It Takes a Village: Combating Opioid Use in Obstetrics

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The Heart of the Issue

- No policy in place to address maternal opiate abuse
- Longer Neonatal stays for monitoring and treatment
- No comprehensive directory of resources for addicted moms
- Labor and Delivery unit didn’t have access to Prescription Monitoring Program
- Lack of communication between providers

Planning for Care

PERINATAL NAVIGATOR
- Builds professional relationships with expectant moms and families
- Works collaboratively with local and regional healthcare providers
- Coordinates care throughout a pregnancy
- Encourages families to attend Childbirth and Family Education classes
- Provides education and support
- Ensures moms-to-be are well informed and understand prenatal care plans
- Helps women and families remove barriers to prenatal care
- Helps expectant mothers and families navigate appointments and consultations
- Provides education, guidance and resources for high-risk pregnancies

Community Care Defined

PRACTICE CHANGES
- 4Ps implemented prenatally in practices
- Drug screens include buprenorphine
- Pain protocol & order set created for patients on Medication Assisted Treatment Therapy
- Umbilical Cord Screening Protocol
- Educational Symposium for providers April 2016 and September 2017
- Infant no longer admitted straight to NICU, stay with Mother on Post Partum Unit. Non-pharmacological Intervention as 1st line of treatment

The Village Comes Together

COMMUNITY COALITION TO ADDRESS SUBSTANCE ABUSE IN THE OBSTETRICAL POPULATION (CCASAOP)

SUBSTANCE ABUSE IN THE PREGNANT POPULATION
- Opioid addiction is a chronic medical disorder
- Treated effectively with a combination of medication and psychosocial services.
- Program will provide a residential recovery program to pregnant and post-partum women.
- There are few residential recovery programs for this population nationally and none in the Central Virginia Region.