

West Virginia Perinatal Partnership

Committee to Improve the Statewide Perinatal System

*A project of the West Virginia Higher Education Policy Commission,
Office of the Vice Chancellor for Health Sciences,
managed by the West Virginia Community Voices, Inc.*



Partnership Workplan 2011-12

Scope of Work

The West Virginia Perinatal Partnership is a model project to improve birth outcomes through a collaboration of health sciences centers, state agencies, professional associations, private medical providers, and civic groups. The project is managed by West Virginia Community Voices, Inc., under the direction of the project Director, Nancy J. Tolliver.

Based on on-going data analysis and other studies, and key informant surveys, the Partnership identifies problems associated with poor birth outcomes in West Virginia. Each year the Central Advisory Council reviews findings of major committee work and recommends an action plan called the Partnership Workplan. The 2011-12 workplan addresses the following key issues.

1. Established a Statewide Perinatal System

- Promote and educate on guidelines for obstetrical and neonatal practices as accepted by the Central Advisory Council.
- Work to educate providers the uniform prenatal risk assessment tool called for in West Virginia legislation since 2009.
- Work with STEMS to implement the recommendations to improve the system for perinatal transport and plans to establish a “One Call” system and Bed Board for hospitals.
- Continue work with CAMC, USDA, and the Connect to Care Project, to implement telemedicine between community perinatal providers and specialists at a tertiary hospital. Partner with CAMC Research Institute and the WV Telehealth Alliance to identify the needs of maternity hospitals for broadband width and equipment.
- Measure the adequacy of Neonatal Intensive Care Unit (NICU) beds in WV since the increase in beds in 2009.
- Schedule and conduct site visits for 4 of 20 hospitals that completed the Hospital Self Assessment Initiative, to engage birthing hospitals in meeting national guidelines for personnel, training, and equipment.
- Work to establish the WV Perinatal Partnership within HEPC.
- Identify, recruit, and manage the Central Advisory Council Membership.
- Identify, recruit, and manage the workplan of the Partnership through Steering Committee activities and committee members.
- Plan and operationalize the annual Perinatal Summit – 2011.

2. Identify and Address Maternity Care Provider Shortage Areas

- Study maternity care provider shortage areas within WV by mapping locations of current providers in WV, and mapping where residents in counties without providers travel for their births.
- Encourage the development of one additional maternity service within maternity care shortage areas.
- Identify financial aid programs that are available to nurses interested in becoming certified nurse-midwives (CNMs).
- Work with WV Wesleyan College and with Marshall University School of Nursing to encourage admissions to the joint MSN/CNM degree programs through partnership with Shenandoah University in Virginia.
- Collaborate with Shenandoah University Midwifery Program in development of an “emergency maternity education program” for clinician’s to train emergency medical personnel and other community members. Offer first training program by early spring 2012.

3. Address the Lack of Oral Health Care during Pregnancy

- Partnered with WV DHHR to implement programs and policies to improve oral health outcomes for pregnant women and their infants.

4. Identify Costly Medical Procedures Associated With Poor Birth Outcomes

- Continue to monitor and report to hospitals their progress toward reducing labor induction prior to 39 weeks gestation and among first-time mothers, both in cases with and without preexisting medical complications.
- Design and manage The First Baby Initiative in collaboration with the WV Health Care Authority and the March of Dimes, and participating WV hospitals. This is an Obstetrical Collaborative Quality Initiative to reduce the frequency of C-section among first-time mothers.

5. Develop an Approach to Identify and Treat Drug Use During Pregnancy

- Promote the issued Guidelines to Identify Drug/Alcohol Use during Pregnancy and Refer for Treatment and developed an educational program for medical and nursing providers.
- Promote the Tool Kit to identify addicted newborns. Develop patient education materials related to effects of substance use during pregnancy.
- Design and manage the project funded by WVDHHR Bureau of Behavior Health and Health Facilities, the Office of Maternal, Child, and Family Health, and Benedum Foundation, to identify, reach and treat addicted pregnant and postpartum women.
- Serve on the Statewide Control Substance Abuse Panel.

6. Promote and Support Breastfeeding

- **Support efforts of WV Breastfeeding Alliance to improve maternity care practices to increase breastfeeding support and education.**
- **Promote the breastfeeding friendly worksite recognition program of WVBA.**
- Support the work of the WV Breastfeeding Alliance to promote partnerships that help medical/nursing professionals stay current on lactation education.

8. Report the Expanded Testing of Newborns Finding

- Report the testing in newborns to cover all 29 potential metabolic conditions. Legislation passed in 2007 and testing began in January of 2009.

9. Report and review the findings of the WV Maternal Mortality Review Team

- Keep Central Advisory Council members advised of the findings of maternal mortality review.

10. Study the incidence of pregnancy among WV teens and young adults and developed policy recommendations to reduce the incidence.

- Review the findings of the updated study of unplanned and teen pregnancy in WV and make recommendations to improve the situation.
- Provide testimony to the State legislature as requested regarding the coverage of dependants for contraception and for pregnancy, including coverage within PEIA and CHIP.
- Conduct an evaluation of the outcomes of the work on project funded by the National Campaign to Prevent Teen and Unplanned Pregnancy to space pregnancies by 24 months. Evaluate the success of working with WV Council on Community and Technical Colleges and Southern and Parkersburg campuses to reduce dropout rates connected with unplanned pregnancy.
- Work with the WV Office of Medical Services to develop and submit a State Plan Amendment to increase coverage of family planning services and supplies.

11. Collaborate with the State Tobacco Control project and Right from the Start

- Support programs that curb the use of tobacco during pregnancy by pregnant women and others in the home.
- Support efforts of the Tobacco-Free Pregnancy Advisory group to educate providers and women of childbearing age and their families about the importance of eliminating tobacco use during and after pregnancy.

12. Provide WV Perinatal Outreach Education

- Bring up to date educational opportunities to perinatal providers and share knowledge and expertise across the State. American College of Obstetricians and Gynecologist (ACOG) and the American Association of Pediatrics (AAP) standards emphasize the importance of outreach education from tertiary care centers. Provide educational opportunities on the following topics.
 - Essentials in labor support for maternity nurses
 - Advanced Electronic Fetal Monitoring
 - Common topics in perinatal care
 - Maternal and Infant transports
 - Lactation
 - Illicit substance abuse in pregnancy
 - Our Babies Safe and Sound information
 - Vaginal Birth After C-section
 - Being Born at the Right Place

- Identify skilled WV professionals to offer educational topics and assist them in obtaining CEU, MEU designations.
- Prepare materials to inform perinatal professionals across the State of the availability of CEU educational opportunities.
- Prepare a web page of information about CEU opportunities schedule and topics offered.
- Schedule and managed the offering of CEU educational opportunities in at 15 community sites across the State.
- Prepare, collected, and reported on evaluations of the CEU educational offerings.

13. Create a committee to study the incidence of congenital anomalies among infants born to women living in Mountain top Removal areas.

14. Create a study of existing research demonstrating any relationship between autism and the use of drugs/alcohol during pregnancy.