

Idaho Perinatal Quality Collaborative Health Districts 5, 6, & 7 Stakeholder Meeting

August 9th, 2023

Introductions - Idaho PQC Establishment Team

- **Idaho Department of Health and Welfare – Maternal and Child Health Program**
 - Katherine Humphrey, Section Manager
 - Jen Liposchak, Health Program Manager
- **Comagine Health – Maternal Health Program**
 - Ami Hanna, Program Manager
 - Genevieve Rasmussen, Project Manager
 - Phillip Wetmore, Sr Project Coordinator

Introductions

- Please drop your name, role, and affiliation in the chat!

The State of Maternal Health in Idaho

In 2021...

- **9.7%** of infants were born to people receiving inadequate prenatal care
- **19%** of live births were low-risk Cesarean deliveries
- **1 in 11** infants were born preterm (<37 weeks)
- **5.1** infants died per 1,000 live births
- **40.1** women died of pregnancy-related causes per 100,000 live births
- **70.4 %** of Idaho counties are categorized as maternity care "deserts" or low-access environments.

Establishing a Statewide **Perinatal Quality Collaborative** was recommended by the Idaho Maternal Mortality Review Committee to improve maternal-infant outcomes and prevent morbidity and mortality.

What is a Perinatal Quality Collaborative?

- Perinatal Quality Collaboratives (PQCs) are statewide networks of teams working to improve the quality of care for mothers and babies.
 - Provide infrastructure to support quality improvement efforts addressing obstetric care and outcomes.
- PQC members identify health care processes that need to be improved and use the best available methods to make changes as quickly as possible.
- PQCs partner with hospitals, providers, nurses, patients, public health, and other stakeholders to provide opportunities for **collaborative learning, rapid response data, and quality improvement science support** to achieve systems-level change.

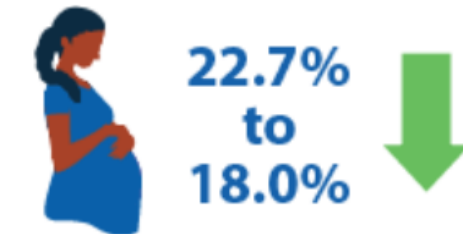
The Illinois Perinatal Quality Collaborative improved timely treatment for women with severe high blood pressure, increasing the percentage of patients treated within 60 minutes from 41% at baseline to 79% in the first year of the project.



The Northern New England Perinatal Quality Improvement Network improved care for women with opioid use disorder, increasing access to the lifesaving medication naloxone (11% to 36%) and breastfeeding counseling (51% to 72%) over a 13-month time period.



The California Maternal Quality Care Collaborative reduced serious pregnancy complications among women with severe bleeding during pregnancy or delivery, decreasing rates by 22.7% at baseline to 18.0% in the last half of the 14-month project.



The Alliance for Innovation on Maternal Health (AIM)

- A national data-driven maternal safety and quality improvement initiative.
- AIM works to reduce preventable maternal mortality and severe morbidity across the United States via evidence-based safety and quality improvement strategies.
- AIM provides tools and technical assistance to states seeking to improve birth outcomes.
- States form a Perinatal Quality Collaborative to implement AIM tools that meet the needs of their communities.



AIM Patient Safety Bundles

- **Patient Safety Bundles (PSB)** are sets of evidence-based interventions that combine medical best practices and improvement science to achieve better maternal care and patient outcomes.
- A bundle includes actionable steps that can be adapted to a variety of facilities and resource levels.
- AIM bundle topics include:
 - Severe Hypertension in Pregnancy
 - Obstetric Hemorrhage
 - Postpartum Discharge Transition
 - Caring for Pregnant and Postpartum People with Substance Use Disorder



Severe Hypertension in Pregnancy

- Improve coordinated processes of care for people with severe hypertension during pregnancy and the post-partum period.
- Focus on inpatient obstetric settings and emergency departments.
- Widely implemented & recently revised.



Severe Hypertension in Pregnancy

AIM DATA TYPES

AIM's project measurement strategies include three common quality improvement measure types:

Process, Structure, and Outcome Measures.

- Process measures are used to monitor the adoption and implementation of evidence-based practices.
- Structure measures are used to assess if standardized, evidence-based systems, protocols, and materials have been established to improve patient care
- Outcome measures can be used to examine changes that occur in the health of an individual, group of people, or population that can be attributed to the adoption of clinical best practices



AIM Data Process



Determine a data collection and reporting pathway



Join the AIM Data Center



Report quality improvement data to AIM



Use data to monitor and sustain implementation of best practices



Evaluate impact and disseminate findings

ID PQC Mission, Vision, and Values

Mission

The Idaho Perinatal Quality Collaborative works to improve the quality of maternal health outcomes for all Idahoans. We promote evidence-based best practices in perinatal and neonatal care, work to reduce disparities, and improve the overall health and well-being of families. Together, we can achieve our goal of providing equitable, compassionate, and effective care to all who need it.

Vision

The ID PQC envisions a future where all Idahoans have access to and receive safe, equitable, and high-quality perinatal and neonatal care.

Values

Access: We believe that every person should have access to high-quality perinatal and neonatal care, regardless of their background, circumstances, or location.

Equity: We are committed to promoting health equity by reducing disparities in access to care and health outcomes.

Patient-Centered: We recognize the importance of elevating patient voice in decision-making to ensure care, policy, and advocacy meet community needs.

Collaboration: We recognize that improving perinatal and neonatal care requires collaboration and coordination among stakeholders. We are committed to working together with partners across Idaho to advance our shared goals.

Through these values, we aim to create a community of sharing, learning, and improvement that benefits all Idahoans.¹⁶

Defining roles in the ID PQC

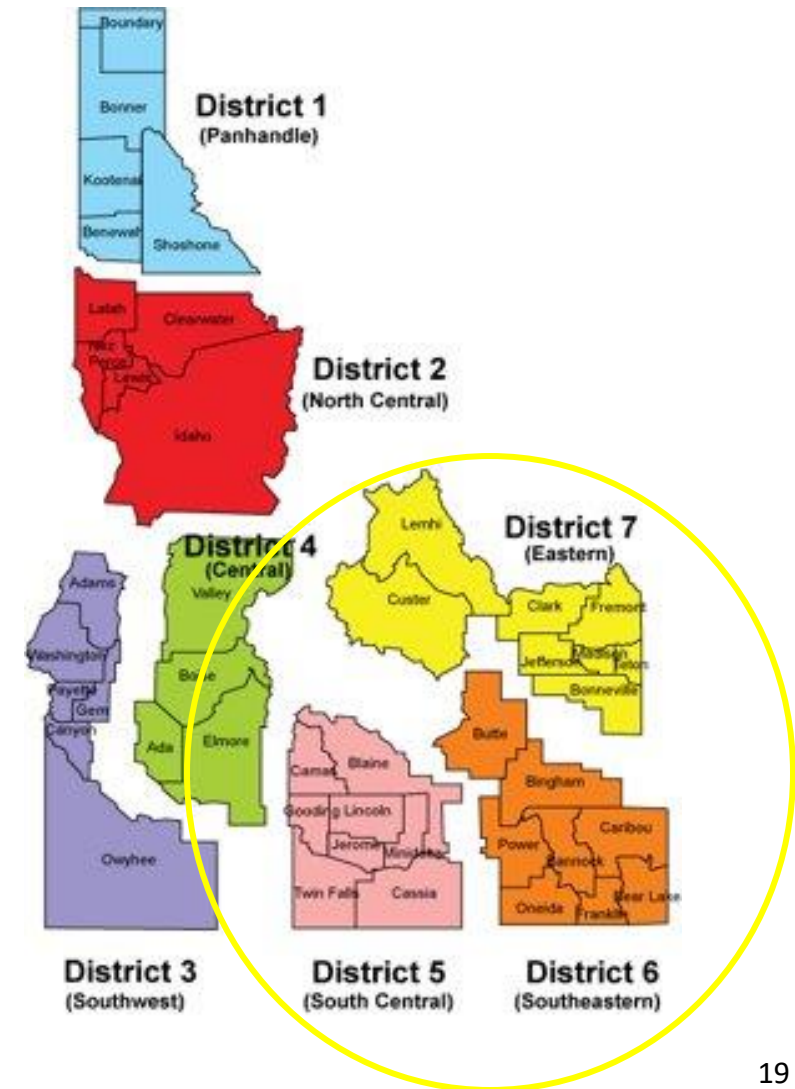
- **AIM**
 - Providing the PQC tools, technical assistance, and connection to national MCH health improvement efforts.
- **Idaho Department of Health and Welfare & Comagine Health**
 - ID PQC Establishment team; connecting and convening partners, facilitating meetings.
- **ID PQC Champions**
 - Develop the Idaho PQC through sharing of expertise, leveraging networks, and goal setting.
- **Regional Stakeholders (you!)**
 - Help the ID PQC grow and prioritize initiatives

Participation in the PQC

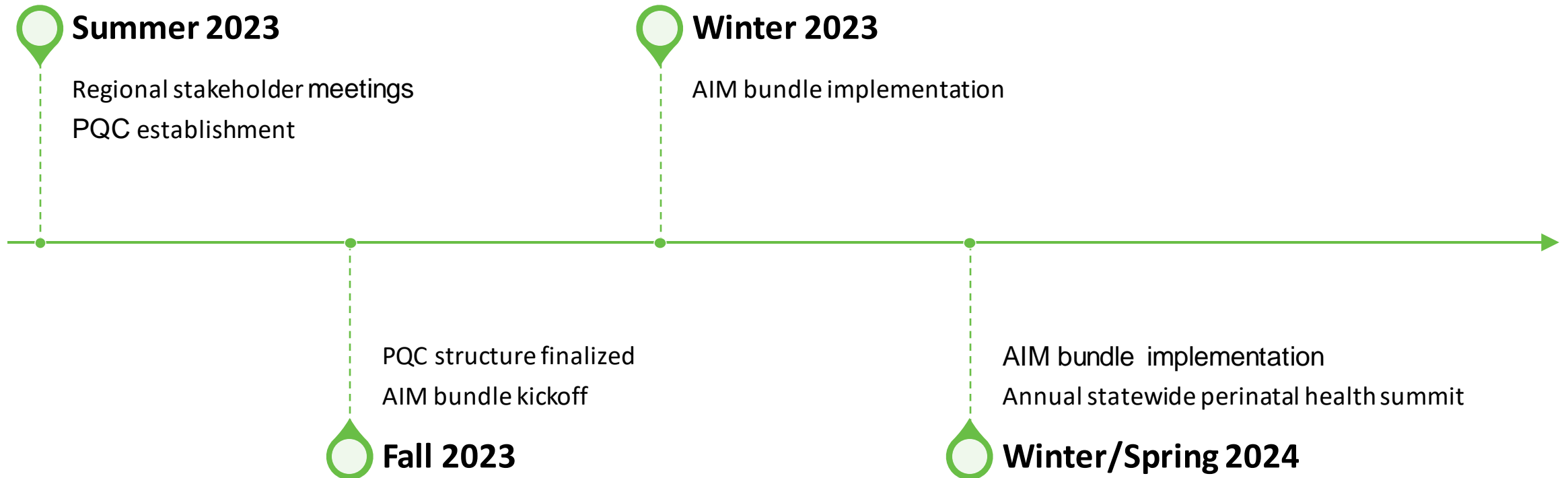
- Champion the PQC at your facility
 - Attend PQC meetings
 - Lead quality improvement initiatives
 - Coordinate data collection
- Attend annual statewide perinatal health summit
 - Winter/Spring 2024, location TBD
- Take on a PQC leadership role
 - Opportunities may include leadership committees, specialized workgroups, etc.
 - Stay tuned for updates on governance and structure!

Maternal Health in Districts 5, 6, & 7

- What are the perinatal health priorities in your district?
- When it comes to perinatal health, what are the strengths of Health Districts 5, 6, & 7?
- What are the opportunities/growth areas?



Timeline



Questions?



Thank you!