MORE Implementation Guidance

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Partnering to Improve Health Care Quality for Mothers and Babies
Building a Successful Initiative

• Engaging key stakeholders at beginning of project is KEY to success!
• Multidisciplinary planning and implementation
• Gain top-level support
• Team members should be able to consistently commit
## Who to Include?

### Multi-disciplinary Implementation Team

<table>
<thead>
<tr>
<th>Disciplines &amp; Departments</th>
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<tbody>
<tr>
<td>Obstetric Providers</td>
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<tr>
<td>Nursing—L &amp; D, Mother/Baby, Antepartum</td>
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<tr>
<td>Addiction Specialists</td>
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<tr>
<td>Social Work / Case Management</td>
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<tr>
<td>Behavioral / Mental Health</td>
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<tr>
<td>IT / Electronic Medical Records</td>
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<tr>
<td>Quality Improvement</td>
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<tr>
<td>Others</td>
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Successful Teams

Institute for Healthcare Improvement

- Clinical Leadership
- Technical expertise
- Day-to-day leadership
- Project sponsorship
Components of Successful Participation

- Create a QI culture—a team environment emphasizing quality and patient safety
- Hold regular QI team meetings to follow and make progress
- Share important information, progress and successes with everyone around
- Be creative and flexible!
Creating a Culture Ready for Change

- Must be a multidisciplinary effort with all members of the team’s needs respected
- Team must meet regularly
- Ability to provide a safe environment for:
  - Listening
  - Questioning
  - Persuading
  - Respecting
  - Helping
  - Sharing
  - Participating
- Successful teams will soon learn to have “system-wide” view rather than just their own view of their area
Internal Team Meetings

Multidisciplinary team should meet regularly

- Meet monthly to start then may be less frequent later
- Include all departments impacted by your work
- Review data, 30-60-90 Day Plan, PDSA cycles, and potential community partners
- Discuss insights from webinars/coaching
- Share progress and challenges with administration – follow communication plan
Quick Start Checklist

Key Driver Diagram

30-60-90 Day Plan

PDSA Cycle

Tools to Use
Quick Start Checklist

Key Driver Diagram

30-60-90 Day Plan

PDSA Cycle

Partnering to Improve Health Care Quality for Mothers and Babies
Global aim: Improve identification, clinical care and coordinated treatment/support for pregnant women with any opioid use and their infants.

By 3/2021, ≥50% pregnant women with any opioid use will receive screening, prevention, and treatment services.

**AIM**

- **Primary Drivers**
  - **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
    - Compliance with the hospital’s pain management prescribing practices
  - **Policies & Procedures**
    - Provider education bundle
    - Patient education bundle

**Secondary Drivers**

- S1 & P1
- P 2-4
- P 5
- P 6&7
- S1; P9
- P8-10
- S3
- P10
- S2
- P11
- P12; S4

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 at scheduled OB postpartum visit, 6) scheduled Behavioral Health and/or MAT visit or referral, 7) 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)
Quick Start Checklist

Key Driver Diagram

30-60-90 Day Plan

PDSA Cycle
Quick Start Checklist

1. Recruit QI team - physician, nurse, administration champion
2. Review, complete and return MORE Data Use Agreement
3. Attend MORE Kick-off Meeting
4. Complete the MORE Team Readiness Survey and identify team goals
5. Write down questions or concerns
Quick Start Checklist

Key Driver Diagram

30-60-90 Day Plan

PDSA Cycle
### 30-60-90 Day Plan

**Foundations**

<table>
<thead>
<tr>
<th>Strengths</th>
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<tbody>
<tr>
<td>Barriers</td>
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**Looking Ahead**

<table>
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<tr>
<th>Three Things to Accomplish in the Next 30 Days</th>
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<tbody>
<tr>
<td>Three Things to Accomplish in Next 60 Days</td>
<td></td>
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<tr>
<td>Three Things to Accomplish in Next 90 Days</td>
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<tr>
<td>Foundations</td>
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</tr>
<tr>
<td><strong>Strengths</strong></td>
<td><em>We have a strong physician champion and good administrative support</em></td>
</tr>
<tr>
<td><strong>Barriers</strong></td>
<td><em>Some of our providers and staff are very resistant to change</em></td>
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Three Things to Accomplish in the Next 30 Days

1. Review multidisciplinary team members and fill any gaps
2. Schedule team meetings for 6 months
3. Create communications plan to keep stakeholders informed
Three Things to Accomplish in Next 60 Days

1. Decide which validated screening tool to pilot
2. Plan and launch MORE
3. Review MORE toolkit/resources
Three Things to Accomplish in Next 90 Days

1. Diagram process flow in L&D

2. Plan PDSA cycle to test screening tool

3. Schedule FPQC site visit
Quick Start Checklist
Key Driver Diagram
30-60-90 Day Plan
PDSA Cycle
Making PDSA Cycles Work For You
What is a PDSA cycle?

- Useful tool for developing & documenting tests of change to **improve**
- AKA PDCA, Deming Cycle, Shewart Cycle

**P** – Plan a test

**D** – Do a test

**S** – Study & learn from test results

**A** – Act on results

Reasons to test changes

*Learn* whether change will result in improvement

*Predict* the amount of improvement possible

Evaluate the proposed change work in a *practice environment*

*Minimize resistance* at implementation
Tests of Change

The 5Ps Prenatal Substance Abuse Screen
For Alcohol and Drugs

The 5Ps® is an effective tool of engagement for use with pregnant women who may use alcohol or drugs. This screening tool poses questions related to substance use by women’s parents, peers, partner, during her pregnancy and in her past. These are non-confrontational questions that elicit genuine responses which can be useful in evaluating the need for a more complete assessment and possible treatment for substance abuse.

- Advise the client responses are confidential.
- A single “YES” to any of these questions indicates further assessment is needed.

1. Did any of your Parents have problems with alcohol or drug use?
   ___ No ___ Yes

2. Do any of your friends (Peers) have problems with alcohol or drug use?
   ___ No ___ Yes

3. Does your Partner have a problem with alcohol or drug use?
   ___ No ___ Yes

4. Before you were pregnant did you have problems with alcohol or drug use? (Past)
   ___ No ___ Yes

5. In the past month, did you drink beer, wine or liquor, or use other drugs? (Pregnancy)
   ___ No ___ Yes

Staff Signature: ___________________________ Date: __________

Interpreter Used: ☐ No ☐ Yes Interpreter Name: ___________________________
### Potential Implementation Barriers & Strategies to Overcome

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<thead>
<tr>
<th>Potential Barrier Drivers</th>
<th>Strategies to Overcome</th>
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<tr>
<td>Clinician</td>
<td><strong>Build compelling story with respected peer leader to speak to the importance of initiating proposed changes</strong></td>
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<td><strong>Provide peer-based education to all clinicians with education on the initiative and goals</strong></td>
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<td></td>
<td><strong>Share goals of the proposed QI project/change</strong></td>
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<td></td>
<td><strong>Provide opportunities to answer question and/or concerns</strong></td>
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<td>Resistance to change</td>
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<tr>
<td>Don’t see the need for change</td>
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<tr>
<td>Lack of understanding and/or knowledge deficit</td>
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<td>Upper Management</td>
<td>• Share data on outcomes of facility in relation to like facilities</td>
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<tr>
<td>- Lack of knowledge of Perinatal QI efforts</td>
<td>• Provide high quality peer-reviewed research and evidence to support change</td>
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<td>- Lack of resource support</td>
<td>• Instill the importance of resource (people, financial) support for project to ensure success</td>
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<td>• Share plan for implementation and sustainability</td>
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<td>Time limitations</td>
<td>Use efforts of staff members-consider use of nurse clinical ladder to support project</td>
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<td>Make sure meetings are organized and succinct to decrease the impact on time</td>
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<td>Offer meetings at multiple times; consider web-based meetings for those off site</td>
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<td>Use regularly scheduled department meetings to highlight project and results-be succinct</td>
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<td>Be prepared to answer questions</td>
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## Potential Implementation Barriers & Strategies to Overcome

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<td>Resource limitations</td>
<td>Connect with other hospitals or QI leaders for potential solutions; or sharing resources through collaborative work</td>
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As the Project Continues

- **Celebrate** successes along the way

- **Display data** – keep it current AND interesting

- **Make it stick**
  - Routinization

- **Plan for sustainability**
Where do I
Start BEFORE
I start?
Pre-Work (November)

- Assemble multidisciplinary team
- Attend in-person kick off meeting
- Share information from kick off meeting with remainder of team, other staff and administration
- Complete Data Use Agreement
- Complete Team Readiness survey
### Assess
- Assess your team to assure all critical departments included

### Review
- Review MORE resources

### Attend
- Attend Data Collection webinar
  - 12-12-19 at noon

### Plan
- Plan for MORE launch — bulletin boards; staff meetings; event invitations

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**November-December**
January

Launch

Official launch in your hospital!
Educate providers and facility leadership on importance of facility-wide standards
Engage staff and clinicians
Present your hospital’s MORE participation

Begin

Begin submitting prospective data
Now It’s Your Turn

Take a few minutes to complete, as a team, your first 30-60-90 day plan - what are next steps when you leave here?

We want you!
QUESTIONS?