

OHIP Work Group Quarterly Report

(July 1, 2011-September 30, 2011)

Work Group Name: Children's Health

Work Group Goal: Improve Infant Health Outcomes (Lead: Suzanna Dooley)

Result Objective	Target Completion Date	Actual Completion Date	Accountability (Lead Person(s) Responsible)	Measure	Progress
1. Reduce sleep-related deaths	2012	Same	Lead: Julie Dillard	Measure: The percent of infants who are put to sleep on their backs 2008: 64% 2008 PRAMS Data (Baseline) 2009: 64.9% 2009 PRAMS Data	<ul style="list-style-type: none"> • Completed (with VI Marketing and Branding) Safe Sleep PSA for radio and television in English and Spanish. • Increased workgroup membership through collaboration with Tulsa FIMR and members of their safe sleep response group.
2. Reduce the proportion of unintended pregnancy from 48.4% to 47.2%	2012	Same	Lead: Jill Nobles-Botkin	Measure: The percent of women who have an unintended pregnancy resulting in a live birth 2005: 48.8% PRAMS Data (Baseline)* 2008: 50.3% PRAMS Data* 2009: 47.7% PRAMS Data* *Oklahoma births resulting in a live birth were unintended at the time of pregnancy.	<ul style="list-style-type: none"> • Received approval for Medicaid State Plan Amendment (SPA) July 1; effective date August 31. Added Implanon as an additional option for long acting contraceptive methods. • Finalizing steps to add Implanon to the OSDH formulary for all family planning clients. • Submitted competitive Title X Family Planning grant for \$4.6 million to continue provision of family planning services.

<p>3. Increase the number of women receiving quality (American College of Obstetrics and Gynecology) ACOG preconception care from 13.5% to 16% (from MCH plan) by 2012</p>	<p>2012</p>	<p>Same</p>	<p>Lead: Jill Nobles-Botkin</p>	<p>Measure:</p> <p>The percent of women receiving preconception quality care.</p> <p>Note: obtaining new baseline from PRAMS for this measure as previous source no longer available. Projected date for availability of benchmark data to monitor this measure is April 2012</p>	<ul style="list-style-type: none"> • Implemented pilot of Women’s Health Assessment tool in 9 county health dept. clinics (Blaine, Canadian, Custer, Creek, Kingfisher, Lincoln, Logan, Comanche, and Tulsa), one Healthy Start program in Tulsa and the Oklahoma City Indian Health Clinic. Children First Nurses, OU Physicians of Edmond, and one Federally Qualified Health Center will start piloting the tool in October. • Printed 100 copies of the adolescent reproductive life plan tool to obtain input from adolescents through standard questions and convenience sampling. • Trained OSDH family planning providers on Smoking & Pregnancy. • Presented on multi-state webinar (OSDH (MCH) and OHCA) on Title V partnering with the state Medicaid agency to promote preconception/interconception health activities. • Initiated steps to begin focused activities on strategies to better identify and assure appropriate care of females with diabetes before and between pregnancies (MCH, WIC, Immunization, OHCA, OHA, Chronic Disease, HCI).
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<p>4. Improve identification and early treatment of maternal infections</p>	<p>2012</p>		<p>Lead: Jill Nobles-Botkin</p>	<p>Measure:</p> <p>The percent of women treated for Gonorrhea or Chlamydia during pregnancy</p> <p>2008: 92.5% 2008 STD MIS Data (Baseline)* 2009: 100% 2009 STE MIS Data*</p> <p>*All pregnant women diagnosed with Gonorrhea or Chlamydia.</p>	<ul style="list-style-type: none"> • Provided presentation (HIV/STD staff) regarding activities related to maternal infections to the Preconception/Interconception Work Group. • Provided presentation (Oklahoma County Fetal and Infant Mortality Review staff) to the Preconception/Interconception Work Group on relation of maternal infections to fetal deaths identified through case reviews . • Continued to follow-up on all positive Chlamydia and gonorrhea tests on pregnant women to insure they were treated appropriately.
<p>5. Increase the number of mothers receiving (ACOG standards) first trimester prenatal care from 73.9% to 85.7%</p>	<p>2012</p>		<p>Lead: Jill Nobles-Botkin</p>	<p>Measure:</p> <p>The percent of women receiving first trimester prenatal care</p> <p>2005: 75.5% 2005 Oklahoma Vital Records Data (Baseline)* 2008: 76.5% 2008 Oklahoma Vital Records*</p> <p>*Oklahoma births to women initiating prenatal care during the first trimester of pregnancy.</p>	<ul style="list-style-type: none"> • Provided preconception health information at Community Baby Shower hosted by Office of Minority Health. • Continued to monitor effectiveness of online enrollment in getting women and families signed up for SoonerCare (Medicaid) and easily facilitate access into prenatal care. • Continued work of the MCH, Office of Perinatal Quality Improvement, Oklahoma Hospital Association, and OSDH Vital Records on development of a quality improvement project to improve documentation on the birth certificate by hospital staff related to entry into prenatal care and number of visits; will pilot tools/process in October with target date to begin in hospitals in November.

Specific activities towards objectives completed this quarter: Meetings of the “Preparing for a Lifetime” state group occurred in July and September. The state group meetings have been moved to an every other month schedule (odd months). Workgroups continue to meet routinely to accomplish activities outlined on work plans. The infant death module on OK2Share is complete and posted for public use. A FY2013 OSDH Legislative Budget Request focused on reduction of infant mortality was drafted for consideration/approval by Senior Leadership. The Oklahoma Health Care Authority has implemented this past year, based on their involvement with Preparing for a Lifetime, a special project in their Care Management section focused on the 10 rural counties in Oklahoma with the highest infant mortality rates. Using materials developed for Preparing for a Lifetime, the project provides routine phone contact throughout the pregnancy and up to age 1 year of the infant to assure receipt of early and routine prenatal care, routine infant care, and provide education on health issues; this project impacts all the OHIP measures.

Other items to share:

Chairs: Dr. Mary Ann McCaffree

Infant Mortality Work Group Leads:

Nancy Bacon & Adrianna Halstead – Breastfeeding Workgroup
Barbara O’Brien & Belinda Rogers – Prematurity Workgroup
Julie Dillard – Safe Sleep Workgroup
Julie Dillard & Alesha Lilly – Postpartum Depression Workgroup
Pamela Williams – Communications Workgroup
Lisa Rhoades– Infant Injury Prevention Workgroup
Jill Nobles-Botkin – Preconception/Interconception Workgroup
Paul Patrick – Data Workgroup
Jennifer Smith– Tobacco Workgroup

Team Members:

Dan Arthrell
Brian Crain, Senator
Suzanna Dooley
Gerri Ellison
Jan Figart
Terrie Fritz
Craig Jones
Dr. Kent King
Lindsay Lemons
Dr. Regina Lewis
Connie Lowe
Dr. Lynn Mitchell
Susan Paddock, Senator
Phillip Parker
Dr. Edd Rhoades
Ann Salazar

Jackie Shipp
Dr. Dana Stone
Frank Stone