

Leadership and Staffing

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Introduction

- **Initiation:** 2010
- **Housed:** New York State Department of Health (NYSDOH)
- **Focus:** Maternal and neonatal health
- **Participation:** NYS birthing hospitals, Community-based Organizations and Federally Qualified Health Centers participate in various QI projects with NYS. 100 birthing hospitals (79%) have participated in one or more NYSPQC projects.
- **Mission and Goals:** The NYSPQC seeks to provide the best and safest care for women and infants in New York State (NYS) by preventing and minimizing harm through the translation of evidence-based practice guidelines to clinical practice. Through multifaceted obstetrical and neonatal interventions, and maternal mortality reviews, the NYSPQC seeks to reduce racial, ethnic and cultural disparities in perinatal outcomes throughout the state.

PQC Structure

- **Leadership:** Executive leadership and project team at the NYSDOH, clinical leadership teams for all focus areas
- **Stakeholders:** Regional Perinatal Center (RPC) and affiliate birthing hospital staff, NYS Office of Children and Family Services, NYS Office of Alcohol and Substance Abuse Services, hospital associations, NICHQ, NYS Partnership for Patients, ACOG, CDC, March of Dimes, AMCHP
- **Communication:** In-person Learning Sessions, monthly Coaching Call webinars, access to project website (www.nyspqc.org), utilization of project e-mail listserv
- **Funding:** CDC PQC grantee and limited state dollars

Active Projects

NYSPQC / March of Dimes Antenatal Corticosteroid Treatment (ACT) Project works to ensure all mothers of infants born between 23 0/7 and 34 0/7 weeks' gestation receive appropriate ACT in order to reduce neonatal morbidity and mortality.

- Conducted in partnership with the March of Dimes Big 5 State Prematurity Collaborative.
- 15 NYS RPC teams began participating in the project in Fall 2015.

NYSPQC Safe Sleep Project focuses on improving safe sleep practices to reduce infant mortality.

- From September 2015 to August 2016, 75 participating teams from all hospital levels reported:
 - 6% increase in the percent of medical records with documentation of safe sleep education;
 - 33% increase in the percent of infants in a safe sleep environment during the birth hospitalization;
 - 14% increase in the percent of caregivers who understand safe sleep; and
 - Nearly all caregivers plan to practice safe sleep.

NYSPQC Enteral Nutrition Improvement Project aims to reduce the percentage of newborns <31 weeks gestational age discharged from a RPC or Level III Neonatal Intensive Care Unit (NICU) below the tenth percentile for growth on Fenton scales for weight and head circumference.

- From January to June 2015, 37 participating RPC and Level III NICUs reported 32% of infants were discharged home below Fenton's 10th percentile for weight with no significant difference between levels.

Completed Projects

NYSPQC Obstetrical Improvement Project reduced scheduled deliveries without a medical indication between 36 0/7 and 38 6/7 weeks gestation.

- Between June 2012 and November 2014, 97 hospital teams from all levels reported: a 94% improvement in the percent of scheduled deliveries without a medical indication between 36 0/7 and 38 6/7 weeks gestation, including a 91% reduction in inductions and a 96% reduction in C-sections without a medical indication between 36 0/7 and 38 6/7 weeks gestation.

NYSPQC Maternal Hemorrhage and Hypertension Initiative advanced improvements in identifying maternal hemorrhage and preeclampsia, eclampsia, and severe hypertension.

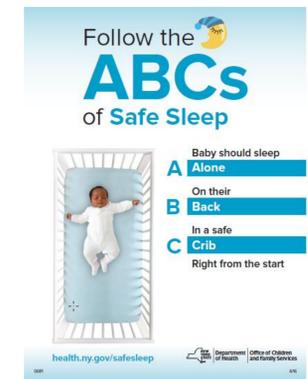
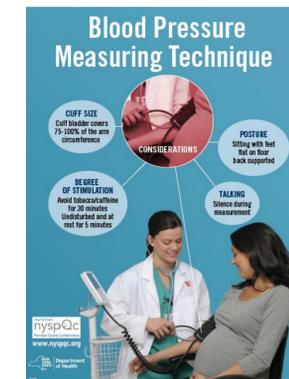
- Between April 2014 and September 2015, 71 participating hospital teams from all levels reported: documentation of maternal hemorrhage risk assessment increased by 171%; and documentation of patient education on the signs and symptoms of post-partum pre-eclampsia increased by 558%.

NYSPQC NICU Central Line Associated Blood Stream Infection (CLABSI) Reduction Project focused on reducing CLABSIs in NICU patients.

- 36 participating hospital teams from RPC and Level III NICUs reported: an improvement of 31% in the overall CLABSI rate between the pre-project period (January 2013 to September 2013) and the comparison period (January to September 2015), with a decrease from 1.58 to 1.09 per thousand central line days for all participating NICUs.

Successes

- Created and strengthened existing partnerships and collaborations across the NYSDOH, state and country
- NYSPQC has been leveraged to ensure success with meeting national Infant Mortality Collaborative Improvement and Innovation Network objectives.
- Worked across NYSDOH Title V programs to improve health outcomes through quality improvement initiatives including NYS Early Hearing Detection and Intervention Collaborative and NYS Early Childhood Caries Collaborative.
- Resources have been created and distributed as a result of all NYSPQC projects, and include: Obstetrical Improvement Project Toolkit for Reducing Scheduled Deliveries; point-of-care tools related to maternal hypertension; infant safe sleep brochure, cling, magnet, crib card, poster and video.



- Worked with national Preeclampsia Foundation to provide all NYS birthing hospitals with a one-year supply of patient education materials regarding the signs and symptoms of preeclampsia.

Challenges

- Funding / sustainability
- Limited staff and resources
- Hospitals want to improve practice, but have competing QI projects from which to choose
- Can be challenging to align data collection / measures with other related projects

Contact Information

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