

# PNQIN AIM

## Opioid Use Disorder in Pregnancy

### Webinar Series

January 19, 2021

Webinar 7



# OUD in Pregnancy Webinars

## Monthly Agenda Overview

12:00 - 12:05: Welcome/ Introductions – Happy New Year!

12:05 - 12:15: PNQIN & team updates

12:15 - 12:30: Brief QI teaching

- **Emily Reiff, MD – Understanding Data Control Charts**

12:30 - 12:55: Team presentations + discussion

- **Linda Burke, Beth Israel Deaconess Medical Center – Plymouth**
- **Lindsay Jeffs, Sturdy Memorial Medical Center**

12:55 - 1:00: Closing/ Final Comments

# Webinar Housekeeping

- We will take attendance in the chat box each month – please comment with your name and hospital
- Please mute yourselves unless you would like to contribute to the conversation or ask a question
- Utilize the "raise hand" feature or chat box to speak
- We will record this session and upload the recording and webinar slides to our website after the call
- We welcome feedback about the webinar content and structure!
- Please participate! We want this webinar to be helpful and collaborative!

# PNQIN AIM Wave 2 - Who's on the Line?

Beth Israel Deaconess Plymouth  
Beverly Hospital  
Brockton Hospital  
Cambridge Hospital/CHA  
Charlton Memorial Hospital  
Emerson Hospital  
Good Samaritan Medical Center  
Health Alliance Hospital  
Heywood Hospital  
Holy Family Hospital  
**Holyoke Medical Center**  
Lawrence General Hospital  
Martha's Vineyard Hospital  
Melrose-Wakefield Hospital

Mount Auburn Hospital  
Nantucket Cottage Hospital  
**Norwood Hospital**  
St. Elizabeth's Medical Center  
St. Luke's Hospital  
Sturdy Memorial Hospital  
**Tobey Hospital**  
Winchester Hospital

**Closed OB permanently**  
**Closed OB temporarily**



PNQIN AIM OUD Wave 2 **Targeted** Hospitals

- Beth Israel Deaconess Plymouth
- Beverly Hospital
- Brockton Hospital
- Cambridge Hospital/CHA
- Charlton Memorial Hospital
- Emerson Hospital
- Good Samaritan Medical Center
- Health Alliance Hospital
- Heywood Hospital
- Holy Family Hospital
- Holyoke Medical Center
- Lawrence General Hospital
- Martha's Vineyard Hospital
- Melrose- Wakefield Hospital
- Mount Auburn Hospital
- Nantucket Cottage Hospital
- Norwood Hospital
- St. Elizabeth's Medical Center
- St. Luke's Hospital
- Sturdy Memorial Hospital
- Tobey Hospital
- Winchester Hospital

# PNQIN Perinatal Opioid Project Leadership Team

## PNQIN

- Fifi Diop (DPH) – Grant Primary Investigator
- Audra Meadows (BWH)
- Ron Iverson (BMC)
- Munish Gupta (BIDMC)
- Kali Vitek (BMC)
- Allie Doyle (BIDMC)

## Neonatal Folks

- Elisha Wachman (BMC)
- Larry Rhein (UMass)
- Rachana Singh (Baystate)
- Davida Schiff (MGH)
- Alan Picarillo (Maine)
- Eileen Costello (BMC)

## Maternal Folks

- Katherine Callaghan (UMass)
- Leena Mittal (MCPAP for Moms)
- Laura Sternberger (Moms Do Care)
- Nicole Smith (BWH)
- Donna Jackson-Kohlin (Baystate)
- Linda Jablonski (Baystate)

## Academic and Organizational Partners

- Patrice Melvin (BCH)
- Karla Damus (BU)
- Christina Gebel (Accompany Doula Care)

## State Partners

- Fifi Diop (DPH and PI of PNQIN Grant)
- Griffin Jones (HPC)
- Michael Kelleher (OHHS)
- Debra Bercuvitz (DPH)
- Abby Taylor (AGO)
- Karen Pressman (BSAS)
- Julia Reddy (BSAS)
- Mary Lutz (DCF)
- Alissa Cruz (MassBIRT)
- Colleen Labelle (BMC)
- Julia Prentice (BLC)
- Natalia Ciesielska (BLC)

## Families

- Patricia McDonnell (Baystate)
- Julie Maida
- Meghann Perry
- Ceara McManus (Moms Do Care)

# Announcements

- Online stigma, bias, and trauma-informed care training on the PNQIN website
  - We're waiting on some final CE credit logistics to be finalized by BU before we go live!
  - There will be an email announcement when the training is available
- Keep on an eye out for a Memorandum of Understanding (BLC) – these **must** be signed and returned in order to start collecting site data
  - **Goal date to send MOU: February 1st, 2021**
  - We are also exploring a way to complete this document electronically to make it easier for teams
- Check out our websites for more updates and upcoming events!

# Available Trainings/Events

- ASAM/ACOG's Buprenorphine Waiver Trainings
  - **Upcoming dates:** January 22nd, and 25th 2021
  - **Register:** [https://www.asam.org/education/live-online-cme/waiver-qualifying-training/ob-gyn-focus?utm\\_source=ACOG&utm\\_medium=Today's%20Headlines&utm\\_campaign=ACOG&utm\\_term=20TOUD](https://www.asam.org/education/live-online-cme/waiver-qualifying-training/ob-gyn-focus?utm_source=ACOG&utm_medium=Today's%20Headlines&utm_campaign=ACOG&utm_term=20TOUD)
- SBIRT (Screening, Brief Intervention, and Referral to Treatment) Training through MASBIRT at Boston Medical Center
  - Virtual, 1-hour training that fit into regular meeting times (training team can offer multiple sessions)
  - **Sign up your team:** contact Alex Heinz at [Alexandra.Heinz@bmc.org](mailto:Alexandra.Heinz@bmc.org)

# Available Trainings/Events

## **SPEAK UP Champions© Implicit and Explicit Racial Bias Education**

- March 23rd & 25th, 2021 from 8:30am – 12:30pm ET (both days)
- This education is **free** to Perinatal Professionals in Massachusetts!
- 8 hours of live virtual interactive learning that outlines quality improvement strategies to support individuals and groups with dismantling racism, providing quality equitable care, and reducing health disparities.
  - 5.75 CNE contact hours (CME credits approval pending)
- Please register by February 28th, 2020 so that PQI can mail your workbook in time: <https://www.perinatalqi.org/events/register.aspx?id=1461110>



# New Resources: COVID-19 vaccine

Visit <https://www.mpqcmma.org/covid-19-vaccine> for more details!



The Massachusetts Perinatal  
Quality Collaborative

[Home](#) [About Us](#) [Meetings and Events](#) [Obstetrical Projects](#) [Team Resources](#) [PNQIN COVID-19 Response](#) [Contact Us](#)

## The COVID-19 Vaccine: Guidelines and Resources for Pregnant & Lactating Patients

PNQIN-MPQC and our partners are committed to providing accurate, up-to-date guidance and resources on counseling for and administration of the COVID-19 vaccine to pregnant and lactating patients in Massachusetts. Please continue reading for more information.

### **COVID-19 Shared Decision-Making (Baystate Health & UMass Medical School - Baystate)**

This [decision aid](#) was created for use by pregnant people (and people planning to become pregnant) who are considering whether to get the COVID-19 vaccine, as well as their healthcare providers, friends, and family. The working group that developed this resource consists of experts in the fields of OB/GYN, Maternal-Fetal Medicine, Shared Decision-Making and risk communication, Emergency Medicine, and current COVID-19 research.

Please direct any questions to Dr. Elizabeth Schoenfeld ([Elizabeth.Schoenfeld@bhs.org](mailto:Elizabeth.Schoenfeld@bhs.org)). Feedback on this decision aid can be provided via the survey link on page 5.

# Team Updates/Check-In

## What has your team been working on over the last month?

"We have collected the results of our Provider Breastfeeding Attitude Survey. Our internal group is meeting on 1/21 to review the results together.

The ultimate goal of the project is to develop a standardized process to determine which patients are eligible to breastfeed and develop ways in which we can collectively help to contribute to their breastfeeding success both during their inpatient stay and thereafter."

# QI Webinar Topics for Next 12 months

## Date/QI Topic

7/21/20	OUD Bundle Components Overview & Stakeholders
8/18/20	Developing a Project AIM
9/15/20	Measures for Improvement
10/20/20	Key Driver Diagram
11/24/20	Developing Interventions
12/15/20	Understanding Run Charts
<b>1/19/21</b>	<b>Understanding Data Control Charts</b>
2/16/21	Using the PDSA Cycle
3/16/21	PDSA: Making Adjustments
4/20/21	Scale and Spread Up
5/18/21	Sustainability

# QI Teaching:

## Understanding Variation: Using Data Control Charts to Identify Change

Emily Reiff, MD  
Brigham & Women's Hospital  
[ereiff@bwh.harvard.edu](mailto:ereiff@bwh.harvard.edu)

# Elements of improvement

- Systems appreciation
- Understanding variation
- Building knowledge
- Human side of change

# Statistical process control

- Process
- Dynamic display
  - Run charts
  - Controls charts
- Monitor, control, and improve process performance over time

# Understanding variation

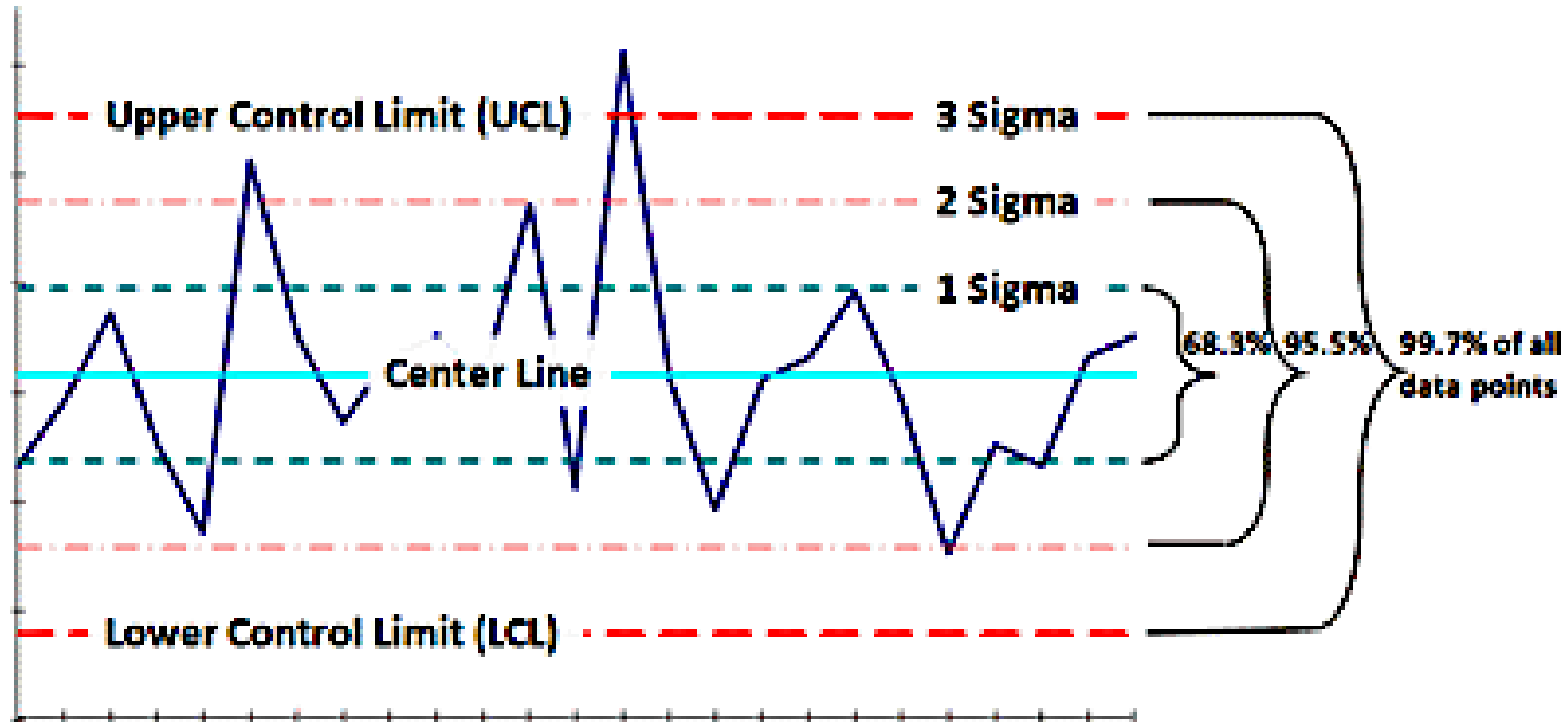
- Common cause
  - Inherent to process
  - Consistent, predictable
- Special cause
  - Not part of normal process
  - Sporadic, unpredictable



# Control charts

- Detect and monitor process over time
- Identify special from common cause
- Guide improvement efforts
- Evaluate change
- Common language

# Elements of a control chart

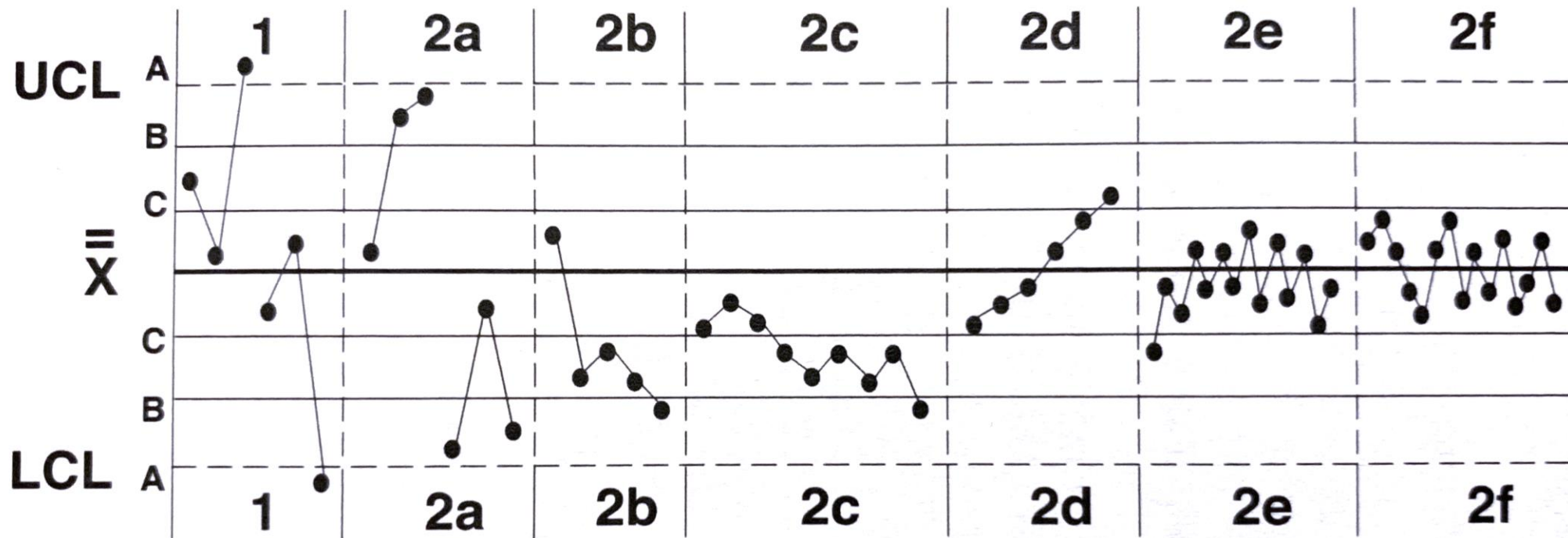


# Tests for special causes

- Evaluate patterns of data points
- Likelihood to occur within the statistical framework

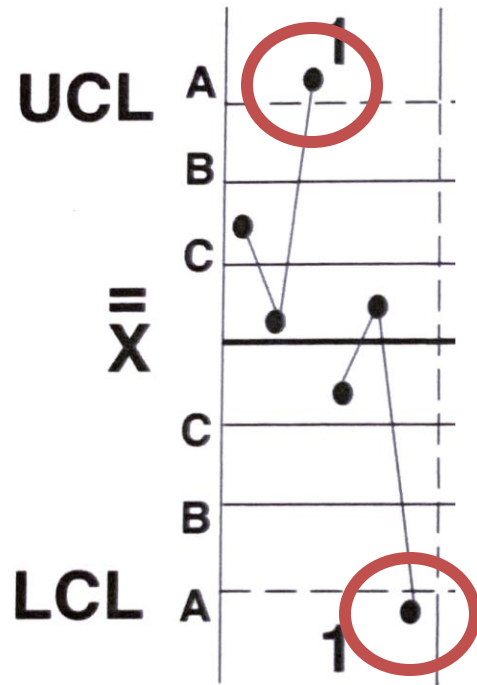
# Interpretation, tests for special cause

## Tests for Control



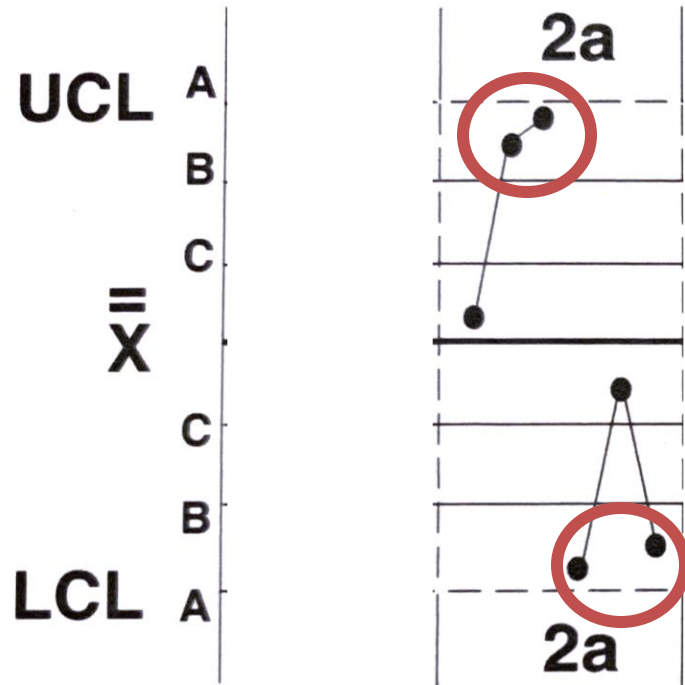
Source: Lloyd S. Nelson, Director of Statistical Methods, Nashua Corporation, New Hampshire

## Tests for Control



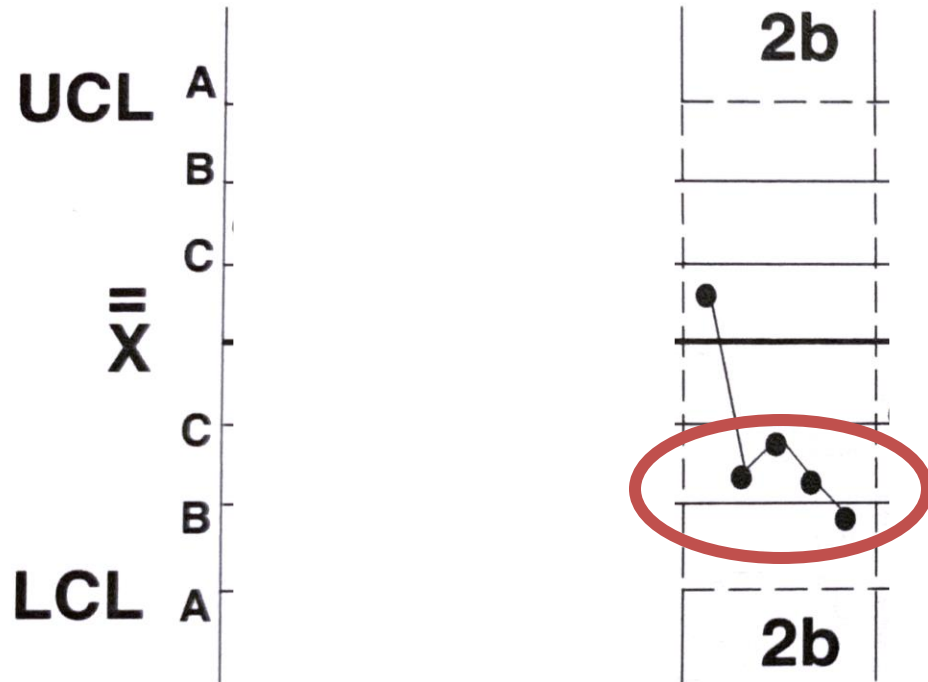
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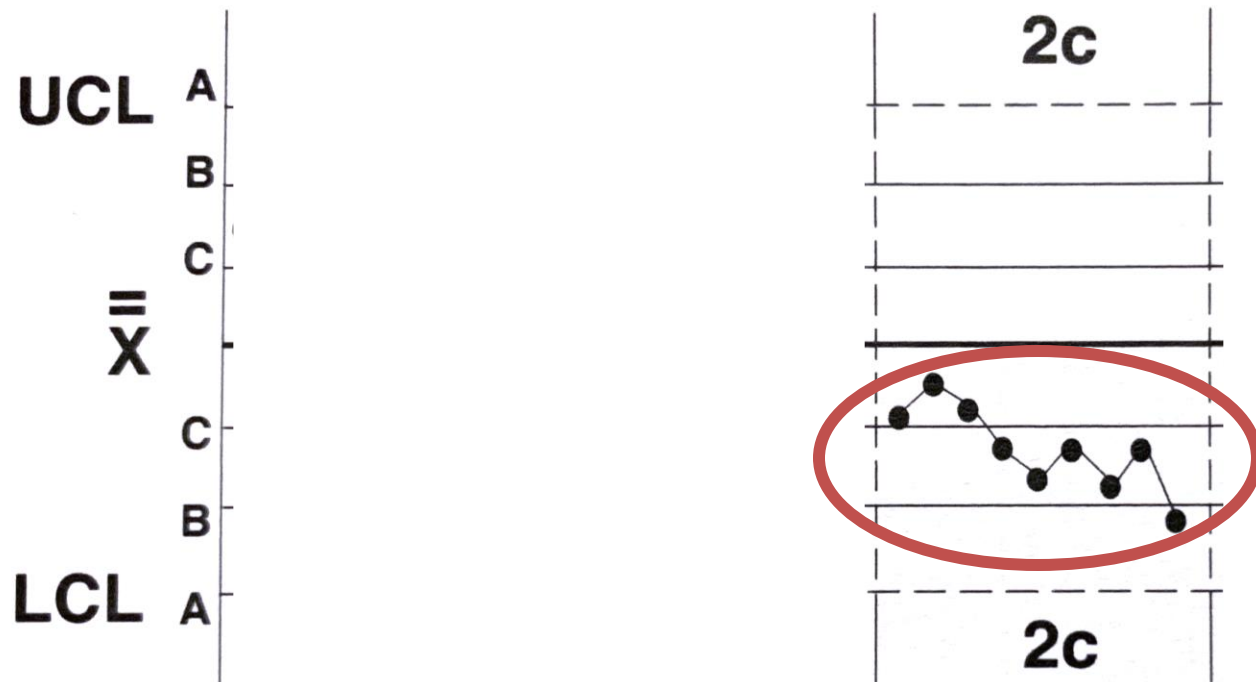
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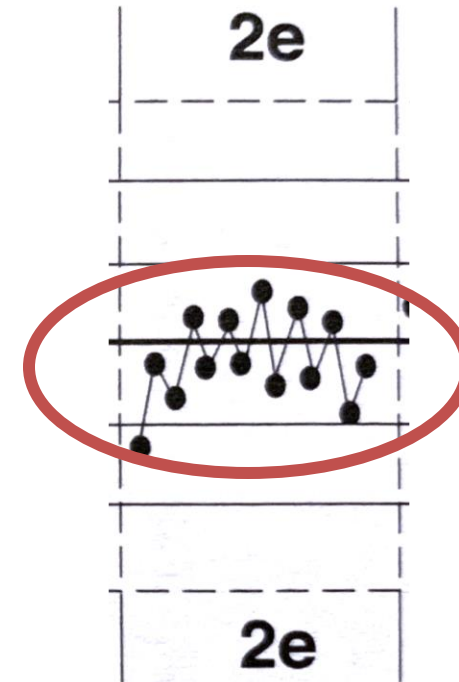
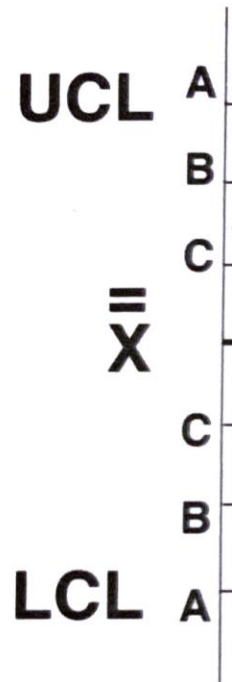


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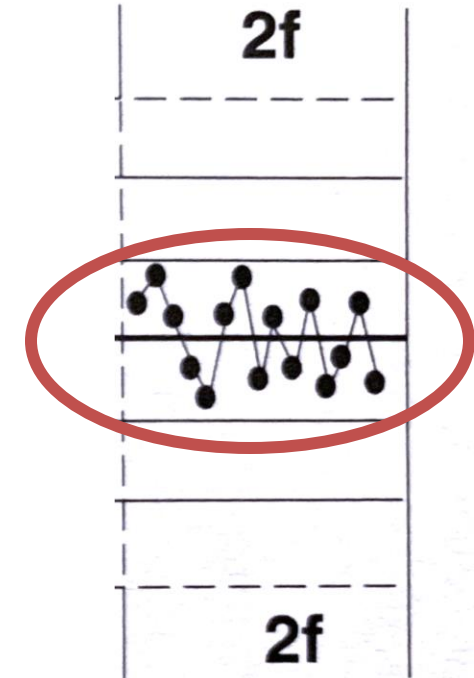
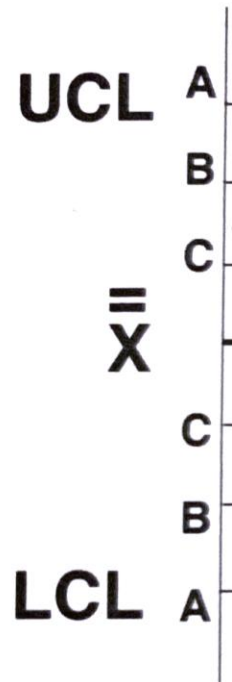
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## Tests for Control



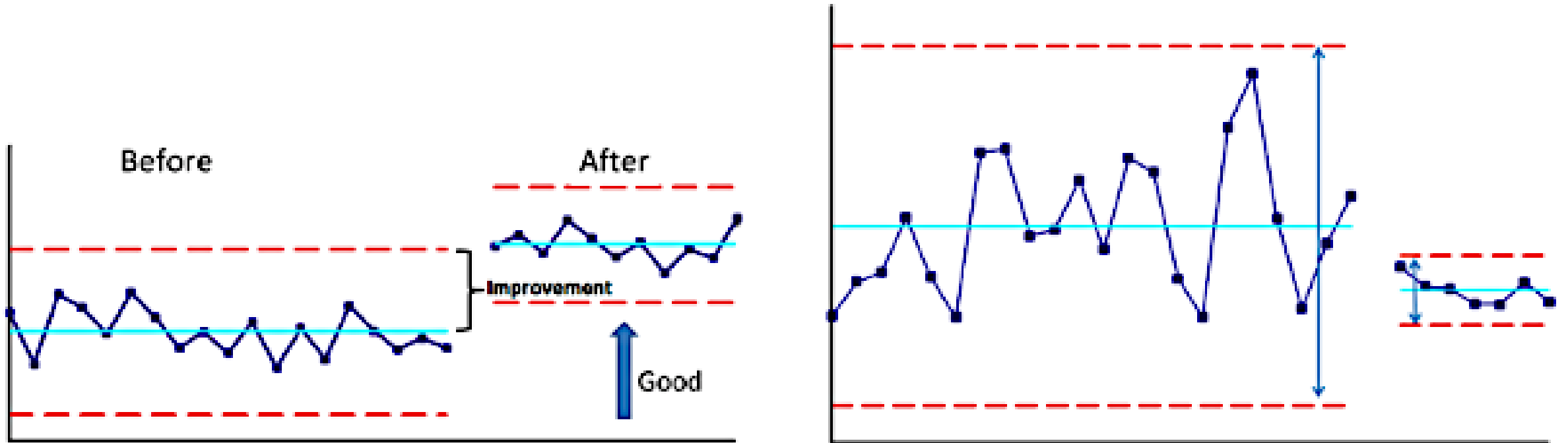
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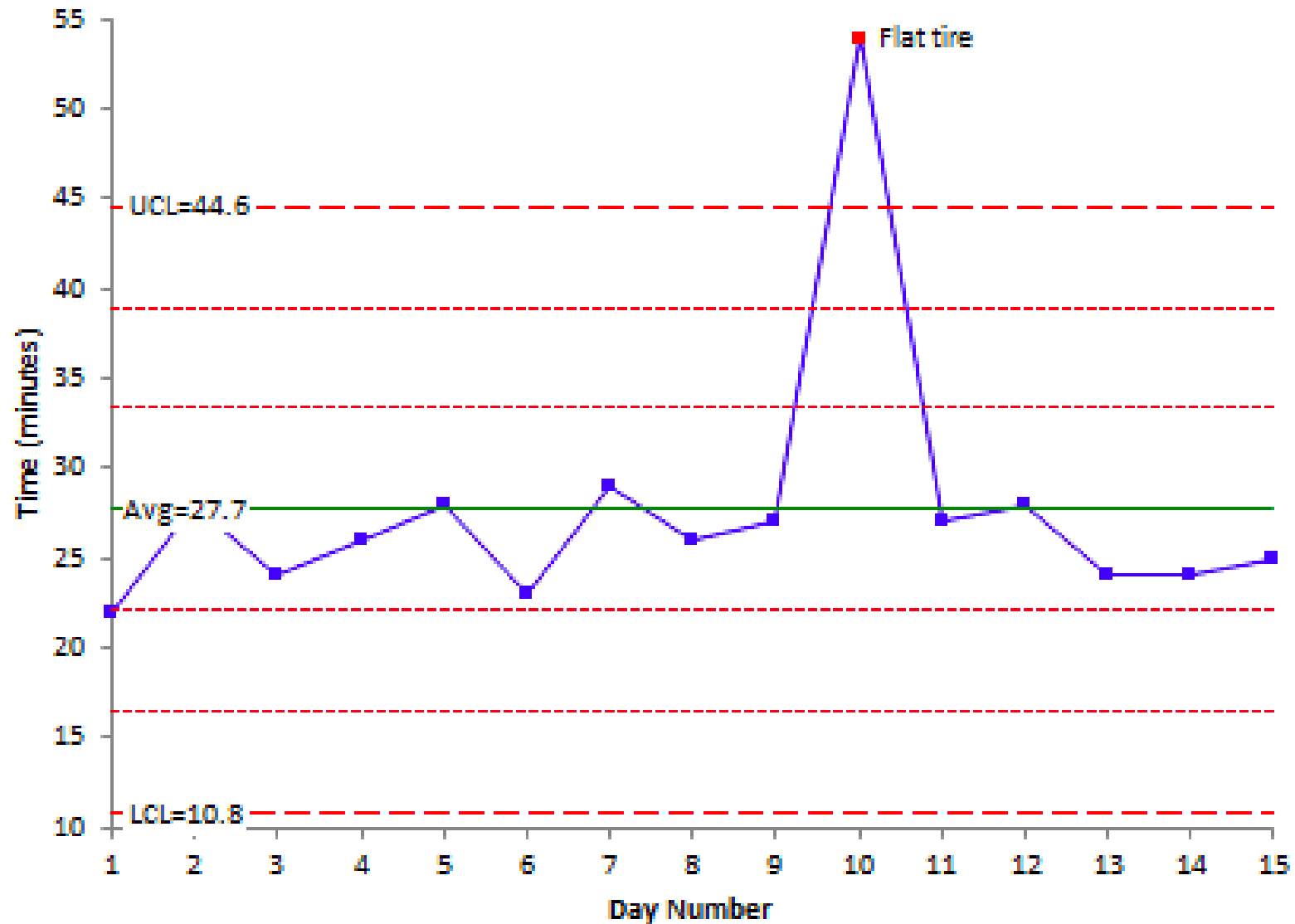


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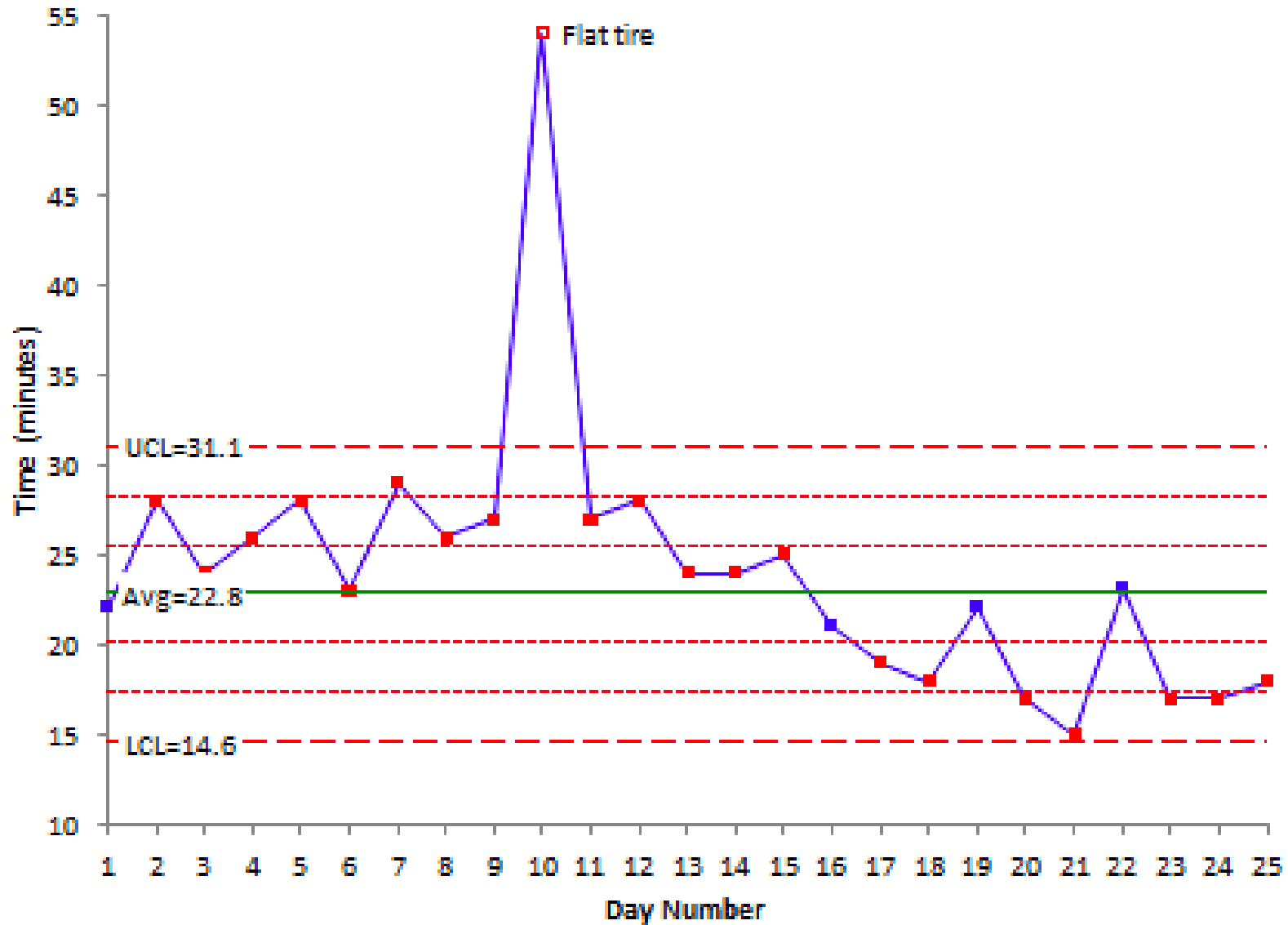
# Interpretation, monitor over time



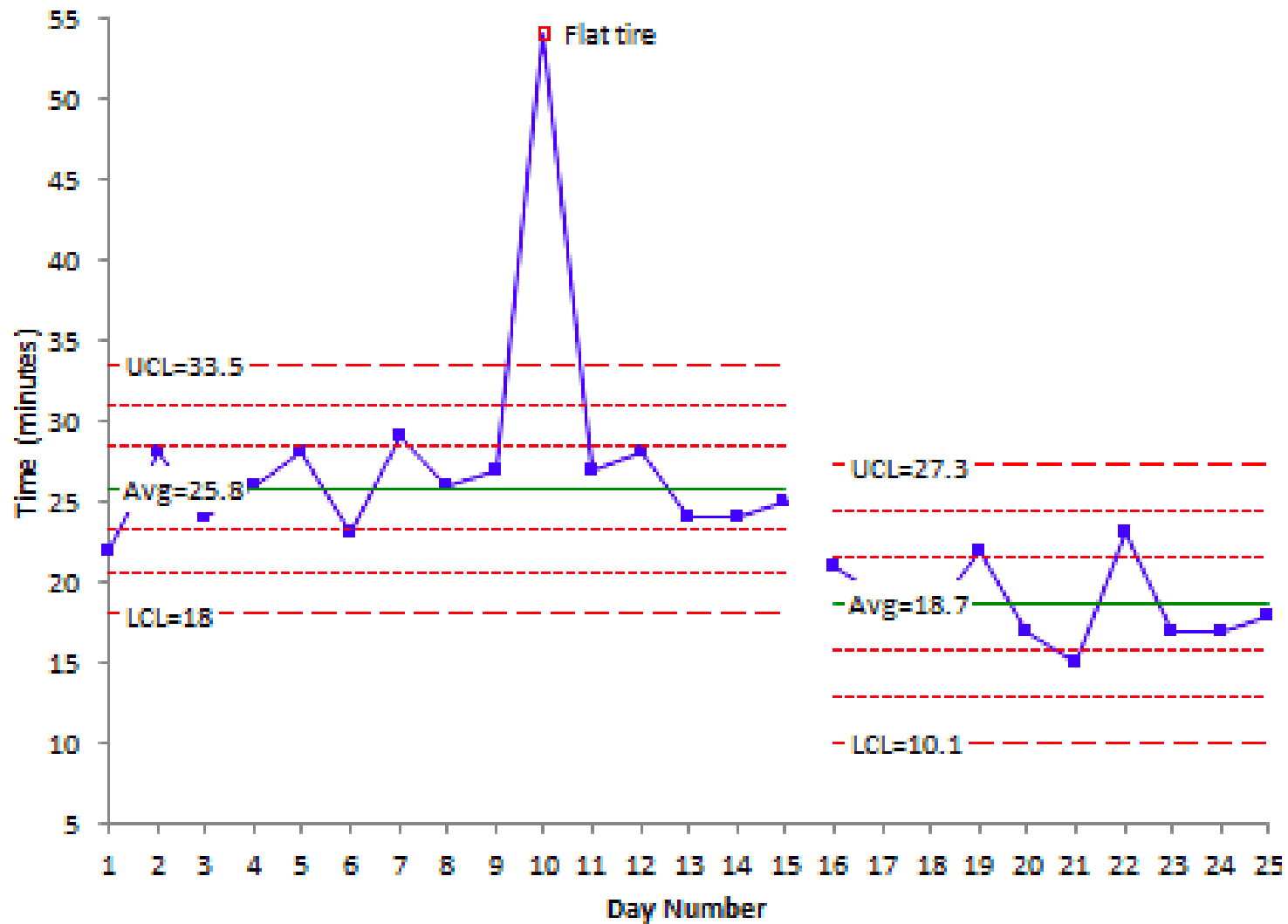
# Example #1



# Example #2



# Example #3



# Control charts

- Dynamic display process
- Analyze variation type
- Understand process
- Create predictions
- Direct quality improvements
- Monitor over time



# References

- Carey RG, Lloyd RC. Measuring Quality Improvement in Health Care: A Guide to Statistical Process Control Applications. New York. ASQ Pr, 2001.
- The Memory Jogger II Healthcare Edition, GOAL/QPC 2008
- <http://www.ihl.org/education/IHIOpenSchool/resources/Pages/AudioandVideo/Whiteboard13.aspx>
- <https://www.qimacros.com/lean-six-sigma-articles/stability-analysis-vs-capability-analysis/>
- <https://www.spcforexcel.com/knowledge/control-chart-basics/purpose-control-charts>

# Guest Speaker Webinar Topics for Next 12 months

## Date/Guest Speaker Topic

7/21/20	OUD Screening Options
8/18/20	Plans of Safe Care
9/15/20	Caring for Patients with OUD
10/20/20	Linkages to Care
11/24/20	Equity Considerations in OUD care
12/15/20	Centering Patient Voice
<b>1/19/21</b>	<b>Wave 2 Team Presentations (formerly OUD SMM Data)</b>
2/16/21	Early Head Start
3/16/21	MAT
4/20/21	Pain Relief During Pregnancy, Labor, Surgery & Post-op
5/18/21	SBIRT Check-in

# Guest Topics: Wave 2 Team Presentations

# Team Presentations

- 1) Linda Burke -- Beth Israel Deaconess Medical Center – Plymouth
- 2) Lindsay Jeffs -- Sturdy Memorial Hospital



# We Can Change our World

*One step at a time*

Linda Burke, RNC-OB  
BID-Plymouth

# Lewin's Change Theory



"If you want truly to understand something, try to change it"  
- Kurt Lewin

UNFREEZE

→ ASSESS CHANGE PROPOSAL

CHANGE

→ EDUCATE

REFREEZE

→ HARDWIRE



# *Choosing a Topic*

*--Identify the need*

# Obstetric Care for Women with Substance/Opioid Use Disorder



- Perform assessment of current intake process/treatment plan
- Mobilize and engage team members to drive change
- Educate team members on how to implement change
- Hardwire new process



# Needs Assessment

- *Current status: no formal process in place for screening*
- *Inconsistent documentation*
- *Lack of resources for referrals*
- *Stigma/bias toward patients*



# Create change committee

- Identify team members
- Engage colleagues as to significance of implementing process improvement



- Identify associated cost

# Budget

Perinatal Neonatal Quality Improvement Network (PNQIN) provides free educational training (via Zoom)

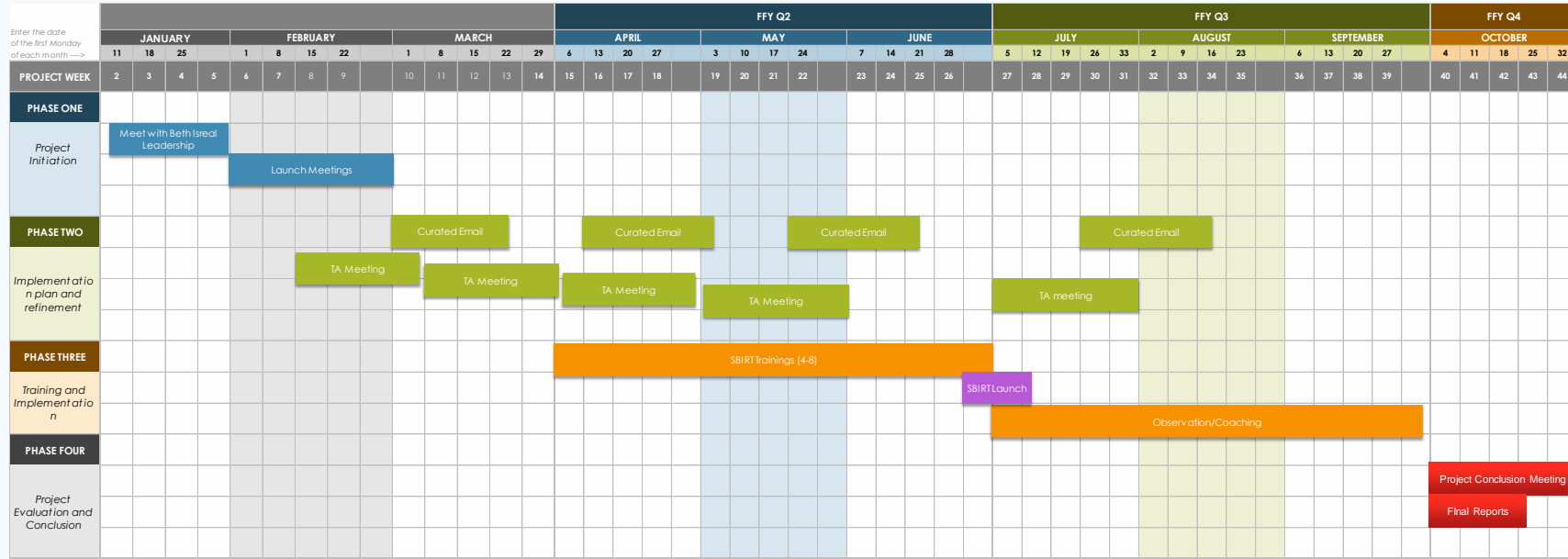
Staff education can be accomplished with multiple methods

- Healthstream online mandatory module
- Informational bulletin board
- Live training: Initial budget-fixed cost  $\$50 \times 70 \text{ staff} = \$3500$

(This is based on average salary of \$50 for 1 hour)

This budget can be annualized @ \$291.66 per/month

# Project Timeline



# Phase One --- Project Initiation

- Meet with Beth Israel Leadership
- Meeting #1 MASBIRT October 29, 2020
- Initial planning meeting with

Alexandra Heinz, LICSW, MPH

Trainer, MASBIRT TTA



Boston Medical Center Care Unit

# Strategy Meetings

- *OB Department meetings:*

*November 5, 2020*

*December 3, 2020*

- *MASBIRT Meeting January 14, 2021*

*Alexandra Heinz, LICSW, MASBIRT consultant*

*Alexander Waitt, MS, MSED, LPC.LLC*

- *Next meeting January 28, 2021*

# Recognition and Prevention

- All pregnant women should be assessed for SUDs
- Utilize a validated screening tool:  
Screening, brief intervention and referral to treatment  
(SBIRT)

# The 5 **P**s Prenatal Substance Abuse Screen for Alcohol and Drugs

- Did any of your Parents have problems with alcohol or drug use?
- Did any of your friends (Peers) have problems with alcohol or drug use?
- Does your Partner have a problem with alcohol or drug use?
- Before you were pregnant (Past) did you have problems with alcohol or drug use?
- In the past month, did you drink beer, wine or liquor, or use other drugs? (Pregnancy)



# Documentation

- Utilizing a standardized tool will provide consistent collection of assessment information that is communicated in the electronic medical record (EMR)
- A positive screen will result in additional follow up by the provider
- Referral for treatment(s)
- Follow up and ongoing reassessment details noted

# Phase Two --- Implementation Plan and Refinement

- Meeting #1 Workflow/process
- Meeting #2 QI & Data

How will we define success?

- Meeting #3 Referral process/Warm transfer process  
Access to other organizations/Treatment evaluation process
- Meeting #4 Brief Intervention  
Which model will we use? Who will be educated?

# Identify Resources

- Determine local SUD treatment facilities that provide women-centered care
- Behavioral health services
- Addiction treatment

([safehealthcareforeverywoman.org](http://safehealthcareforeverywoman.org))

# Phase Three— Training and Implementation

April–June 2021

- During this phase we have planned 4–8 trainings to reach all the people we need to receive education

July–September 2021

- Observation and coaching
- Assess sustainability–Identify “train the trainer” staff
- Work with staff to support, develop skill set, and improve communication

# Educate

## Attend conference



## Steps for change

- Provide/share education
- Emphasis that substance use disorder (SUD) is a chronic medical condition
- Effective treatments are available.
- Establish clinical pathways for coordination of care

# Opioid addiction can be managed safely



- *Fact: Reduces mortality*
- *Fact: Improved outcomes*
- *Myth: Increases overdose*
- *Myth: Most insurance plans do not cover*

# Stigma/Bias

SAY THIS	NOT THAT
Person with a substance use disorder	Addict, junkie, druggie
Person living in recovery	Ex-addict
Person living with an addiction	Battling/suffering from an addiction
Person arrested for drug violation	Drug offender
Chooses not to at this point	Non-compliant/bombed out
Medication is a treatment tool	Medication is a crutch
Had a setback	Relapsed
Maintained recovery	Stayed clean
Positive drug screen	Dirty drug screen

*All health care providers who will be in contact with patients must be educated about the disease*

*Stigma and bias can have an adverse effect on a woman with SUD*

# Phase Four---

## Project Evaluation and Conclusion

- *Assess success*
- *Identify steps to keep everyone involved*
- *Project Conclusion Meeting*
- *Final Reports*



# Make a Difference

Educate.....

Teach.....



Be a Mentor  
Change Lives

([samhsa.gov](http://samhsa.gov))

**TIME**

for  
change

# Hardwire the Change

- Provide education to every patient and family
- Establish specific prenatal, intrapartum and postpartum clinical pathways for women with SUD that incorporates coordination of care among multiple providers
- Provide continuing education to staff
- Continue association with AIM and PNQIN to stay current with evidence based-research.

# *Celebrate Life*



# References

Krans, E. et al., (2019), *National partnership for maternal safety consensus bundle on obstetric care for women with opioid use disorder, American College of Obstetrics & Gynecology, 134(365-375)*

Jones H.E., et al., (2013) *Clinical care for opioid-using pregnant and postpartum women: the role of obstetric providers. American Journal of Obstetrics & Gynecology.*

[Safehealthcareforeverywoman.org](http://Safehealthcareforeverywoman.org)

Substance Abuse and Mental Health Services Administration (SAMHSA). *Substance abuse treatment facility locator.*

Substance Abuse and Mental Health Services Administration. (2016), *A collaborative approach to the Treatment of Pregnant Women with Opioid Use Disorders. HHS Publication No. (SMA) 16-4978. Rockville, MD.*

# References *(continued)*

*Substance Abuse and Mental Health Services Administration (SAMHSA), (2017), Screening, brief intervention, and referral to treatment (SBIRT).*

*Washington State Department of Health, (2017), Substance use disorders during pregnancy: guidelines for screening and management. Department Of Health Publication Number: 950-134*

# Closing Thoughts

Next webinar is **Tuesday, February 16th, 2021** from 12-1pm ET

- **QI Topic:** Using the PDSA Cycle
- **Guest Topic:** Early Head Start

## Reminders:

We highly encourage your whole team (OBs, RNs, MFMs, neonatologists, social workers, midwives, doulas, lactation consultants, educators, etc.) to register for SPEAK UP and SBIRT trainings!

# Questions or Concerns?

