Maternal Opioid Recovery Effort: MORE Initiative

July 30, 2019
Informational Webinar
How to Ask Questions

💡 To ask questions, either submit throughout the webinar via the Question Box

or

💡 Be sure to dial the 2-digit Audio Pin (shown on screen) so that you can be un-muted during Q&A
Webinar Objectives

- FPQC Overview
- Opioid Use in Pregnant Women
- What is the MORE Initiative?
- Benefits of joining a collaborative and what it takes to successfully participate in an initiative
- How to apply to participate in MORE
- Q&A
“All of Florida’s mothers and infants will have the best health outcomes possible through receiving high quality evidence-based perinatal care.”

Values

- Voluntary
- Population-Based
- Data-Driven
- Evidence-Based
- Value Added
FPQC Partners & Funders

Florida Health

CDC

Agency for Health Care Administration

Alliance for Innovation on Maternal Health

University of South Florida

The American College of Obstetricians and Gynecologists

AWHONN Florida

Florida Affiliate of the American College of Nurse-Midwives

Florida Association of Healthy Start Coalitions, Inc.

Florida Society of Neonatologists

March of Dimes

Florida Blue

Florida Hospital Association

Preeclampsia Foundation

Partnering to Improve Health Care Quality for Mothers and Babies
FPQC Presenters

William Sappenfield
MD, MPH, CPH
Director

Betsy Wood
BSN, MPH
Nurse Consultant

Nicole Pelligrino,
MPH, CHES
Quality Improvement Analyst

Linda A. Detman
Ph.D.
Associate Director
Maternal Opioid Recovery Effort

Why Do We Need to Do MORE?
OPIOID EPIDEMIC STATISTICS

USA is 4.6% of the world’s population

78 Americans die every day from opioid overdoses

66% of all illegal drug use

80% of global opioid supply

99% of global hydrocodone supply

No change in overall amount of pain reported

4x as many opioid prescriptions written since 1999

14% privately insured US women filled at least 1 opioid prescription in pregnancy

2 in 5 Americans know someone addicted to prescription painkillers

Women and opioids

- The opioid epidemic has had a severe and arguably disproportionate impact on women.

- Opioid prescribing, the primary driver of the current epidemic, is more common for women.

- Women are more likely to use opioids chronically and at higher doses than men.

- Chronic pain disorders are more common among women including higher levels of emotional distress and anxiety from pain.
Women and substance use

- The pathways to substance use are **different** for women compared to men

- Women have higher rates of co-occurring psychiatric disorders, trauma, abuse and psychological distress
  - Women are more likely to report using substances to cope with a mood disorder or a history of trauma or violence

- Women develop physical dependence to substances more quickly than men, i.e. “telescoping”

- Women have a higher risk of overdose than men, even when prescribed lower doses
Commentary

The triple wave epidemic: Supply and demand drivers of the US opioid overdose crisis

Daniel Ciccarone

Department of Family and Community Medicine, University of California San Francisco, United States
Mortality

Change in mortality rate, urban vs. rural

White women and men in small cities and rural areas are dying at much higher rates than in 1990, while whites in the largest cities and their suburbs have steady or declining death rates.

Opioid overdose death increased by 400% for women vs. 237% for men.

Source: Washington Post analysis of Centers for Disease Control and Prevention mortality data

- The pregnancy-associated mortality ratio increased 34% (31.7 to 42.3).
- Pregnancy-associated mortality involving opioids more than doubled in both the rate (1.3 to 4.2; and the percentage of all pregnancy-associated deaths (4% to 10%).

Gemmil, A, AJOG, Jan. 2019
Women & Opioid Use

• United States rates quadrupled from 1999 – 2014
• Florida rates:
  • 0.05 / 1,000 deliveries in 1999
  • 6.6 / 1,000 deliveries in 2014
FLORIDA

10-fold increase in NAS rates (2002-2012)

“We have to stop treating addiction as a moral failing, and start seeing it for what it is: a chronic disease that must be treated with urgency and compassion.”

Dr. Vivek H. Murthy.
US Surgeon General.

...and a team approach
Maternal Opioid Recovery Effort

What is **MORE**?
Planning and Support for this Project

- Florida Department of Health
- Florida Department of Children and Families
- American College of Obstetricians and Gynecologists (ACOG) District XII
- Florida Chapter of the Association of Women’s Health, Obstetric, and Neonatal Nurses (AWHONN)
- FL Association of Healthy Start Coalitions
- Florida Chapter March of Dimes
- Alliance for Innovation in Maternal Health (AIM)
- OB Provider Group Representatives
- AHCA / Medicaid Health Plan Representatives
Why a Quality Improvement Initiative?

- Florida Department of Health
- Florida Department of Children and Families
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For this initiative, FPQC will:

- Build a strong collaborative learning environment to support hospitals in driving change
- Coordinate state and national experts and resources to support the improvement process
- Offer content oversight and process management for the initiative
- Offer participants evidence-based information from both medical and quality improvement experts
- Offer tools and resources in implementing process changes and improving documentation
- Develop/adapt/update useful materials and tools as needed by the initiative
FPQC Initiative Resources

Technical Assistance
from FPQC staff, state Clinical Advisors, and National Experts

Project-wide in-person collaboration meetings

Educational sessions, videos, and resources

Monthly and Quarterly QI Data Reports

Monthly e-mail Bulletins

Custom, Personalized webcam, phone, or on-site Consultations & Grand Rounds Education

Monthly Collaboration Calls with hospitals state-wide

Online Tool Box
Algorithms, Sample protocols, Maternal education tools, Slide sets, etc.
MORE Initiative Timeline

- **Hospital Recruitment**: July – September 2019
- **State Initiative Kick-Off**: November 2019
- **Individual Hospital Kick-Offs**: January 2020
- **Mid-Project Meeting**: Fall 2020
- **Initiative Completion**: March 2021

**2019**
- Baseline Data Collection
  - Recruit Leadership Team
  - October - December 2019

**2020**
- Monthly Learning Sessions
- Ongoing Data Collection
- Onsite TA Visits
- Technical Assistance Upon Request
  - February 2020 – January 2021

**2021**
- Initiative Completion
MORE Initiative Kick-Off

Participating hospitals must send a team to the in-person meeting on **Nov 14, 2019** in Orlando

If you plan to participate in the MORE Initiative, please have your team champions/leaders save the date!
Participating Hospitals will:

- Assemble a strong QI team (physician, nurse, and administrative champions); conduct regular team meetings
- Complete pre- and post-implementation surveys
- Attend in-person kick-off and face-to-face mid-project meetings
- Augment hospital/department policies to reflect recommended quality processes and procedure changes
Participating Hospitals will also:

- Participate in monthly webinars/coaching calls
- Schedule an on-site educational and technical assistance consultation from FPQC advisors and staff
- Implement adapted recommended quality processes and procedure changes within the hospital
- Submit all hospital assessment and initiative data on a regular and timely basis
HOW TO APPLY to MORE

Complete the online application by September 30th, 2019

The link to the application can be found at:
www.fpqc.org/more

Team members will be contacted to confirm leadership roles.

Contact FPQC@health.usf.edu with any questions.
**FPQC Testimonials**

“Participating in the FPQC helped our hospital collect data, examine the data and make changes in a unified manner to improve maternal and neonatal care” - MD

“Being involved with FPQC initiatives has strengthened our department in our patient care and teamwork.” - RN

“As part of a collaborative, we have been given many resources so as not to re-create the wheel” - MD
FREQUENTLY ASKED QUESTIONS
FAQ

Is there a cost to participate in these initiatives?

🌞 No – there is no charge.

🌞 This project is supported by the Florida Department of Health, Alliance for Innovation in Maternal Health and your hospital’s voluntary FPQC membership contributions. Additional in-kind support comes from professional organizations across the state.
FAQ

How many Champions does our hospital need to participate in each initiative?

- A minimum of 3 Leadership Team Members is required from each hospital. We encourage additional members.
- Must include a Project Lead, a Physician Champion, a Nurse Champion, a Data Lead, and a Hospital Administrator. These roles may overlap.
- Can also include: Quality Improvement Specialist, Social Work Lead.
FAQ

Who should the Project Lead person be?

The Project Administrator is the hospital official making the commitment for hospital participation, will be the Hospital Team Leader for the initiative, and the FPQC's main contact.

This person should have influence to drive change, ultimate project oversight, and management to ensure implementation objectives and timelines are met.
FAQ

Are there opportunities for hospitals to have personalized one-on-one programmatic support during the initiative?

In-person, virtual, and/or phone assistance will be available to participants at all times. At least one on-site consultation will be scheduled for each participating hospital.

FPQC will tailor assistance to meet local needs. This may include Grand Rounds, virtual participation in team meetings, peer to peer consultation and other activities as needed.
FAQ

Who from the participating hospital is required to attend the initiative in-person meetings?

Your full leadership team is encouraged to attend, especially your nurse champion, your physician champion, your project lead, and your data lead.

At a minimum, 2 persons from your team are required to attend to receive the training and bring the information back to your team.
FAQ

Is our hospital responsible for IRB review and approval?

Each hospital should determine whether review and approval of your hospital IRB is necessary to participate in any FPQC quality improvement projects. Many quality improvement projects are determined to be exempt from IRB due to the nature of the work. For USF, USF IRB has already determined that MORE is not research. Those IRB materials are available upon request.
FAQ

How will we receive Recruitment and other announcements?

Join our mailing list at FPQC.org
(click “communications” in the left side navigation bar)

Facebook.com/TheFPQC/

@TheFPQC
FAQ

Can our hospital apply to more than one maternal health project?

Yes.

If your hospital applies to more than one project, we will carefully assess your hospital’s readiness and capacity to successfully manage more than one based on your application responses and previous performance. We may also schedule a phone call to discuss with your team.
More information on our Current Projects is available at:

FPQC.ORG
Q&A

Please enter your Audio PIN (shown on the GoToWebinar side bar) to allow us to un-mute you for discussion.

If you have a question, please enter it in the Question box or Raise your hand to be un-muted.
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E-mail: FPQC@health.usf.edu

Partnering to Improve Health Care Quality for Mothers and Babies
Thank You!

This webinar has been recorded and will be available at FPQC.org