



MOMs in REcovery (MORE) Study

March 2019 Newsletter



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In This Issue

- Study Updates
- A Note from the Study Principal Investigators
- Study Advisory Committee Members
- Question of the Month

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MORE Project
Community
Connection

Study Updates:

Dartmouth Institutional Review Board. The MORE Study has been fully approved for both the clinical record review protocol (Phase 1) and the Patient-Report Cohort protocol (Phase 2) by the Dartmouth Institutional Review Board. We are working with each site individually regarding their local institutional review process, please contact Deb Johnson as needed.

Study Team Open Positions: We are recruiting for a part-time **Research Nurse for NH and VT practices** and a part-time **Research Nurse for Maine practices**. Potential candidates for either of these positions are encouraged to contact Deborah.J.Johnson@dartmouth.edu

Study Website: Our study website is getting close to completion, and we hope to launch it next month.



Facebook Page: We are already a popular destination on Facebook. Check us out!

<https://www.facebook.com/MORECommunityConnect>

Site Visits: We are continuing to visit partner sites. If we have not visited your practice yet, or you would like us to come again, we would be happy to schedule a visit. Please contact Debbie (See her contact to the left).

Data Collection: We are on target to begin data collection in a few short months, June 2019.

Study Advisory Committee (SAC) Meeting: The next SAC meeting is scheduled for Thursday, May 23, 2019.

SAC Work Groups: Our SAC Assessment/Measurement and Recruitment/Retention Work Groups are meeting and making progress.

Article of Interest: Feasibility and Acceptability of a Checklist and Learning Collaborative to Promote Quality and Safety in the Perinatal Care of Women with Opioid Use Disorders, Goodman, D. et. al, *J. Midwifery and Women's Health*. doi:10.1111/jmwh.12943.

A Note from the Study Principal Investigators

Happy Spring! It has been a joy to travel to visit so many of our partner sites over the past two months. Thank you to everyone who has welcomed us into your busy clinics. We are continually humbled at the creative approaches that maternity care clinicians in our region are using to meet the critical needs of women with OUD and their families. We're looking forward to more travel (and less snow!) in the near future as we get ready to start data collection.

Daisy Goodman, CNM, DNP & Sarah Lord, PhD

Meet One of Our Study Advisory Committee Members

Lindsey Miller has been a Study Advisory Committee as a community partner for the MORE Study since October of 2018. As a member of the Study Advisory Committee she is very excited to share her knowledge and experience with opioid use disorder (OUD) to help others who suffer from OUD.



Lindsey Miller (Left) and Brittany Smith (Right)

Meet One of Our Study Staff Members

Brittany N. Smith is a research assistant currently working on Moms in Recovery (MORE) : Defining Optimal Care for Pregnant Women and their Babies. She is a mom in recovery from opioid use disorder (OUD). Her passion for helping others who suffer from OUD has driven her to receive her Recovery Coach Certificate along with Ethics Training Certificate, Trauma-informed Early Childhood Services Certificate, Suicide Prevention Training Certificate, and Compassion Fatigue Certificate.

January Newsletter Partner Question With Responses

“What question would you like to see answered by this study?”

Responses Received:

1. What supports for providers make embedded MAT models more successful?
2. What is the critical mass of numbers that would make embedded MAT realistic?
3. Certainly, our goal is to find out what is the best way to take care of this population, so we have the best chance for a healthy mom and a healthy baby. I know that is a pretty obvious request but that is why we are engaged. We are delivering care a certain way and if we find out that there is a better way then we will be looking to adopt it.
4. I talked to Sarah Lord at the CO-OP Annual Meeting about an add-on study that would be already part of the chart review in practices that do universal screening but would be an additional activity for practices that do not do universal screening. I would suggest a brief survey of all practices to find out what they do for screening, urine testing, and documentation of the outcome of the screening tools/questions....

If you have other questions or thoughts, please let us know!

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