Welcome MORE 2.0 Teams!
Maternal Opioid Recovery Effort

MORE Attention Support Services Follow-up Compassion

FPQC
Improving the Quality of Care for Mothers with Opioids: The Florida MORE Initiative
USA is 4.3% of the world’s population
OPIOID EPIDEMIC STATISTICS

USA is 4.3% of the world’s population

- 66% of all illegal drug use
- 80% of global opioid supply
- 99% of global hydrocodone supply

OPIOID EPIDEMIC STATISTICS

USA is 4.3% of the world’s population

- 128 Americans die every day from opioid overdoses
- 66% of all illegal drug use
- 80% of global opioid supply
- 99% of global hydrocodone supply

Birnbaum HG, et al. Societ...
Opioids During Pregnancy Matters... to Americans
0.5 opioid prescriptions per American

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1 in 3 Americans know someone addicted to prescription painkillers²

No change in overall amount of pain reported

10.1 million people misused prescription opioids in 2019³

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No change in overall amount of pain reported

10.1 million people misused prescription opioids in 2019

28% privately insured US women filled at least 1 opioid prescription in pregnancy

1 in 3 Americans know someone addicted to prescription painkillers

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Opioids During Pregnancy Matters... to pregnant women
The number of women who used opioids during pregnancy increased 134% from 2010 to 8.2 per 1,000 deliveries in 2017.

Every 19 minutes a baby is born suffering from opioid withdrawal

https://www.cdc.gov/pregnancy/opioids/data.html
Drug-related overdose is the leading cause of pregnancy-associated mortality in Florida: >1 in 5 deaths. Most die after leaving the hospital.
Opioids During Pregnancy Matters...
to infants w/prenatal substance exposures
Characteristics of NAS infants

- 55-94% have NAS symptoms
- 50-80% have NAS requiring meds

Male\textsuperscript{1}

\textbf{Characteristics of NAS infants}

- 55-94\% have NAS symptoms\textsuperscript{2}
- 50-80\% have NAS requiring meds\textsuperscript{3}

Low birth weight\textsuperscript{1}

\textsuperscript{2}Devlin LA, Lau T, Radmacher PG. Decreasing Total Medication Exposure and Length of Stay While Completing Withdrawal for Neonatal Abstinence Syndrome during the Neonatal Hospital Stay. Front Pediatr 2017;5:216.
Characteristics of NAS infants

- Male
  - 55-94% have NAS symptoms
- Low birth weight
  - 50-80% have NAS requiring meds

COMMON DIAGNOSES

- Jaundice: ~33%
- Respiratory complications: ~19%
- Sepsis: ~15%
- Feeding problems: ~17%

Drug misuse is a common reason for child removal

More likely to experience

• Abuse or neglect
• Sudden infant death, shaken baby syndrome
• Adverse neurodevelopmental outcomes
• Re-hospitalization after birth hospitalization
• Child removals
Opioids During Pregnancy Matters...

to healthcare providers
Rate of Neonatal Abstinence Syndrome and Maternal Opioid-Related Diagnosis Per 1,000 Deliveries, US HCUP
Opioids During Pregnancy Matters...

to hospitals & community/state agencies
At any given time, NAS babies can occupy 3-4% of US NICU beds.
Neonatal Abstinence Syndrome Syndrome Rate
Per 1,000 Deliveries, US HCUP 2017

Where is the NAS problem?

https://www.hcup-us.ahrq.gov/faststats/NASMap
Opioids During Pregnancy Matter...

to All of Us!
Health Care Burden of Maternal Use & NAS

• Incidence of antenatal drug use
• Incidence of NAS
• Maternal mortality
• Healthcare expenditures
Health Care Burden of Maternal Use & NAS

• Incidence of antenatal drug use
• Incidence of NAS
• Maternal mortality
• Healthcare expenditures

Public Health/Health Care Quality Measures

• Reduce antenatal exposures
• Increase maternal MAT/behavioral health
• Increase access to Naloxone
• Provide needed health & community services
FL NAS Prevalence

NAS Counts
(State Count = 7,329)
- 5 - 68
- 69 - 242
- 243 - 478
- 479 - 698

NAS Rate (per 10,000 live births)
(State Rate = 65.8)
- 3.6 - 43.1
- 43.2 - 83.4
- 83.5 - 145.8
- 145.9 - 288.7
- Less than 5 cases

21 + 13 MORE Hospitals

FPQC
Project journey

Jan–Sep 2019

Jul–Oct 2019

Nov 2019

Jan 2020–Apr 2021

Jun 2021

Jun 2021–Apr 2022
Project journey

Toolkit development: Jan–Sep 2019
Kickoff: Nov 2019
Project end: Jun 2022

Recruitment: Jul–Oct 2019
PDSA cycles: Jan 2020–Apr 2022
Sustainability
Global aim: Improve identification, clinical care and coordinated treatment / support for pregnant women with any opioid use and their infants

By 3/2022, >50% pregnant women with any opioid use will receive screening, prevention, and treatment services

Screening
- Perform universal SUD screening for all pregnant women
- Perform secondary screening¹ for all pregnant women with any opioid use

Prevention
- Documentation of family planning/contraceptive counseling
- Increase breastfeeding initiation and rooming in rates
- Use SBIRT screening to obtain appropriate referrals for mothers with any opioid use

Treatment
- Referral/scheduled follow up to MAT/BH services for all pregnant women with any opioid use
- Develop a map of local community resources (e.g., behavioral health, and addiction/treatment services)

Comprehensive discharge planning
- Compliance with discharge checklist²

Policies & Procedures
- Compliance with the hospital's pain management prescribing practices
- Provider education bundle
- Patient education bundle

¹Secondary screening: 1) infectious diseases: HIV, HepA, HepB, HepC, GC, CT, syphilis and TB; 2) mental health including postpartum depression; 3) Intimate partner violence
²Discharge checklist: 1) Peer counselor visit 2) Postpartum depression screening, 3) Social work consult, 4) Pediatric consult, 5) Contraceptive plan, 6) Scheduled OB postpartum visit, 7) Scheduled Behavioral Health and/or MAT visit or referral, 8) Healthy Start/Home visiting program referral, and 9) patient education bundle (MAT & SUD treatment, infectious/mental health comorbidities, safe sleep, NAS including non-pharmacological management, family planning and Narcan ® (naloxone) use)
Maternal Screening in Hospital
MORE, 14 Hospitals Reporting

1) Screening

Percentage

<table>
<thead>
<tr>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Q5</th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>

- Substance Use Dis.
- Mental Health
- Int. Partner Violence
- Infectious Diseases
% Mothers with Opioid Use with Contraception Counseling & Plan Documented, MORE, 14 Hospitals Reporting

2) Prevention

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Yes</th>
<th>Declined</th>
<th>Missing/No</th>
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<tbody>
<tr>
<td>Q1</td>
<td>50%</td>
<td>60%</td>
<td>45%</td>
</tr>
<tr>
<td>Q2</td>
<td>55%</td>
<td>4%</td>
<td>41%</td>
</tr>
<tr>
<td>Q3</td>
<td>48%</td>
<td>4%</td>
<td>48%</td>
</tr>
<tr>
<td>Q4</td>
<td>57%</td>
<td>9%</td>
<td>34%</td>
</tr>
<tr>
<td>Q1-2021</td>
<td>57%</td>
<td>13%</td>
<td>29%</td>
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</tbody>
</table>
Behavioral Health / Medication-Assisted Treatment, MORE, 14 Hospital Reporting

- Not Started: 60%
- Pregnancy: 35%
- Hospitalization: 0%
- Unknown: 5%
## Comprehensive Discharge Planning
### MORE, 14 Reporting Hospitals

<table>
<thead>
<tr>
<th>Service</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Q1-2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Narcan education</td>
<td>21%</td>
<td>1%</td>
<td>5%</td>
<td>10%</td>
<td>8%</td>
</tr>
<tr>
<td>Social work consultation</td>
<td>96%</td>
<td>94%</td>
<td>95%</td>
<td>94%</td>
<td>96%</td>
</tr>
<tr>
<td>Contraceptive plan</td>
<td>56%</td>
<td>58%</td>
<td>52%</td>
<td>66%</td>
<td>71%</td>
</tr>
<tr>
<td>OB postpartum visit</td>
<td>16%</td>
<td>23%</td>
<td>21%</td>
<td>14%</td>
<td>21%</td>
</tr>
<tr>
<td>Pediatric consult</td>
<td>72%</td>
<td>78%</td>
<td>72%</td>
<td>89%</td>
<td>99%</td>
</tr>
<tr>
<td>Behavioral/MAT referral</td>
<td>46%</td>
<td>48%</td>
<td>31%</td>
<td>28%</td>
<td>38%</td>
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<tr>
<td>Healthy Start referral</td>
<td>85%</td>
<td>77%</td>
<td>75%</td>
<td>77%</td>
<td>86%</td>
</tr>
</tbody>
</table>

4) Comprehensive Discharge
Putting Pieces Together for Opioid Exposed Mothers

- Community resource directories from Florida Healthy Start
- Plans of Safe Care: Common messages & reporting system
- Plans to give Naloxone free at discharge on maternity units
- Statewide committee to address MAT barriers
- Opioid training for OB & FP residents & practitioners
Questions?
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www.fpqc.org

“To improve the health and health care of Florida’s mothers and babies”