

Date: July 21, 2022

Medical Dir.: Garrett Colmorgen, M.D.

Location: Zoom Conference Call

MEMBER ATTENDANCE:

- | | | |
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| <input checked="" type="checkbox"/> Garrett Colmorgen, MD | <input checked="" type="checkbox"/> K. Starr Lynch, BSN, RN | <input type="checkbox"/> Julia Paulus, CNM |
| <input checked="" type="checkbox"/> Bridget Buckaloo, MSN, RN | <input type="checkbox"/> Kathleen McCarthy, CNM, MSN | <input checked="" type="checkbox"/> Anne Pedrick |
| <input type="checkbox"/> Christina Bryant | <input type="checkbox"/> Christie Miller, MD | <input type="checkbox"/> Nancy Petit, MD |
| <input type="checkbox"/> Joanna Costa, MD | <input type="checkbox"/> Jennifer Novack, MSN, RNC-OB, APN | <input checked="" type="checkbox"/> Kim Petrella, MSN, RNC-OB |
| <input checked="" type="checkbox"/> Mawuna Gardesey | <input type="checkbox"/> Susan Noyes, RN, MS | <input checked="" type="checkbox"/> Jennifer Pulcinella |
| <input type="checkbox"/> David Hack, MD | <input type="checkbox"/> Rita Nutt | <input checked="" type="checkbox"/> Philip Shlossman, MD |
| <input checked="" type="checkbox"/> Matthew Hoffman, MD | <input checked="" type="checkbox"/> David Paul, MD | <input checked="" type="checkbox"/> Megan Williams, DHA |

FACILITATOR:

- Garrett Colmorgen, MD

OTHER STAFF ATTENDANCE:

- | | |
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| <input checked="" type="checkbox"/> Mary Wise, DSAMH | <input checked="" type="checkbox"/> Lisa Klein, CDRC |
| <input checked="" type="checkbox"/> Kim Hudson, Tidal Health | <input checked="" type="checkbox"/> Ashleigh Hercules, Amerihealth |
| <input checked="" type="checkbox"/> Meena Ramakrishnan, DSAMH | <input checked="" type="checkbox"/> Natalie Anderson, DNP Student Intern |
| <input checked="" type="checkbox"/> Sarah Knavel, Pediatrics, Bayhealth | <input checked="" type="checkbox"/> Ashton Hughes, MPH Student Intern |
| <input checked="" type="checkbox"/> Cheryl Scott, CCHS | |

TOPIC	FINDINGS, CONCLUSIONS & RECOMMENDATIONS	ACTIONS	STATUS
I. Call to order	The meeting was called to order by Dr. Colmorgen at 4:01p.m.	No further action.	Resolved
II. Review and approval of Minutes	The minutes from the June 16, 2022, meeting were reviewed and approved.	No further action.	Resolved
III. Introduction of DPQC Student Interns	The DPQC student interns- Natalie Anderson, DNP Student; Maryann Jones, DNP Student and Ashton Hughes, MPH student, were introduced.	No further action.	Resolved
IV. Recently passed bills	The Sub-Committee for Implicit Bias and Sub-committee for Community Action Committee bills will be signed by the Governor on Monday, July 25. The Sub-Committee for Implicit Bias was assigned to DPQC to establish training around Implicit Bias for hospitals and birthing institutions in Delaware. The training selection to be completed by 2023. The Community Action Team will be a well-balanced group to act on the recommendations of the MMR.	On-going	On-going
V. LOCATe announcement	One more month to complete LOCATe survey; it is due on August 18 th . This will be a survey monkey sent to CDC and a leadership group from obstetrical and pediatric services should complete this survey.	On-going	On-going

VI. Mawuna Minute	Translation of the Patient Aspirin Education flyer are being translated into Spanish and Haitian Creole. The grant renewal paperwork was sent into the CDC as the present grant expires the end of September.	On-going	On-going
VI. Aspirin Audits	Of the 120 charts audited, the goal is to get as many that qualify for ASA therapy are actually put on it. 43% of the patients that qualified were on aspirin at this most recent audit, which is an improvement. For data purposes, understand that there are limitations as to what we can / can't gather as: "Late to PNC", "Allergic to ASA", "Patient on another blood thinner" or "Pt stopped on her own". We will try to find an explanation, if possible, for why a patient may not have been on aspirin in the next audit. OB department heads need to review LDA at every OB meeting. Remind OB providers about the medium risk factors such as AA, obese, first pregnancy and Medicaid. Use the DPQC "Pregnancy Risk Screening for Low Dose Aspirin" as this seems to be where patients are not placed on aspirin. Remind providers that low dose aspirin is a standard of care.	On-going	On-going
VII. Gap Analysis Results of Severe Hypertension in Pregnancy	The Gap Analysis showed a)timeliness of PEC identification, b) treatment in areas outside of Women's Health, c)signage in ED's that includes guidelines for administration dosage, d) support plan for patients, families, and /or staff for ICU admissions and serious complications of severe hypertension, e) adherence to protocols for acute management, f) appropriateness of response to early warning criteria, g) occurrence of post severe maternal morbidity (SMM) event debrief, h) outcomes timeliness of medication administration and i) timeliness of triage and evaluation, all as possibilities for Plan, Do, Study, Act cycles that hospitals could work on independently in their hospital based hypertension teams.	Resolved	Resolved
VIII. Goals with the Severe Hypertension Bundle	The overarching goal is to decrease time to treatment by decreasing the reasons why treatment is delayed. The three D;s: deny, delay and dismiss all need to be evaluated. The time goal from identifying the severe BP (160/100) to treatment should be 60 minutes or less EVERYWHERE in the system.	On-going	On-going
X. Breakout Sessions	PEDS: Nancy Forsyth reported that they reviewed some data from Beebe on LOS and medication use for the last five years; Dr. Paul shared from CCHS, that from the initiation of eat, sleep, console tool, they have decreased morphine initiation, ancillary medication and LOS. Some robust discussion occurred about what impacts LOS such as nicotine exposure or exposure to other drugs, and if that is being addressed or just opioid exposure. Discussion around key driver diagrams and setting goals and interpreting data. OB: Dr. Colmorgen reported they reviewed hypertension AIM bundle and studied the gap analysis data more in depth to look for gaps at individual hospitals. Discussed goal to get patients treated within 60 minutes of being identified and for each hospital to set up a team which would include a physician, a nurse, administrator, and a quality improvement person, to make sure right drugs are readily available and implementing protocols at each facility.	On-going	On-going
XI. "Aftershock"	The trailer from "Aftershock", a documentary on Hulu about Black Maternal Mortality in this nation, was reviewed. Following the untimely and preventable deaths of their partners who died during childbirth after doctors neglected their medical concerns, two men and their	Resolved	Resolved

	families aim to turn their losses into a wake-up call for the medical community and create a space for other grieving loved ones to come together. Bruce McIntyre and Omari Maynard lead the charge, while Dr. Neel Shah hopes to promote change from within the system. It is a very powerful documentary, and all are encouraged to watch it.		
XI. Attendee Updates	<p><u>AWHONN</u>: national conference just occurred in Colorado and many here attended or even presented.</p> <p><u>Bayhealth</u>: it is reported that they hired a new educator who will be starting the end of August and will partner with DPQC and stim lab staffed by Sarah Beebe which will help Bayhealth and their staff.</p> <p><u>Beebe</u>: has hired a new Chief Nursing Officer, Kate Bechtold.</p> <p><u>CCHS</u>: Novavax vaccine is now out and CCHS is working to make it available.</p> <p>Sending thanks to Dr. Chow and ACOG as there were 12 different healthcare and / or women’s health bills passed in legislature last month.</p> <p><u>DSAMH</u>: recently had a training for peer support specialists to provide information on pregnancy and postpartum and how to support those women.</p> <p><u>Amerihealth</u>: Through the pre-eclampsia initiatives, blood pressure cuffs were delivered to labor and delivery floors to the care coordinators for distribution.</p> <p><u>Safe Sleep</u>: still averaging one infant unsafe sleep death per month. The CDRC is now the Maternal and Child Death Review Commission.</p> <p><u>Nanticoke</u>: Have 24/7 OB coverage which started July 5.</p>	On-going	On-going
XII. Adjournment	There being no further items, the meeting adjourned at 5:48pm.	No further action.	Resolved.

Minutes prepared by JoEllen Kimmey, DPH

Upcoming Meetings:

- August 18, 2022, 4:00pm-6:00pm**
- September 15, 2022, 4:00pm-6:00pm**
- October 20, 2022, 4:00pm-6:00pm**
- November 17, 2022, 4:00pm-6:00pm**
- December 15, 2022, 4:00pm-6:00pm**