



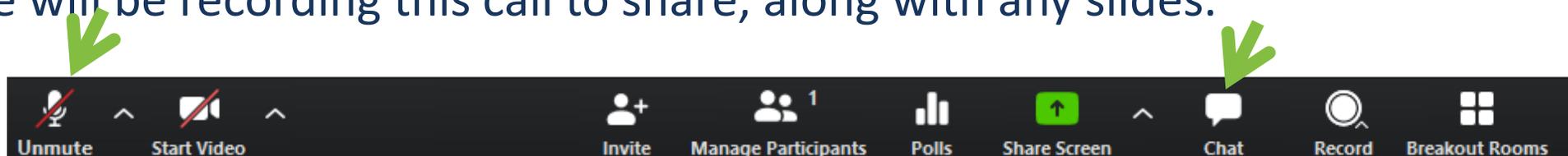
Neonatal Opioid Withdrawal Syndrome Initiative

Action Period Call
August 23, 2023
12:00 – 1:00 PM CT

Welcome



- Please type your **name** and **organization** you represent in the chat box and send to "Everyone."
- Please click on the three dots in the upper right corner of your Zoom image, click "Rename" and put your name and organization.
- Please also do for all those in the room with you viewing the webinar.
- Attendees are automatically muted to reduce background noise.
- You may enter questions/comments in the "chat" box during the presentation. We will have a Q&A session at the end.
- Slides will be available via email and at <http://www.alpqc.org/initiatives/nows>
- We will be recording this call to share, along with any slides.



Agenda



Welcome & Updates		12:00 – 12:10
Data Overview		12:10 – 12:20
Hospital Shares Southeast Health & Helen Keller		12:20 – 12:50
Project Sustainability		12:50 – 12:55
Next Steps & Reminders		12:55 – 1:00



Updates



Updates

- Summit will be in Montgomery on September 20th, 2023
- **LAST CALL FOR POSTER SUBMISSIONS (Due Sept 1st)**
- Newly created flyer for MOUD and Narcan is now available
- Monthly 1:1 sessions with ALPQC Quality Improvement RN
 - Hospital teams should email Lham17@uab.edu to schedule
- Steering Committee Re-launch at the ALPQC Summit
 - Look for email invitation and application prior to the September Summit
 - Hospital representatives are invited to join and serve on the Hospital Advisory Group or any subcommittees or workgroups
- ALPQC Newsletter sent out on August 1st



NOWS Data Update



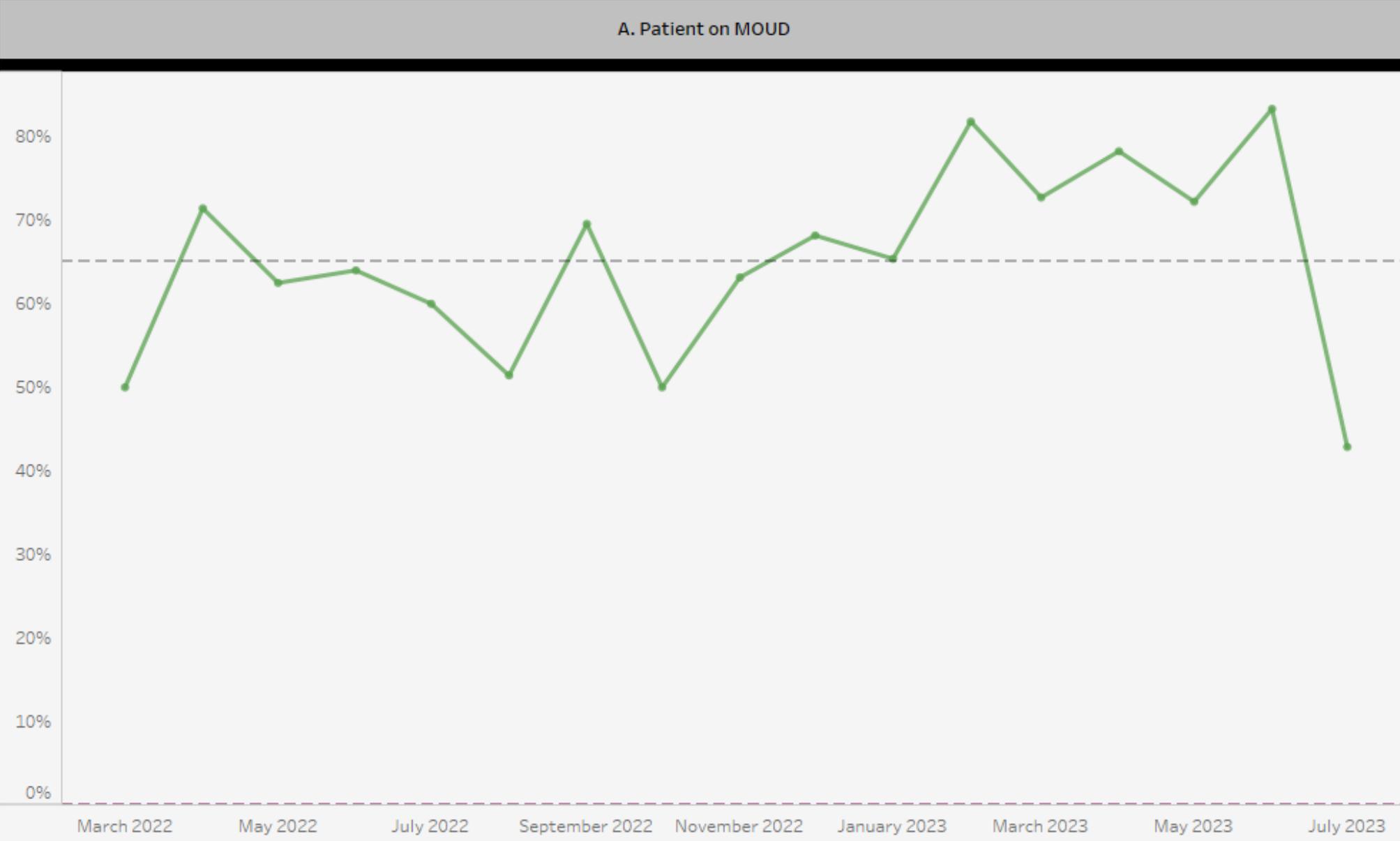
		HospitalsParam No Hospital	All Initiative Hospitals (Average from Apr, 22 - Jul, 23)
Measures			
Data	Obstetrical	OB A: Patient on MOUD (% yes)	65.25 %
		OB B: Referred to addiction services (% yes)	73.45 %
		OB C: Narcan counseling documented (% yes)	29.66 %
	Neonatal	Neo B: Non-pharm guideline consistently used (% yes)	96.89 %
		Neo C: Infant received pharm care (% yes)	44.63 %
		Neo D: # Days of pharmacologic care (days)	6.75 days
		Neo E: # Days old at discharge - Length of stay (days)	13.10 days
		Neo F: Collaborative Discharge Plan completed (% yes)	88.42 %
		Neo H: Readmission within 10 days (% yes)	1.41 %



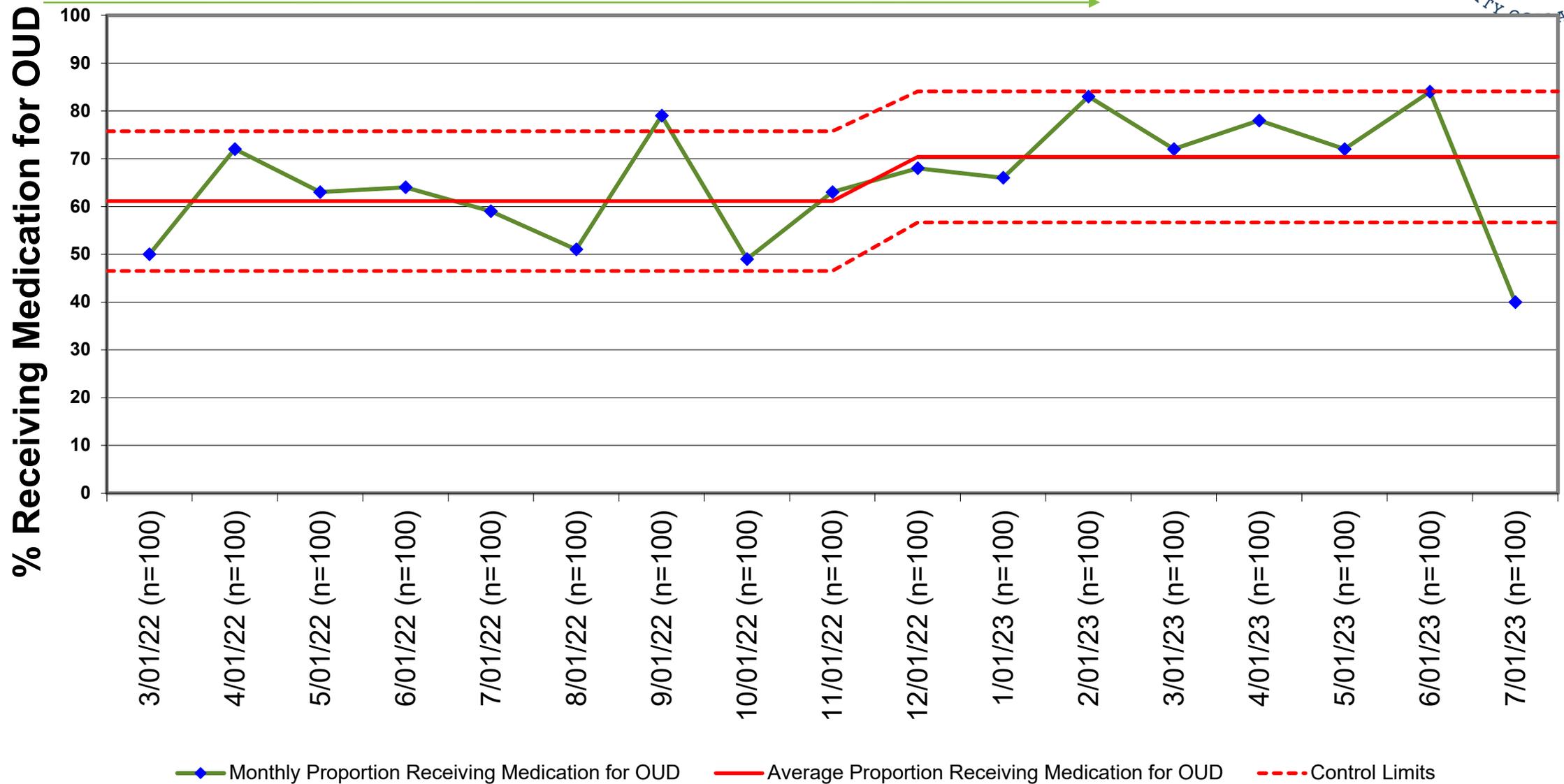
Data Update

Obstetric Measures

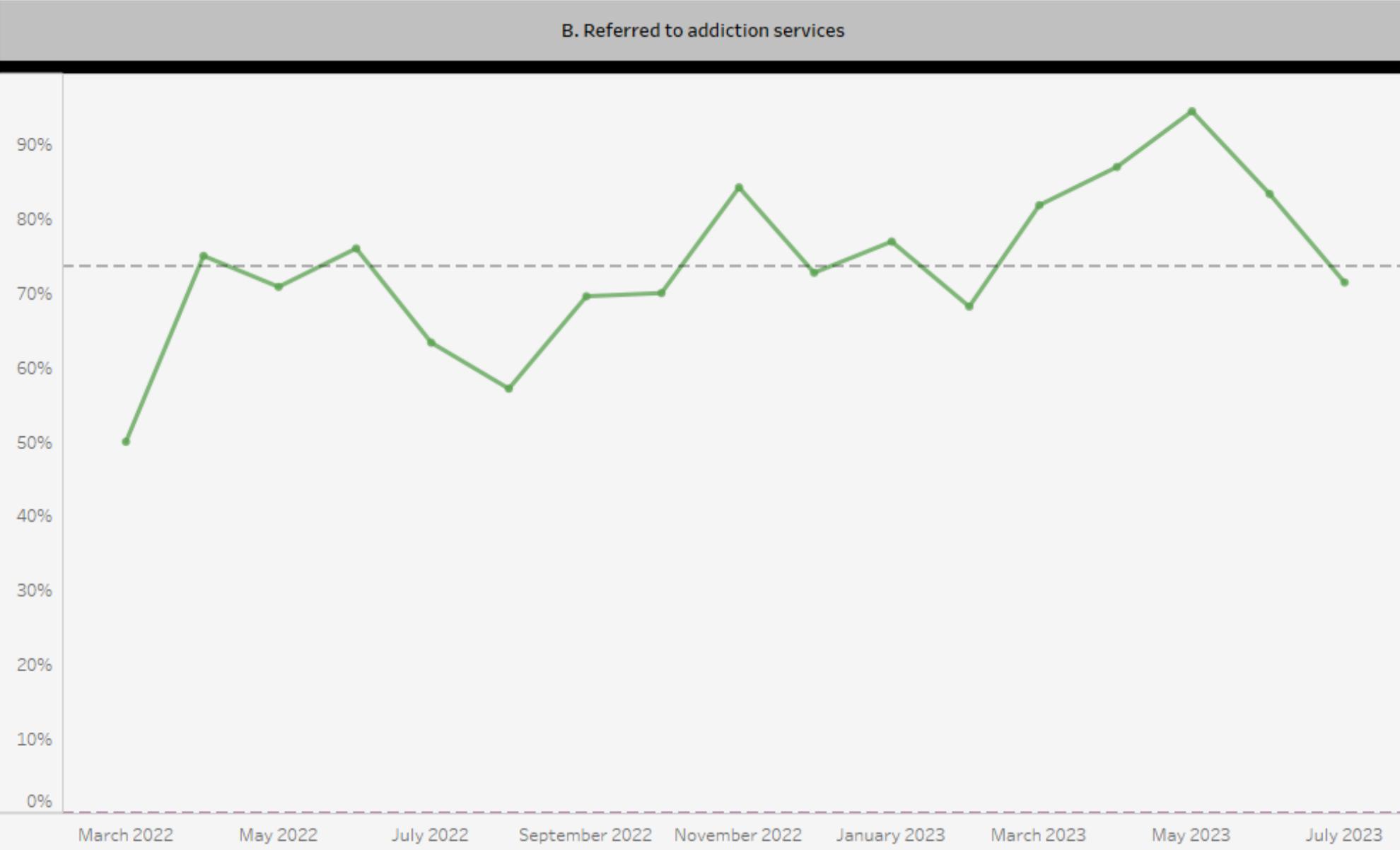
Medication for OUD



Medication for OUD



Addiction Services



Narcan Counseling

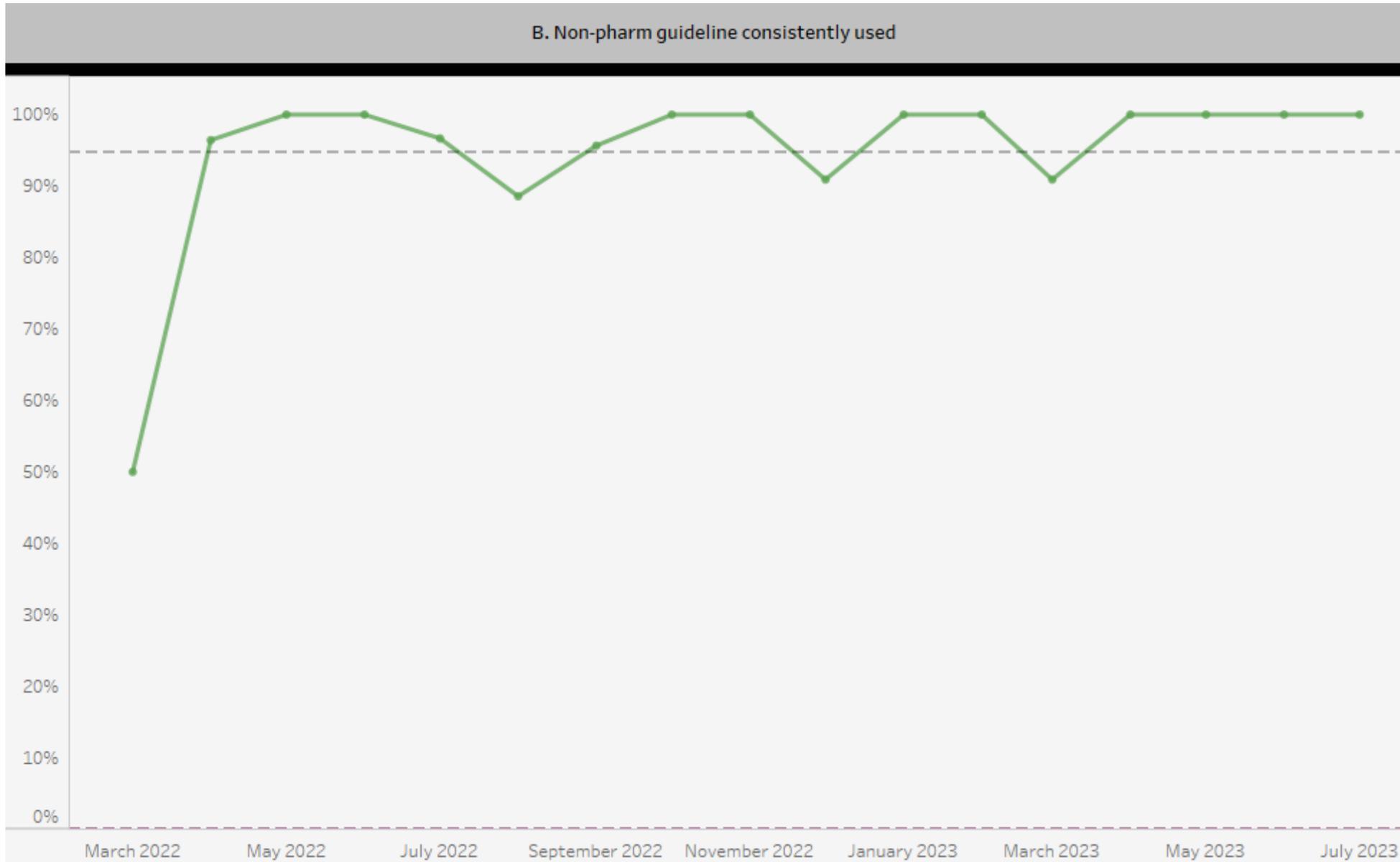




Data Update

Neo Measures

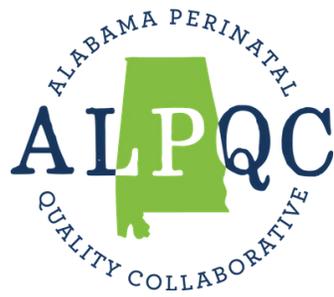
Non-Pharm Care



Pharm Treatment



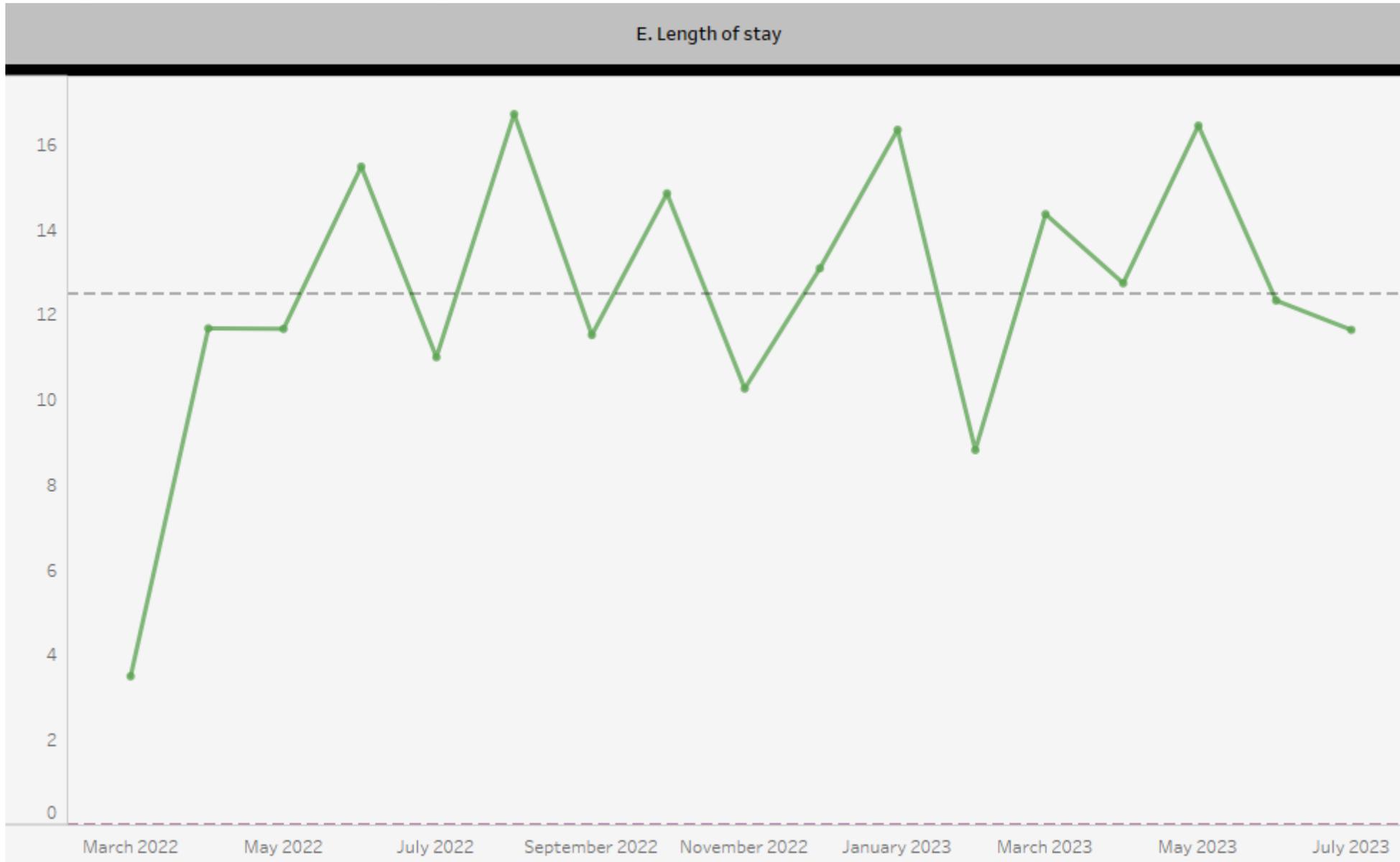
Pharm Treatment Days



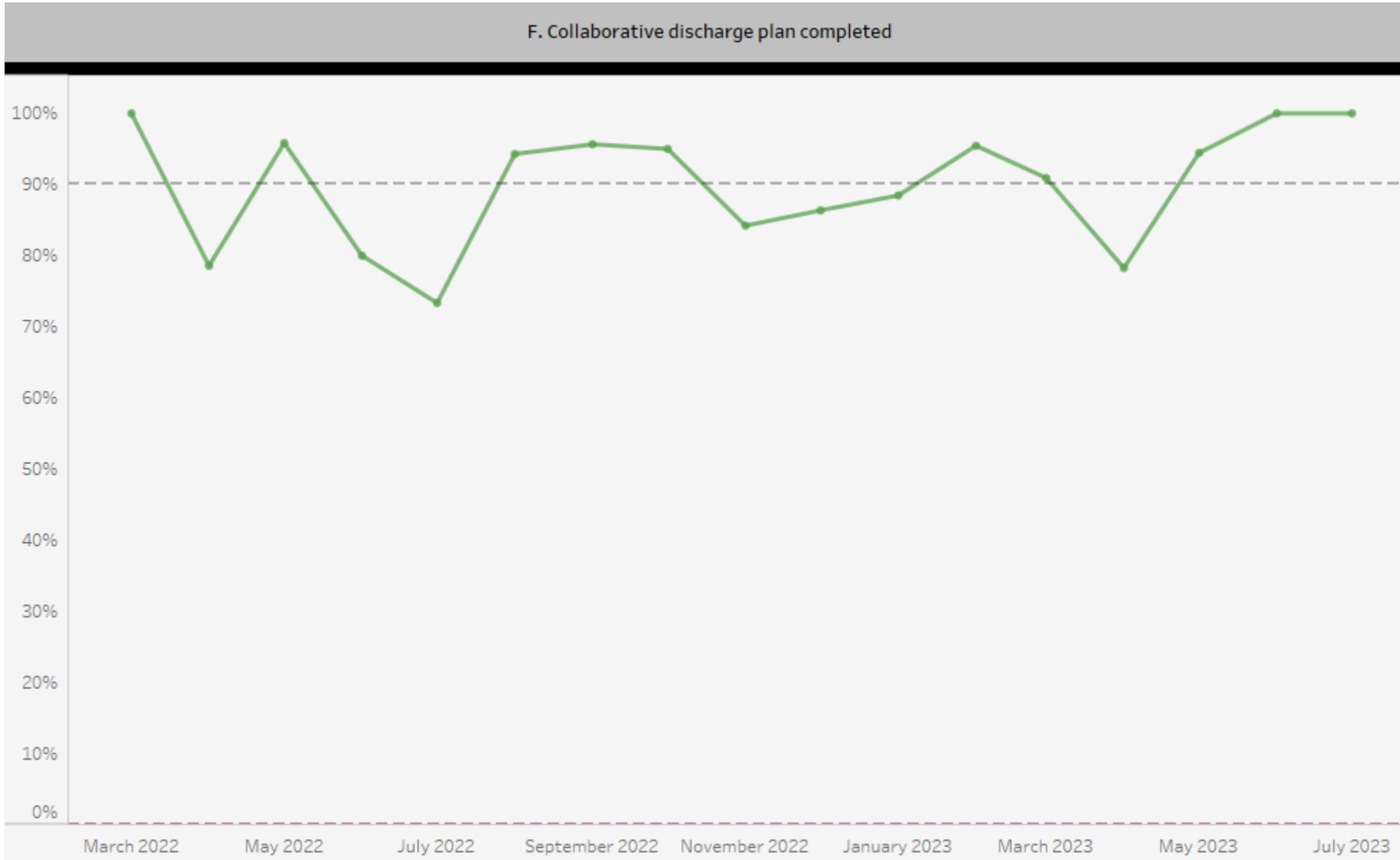
D. Pharm treatment days



Length of Stay



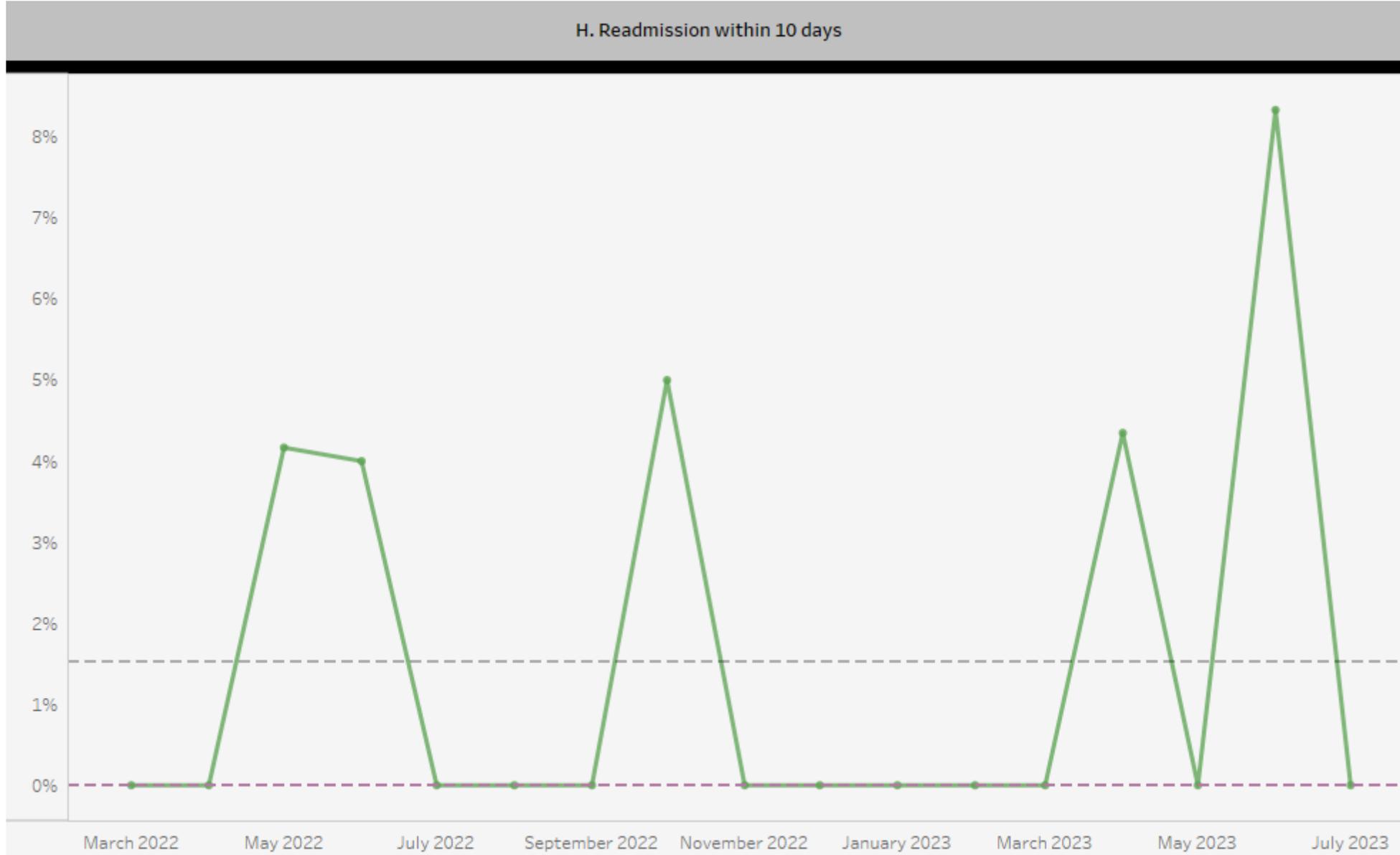
Collaborative Discharge Plan



Readmission



H. Readmission within 10 days





Data Update

Structural Measures

Structural Measures



No Hospital's Status		All Hospitals's Status		
Implemented educational practices for staff scoring OEN	Not Participat	4 (In place)	6 (In progress)	6 (Not Started)
Implemented staff education for reducing stigma related to Opioid Exposed Newborns (OEN)	Not Participat	4 (In place)	6 (In progress)	6 (Not Started)
Implemented standarized non-pharmacologic guidelines for OEN	Not Participat	8 (In place)		6 (Not Started)
Implemented standarized pharamacologic guidelines for infants with NOWS	Not Participat	8 (In place)		6 (Not Started)
Implemented standarized practices for when to transfer infants with NOWS to higher level of care	Not Participat	8 (In place)		6 (Not Started)
Implemented standarized protocols for Collaborative Discharge Plan for mothers and infants	Not Participat	3 (In place)	7 (In progress)	6 (Not Started)

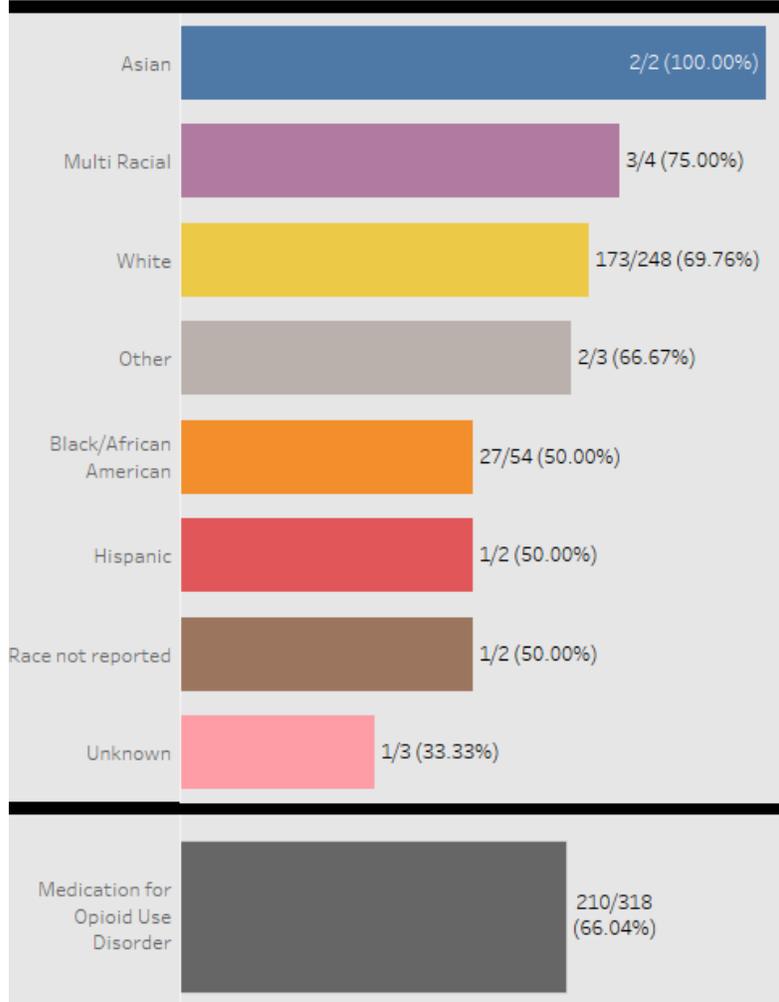


Data Update

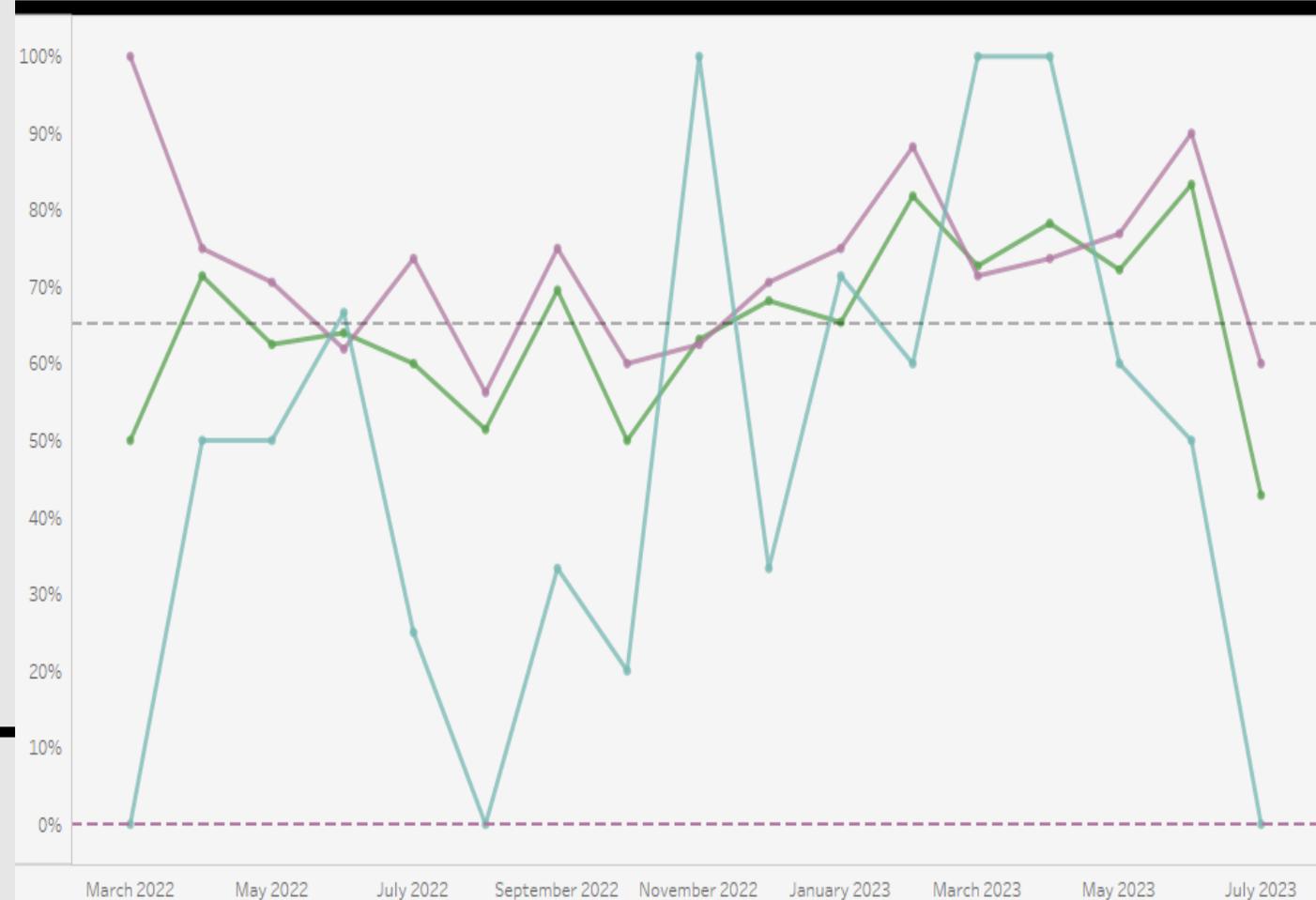
Race / Ethnicity Data

Medication for Opioid Use Disorder

A. Patient on MOUD



A. Patient on MOUD



Active Filters

Hide Control Limits
No Limits

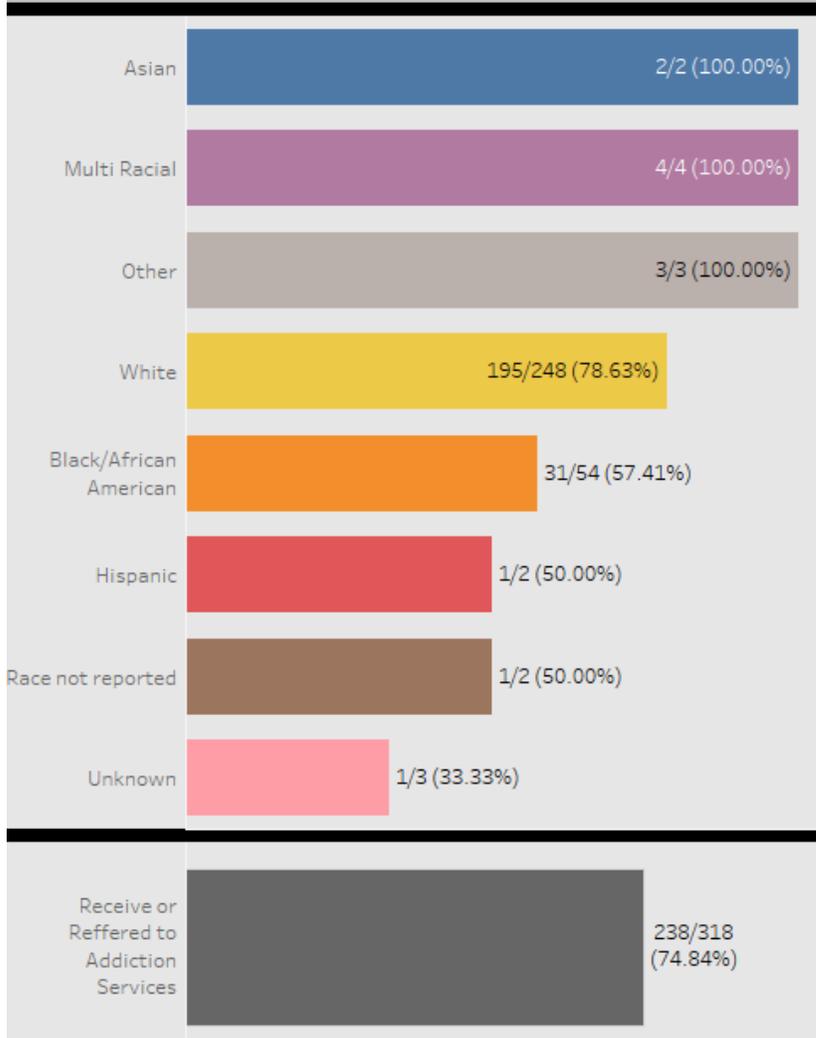
Color Legends

- All Initiative Hospitals
- Black/African American
- White

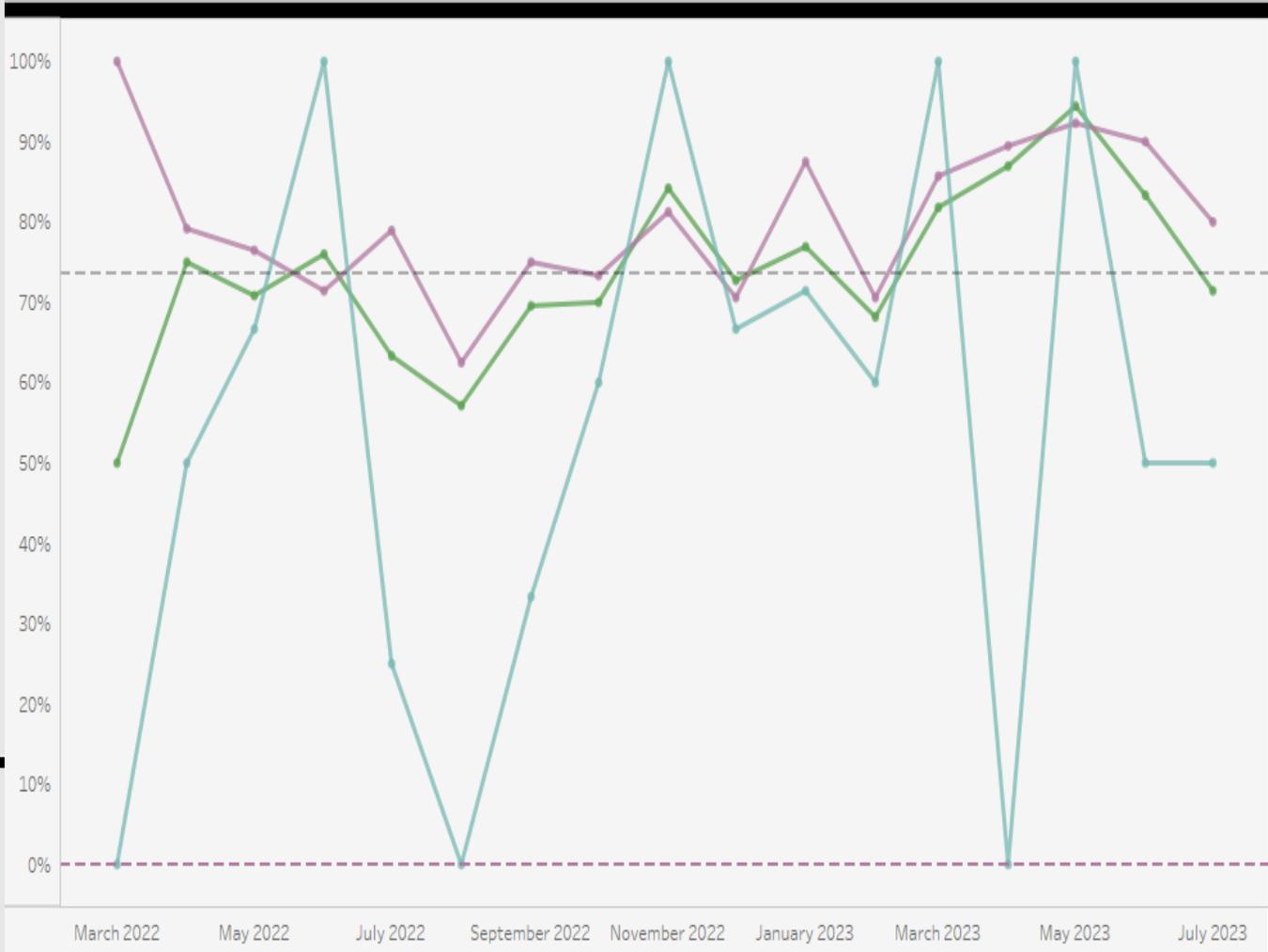
Addiction Services



B. Referred to addiction services



B. Referred to addiction services



Active Filters

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No Limits

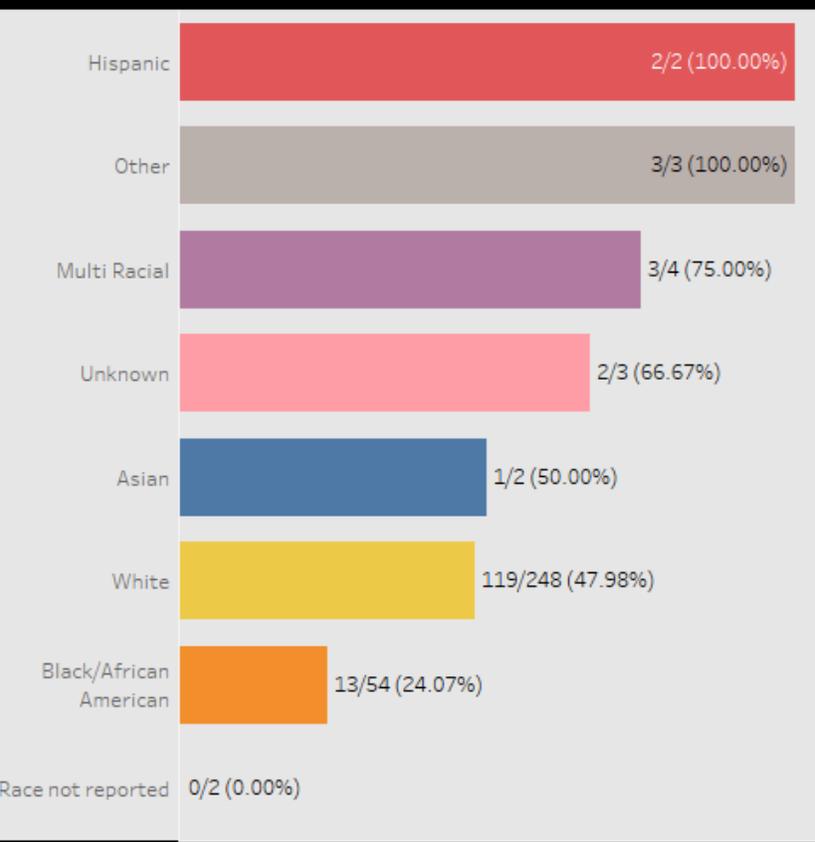
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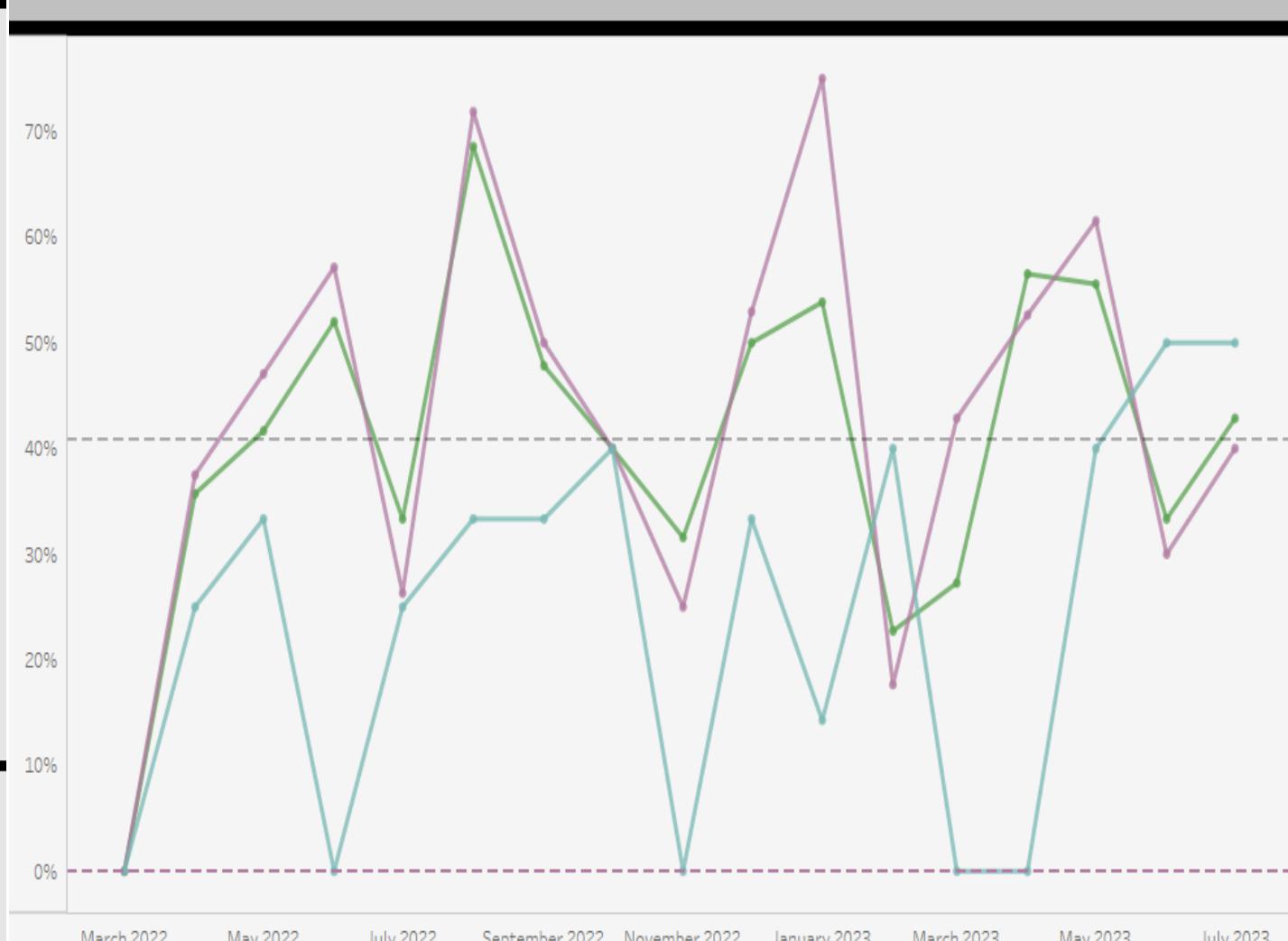
Pharm Care



C. Pharm treatment received



C. Pharm treatment received



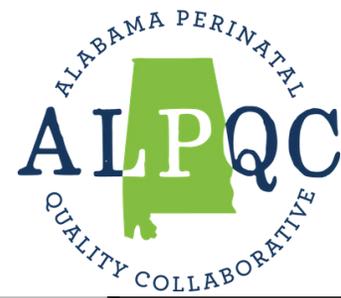
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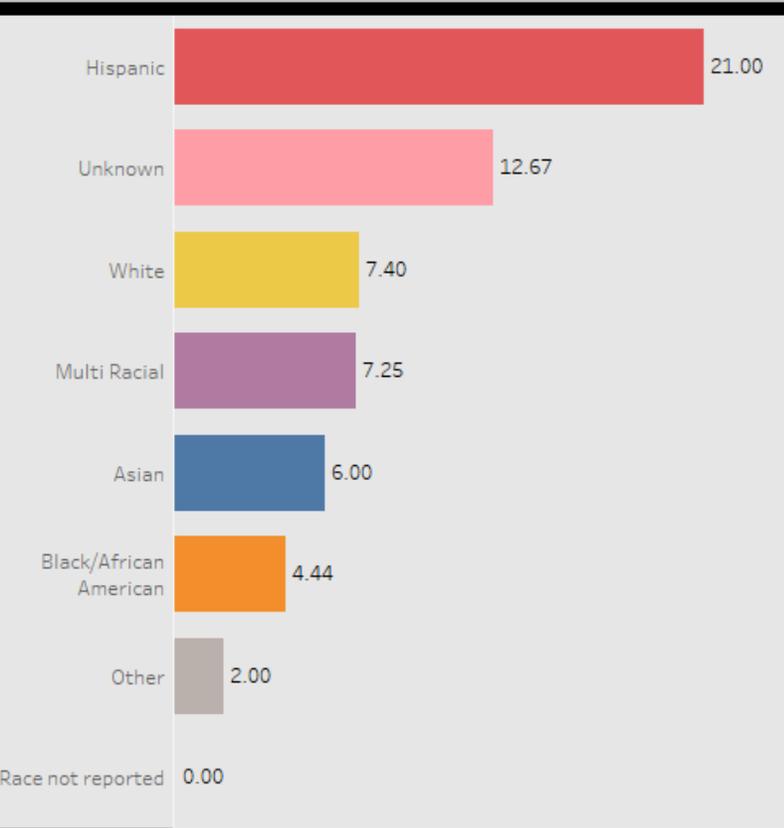
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Pharm Days



D. Pharm treatment days



D. Pharm treatment days



Active Filters

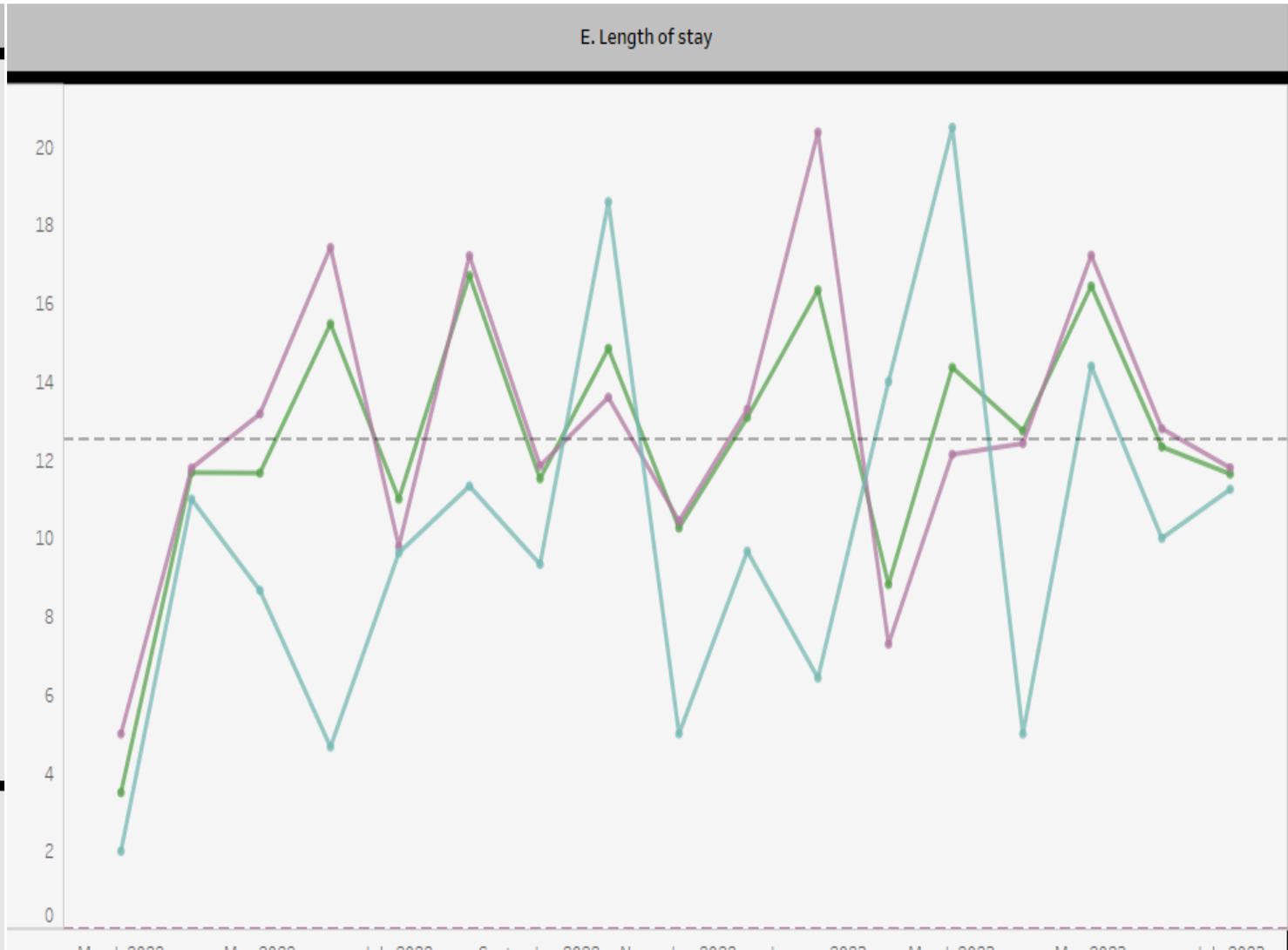
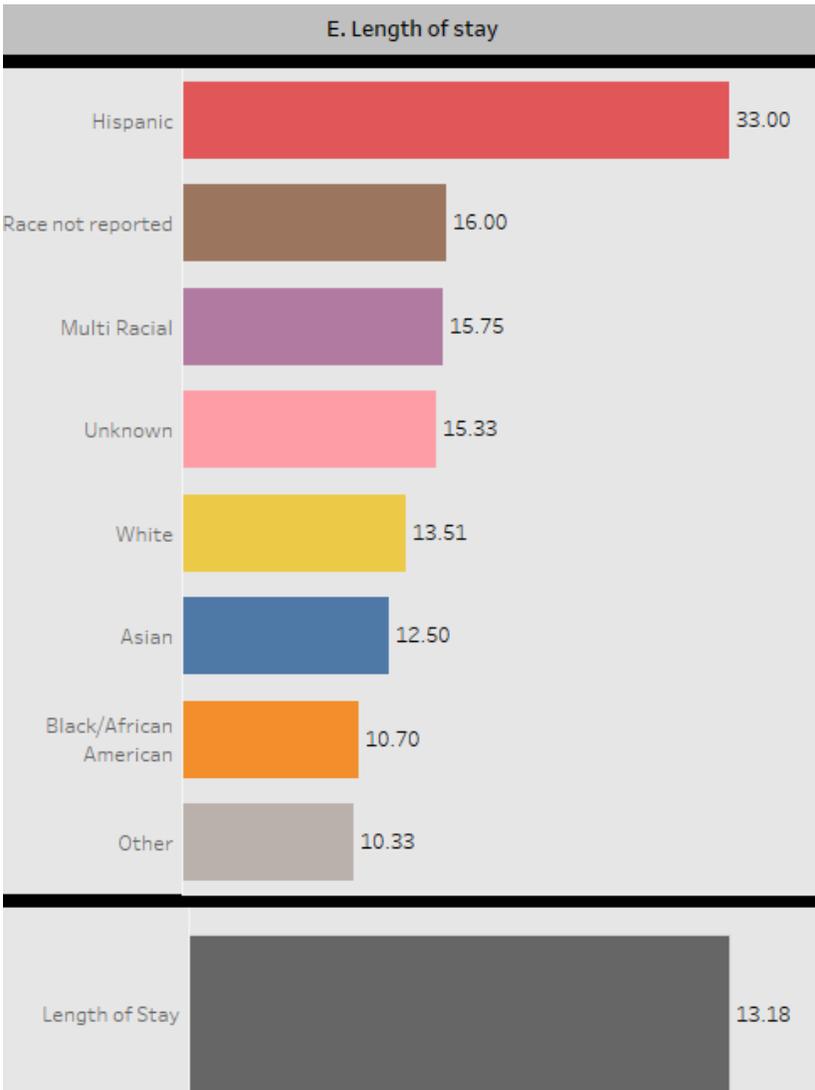
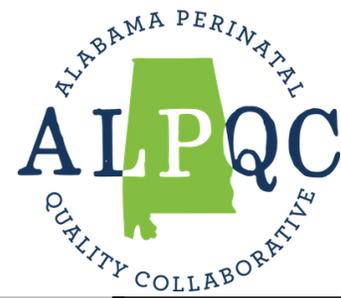
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Length of Stay



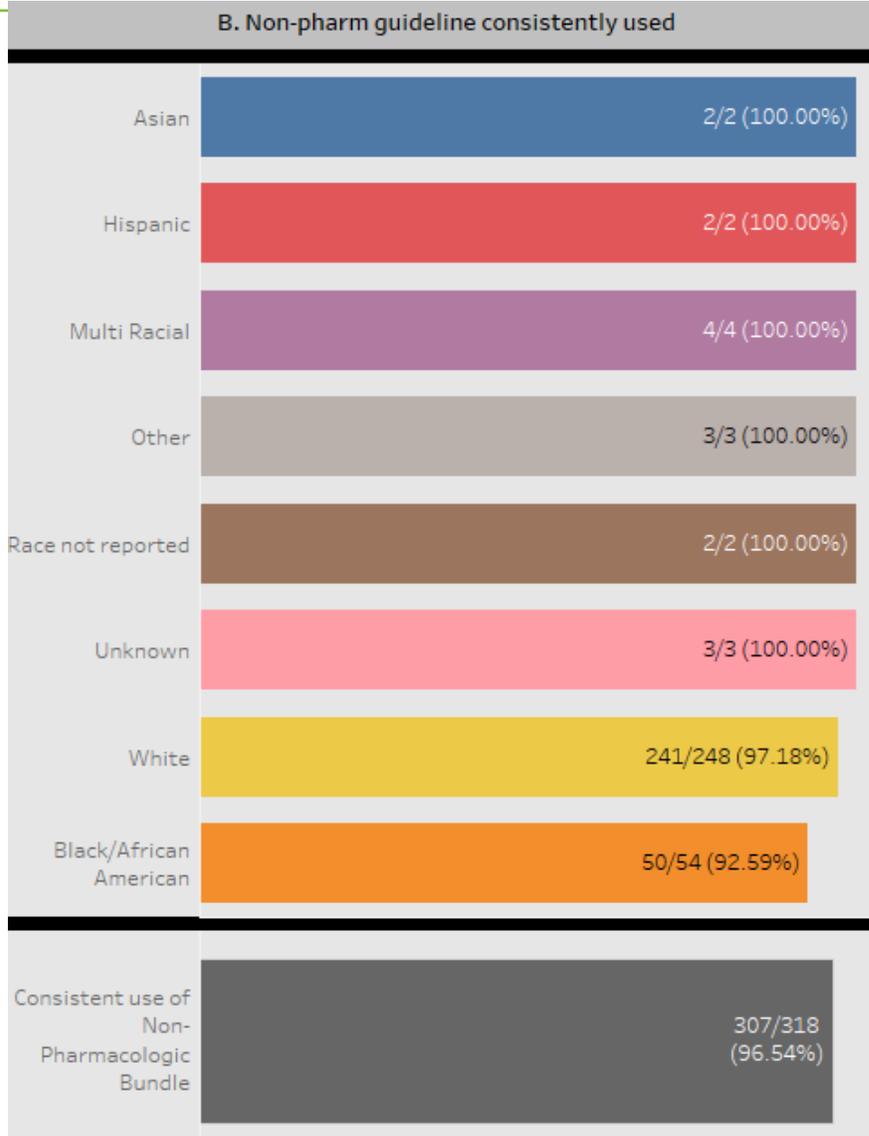
Active Filters

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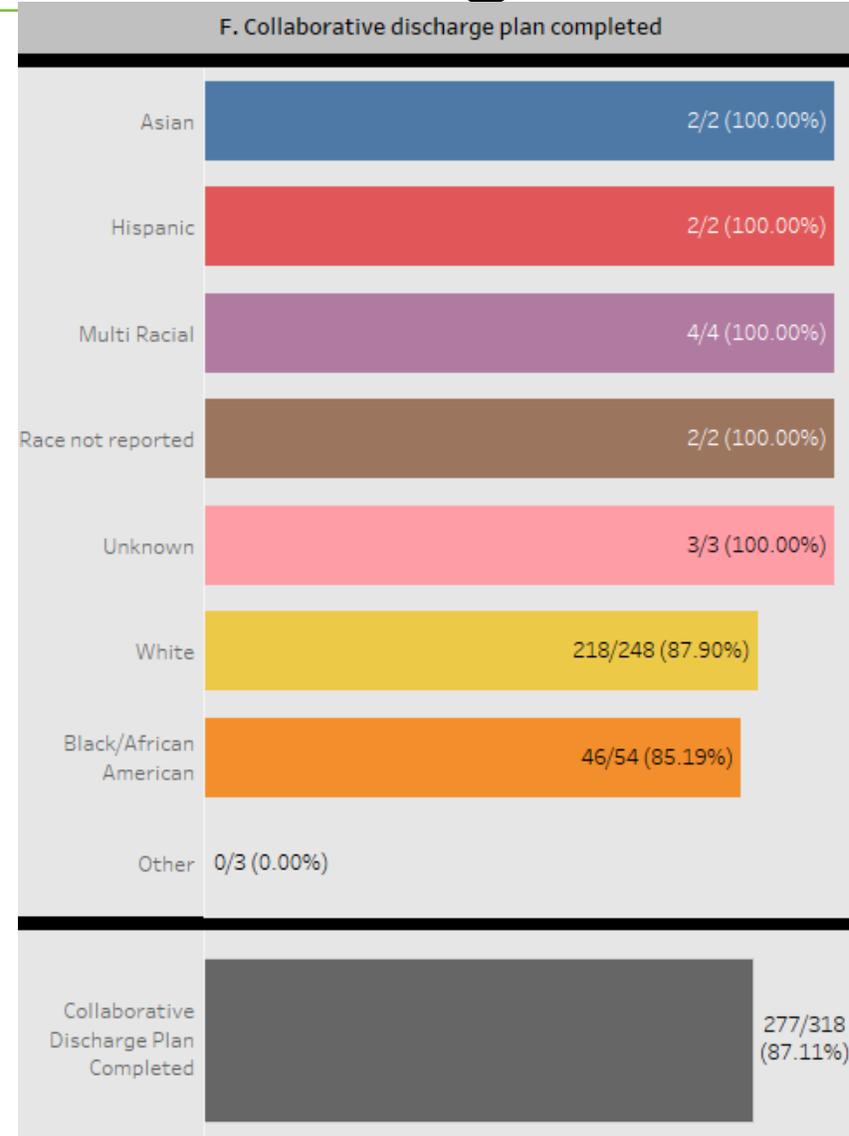
Color Legends

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- Black/African American
- White

Non-Pharm Care



Collaborative Discharge Plan





Hospital Share

Southeast Health



Southeast Health

Dothan, AL

Team Members:

Physician Champion: Dr. Greenberg- Neonatologist

Senior Leader: Teresa Billingsley RNC-OB, MSN Clinical Educator

Nurse Champion: Morghan Wyatt RN NICU Staff Nurse

Data Champion: Christa Outlaw- Pharmacist

Social Worker: Robyn Glass- Case Management



Successes

Success is what you make it!

- Consistent data entry – Every month tracking all the NOWS babies
- 2021—24 babies diagnosed and treated in NICU
- 2022-32 diagnosed in NICU— more babies with mom using methadone/subutex
- 2023-6 diagnosed in NICU—mostly suboxone/methadone
- Less staying in NICU and more staying on Family Birth Unit with parents rooming in !!!!
- Completion of trainings to all staff including the area pediatrician offices that see babies upon discharge- Rolled out the Eat/Sleep/ Console November 2022
- All new staff is introduced to Eat/Sleep/Console from Family Birth/NICU and Pediatrics
- Yearly Computer based learning and Competency Board done for all staff!
- Staff becoming more user-Friendly with terms and not using words like- drug user ect.



Challenges & Barriers

- Communication still challenging with OB Physicians not informing patients of 5 day stay for positive test of Opioids or Metadone/Suboxone.
- Families don't want to stay in rooms for 5 days- especially when still using.
- Getting Methadone/Suboxone local clinics on board to inform patients about longer hospital stays and not giving misinformation- "this wont affect your baby"



Opportunities

- More staff education and community education
- Video for physicians offices on NOWs and having longer hospital stays
- Brochure for parents about NOWS and how to help their babies during hospital stays
- New Nurse Hire Classes- Discussion on NOWS for all staff.
- Education though Methadone/Suboxone clinics not yet started
- Opportunities arising from data review– We need to have more resources for Moms about addiction , etc. More community education.



Next Steps

- Working on Brochures- for physician offices/ Methadone Clinics/Patient information
- Community education for new parents in offices/ HOPE center Pregnancy Center in area
- Continued parent education model introduced into OB offices/area pregnancy clinics/local Methadone clinics.



Needs

1. Assistance in talking with physicians about importance and getting buy-in.
2. Successful brochures for parents and getting more buy-in from parents.

Q&A



Please feel free to **unmute** and ask questions

You may also enter comments or questions in the “chat” box

Hospital Share

Helen Keller

Helen Keller Hospital

Dr. Wayne Melvin,
Pam Smith, RN, Director
Dianna Castillo, RN, IBCLC, Educator
Cindy Chard, RN, Stephanie Elom, RN,
Dare Diagle, RN, RN, Savannah Benford, RN



Successes

Success is what you make it!

Consistent data entry

Staff Education

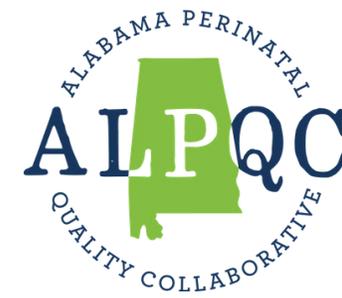
- Withdrawal Scoring for NOWS
- Eat, Sleep, Console (ESC)
- Modified Finnegan Scoring System
- Reducing Stigma

Modification of internal processes

- Developing a written NOWS policy

Onboarding of new team members, etc.

- New team members
- New Nursery staff



Challenges & Barriers

Challenges and barriers to implementing, expanding, standardizing, or sustaining quality improvement.

We have had

- Staff turnover
- New Physicians
- Cerner Charting Project



Opportunities

Upcoming Opportunities

New staff or team members

- New Physicians
- Driving a written policy
- Order set for Pharmacologic treatment

Upcoming training opportunities

- New team members
- Upcoming meeting

Leadership buy-in

- Director
- Physicians



Next Steps

Overview of our next steps to continue project successes

Opportunities for further improvement

- Ongoing Staff Education
- Non-pharmacologic care guidelines
- Pharmacologic Care
 - Consistency in initiation, weaning and cessation

Establish Collaborative Discharge Plan

- Challenge

Continue to collect and submit data entry

- ALPQC
- Unit PI

Needs



We would like to Collaborate with Huntsville Hospital

- Implement standardized practices of when to transfer infants with NOWS
- Implement standardized protocols/guidelines for Collaborative Discharge Plan for mothers and infants
- Narcan counseling prior to patient discharge

Q&A



Please feel free to **unmute** and ask questions

You may also enter comments or questions in the “chat” box



Next Steps & Reminders

Data Submission Reminders

MONTHLY Measures



Process & Outcome Measures		Measurement Period	Reporting Due
Neonatal	A. Did the infant have evidence of opioid withdrawal?	May 2023 ↔ Jun 30, 2023 Jun 2023 ↔ Jul 31, 2023 Jul 2023 ↔ Aug 31, 2023 Aug 2023 ↔ Sep 30, 2023 Sep 2023 ↔ Oct 31, 2023	
	B. Was a non-pharmacologic guideline used throughout the infant's hospitalization?		
	C. Did infant receive pharmacologic treatment?		
	D. If infant received pharmacologic treatment, for how many days did the infant receive treatment (Birth is day "0")		
	E. How many days old was the infant at discharge (Birth is day "0")		
	F. Was a Collaborative Discharge Plan completed prior to discharge?		
	G. If not born at your facility, how many days old was infant when transfer was received?		
	H. Was the infant readmitted for any cause within 10 days of discharge?		
Obstetrical	A. Was the patient on Medication for Opioid Use Disorder (MOUD)? (e.g. on prescribed methadone/ Subutex/etc.)		
	B. Was the patient referred to addiction services prior to maternal discharge?		
	C. Was Narcan counseling documented in the medical record prior to patient discharge?		

All Measures Reported by Race/Ethnicity

Data Submission Reminders

QUARTERLY Measures



Structure Measure	Measurement Period	Reporting Due*
1. Hospital has implemented education practices for hospital staff for reducing stigma in opioid-exposed newborns (OENs)	<p>Oct – Dec 2022</p> <p>Jan – Mar 2023</p> <p>Apr – Jun 2023</p> <p>July – Sep 2023</p>	Jan 31, 2022
2. Hospital has implemented education practices for hospital staff for scoring OENs		Mar 31, 2023
3. Hospital has implemented standardized non-pharmacologic guidelines for OENs		Jun 30, 2023
4. Hospital has implemented standardized practices of when to transfer infants with NOWs to a higher level of care		Oct 31, 2023
5. Hospital has implemented standardized pharmacologic guidelines for infants with NOWS		
6. Hospital has implemented standardized protocols/guidelines for Collaborative Discharge Plan for mothers and infants		

Sustainability Phase Data Submission

QUARTERLY REPORTING Measures



Process & Outcome Measures Up to 10 randomly selected NOWS patients max per month		Measurement Period	Reporting Due
Neonatal			
	How many days old was the infant at discharge (Birth is day "0")	Oct – Dec 2023 ↔	Jan 31, 2024
		Jan – Mar 2024 ↔	April 30, 2024
		Apr – Jun 2024 ↔	Jul 31, 2024
Process		July - Sep 2024 ↔	Oct 31, 2024
	A. Was the patient referred to addiction services prior to maternal discharge?	Oct – Dec 2024 ↔	Jan 31, 2025
	B. Was Narcan counseling documented in the medical record prior to patient discharge?		

All Measures Reported by Race/Ethnicity



2023 HOSPITALS SUMMIT



WEDNESDAY
SEP 20, 2023
8 AM - 4 PM

LOCATION:

Montgomery Marriot Prattville @ Capitol Hill
2500 Legends Circle, Prattville, AL 36066

FOR QUESTIONS RELATED TO THE HOSPITALS SUMMIT, PLEASE EMAIL
INFO@ALPQC.ORG.



REGISTRATION NOW OPEN!!!

https://uab.co1.qualtrics.com/jfe/form/SV_9L8LUrMW_hwvMdCK

Need more information on discounted room rates?

Record your request here:

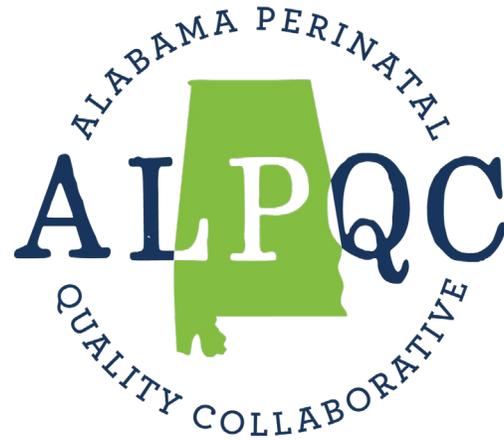
https://docs.google.com/spreadsheets/d/1MeaXIG747M44RK_yNK2r9ZxMHR4sIfYRF7mPNs22bvqs/edit?usp=sharing



Summit Posters

- The purpose of the posters is for teams to share your project successes, challenges, and future opportunities during the Summit.
- Access the poster template via email or newsletter follow-up.
- Please send your poster to info@alpqc.org by **Friday, September 1st.**

Stay Connected!



Twitter: @alpqc
<https://twitter.com/alpqc>

Next Meeting



There will not be a NOWS Action Period Call in September due to the Annual Hospitals Summit