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Opening Remarks



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2026 OPC Updates

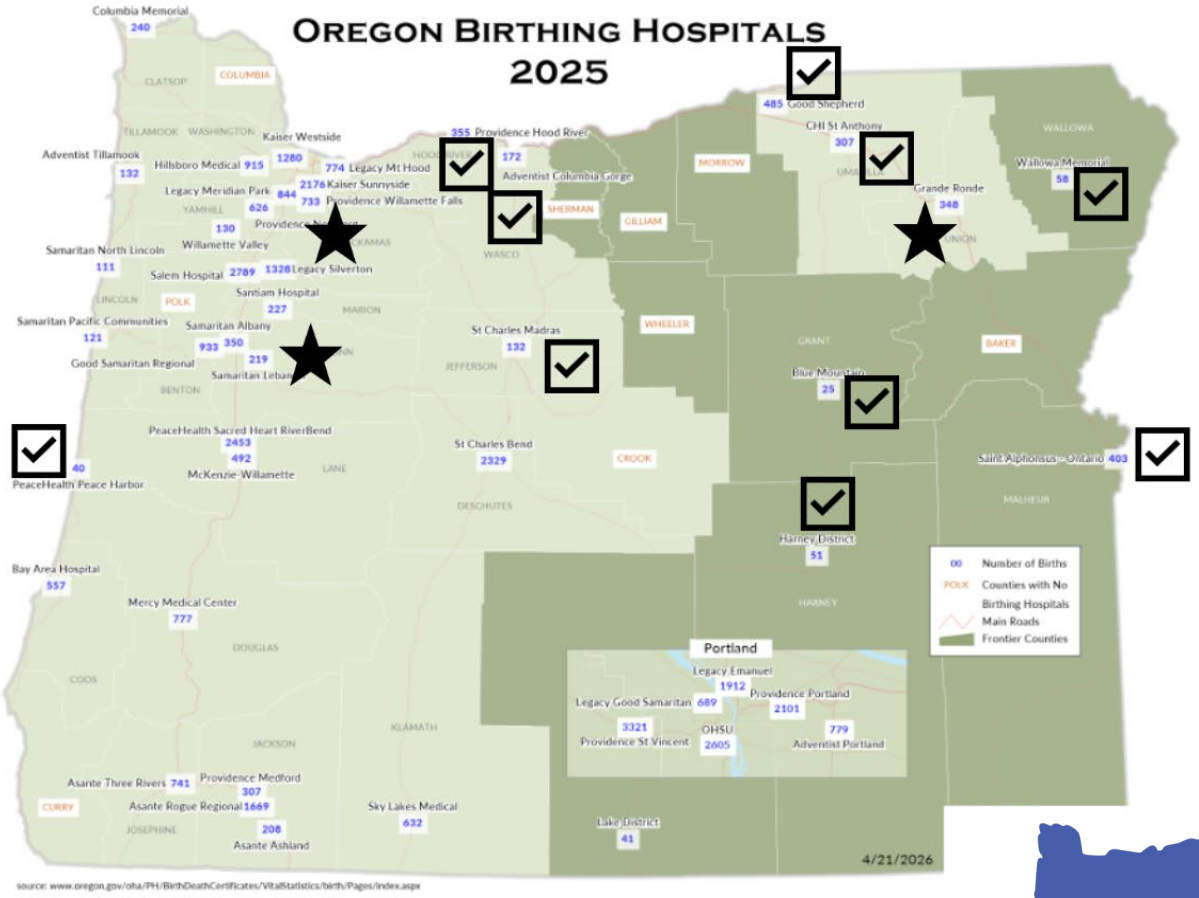
Celebrations

OPC Mobile Simulation Program Launched!

- Providing on-site simulations to strengthen maternal and newborn emergency care in rural Oregon
- Created in response to requests from rural hospitals
- 3 new OPC staff & support from The Nurses Miller
- 15 simulations since June 1st
- Plan to reach 30 hospitals
- Funded by the Rural Health Transformation Program
- OPC Simulation Playbook coming soon!

☑ COMPLETE

★ SCHEDULED



Increased Funding & Participation

- New hospitals joining OPC initiatives
- 31/45 OR birthing hospitals are OPC participating hospitals
- 32 hospitals enrolled in the perinatal SUD initiative
- 27 hospitals participated in OPC workgroups
- 22 hospitals & 28 community birth practices completed the newborn resuscitation initiative
- Growing representation on OPC governing board & Steering Committee from across the state
- New funding from OHA PHEG, OHA RHTP, & Roundhouse Foundation

Strong Partnerships Leading to Action

- Office of Rural Health
  - RHTP partnerships (mobile simulation & technical assistance)
  - Map of 20/30/60 Minute Drive Time to Birthing Hospital
- Oregon Health Authority
  - Targeted OHA RHTP investments in MCH
  - OPC taking action on MMRC recommendations
  - Perinatal SUD data tracking
- AWHONN
  - Co-planning QI-focused continuing education
- Hospital Association of Oregon
  - Maternity Care Access Convening
  - Planning for levels of care/system of care work
- Momnibus Coalition
  - Relationships leading to stronger legislation to support MCH

ORH map of drive time to birthing hospital

Regional Hospital Visits

- OPC is visiting one region (7-10 hospitals) each year
- 2026 visits to southern Oregon
  - Roseburg, Coos Bay, Grants Pass, Medford, Klamath Falls, & Lakeview
- Themes:
  - Deep commitment to care & community
  - Limited time for QI & education
  - Provider staffing challenges
  - Financial challenges



Completed Projects

- Newborn Resuscitation Initiative
- 2026 legislative session
- Maternity Care Access Convening & report
- Perinatal SUD convening
- Closed to admission/OB capacity convening
- OPC conference presentations at:
  - NNPQC
  - NWIPA
  - AWHONN District 1
  - OPCA
  - OPH
  - AAP District 8

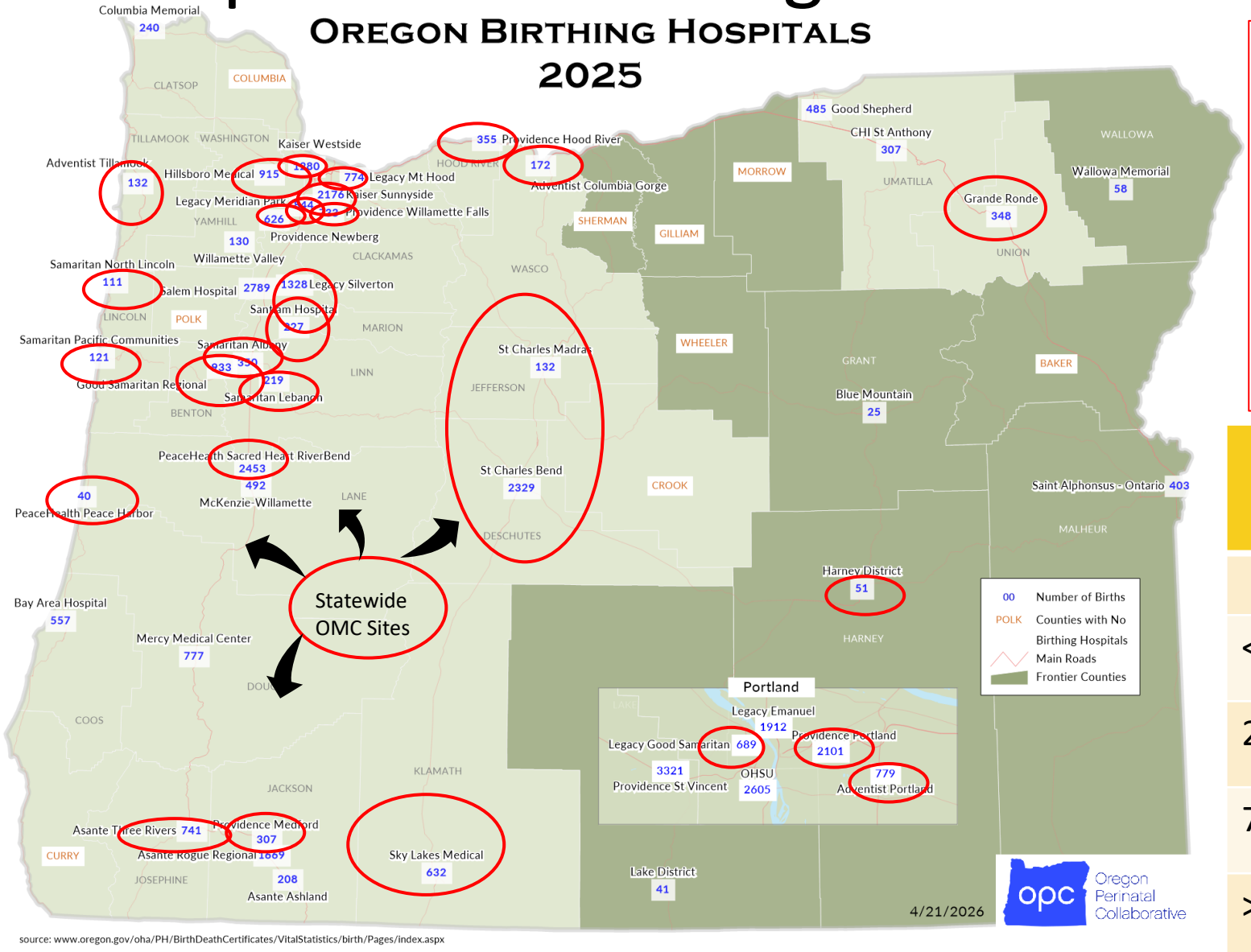
2026 Maternity Care Access Convening Report

Celebrating Oregon Nurse Leaders



AWHONN District 1 Conference Earlier this month!

Newborn Resuscitation:
29 Hospitals & The Oregon Midwifery Council



Oregon Midwifery Council

Represents > 20 sites
(birth centers & home birth practices)
- Annual volume 5-168

2025 Participating Hospital Birth Volume (Vital statistics)	
Annual Birth Range: 40 - 2,268	
<250	9
250-699	7
700-1,500	9
>1,500	4

OPC Newborn Resuscitation Initiative

What:

Areas of Focus

- Unit/ Team Readiness
- Timely Intervention
- Post Resuscitation Care
- Communication
- System Learning

How:

Components of initiative

- 10 virtual meetings
- 2 in person meetings
- 25 simulation sessions with 475 attendees
- 2 action periods
- 4 data measures

Statewide results:

As of October 2026

- Shift in documentation of pre-briefs
  - From ~10% to ~70%
- Increased use of LMAs
- Developed themes/ recommendations from newborn death case reviews

- ✓ 100% Virtual Meetings
- ✓ 100% In Person Meetings
- ✓ 2 Storyboards
- ✓ 2 Action Period Plans
- ✓ All data through September

NEWBORN RESUSCITATION HONOR ROLL



- ❖ Grande Ronde Hospital
- ❖ Harney District Hospital
- ❖ Hillsboro Medical Center
- ❖ Kaiser Sunnyside Medical Center
- ❖ Legacy Good Samaritan Medical Center
- ❖ Providence Hood River Memorial Hospital
- ❖ Providence Portland Medical Center
- ❖ Samaritan Albany General Hospital



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Towards an OPC Award

- OPC wants to create ways to recognize the outstanding work of our partners
- We'll be introducing awards at next year's OPC summit
- Please let us know what kind of recognition would be most meaningful & impactful for you!

Recognizing Annie Gill – Santiam Memorial Hospital

- Contagious enthusiasm for education & QI
- Consistently volunteers to present in initiative & CAH meetings
- Model of joy in work

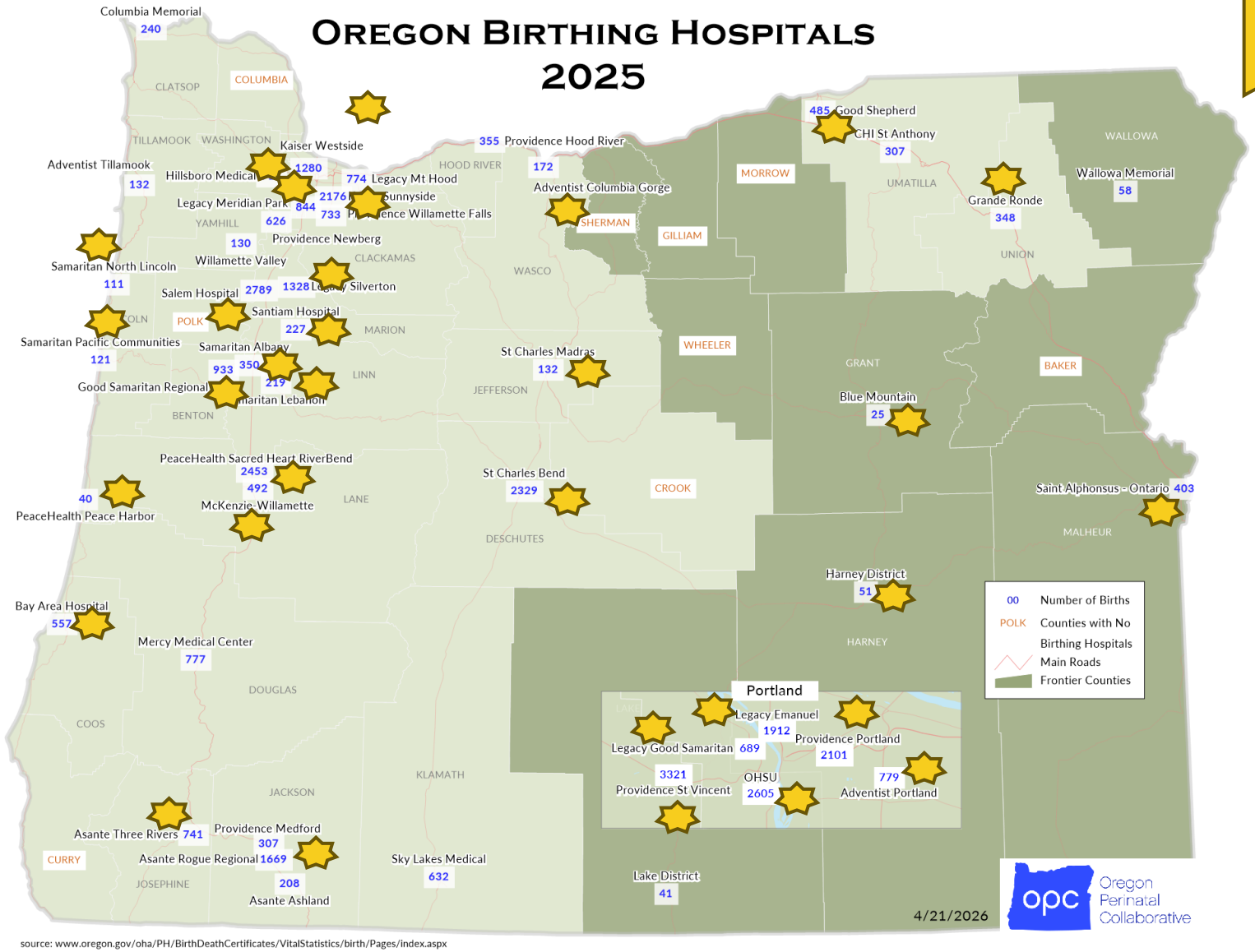


Current & Ongoing Projects

OPC Perinatal SUD QI Initiative

September 2026-December 2027

32 Hospitals Participating!



source: www.oregon.gov/oha/PH/BirthDeathCertificates/VitalStatistics/birth/Pages/index.aspx

2025 Participating Hospital Birth Volume (vital statistics)	
Annual Birth Range 25 – 3,321	
Volume	# of sites
<250	9
250-699	7
700-1,500	6
>1,500	10

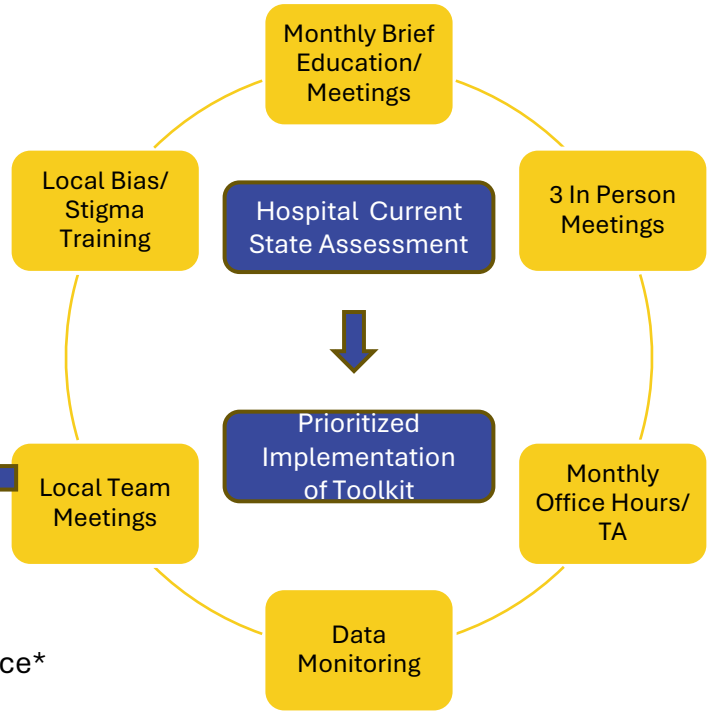
OPC Perinatal SUD Hospital QI Initiative

Global aim

Reduce morbidity and mortality among women and birthing people during pregnancy and within 1 year postpartum by improving identification, treatment and support for those with substance use disorder and their newborns.

Goals of the initiative

- Increase screening for SUD
- Increase naloxone dispensing to prevent fatal overdoses
- Increase MOUD initiation to prevent overdoses & support recovery



Multidisciplinary Teams:

- Treatment/ BH
  - Community Partner & Hospitals
- Newborn & OB Providers
- Nursing
- Peer support/ doula with lived experience*
- Pharmacy

Perinatal SUD Workgroups

Workforce Development

- No cost ASAM Training for MOUD providers
- Building two open-source curricula for perinatal SUD care that center lived experience, trauma-informed care, harm reduction and culturally aligned care
  - Doulas/birth workers: SUD in pregnancy and postpartum
  - Peers/SUD professionals: pregnancy and postpartum
- A 4-hour pilot of each training in Fall 2027, then open-access materials hosted by OPC
- Curriculum development led by Diana Smith & Molly McArt

Payment Reform

- Naloxone billing work with OHA
- Development of perinatal SUD policy priorities
- OHA peers in hospital workgroup
- Connection with alcohol and drug policy commission

Quarterly CAH Maternal & Infant Health Meeting

Purpose:

To strengthen the quality and sustainability of perinatal care in critical access and small volume hospitals in Oregon

- Quarterly meeting for small, rural, and Critical Access Hospitals
  - Open to all hospitals with less than 250 births annually
- Completed first year of meetings
- 18 hospitals & OB providers in Baker City have participated
- Meetings have focused on nurse staffing, simulation, & MFM consultation
- Next meeting focus: nurse education

Community Birth Transfer Partnership

Oregon's statewide home birth and birth center to hospital transfer improvement program

- Created through a stakeholder workgroup in 2020
- Formed by research on patient experience of transfers
- Launched in 2021
- Open to every birthing hospital in Oregon

Updates

- 4 new hospitals joined
- Clinical Lead for CBTP – Emilia Allen
- Adjusting program to meet needs of small & rural hospitals
- Significant progress towards legally protected joint case review
    - Oregon Patient Safety Commission – Patient Safety Organization

CBTP Current Status

14 participating hospitals:

Good Samaritan Regional Medical Center
Hillsboro Medical Center OHSU
Kaiser Sunnyside
Kaiser Westside
Legacy Emanuel/Randall
Legacy Mt Hood
McKenzie Willamette
OHSU
PeaceHealth Riverbend
Providence Hood River
Providence Portland
Providence St. Vincent
Salem Health
Wallowa Memorial Hospital

And more hospitals interested in joining!

Participating hospitals = 54% of Oregon births

Coordinated Congenital Syphilis Prevention

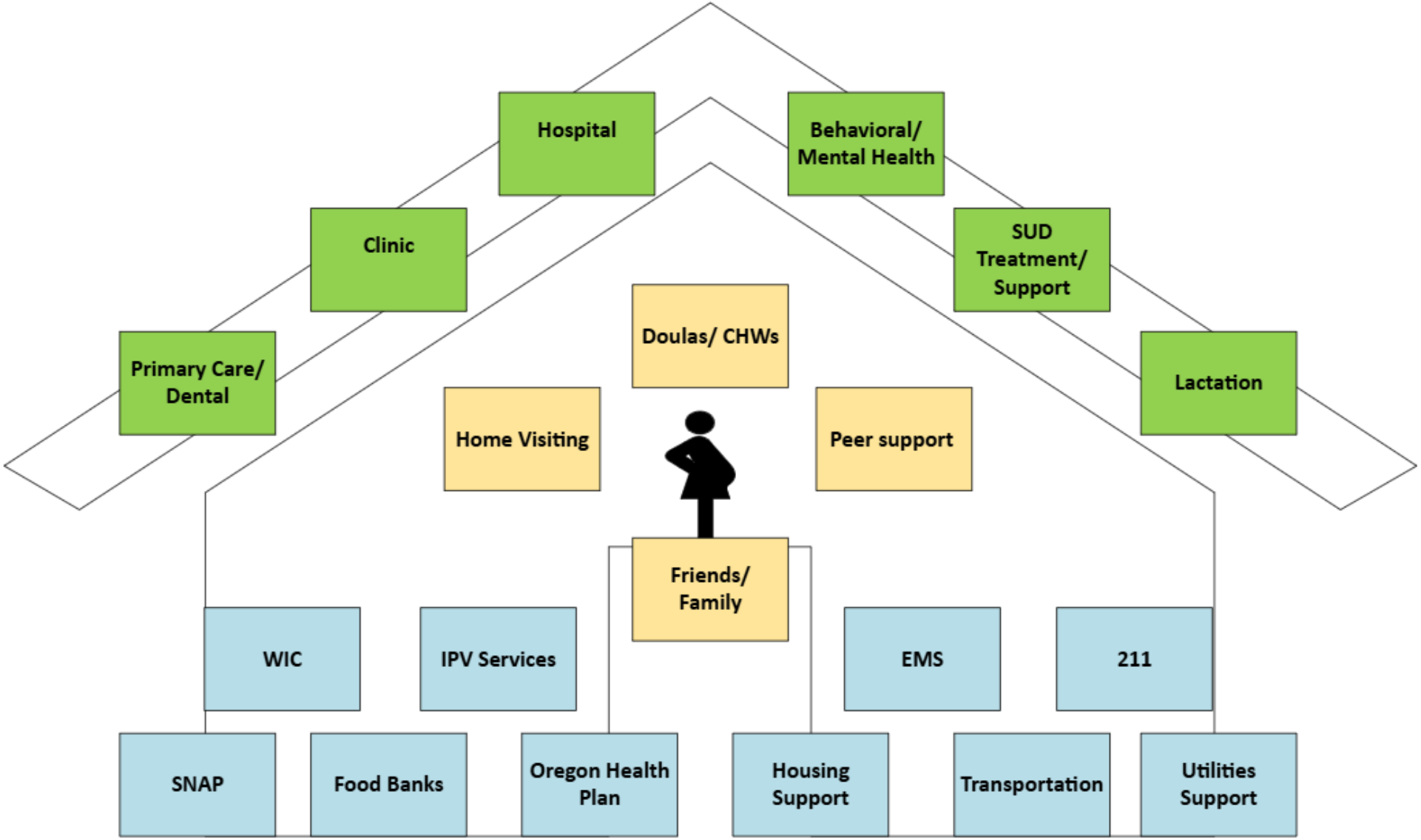
Aim: improve syphilis diagnosis & treatment for pregnant people not receiving routine prenatal care

- Partnership with OHA STD program
- Clinical lead: Dr. Irina Cassimatis
- Congenital syphilis prevention guides for:
  - Emergency Departments
  - Local Public Health
  - Community organizations
- 12 site visits to Oregon Emergency Departments with County Health Department partners
- Upcoming webinar series

OPC Coordinated Congenital Syphilis Prevention Guides & Resources

Challenges

Oregon Maternal Health System



Impact of Federal Cuts

- HR1 cuts: loss of $15 billion in federal funding in Oregon over 10 years
- 15% cut to federal Medicaid spending
  - $421 million budget gap in Oregon for 2027-2029 biennium
  - State in process of deciding what to cut
- 9% drop in SNAP enrollment in 1 year
- 15% drop in ACA marketplace enrollment in OR in 2026
- Spike in food bank visitor numbers
- Nonprofits seeing reduced federal funding
- OHA page tracking impacts of federal changes: https://www.oregon.gov/oha/pages/federal-changes.aspx

Opportunities

- Collaboration & community-building
- Resource sharing
- Focus on maternal & infant health from leaders in Oregon
  - Interest in preventing maternity care deserts
  - Openings for meaningful policy change
  - Progress on perinatal SUD payment reform
- Rural Health Transformation Fund focus on perinatal health
  - OPC investments
  - OHSU 24/7 Perinatal SUD advice line
  - Nurture Oregon site expansion & supports
  - Center M expansion to rural clinics
  - Perinatal workforce development & more!

Highlight: 24/7 OB Addiction Advice Line

- **How to reach the line:**
  - Call OHSU's Physician and Advice Referral Service at **503-494-4567**
  - Ask for the OB Addiction Advice Line
  - You will receive a call back within an hour
- **How can they HELP?**
  - Consultation for **all treatment settings** including hospitals, outpatient clinics, and specialty addiction treatment
- Can help with:
  - Managing opioid withdrawal
  - Starting medications for substance use in peripartum individuals
  - Complex buprenorphine inductions
  - Any addiction-related questions

What’s next?

Expansion of OPC Perinatal SUD Work

- RHTP Catalyst Grant for rural perinatal SUD work
- OPC will expand our perinatal SUD work to include:
  - Statewide coordination
  - Rural engagement & outreach
  - Data infrastructure
  - Quality improvement support
  - ECHO Community of Practice for MOUD providers
- Excited to welcome our new staff:
  - Alicia Lee, MPH – Program Administrator
  - Announcing soon: OPC Perinatal SUD Director

Maternity Care System Work

- MMRC received CDC funding for initial Levels of Care work
- OPC seeking funding to create statewide committee to work on statewide, coordinated, sustainable system of maternity care including:
  - Maternal levels of care work
  - Planning for L&D closures and crises
  - Payment reform for pregnancy, birth, and postpartum care to provide adequate reimbursement for complex care
  - Sustainable growth of the clinical maternity care workforce:
- Close coordination of work with OHA, led by MMRC recommendations

2027 Momnibus Bills

- Perinatal SUD
- Maternity care system/workforce
- Safe care for immigrant families
- Poverty mitigation
- Home visiting programs
- Folate enriched masa

And renewal of OPC funding!

Momnibus 2027

Improve access to perinatal SUD Care

- Support and grow programs which integrate physical and behavioral health care for pregnant and postpartum people
  - Improve coordination of services to increase access
  - PMPM for Nurture programs
  - Braided funding stream for residential treatment
  - Hospitalization for medication stabilization during pregnancy and postpartum
  - Ensure access to stable housing for families in recovery

Momnibus 2027

Maternity care system/workforce

- Establish maternity care system taskforce to make recommendations to create a statewide, coordinated, sustainable system of maternity care including:
  - Maternal levels of care work
  - Planning for L&D closures and crises
  - Payment reform for pregnancy, birth, and postpartum care to provide adequate reimbursement for complex care
  - Sustainable growth of the clinical maternity care workforce
- Nurse staffing ratio flexibility for low-volume labor & delivery units
- Loan forgiveness for rural OB and newborn providers
- Pilot funding for doulas to become clinicians

Choosing Our Next QI Initiatives

Some possibilities:

- Sepsis (workgroup 2027; initiative 2028)
- Vitamin K sprint
- Maternal mental health
- Breastmilk/newborn feeding
- Prevention of primary cesarean

We want to hear from you!