New York State Perinatal Quality Collaborative (NYSPQC): Promoting Infant Safe Sleep to Reduce Infant Mortality

December 20, 2016
Presenters

• Kristen Lawless, MS
  – Program Director, NYSPQC
  New York State Department of Health

• Deborah Campbell, MD, FAAP
  – Chief, Division of Neonatology
  Children’s Hospital at Montefiore
  – Clinical Advisor, NYSPQC

• Pat Heinrich, RN, MSN
  – Executive Project Director, NICHQ
  – Clinical and Quality Improvement Advisor, NYSPQC
Presentation Objectives

• Provide an overview of the NYSPQC, including its mission, structure, and focus areas
• Describe the NYSPQC Hospital-based Safe Sleep Project
• Review progress of the NYSPQC Hospital-based Safe Sleep Project
• Discuss initiative successes and challenges
• Answer questions from meeting attendees
New York State Perinatal Quality Collaborative (NYSPQC)
NYSPQC Mission & Strategy

To provide the best and safest care for women and infants by preventing and minimizing harm through the translation of evidence-based practice guidelines to clinical practice.

This is achieved through collaboration amongst participants and the utilization of quality improvement science.
NYSPQC Resources

- The NYSPQC is an initiative of the New York State Department of Health (NYSDOH), which provides unique and important resources:
  - Infrastructure and leadership
  - Connections to other state agencies for programmatic and data needs
    - Medicaid
    - Vital Records
    - Hospital Acquired Infections
  - Statewide health information network
    - Web-based
    - Available for centralized data collection
  - Statewide partnerships
  - Established relationships with hospitals and community-based organizations
NYSPQC Structure

- Adapts the Institute for Healthcare Improvement (IHI) model for Idealized Perinatal Care and Breakthrough Series Methodology as a framework to guide improvement
  - This strategy has been executed with the assistance of a long standing partnership with NICHQ

- Utilizes NYS’ well-established system of perinatal regionalization

- Collaborates with NYS birthing hospitals and various other organizations
Collaborating for Success
NYSPQC Past Focus Areas

• Reducing scheduled deliveries without a medical indication before 39 weeks gestation

• Improving identification/management of maternal hemorrhage/hypertension

• Reducing central line associated blood stream infections in NICUs
NYSPQC Current Focus Areas

• Optimizing enteral nutrition practices in NICUs to improve infant growth

• Improving access to and utilization of antenatal corticosteroid treatment

• Improving safe sleep practices to reduce infant mortality
NYSPQC
Safe Sleep Project
Infant Sleep Related Mortality

- The ~90 infants who will die in New York State this year due to sleeping in an unsafe environment are enough to fill five kindergarten classes.
NYSPQC Safe Sleep Project

• Focuses on improving safe sleep practices to reduce infant mortality
• Implements the national IM-CoIIN infant safe sleep activities
• NYS hospitals participating in the NYSPQC Safe Sleep Project are the state’s stakeholders in the national CoIIN Safe Sleep Network
NYSPQC Safe Sleep Project

- Improvements in safe sleep practices are being achieved by:
  - Ensuring all infant caregivers (i.e., new moms or guardians) have documentation of safe sleep education documented in the medical record;
  - Establishing consistent modeling of a safe sleep environment for all infants without a medical contraindication during the birth hospitalization; and
  - Discussing caregiver (i.e., new moms or guardians) understanding of infant safe sleep education prior to discharge from the birth hospitalization.
NYSPQC Safe Sleep Project

• Project began in September 2015
• 76 out of 125 (60.8%) NYS birthing hospitals participating in the initiative:
  – 17 Regional Perinatal Centers (RPCs)
  – 25 Level III birthing hospitals
  – 13 Level II birthing hospitals
  – 21 Level I birthing hospitals
Progress to Date
Documentation of Safe Sleep Education Form
Measure 1: Percent of medical records with documentation of safe sleep education
Crib Check Tool
Measure 2: Percent of infants, sleeping or awake-and-unattended in crib, in a safe sleep environment

*A safe sleep environment is defined as infants who were positioned supine, in safe clothing, with head of crib flat and no objects in the crib.*
Measure 2: Percent of infants, sleeping or awake-and-unattended in crib, in a safe sleep environment, by unit type
Caregiver Survey
Measure 4: Percent of primary caregivers indicating they understand safe sleep practices*

*Understanding safe sleep practices is defined as reporting that infants should sleep alone, on their back, in a crib, with the crib free of objects.
Measure 4: Percent of primary caregivers indicating they understand safe sleep practices, by caregiver race/ethnicity
Measure 4: Percent of primary caregivers indicating they understand safe sleep practices, by caregiver insurance type
Measure 4: Percent of primary caregivers indicating they understand safe sleep practices, by caregiver education level
Summary

- Improvement has been seen in all project measures
- Between September 2015 and September 2016:
  - The percent of medical records with documentation of education increased 8%;
  - The percent of infants in a safe sleep environment has increased by 33%; and
  - The percent of caregivers who understand safe sleep practices increased by 15%.
Still Room for Improvement

• Hispanic and Black caregivers understand safe sleep practices less frequently than White caregivers
• Caregivers insured by Medicaid or other insurance understood safe sleep less frequently compared to those with private insurance
• Caregivers with lower levels of education understood safe sleep less frequently than those with more than a high school education
Successes and Challenges
Success: CBO Safe Sleep Project

• Six NYS Maternal & Infant Community Health Collaborative (MICHC) organizations engaged in CBO Project
  – Survey administered to caregivers by home visiting organizations to assess the effectiveness of safe sleep education on caregivers’ practices in the home setting
Success: Safe Sleep Project

- Collaborations among participating hospitals and stakeholder organizations
- Hospital policies and procedures put into place, or updated as appropriate
- Safe sleep education and documentation built into birthing hospitals’ electronic medical records (EMR) systems
Working to Reduce Disparities

Successes:
Tailored Tests of Change
Tailored Tests of Change

Developing changes – what’s different?

- Evidence
- Theories, questions, hunches
- Linked to aim
- Involve key players
- Tailored

Tailored Tests of Change

• Language
• Religiosity
• Cultural norms
• Health beliefs
• Literacy
• ….

Success: Tailored Changes

• Consideration given to cultural beliefs, and resources tailored as appropriate

• NYSDOH collaborations with various state agencies (OCFS, OASAS, WIC, etc.)
  – Consistent safe sleep messaging

• Various educational materials developed and translated into multiple languages
Success: Media Campaign

- Goal is to increase awareness among parents and other caregivers about infant safe sleep, through the development of:
  - Posters
  - Brochures
  - Magnets
  - Clings
  - Crib cards
  - Videos
Success: Safe Sleep Video

https://www.youtube.com/watch?v=B4M9pCU4LMc&feature=youtu.be
Success: Safe Sleep Video

https://www.youtube.com/watch?v=rCcYzWg2N20&feature=youtu.be
Success: Engaging Prenatal Providers

- Commissioner letter sent to obstetricians and nurse midwives statewide
- Educate and reinforce safe sleep messages prior to delivery
Success: Engaging Providers After Birth

- Commissioner letter sent to:
  - Pediatricians
  - Family practitioners
  - Nurse practitioners
- Reinforce safe sleep message that has been provided previously in different settings
Success: NYS Public Health Law

• New York State Public Health Law was amended in July 2016 to include language that requires birthing hospitals and birthing centers to distribute infant safe sleep information to all maternity patients.
Challenges

• Changes to EMR systems can take time
• Grandparents - “You slept on your stomach, and you’re fine”
• Cultural barriers
Challenges

• Financial issues – can’t afford a crib, bassinet, etc.
• No room in apartment/trailer/home for crib
• Evolving thoughts and research on swaddling
Questions & Discussion
NYSPQC Safe Sleep Project Team

• Marilyn Kacica, MD, MPH
• Susan Slade
• Chris Kus, MD, MPH
• Kristen Lawless
• Eileen Shields
• Kuangnan Xiong, PhD
• Amanda Roy
• Solita Jones

• Lusine Ghazaryan, MD, MPH
• Brandi Wells
• Kathy Harris
• Mari Sepowski
• Pat Heinrich, RN, MSN (NICHQ)
• Emma Smizik (NICHQ)
• Emma Hopkinson (NICHQ)
NYSPQC Clinical Expert Work Group – Neonatology

• Deborah Campbell, MD, FAAP
  – Children’s Hospital at Montefiore
• Martha Caprio, MD
  – New York University Langone Medical Center
• Adriann Combs, BS, RN
  – Winthrop University Hospital
• Pat Heinrich, RN, MSN
  – NICHQ
• Michael Horgan, MD
  – Albany Medical Center
• Edmund LaGamma, MD
  – Maria Fareri Children’s Hospital at Westchester Medical Center
• Timothy Stevens, MD, MPH
  – Golisano Children’s Hospital at University of Rochester Medical Center
Contact

New York State Perinatal Quality Collaborative
Empire State Plaza
Corning Tower, Room 984
Albany, NY 12237

Ph: 518 / 473-9883
F: 518 / 474-1420
NYSPQC@health.ny.gov
www.nyspqc.org
Thank you for helping babies like me!