



WASHINGTON STATE PERINATAL COLLABORATIVE~ MAY 2024

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Washington State Perinatal Collaborative –

Time	Topic	Presenter
11:00-11:15	Introductions	Dr. Rita Hsu
11:15-12:15	Perinatal Indicators Report	Kari Mentzer PhD kari.mentzer@doh.wa.gov
12:15-12:25	Within Reach Immunization initiatives	Aija McAferty MPH AijaM@withinreachwa.org
12:25- 12:35	Doula: Certification & Reimbursement Eat, Sleep, Console Reimbursement	Beth Tinker PhD, RN beth.tinker@hca.wa.gov
12:45-12:50	State QI~ Safe Haven for newborns	Bat-Sheva Stein DNP, M.Sc., RN Bat-Sheva.Stein@doh.wa.gov
12:50-13:00	Hemorrhage grant	Bat-Sheva Stein DNP, M.Sc., RN Bat-Sheva.Stein@doh.wa.gov
13:00- 13:05	Rural Obstetric Workgroup	Bat-Sheva Stein DNP, M.Sc., RN Bat-Sheva.Stein@doh.wa.gov
13:05- 13:10	State QI~ Blue Band project	Rebecca Penders PhD, RN rebecca.penders@providence.org
13:10-13:15	State QI~ Human Milk Banking	Sharilyn Emhoff BSN, RN sharilyn.emhoff@multicare.org
13:15-13:20	State QI -Team Birth & perinatal mental health	Jenica Sandall jenicas@wsha.org
13:20-13:30	Syphilis Discussion	Rita Hsu MD
13:30-14:00	Updates and public sharing	New WSPC website

Perinatal Indicators Report

KARI MENTZER PHD
WA STATE DEPT OF HEALTH



WASHINGTON PERINATAL INDICATORS 2022 DATA HIGHLIGHTS

Surveillance and Evaluation Unit
Office of Family and Community Health
Improvement

May 9th 2024

Perinatal Indicators Presentation

Agenda

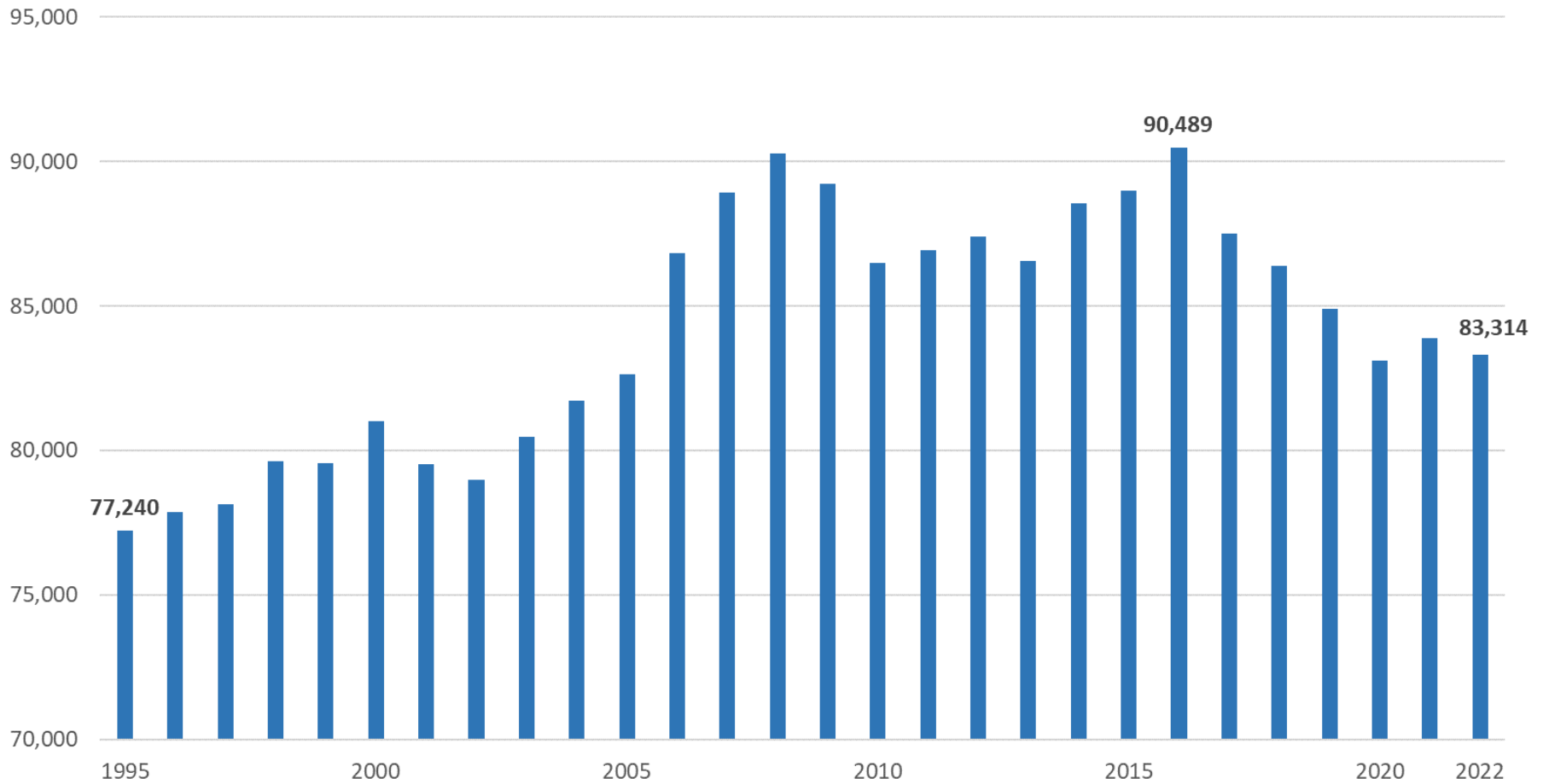
Key Indicators From Vital Statistics and First Steps Data

1. Births and Pregnancy Rates
2. Livebirth Delivery Services
3. Maternal Morbidity
4. Prenatal Care and Birth Outcomes

Washington State
Health Care Authority



Total Births to Washington State Residents WA Birth Certificate, 1995-2022

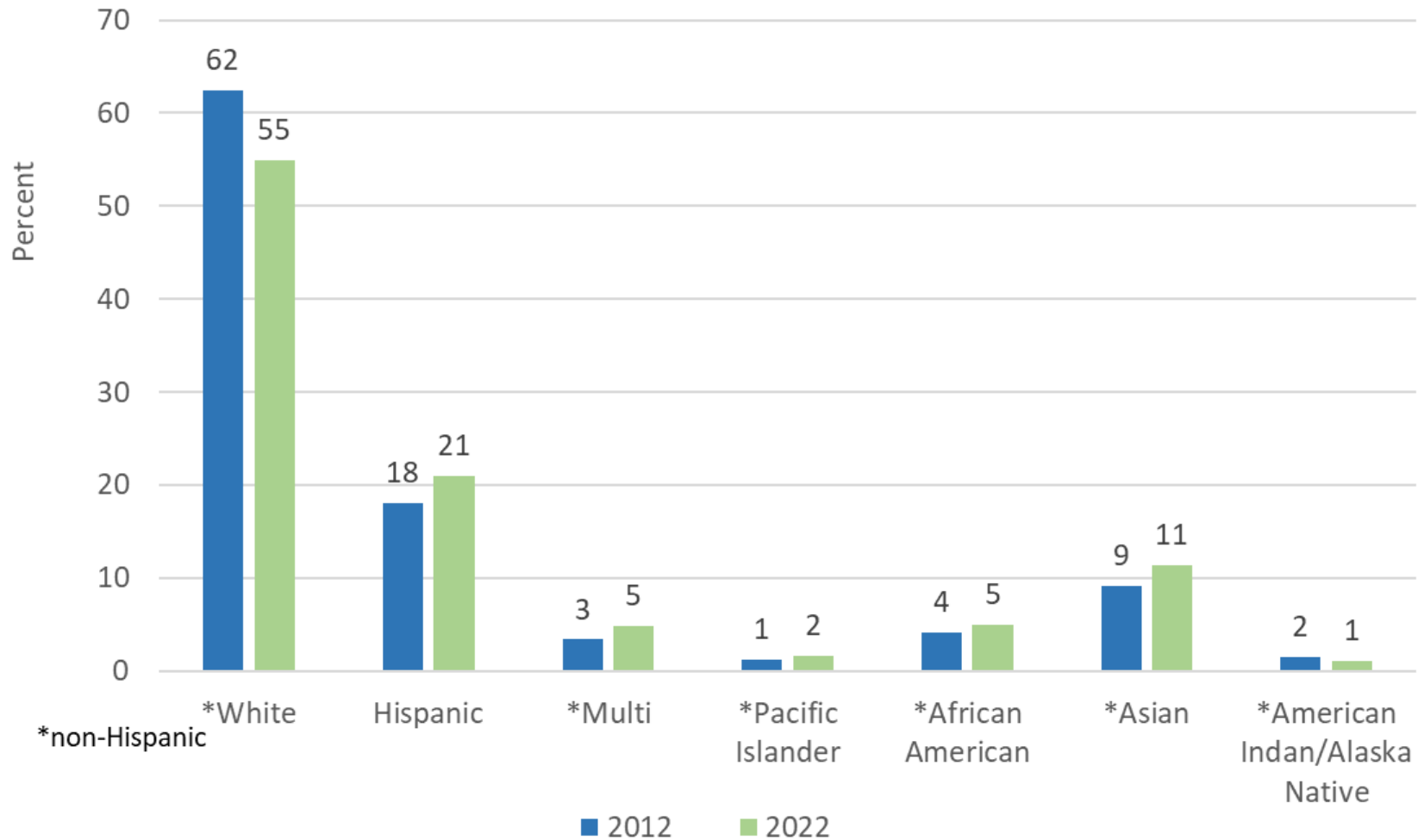


Medical Services

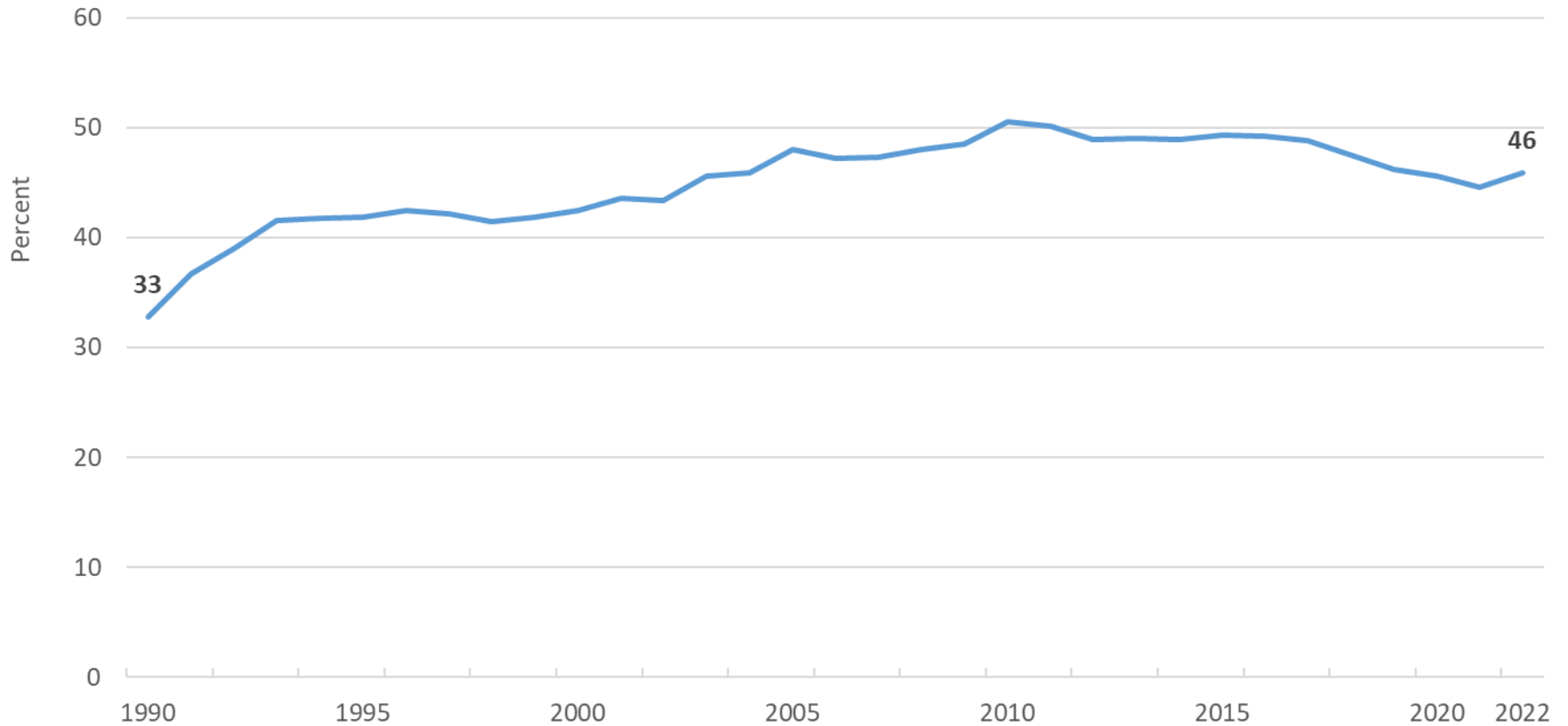
- Deliveries by MD/DO down 11% since 2012
- Licensed Midwife deliveries have increased by 21% since 2012; Certified Nurse Midwife deliveries have increased by 26% since 2012
- In 2022 46% of deliveries were paid by Medicaid
 - Since 2005 between 45%-50% per year
 - In 2010 & 2011 had highest rates, 50.3% & 50.2%
- C-Sections have decreased by 4% since 2012
- VBAC deliveries have been around 20/100 births since 2016.
- Home births increased 19% from 2012 to 2022, an absolute increase of 0.5%.

Births By Race/Ethnicity, 2012 & 2022

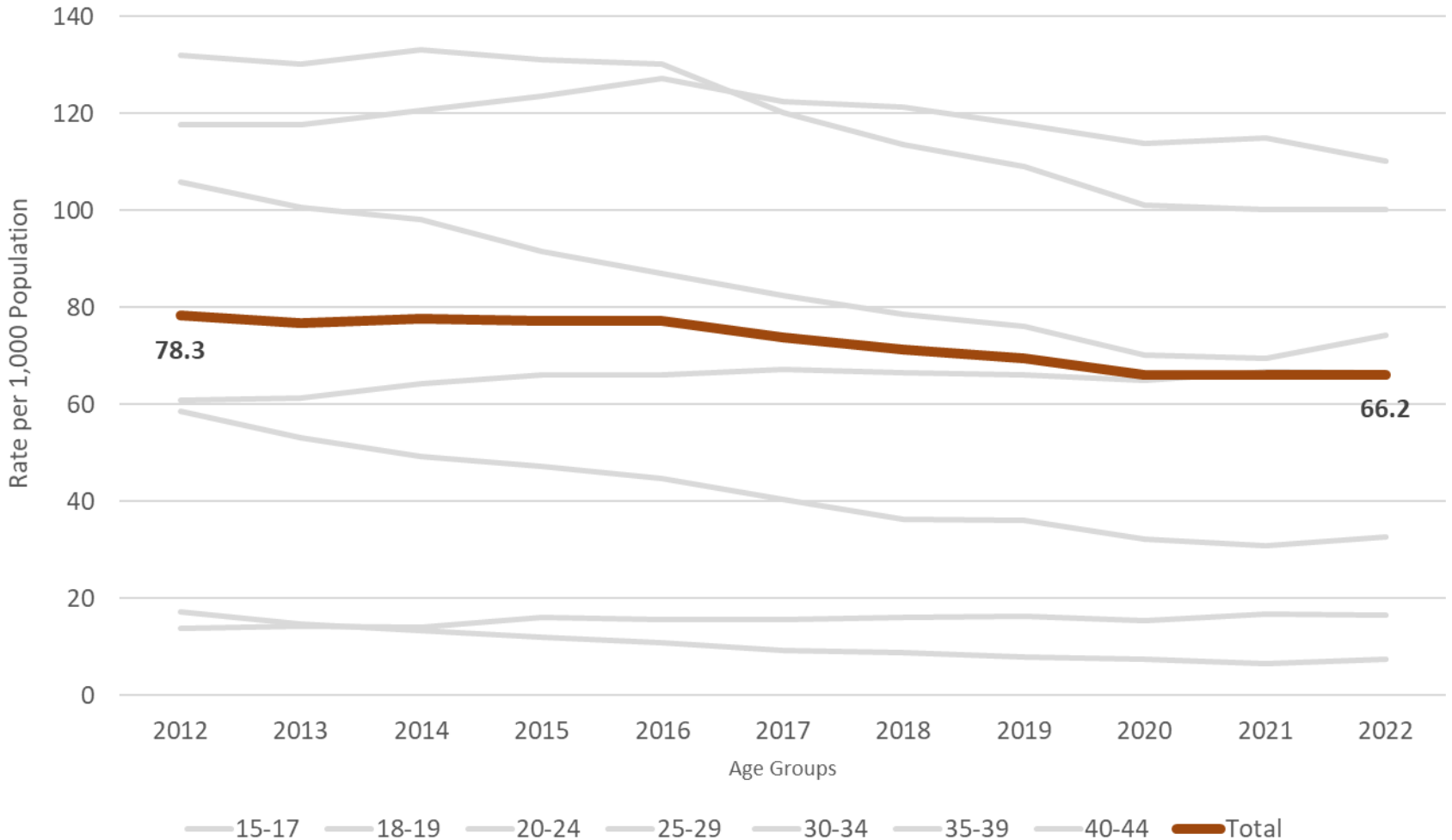
WA Birth Certificate



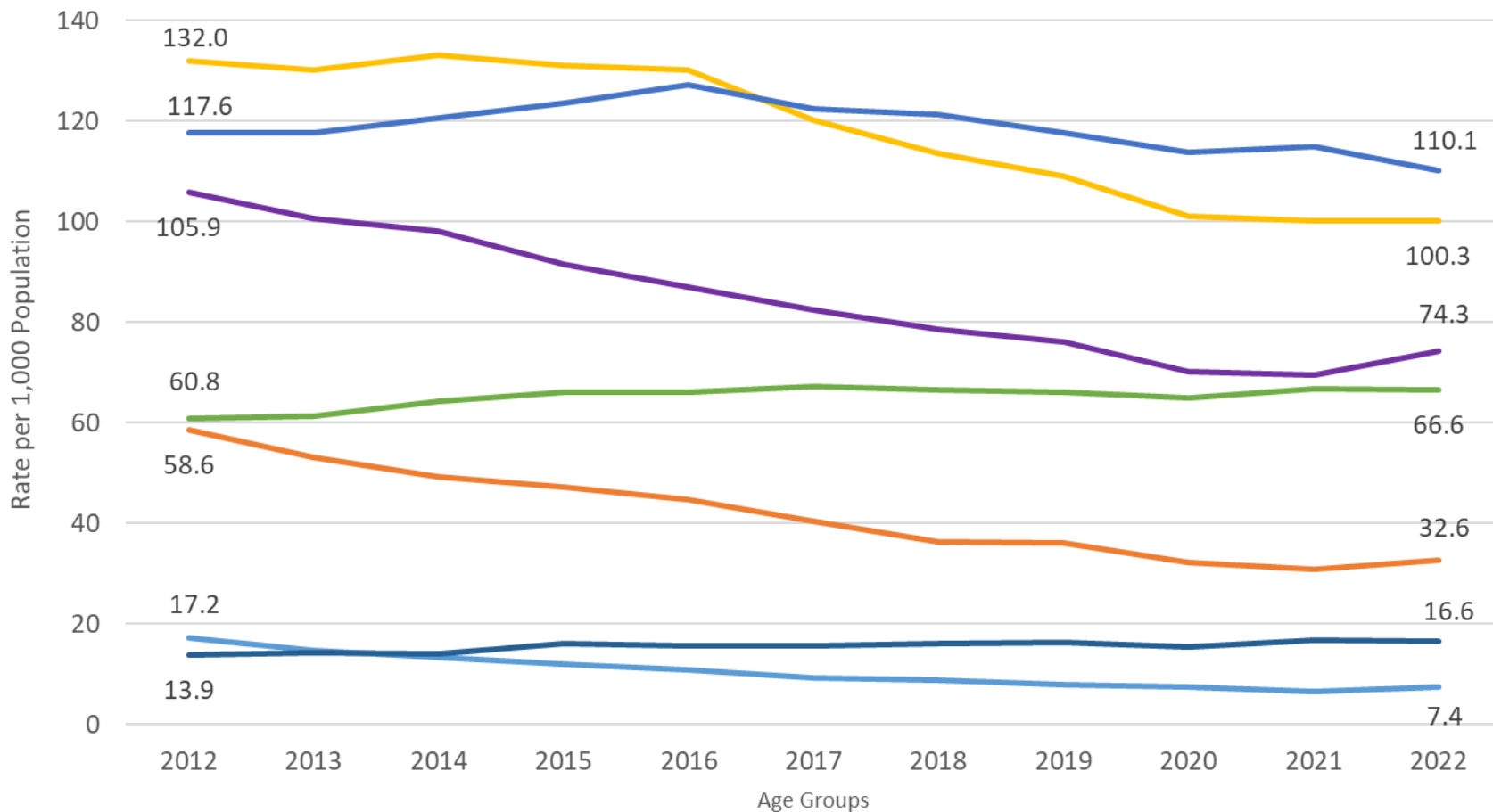
Percent of Resident Births Covered by Medicaid First Steps Database, 1990-2022



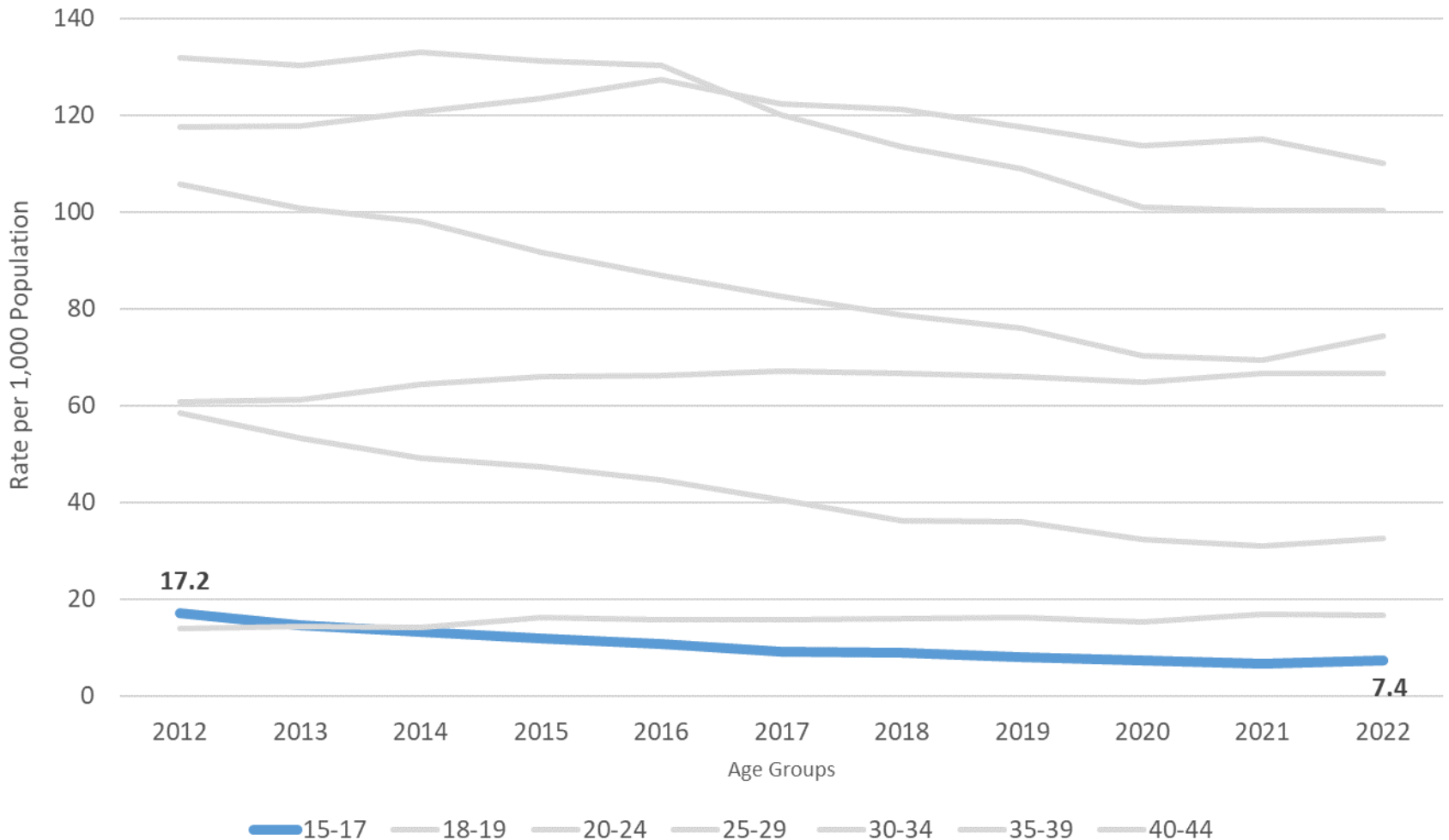
Total Pregnancy Rates for WA Residents per 1,000 Population WA Vital Statistics, 2012-2022



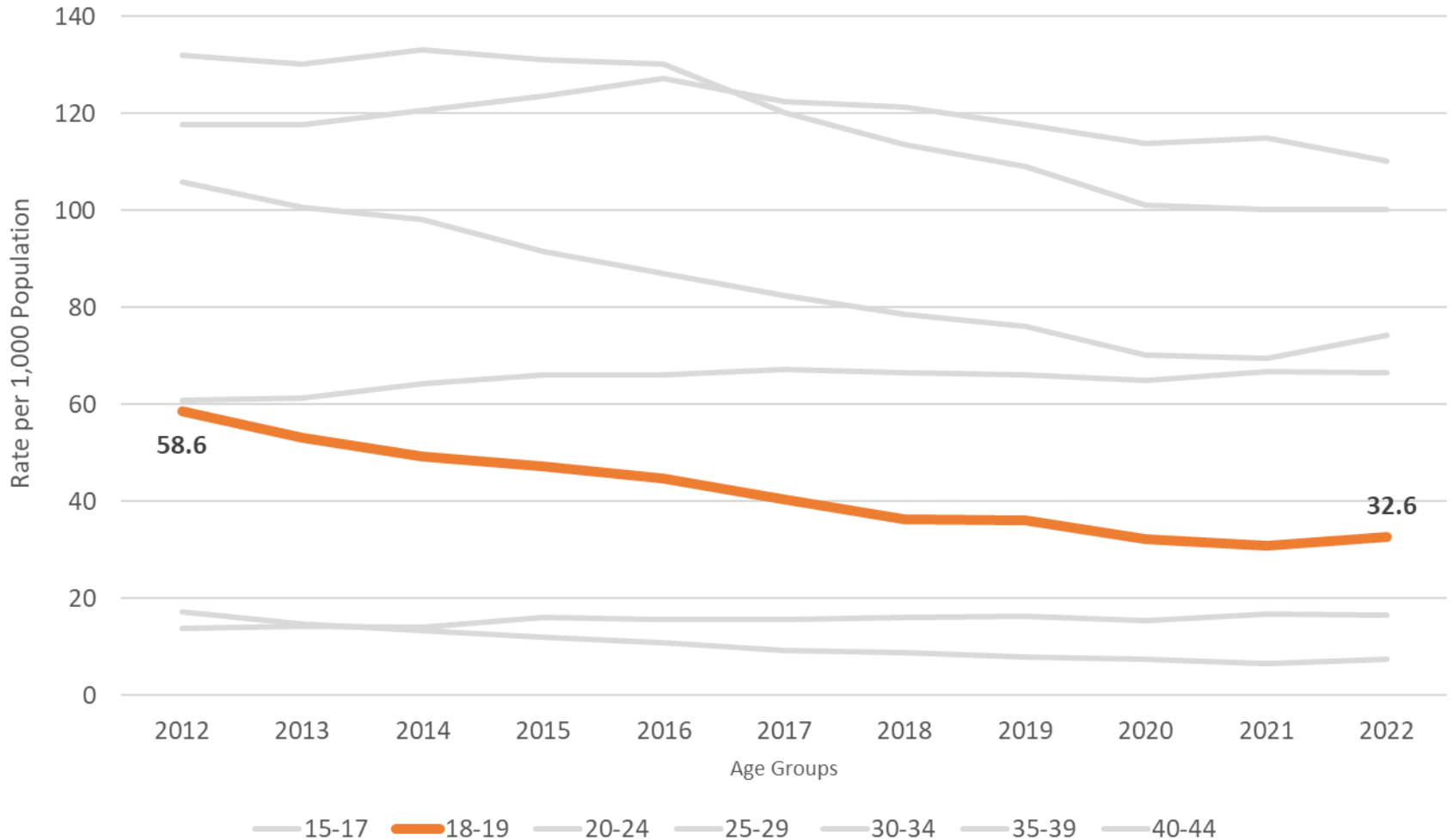
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



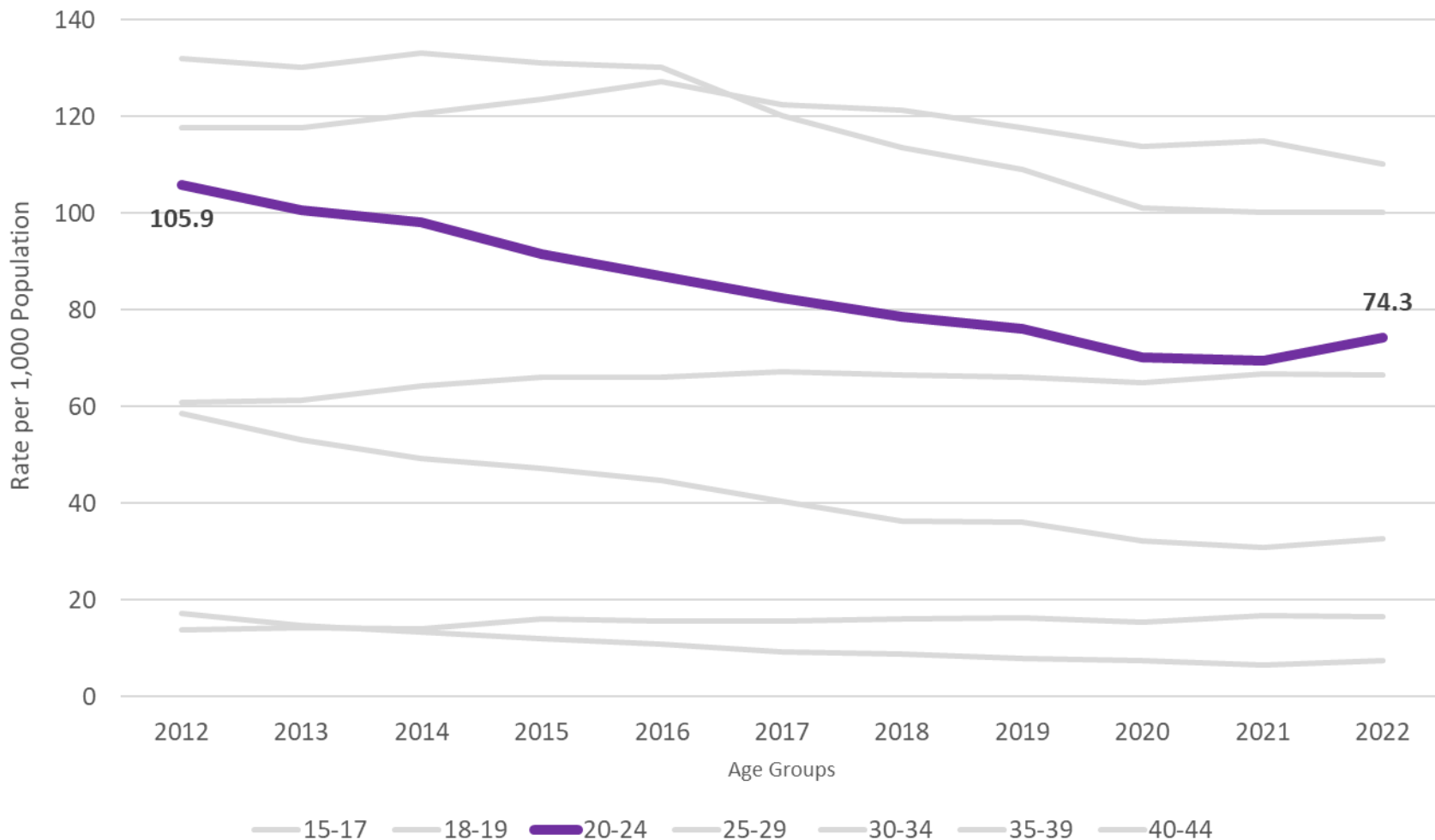
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



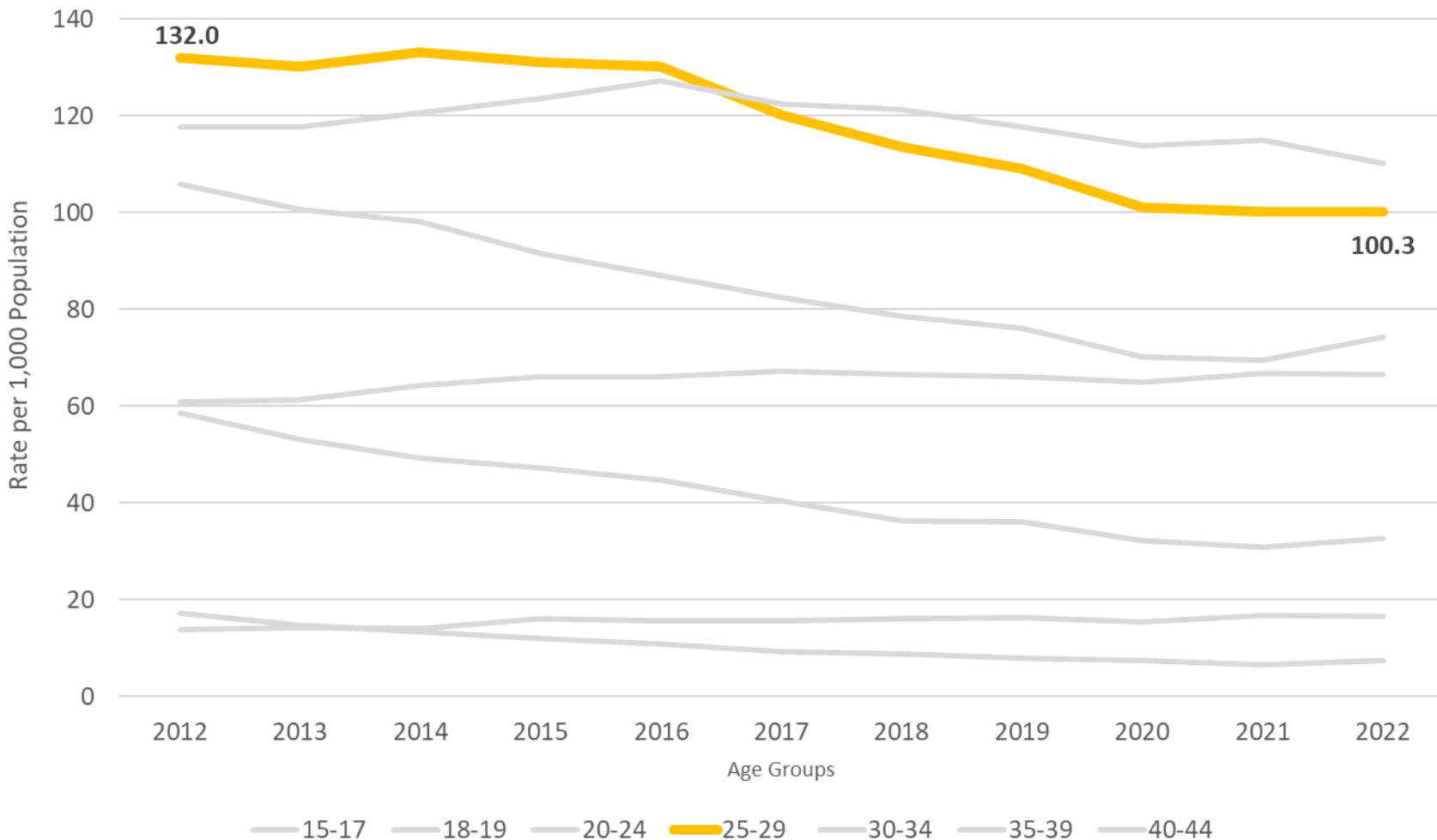
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



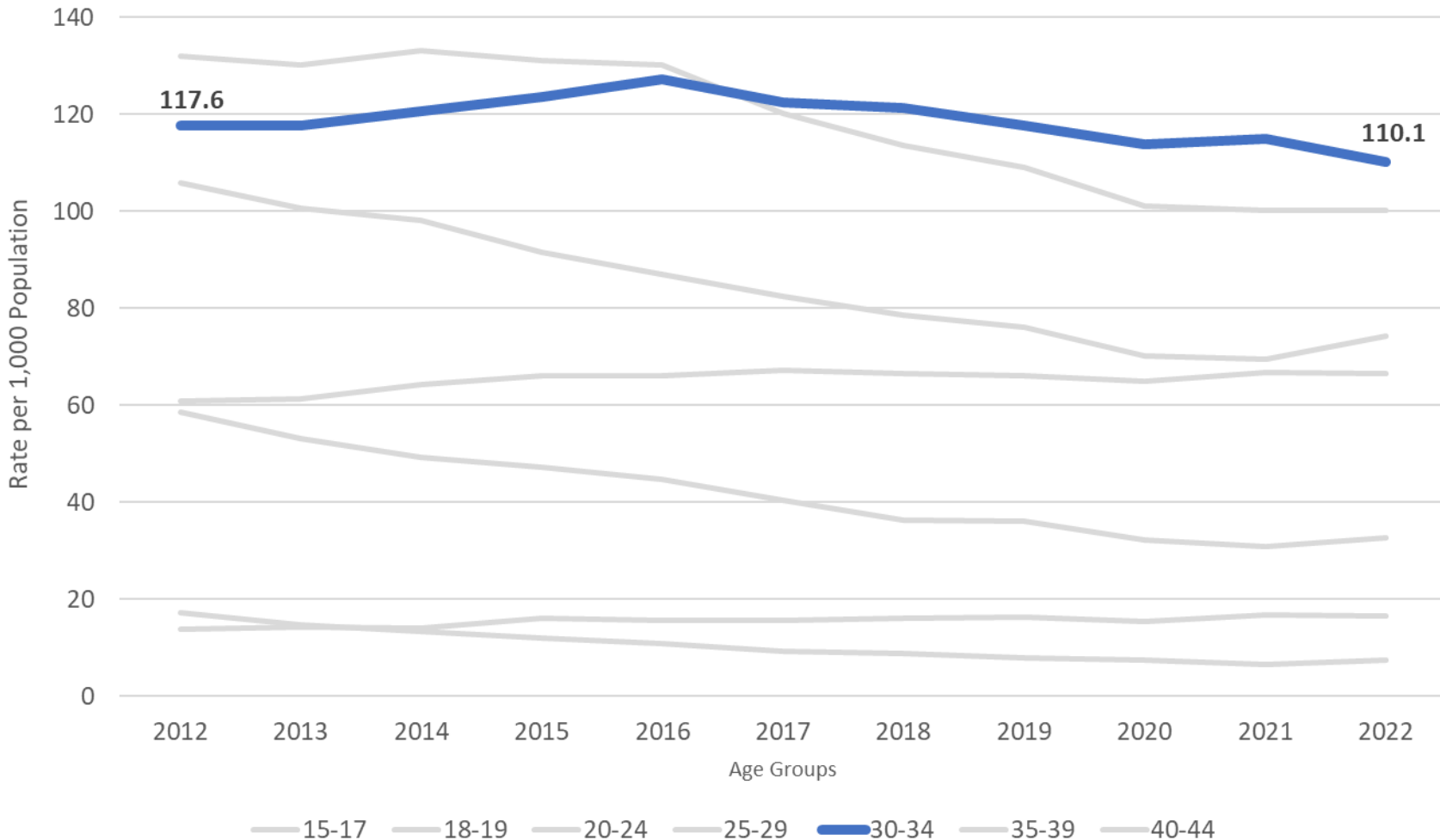
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



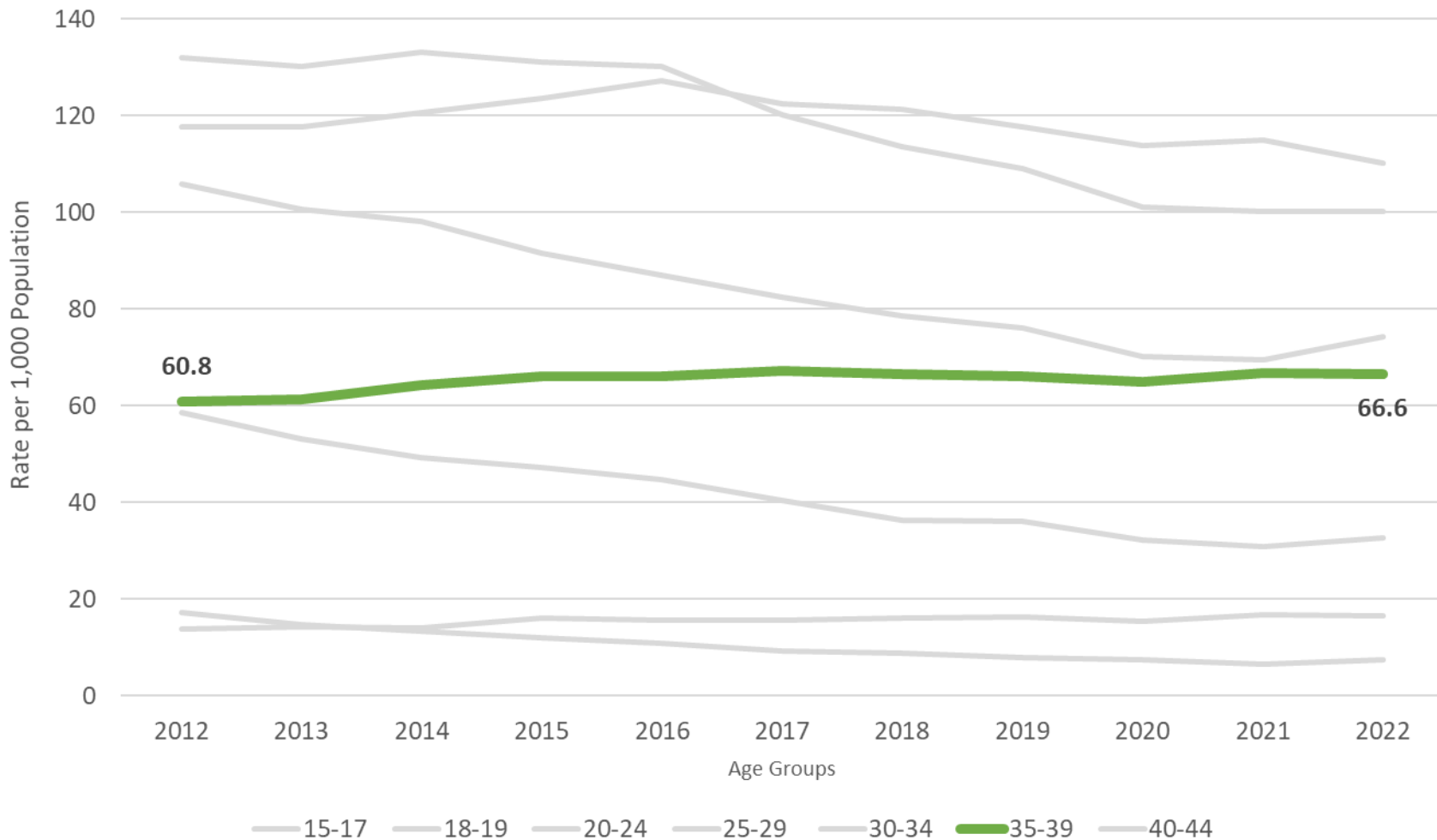
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



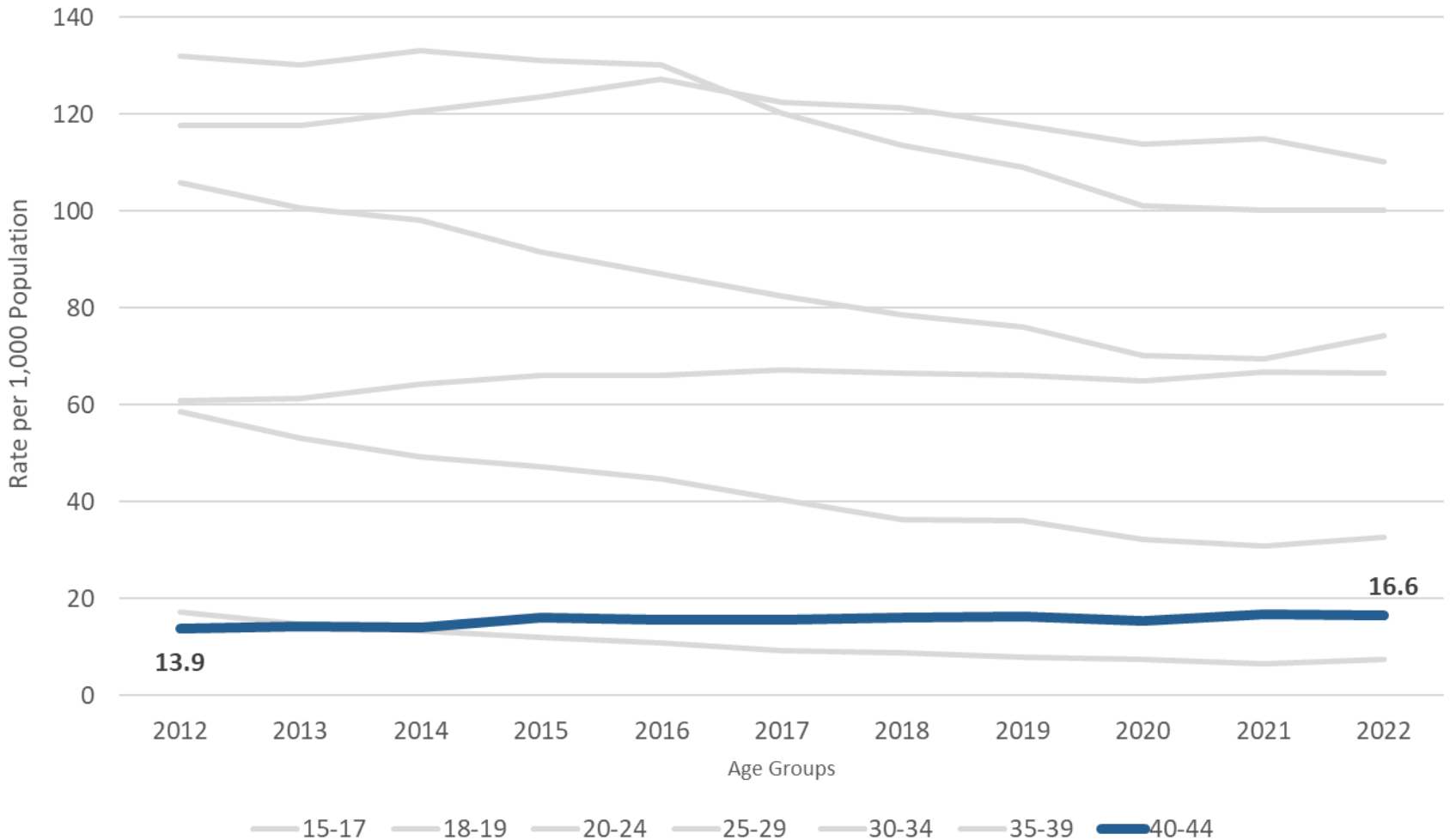
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



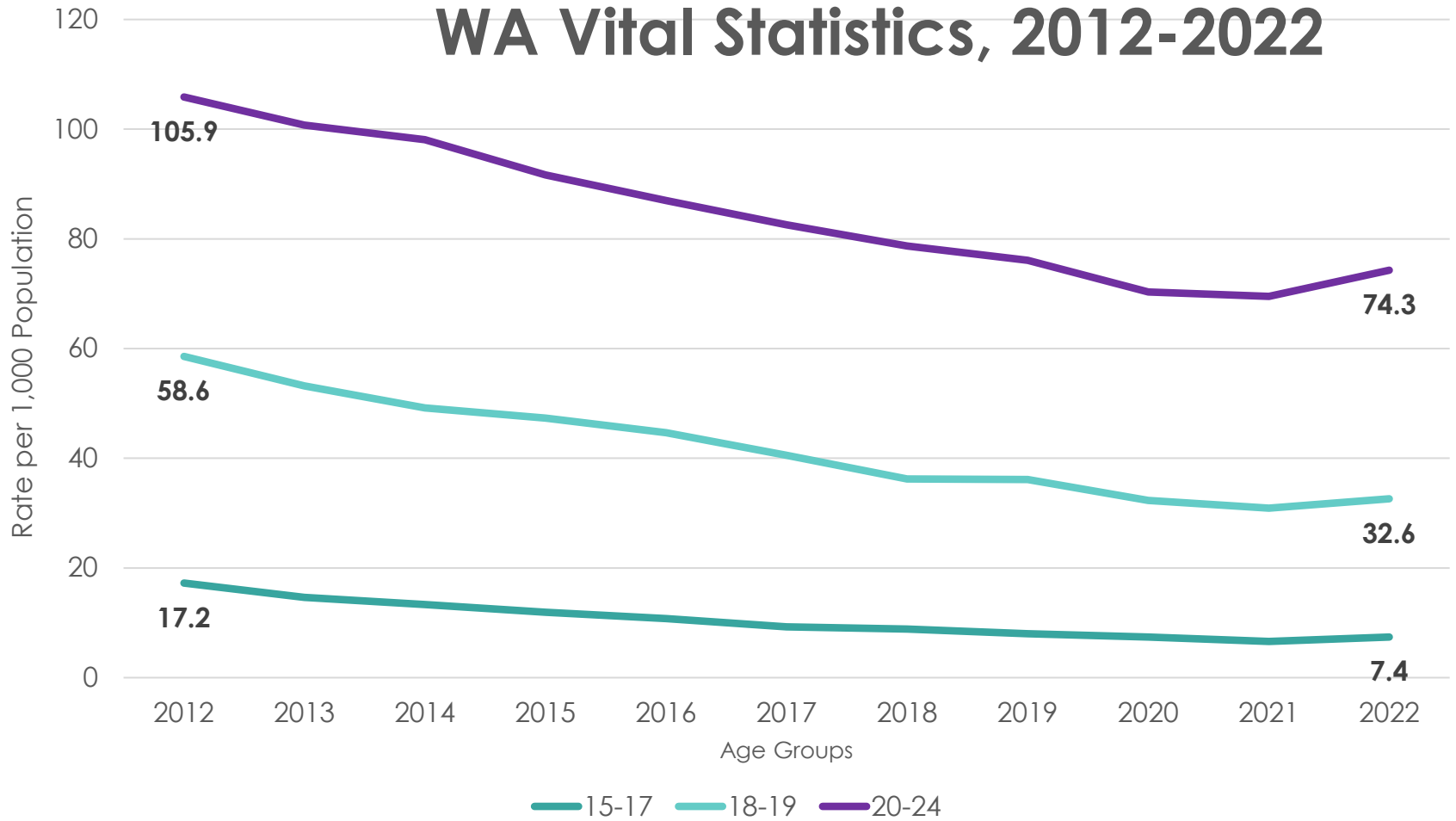
Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022



Pregnancy Rates by Age Group per 1,000 Population WA Vital Statistics, 2012-2022

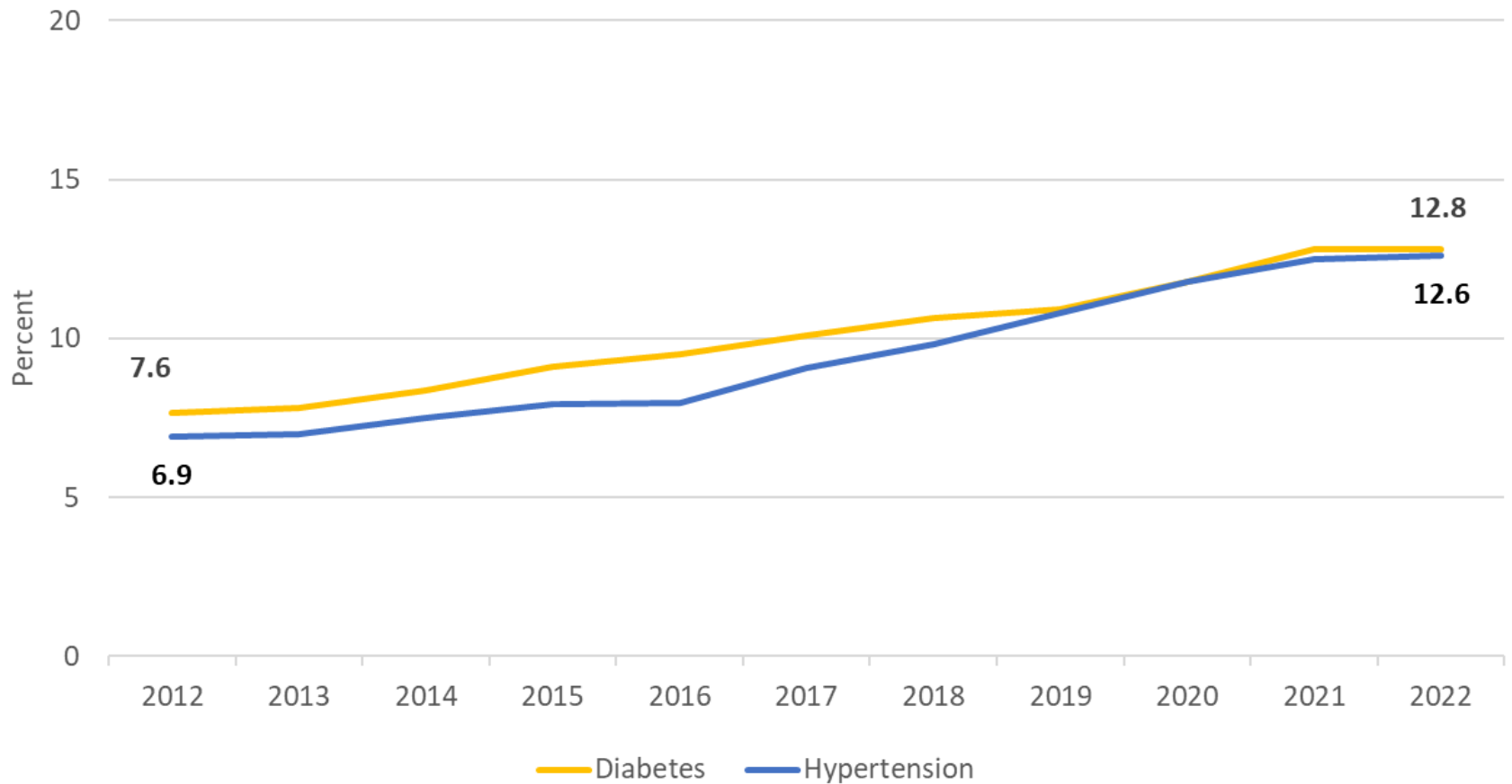


Adolescent & Young Adult Pregnancy per 1,000 Population WA Vital Statistics, 2012-2022

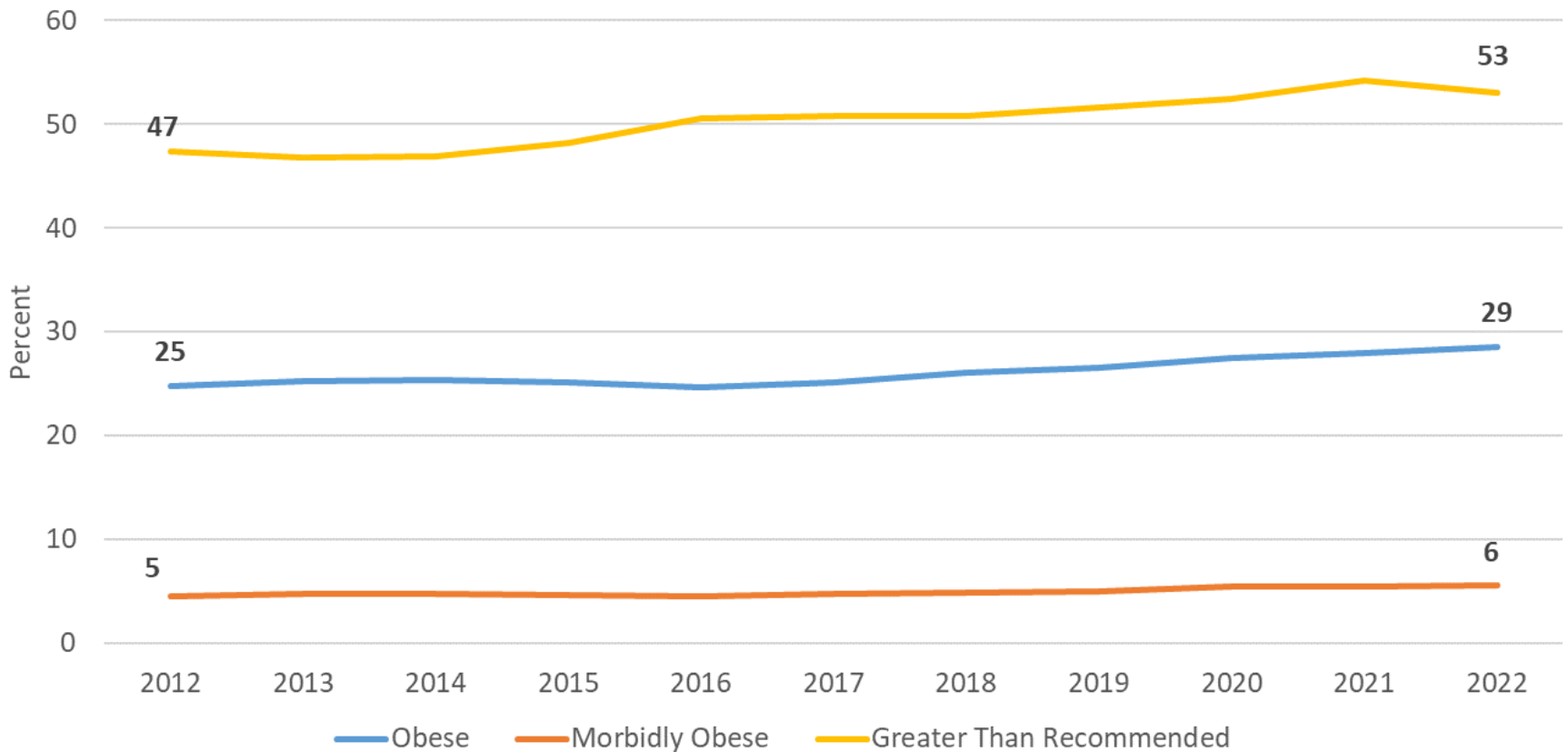


Diabetes and Hypertension During Pregnancy

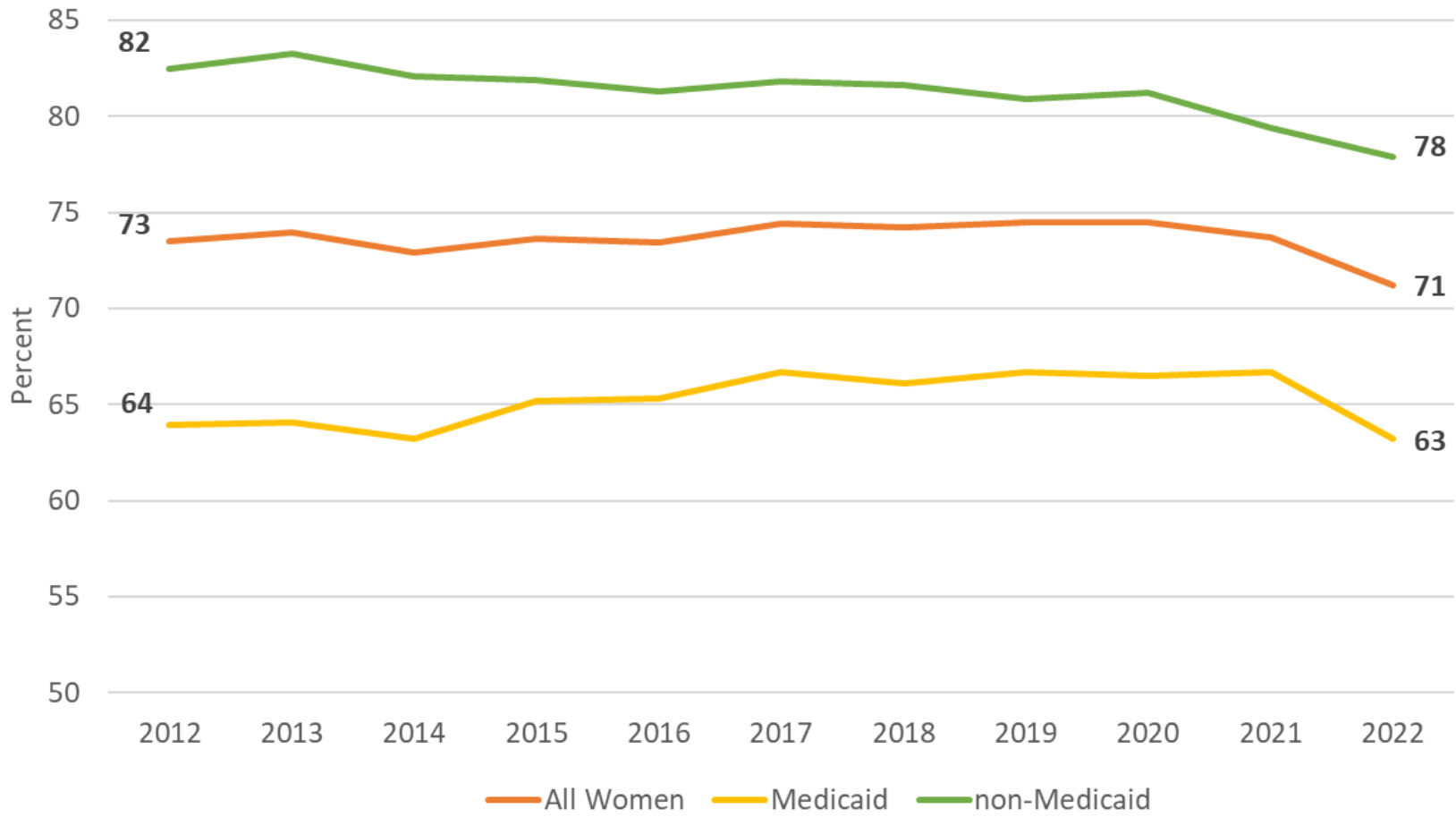
WA Birth Certificate, 2012-2022



Pre-Pregnancy Obesity and Morbid Obesity WA Birth Certificate, 2012-2022

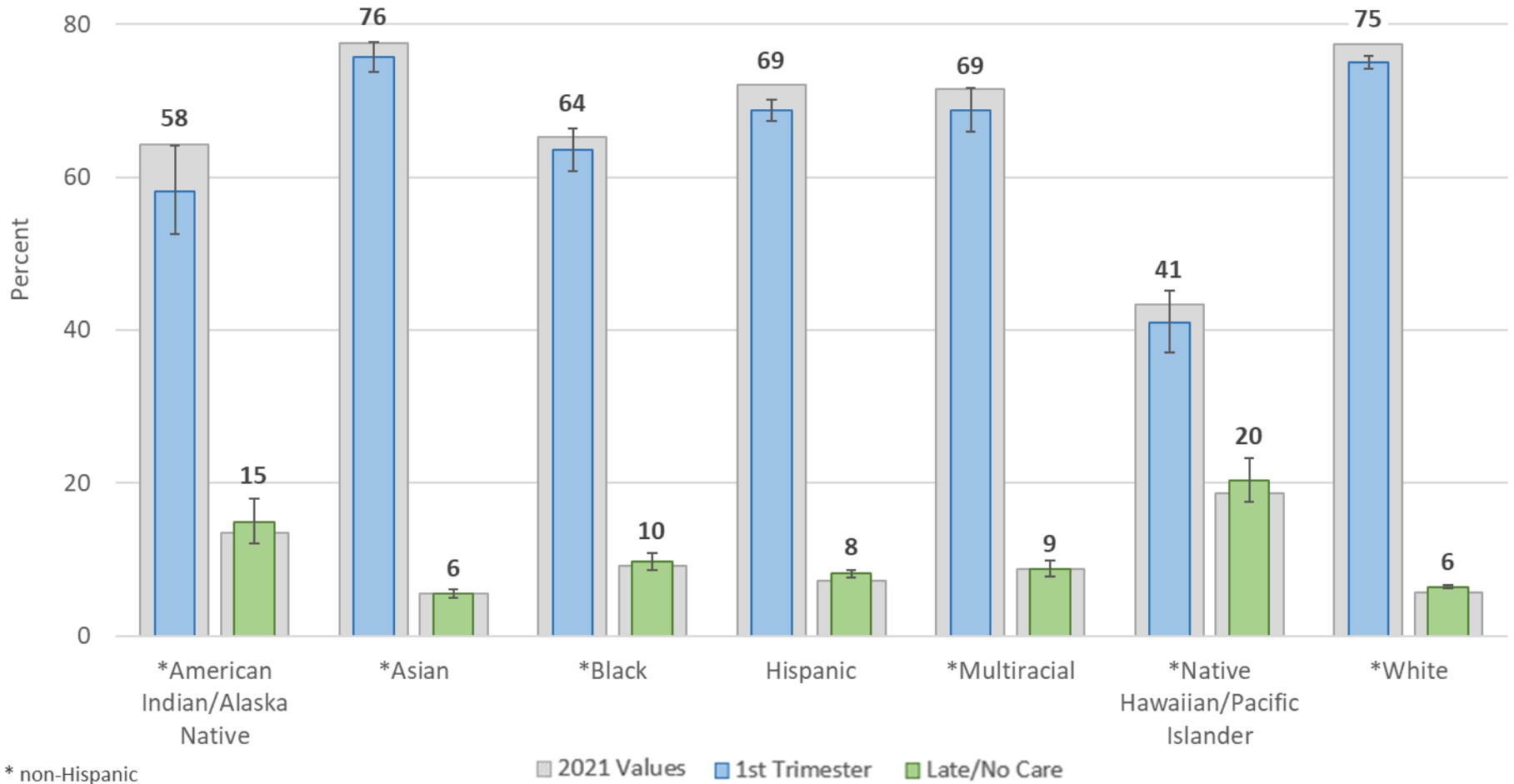


First Trimester Prenatal Care First Steps Database, 2012-2022



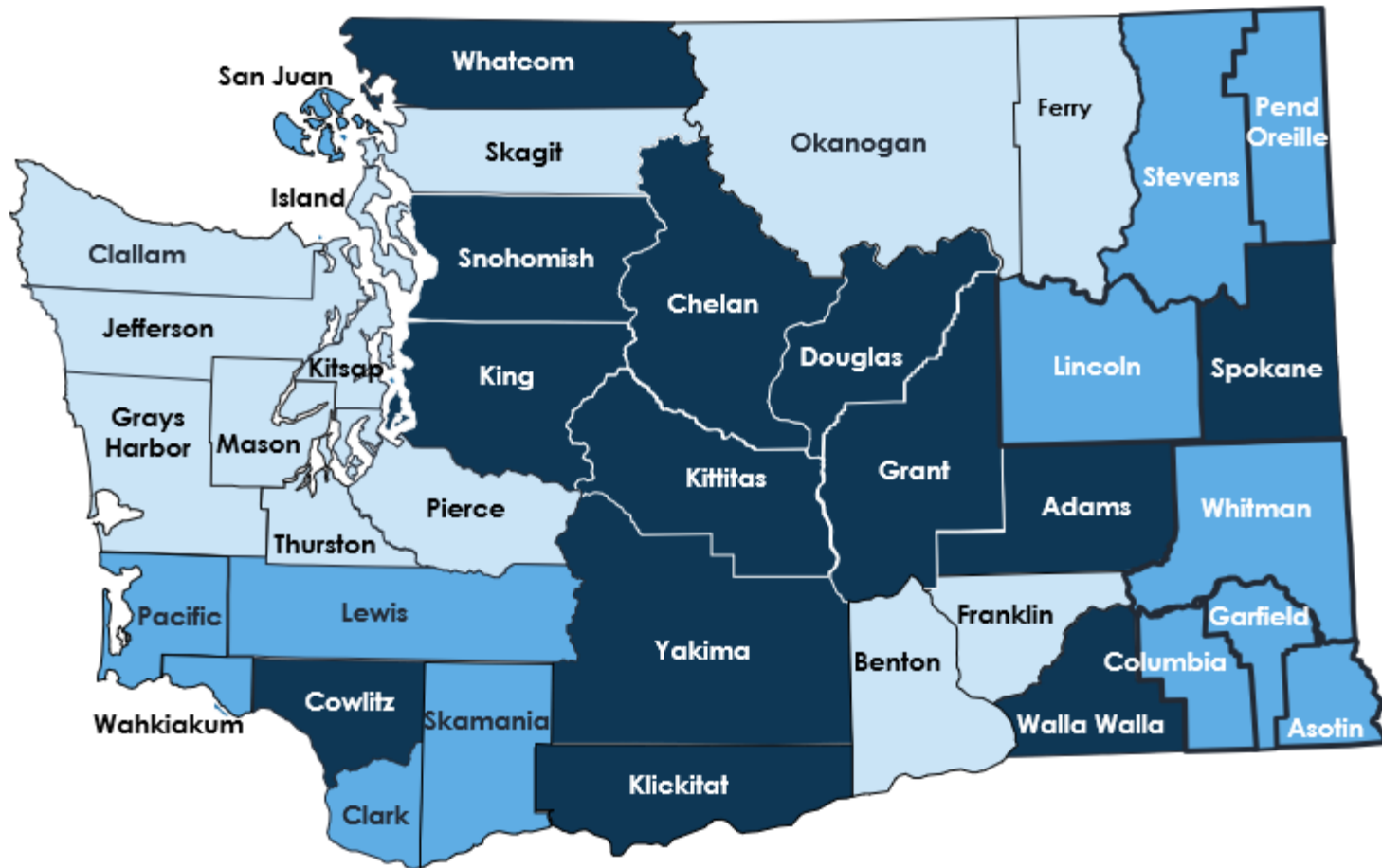
Prenatal Care by Race/Ethnicity

WA Birth Certificate, 2022



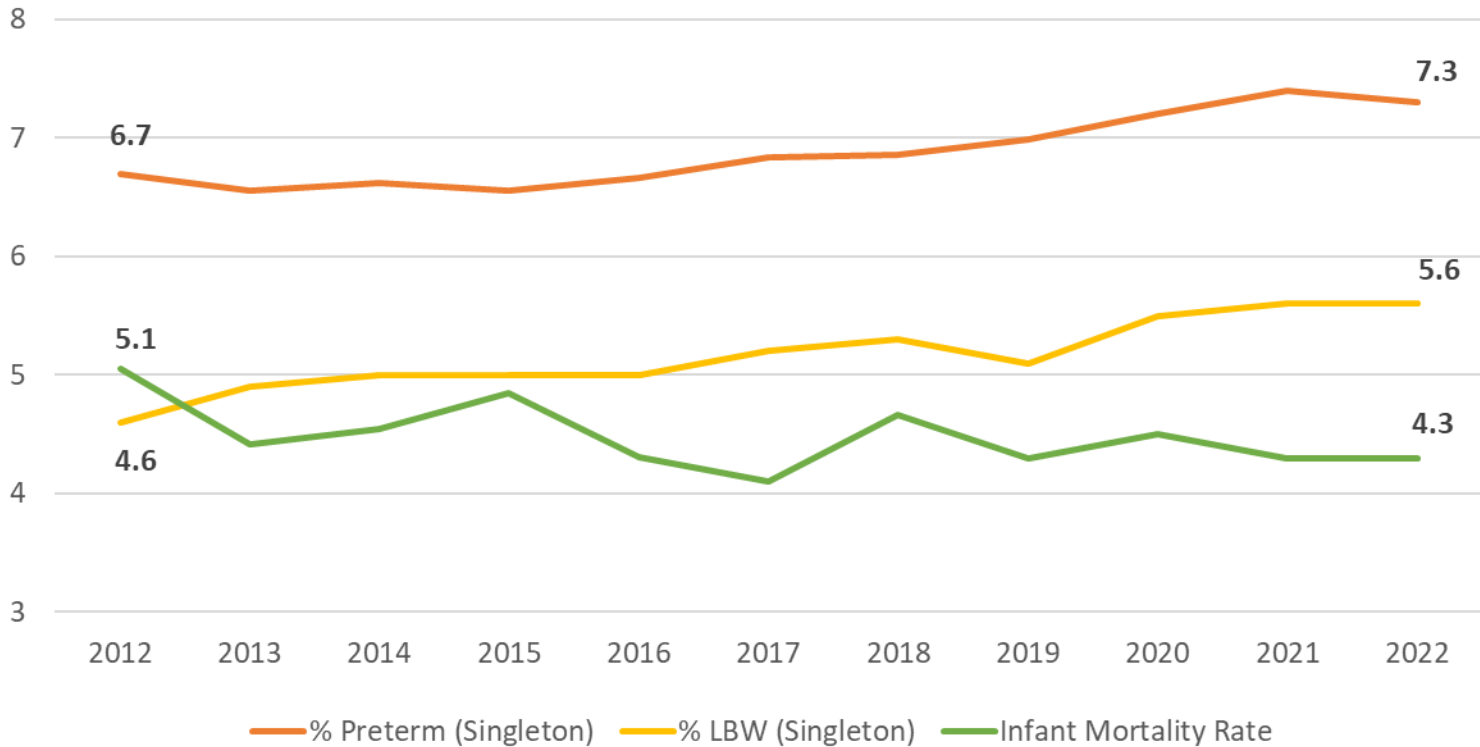
1st Trimester Prenatal Care

■ Greater than State ■ Same as State ■ Lower than State



Infant Outcomes

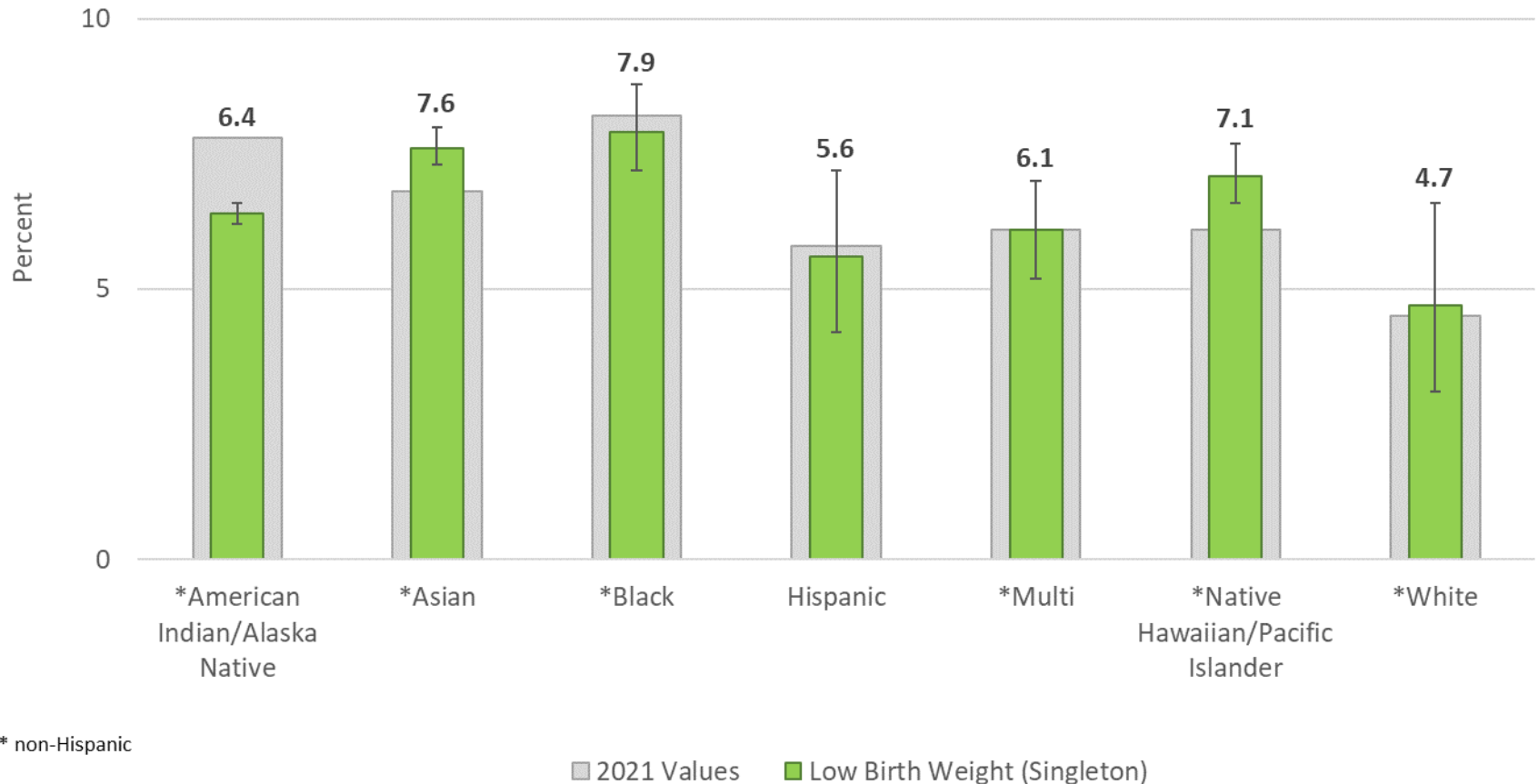
WA Vital Statistics, 2012-2022



Preterm Births & Low Birth Weight % of Live Births
Infant Mortality Rate per 1,000 Live Births

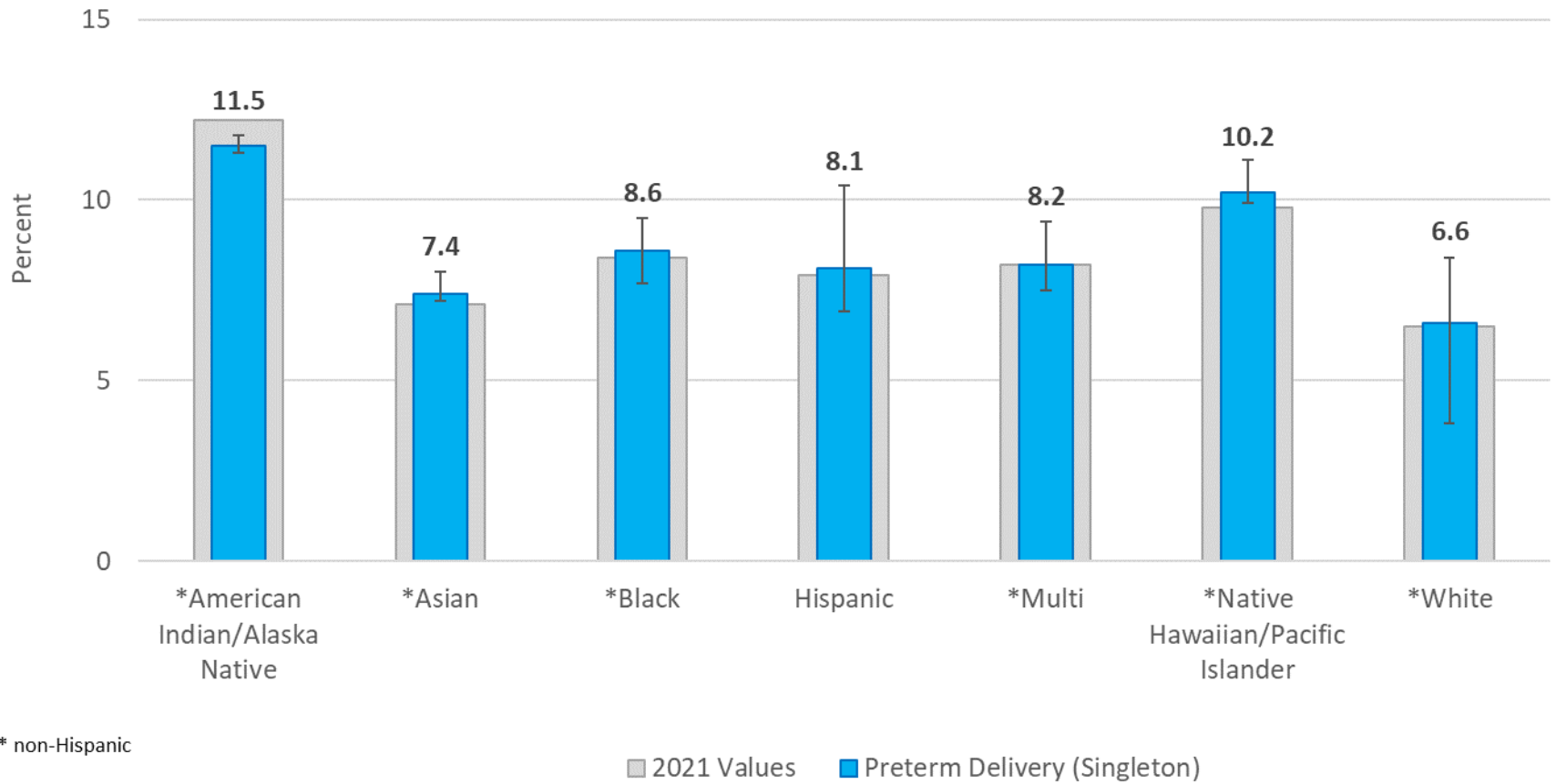
Low Birth Weight by Race/Ethnicity

WA Vital Statistics, 2022



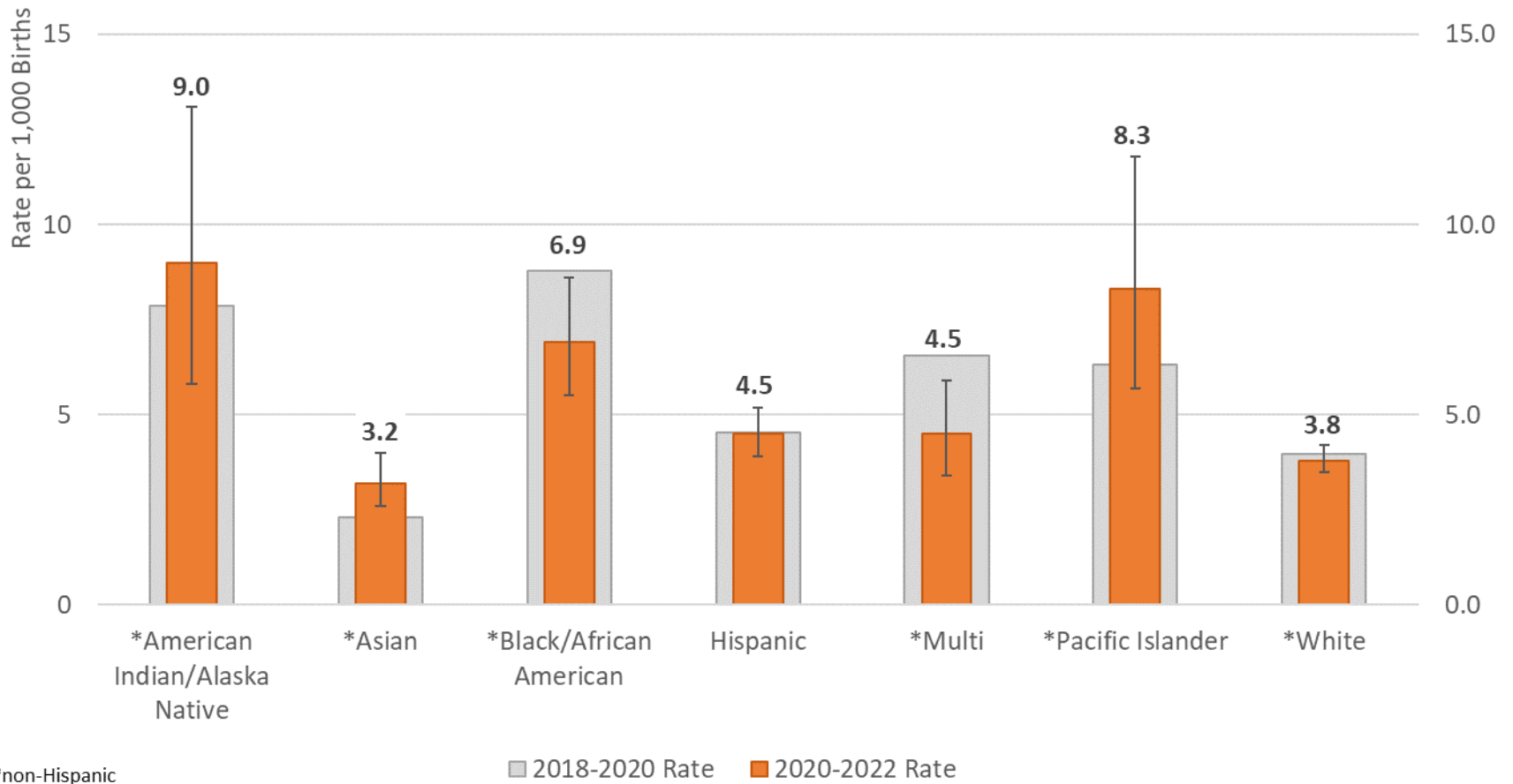
Preterm Births by Race/Ethnicity

WA Vital Statistics, 2022



Infant Mortality by Maternal Race/Ethnicity

WA Infant Death File 2020-2022



Summary

- The birthing population is more racially/ethnically diverse, with multi-racial as the fastest growing category
- Births are down 8% from peak in 2016
- Pregnancies are decreasing among adolescents and young adults overall, but increased in this last year
- Pregnancies are increasing

Summary

- Diabetes and hypertension during pregnancy have not changed since last year, will need more time to see if this is a change in the trend.
- Percentage of Singleton Preterm and Low Weight Birth deliveries have been fairly stable since 2020.
- Relatively low overall rate of infant mortality compared to national rates

Summary

- Racial and ethnic disparities exist across many indicators, including:
 - ❖ Prenatal Care
 - ❖ Low Birth Weight
 - ❖ Preterm Birth
 - ❖ Infant Mortality
- Prenatal Care in the 1st trimester has decreased for everyone, but is lower for those on Medicaid

Perinatal Dashboard

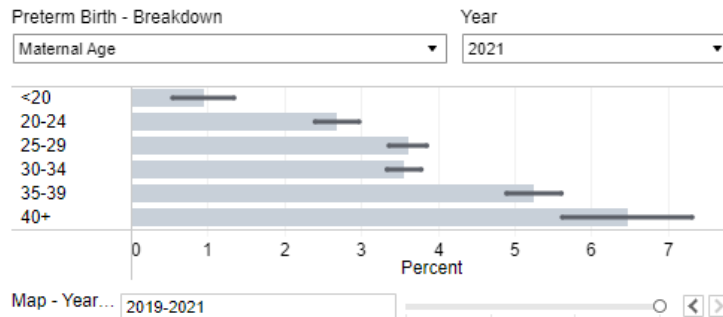
<https://doh.wa.gov/data-and-statistical-reports/washington-tracking-network-wtn/perinatal-data>

Birth Outcomes

Data on birth outcomes are collected through birth certificates. This page shows data on perterm birth and low birth weight among singleton births in Washington. There are breakdowns by county, maternal race/ethnicity, and maternal age which highlight some disparities in these outcomes.

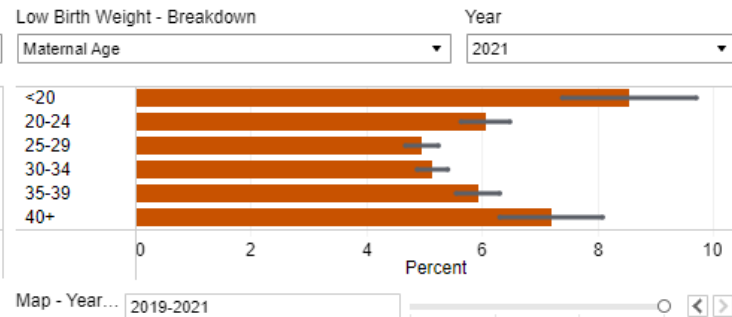
Preterm Birth - State Percent

3.8%

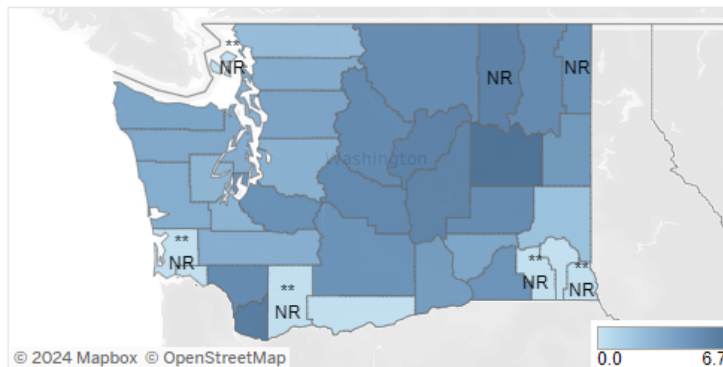


Low Birth Weight - State Percent

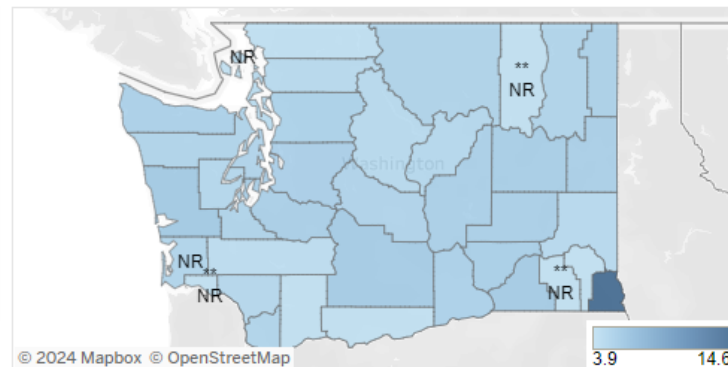
5.6%



Preterm Birth by County, 2019-2021



Low Birth Weight by County, 2019-2021



Questions?

Thank You

Contact:

Kari M Mentzer

Kari.Mentzer@doh.wa.gov



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Within Reach Immunization initiatives

AJIA MCAFERTY MPH
AJIAM@WITHINREACHWA.ORG

WithinReach's Immunizations & Prenatal-to-Three Initiatives & Opportunities for Engagement

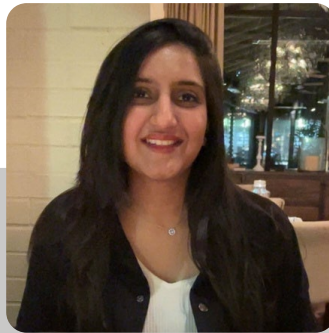
Washington State Perinatal Collaborative Meeting
Thursday May 9, 2024





Aja McAferty, MPH (she/her)

Senior Manager, Coalitions & Partnerships



Drashti Patel, PharmD (she/her)

Project Manager, Immunizations & Partnerships



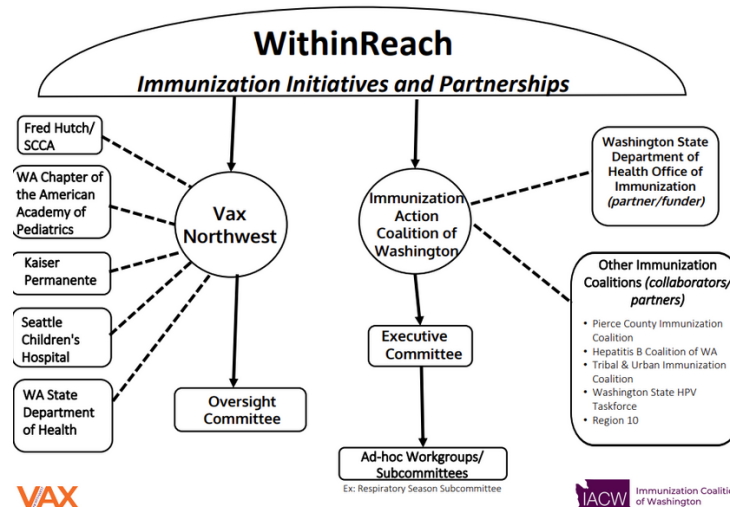
Sandra McAteer, MPH(c) (she/her)

Graduate Intern, Immunizations & Partnerships



Advocate - Working to Improve Systems for Washington Families

The Socio-Ecological Model





Immunization Action Coalition of WA (IACW)

- Founded in 1994, meets virtually 4 times a year (quarterly for 2 hours)
- 2024 - 2025 Priorities
 - Increase proportion of WA residents vaccinated against COVID-19, influenza, and RSV
 - Advocate for increased mobile vaccination efforts in WA
 - Provide WA immunizers with opportunities, tools, and information to implement best practices, with a particular focus on Hepatitis B, HPV, measles (MMR), and vax during pregnancy
 - Disseminate/promote multilingual immunization materials
 - Increase proportion of WA children under two years old vaccinated according to ACIP/CDC guidelines

Vax Northwest's "Perinatal Health Providers + Vaccinations During Pregnancy in Washington" Workgroup

Kaiser Permanente

Perinatal Health
Providers/SMEs

WithinReach

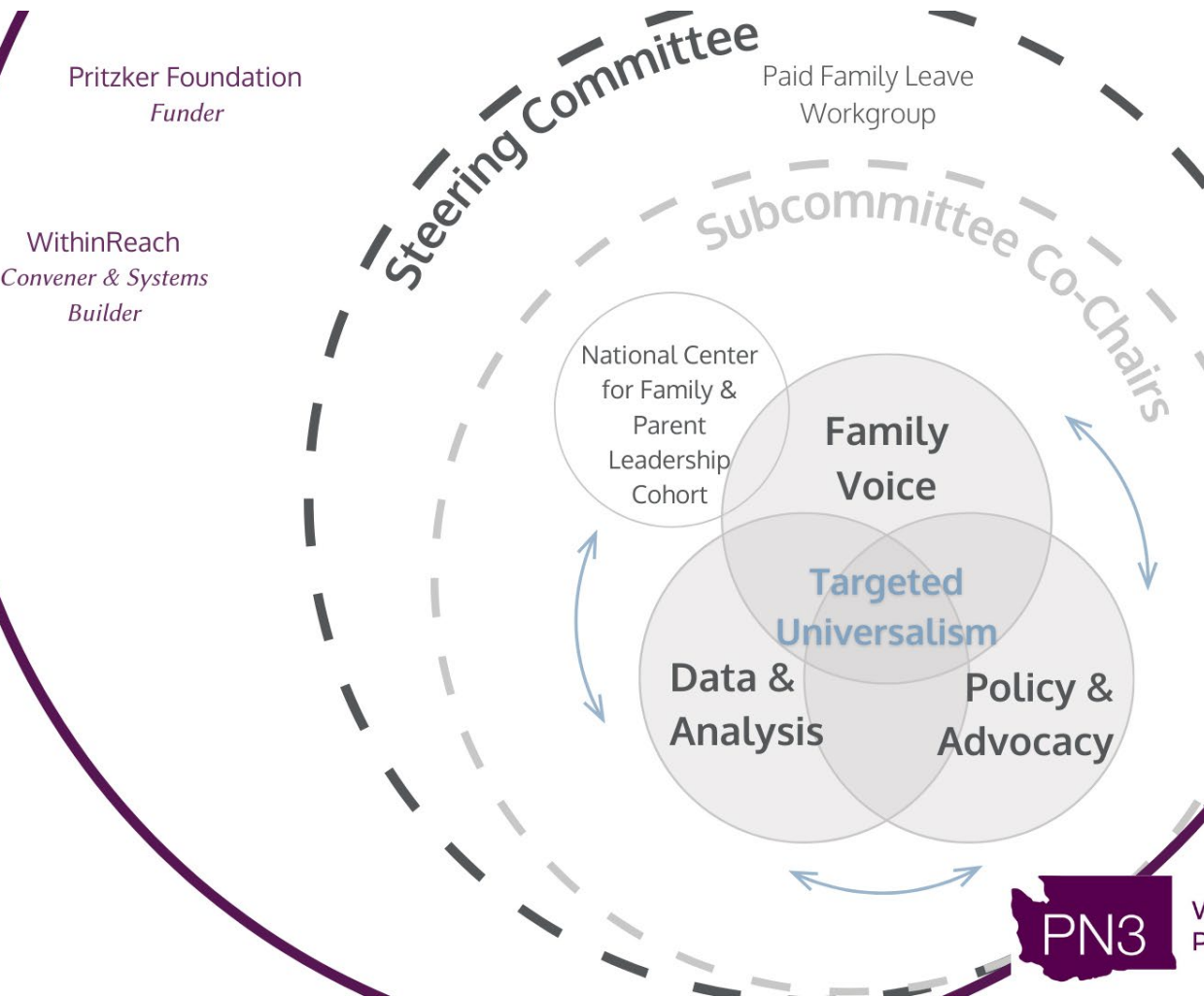
UW/Seattle Children's
Hospital

Washington Chapter of
American Academy of
Pediatrics

Washington
Department of Health



- Oversight Committee was founded in 2008
- The Vax During Pregnancy workgroup started in 2023 aims to (1) identify current vaccine practices and barriers to vaccine administration in OB/GYN and other prenatal/perinatal care settings across Washington State and (2) identify targeted strategies to increase immunizations among pregnant people in Washington State.
 - Timeline: ongoing - June 2025
 - Time Commitment: meets virtually every 3-6 weeks for 1 hour, 1-3 hours every 6 weeks
 - Looking for SMEs to join!
 - Time stipends available to those who meet qualifications



Washington Prenatal-to-Three (PN3) Coalition

- Areas of focus at the systems-level:
1. Increase access to basic needs
 2. Increase access to perinatal and pediatric medical care
 3. Increase family stability by increasing targeted pathways to concrete supports
 4. Improve child developmental health



Washington Prenatal-to-Three Coalition

Immunity Community

a WithinReach Resource



Provider Education -
E-Courses &
Webinars



Events & Conferences
(Immunization Summit,
CDC Pink Book Training
etc.)



Community Outreach
Materials &
Engagement



Engage with IACW

- (1) sign up for the newsletter
- (2) attend coalition meetings
- (3) join a subcommittee



Join the Vax NW's "Perinatal Health Providers & Vaccinations During Pregnancy" Project Workgroup



Check out the immunitycommunitywa.org for continuing education resources, and events.



Share Help Me Grow with patients as a resource for families with children 0-5 years old.



Engage with the PN3 Coalition
(1) sign up for the newsletter (2) attend coalition meetings (3) join a subcommittee

Questions or want to learn more?

Get in touch!

Phone Number

206-830-5161

Email Addresses

ajiam@withinreachwa.org

ic@withinreachwa.org

Website

immunitycommunitywa.org

withinreachwa.org



Doula: Certification & Reimbursement **Eat, Sleep, Console Reimbursement**

BETH TINKER PHD, RN

WSPC – May 9, 2024
Health Care Authority
Eat, Sleep, Console
Reimbursement and status of doula benefit

Beth Tinker, PhD, MPH, RN
Clinical Nurse Consultant – CQCT
Elizabeth.tinker@hca.wa.gov

Objectives

- Eat, Sleep, Console (non-pharmacologic first-line treatment)
 - Overview
 - Apple Health (Medicaid) benefit and reimbursement
 - Utilization
- ▶ Status of Apple Health (Medicaid) doula benefit and reimbursement
 - ▶ Department of Health (DOH) certification
 - ▶ Proviso from this past Legislative session
 - ▶ Current work at Health Care Authority (HCA)
 - ▶ Anticipate doula benefit in early 2025
 - ▶ How to stay informed

Eat, Sleep, Console

Rationale

- Neonatal abstinence syndrome (NAS) and neonatal opioid withdrawal syndrome (NOWS) in context of opioid crisis
- SSB 5380 in 2019, with resulting primary recommendation for reimbursement of nonpharmacologic first-line treatment
- Eat, Sleep, Console is evidence-based best practice
 - “Mom as medicine” – requires birthing parent to room in with infant
 - Eat, Sleep, Console reduces hospital length of stay for infant from 20-21 days to 5-6 days
 - Positive impacts for both birthing parent and baby
- There was no mechanism for hospital reimbursement of L&D discharged birth parent who is rooming in with infant

Apple Health policy change

- October 1, 2022, Apple Health reimburses hospital administrative day rate for birthing parent in context of NAS/NOWS
 - Newborn is typically observed for \geq 96 hours, whereas birthing parent is typically discharged 24-48 hours after delivery
 - Administrative day rate covers room and board for birthing parent who will remain “inpatient” status
- ▶ Vulnerable, and also limited population will benefit

Criteria for newborn administrative day rate

- 1) **Newborn:** The newborn was exposed in utero to a substance or substances that may lead to physiologic dependence and continuous care by the postpartum parent is the appropriate first-line treatment (i.e., “Eat, Sleep, Console” or other non-pharmacologic similar model defined by continuous care by the birth parent).
- 2) **Postpartum parent:** The postpartum parent is able to room in with the newborn and provide continuous support and care. The additional inpatient hospital days on the newborn administrative day rate are for the postpartum parent.

Criteria for newborn administrative day rate (cont.)

3) Hospital: The billing hospital provides all prescribed medications to the postpartum parent for the duration of the stay, including medications prescribed to treat substance use disorder. These should be billed as a separate line item from the inpatient pharmacy, per WAC 182-550-4550.

4) Hospital: The billing hospital provides at least the following services to the postpartum parent while inpatient under this newborn administrative day rate: a hospital bed/rooming in with the newborn, nutritional support for the parent, limited other support services which would be driven by the needs of their newborn (e.g., lactation support, nursing assessment and intervention, rounding, discharge planning).

Admin day rate billing guidance

- Use rev code **0191** with ICD 10 diagnosis code **O99.320** (drug use complicating pregnancy)
 - Rev code 0191 daily rate is currently \$359.97 (as of 11/1/23)
- Bill rev code **0191** under birthing parent's client ID
- Up to 5 days covered under policy
- Use EPA number **870001641** when billing rev code **0191** with diagnosis code **O99.320** and exceed 5 days (i.e., starting with day 6)

Clinical policy and additional guidance is in the [Inpatient hospital services billing guide](#)

Utilization

- Slowly increasing – hospitals have faced numerous challenges
- Multicare is system utilizing/being reimbursed to date – Good Samaritan, Deaconess.
- Washington State Hospitals Association (WSHA) and DOH working to support hospitals

Apple Health doula
benefit

DOH certification

- ▶ Legislative report in 2020. Doula desire to have credential in Washington and not have to work under a billing and supervising provider in order to get Centers for Medicare and Medicaid (CMS) approval on the benefit.
- DOH implemented a voluntary birth doula certification in 10/22, following legislation from last year.
- [HB 1881](#)
- [DOH credential for birth doulas](#)

Proviso from 2024 Legislative session

▶ Proviso budget authority and directive to HCA (not a bill) Supplemental

Operating Budget 2024 - [ESSB 5950](#)

- ▶ Funding and directive for Apple Health doula reimbursement, modeled from the Doulas 4 All benefit design. Requires CMS approval.
- ▶ Funding for a doula program manager at HCA and partial FTE for provider enrollment.
- ▶ Funding for HCA to contract with external org for design and implementation plan for a doula hub and statewide referral system. Legislative report due 6/30/25.

Current work at HCA

- ▶ Target implementation date is early 2025. There is currently no AH reimbursement for doulas.
 - ▶ Doula implementation workgroup meets every 2 weeks
 - ▶ Many components needed to get to implemented benefit
 - ▶ Plan to submit State Plan Amendment (SPA) to CMS in July, hoping for approval in 6mo or so
 - ▶ Rulemaking process started
 - ▶ Benefit design and rate setting
 - ▶ Communications plan. HCA will have public meetings, likely first in July
 - ▶ Doula program manager position posted 5/8/24 and closes 5/22/24. [job posting](#)
 - ▶ Other pieces: Managed care coordination, systems, provider enrollment, provider relations, contracted work, statewide recommendation, communication and education pieces, planning for evaluation, etc.

How to stay informed

- ▶ Ask interested parties, partners, and stakeholders to sign up for the doula distribution list on GovDelivery.
 - ▶ [Sign up to receive birth doula updates from HCA](#)
- A doula mailbox has been created at HCA for inquiries and questions. HCADoulas@hca.wa.gov

Questions?



State QI~ Safe Haven

BAT-SHEVA STEIN DNP, M.SC., RN



WASHINGTON STATE SAFE HAVEN LAW



Phone number: 1-888-510-2229

Safe Haven Law For Newborns

WHAT IS THE LAW?

Safe Haven Law For Newborns

Also known as “Safety of Newborn Children”

In Washington, a parent may anonymously hand over their newborn within 72 hours of birth. Parents can leave an infant at a designated location without fear of prosecution.

- Protects infants from abandonment.
- If the newborn is brought in unharmed from abuse or neglect, guarantees anonymity and immunity from prosecution for parent.



Existing Signs: incorrect phone number

Correct phone number is **1-888-510-2229**. Calling the hotline helps parents create a safe plan for the baby.

- **Drop-off locations must post signs (with phone number)**
 - Emergency department of any hospital
 - Staffed fire stations
 - Federally designated rural health clinics

Safe Haven 24/7 Hotline Signs



Safe Babies • Safe Place
Safe Haven

ONLY WHEN STAFF ARE PRESENT

Refugio Seguro

SOLO CUANDO EL PERSONAL ESTÁ PRESENTE

1-888-510-2229

- **24-hr Hotline Number (call or text):** 1-888-510-2229; order signs through [National Safe Haven Alliance](#).
- **Free signs for locations with financial need:** Locations with financial need can request signs through an [online form](#).
- **Share information with partners:** Share this critical change with your community partners.

Resources

- **Washington State Department of Children, Youth, and Families:** [Safety of Newborn Children Law](#)
- **Transfer of newborn to qualified person:** [Revised Code of Washington 13.34.360](#)
- **Order new Safe Haven signs** (order signs with phone number): [Order Signs | Nsha \(nationalsafehavenalliance.org\)](#)
- DOH will provide financial assistance to drop-off locations with a financial need. Link to [request-https://fortress.wa.gov/doh/opinio/s?s=SafeHaven](#)
- **Questions?** Please email: Bat-Sheva.Stein@doh.wa.gov



2024 Hemorrhage Grants

BAT-SHEVA STEIN

Hemorrhage Grants

1. Promote hospital specific best practices in preventing maternal hemorrhage which may include staff education, hemorrhage carts, and supplies to treat maternal hemorrhage including:
 - a. Maintain a hemorrhage cart or equivalent with supplies, checklists, and instruction cards for devices or procedures where antepartum, laboring, and postpartum patients are located.
 - b. Ensure immediate access to first- and second-line hemorrhage medications in a kit or equivalent per the unit's obstetric hemorrhage emergency management plan.
 - c. Provide scale on hemorrhage cart or other location to quantify blood loss.

- Whidbey Healthcare
- Multicare Yakima
- Kittitas Valley Healthcare
- Multicare Valley
- Pullman regional Hospital
- Jefferson Healthcare
- Harbor Regional Health
- Island Health
- Mason General Hospital
- Lake Chelan Health
- Providence Centralia
- Multicare Capital Medical Center
- Confluence healthcare
- Franciscan St Francis
- Multicare Tacoma General
- Othello Community
- Multicare Good Sam
- Prosser Memorial

- Prov Holy Family Foundation
- Swedish Edmonds
- Peacehealth St. Joseph
- VM Franciscan Seattle
- Multicare Auburn
- Peacehealth St. John
- Multicare Deaconess
- Prov. Sacred Heart
- Mid Valley Omak
- Astria Sunnyside Hospital
- Coulee Medical Center
- Skagit Regional
- Whitman hospital
- Legacy Salmon Creek
- Overlake
- Evergreen Health
- Peacehealth SW



Rural Obstetric Workgroup

BAT-SHEVA STEIN

Rural Obstetric Workgroup

- Monthly meeting for those working in rural obstetrics or wanting to contribute
- Brainstorm solutions to current rural obstetric issues
- Likely meet on Fridays (once a month)
- Want to participate? Bat-Sheva.Stein@doh.wa.gov



Implementing the Hypertensive Disorders of Pregnancy and Postpartum (Blue Bands): A Washington State Initiative



May 9th 2024

Examples of Blue Bands:



- Rebecca Penders, PhD, RNC-OB, C-ONQS
- Washington State Dept of Health/ Providence
- Rebecca.Penders@Providence.org

High Blood Pressure and Preeclampsia During and After Pregnancy



- The Blue Band Initiative is an effort to alert health care providers about a patient's risk for preeclampsia. Patients who are at risk of developing preeclampsia or having elevated blood pressure after giving birth, will wear a blue wrist band during pregnancy and after delivery of their infants.
- If you are a patient that has been asked to wear a blue band, keep it on until your provider takes it off or tells you to take it off, even after you've left the hospital.

2023-2024 Overview and Hospitals with a Blue Band Program

September 2023 (Hospital/ Facility/Clinic/ Practice policies)
October 2023 (the wrist bands, Blue Bands, and Patient/Provider Experience)
November 2023 (Patient Education and Support, Fall Survey)
December 2023 (Staff education and Data Collection)
January 2024 (Review Survey Data and Listening Session #1)
February 2024 (Communication and Listening Session #2)
March 2024 (First responders and Communication)
April 2024 (Comm with clinics, Blood pressure cuffs)
May 2024 (BP cuffs, Check in and Spring Survey)
June 2024 (Check in)
July 2024 (option to take a break for summer)

- Common Spirit, St. Francis Hospital, Federal Way, WA
- Providence Regional Med Center, Everett, WA
- Evergreen Hospital, Kirkland, WA
- MultiCare Yakima Memorial, Yakima, WA
- Kittitas Valley, Ellensburg WA
- Skagit Regional Health, Mount Vernon, WA
- Common Spirit, Virginia Mason Franciscan Health Seattle, WA
- Common Spirit, Saint Anne, Burien, WA



Blue Band Grants –



1. 40 hemorrhage contracts executed.
2. 35 Blue band contracts executed.
3. We are not issuing any new contracts at this time.
4. Facilities and organizations should be purchasing or spending the money and submitting an A19 form to me for reimbursement. **Please watch the deadlines on your money- it is either June 30th or September 30th.**




Bat-Sheva Stein DNP, MSc, RN
WA Dept of Health
Bat-Sheva.Stein@doh.wa.gov

- Multicare Deaconess
- Othello Community
- Prov Holy Family Foundation
- Prov. Sacred Heart
- Skagit Regional
- Whidbey Healthcare
- Overlake
- Peacehealth St. John
- Peacehealth SW
- Shades of Motherhood- Spokane
- Spokane Health District
- Providence Centralia
- Multicare Capital Medical Center
- Kittitas Valley Healthcare
- Confluence healthcare
- Lake Chelan Health
- Mid Valley Omak

- Multicare Yakima
- Clallam first steps family support
- UW Medical Center
- Multicare Auburn
- Multicare Tacoma General
- VM Franciscan Seattle
- Multicare Valley
- Central WA Family medicine
- Benton-Franklin Health District
- Franciscan St Francis
- Legacy Salmon Creek
- Peacehealth St. Joseph
- Samaritan- Moses Lake
- Evergreen Health
- Multicare Good Sam
- Swedish Edmonds
- Franciscan- St. Elizabeth
- Providence St. peter's

Learn more by visiting our website: [DOH: Blue Band Initiative](#)



Washington State Department of HEALTH

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- Pregnancy
- Radio story - Love and Health
- Washington Blue Band Initiative
 - Guidelines and Resources
 - Hospital and Health Care Provider Resources
- Washington State Perinatal Collaborative (WSPC)

Washington Blue Band Initiative

Washington state hospitals may start implementing the Blue Band Initiative in September of 2023. [Fill out the Blue Band Participation form](#) if your facility would like to participate or if you'd like more information.

High Blood Pressure and Preeclampsia During and After Pregnancy

The Blue Band Initiative is an effort to alert health care providers about a patient's risk for preeclampsia. Patients who are at risk of developing preeclampsia or having elevated blood pressure after giving birth, will wear a blue wrist band during pregnancy and after delivery of their babies.

If you have been asked to wear a blue band, keep it on until your provider takes it off or tells you to take it off, even after you've left the hospital.

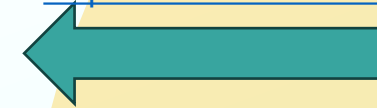
Examples of Blue Bands:



For more Hospital Forms. . .

The screenshot shows the Washington State Department of Health website. The header includes the logo and navigation links: About Us, Contact Us, and Newsroom. A search bar is present. The main navigation menu has categories: You & Your Family, Community & Environment, Licenses, Permits, & Certificates, Data & Statistical Reports, Emergencies, and Public Health & Provider Resources. The breadcrumb trail reads: Home | You & Your Family | Women's Health | Washington Blue Band Initiative | Hospital And Health Care Provider Resources. The main content area is titled 'Hospital and Health Care Provider Resources' and features a sub-section 'Examples of Hospitals Forms'. Below this, there is a paragraph: 'This packet provides examples of what some hospitals have used when implementing the blue band initiative.' followed by a link: 'Hospital Forms Example Packet (PDF)'. A second section is titled 'Blood Pressure Resources for Your Patients' with links for: 'General blood pressure information', 'Video resources and tools for you to help your patient self-monitor their blood pressure. (waportal.org)', 'Blood Pressure (preeclampsia.org)', 'How to take your blood pressure (YouTube)', and 'Blood Pressure Log (preeclampsia.org)'. A left sidebar contains 'In this section' with links for 'Washington Blue Band Initiative', 'Guidelines and Resources', and 'Hospital and Health Care Provider Resources'.

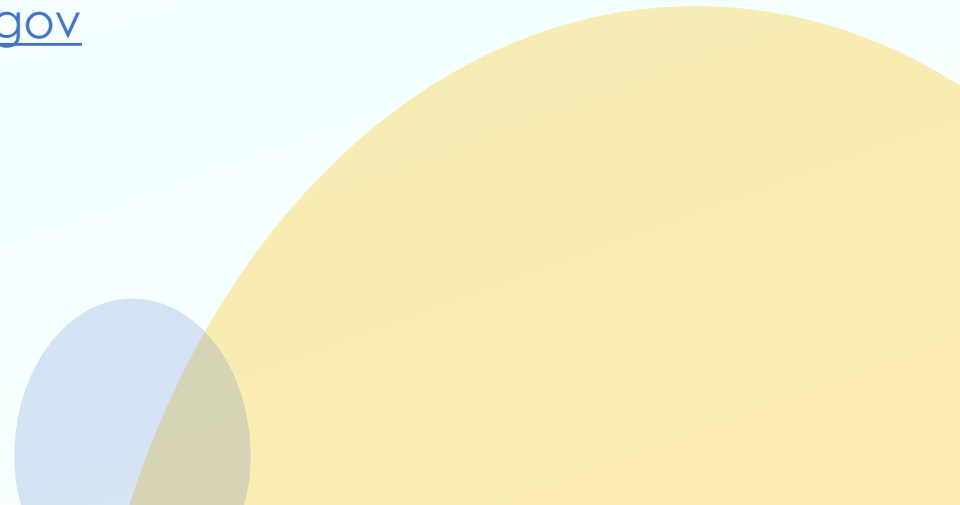
Click here:
[Hospital and Health Care
Provider Resources |
Washington State
Department of Health](#)



Hospital Form Example
Packet (PDF)

Thanks!

- To sign up your facility/practice/clinic to participate please use this [link-](#) once on the page the sign-up link is at the top.
- If you know someone that would like to participate in this work, contact Rebecca Penders-
Rebecca.Penders@Providence.org
- If you have any other questions or suggestions, please contact Bat-sheva.Stein@doh.wa.gov
-





State QI~ Human Milk Banking

SHARILYN EMHOFF BSN, RN

Donor Human Milk

Contact Krystle Perez MD, MPH for help or equipment needs

kmperez@uw.edu

Contact Sharilyn Emhoff BSN, RNC-OB to join the bimonthly meetings

sharilynemhoff@multicare.org



State QI -Team Birth & perinatal mental health

JENICA SANDALL
JENICAS@WSHA.ORG



Syphilis Discussion

RITA HSU MD



Updates & Sharing ~ All Participants

