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 6th annual OPQIC summit on September 20, 2019. 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.

2019 Spotlight Hospital Criteria

Criteria will be evaluated as of August 31, 2019.

- 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 2019 (AIM Data Portal)
  2) Hemorrhage and Hypertension protocol in place (AIM Data Portal)
  3) Q2 2019 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)
  4) Participating in AWHONN POST-BIRTH Warning Signs initiative and used all allocated seats for the online education program (contact info@opqic.org if your hospital would like to participate)
  5) Committed to implement the AIM Opioid Use Disorder in Pregnancy/Neonatal Abstinence Syndrome Bundle (Commitment forms available from OPQI in summer 2019)

- Baby Friendly designation or in ≥ Development Stage for < 1 year in the Becoming Baby-Friendly in Oklahoma (BBFOK) project OR most recent mPINC score ≥ the national average. Contact rebecca-mannel@ouhsc.edu or petra-colindres@ouhsc.edu for more information.

- Newborn Screening
  ≤ 3% average rate of newborn screening specimens submitted in Q2 2019 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) Current hospital agreement for initiative signed by both hospital and OSDH MCH Director
  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
  5) Certified (or in process of certification) as Cribs for Kids Safe Sleep 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