MORE 2.0

Implementation of MORE

Florida Perinatal Quality Collaborative
MORE Toolbox, Toolkit, and Resources

www.fpqc.org/MORE
MORE folders for MORE hospitals
## 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>
</tr>
<tr>
<td>Healthy Start referral</td>
<td>85%</td>
<td>77%</td>
<td>75%</td>
<td>77%</td>
<td>86%</td>
</tr>
</tbody>
</table>
MORE folder contents

• **Clinical team side(left)**

1. SBIRT pocket guide
2. Checklist
3. Provider Algorithm
4. Trauma-Informed Care
5. Narcan

• **Patient side(right)**

1. MORE HOPE pamphlet
2. Narcan tri-fold
3. Family Planning info

• **REMOVE above and place in chart as team reference**

• **Conduct Team Huddle when appropriate**

• **Give folder to patient, add information prn**
MORE Folders & Huddles

- MORE folders include:
  - Patient care check list
  - Provider and patient education

- Team huddles at admission to coordinate care
- Pilot in 4 hospitals
- Creating prenatal versions
- Share with other hospitals
- Sent to all MORE teams

When an OB patient screen for Opioid Use Disorder (OUD) during an admission, a MORE Folder (stored on L&D/Triage/MIU) is obtained by the patient’s nurse.

Folder contents are listed below:

1. MORE OUD Clinical Algorithm for provider review
2. MORE Checklists/Workflow
3. Contraception Counseling materials
4. Community Mapping Tool to use with community referrals
5. Make a Life Narratives (Nancan) guide to help providers complete Nancane counseling / prescription
6. MORE patient education materials: MORE HEPA, pamphlet & Nancan tri-fold for the patient

The patient’s nurse works with the rest of the OB clinical team to make sure the OUD Clinical Algorithm is followed & MORE checklist is completed prior to discharge. Reminding the clinical team that OUD is the leading cause of maternal death in Florida may help the teams understand why these steps matter. Remind all members of the care team that reducing stigma & trusting patients with empathy & compassion improves outcomes for moms with OUD.

**MORE Checklists/Workflow**

<table>
<thead>
<tr>
<th>Clinical Team</th>
<th>Initials/Notes/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report OUD screen to OB provider &amp; give OB provider the MORE Clinical Algorithm to review</td>
<td></td>
</tr>
<tr>
<td>Request a neo/peds consult for possible OUD screen to counsel on NAS &amp; how moms engage in opioid exposure newborns when appropriate</td>
<td></td>
</tr>
<tr>
<td>Call Team Huddle: OB Provider, Neo/Peds, Social Work, Charge Bedside RN during hospitalization</td>
<td></td>
</tr>
<tr>
<td>Confirm HCP, HCP B, TV &amp; other recommended secondary screening completed</td>
<td></td>
</tr>
<tr>
<td>Confirm the provider has the &quot;Save a Life&quot; Nancane guide (to assist with nancane counseling/ prescription as a risk reduction strategy for all patients who are opioid regularly)</td>
<td></td>
</tr>
<tr>
<td>Handoff/Review MORE folder &amp; MORE Checklists/Workflow with postpartum RN</td>
<td></td>
</tr>
</tbody>
</table>

**Prior to Discharge**

<table>
<thead>
<tr>
<th>Clinical Team</th>
<th>Initials/Notes/Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review MORE patient education materials: MORE folder or <a href="http://fpqc.org/more">more</a>. Reinforce important role of mom/family in self-care &amp; care of baby with NAS</td>
<td></td>
</tr>
<tr>
<td>Confirm patient's readiness for Medication-Assisted Treatment (MAT) &amp; plan is documented. Reinforce providers that help with clinical management of OUD / MAT is available through the OUD Substance Use Workgroup 903-100-3000 with free addition phone consult.</td>
<td></td>
</tr>
<tr>
<td>Confirm the patient is linked to behavioral health services/recovery treatment program &amp; has follow up or work with a social work consult to confirm a warm hand off &amp; close follow up to establish linkage to services</td>
<td></td>
</tr>
<tr>
<td>Work with Neo/Peds team to engage &amp; support mom/family, providing non-pharmacologic care as appropriate: breastfeeding, skin to skin, rooming in, Eat Sleep Consols (ESC)</td>
<td></td>
</tr>
<tr>
<td>Confirm behavioral Health and/or MAT appointment made before discharge</td>
<td></td>
</tr>
<tr>
<td>Confirm Nancane (Nancan) B counseling has been provided &amp; prescription has been provided before discharge, if possible, encourage having the prescription filled prior to discharge</td>
<td></td>
</tr>
<tr>
<td>Confirm all recommended secondary infectious disease screening completed, results provided to the patient, &amp; follow up plan established by OB for all positive screens</td>
<td></td>
</tr>
<tr>
<td>Confirm comprehensive contraception counseling has been provided and method of contraception has been identified/prescribed</td>
<td></td>
</tr>
<tr>
<td>Review this checklist with OB Provider. Determine next steps for ANY incomplete elements</td>
<td></td>
</tr>
<tr>
<td>Confirm patient has early postpartum follow up visit with OB for 1-2 weeks PP scheduled</td>
<td></td>
</tr>
<tr>
<td>Ensure the OB clinical team is in communication with Neo/Peds to confirm a coordinated plan of Safe Care (ROSC). Make sure the patient/family understands their ROSC</td>
<td></td>
</tr>
<tr>
<td>Ensure Alternatives to Opioids pamphlet has been provided if opioids prescribed</td>
<td></td>
</tr>
</tbody>
</table>

Florida Perinatal Quality Collaborative 7.20.20
Adapted from FPQC NANC Initiative
MORE HOPE: Helping Our Parents Excel
Provider Education Flyers

Ask Yourself: Am I Providing Trauma-Informed Care?

Trauma can result from:
- Experiencing or witnessing violence/abuse
- Household substance use or mental health disorders
- Racism
- Anti-LGBTQ+ discrimination
- Prior birth trauma
- Poverty
- and other emotionally harmful experiences across the lifespan.

Universal Trauma-Informed Care
- Safety
- Trust
- Support
- Peer Support
- Empowerment
- Collaboration
- Cultural Sensitivity

Actionable Tips To Help Patients:

Feel SEEN
- Unconditional positive regard
- Eye contact
- Acknowledge what you see (e.g., "You look uncomfortable, how can I help?")
- Grounding in the present

Feel HEARD
- Remind them that their voice matters
- Use trauma-informed language
- Ask them how they would like to be supported (e.g., "Do you prefer distraction during the exam, or should I talk you through it step-by-step?")
- Share trauma disclosures with team (with patient consent) so the patient does not need to retell or relive trauma

Feel IN CONTROL
- Always ask for consent before touching a patient in any way
- Knock before entering room and ask for permission to enter
- Give control to the patient for initiation and termination of procedures
- Help maintain modesty
- Reflect on your reaction to a birth plan/preferences
- Respect the purpose of a birth plan/preferences: it is what you need to know about the patient so you can provide them with excellent care

Visit www.fpqc.org/MORE for Trauma-Informed Care resources. E-mail: fpqc@uest.edu. @TheFPQC

V: 3/3/2020
TY WP, LRH, UF JAX & Halifax who tested folders 1st!!
Community Collaborations

- Plans of Safe Care
- Resource Mapping
Community Collaborations: POSC

**Five Points of Family Intervention**

1. **Pre-Pregnancy**
   - Focus on preventing substance use disorders before a woman becomes pregnant through promoting public awareness of the effects of substance use (including alcohol and tobacco) during pregnancy and encouraging access to appropriate substance use disorder treatment.

2. **Prenatal**
   - Focus on identifying substance use disorders among pregnant women through screening and assessment, engaging women into effective treatment services, and providing ongoing services to support recovery.

3. **Birth**
   - Focus on identifying and addressing the needs of infants affected by prenatal substance exposure, withdrawal symptoms, and Fetal Alcohol Spectrum Disorder including the immediate need for bonding and attachment with a safe, stable, consistent caregiver.

4. **Neonatal, Infancy & Postpartum**
   - Focus on ensuring the infant's safety and responding to the needs of the infant, parent, and family through a comprehensive approach that ensures consistent access to a safe, stable caregiver and a supportive early care environment.

5. **Childhood & Adolescence**
   - Focus on identifying and responding to the unique developmental and service needs of the toddler, preschooler, child, and adolescent who was prenatally exposed through a comprehensive family-centered approach.
Community Collaborations: POSC

• Purpose is to link moms, babies & families with services, as soon as SUD is identified.

• Components:
  • Mom's Behavioral Health Needs
  • Infant's Medical Care
  • Mom's Medical Care
  • Family/Caregiver Hx and Needs

• Whose leading efforts in your community?
Community Collaborations: Resource Mapping

• Work with local Healthy Start Coalitions to identify community resources, contacts
• Learn about CONNECT
• Get info about community initiatives
• Training for staff
Narcan Distribution Program

- 32 hospitals enrolled in program
- 168,757 Narcan kits distributed
- 10,267 self reported reversals (LIVES SAVED)

Florida’s Narcan Distribution Program partners with over 200 providers as of May 2021. Overdose prevention training is provided to all enrolled partners. Kits are purchased with grant funds and distributed for free to anyone at risk of witnessing or experiencing an opioid overdose.

to enroll, email isavefl@myflfamilies.com

Check out isavefl.com for our naloxone locator

Created 5/18/21
Lakeland Regional Health MORE Experience
Mindfulness & Stretching Activities

Photo credit: Jeffrey Westerhoff blue-tit-in-water-reflection
Mindfulness Activity: 4 Breaths

1. Breathe in for 4 slow counts...
2. Hold the breath for 4 slow counts...
3. Breathe out for 4 slow counts...
4. Wait 4 slow counts...

Repeat the cycle 4 times
Neck and Shoulder Stretch

- Slowly....
  1. Ear to shoulder
  2. Chin back, release
  3. Nod yes
  4. Side bends
  5. Look over shoulder
  6. Hold elbow over head
  7. Shrug shoulders