

PA PQC

Pennsylvania Perinatal Quality Collaborative

PA PQC Virtual Session
December 11, 2024

Continuing Education Information

In support of improving patient care, this activity has been planned and implemented by the University of Pittsburgh and The Jewish Healthcare Foundation. The University of Pittsburgh is jointly accredited by the **Accreditation Council for Continuing Medical Education (ACCME)** and the **American Nurses Credentialing Center (ANCC)**, to provide continuing education for the healthcare team. **1.0 hours are approved for this course.**

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Agenda

1. **Welcome** – Sara Nelis, RN, Project Manager, Jewish Healthcare Foundation
2. **Designations Review** – Sara Nelis, RN
3. **Quality Improvement Participation** – Lisa Boyd, BA, PQC QI Coach & Data Manager, Program Associate, Jewish Healthcare Foundation and Jennifer Condel, SCT(ASCP)MT, Manager of Lean Healthcare Strategy and Implementation, Jewish Healthcare Foundation
4. **QI Peer-to-Peer Sharing: Designations Project Progress** – Facilitated by Kristen Brenneman, MSN, RNC-NIC, Quality Improvement Facilitator, Jewish Healthcare Foundation and Hadar Re'em, Program Associate, Jewish Healthcare Foundation
 - **Holy Redeemer Hospital:** Helene Coakley, BSN, RN, OB Substance Use Disorder Nurse Navigator
 - **Armstrong Center for Medicine & Health Hospital:** Kristina Lynch, BSN, RN, PHRN, Infection Control Manager and Lindsay Feitknecht, BSN RN, Nurse Manager 3A-OB, ACMH Hospital
 - **Penn Medicine Chester County:** Stephanie Schwartz, DPT, NTMC, CNT, Lead Physical Therapist NICU and Dr. Jason Komasz
 - **Trinity Health – St. Mary Medical Center:** Elizabeth Buck, BSN, RNC, C-EFM
5. **Wrap-up and Next Steps** – Sara Nelis, RN

Learning Objective

- Discuss team successes and challenges in the areas of health equity, patient voice, and quality improvement participation.

Designations Review

SARA NELIS



QI Plan (Pre-Survey)		✓	✓
QI Participation	✓	✓	✓
Additional Element (Health Equity & Patient Voice)		1	2
Post-Survey		✓	✓
Initiative-Specific	✓	✓	✓

QI Participation



Meet all milestones for a specific initiative for two quarters.

Milestone	Activity Per Initiative Joined	Frequency	Due Date
Milestone 1	Attend at least one event each quarter See the Events Page for the list of learning sessions	Quarterly	July 31, 2024 October 31, 2024 January 31, 2025 April 30, 2025
Milestone 2 <i>(initiative specific)</i>	Submit a Quality Improvement (QI) Report Out in the LifeQI Online Portal , showing work related to implementing Key Intervention(s)		
Milestone 3 <i>(initiative specific)</i>	Complete initiative-specific PA PQC survey		
Milestone 4 <i>(initiative specific)</i>	Submit aggregated data for the PA PQC process and outcome measure(s) through the LifeQI Online Portal ,		
Milestone 5	Communicate and celebrate your team's impact in the PA PQC within your hospital and community <i>^milestone 5 is NOT initiative-specific and only needs to be submitted once for ALL participating initiatives</i>		

Tips for Success!

Post-survey

Due March 31, 2025

“What was your team’s original SMART goal?”

“Was your team able to meet this goal?”

“What did your team learn from this intervention?”

“List 3-5 steps the team took to implement your QI plan.”

“What challenges/barriers arose?”

“How did your team address those challenges/barriers?”

“What was your team’s biggest success? Please provide any data you may have collected.”

- Use the Post-designations survey word document
- Err on the side of TOO much information!
- Reference your pre-designations survey
- It’s all about the QI work!

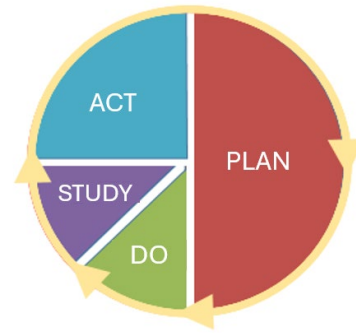







Quality Improvement Participation

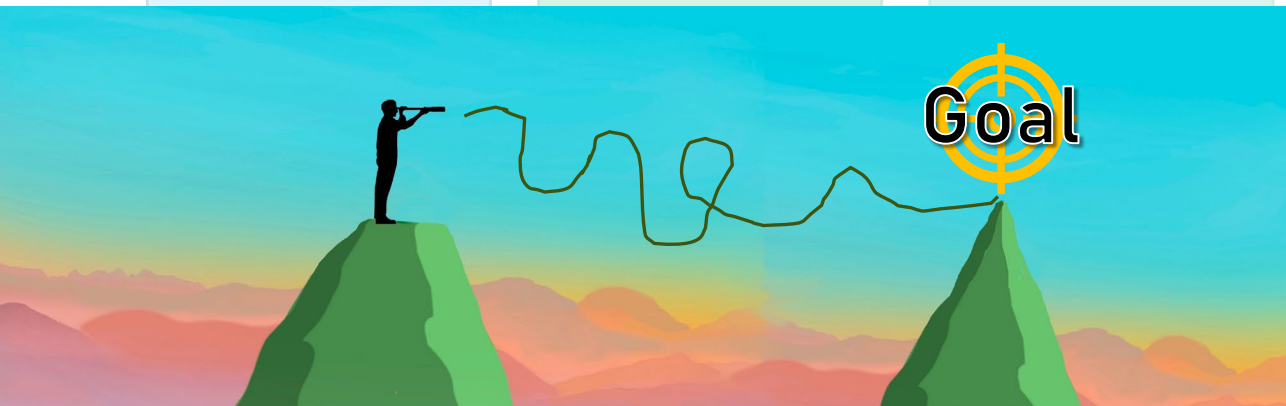
JENNIFER CONDEL

LISA BOYD

Quality Improvement Action Planning



Define Your Goal	Identify Tasks	Set Timelines	Assign Responsibility & Resources	Monitor Progress	Results &/or Barriers
<ul style="list-style-type: none">• Specific • Measurable • Attainable • Relevant • Time-bound 	<ul style="list-style-type: none">• Breakdown goal into small, manageable tasks	<ul style="list-style-type: none">• Establish a deadline for each task toward achieving the overall goal	<ul style="list-style-type: none">• Identify a specific team member/role, team, or department for each task• Determine resources needed to complete each task (equipment, personnel, tools)	<ul style="list-style-type: none">• Determine the status of each task (not started, in progress, behind schedule, needs addressed, completed)	<ul style="list-style-type: none">• Indicate the results for each task• Clearly identify any barriers to achieving a task





Action Planning Tool: Example

Our Goal: Establish a system-wide Safe Sleep education program for all staff (clinical & non-clinical) within 6 months
Date Started Plan: 11/1/24
Department(s) Involved: Pediatrics, NICU, OB, Education, LMS, IT, Environmental Services, Nutrition
Team Members/Roles: Sara (CNO), Kristen (CMO), Maureen (Education), Lisa (IT), Hadar (LMS), Karena (RN), Jen (ES), Bridget (Nutrition)

Tasks/ Action Items (Specific Work Activities)	By Whom (Team Member(s)/ Role(s))	Target Date (Due By)	Status (Monitor Progress)	Results &/Or Barriers (What Happened/Learned)
Identify and review current Safe Sleep education materials (booklets, policy)	Maureen/Education	11/24/24	Completed	Compiled pdf of existing staff education materials to share at 12/11/24 staff meeting; materials are clinical focused
Review and evaluate current Safe Sleep training module in LMS to share at Safe Sleep team meeting on 12/11/24	Maureen/Education, Hadar/LMS, Karena/RN	12/10/24	In progress	Barrier: accessing LMS for non-clinical staff
Present findings on SS education materials and training module during SS team meeting for feedback and discussion of next steps	Maureen/Education, Hadar/LMS, Karena/RN	12/11/24		

Milestone 5 Examples

Upcoming Pa PQC Sessions – [REDACTED]

Please consider attending!
Encourage staff – all events virtual and provide CNE!

An attendee from each site will count toward milestone completion & potential grant funding!



Upcoming Learning Sessions

SEPTEMBER 16 Neonatal Initiative Peer-to-Peer Networking 11:00 a.m. – 12:00 p.m. Zoom	SEPTEMBER 19 IPLARC Sustainment Check-In 11:00 a.m. – 12:00 p.m. Zoom	SEPTEMBER 23 Maternal Initiative Peer-to-Peer Networking 11:00 a.m. – 12:00 p.m. Zoom
OCTOBER 7 Supplemental Session: PA Navigate 11:00 a.m. – 12:00 p.m. Zoom	OCTOBER 24 PA MMRC Debrief & Regional Breakouts 11:00 a.m. – 12:00 p.m. Zoom	

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Pa PQC Requirements Update



- Please encourage staff to attend!
- Continuing Education credits are awarded
- Sessions are FREE and one hour via Zoom
- Participation from a hospital-level representative is required to be eligible for grant opportunities

Minimum Criteria for Staying Involved in the PA PQC During an Implementation Period

The PA PQC recognizes it takes time to achieve the five quarterly milestones listed above during the Implementation Period. As a result, the PA PQC also has a minimum set of criteria for staying involved in the PA PQC during the Implementation Period. This includes at least one of the following:

- Submitting a QI Report Out at least once during a six-month period.
- Submitting a quarterly initiative-specific survey during a six-month period.
- Having at least one hospital-level representative attend at least one meeting (virtual, in-person, or regional) during a six-month period. AND
- Submitting at least one quarter's worth of aggregated data for the PA PQC process and outcome measures during a six-month period.

If the minimum requirements are not met, the hospital team will be on pause and will not be counted as a PA PQC Healthcare Team. Additionally, the hospital team will not be eligible for Quality Improvement Awards and Designations. Re-engagement plans can be discussed further with your coach and PA PQC leadership.

To further support the PA PQC healthcare teams, the teams have the option to participate in the following:

- Participate in PA PQC Virtual Meetings
- PA PQC Regional Meetings for peer-to-peer learning

[Pennsylvania Perinatal Quality Collaborative - Register \(papqc.org\)](https://papqc.org)

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PA PQC Events

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Quality Touchbase

Hospital [REDACTED]

Dashboard Review: Qtr. 2 (April-June) 2024

- PSI 17 Birth Trauma Injury to Neonate: 0
- PSI 18 OB Trauma rate vaginal delivery with instrument: 0
- PSI 19 OB Trauma Vaginal delivery without instrument: 40.00
 - N=4 (Bashua, Lawrence, Saldutti, Siz)
- PC-01 Elective Deliveries: 0
- PC-06 OVERALL Newborn Complications: 3.2%
 - N=4
- PC-06-1 Severe Newborn Complications: 0.8%
 - N=1 Transfer to HMC
- PC-02 NTSV: 22.6%
- PC-05 Exclusive Breastfeeding: 63.3%
- Keystone 10 Breastfeeding: 107.8%

- Readmissions:
 - OB: 0.84
 - N=7
 - 6 Pre-eclampsia
 - 1 Cholecystitis
 - Newborn: 0

Obstetrics Review: JULY 2024

- Immediate Postpartum Depression Screening: 98.6%
- Severe HTN: 6 patients, 31 events, 66% repeated within 16 minutes, 1 treated.

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Lehigh Valley Hospitals Recognized in Inaugural Pennsylvania Maternal Health Designation Awards Ceremony

LVH–Pocono, LVH–Cedar Crest, LVH–Schuylkill, LVH–Hazleton and LVH–Muhlenberg receive bronze designation.



LVHN Insider
Published 3 days ago

We're excited to share Lehigh Valley Hospital (LVH)–Pocono, LVH–Cedar Crest, LVH–Schuylkill, LVH–Hazleton and LVH–Muhlenberg received the bronze designation in the Pennsylvania Perinatal Quality Collaborative (PA PQC) Designations Awards, which were presented at its annual conference in Harrisburg on May 22, 2024.

This designation award signifies these Lehigh Valley Hospital locations have established multidisciplinary teams that have demonstrated improvements in maternal and newborn care by sharing best practices and data in their hospital and community.

Designation levels are based on meeting quality improvement milestone criteria over a 12-month period, starting from April 2023 through March 2024. All five LVH locations earned bronze designations in maternal substance use and substance-exposed newborns. LVH–Hazleton and LVH–Pocono also received a bronze designation in Immediate Postpartum Long-Acting Reversible Contraception. A bronze designation signifies a hospital met the required quality improvement submission criteria for at least two of the four quarters.

The Importance of Safe Sleep Education and Initiatives from the ACMH Women's Services Team

Submitted by Lindsay Feitknecht and Kristina Lynch

As we look forward to October, an important prevention topic is on the horizon: Sudden Infant Death Syndrome (SIDS) Awareness Month. ACMH is dedicated to assisting our families that choose care within our system to educate and assist in making safe choices surrounding safe sleep for their infants. ACMH is already a participating member in the PA Safe Sleep Program. This program included extra training for staff regarding safe sleep education that we provide new families during their inpatient stay. A bulletin board discussing the "ABC's" of safe sleep is displayed at the entrance on 3A to remind all that enter about these important measures for safe sleep.

Participation in the Pennsylvania Perinatal Coalition (PA-PQC)

The Pennsylvania Perinatal Quality Collaborative (PA PQC) was launched in April 2019 as an action arm of the Maternal Mortality Review Committee (MMRC) with funding from the Pennsylvania Department of Drug and Alcohol Programs and the Henry L. Hillman Foundation. The mission of the PA PQC provides quality improvement support to healthcare teams to improve the standard of care for pregnant and postpartum people and babies with a vision that every birthing person and baby in Pennsylvania receives equitable, safe, and optimal care.

This year as part of our participation in the Pennsylvania Perinatal Quality Coalition (PA-PQC), Safe Sleep was chosen as our project as we had identified ways we could strengthen our Safe Sleep Program including our outpatient services. A team was created and we initiated monthly meetings to begin the evaluating, planning, and implementing our objectives. The PA-PQC assigns each facility with a coach that provides valuable feedback to help guide our project.



The following are some highlights of this project:

- Identified our goal to focus on education during the prenatal period as well as well-visits at our hospital based clinics during the first year of life. It is important time to provide a consistent message and have open communication between providers and families regarding safe sleep.

- Ensure all staff across the system have been educated regarding safe sleep. This was launched in netlearning with varying depth of education dependent on each person's job role. One of the initiative's milestones was to ensure that everyone that can come across a patient and anyone they could meet in the community would have an overview of knowledge regarding safe sleep they could confidently share.

- Creating and implementing (October 2024) prenatal, post-partum, and well-baby visit questionnaires to all families giving opportunity for conversations about safe sleep based on the

answers given. This project led to an initiation of another resource in the offices which is the use of an iPad kiosk that will allow completion of the questionnaire and transfer directly to the chart in ECW. If an individual is identified as needing additional resources a referral will be requested and a member of the working group will contact the individual to address the need.

- Educational Materials: We had some great resources at our fingertips but, we wanted to ensure that we were providing resources that were impactful to our patients. Materials were reviewed and we were able to obtain specific education booklets that will be provided to our families throughout their prenatal and postpartum appointments. These professional created education booklets are reviewed and recognized by AWHONN (Association of Women's Health, Obstetric and Neonatal Nurses) as a valued patient education resource. These booklets also includes a digital companion that provides helpful videos on topics that can aid families that enjoy a different type of media while learning. We are very excited to have these resources available for patients.



As part of the project each participating facility has the opportunity to submit a special project to work towards a designation recognition award. We chose Patient Voice as our project. The purpose of this project is to find a way to receive feedback from our patients about their experience with our team regarding safe sleep education. We wanted to hear from our patients about their experience and their ability to get their questions answered regarding safe sleep during their office visits and hospital stay.

This survey will be given to patients at their first postnatal visit and their answers reviewed with the team to better improve our delivery of excellent patient care.

- ACMH is proud to be a part of the PA-PQC and will continue to implement and work towards the above initiatives through next spring when a new initiative will be selected. We value our families that choose ACMH during one of the most important times in their lives. We want to ensure that our families are receiving the best educational experience when it comes to such important topics as keeping our littlest patients safe.



PHOTO:

The team of nurses at The Family Place, the obstetrics unit of Evangelical Community Hospital, has committed to continuing education on issues impacting mothers and babies, including substance use disorders and substance exposed newborns. The Family Place is dedicated to creating a warm, welcoming, and safe birthing environment for all women and their partners.

Representing The Family Place at the Pennsylvania Perinatal Quality Collaborative (PA PQC) Annual Conference and receiving the Hospital's silver and bronze award designations were Amy Noaker, RN, BSN; Susan Payne, RN, BSN, MSN; and Kelly Everitt, RN, BSN, IBCLC.



PA PQC Shares the Love!

Conversation Hearts From the PA PQC
February 2024



www.papqc.org

What is PA PQC?

PA PQC stands for Pennsylvania Perinatal Quality Collaborative. It was launched in April 2019 as an action arm of the Maternal Mortality Review Committee (MMRC) with funding from the Pennsylvania Department of Drug and Alcohol Programs and the Henry L. Hillman Foundation. The PA PQC is administered by the Jewish Healthcare Foundation and WHAMglobal, and it is affiliated with the Northeast PQC (NEPaPQC).

How many hospitals participate in PaPQC?

Over 60 birth sites and NICUs and over 10 health plans across the commonwealth are actively identifying perinatal processes in need of improvement and advocating for the adoption of these best practices to achieve the common aims.

Why do we participate in PA PQC initiatives?

Improving perinatal outcomes is our top reason for joining PA PQC. They also grant awards! The PA PQC's \$5,000 Quality Improvement Awards are awarded quarterly (contingent on available funding) to PA PQC healthcare teams who complete all the milestones required for an initiative until the available funding levels are reached for each quarter.

How much \$ have we received from PA PQC?

Since our involvement with PA PQC in 2019, GLH has met initiatives to earn \$90,000! We currently have a balance of nearly \$40K that can be used for education, conferences, equipment and more. Please let Abby know if you have any ideas or passions that we can put the funds towards! It was hard earned! THANK YOU for doing your part!

New to us... PA PQC Designations!

We are working to achieve a Gold Designation from PA PQC on top of our initiatives. This is why we implemented the Patient Survey for ESc parents, and added the additional GOALS courses for DEI at Geisinger, Cultural Competency and Humility, and Addressing Unconscious Bias, which need to be completed by March 31, 2024.

Who is our coach?

Karena Moran, PhD
Research and Quality Project Manager at GHSC

Dr. Moran coaches 15 birth hospitals in Northeastern PA and manages the Northeastern PA PQC.



What are the 2024 PA PQC initiatives?

SUD (Substance Use Disorder)
SEN (Substance Exposed Newborn)
Safe Sleep**
Maternal Sepsis**

**New for 2024



Substance Use Disorder (SUD)/Opioid Use Disorder (OUD)

Accidental poisonings were the leading cause of maternal deaths in 2018 and accounted for over 50% of all maternal deaths. This category includes drug-related overdose deaths. In 2017, only 10% of pregnancy-associated deaths were due to accidental poisonings. That over half of all deaths in 2018 fell into this category reflects, in part, the continuing devastating impact of Pennsylvania's opioid epidemic on both individuals and families. Source: PA MMRC

2023-2024 Goals

Increase the percentage of hospitals with trauma-informed protocols in the context of substance use from approximately 10% to 20%

Increase the percentage of hospitals with a system in place to provide naloxone to at-risk patients prior to discharge from 8% to 30%

Increase the percentage of hospitals with established perinatal care pathways for SUD that coordinate services across multiple providers up to 1 year postpartum from 60% to 70%

Maintain at least 90% of pregnant individuals being screened for substance use with a validated screen

Top Causes of Death for All Maternal Deaths (Excluding Philadelphia County) in 2018 (N=89)

Cause of Death	Number of Deaths	Overall Percentage
Accidental Poisoning	45	50%
Other Direct Obstetric Deaths	9	10%
Transportation Accidents	8	9%
Assault	7	8%
Other Pregnancy Related	4	5%
Intentional Self-Harm	2	2%

Key Interventions

Educate staff and patients about substance use disorders

Screen pregnant women for substance misuse and physical and behavioral health co-morbidities using validated screening tools

Connect women to treatment and supportive resources

Establish prenatal, intrapartum, and postpartum care pathways for women with SUD that incorporate care coordination among multiple providers

QI Peer-to-Peer Sharing: Designation Project Progress

Kristen Brenneman
Hadar Re'em

- ***Holy Redeemer Hospital:*** Patient Voice in Maternal OUD
- ***Armstrong County Memorial Hospital:*** Patient Voice in Safe Sleep
- ***Penn Medicine Chester County:*** Patient Voice in NAS Huddles & Neonatal Advocacy Group (NAG)

76 Hospitals Representing 90.4% of Live Births in PA

Birthing hospitals and NICUs across Pennsylvania come together to share best practices and quality improvement opportunities. To be considered an active site, PA PQC Healthcare Teams choose one or more perinatal initiatives to work on throughout the implementation year and share data, surveys, and quality improvement reports. Additionally, active Healthcare Teams participate in learning opportunities throughout the year. The PA PQC thanks each Healthcare Team for their work to improve care for birthing persons and babies in Pennsylvania.



Opioid Use
Disorder



Neonatal Abstinence
Syndrome



Maternal
Sepsis







Safe
Sleep



Armstrong County Memorial Hospital 

AHN – Forbes Hospital 


AHN – Jefferson Hospital 


AHN – Saint Vincent Hospital   

AHN – West Penn Hospital  

AHN – Wexford Hospital  

Commonwealth Health – Moses Taylor Hospital    

Conemaugh Memorial Medical Center 

Doylestown Hospital    

Reach out to your coach to connect with specific hospital sites to learn more about specific interventions.

Wrap-Up

SARA NELIS

PA PQC QI Coaches



Kristen Brenneman,
MSN, RN
Quality Improvement
Facilitator, Jewish
Healthcare Foundation



Lisa Boyd, BA
Program Associate,
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Foundation



Jennifer Condel,
SCT(ASCP)MT
Manager, Lean Healthcare
Strategy and
Implementation, Jewish
Healthcare Foundation



Karena Moran, PhD
Improvement
Optimization Advisor,
Geisinger Health &
NEPaPQC



Maureen Saxon-Gioia,
MSHSA, BSN, RN
Nurse Project Manager,
Jewish Healthcare
Foundation

Upcoming Virtual Sessions

JANUARY 23

PA PQC Updates and Meeting

11:00 a.m. – 12:00 p.m.

Zoom

FEBRUARY 27

11:00 a.m. – 12:00 p.m.

Zoom



Blair County
Convention Center
One Convention Center Drive
Altoona, PA 16602



*Save the
Date*

05.21.25



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Focus Areas: April 2023 - March 2024

Maternal substance use, substance-exposed newborns, and immediate postpartum long-acting reversible contraception (LARC), with a theme around the continuum of care. Each focus area includes strategies and goals to reduce racial/ethnic disparities.

Learn about the
Initiatives

Access Session
Materials

Credentialing Guidelines:

PLEASE complete the electronic evaluations by Wednesday, December 18th: <https://www.surveymonkey.com/r/2HCYYV5>

Please indicate on the evaluation which CEUs you are requesting: CME, CNE or Social Worker credits.

1. The UPMC Center for Continuing Education will follow up with you, via email, after Wednesday, December 18th to notify you about how you can claim your credits.

- ☐ To prepare, we recommend you create an account with UPMC CCE via this website <https://cce.upmc.com>.



Thank You!



Pennsylvania Perinatal Quality Collaborative



Northeastern Pennsylvania Perinatal Quality Collaborative

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