Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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Discussion/Conclusion
Compliance with the checklist resulted in higher levels of confidence in leading a PPH event, decreased amount of time spent in the hemorrhage, and decreased missed steps or serious safety concerns. The next plan–do–study–act cycles will advance the acuity of the patient, including multidisciplinary and multiunit involvement.

Effect of Implementation of the Screening, Brief Intervention, and Referral to Treatment (SBIRT) Modality at a Rural Colorado Hospital

Introduction
Between 2014 and 2016, there were 94 maternal deaths in Colorado. Of those 94 deaths, 75% were preventable. Nearly 60% of the maternal deaths during that time were associated with mental health concerns or substance use. Since early 2020, with the rise in COVID-19 infections, the rates of mental health concerns and substance use disorders have been increasing. To reduce preventable maternal death in Colorado, early recognition is crucial. The screening, brief intervention, and referral to treatment (SBIRT) modality is an effective model that can be implemented in the short duration of admission in labor and delivery units. The rapid delivery of specialized care can help providers recognize a problem effectively and create a treatment plan for continuity of care for at-risk patients.

Methods
Implementation of the SBIRT framework for Valley View Hospital (VVH) involved commitment to the Colorado Alliance for Innovation in Maternal Health (AIM) Substance Use Disorder Learning Collaborative, which is a quality improvement initiative that follows the substance use disorder patient safety bundle distributed by AIM. The learning collaborative also follows the quality improvement feedback cycle of the Institute for Healthcare Improvement. The learning collaborative provides monthly coaching calls that provide expert presentations on key subject areas.

Results
In 2021, VVH successfully implemented screening tools for substance use disorder, depression, and anxiety using validated screening tools of the Drug Abuse Screen Test, the Alcohol Use Disorders Identification Test, and the Edinburgh Postnatal Depression Scale. In the 4th quarter of 2021, we were able to screen and send 4 patients for substance use disorder treatment and 40 patients for mental health treatment.

Discussion/Conclusion
Evaluation of VVH’s involvement in the Colorado AIM Substance Use Disorder Learning Collaborative revealed the importance of involvement of prenatal care settings into the SBIRT framework for continuity in screening and addressing positive screens during the prenatal period. In addition, continued networking with resources in the community is needed to develop a comprehensive referral system for patients who receive a positive screen during their admission in the labor and delivery unit.

Restricted Visitation During the Pandemic and Its Effect on Patient Satisfaction With Breastfeeding

Introduction
During the COVID 19 pandemic, there were necessary restrictions on hospital visitation. The California Department of Public Health advised that visitation in the maternity unit be limited to one support person. Before the pandemic, our visitation policy allowed unlimited visitors throughout the day. During the pandemic the couplet care staff received comments from patients who had previously given birth in a hospital expressing greater satisfaction with their breastfeeding experience as a result of the more restrictive visitation.

Methods
A patient survey was created to help determine satisfaction levels in patients in terms of with their breastfeeding experience and the effect restricted visitation had on their breastfeeding experience. The survey questions were divided to
identify patients who had previously given birth in a hospital and those who had not. The patients were asked to rate their breastfeeding experience on a scale of 1–10, with 10 being extremely satisfied with their experience and the visitation restrictions and 1 being not at all satisfied.

**Results**

Two hundred and nineteen patients responded to the survey: 137 had previously given birth in a hospital and 82 had not. On the rating scale, 56 patients who had previously given birth in a hospital rated their satisfaction with visitation restrictions at a 10 and 108 rated it 6 or above. Thirty eight patients who had not previously given birth in a hospital rated their satisfaction with visitation restrictions at a 10, and 66 rated it 6 or above.

**Discussion/Conclusion**

After the pandemic, it will be important for us to take the results of the survey into consideration when deciding on our visitation policy. We are following this survey up with a survey being presented to all patients that asks what type of restrictions they would prefer. The choices are one support person only, one support person plus an additional visitor, one support person and two additional visitors, or unlimited visitation. The results of the survey so far have shown a definite preference for the first 2 choices.

**Keywords**

visitation, breastfeeding, patient satisfaction