July 6, 2015

Dear Colleague:

Led by the New York State Department of Health (NYSDOH) Division of Family Health (DFH), New York State (NYS) is participating in the national Infant Mortality Collaborative Improvement and Innovation Network (IM-CoIIN). The IM-CoIIN is a platform designed to accelerate improvement in priority strategy areas through collaborative learning, quality improvement and innovation. IM-CoIIN participants share the common agenda of ensuring every child reaches his/her first birthday and beyond. Currently, 53 jurisdictions are participating in the national IM-CoIIN. As part of the IM-CoIIN, NYS has specifically chosen to focus on improving statewide infant safe sleep practices to reduce infant mortality.

As part of our work on this important topic, we are inviting NYS birthing hospitals to participate in the New York State Perinatal Quality Collaborative (NYSPQC) Safe Sleep Project. This NYSPQC project will align with the NYS IM-CoIIN team efforts, and participating hospitals will serve as the CoIIN pilot sites while participating in the Collaborative.

The NYSPQC Safe Sleep Project is designed to enable improvement teams to reduce infant sleep-related deaths by improving safe sleep practices. New York State’s Regional Perinatal Centers (RPCs), Level I, II and III hospitals, and the NYSDOH will work together for approximately 12 months to implement evidence-based interventions to improve infant outcomes. Participating organizations will learn and apply key principles to improve care and implement the core intervention, and associated measures, as the primary focus of work. As part of the improvement process, teams will learn quality improvement strategies, and collect process and outcome data that are sensitive to the changes they will be testing and implementing, to track performance and results.

Evidence Basis for this Initiative

Deaths from Sudden Infant Death Syndrome have declined dramatically since 1992 when the American Academy of Pediatrics (AAP) recommended that all babies be placed on their backs to sleep. Sleep-related deaths from other causes, however, including suffocation, entrapment and asphyxia, have increased. In 2011, the AAP expanded its guidelines on safe sleep for babies, with additional information for parents on creating a safe environment for their babies to sleep. Even so, unsafe sleep remains the leading preventable cause of death for healthy infants. The NYSPQC Safe Sleep Project is well aligned with the many efforts across New York State to educate and support caregivers to reduce infant sleep-related deaths by improving safe sleep practices.

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Benefits to Participation
Facilities participating in the NYSPQC Safe Sleep Project will receive:
  • Support from national and regional faculty, including trained QI and clinical experts;
  • Support in the collection and documentation of safe sleep related data; and
  • Access to the newly developed section of the NYSPQC project website that will be used to share tools and resources developed by teams and faculty for this focused effort.

Next Steps
Please note that this project is currently being introduced to RPCs, and that an RPC Informational Call regarding the project is scheduled for Wednesday, July 15, 2015, from 12:00 PM – 1:00 PM. During this call, you will have the opportunity to learn more about the project and ask questions. In the coming weeks, we will be sending the Recruitment and Pre-Work Package to your affiliate hospitals, and hosting another Informational Call for all interested RPC affiliate hospitals (RPCs will be notified when this information goes out, and are welcome to join the RPC affiliate Informational Call).

We expect RPCs to play a pivotal role as participants in this project, and in assisting their affiliate birthing hospitals with clinical guidance and technical assistance, based on previous quality improvement experience in the projects of the NYSPQC. More specifically, RPCs should provide assistance to their affiliate hospitals in:
  • Reviewing the purpose and goals of the Learning Collaborative and providing technical assistance in the implementation of plan-do-study-act (PDSA) quality improvement cycle processes;
  • Serving as the first point of contact for questions about the interpretation of measures; and
  • Providing guidance in the implementation of effective clinical policies and protocols.

Again, we request that you and appropriate members of your staff join us for the RPC Informational Call which is scheduled for Wednesday, July 15, 2015, from 12:00 PM – 1:00 PM. Please email the NYSPQC Project Mailbox at NYSPQC@health.ny.gov to let us know that you plan to participate in the call, and we will provide call-in information.

If you have any questions, please e-mail NYSPQC@health.ny.gov, or call Kristen Lawless at 518/473-9883. Thank you in advance for your continued support.

Sincerely,

Marilyn A. Kacica, MD
Medical Director
Division of Family Health

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