

Virginia Maternity Care Quality Improvement Collaborative

Presented by:

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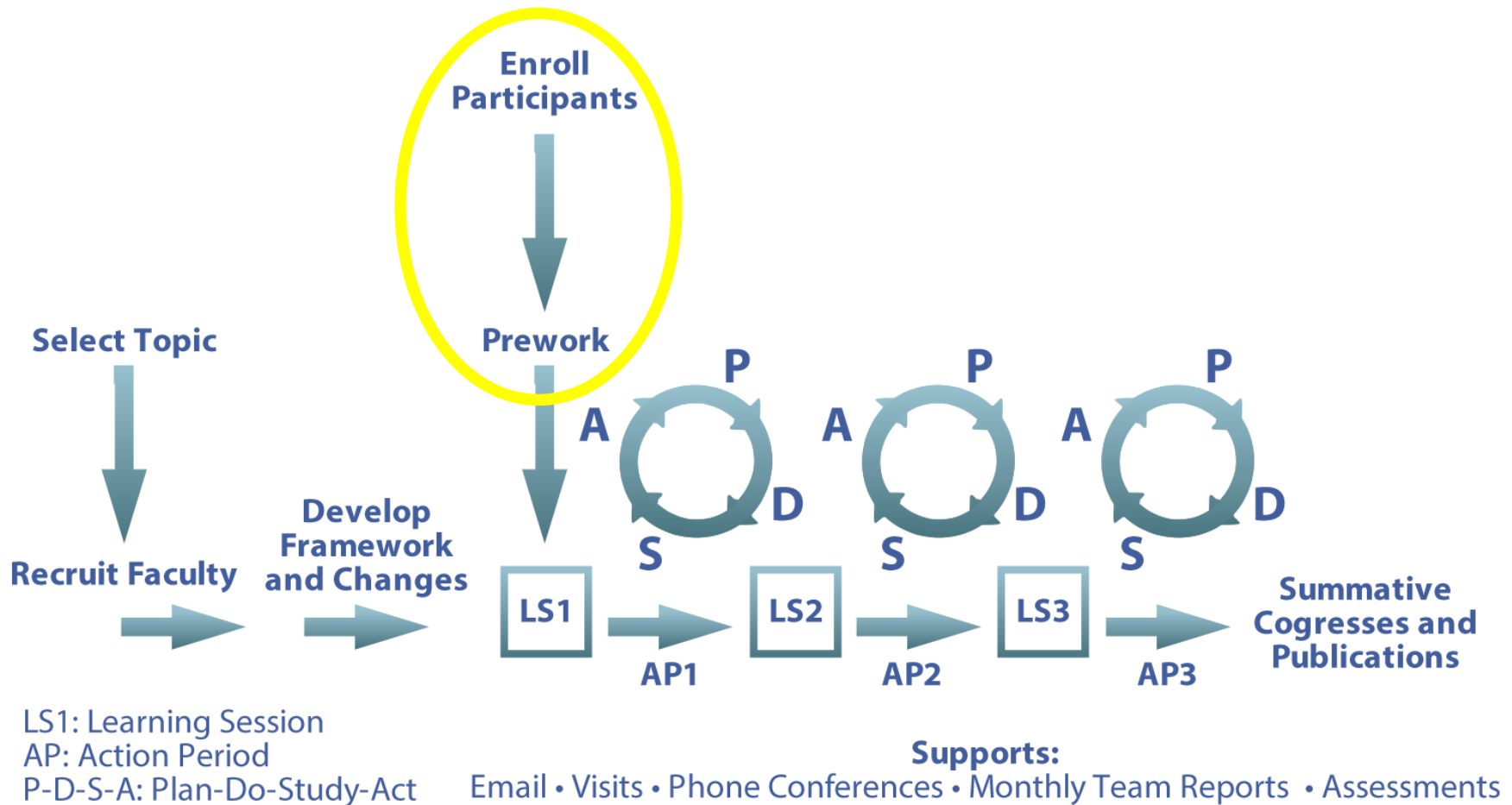
Virginia Department of Health

Objectives

Upon completion of this presentation, learners will be able to:

- Provide an overview of the Aim and Charter of the Virginia Maternity Care Quality Improvement Collaborative; and
- Describe the purpose of the September 25, 2015 Collaborative Learning Session.

Virginia Maternity Care QI Collaborative



Model for Improvement

What are we trying to accomplish?

How do we know that a change is an improvement?

What changes can we make that will result in the improvements we seek?



Reference: Langley G, Nolan T, Norman C, Provost L (1966). The Improvement Guide: a practical approach to enhancing organisational performance, Jossey Bass Publishers, San Francisco

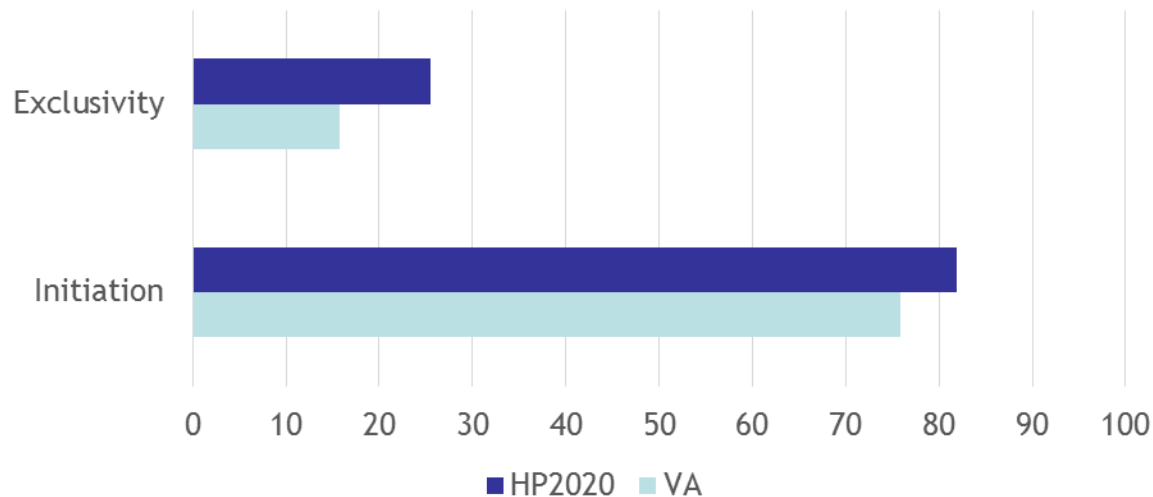
The aim of the Virginia Maternity Care Quality Improvement Collaborative is for 30 of Virginia's 59 maternity facilities to achieve four of five stars from the Virginia Maternity Care Breastfeeding-Friendly Designation program (equates to eight of the Ten Steps to Successful Breastfeeding) by May, 2018.

Problem to be Addressed



Virginia's state-level mPINC score (an average of facility-level scores) is 76 of 100, indicating that significant improvements are needed in maternity care practices to protect, promote and support safe and effective infant feeding and care.

Problem to be Addressed



Virginia's breastfeeding rates (75.9% initiation and 15.8% exclusivity at six months) lag behind Healthy People 2020 Goals (81.9% initiation and 25.5% exclusivity at six months). Rates also vary significantly by racial/ethnic group and geographic location, likely perpetuating lifelong health inequities.

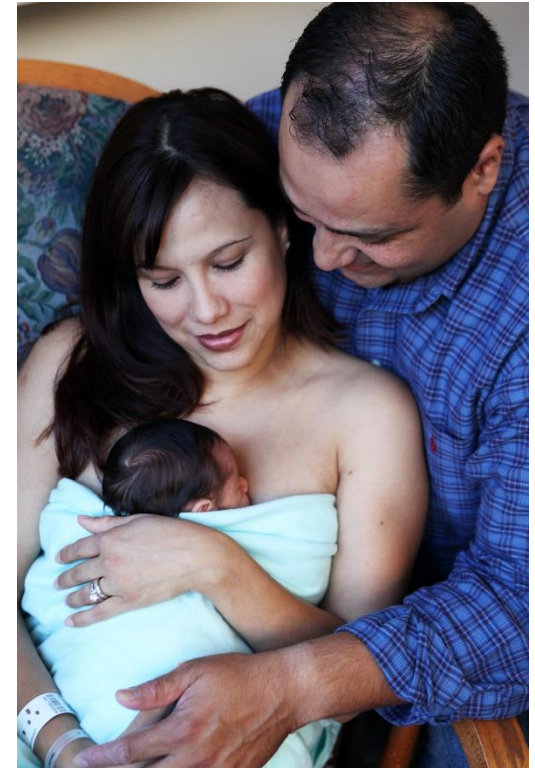
Reason for the Effort



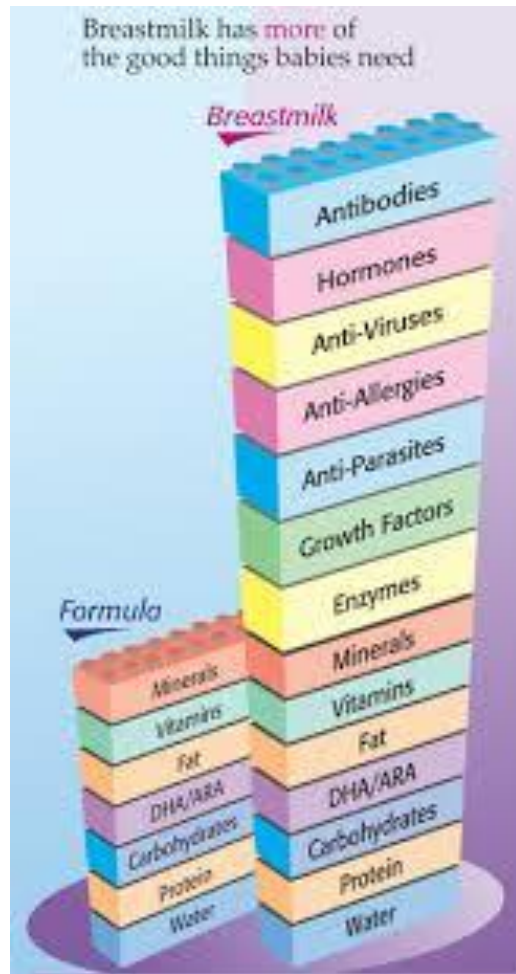
All families have a right to evidence-based practices designed to protect, promote and support safe and effective infant feeding and care.

Reason for the Effort

Infants who experience skin-to-skin contact in the immediate post-partum have lower risk of hypothermia (and higher axillary temperatures), lower and more stable respiratory rates; lower risk for hypoglycemia (and higher blood glucose levels); faster return to physiologically normal heart rate; less crying and stress signals; earlier breastfeeding initiation, and higher likelihood of effective first feed; increased bonding due to ability to smell and feel mother.



Reason for the Effort



Breastfeeding is the normal and optimal method by which to nourish and support the immune system of infants and young children.

Reason for the Effort



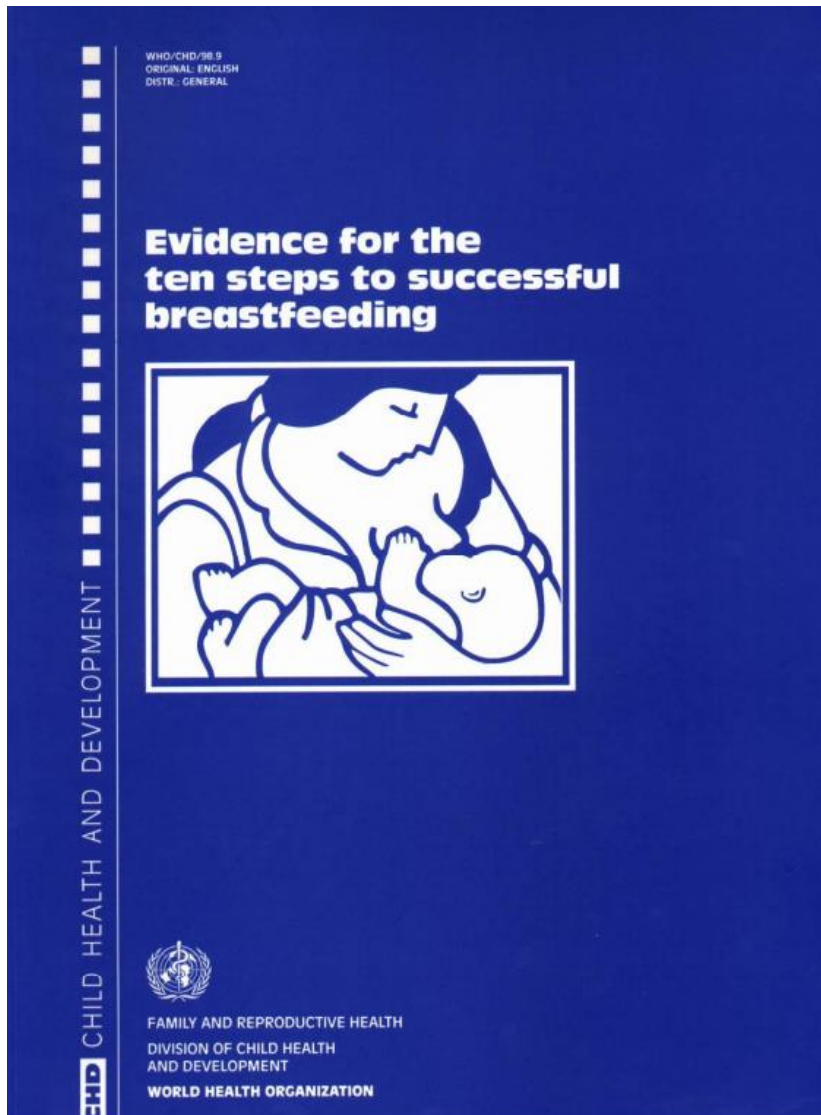
Increased rates of breastfeeding would reduce the risks of maternal and child diabetes, child obesity, breast cancer, other cancers, heart disease, as well as preventable pediatric conditions with high prevalence in Virginia, including obesity, diarrhea, acute respiratory illness, asthma, allergies, and SIDS.

Reason for the Effort



The Ten Steps to Successful Breastfeeding promote optimal neonatal adjustment to the extra-uterine environment and attachment security of mother-baby couplets, regardless of feeding method.

Reason for the Effort



The Ten Steps to Successful Breastfeeding constitute a well-documented best practice to increase breastfeeding rates in the maternity setting and beyond. The program is endorsed by all major professional organizations working in maternal and child health.

Reason for the Effort

Virginia's hospital personnel desire a maternity care quality improvement model that is free of charge, progress-based, cost-effective, staff-sensitive and patient-centered.

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Expected Outcomes

1. 50+ (of 59) maternity facilities will be enrolled in the collaborative by 9/2015.
2. 30+ (of 59) maternity facilities will earn four of five stars from the Virginia Maternity Care Breastfeeding-Friendly Designation program (eight of the Ten Steps) by 5/2018.
3. Virginia's state-level mPINC score will increase from 76 (2013) to 82 by 2017 survey.
4. At least eight participating facilities will achieve Baby-Friendly USA Designation by 7/1/2018.

Monthly Measures: Six Expected

1. Skin-to-Skin: Vaginal Birth
2. Skin-to-Skin: Cesarean Birth
3. Rooming-In (Non-Separation)
4. Safe Formula-Feeding Instruction
5. Breastfeeding Initiation Rate
6. Exclusive Breastfeeding Rate

Monthly Measures: Pick 2+ More

- Prenatal Education
- Breastfeeding Assessment and Support
- Hand Expression Instruction
- Milk Expression Instruction, NICU Mothers
- Pacifier Use
- Bottle-Top Use
- Post-Discharge Support

Annual Measures: Pre-CLS

- Infant Feeding Policy
- Staff Training re: Infant Feeding and Care
- WHO Code Compliance
- BFUSA 4-D Pathway Status

Bi-Annual Measure

- Facility-specific mPINC Score

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Activities

1. Annual in-person Collaborative Learning Sessions
2. “Action Period” Supports
 - a. Monthly Content Webinars
 - b. Bi-Monthly Office Hours
 - c. Topic-Specific Workgroups
4. Secure online platform for resource and data sharing
5. Cutting-edge quality improvement training and technical assistance
6. Presentations by expert faculty
7. Partnership in continuous learning with other maternity facilities
8. Expert guidance in documentation and data collection

Faculty Members

- **Ann Kellams**, American Academy of Pediatrics, Virginia Chapter Breastfeeding Coordinator
- **Katherine Wilson-Thompson**, Virginia Department of Health
- **Tammy Eberly**, Breastfeeding Consortium
- **Diana Karczmarczyk**, Virginia Breastfeeding Advisory Committee
- **Emily Taylor**, Quality Improvement Advisor and Faculty

Facility Team Members

- Director / Manager, Women's and Children's Services
- Nurse Manager(s): Prenatal, L & D, Post-Partum, Nursery, LDRP
- Provider Champion: Obstetrics and Pediatrics
- Nurse Educator
- Lactation Consultant
- Community Representative, Mother
- Community Representative, WIC

The Next Step: September 25 CLS

Registration (as of 10AM today):

- 44 facilities
- 126 individuals
- representing 79.78% of Virginia's live births
- Verbals from LewisGale & Bon Secours DePaul
- Hopeful for:
 - Virginia Hospital Center
 - Reston Hospital Center
 - Mary Washington Hospital
 - Valley Health Winchester Medical Center
 - Southside Regional Medical Center
 - Stafford Hospital

Next Steps



- September 25: CLS
- October - April: Action Period Supports
- May, 2016: CLS

