

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA

AIM Comprehensively Lessening Opiate Use Disorder Impact Data Collection Plan



This is a guide for the data to be collected and the frequency of data collection for the Comprehensively Lessening Opiate Use Disorder Impact (cLOUDi) Prenatal Pilot initiative. The front page of each data collection form is included for reference, full forms are available at pqcnc.org.

Summary of Data Collection

Document	Frequency
PQCNC cLOUDi Prenatal Pilot Snapshot	July 2021 and December 2021 (beginning and end of pilot initiative)
PQCNC cLOUDi Prenatal Pilot Data Collection Sheet	All prenatal patients on one designated cLOUDi data collection day each month

cLOUDi Prenatal Pilot Snapshot

Complete the cLOUDi Prenatal Pilot Snapshot in July 2021 and in December 2021 (the beginning and end of the initiative). Each team will receive a link to complete this snapshot.

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA
Comprehensively Lessening Opioid Use Disorder
Prenatal Pilot Impact Snapshot

1. Date: _____
2. Clinic name: _____
3. Name: _____
4. Email: _____
5. Title: _____
6. On average, approximately how many **total prenatal appointments** does your clinic have in a month? _____

****Questions #7-15 refer to verbal or written substance use disorder screening****

7. Approximately what percentage of your prenatal patients are screened for substance use disorder (SUD) using a verbal or written screening tool at any time during their pregnancy? _____

If 0%, skip to question #15. All others, continue to question #8.

8. Who in your office conducts verbal SUD screenings with prenatal patients, if applicable?

9. Who in your office provides the written screening tool to prenatal patients, if applicable?

10. At which visit(s) does the verbal or written SUD screen typically occur?

11. Substance use disorder screening tools that have been validated for use in pregnancy include:

- NIDA Quick Screen
- Integrated 5 Ps Screening Tool
- Substance Use Risk Profile Pregnancy Scale
- 4 Ps Plus
- Community Care of North Carolina (CCNC) Pregnancy Home Risk Screening Form

Does your clinic utilize a standardized, validated verbal or written SUD screening tool listed above?

- Yes No Unknown Not applicable

12. If yes to #11, list the name of the verbal and/or written SUD screening tool(s).

13. Approximately what percentage of your prenatal patients that receive a verbal or written SUD screen have a positive result?



cLOUDi Prenatal Pilot Snapshot

cLOUDi Prenatal Pilot Data Collection Plan



Patient Data Collection Sheet

Complete the cLOUDi Prenatal Pilot Patient Data Collection form for all prenatal patients on the one designated cLOUDi data collection day each month.

Perinatal Quality Collaborative of North Carolina
cLOUDi Prenatal Pilot
Patient Data Collection Form



cLOUDi Prenatal Pilot Data Collection

1. Month/Year: _____
2. Patient Number: _____
3. Patient race/ethnicity:
 - White
 - Asian
 - Black or African American
 - Native Hawaiian and Other Pacific Islander
 - American Indian or Alaska Native
 - Multiracial
 - Hispanic or Latino
 - Refused/Don't know
4. Payor:
 - Medicaid
 - BCBS/State
 - Uninsured
 - Other
 - Refused/don't know
5. Was patient **screened for substance use disorder (SUD)** at a prenatal visit using a **validated verbal or written screening tool**?
 - Yes
 - No
 - Patient previously identified as having SUD, and/or in a treatment program
 - Unknown
6. Did patient **screen positive for SUD** using a **validated verbal or written screening tool**?
 - Yes
 - No
 - Patient previously identified as having SUD, and/or in a treatment program
 - Unknown

CONTINUE TO NEXT PAGE

cLOUDi Prenatal Pilot Data Collection Plan