#) to encourage and provide information to pregnant people about the COVID-19 vaccine. The brochure was translated into 10 additional languages and the poster into Spanish. These materials were disseminated to all NYS birthing facilities and are available to download and print on the [NYSDOH website](#) as well as available for ordering from the [NYSDOH Distribution Warehouse](#).
- Collaborating with a workgroup of staff from within the DOH including Bureau of Perinatal, Reproductive, and Sexual Health (BPRASH) and the Bureau of Marketing and Creative Communications (BMCC), to launch the COVID-19 and Pregnancy Media Campaign in Fall 2022. A workgroup consisting of staff from these bureaus developed promotional materials (i.e., commercials, Facebook posts, other social media) and creatives for the COVID-19 and Pregnancy Media Campaign to increase vaccination uptake for pregnant and postpartum people.

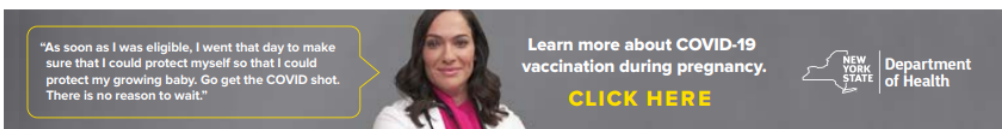
Brochure Outside Panel: English



Brochure Inside Panel: Burmese Translation



Banner Ad



Banner Ad

