

## Strong Start



### ***STRONG START FOR MOTHERS AND NEWBORNS***



- ▶ **Strong Start includes two strategies:**
  1. Public-Private Partnership to Reduce Early Elective Deliveries
  2. Funding Opportunity for Testing New Approaches to Prenatal Care
  
- ▶ Medicaid and ODH will advance existing partnerships with the OCPIM, Ohio Perinatal Quality Collaborative, and key Ohio medical colleges and health systems

## Perinatal Quality Improvement *ODH and Perinatal Quality Improvement*

- ❖ MEDTAPP –  
ODH/Medicaid  
collaboration
  
- ❖ CDC Grant to ODH



## Perinatal Quality Improvement

### *Ohio's Ongoing Work to Improve Perinatal Health Outcomes*

- 1970's: Creation of Maternity Licensure rules; adoption of state PN guidelines & perinatal regions based on TIOP I
- 1990's: Review of PN system based on release of TIOP II; repeal of CON law
- 2000's: Developing Perinatal Data Use Consortiums & involvement with VON
- 2007: Creation of OPQC

## Perinatal Quality Improvement

### *The Ohio Perinatal Quality Collaborative*

- ▶ Simultaneous quality improvement projects conducted by teams at each hospital
  - **Physician + Nurse + Administrator Teams**
  - **OB + Pediatrics**
- ▶ Improve outcomes for preterm infants
  - **Before and after delivery**
- ▶ IHI Improvement experts involved throughout
  - PDSA Cycles
  - Rapid

## Perinatal Quality Improvement *OPQC Initial Projects*

- ▶ **Neo:** 50 % ↓ in late onset blood stream / CSF infections in infants 22-29 weeks within 1 year
- ▶ **OB:** 60% ↓ in scheduled births at 36<sup>0</sup> to 38<sup>6</sup> weeks that lack a medical indication within 1 year



## Perinatal Quality Improvement *2012 and Beyond*

- ▶ **OB projects**
  - Antenatal Corticosteroids in OPOC hospitals
    - **Identify & Spread Optimal ANCS Strategies**
  - Future NAS and Progesterone projects
- ▶ **Neo projects**
  - Continued focus on ↓ bloodstream infections
    - Improve Reliability of Catheter Care
    - Human Milk for Infants 22-29 wks in the NICU

## Perinatal Quality Improvement *OPQC Next Steps*

- ▶ Membership open to “non-OPQC” hospitals
- ▶ Design and pilot the dissemination of “39 wk” project at 16 selected hospitals
- ▶ Improve birth certificate data quality with ODH vital stats and hospital birth registrars



## Perinatal Quality Improvement *OPQC Teams*

### LOCAL TEAMS

#### *NEONATAL TEAMS*

- ▶ Cleveland Clinic
- ▶ Fairview Hospital
- ▶ Hillcrest Hospital
- ▶ MetroHealth Medical Center
- ▶ University Hospital Cleveland Rainbow Babies – Neo

#### *OBSTETRIC TEAMS*

- ▶ Fairview Hospital
- ▶ Hillcrest Hospital
- ▶ MetroHealth Medical Center
- ▶ University Hospital Case Medical Center – MacDonald Women's Hospital

## Perinatal Quality Improvement *OPOC Central Team*

### Faculty Team Leads

#### OB

- ▶ Jay Iams, MD (Lead)
- ▶ Jennifer Bailit, MD, MPH

#### NEO

- ▶ Michele Walsh, MD (Lead)
- ▶ Laurel Bookman, MD
- ▶ Edward Donovan, MD, Consultant

#### QI

- ▶ Carole Lannon, MD, Improvement Design & Implementation Lead
- ▶ Heather Kaplan, MD MSCE



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## Pregnancy Associated Mortality Review (PAMR)

- ▶ Pregnancy associated deaths include all deaths to women, either during pregnancy or within one year of the end of a pregnancy, regardless of the cause.



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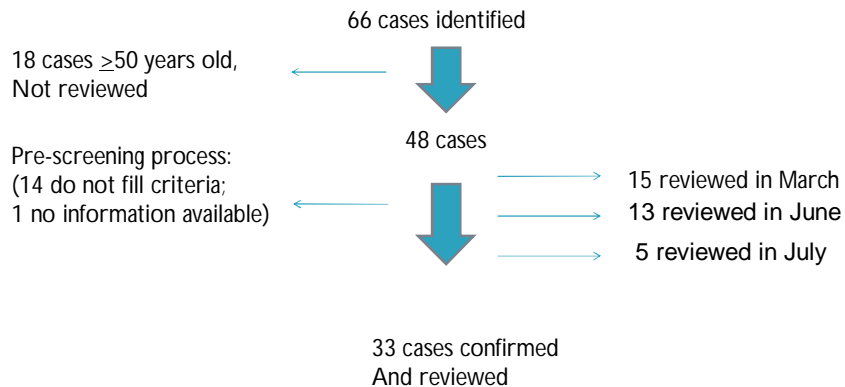
## Pregnancy Associated Mortality Review (PAMR)

- ▶ **Goal: To identify and review all pregnancy-associated deaths in Ohio and develop interventions that reduce preventable deaths.**



## Pregnancy Associated Mortality Review (PAMR)

### 2008 Cases Reviewed



## Pregnancy Associated Mortality Review (PAMR)

Cause of Death	Number (N=34)
Injury	8
Miscellaneous medical conditions	7
Drug overdose	6
Hypertension/Pre-eclampsia/Eclampsia	5
Infection	3
Cardiomyopathy	3
Pulmonary embolism	2

## Pregnancy Associated Mortality Review (PAMR)

- ▶ Refined review process
  - Improve pre-screening process
- ▶ Moving from individual cases to broader recommendations
  - Identification of key issues
  - Establishing priorities
- ▶ Begin 2012 Review of 2009 cases
  - First review meeting was March 6<sup>th</sup>



# ODH Gestational Diabetes Project

▶ **Developing a statewide plan to prevent adult onset (Type 2) diabetes mellitus among women with a history of Gestational Diabetes Mellitus**

▶ **Collaboration between MCH & Chronic Disease Programs**



**When I was pregnant, I found out I had diabetes.**

Marra and her daughter, Marra Columbus, Ohio

**Now, I am at risk for diabetes for the rest of my life. So is my child.**

**But we can take steps to PREVENT it.** Gestational diabetes is diabetes that is found for the first time when a woman is pregnant. If you had gestational diabetes, tell your health care team and get tested. Tell your child's doctor.

There are steps you can take to prevent or delay diabetes and lower the risk for you and your child. Learn more at <http://ndep.nih.gov> or call **1-888-693-NDEP** (6337); TTY: 1-866-569-1162.

NHS' NDEP is jointly sponsored by NIH and CDC with the support of more than 200 partner organizations.

**Quando estaba embarazada, descubrí que tenía diabetes.**

Sandra y su hijo, Tommy Columbus, Ohio

**Ahora, tengo el riesgo de tener diabetes durante el resto de mi vida. ¡Y mi hijo también!**

**Pero, podemos tomar medidas para prevenirlo.** La diabetes gestacional es la diabetes que se encuentra por la primera vez cuando una mujer está embarazada. Si usted sufrió diabetes gestacional, dígaselo a su equipo de salud y hágase el examen. Dígaselo al pediatra de su hijo o hija.

Hay medidas que usted puede tomar para prevenir o retrasar la diabetes, y para bajar los riesgos para usted y para su hijo o hija.

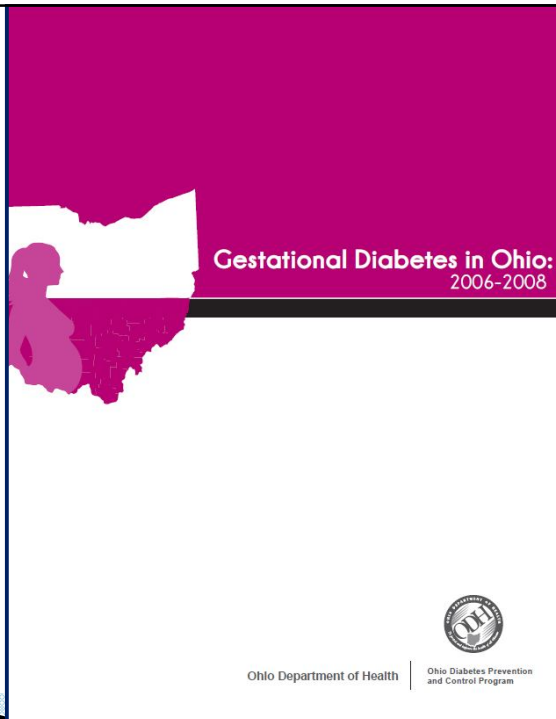
Obtenga más información visitando la página web: <http://ndep.nih.gov>  
O llame gratis y confidencialmente al tel.: **1-888-693-6337**.  
Si tiene el sistema TTY, puede llamar al 1-866-569-1162.

El NDEP del DHHS es un programa conjunto de los NIH y de los CDC. Cuenta con el apoyo de más de 200 organizaciones asociadas.



▶ **Ohio's first  
GDM data  
book  
released!**

- ▶ Oza-Frank R, Shellhaas C, Wapner A, Conrey E. (2011 October). Gestational Diabetes in Ohio: 2006-2008; Columbus, Ohio: Ohio Department of Health. Accessed at <http://bit.ly/GDM-DataBook>



SUPPLEMENT: GESTATIONAL DIABETES

FALL 2011



# ODPCP

OHIO DIABETES PREVENTION AND CONTROL PROGRAM

This special supplement to the diabetes newsletter is brought to you by the Ohio Department of Health (ODH) Gestational Diabetes Collaborative Team. We have lots to share since we first introduced ourselves to you in last Fall's newsletter. In this supplement you will find a description of our team, highlights of what we've learned over the past 18 months about gestational diabetes in Ohio, our plans for National Diabetes Month and more! We'd love to hear from you on what you think of the work we're doing. Enjoy the read!

Signed,

The ODH Gestational Diabetes Collaborative Team

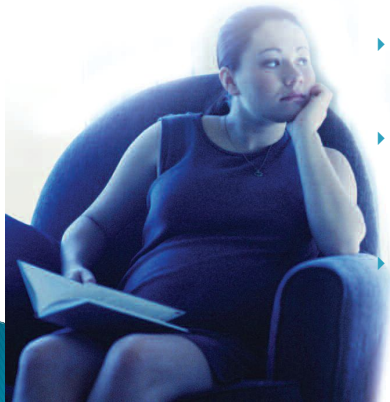
## Healthcare Provider Survey

- Random sample of >2000 licensed healthcare providers in OH
  - OBGYN
  - Nurse Midwives
  - Family Practitioners
  - Internal Medicine
- Assessment of
  - Practices
  - Knowledge
  - Attitudes
- Assistance from
  - CDC
  - Case Western Reserve University, Prevention Research Center



## Ohio's Gestational Diabetes Collaborative

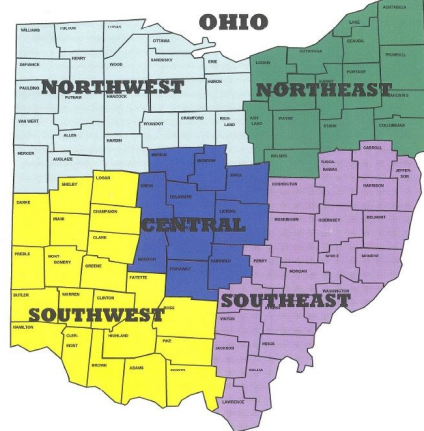
- ▶ Listening to What Ohio Women Have to Say About Preventing Type 2 Diabetes
  - ▶ Focus groups of women with a history of GDM
  - ▶ What do women know about the long term implications of having GDM?
  - ▶ What do they see as possible barriers to having post partum visit and screening?
  - ▶ What educational messages do they respond to best?



**LaVERDAD**  
Marketing, Media, Public Relations, Research

## Ohio's Gestational Diabetes Collaborative *Listening to Women in Ohio*

### REGIONAL MAP



Source: Chronic Disease and Behavioral Epidemiology, BHSIG-Prevention, Ohio Department of Health, 2007 (07/06/07).

- 15 focus groups in 5 regions of the state
- 8-10 women in each group
- Women 18-44 years of age diagnosed with GDM within past 10 years

## Ohio's Gestational Diabetes Collaborative *Listening to Women in Cleveland*

April 3, 2012 @ 2:30-4:30

- ▶ **Hispanic Women:**
  - ▶ WIC Administrative Office
  - ▶ 5202 Memphis Avenue
  - ▶ Cleveland, OH 44144
- ▶ **African American Women: PM**
  - ▶ MetroHealth Buckeye Center
  - ▶ 2816 East 116<sup>th</sup> Street
  - ▶ Cleveland, OH 44120
- ▶ Contact: Barbara Riley 216-957-9427,  
[briley@metrohealth.org](mailto:briley@metrohealth.org)

## Ohio's Gestational Diabetes Collaborative

### ▶ Contacts

#### ▶ Focus Groups

- **Jo Bouchard**  
Ohio Department of Health  
614.728.6861  
[jo.bouchard@odh.ohio.gov](mailto:jo.bouchard@odh.ohio.gov)

- **Deborah Spradley**  
LaVERDAD  
513.891.1430  
[www.laverdadmarketing.com](http://www.laverdadmarketing.com)

#### Data

- **Elizabeth Conrey**  
Ohio Department of Health  
614.728.0994  
[elizabethj.conrey@odh.ohio.gov](mailto:elizabethj.conrey@odh.ohio.gov)

<http://www.odh.ohio.gov/features/odhfeatures/gestationaldiabetes.aspx>

## Help Me Grow Home Visiting

- Moving to a system which is compatible with Medicaid in SFY13
- Transformation of At-Risk program (now called Help Me Grow Home Visiting)
- Incorporates best practices evidenced by research
- Changes include: frequency of visits, qualifications of staff, evidence based curriculum, assessment tools, common data collection.
- Eligibility refocused to those most likely to benefit
- For more information:  
<http://www.ohiohelpmegrow.org/>

