

Oklahoma Spotlight on Excellence in Perinatal Care

The Oklahoma Perinatal Quality Improvement Collaborative (OPQIC) seeks to recognize hospitals that are creating a culture of excellence in perinatal care for Oklahoma mothers and newborns. Oklahoma birthing hospitals meeting certain criteria will be recognized as "Spotlight Hospitals" at the 5th annual OPQIC summit on November 16, 2018. The criteria are based on participation in and outcomes of quality improvement initiatives that are available to all birthing hospitals. They change on a yearly basis as focus areas for improvements evolve. As activities progress, criteria will become more stringent and will be based on process, structure and outcomes measures, if available. Spotlight Hospitals will be recognized at the Summit and on the OPQIC website. Contact info@opqic.org with questions.

2018 Spotlight Hospital Criteria

Criteria will be evaluated as of **October 20, 2018**.

- Hospital Compare
 - 1) PC-01 (Early Elective Delivery) rate on [Hospital Compare](#) at or below the national average
- Every Mother Counts/Alliance for Innovation in Maternal Health ([AIM](#))
 - 1) Process measures data complete through Q2 2018 (AIM Data Portal)
 - 2) Hemorrhage **and** Hypertension protocol in place ([AIM Data Portal](#))
 - 3) Q2 2018 QBL rate of at least 80% for all births **or** timely treatment of at least 80% of women presenting with severe hypertension (AIM Data Portal)
- Baby Friendly designation or in \geq Development Stage for < 1 year in the [Becoming Baby-Friendly in Oklahoma \(BBFOK\)](#) project **OR** 2015 mPINC score \geq the national average. Contact rebecca-mannel@ouhsc.edu or petra-colindres@ouhsc.edu for more information.
- Newborn Screening
 - < 5% average rate of newborn screening specimens submitted in Q3 2018 are labeled as "unsatisfactory". See the [Every Baby Counts QI Program](#) or contact LisaRC@health.ok.gov for more information.
- Full participation in OSDH sleep sack program
 - (1) Hospital agreement for initiative signed by both hospital representative and OSDH MCH Director submitted to OSDH.
 - (2) Receiving sleep sacks from OSDH.
 - (3) Educate current and new staff, parents and families as outlined in the agreement.
 - (4) Model infant safe sleep practices and environments throughout hospital.
- Full participation in Period of PURPLE[®] Crying program
 - (1) Hospital agreement for initiative signed by both hospital representative and OSDH MCH Director submitted to OSDH.
 - (2) Maintain the fidelity of the program as outlined in the OSDH agreement
 - (3) Educate parents of all newborns using the DVDs and examples provided by NCSBS program
 - (4) Educate current staff and new staff using the NCSBS online training web site