

GTA-OBS Newsletter

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Dashboard

It did not take long following the publication of our first dashboard, summer 2015, for the inquiring minds of two GTA hospital teams to plan two quality of care intervention projects relating to the dashboard. Dr. Mike Geary from St. Mike's was successful in obtaining an Innovation Fund to allow simulation training in GTA hospitals on a mannequin designed to optimize the technique of treating shoulder dystocia. With very little budget support and with the wise suggestion of Dr. Nathan Roth, we asked the nurse educators from participating hospitals to help implement the training.

Winter 2016

Dear Colleagues,

It is hard to believe that it has been almost six months since our last newsletter. As new initiatives have arisen from our fledgling network on a monthly basis, we have decided to release a biannual summer and winter newsletter. Our goal is to highlight what we have accomplished in the past few months, keep you apprised of upcoming initiatives and thank you for your continued contributions and support.

Our network established itself in the minds of all Obstetric leaders in the GTA as the means for collaborative quality of care. The last six months has seen the progression of our network beyond that of a data platform, although this dashboard is still a valued and often requested metric, to at least two major quality intervention projects, research papers at international conferences, the subject of at least two major CIHR grant submissions, and a Provincial Collaboration.

Under their guidance, most GTA-OBS hospitals will complete the training by this summer. Using the same process and in collaboration with MORE OB, Leigh Andrews, a nurse educator at Sunnybrook, is working together with the nurse educators from our network hospitals to roll out a PPH intervention bundle and major OB haemorrhage protocol. The physician leads from many sites attended workshops throughout the last six months and are currently implementing the bundle in their sites. This initiative has been very well received and all participants have been eager to

help achieve our goal of establishing a major PPH protocol in all sites.

We chose not to run our dashboard again this winter as it is quite costly. However, I think it is a feather in our cap that two of our dashboard indicators (low risk LSCS and admission of baby to NICU) have been the topic of Provincial scrutiny, the first as part of a PCMCH led QBP and the latter as part of the new BORN Ontario dashboard. We intend to run our dashboard indicators again this summer and we look forward to sharing the results and any changes in clinical outcomes.

New Collaborations

A very exciting development has arisen as a result of our partnership with the BORN Ontario, Anne Sprague, and our liaison with PCMCH, James Melloche. We are thankful to both Anne and James for welcoming us and facilitating and integrating the GTA-OBS network into the Provincial landscape. As a result, we formed a link with two other Provincial networks: the Champlain Maternal Newborn Regional Program and the Southwestern Ontario Maternal, Newborn, Child and Youth Network. These networks share many of our own interests and welcome the clinical research and physician input into many of our shared agendas. These partnerships have allowed us to be cost-efficient as we share the fee for the BORN analyst and we now have a place at the Provincial table facilitated by monthly meetings with PCMCH and the other network directors.

I must mention another collaboration with Dr. Sarah McDonald from McMaster University who has been involved in, and a leader of, many of our projects. We will soon need to turn our attention to incorporating our Hamilton neighbours into our network "officially". Thank you Sarah and Dr. Leyland for your support.

Clinical Research

Congratulations to Drs. Howard Berger and Nir Melamed who presented GTA-OBS data at an International Scientific meeting in Atlanta, USA last week. The same work has been published in the American Journal of Obstetrics and Gynecology.

Congratulations to Dr. Anne Berndl on receiving an Innovation Fund to pilot a RCT of large balloon Foley catheter inductions at two network sites with a planned full network trial within two years.

Upcoming network initiatives include a planned LSCS vs. Planned Vaginal Birth in obese patients using GTA-OBS data and several intervention projects relating to preterm birth.

Common Protocols and Clinical Pathways

Following the agreement of a common GDM screening protocol (please see the screening and diagnosis protocol on the last page), our next focus is a common protocol and pathway for two major issues that all of us deal with daily: 1) the invasive placenta and 2) the short cervix.

An international Delphi Consensus survey on invasive placentation was recently completed in December 2015 and the results will be presented to all at a special meeting within the next six months - stay tuned for the date and invite. The management of the short cervix in the GTA, led by Drs. Marie Cizik, Noor Ladhani and Nan Okun, will be addressed in a consensus meeting on February 18th, 2016. If someone is not attending from your hospital, please contact us as soon as possible.

Other Resources

The OMama Project is a new maternal and child eHealth project in Ontario. It aims to improve maternal-newborn care by providing resources to support the best beginnings of lifelong health. Started in 2014, and launched in December 2015, OMama is a 2-year maternal-newborn care pilot project led by the BORN, a provincial program of the Children's Hospital of Eastern Ontario, with support from eHealth Ontario. Under the direction of an Advisory Committee made up of experts in medicine (obstetrics and family medicine), midwifery, nursing, e-health, technology, health promotion, social work and health policy, OMama is launching a website and mobile app offering trusted, easy-tounderstand health information on over 100 topics related to pregnancy, birth and early parenting for women and families, when and where they need it. Visit the website at www.omama.com and please contact the project at omama@bornontario.ca for more information about the project.

Funding and Leadership

Thank you to all for agreeing to bear the increase in support needed to fund our network over the next two years. There was unanimous acceptance from all sites, see 2015 Hospital Site Contributors below, with each community hospital agreeing to pay \$3000/year and each academic hospital agreeing to pay \$5000/year. We also could not function without the major contributions from Dr. John Kingdom and the University of Toronto and we are grateful to Dr. Gareth Seaward who so successfully integrated our network into the University Quality of Care Program.

2015 Hospital Site Contributors

Mount Sinai Hospital North York General Hospital Rouge Valley Health System Toronto East General Hospital The Scarborough Hospital William Osler Health System Mackenzie Health St. Joseph's Health Centre Toronto St. Michael's Hospital Sunnybrook Health Sciences Centre Royal Victoria Regional Health Centre Trillium Health Partners Southlake Regional Health Centre Halton Healthcare

With best wishes to all for a successful 2016

well.

Jon Barrett Chair, GTA-OBS

GTA-OBS Executive Dr. Barrett Dr. Asztalos Dr. Berger Dr. Brown Dr. Geary Dr. Logaridis Dr. Seaward Dr. Scheufler Dr. Heslegrave
GTA-OBS Hospitals
Halton Healthcare - Milton District Hospital
Mackenzie Health – Mackenzie Richmond Hill Hospital
Mount Sinai Hospital
North York General Hospital
Rouge Valley Health System – Ajax and Pickering Site
Rouge Valley Health System – Centenary Site
Royal Victoria Regional Health Centre
Southlake Regional Health Centre
St. Joseph's Health Centre Toronto
St. Michael's Hospital
Sunnybrook Health Sciences Centre
The Scarborough Hospital – Birchmount Campus
The Scarborough Hospital – General Campus
Toronto East General Hospital
Trillium Health Partners – Credit Valley Hospital
Trillium Health Partners – Mississauga Hospital
William Osler Health Centre - Brampton Civic
William Osler Health System - Etobicoke General Hospital

Gestational Diabetes Mellitus Screening and Diagnosis



* FPG: Fasting plasma glucose; PG: plasma glucose ^ IADPSG: Interanational Association of Diabetes in Pregnancy Study Group