

Hawaii Maternal and Infant Health Collaborative 2016 Priorities

How the strategies were developed: In January the Hawaii Maternal and Infant Health Collaborative (HMIHC) held an Annual Meeting where members were briefed on the Collaborative's accomplishments in 2015 and asked to brainstorm priorities for 2016. There were three breakout sessions that contributed to those priorities; strategies to increase our intended pregnancy rate, strategies to improve birth outcomes through appropriate use of 17P and strategies to improve our rate of breastfeeding exclusivity for infants. The Core Team members met in February and incorporated those suggestions into the current work of the Collaborative to develop action steps for their 2016 work. The Collaborative works in small ad hoc project teams. As always, to assist in our work please contact one of the team leaders listed for that work group.

Overall priorities applicable to all work groups

- Identify and address disparities
- Use evidence based strategies
- Have clearly identified metrics and data tracking capacity

I. **Preconception and Inter conception**-Candice Radner Calhoun and Sharon Thomas

Goal: To reduce unintended pregnancies and improve birth spacing

**Metrics: Births spaced 18 months from delivery to next conception
Intended pregnancy rate**

- a. **2016 Objectives long acting reversible contraceptive (LARC)**- Candice Radner Calhoun, Sharon Thomas, Bliss Kaneshiro

Work was started in 2015 on the objective of increasing access to LARC. In 2015 HMIHC clarified Medquest coverage, developed and distributed a chart of coverage and coding for clinicians, wrote and distributed a white paper as to the benefits and safety of LARC, and presented the information at the annual ACOG Hawaii Section conference. In 2016 HMIHC will continue this work through the following action steps:

- Design and conduct public and provider education
- Encourage hospital in-patient pharmacy stocking
- Clarify FQHC reimbursement
- Finish private health plan reimbursement chart, update chart
- Determine metrics and data tracking

Candice.calhoun@doh.hawaii.gov

Sthomas@medicaid.dhs.state.hi.us

- b. **2016 Objectives One Key Question® (OKQ)**- JoAnn Farnsworth and Betty Wood

One Key Question ® was identified by HMIHC as an evidence based strategy with the potential to reduce unintended pregnancies in Hawaii. In January 2016 we hosted the founder and trainer Michele Stranger Hunter to brief the Collaborative membership on OKQ objectives and hosted a training of potential clinical sites to pilot OKQ here in Hawaii. In 2016 we will continue our work through the following action steps:

- Establish HMIHC OKQ Team
- Develop implementation plan for OKQ

- Support pilot site implementation
- Conduct contraceptive training for WIC and home visitation staff
- Conduct OKQ train the trainer session in May or June
 - Including WIC and home visitation staff
- Determine OKQ metrics and tracking

jfarnsworth@hawaii.rr.com

Betty.wood@doh.hawaii.gov

II. Pregnancy and Delivery-Don Hayes and Lin Joseph

Goal: To decrease preterm births and ensure infants are born healthy

Metrics: Increase full term birth rate

Decrease the number of infants born substance exposed

a. SBIRT Implementation Team-Betty Wood, JoAnn Farnsworth, Leolinda Parlin. Staffing support provided by Hilopa'a

Screening, brief intervention and referral to treatment for universal prenatal substance use was a major focus of the Collaborative's work in 2015. With the help of the Department of Health, Hawaii Community Foundation and the Health Care Transformation State Innovation Team we were able to prioritize the prenatal population, secure key leadership support and grant funding to begin system implementation. Hilopa'a (the grant recipient) will augment the work of the Collaborative in system design and implementation. In 2016 we will continue our work through the following action steps:

- HMIHC to provide strategic oversight, partnership development and coordination of effort
 - Payment reform
 - Health Plan Relations
 - Development of Guidelines
 - Promote Guidelines
 - Relations with Current and Potential funders
- Establish and staff the SBIRT Grant Advisory Committee
 - Monitor grant deliverables
 - Meet quarterly with contractors to review progress and approve payment

jfarnsworth@hawaii.rr.com

Betty.wood@doh.hawaii.gov

b. 2016 Objectives 17 P-Don Hayes and Lin Joseph

Increasing appropriate utilization of 17P (Alpha-hydroxyprogesterone caproate) in pregnant women with a history of preterm birth has been a key strategy of HMIHC to decrease preterm births. This year the team conducted a provider survey to help better understand the barriers to utilization. In 2016 the team will begin to address those barriers through:

- Targeted patient education and outreach
 - NICU families
 - Home visiting families
- Increase Access
 - Clarification of insurance coverage

Don.hayes@doh.hawaii.gov

hjoseph@marchofdimes.com

c. Other areas discussed as potential 2016 focus areas

- Oral health-deferred
- Prenatal care access-deferred

III. **2016 Infant Health and Safety Objectives**-Keiko Nitta and Lisa Kimura

Goal: To reduce infant mortality

Metrics: Preventable infant deaths

Infant back to sleep position

Exclusive breastfeeding at 6 months

In 2015 the infant health and safety team focused on coordination of the safe sleep effort in Hawaii. This coming year the team will continue to support Safe Sleep Hawaii and expand their focus to improving breastfeeding exclusivity and tackling some of the challenges of substance exposed infants. In 2016 the team will;

- Develop metrics
- Continue coordination with Safe Sleep Hawaii
- Study current practices and recommend action regarding substance exposed infants and child welfare, child development screening and intervention
- Promote breastfeeding exclusivity
 - Promote lactation counseling and clarify insurance coverage
 - Clarify and educate public and providers as to ACA benefit coverage
 - Provide consumer education around hormonal contraceptive use and breastfeeding and birth spacing
 - Review hospital discharge procedures
 - Explore/encourage Baby Friendly designation for hospitals

lisak@hmhb-hawaii.org

Keiko.nitta@doh.hawaii.gov

IV. **2016 Advocacy Objectives**-Autumn Broady & Robert Pantell

In 2015 the Collaborative implemented an advocacy work group to champion both policy and legislative efforts that would contribute to the outcomes of the Collaborative. The focus in 2015 and moving into the legislative session of 2016 has been the reestablishment of the child death review system and initiation of maternal mortality review (CDR/MMR). Both reviews are aimed at reducing mortality and improving systems and practice. Work for 2016 will be to;

- Advocate for passage of CDR/MMR bill and appropriation
- Monitor implementation of CDR/MMR
- Determine how best to apply findings to improve practice
- Support passage of Paid Family Leave
- Family violence prevention

abroady@hawaii.edu

robert.pantell@kapiolani.org

At the February meeting Core Team members reaffirmed their commitment to the Collaborative being a public/ private joint effort. The following members will sit on the Core Team in 2016. The Team also identified Hawaii Chapter of the American Academy of Pediatrics, Department of Health Early Childhood Comprehensive Systems Coordinator and Healthcare Association of Hawaii as being important Core Team members to recruit.

Private	Public
American College of Obstetricians and Gynecologists-Cindy Goto	DOH/MCHB Branch Chief
March Of Dimes-Lin Joseph	MCHB Women's Health- Candice Calhoun
Healthy Mothers Healthy Babies-Lisa Kimura	DOH/Planning-Betty Wood
UH-OBGYN-Autumn Broady	DHS/MedQUEST-Sharon Thomas
Hilopa'a-Leolinda Parlin	DOH Epidemiologist-Don Hayes
Momi Kamau	DOH/FHSD/WIC-Linda Chock
Recommended Additions	Recommended Additions
American Academy of Pediatrics	DOH/ECCS
Healthcare Association of Hawaii	

Facilitation provided by; JoAnn Farnsworth