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| **Date:** October 28, 2021 |  |
| **Medical Dir.:** Garrett Colmorgen, M.D. |  |
| **Location:** Zoom Conference Call |  |

**MEMBER ATTENDANCE:**

🗹 Garrett Colmorgen, MD 🗹 Karen Kelly, BSN, RN 🗹 Julia Paulus, CNM

🗹 Bridget Buckaloo, MSN, RNC-OB MSN/MCA 🗹 K. Starr Lynch, BSN, RN  Anne Pedrick

 Christina Bryan  Kathleen McCarthy, CNM, MSN 🗹 Nancy Petit, MD

 Joanna Costa, MD  Christie Miller, MD 🗹 Kim Petrella MSN, RNC-OB

🗹 Mawuna Gardesey 🗹 Jennifer Novack, MSN, RNC-OB, APN 🗹 JoEllen Kimmy, DPH

 Abha Gupta, MD  Susan Noyes, RN, MS 🗹 Jennifer Pulcinella

 David Hack, MD 🗹 Rita Nutt 🗹 Philip Shlossman, MD

🗹 Matthew Hoffman, MD 🗹 David Paul, MD  Megan Williams

**FACILITATOR:**

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| 🗹 Garrett Colmorgen, MD |  |  |

**OTHER STAFF ATTENDANCE:**

🗹 Dr. Meena Ramakrishnan, CDRC/ DSAMH

🗹 Lisa Klein, CDRC

🗹 Dara Hall, DMMA

🗹 Cheryl Scott

🗹 April Lyons-Alls, DHMIC

🗹 Khaleel Hussaini, DPH

🗹 Kim Hudson, Tidal Health

🗹 Dr. Margaret Chou

🗹 Marilee Pinkelton, CPM

🗹 Dr. Glen Hamilton, Highmark Health Options

🗹 Susan Todero, St. Frances

🗹 Cortney Jones, Highmark

🗹 Dr. Deb Allen-Brown, Amerihealth

🗹 Kandis Samuels

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| **TOPIC** | **FINDINGS, CONCLUSIONS & RECOMMENDATIONS** | **ACTIONS** | **STATUS** |
| I. Call to order | The meeting was called to order by Dr. Colmorgen at 4:02p.m. | No further action. | Resolved |
| II. Review and approval of Minutes | The minutes from the September 22, 2021, meeting were not reviewed. | No further action. | Resolved |
| III. Introduction of New Attendees and Membership | Attendees were introduced. | No further action. | Resolved |
| IV. COVID-19 Update | Concern for vaccine hesitancy among patients. Have seen increase in pregnancy COVID cases in hospital recently. Have lost some staff over vaccine mandates. Bed shortages continue to be an issue. The CDC has a number of resources to educate patients on benefits of vaccine. | On-going | On-going |
| V. Aspirin Data Collection | Random audit of 20 charts at each hospital and baseline in April showed 56% missed opportunity/ 44% of proper use of LDASA for PEC prophylaxis. In September it was 58% missed opportunity/42% proper use to give low dose aspirin. DPQC worksheet “Pregnancy Risk Screening for Low Doses Aspirin Regime”, in an effort to decrease complications/death in BIPOC (Black and Indigenous People Of Color) and to decrease health disparities, gives an automatic point for AA and an additional point for Medicaid patients. A score of 2 qualifies the patient for low dose aspirin. Qualifiers are history of preeclampsia, multiple gestations, chronic hypertension, diabetes, Autoimmune disease, Low PAPP-A, nulliparity, obesity, family history, AA, low socioeconomic status, age over 35 and history of low birth weight or SGA, history of an adverse outcome and over 10 years since last live birth. Large area of patients missed were AA with Medicaid, first pregnancy + obesity and Caucasian with a high-risk factor + private insurance. | On-going | On-going |
| VI. Updates on Aspirin Project | All hospitals have had a virtual presentation by Dr. Hoffman so far. As well as the DPQC risk worksheet for office staff, an additional worksheet was created for patients, based on the Preeclampsia Foundation patient education. This sheet allows patient to see their own risk factors to increase educational awareness and compliance with low dose aspirin. Patients can be enrolled in the free Twistle App when they give their information on these sheets. Twistle is managed by a nurse, where a patient can get reminders, receive education, interact with the nurse. Kim will be visiting offices starting tomorrow to review the patient self-assessment form, the nurse aspirin form, and the patient video. Will be asking PP nurses to do education on how to teach patients how to take their BP (automatic cuff) and how to have a patient enroll in Twistle (patient fills out paper). Working on how to assure blood pressure cuffs are safe, stocked and ordered and how to bill. Additional audits will take place quarterly and a 2-minute proposed patient education video was shown. | On-going | On-going |
| VII. OBH Grant | After four years, all hospitals are updating discharge data to Healthy Soft, some a month or two behind but it is being inputted. OBERT nurses will be visiting Tidal Health Nanticoke for drill assistance. A huge thank you to Khaleel Hussaini, with help from Kim, as this is a huge achievement. It is believed that no one else in the nation is this close with real-time data. Additionally, thank you to all that input data and everyone’s IT departments. | On-going | On-going |
| VII. Khaleel Korner | The DPH’s severe maternal morbidity brief for 2010-2019 will be able to be compared and reviewed, based upon discharge data, each year going forward. Every hospital representative has access to see their hospital’s dashboard and the state’s data, as a whole. | On-going | On-going |
| VIII. Mawuna’s Minute | As to codification of DPQC, awaiting Board member’s nominations to go through their process to formally nominate the nominees. Working on drafting bylaws of DPQC. Working with AIM to formalize contract. |  |  |
| IX. SUD Grant | NOWS progress with newborn treatment to be discussed in PEDS breakout session; will be able to use data from Healthy Soft towards their initiatives. DPQC presented to the NNPQC on progress made in Delaware, as part of the SUD grant portion wrap-up. | On-going | On-going |
| X. Educational Video Series | Delays and funding issues. For now, going to spend a lot of time looking through content and deciding what to highlight. | On-going | On-going |
| XI. Breakout Sessions & Reports | The meeting then broke out into the OB and PEDS breakout sessions.  Dr. Paul, PEDS Team: The group reviewed Khaleel’s preliminary data on LOS with NOWS, but need more data to be completed and analyzed. Need a Change Champion from each facility, as well as a QI system in place at each facility. LOS barriers were discussed.  Dr. Hoffman, OB Team: Dr. Hoffman shared that the group has made good progress; discussed data and some population under-identified issues and need for systematic approaches. Kim to take screening form, etc while visiting practices in upcoming weeks/ months. A newsletter will be created to send out to highlight the positive implementation of the blood pressure cuff program. Amerihealth and Highmark Health Options were in attendance and support this initiative. Discussed once cuffs are received to develop way to distribute. The work will continue and another measurement cycle will be in three months. | On-going | On-going |
| XII. Attendee Updates | Beebe: New OB/ GYN is in hiring process and will be starting in January and hiring for a Nurse Manager.  CCHS: Dr. Hoffman shared that CCHS has seen a large increase in pregnant women, especially Hispanic population, with COVID. Dr. Colmorgen shared that nationally the Hispanic rate is 3.4% and Caucasian and African American are around 2.4%. CCHS is participating with the Pfizer vaccine which was recently approved for children 5-11yo.  Safe Sleep: FIMR groups are meeting next week, and MMR meeting was this week and several concerns regarding domestic violence arose. Lisa advised it is important to look for physical signs as well as the verbal screeners.  Tidal Health/ Nanticoke: They are searching for a Nurse Manager and other staff. | On-going | On-going |
| XIII. Adjournment | The chair adjourned the meeting at 5:55pm.. | No further action. | Resolved |

Minutes prepared by JoEllen Kimmey, DPH

**Upcoming Meetings:**

* November 18, 2021 4pm-6pm via ZOOM
* December 16, 2021 4pm-6pm via ZOOM