

# Collaborative Improvement & Innovation Network (COIN) to Reduce Infant Mortality

Secretary's Advisory Committee on Infant Mortality


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# What is a CoIN?

*A CoIN, or Collaborative Innovation Network, has been described as a cyber-team of self-motivated people with a collective vision, enabled by the Web to collaborate in achieving a common goal by sharing ideas, information, and work.<sup>1</sup>*

- Key Elements of a COIN are:
  - Being a “cyberteam” (i.e. most COIN work will be distance-based)
  - Innovation comes through rapid and on-going communication across all levels.
- Describes *how* individuals will work (and learn) collaboratively to develop, implement, and evaluate strategies to reduce infant mortality.
- Adapted to reflect focus on both innovation and improvement  Collaborative Improvement & Innovation Network to Reduce Infant Mortality (COIN).

<sup>1</sup> Gloor PA. *Swarm Creativity: Competitive Advantage through Collaborative Innovation Networks*. New York: Oxford University Press, 2006.



# COIN: History

- Born out of January 2012 Infant Mortality Summit in New Orleans, LA for Regions IV and VI.
- Designed to meet stated needs related to:
  - Common evidence-based strategies to reduce infant mortality;
  - Shared, collaborative learning and action *across* states.
- Initiated March 2012 as a mechanism to support the adoption of collaborative learning and quality improvement principles and practices to reduce infant mortality and improve birth outcomes.
- Developed in partnership with ASTHO, AMCHP, March of Dimes, CityMatCH, CMS, and CDC.



# COIN: Structure

## 5 Strategy Teams focused on common state-identified priorities:

1. Reducing elective deliveries <39 weeks (ED);
2. Expanding interconception care in Medicaid (IC);
3. Reducing SIDS/SUID (SS);
4. Increasing smoking cessation among pregnant women (SC);
5. Enhancing perinatal regionalization (RS).

## Teams

- 2-3 Leads (Topical Experts);
- Data and/or Methods Experts (as needed);
- 2 Staff from MCHB and Partner Organizations;
- Self-selected Members from each of the 13 states in Regions IV and VI.

Teams average 25-30 members.  
State delegations range from 7-13 members.



# COIN: Structure (cont.)

- Lifespan: 12-18 months (beginning July 2012).
- Support provided by contract through MCHB.
- Foci, activities, and outcomes are Team driven.



# COIN: Work to Date

- Team Driven!
- Focused on:
  - Defining the scope and nature of the problem;
  - Developing aim statement;
  - Identifying possible action strategies;
  - Identifying related metrics to track progress.
- Preparation for face-to-face launch, July 23-24.



# COIN: Challenges

- Logistics!
- Regional, inter- and intra-State differences;
- Strategy-specific challenges;
- Adoption of collaborative practices under challenging logistical circumstances.



# COIN: Strengths

- People
- Commitment
- Partners
- Momentum





# COIN: Launch

- Face-to-face meeting July 23-24<sup>th</sup>, Crystal City, VA
- Learning sessions on:
  - Existing efforts to reduce infant mortality and improve birth outcomes;
  - Collaborative Learning and Working;
  - Quality Improvement.
- Work time for Teams
- Meeting Goals:
  1. Promote team building among the 5 Strategy Teams;
  2. Provide training in methods for quality improvement and collaborative learning;
  3. Offer a structured environment to plan, implement, and test innovation;
  4. Provide an opportunity for State Teams to Report-Out on activities and successes since January 2012 Infant Mortality Summit.



# COIN: Summary

- Launched in response to stated needs among the 13 States in Regions IV and VI.
- Designed to help states use the science of quality improvement and collaborative learning to improve birth outcomes over the next 12-18 months.
- Participant driven.
- Part of a portfolio of efforts to improve birth outcomes and works in partnership with these initiatives.



# Contact Information

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