Perinatal Quality Collaborative Vermont

presents the

2024 Annual Statewide Improving Care for Opioid-Exposed Newborns Conference

Substance-Exposed
Newborns and Families:
Creating a Community of Practice







Housekeeping

Chat

Use the *Chat* box to type a question.





Microphone

You will be muted when you join. If you wish to verbally ask your question during the Q&A portion of the presentation, please click the microphone to unmute.



Captioning

Click the StreamText link provided in the *Chat* box to open captions in a separate browser window.

Evaluation

Near the end of the event, an evaluation link will be provided in the *Chat* and a QR will be provided on a slide for you to scan. Thank you!









Collaborators











Welcome & Updates

Michelle Shepard MD, PhD
Assistant Professor of Pediatrics
UVM Larner College of Medicine & UVM Children's Hospital

April 9th, 2024







Welcome!!

Vermont Department of Health

UVM Women's Wellness Center

Turning Point Center of Central Vermont

Northwestern Medical Center

Maitri OBGYN

Visting Nurse & Hospice VT & NH

State of Vermont Division of Substance Use Programs

Franklin County Home Health Agency

Turning Point Center of Chittenden County

Building Bright Futures

Grace Cottage Family Health and Hospital

WIC

Copley Hospital

WCMHS The Doula Project

Northwestern Counseling and Support Services

Central Vermont Medical Center

Gifford Medical Center

UVMHN-Porter Birthing Center

UVM Health Network Home Health & Hospice

VDH Family and Child Health

UVM College of Medicine

Northeastern Vermont Regional Hospital

Little Rivers Healthcare

Oak Leaf & Pine Counseling, PLC

UVM Medical Center

Washington County Mental Health Services

Porter Women's Health, UVMHN

VT Dept of Mental Health

UVM Nursing DEPN

Easterseals VT

Brattleboro Memorial Hospital

Washington County Mental Health

VDH, Local Health Morrisville

Lund Family Center

KidSafe Collaborative

Kingdom Recovery Center

PQC-VT / UVM

The Family Place

Department of Children and Families

FSĎ

Turning Point of Windham County

Chittenden Clinic-Howard Center

Rutland County Parent Child Center- CIS

Addison County Parent Child

Center

Springfield Area Parent Child Center

ciicci

Orange County Parent Child Center

CVPH Medical Center

VCHIP

Northern Counties Health Care

The Doula Project

Rutland Regional Medical Center

Chittenden County Family
Treatment Docket

Children and Family Futures







Vermont is Special!

Hospital level committees & QI workgroups

Local empaneled Community Response Teams

Statewide Collaboratives - Perinatal Quality Collaborative - VT

Regional QI initiatives- NNEPQIN

National collaborations- Best Practices

Health Department prioritization and involvement







CRT Teams

→ 5 Active Team:

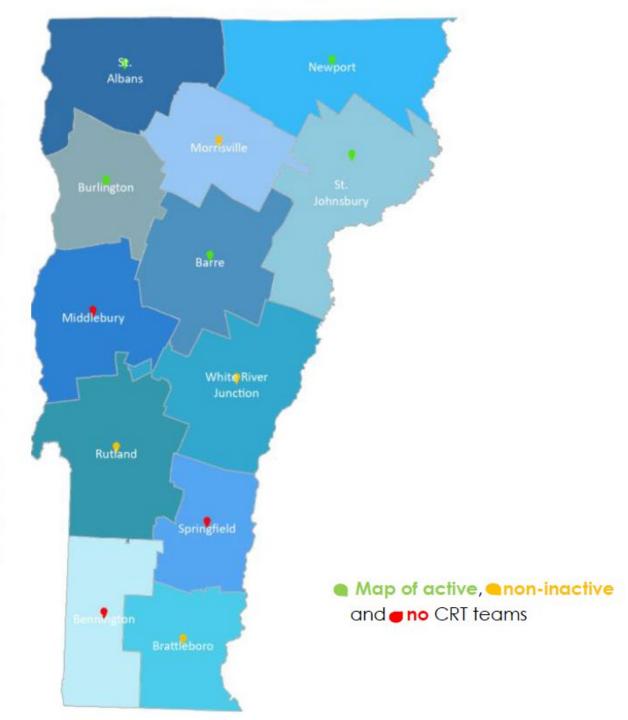
Barre Burlington St-Albans St-Johnsbury Newport

→ 4 Currently Inactive Team:

Brattleboro Rutland Morrisville White River Junction

\rightarrow 3 Region with no CRT Team:

Springfield Middlebury Bennington



Vermont Child Health Improvement Program

COLLEGE OF MEDICINE

Program Home

About Us ▼

Projects ▼

Research and Evaluation

Tools + Resources

National Improvement Partnership Network

CONTACT US

Improving Care for Opioid-exposed Newborns (ICON)



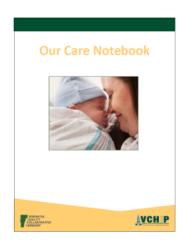
The ICON project partners with the Vermont Department of Health and The University of Vermont Children's Hospital to improve health outcomes for opioid-exposed newborns. Improved health outcomes are achieved by provision of educational sessions on up-to-date recommendations and guidelines to health care professionals who provide care for opioid-dependent pregnant women and their infants.

The project also maintains a maternal and newborn populationfocused database for tracking process and outcome measures. This data is used to identify gaps in care and systems related

resources; the project addresses these gaps through quality improvement initiatives, focused on enhanced care processes and systems' changes. Review the objectives <u>here</u>.

NEW Resources

Our Care Notebook



Our focus: to improve the quality of care for opioid-dependent pregnant and parenting people and opioid-exposed newborns in Vermont.







Improving Care for Opioid-Exposed Newborns

- What we are: Vermont Child Health Improvement Program (VCHIP) quality improvement project and part of the Perinatal Quality Collaborative Vermont
- Focus: to improve the quality of care for opioid-dependent pregnant and parenting people and opioid-exposed newborns in Vermont.
- Who we are: a collaborative team including partners from the Vermont Dept of Health, Dept for Children and Families, UVM Children's Hospital, community birth hospitals and people with lived experience







ICON Initiatives

 Partner with other VCHIP projects in the Perinatal Quality Collaborative

- Support birth hospitals with Plan of Safe Care education and technical assistance
- Collect hospital data for quality improvement initiatives
- Provide education to providers and families affected by opioid use disorder







PQC-VT ICON Team

Faculty

- Michelle Shepard, MD, PhD, Pediatrics, Lead Faculty
- ❖ Molly Rideout, MD, Pediatrics
- ❖ Adrienne Pahl, MD, Neonatology
- ❖ Marjorie Meyer, MD, Obstetrics & MFM

Collaborators

- ❖ Susan White, NP/APRN
- Bronwyn Kenny, MD

VCHIP

- ❖ Julie Parent, MSW, ICON Project Director
- ❖ Avery Rasmussen, MPH, ICON Data Manager
- ❖ Angela Zinno, MA, ICON Project Coordinator

Parent Advisors

- Ashlee
- Heidi
- ❖ Arial

Vermont Department of Health Liaison

Ilisa Stalberg, MSS, MLSP, MCH Director

Website: http://www.med.uvm.edu/vchip/icon

Email: vchip.pqcvt@med.uvm.edu







Perinatal Quality Collaborative-Vermont

Mission: Optimizing care and health outcomes in pregnancy and infancy through collaboration and continuous quality improvement.

Goal: The PQC-VT will improve care and health outcomes of pregnant people and infants in Vermont through the following initiatives:

- Set Perinatal health Outcome Priorities
- Provide Outreach and Education
- Advance Quality Improvement Efforts
- Monitor Pregnancy and Newborn Health Outcomes









VCHIP Perinatal Efforts

Quality Improvement Coaching Activities

Obstetrics and Neonatal Clinical Expertise

Perinatal Statistics
Report and statistics
Conferent for Vermont
Community Hospitals

Perinatal Transport
Conferences for
Vermont Community
Hospitals

Education and skilled Training for Perinatal Health Care Professionals

Expertise in Substance
Use Exposure in
Newborns (ICON)

(STAMPP) Perinatal Mood and Anxiety Screening and referrals

Maternal Mortality Review Panel (MMRP)

Data Analytics and Dissemination

Alliance for Innovation on Maternal Health (AIM) Safety Bundles





NORTHERN NEW ENGLAND PERINATAL QUALITY IMPROVEMENT NETWORK

HOME EDUCATIONAL OFFERINGS CLINICAL GUIDELINES PROJECTS ABOUT NNEPQIN MEMBERSHIP CONTACT

NH Maternal Mortality Webinars and Resources Click here » AIM SUD Bundle Click here »

AIM Perinatal Mental Health Bundle Click here »



The Northern New England Perinatal Quality Improvement Network
(NNEPQIN) was founded at Dartmouth Hitchcock in collaboration with
University of Vermont Medical Center (then FAHC) in 2003. We now have
members across all of Northern New England, including Maine Medical

Center and most of the birth hospitals in New Hampshire, Vermont, and Maine. Dartmouth Hitchcock is the administrative home for NNEPQIN and manages grants, contracts and finances.

Vermont In-Depth Technical Assistance Initiative



National Center on Substance Abuse and Child Welfare

Key Partners

- Department for Children and Families
- Department of Health / Family and Child Health
- Department of Health / Substance Use Programs
- KidSafe Collaborative
- Division of Planning & Court Services, Court Administrator's Office
- · University of Vermont Medical Center
- UVM Larner College of Medicine: Vermont Child Health Improvement Program (VCHIP)
- Lund
- Families with lived experience



Current IDTA Sites

Connecticut Louisiana Massachusetts Michigan New Jersey

Oklahoma

Texas Vermont

Wyoming Orange County, CA Riverside County, CA



Vermont Work Plan Goals

Goal 1: Map existing clinical and community-based services and supports across the state that work with pregnant individuals and families experiencing substance use and identify barriers and gaps in care.

Goal 2: Ensure integration among existing (and new) clinical and community-based services/supports.

Goal 3: Apply a health equity approach to the issue of substance use in pregnancy and in families, including a review of policy and structural factors that contribute to health disparities.

Goal 4: Improve data collection as a strategy to apply quality improvement methods in clinical and community care towards the goal of increased care coordination and systems integration.

Goal 5: Address gaps and concerns related to the current process of developing plans of safe care and CAPTA notifications



Current Cohort Themes

- · Wider dissemination and uptake of currently implemented POSC policies and practices
- Alternative notification pathways for infants with prenatal substance exposure
- · Need for environmental scan/community mapping to understand gaps and opportunities
- Moving beyond pilots or regional policy and practice to state-wide services
- Establish evaluation framework to assess what works for all families

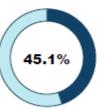
Vermont Key Data Points

Substance Use and Child Welfare Involvement

2020 Data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) (Incidence)



Graph 1: Parental substance abuse identified as a condition of removal



Graph 2: % children <1vr with parental alcohol as an identified condition of removal

Prepared by Michelle Shepard, MD, PhD, Angela Zinno, MA, Katy Leffel, RN, BSN, IBCLC, and Julie Parent, MSW on behalf of the Vermont IDTA team.





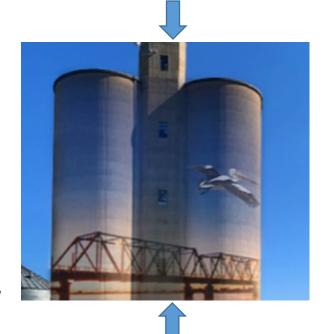




Strategies to bridge the silos

Signed releases

Community partnership s



Shared language

Multidisciplinary teams





Common goals







Barriers

Shame

Isolation



Poor Commun ication





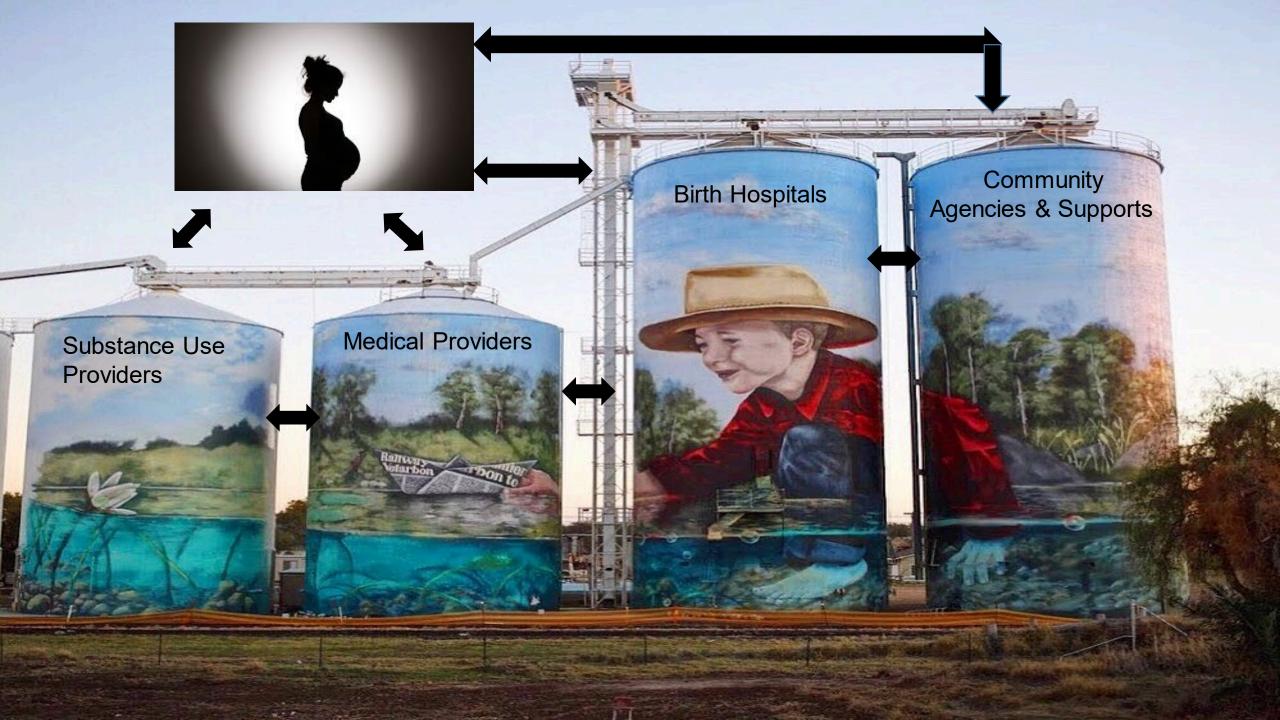


Stigma

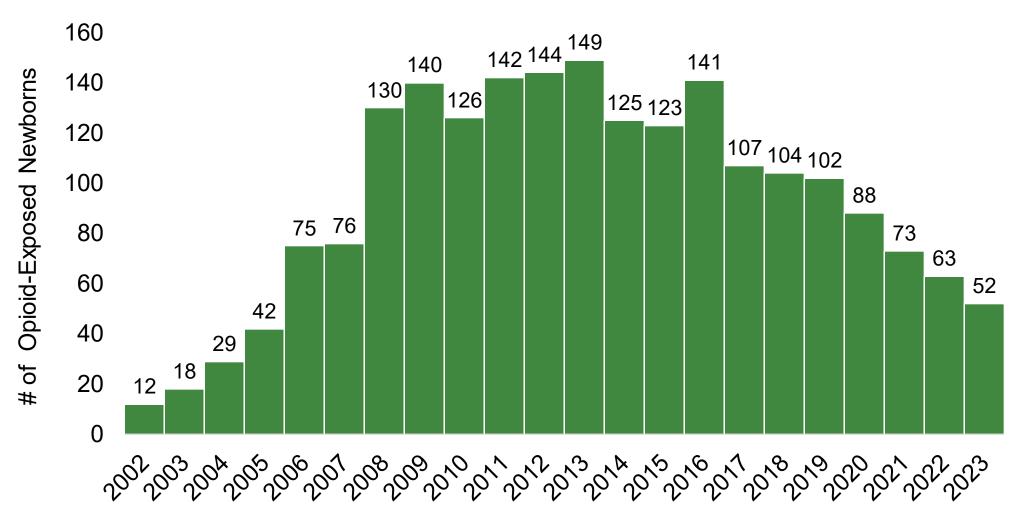








Total Opioid-Exposed Newborns (OEN) Cared for at UVMMC

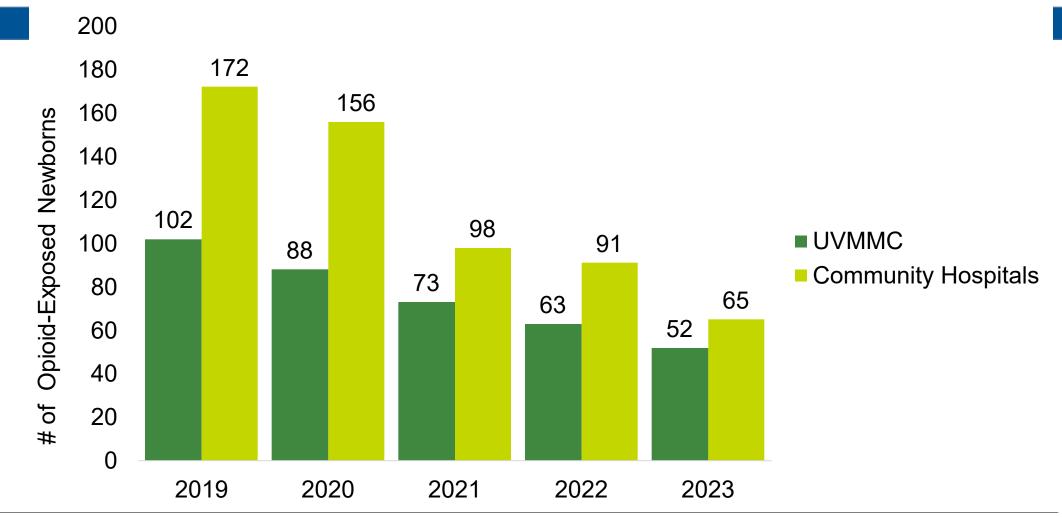








Number of OEN born in VT hospitals

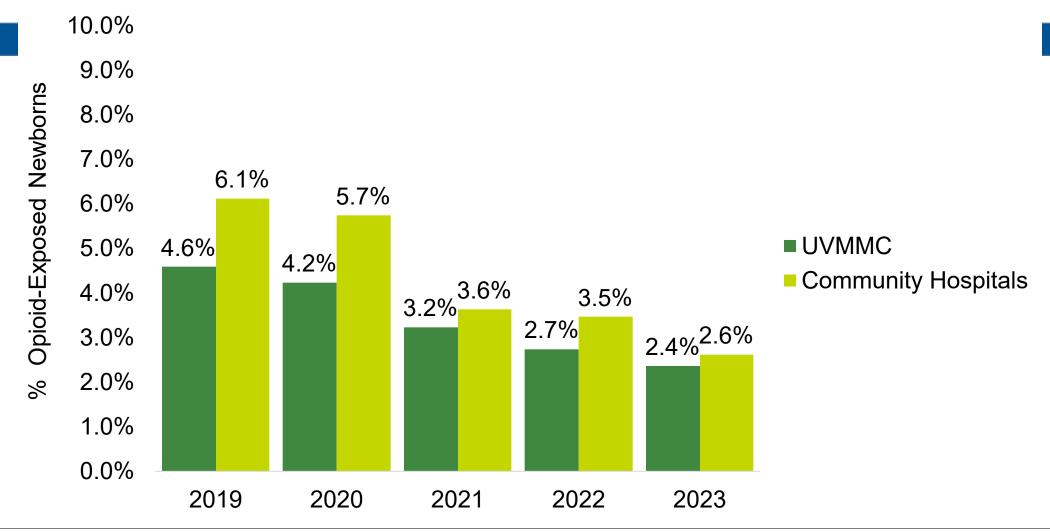








Proportion OENs of VT live births

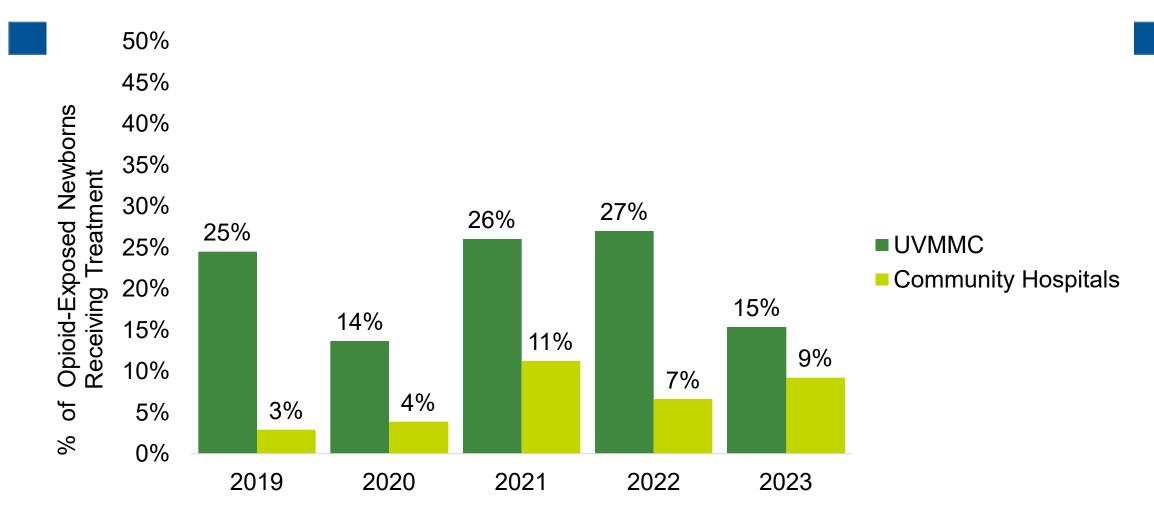








Proportion of OENs receiving medication treatment









FIVE POINTS OF FAMILY INTERVENTION



















PRE-PREGNANCY

PRENATAL

BIRTH

NEONATAL, INFANCY & POSTPARTUM CHILDHOOD & ADOLESCENCE

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

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

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

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

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

Infants with Prenatal Substance Exposure and their Families: Five Points of Family Intervention







