You’ve Got a Friend:
An introduction to WAPC and WisPQC

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Objectives

At the conclusion of this presentation, participants will be able to:

• Identify three resources focused on perinatal care available from WAPC and WisPQC.
• Describe WisPQC’s quality improvement initiative.
• Describe one opportunity for collaboration.

Conflict of interest

I have no relevant conflicts of interest to report.
Overview

Wisconsin Association for Perinatal Care

• Background
• Resources

Wisconsin Perinatal Quality Collaborative

• Background
• Opioid initiatives

Working together

Our mission is to improve perinatal outcomes by:

• Leading collaborative efforts that promote, develop, and coordinate systems of evidence-based, high quality perinatal care in Wisconsin
• Providing and supporting professional educational programs that focus on the continuum of perinatal care
• Valuing and engaging the talented and diverse community of perinatal health care advocates
• Increasing public awareness of perinatal health

https://perinatalweb.org/

Wisconsin Association for Perinatal Care

Our vision: A healthy baby born into a family prepared to nurture, love, and support

History

• 1970: Multidisciplinary group of perinatal care providers formed the Wisconsin Association for Perinatal Care (WAPC)
• 1988: Act 122
• 2004: Infant and Family Committee new business
• 2008: Began work on Toolkit
• 2010: Toolkit released
Newborn Withdrawal Project

Facts for Providers: Care of Opioid-Exposed Infants Experiencing Neonatal Abstinence Syndrome (NAS)

Neonatal Abstinence Syndrome (NAS): A Guide for Parents

Your Pregnancy and Prescribed Treatments for Opioid Dependence

Assessment and Intervention in the Home: Women and Infants Affected by Opioids

A Blueprint for Action

- Community engagement to improve care
- Identification/implementation of best practices
- Education and educational resources
- Diagnostic and treatment resources
- Public policies
- Data to support continuous improvement
A Blueprint for Action

Primary Prevention (2018)

• Primary Care Providers
• Medication-Assisted Treatment Providers

This document was developed to describe a framework for comprehensive care of women with opioid use disorder.

It is intended for stakeholders committed to improving the care for women with opioid use disorder.
Biomedical Care

- History
- Laboratory
- Other

Psychosocial Care

- Emotional support
- Instrumental support
- Informational support
- Companionship

Recommendations
1. Providers should address the barrier to care imposed by institutional, social, and self-stigma.
2. Care should be person-centered and incorporate the strengths and needs of the woman.
3. Care should be offered in a compassionate, safe, and supportive environment.
4. Care should be comprehensive and holistic.
5. Care should be seamless across the perinatal continuum.
6. Care for the woman should also include the needs of her infant.
7. If unable to provide services directly, providers should identify and engage resources in the community.
8. Women and providers should work collaboratively to identify needs and leverage additional resources when needed.
Wisconsin Perinatal Quality Collaborative (WisPQC)

http://wispqc.org/

History

• 2014: CDC funding announcement
• 2015: DHS funding announcement
• 2017: CDC funding announcement and award
  • Increase capacity
  • Strengthen data infrastructure
  • Clinical initiatives focused on OUD
    • Improve identification and management of infants with NAS/NOWS
    • Improve identification of women with OUD
    • Improve treatment of women with OUD
History: NAS/NOWS Initiative

- Round 1
  - Measures: 8 outcome, 17 process, 4 balancing
  - Participation goal: over 50% of birth hospitals
  - Challenges with data collection
  - COVID-19
- Round 2
  - Reshaped by COVID-19, IHI BTS College experience, and Life QI

NAS/NOWS Driver Diagram

Global Aim: Incorporating full family and staff engagement, improve outcomes for women and infants affected by opioids, especially those experiencing health inequities.

The Pilot

1. Aspirus Wausau
2. Fort Health Care
3. Froedtert West Bend
4. SSM St. Mary’s Madison
5. UnityPoint Health Meriter Hospital
March 2021 NAS/NOWS Launch

• Transitioned from pilot to full cohort
• March 16, 9:00-11:30 a.m. (virtual)

Learning Session #1

• Who should attend?
• What will we do?
• Pilot site presentations

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<tr>
<th>Hospitals (number)</th>
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<tbody>
<tr>
<td>Births (total, 2017)</td>
<td>21,043</td>
<td>64,931</td>
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<tr>
<td>Births (mean)</td>
<td>10.5</td>
<td>100</td>
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<td>Births/facility (mean)</td>
<td>1,238</td>
<td>683</td>
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<tr>
<td>Births/facility (median)</td>
<td>859</td>
<td>310</td>
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Finalized Measure Set (Outcome)

1. Percent infants at risk for NAS/NOWS managed using care algorithm
2. Percent infants at risk for NAS/NOWS receiving any of their own mother’s milk within 24 hours prior to discharge
3. Length hospitalization for infants with NAS/NOWS who receive pharmacological treatments
4. Length hospitalization for infants with NAS/NOWS who exclusively receive non-pharmacological treatments
Finalized Measure Set (Process)
1. Safe discharge/follow-up planning
2. Pharmacologic care
3. Non-pharmacological care
4. Infant assessment tool
5. Percent infants at risk for NAS/NOWS discharged with safe plan of care
6. Percent infants with NAS/NOWS transferred to hospital with higher level of care due to NAS/NOWS
7. Percent infants with NAS/NOWS
8. Mean number pharm dosage for infants with NAS/NOWS
9. Percent infants at risk for NAS/NOWS managed using non-pharm methods

Finalized Measure Set (Balancing)
1. Mean satisfaction of providers caring for infants with NAS/NOWS
2. Mean satisfaction of care for families of infants at risk for NAS/NOWS
What’s Next?

- Current initiative scheduled for completion in March 2022.
- Discussions underway to extend it by several months.
- What will sustainability look like?
https://wispqc.org/nasnows-resources/

Collaboration

- We're not alone.
- Where are you right now?
- Where do you want to be in:
  - One month?
  - Six months?
  - One year?
  - Five years?
- What do you need?
- Who shares your vision?
- What can you do today to plan for tomorrow?

Questions?
Comments?
Thoughts?
Thank you.

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