

Perinatal News & Events

Cincinnati Children's Perinatal Outreach Program/Region I



CCPOP Contact Information

- Kathy Hill, M.Ed.
Program Administrator
(513) 636-8225
Kathy.Hill@cchmc.org
- Vivek Narendran, MD
Medical Director
(513) 803-0961
Vivek.Narendran@cchmc.org
- Danielle Bolton
Administrative Assistant
(513) 803-0957
Danielle.Bolton@cchmc.org

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Ohio's Help Me Grow Home Visiting Program

Help Me Grow is most notably known as Ohio's early intervention (EI) system for children from birth to three years old. EI includes services and supports to infants and toddlers, ages 0-2, who have a developmental delay or disability, and their families. Kentucky's EI program is known as **First Steps**. However, many do not know about the Ohio Help Me Grow Home Visiting program, a very distinct program from that of early intervention services provided under Help Me Grow.

Help Me Grow's Home Visiting program provides **expectant or new parents** with health and child development information. The goal of the program is to give expectant parents the information and support they need to be prepared for the birth of their child and provide ongoing support for families to understand and maximize this period of their child's development to age three.

The Help Me Grow – Home Visiting model establishes four **program goals**:

1. Increase Healthy Pregnancies
2. Improve Parenting Confidence and Competence
3. Increase Family Connectedness to Community and Social Support
4. Improve Child Health, Development, and Readiness

Four **program components** are used to address key outcomes and indicators identified in research literature as important to accomplishing program goals:

- Evidence based parenting and education curriculum to teach/inform
- Screenings, status checks and assessments to identify developmental/ health concerns
- Need-based referral and resource linkage to meet a variety of needs
- Transition at age 3 to child development enhancing program to continue the learning

Who is Eligible for Help Me Grow Home Visiting?

- First-time pregnant women
- A first-time parent with a child less than 6 months of age

(The above groups must meet Help Me Grow income guidelines of 200% or less than the federal poverty level.)

- A child under age three referred with a substantiated case of abuse or neglect or working with the JFS alternative response unit
- A child under age three with at least one parent in active military duty

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Help Me Grow *continued from page 1*

Help Me Grow has programs in every county in Ohio. **Hamilton County** Help Me Grow is administered by the Hamilton County Family and Children First Council with Help Me Grow services provided by:

- Every Child Succeeds, Help Me Grow providers:
 - Beechacres Parenting Center
 - The Children's Home of Cincinnati
 - Cincinnati-Hamilton County Community Action Agency
 - Lifepoint Solutions
 - Santa Maria Community Services
 - Services to Area Youth
 - YWCA
- Healthy Moms and Babes
- Lighthouse Youth Services
- Hamilton County Developmental Disabilities Services (provides developmental evaluations for child assessments)

Throughout the state of Ohio, local Help Me Grow programs are always seeking ways to effectively find and **reach out to children and families who might benefit from home visiting services**. Although Help Me Grow finds children through many different areas of public outreach including announcements, flyers and posters, we need help from other referral sources in the community to be successful. Staff in social service agencies, hospitals, physicians' offices, health clinics and child care centers can help us inform parents of services or make a referral on behalf of the child/family.

If you are interested in receiving **additional information** about the Help Me Grow Home Visiting program please contact Julie Brem, Hamilton County Help Me Grow Project Director at julie.brem@hamilton-co.org

To make a referral to either the Help Me Grow Home Visiting program or Help Me Grow Early Intervention services please call:

Hamilton County Help Me Grow: 513-281-GROW (4769)
Butler County Help Me Grow: 513-785-6850
Clermont County Help Me Grow: 513-732-5030
Warren County Help Me Grow: 513-695-4769



For more locations and information go to:
www.ohiohelpmegrow.org

Julie Brem, Project Director

Fetal Infant Mortality Review (FIMR)

The Cincinnati Hamilton County Fetal and Infant Mortality Review released the 2010 Annual Report. FIMR reviewed 24 infant and 12 fetal deaths in 2010. Twenty-one of the review cases included an interview with the baby's mother or both parents.

Recommendations for action were categorized into 7 key areas. They include: 1) Improving data collection and information sharing; 2) Enhancing efforts to address women's reproductive health challenges; 3) Expanding preterm birth information to clients; 4) Supporting efforts to enhance patient-provider communication, including the provision of trained interpreters for all patients of Limited English Proficiency (LEP); 5) Expanding knowledge about and services for clients experiencing a stillbirth; 6) Improving systems of communication and billing which affect parents after a perinatal loss; and 7) Expanding systemic efforts to increase safe sleep practices to reduce sudden unexpected infant deaths.

The full report can be found at: http://www.cincinnati-oh.gov/health/downloads/health_pdf42850.pdf

Anne Packham, FIMR Coordinator

FIMR Recommendation

In July 2011, the Cincinnati Hamilton County Fetal and Infant Mortality Review (FIMR) issued a recommendation calling for the expansion of efforts to immunize all adults who have contact with infants against Pertussis (Whooping Cough). This recommendation resulted from a review of a 2010 case involving an infant whose death was likely due to Pertussis. The CDC Advisory Committee on Immunization Practices (ACIP) is encouraging doctors to provide the Tdap vaccine to new mothers during the second or third trimester of pregnancy in order to confer potential immunity to the newborn before he or she is immunized. If prenatal Tdap does not occur, hospitals are encouraged to offer the vaccination to mothers before leaving the hospital after delivery of a baby. All other family members and caregivers for the infant are encouraged to obtain a Tdap vaccination through their primary care provider, one of the County Health Department sites, or at a local pharmacy.

http://www.fimrweb.com/uploads/6/5/8/5/6585999/pertussis_recommendation_from_fimr_final_july_19_2011

StarShine Hospice & Palliative Care

For most parents, the months before their baby's delivery are spent in anticipation of a joyous birth and a happily expanded family. However, for some families this is not to be, as they learn their baby has an uncertain prognosis and may not survive. The grief and despair can seem insurmountable for parents whose child may not live to have the life they imagined for them. Planning and dreams of the future must stop, to be replaced by striving to make sense of their new reality.

Families do not have to walk this path alone. StarShine Hospice and Palliative Care offers a full spectrum of services to bring meaning to parents throughout their pregnancy, birth, and in some cases, the death of their child. The Perinatal Program works with parents, families, and caregivers as they plan for the uncertain outcome of their child's birth, and for the impact this event will have on their family. In this circumstance, care for the family can begin at the time of diagnosis, instead of at the birth. StarShine nurses can help parents understand their child's diagnosis and anticipate care needs for their child.

In a collaborative effort, parents and the StarShine team work together to define and create a plan for the birth and death. An important component of this collaboration is the creation of the birthing plan. Working with the caring staff of StarShine to create their individualized plan can allow parents to have a sense of control through their clearly identified written plan. This important tool encourages parents to define goals for their birth event, learn what other parents in similar situations have chosen, and create an individualized plan that can ensure the parent's wishes are clearly identified and understood by caregivers.

For families whose newborn survives with a life-limiting condition, care can transitioned from StarShine Perinatal Program to StarShine Hospice Program. Doing so can provide parents with a choice to keep their child at home to receive care in their home from StarShine rather than staying in the NICU.

For families facing the tragedy of their child's death, StarShine can continue to offer support. Throughout the process, StarShine works with families to honor the life and death of their child, and also honor their family. Our bereavement care follows families a minimum of two years after the death, and is respectful and accommodating to the beliefs of all religious faiths.

Planning for birth and beyond:

- Coordinate development of birthing plan that is consistent with the individual family's belief system
- Offer planning and support for end-of-life care
- Provide support and guidance for families as they work through their decisions and cope with their grief.
- Educate relevant providers about the perinatal hospice plan of care

Medical care for the baby:

- Assessment of newborn and consultation with healthcare providers and family regarding appropriateness of newborn admission into hospice

Medical, Spiritual, Psycho-social care for parents and families:

- Medical management regarding expected needs
- Psychosocial/spiritual counseling – during their pregnancy and after birth of their child
- Address the emotional needs and concerns of other children in family
- Coordinate a Human Genetics referral when appropriate
- Create special treasures, mementos, and keepsakes of the baby
- Offer bereavement support for the family and caregivers, as desired, for a minimum of two years following the death of the baby.

Resources:

- Identify and coordinate referrals to the community resources available to patients and families

For more information about StarShine Hospice and Palliative Care, including the Perinatal Program, please contact:

Susanne Cassidy, MS, BSN, RN, Clinical Director
513-636-8432
Susanne.cassidy@cchmc.org

Norbert Weidner, MD,
Medical Director - StarShine Hospice and Palliative Care,
Pediatric Palliative Care / PACT
513-636-4408
norbert.weidner@cchmc.org

PERINATAL INSTITUTE

Division of Neonatology
3333 Burnet Ave., MLC 7009
Cincinnati, Ohio 45229-3039

Our mission is to improve the health of newborn infants through innovation in clinical care, education and research.

www.cincinnatichildrens.org

REGION I

Delivery Hospitals

Atrium Medical Center
Bethesda North Hospital
Brown County General Hospital
The Christ Hospital
Clinton Memorial Hospital
Dearborn County Hospital
Fort Hamilton Hospital
Good Samaritan Hospital
Highland District Hospital
Margaret Mary Community Hospital
McCullough Hyde Memorial Hospital
Meadowview Regional Hospital
Mercy Hospital Anderson
Mercy Hospital Fairfield
St. Elizabeth Healthcare Edgewood
The University Hospital, Inc.

OPQC Update

Thanks to all participating hospitals and providers for continuing to sustain outcome improvements in decreasing scheduled deliveries and reducing premature infant blood stream infections in your hospitals.

It was been a busy summer for OPQC Central staff, OPQC leadership & faculty, and clinical expert leaders.

- We have written and submitted funding proposals to the CDC, the Government Resource Center on behalf of state agencies, and the national March of Dimes.
- We hope to have one or more of these funding streams in place by October 1.
- Even though we are in another "unfunded" period, activity continues on the background work for new OPQC projects. We have devised and tested new content, IRB, and data collection forms for adding a human milk component to the blood stream infection project & ANCS administration for eligible pregnant women. Thanks to our Neo and OB clinical leaders for investing their time and talents.
- An OPQC membership process is being developed for engaging the other 96 maternity hospitals in Ohio.
- More perinatal QI efforts will come to fruition as funding becomes available this fall.

In the meantime, please send me or any of the OPQC Central team questions or comments.

Barbara Rose, RN, MPH, Barbara.Rose@cchmc.org

Announcements

10th Annual Regional Perinatal Leaders Summit

Fetal Infant Mortality Review (FIMR) Local Lessons Learned

Friday, October 21, 2011

12:30 p.m. – 4:00 p.m.

Fifth Third Bank Auditorium, Cincinnati Children's Hospital

Please contact Danielle Bolton with questions:

(513) 803-0957 or Danielle.Bolton@cchmc.org

2011 Ohio March of Dimes Prematurity Conference

Toward Improving the Outcome of Pregnancy

Thursday, November 17, 2011

Airport Marriott, Columbus, Ohio

For further information, please contact Lisa Holloway::

(513) 769-3588 or LHolloway@marchofdimes.com

Regional Perinatal Nurse Manager Meeting

Friday, November 18, 2011

8:30 a.m. – 12:00 noon

NICU Classroom, B4.304

Cincinnati Children's Hospital

