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PLAN

Identify an opportunity and plan for improvement.

Area for Improvement

Infants born to hepatitis B surface antigen-positive (HBsAg+) women have a 40-90% chance of acquiring hepatitis B. This can be prevented 85-95% of the time by providing hepatitis B immunization to the infants.

Target Goal

At least 90% of infants born to HBsAg+ mothers receive HBIG and hepatitis B vaccine within 12 hours of birth. At least 90% of these infants complete the hepatitis B vaccine series on time. At least 90% of susceptible contacts of the mothers will receive hepatitis B vaccine.

Baseline Data

- 2/2 infants born to HBsAg+ mothers received hepatitis B vaccine and HBIG within 12 hours of birth.
- 1/11 infants born to HBsAg-unknown mothers had documentation of treatment within 12 hours of birth.
- Data on contacts of mothers is unavailable.

What change ideas (theories) did you have before you started testing changes?

Develop a system for better documentation of follow-up and train District Office staff to elicit household and sexual contacts.

DO

What ideas for improvement did you test?

- Implemented spreadsheet for tracking HBsAg+ pregnant women and infants born to them.
- Developed questionnaire and database for interviewing contacts, determining their susceptibility to hepatitis B, and documenting vaccination (if indicated).

STUDY

What were the results of your test(s)?

Now each pregnant woman who is HBsAg+ is identified on a spreadsheet.

The spreadsheet facilitates complete follow-up on all infants.

A contact database has been developed, but case management of household and sexual contacts has not yet begun.



ACT

What lessons did you learn from the process? How will this change be sustained?

Identification and follow-up of HBsAg+ pregnant women is happening, but documentation has not been robust.

The spreadsheet is saved in a shared network folder where multiple staff can access it, providing redundancy to the system for the first time.

We do a good job ensuring treatment for babies born to HBsAg+ moms, but have poor follow-up of babies when mom's status is unknown.

The Infectious Disease Section's "Hepatitis B Protocol" has been updated to include the investigation of HBsAg+ pregnant women and case management of their infants.

Next step: Develop procedures and identify responsible staff for following up on household and sexual contacts of HBsAg+ pregnant women.