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| **Date:** November 16, 2023 |  |
| **Medical Dir.:** Garrett Colmorgen, M.D. |  |
| **Location:** Zoom Conference Call  **Monthly OB TEAM Membership Meeting** |  |

**MEMBER ATTENDANCE:**

🗹 Garrett Colmorgen, MD  Kim Liprie  Julia Paulus, CNM

🗹 Bridget Buckaloo, MSN, RN 🗹 K. Starr Lynch, BSN, RN 🗹 Nancy Petit, MD

 Christina Bryant  Kathleen McCarthy, CNM, MSN 🗹 Jennifer Pulcinella

 Joanna Costa, MD 🗹 Jennifer Novack, MSN, RNC-OB, APN 🗹 Philip Shlossman, MD

🗹 Mawuna Gardesey  Rita Nutt  Megan Williams, DHA

 David Hack, MD David Paul, MD

🗹 Matthew Hoffman, MD

**FACILITATOR:**

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| 🗹 Garrett Colmorgen, MD |  |  |

**OTHER STAFF ATTENDANCE:**

🗹 Gina Scott

🗹 Maria Webster

🗹 Vik Vashubhakta

🗹 Dara Hall

🗹 Kim York

🗹 Deb Allen

🗹 Margaret Chou

🗹 Lelsey Tepner

🗹 Cheryl Scott

🗹 Kim Hudson

🗹 Robin Revel

🗹 Diane Hitchens

🗹 Pam Layman

🗹 Megan Coalson

🗹 Susan Todero

🗹 Liz Zehner

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| **TOPIC** | **FINDINGS, CONCLUSIONS & RECOMMENDATIONS** | **ACTIONS** | **STATUS** |
| I. Call to order | The meeting was called to order by Dr. Colmorgen at 4:02pm. | No further action. | Resolved |
| II. Review and approval of Minutes | The minutes from the October 26, 2023, meeting were reviewed and approved. | No further action. | Resolved |
| III. Example of PQC Data Collection Sheet | The data sheet from Alaska was reviewed as it is a good example of a data collection sheet for SMM rates and AIM Bundles that could be implemented statewide. There is money available for each hospital to pay nurse or other person to work overtime to collect the data, please contact Mawuna Gardesey if needed. The way the data should be collected is by ICD-10 codes. This data sheet from Alaska will be edited to fit Delaware’s needs and distributed. Each hospital shared any challenges that they may have in collecting this data. | On-going | On-going |
| IV. Low Dose ASA Data Presentation | Vik Vishnubkta shared the collective data on low dose aspirin administration. Each hospital received their own data in a separate email from Vik. Data from Q2 2021 (April, May, and June 2021) to Q23 2023 (July, August, and September 2023) represented the percentage of “correct” decision reported based upon each birthing hospitals submitted 20 chart that were assessed on 16 factors segmented as high risk or low risk. The high-risk factors were given a score of two points each and the medium risk factors were given a score of one point each. A score of two or more indicates that the chart qualifies for low dose ASA administration. The goal of 80%, although not yet achieved, data is trending towards meeting that goal through successive quarters. This data will be developed into a poster for presentation at the national conference in Denver in December. | On-going | On-going |
| V. Implicit Bias Query | The legislation that established the DPQC requires that every hospital is performing implicit bias training. A committee to follow through on this will be established. Every hospital is doing this but how is being collected and is it effective. A poll of how individual institutions are doing regarding implicit bias occurred.  CCHS started doing online courses for the entire staff and has offered this program to other hospitals.  Bayhealth has monthly 15-minute item to read and answer questions on and they recently hired a Diversity specialist who may have input.  Beebe: hired someone for Diversity and Cultural sensitivity training and staff have also completed webinars but nothing specific to implicit bias.  Tidal Health: has an internet learning class and then questions to answer.  SF: has system-wide program through Healthstream and mandated by Trinity Health. | On-going | On-going |
| VI. Questions/ Discussion | \*Dr. Schlossman shared that it has come to his attention that some hospitals are using helicopters to transport stable patients due to staffing issues in hospitals. Discussion that this is an expensive service for a stable patient that may not be covered by insurance, but it can be challenging in Southern Delaware to get an ambulance to transport, sometimes taking up to twelve hours. The issue may be having adequate ambulance services and having medics available instead of BLS. This will be on agenda for next meeting.  \*A bill was passed that goes into effect January 1 for doula services to be covered by Medicaid and possibly other insurance in the future. There is also a possibility of hospitals supplying doulas.  \*A webinar on the Latest Developments in Maternal Mental Health for Obstetric Providers is being offered from 1-2pm on 11/30. You can register via this link: https://secure.everyaction.com/D3fRUBylXkmLsejrrVHqIA2?emci=985e87b1-1284-ee11-8925-00224832e811&emdi=4b43b82e-9984-ee11-8925-00224832e811&ceid=10097888 | On-going | On-going |
| VII. Adjournment | There being no further items, the meeting adjourned at 5:05pm. | No further action | Resolved |

*Minutes prepared by JoEllen Kimmey, DPH*

**Upcoming Meetings:**

**DPQC Advisory Board Meeting: December 11, 2023, @ 3-5pm Dover Hilton Garden Inn**

**DPQC OB Team: Thursday, December 21, 2023 @ ZOOM**

**DPQC PEDS Team: Monday, November 27, 2023, 3-4pm @ ZOOM**