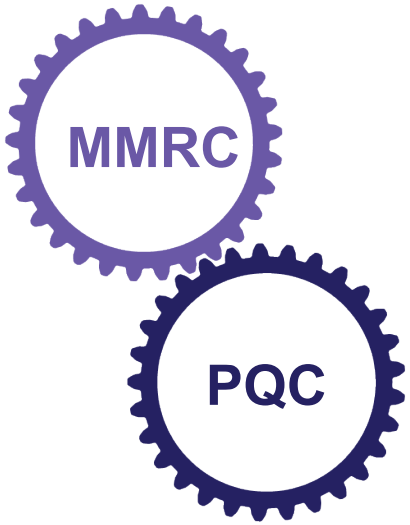


PA PQC

Pennsylvania Perinatal Quality Collaborative

PA PQC Virtual Session

April 16, 2025

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.**

As a Jointly Accredited Organization, University of Pittsburgh is approved to offer social work continuing education by the **Association of Social Work Boards' (ASWB)** Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. University of Pittsburgh maintains responsibility for this course. Social workers completing this course receive **1.0 continuing education credits**.

Disclosures

No members of the planning committee, speakers, presenters, authors, content reviewers and/or anyone else in a position to control the content of this education activity **have relevant financial relationships** with any entity producing, marketing, re-selling, or distributing health care goods or services, used on, or consumed by, patients to disclose.

Disclaimer

The information presented at this Center for Continuing Education in Health Sciences program **represents the views and opinions of the individual presenters**, and does not constitute the opinion or endorsement of, or promotion by, the UPMC Center for Continuing Education in the Health Sciences, UPMC / University of Pittsburgh Medical Center or Affiliates and University of Pittsburgh School of Medicine. Reasonable efforts have been taken intending for educational subject matter to be presented in a balanced, unbiased fashion and in compliance with regulatory requirements. However, each program attendee must always use his/her own personal and professional judgment when considering further application of this information, particularly as it may relate to patient diagnostic or treatment decisions including, without limitation, FDA-approved uses and any off-label uses.

Milestone #1: Changing for 2025
Engage With PA PQC Coach

- Milestone 1 will no longer be tied to virtual session attendance
- Engage meaningfully with your PA PQC QI coach ***at least*** once per quarter

- Examples of engagement might include:
  - Reciprocal interaction between Healthcare Team and QI coach
    - Incorporating your coach into your Healthcare Team meeting
    - 1-on-1 meeting with your coach
  - Other engagement opportunities as agreed upon by your team and your coach
- What doesn't count?
  - Email updates to QI coach
  - One-sided communications

Learning Objectives

- Discuss preparation for successfully moving active initiatives into sustainment.
- Identify challenges to sustainment and strategies for overcoming common barriers.

Agenda

1. **Welcome** – Sara Nelis, RN, C-ONQS, CCE, Program Manager, Jewish Healthcare Foundation
2. **Data** – Lisa Boyd, QI Coach & Program Specialist, Jewish Healthcare Foundation & Hadar Re'em, Program Associate, Jewish Healthcare Foundation
3. **Sustainment Overview** – Jennifer Condel, SCT(ASCP)MT, Lead QI Coach, Jewish Healthcare Foundation, Karena Moran, PhD, NEPaPQC Manager, and Sara Nelis, RN, CCE
4. **Facilitated Discussion** – PA PQC Quality Improvement Coaches
5. **Wrap-up & Next Steps –** Sara Nelis, RN, C-ONQS, CCE

Data

LISA BOYD, BA

HADAR RE’EM, BA

© 2025 JHF, PRHI & WHAMglobal

Sustainment

JENNIFER CONDEL, SCT(ASCP)MT

KARENA MORAN, PHD

SARA NELIS, RN, C-ONQS, CCE

Sustainment

- One year period following the active implementation
- The PA PQC will not be actively providing services and content related to sustaining initiatives
- Your team **CAN** continue implementing new interventions independently
- Coaching and support during this time is focused on sustainability of key interventions that have been implemented to date
- Yes! You are STILL considered a participating PA PQC hospital!

© 2025 JHF, PRHI & WHAMglobal

Active vs. Sustained Initiatives

ACTIVE IMPLEMENTATION

Quarterly Awards

Designations

Education Content

QI Coaching Calls

Quarterly Data, Survey and QI Reports

SUSTAINMENT

No Quarterly Awards

Not Part of Designations Program

Sustainment Check-Ins & Initiative Non-Specific Virtual Sessions

Sustainment Plans

Quarterly Data and Surveys

© 2025 JHF, PRHI & WHAMglobal

Quality Improvement Action Planning

Define Your Goal

- **S**pecific
- **M**easurable
- **A**ttainable
- **R**elevant
- **T**ime-bound

Identify Tasks

- Breakdown goal into small, **manageable tasks**

Set Timelines

- Establish a **deadline for each task** toward achieving the overall goal

Assign Responsibility & Resources

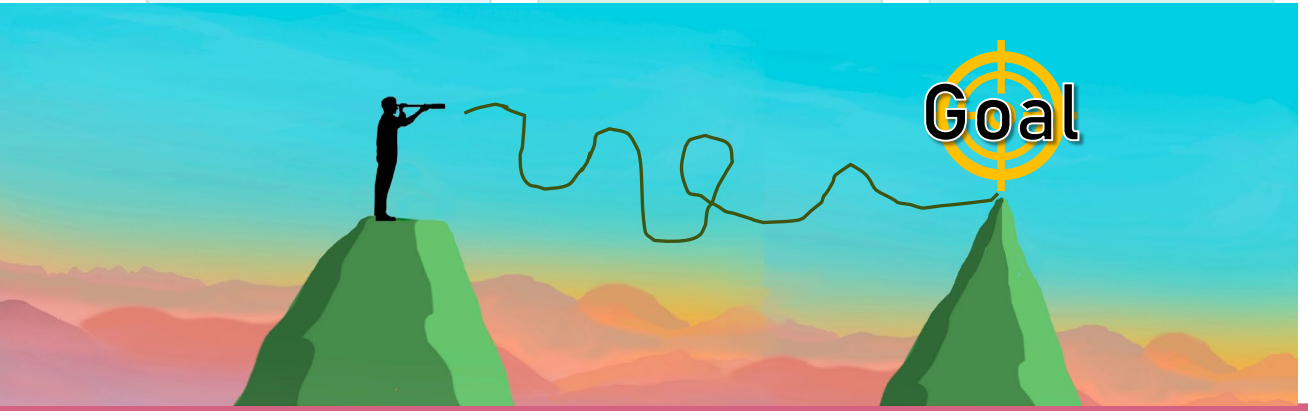
- Identify a **specific** team member/role, team, or department for each task
- Determine resources needed to complete each task (equipment, personnel, tools)

Monitor Progress

- Determine the **status** of each task (not started, in progress, behind schedule, needs addressed, completed)

Results &/or Barriers

- Indicate the **results** for each task
- **Clearly identify** any barriers to achieving a task



© 2025 JHF, PRHI & WHAMglobal

Action Planning Tool

Our Goal:
Date Started Plan:
Department(s) Involved:
Team Members/Roles:

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)

© 2025 JHF, PRHI & WHAMglobal

Action Planning Tool: Example

Our Goal: Establish a system-wide Safe Sleep education program for all staff (clinical & non-clinical) within 6 mons
Date Started Plan: 11/1/24
Department(s) Involved: Pediatrics, NICU, OB, Education, Learning MS, 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)

© 2025 JHF, PRHI & WHAMglobal

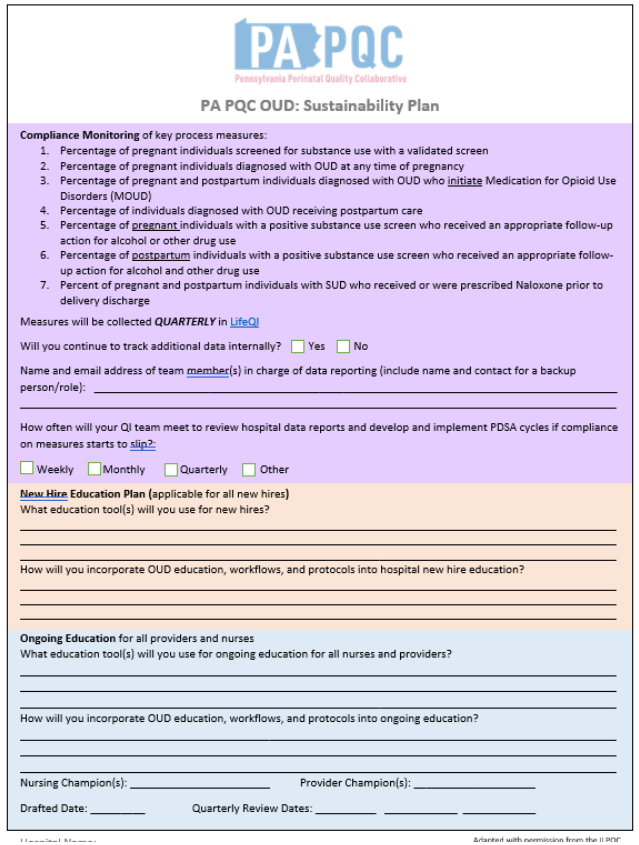
Action Planning Tool: Example

Our Goal: Establish a system-wide Safe Sleep education program for all staff (clinical & non-clinical) within 6 mons
Date Started Plan: 11/1/24
Department(s) Involved: Pediatrics, NICU, OB, Education, Learning MS, 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		

© 2025 JHF, PRHI & WHAMglobal

Sustainment Plans



PA PQC
Pennsylvania Perinatal Quality Collaborative

PA PQC OUD: Sustainability Plan

Compliance Monitoring of key process measures:

1. Percentage of pregnant individuals screened for substance use with a validated screen
2. Percentage of pregnant individuals diagnosed with OUD at any time of pregnancy
3. Percentage of pregnant and postpartum individuals diagnosed with OUD who initiate Medication for Opioid Use Disorders (MOUD)
4. Percentage of individuals diagnosed with OUD receiving postpartum care
5. Percentage of pregnant individuals with a positive substance use screen who received an appropriate follow-up action for alcohol or other drug use
6. Percentage of postpartum individuals with a positive substance use screen who received an appropriate follow-up action for alcohol and other drug use
7. Percent of pregnant and postpartum individuals with SUD who received or were prescribed Naloxone prior to delivery discharge

Measures will be collected ***QUARTERLY*** in LifeQI

Will you continue to track additional data internally? ☐ Yes ☐ No

Name and email address of team member(s) in charge of data reporting (include name and contact for a backup person/role): _____

How often will your QI team meet to review hospital data reports and develop and implement PDSA cycles if compliance on measures starts to slip?:

☐ Weekly ☐ Monthly ☐ Quarterly ☐ Other

New Hire Education Plan (applicable for all new hires)
What education tool(s) will you use for new hires?

How will you incorporate OUD education, workflows, and protocols into hospital new hire education?

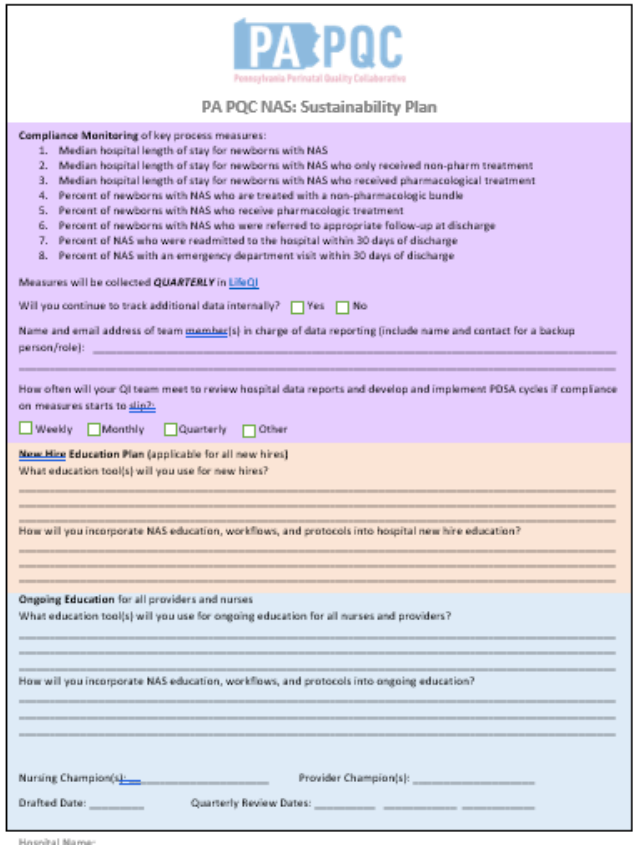
Ongoing Education for all providers and nurses
What education tool(s) will you use for ongoing education for all nurses and providers?

How will you incorporate OUD education, workflows, and protocols into ongoing education?

Nursing Champion(s): _____ Provider Champion(s): _____

Drafted Date: _____ Quarterly Review Dates: _____ _____ _____

Hospital Name: _____ Adapted with permission from the IL PQC



PA PQC
Pennsylvania Perinatal Quality Collaborative

PA PQC NAS: Sustainability Plan

Compliance Monitoring of key process measures:

1. Median hospital length of stay for newborns with NAS
2. Median hospital length of stay for newborns with NAS who only received non-pharm treatment
3. Median hospital length of stay for newborns with NAS who received pharmacological treatment
4. Percent of newborns with NAS who are treated with a non-pharmacologic bundle
5. Percent of newborns with NAS who receive pharmacologic treatment
6. Percent of newborns with NAS who were referred to appropriate follow-up at discharge
7. Percent of NAS who were readmitted to the hospital within 30 days of discharge
8. Percent of NAS with an emergency department visit within 30 days of discharge

Measures will be collected ***QUARTERLY*** in LifeQI

Will you continue to track additional data internally? ☐ Yes ☐ No

Name and email address of team member(s) in charge of data reporting (include name and contact for a backup person/role): _____

How often will your QI team meet to review hospital data reports and develop and implement PDSA cycles if compliance on measures starts to slip?:

☐ Weekly ☐ Monthly ☐ Quarterly ☐ Other

New Hire Education Plan (applicable for all new hires)
What education tool(s) will you use for new hires?

How will you incorporate NAS education, workflows, and protocols into hospital new hire education?

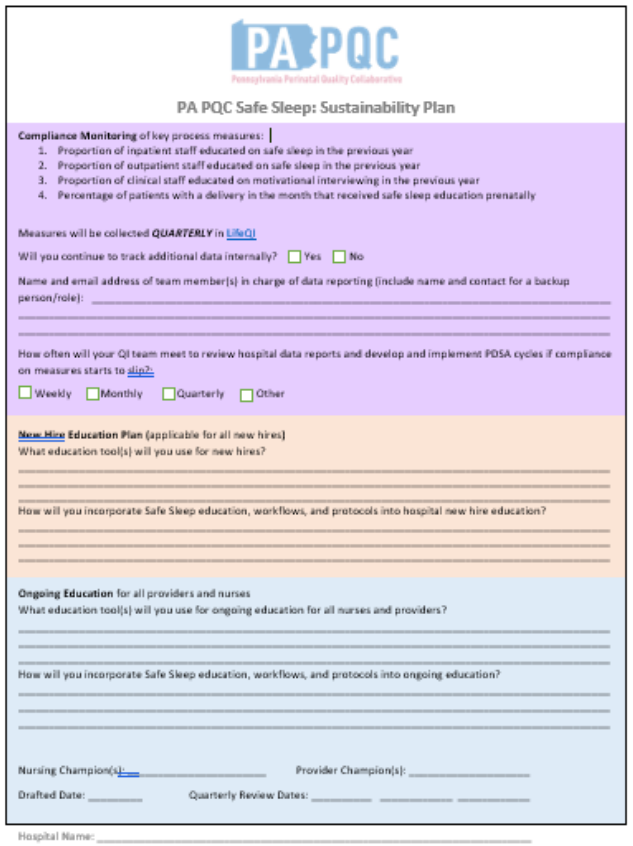
Ongoing Education for all providers and nurses
What education tool(s) will you use for ongoing education for all nurses and providers?

How will you incorporate NAS education, workflows, and protocols into ongoing education?

Nursing Champion(s): _____ Provider Champion(s): _____

Drafted Date: _____ Quarterly Review Dates: _____ _____ _____

Hospital Name: _____



PA PQC
Pennsylvania Perinatal Quality Collaborative

PA PQC Safe Sleep: Sustainability Plan

Compliance Monitoring of key process measures:

1. Proportion of inpatient staff educated on safe sleep in the previous year
2. Proportion of outpatient staff educated on safe sleep in the previous year
3. Proportion of clinical staff educated on motivational interviewing in the previous year
4. Percentage of patients with a delivery in the month that received safe sleep education prenatally

Measures will be collected ***QUARTERLY*** in LifeQI

Will you continue to track additional data internally? ☐ Yes ☐ No

Name and email address of team member(s) in charge of data reporting (include name and contact for a backup person/role): _____

How often will your QI team meet to review hospital data reports and develop and implement PDSA cycles if compliance on measures starts to slip?:

☐ Weekly ☐ Monthly ☐ Quarterly ☐ Other

New Hire Education Plan (applicable for all new hires)
What education tool(s) will you use for new hires?

How will you incorporate Safe Sleep education, workflows, and protocols into hospital new hire education?

Ongoing Education for all providers and nurses
What education tool(s) will you use for ongoing education for all nurses and providers?

How will you incorporate Safe Sleep education, workflows, and protocols into ongoing education?

Nursing Champion(s): _____ Provider Champion(s): _____

Drafted Date: _____ Quarterly Review Dates: _____ _____ _____

Hospital Name: _____

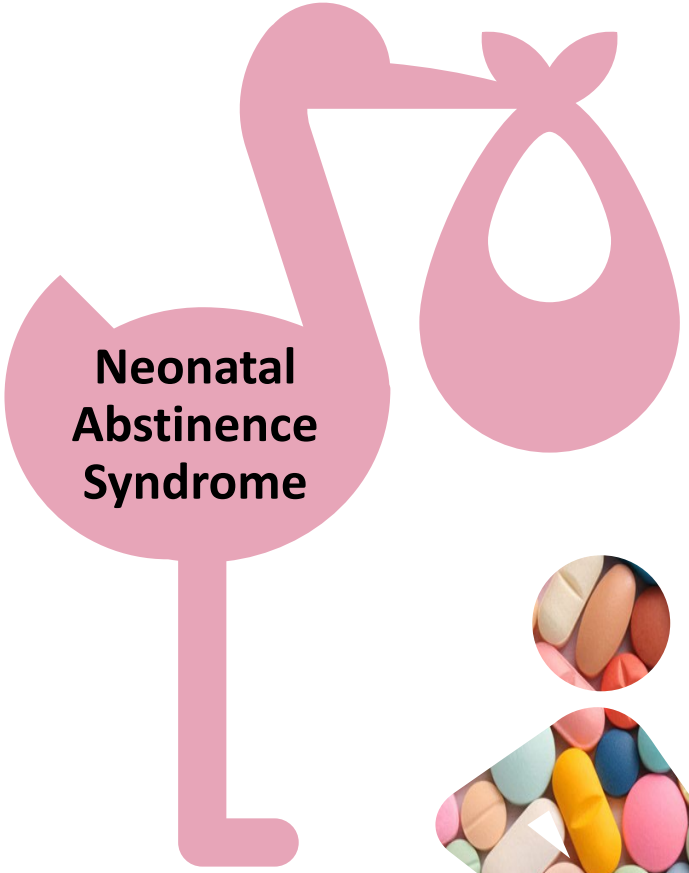
© 2025 JHF, PRHI & WHAMglobal

PA PQC Sustainment Check-Ins

July 16

October 22

December 11



Safe Sleep

Maternal
Opioid Use

© 2025 JHF, PRHI & WHAMglobal

Education Planning

1. How do you plan on weaving your sustainment education plan into your ***new staff*** education?
2. How do you plan on weaving your sustainment education plan into your ***annual staff*** education?

© 2025 JHF, PRHI & WHAMglobal

Data Planning

1. Is there another process/workflow at your site that is regularly tracked? (i.e. SSI, NTSV c/s)
2. Planning for ***data monitoring*** – who, what, and how often?
3. ***Action planning*** - What is your data "trigger" to prompt intervention? (i.e. timeframes, thresholds, trends)
4. What challenges do you foresee?

© 2025 JHF, PRHI & WHAMglobal

Wrap-Up

Upcoming Virtual Sessions

MAY

No virtual sessions this month – register and join us at our in-person Annual Meeting in Altoona!

JUNE 11

TBD

11:00 a.m. – 12:00 p.m.

Zoom

JULY 16

Sustainment Check-in

11:00 a.m. – 12:00 p.m.

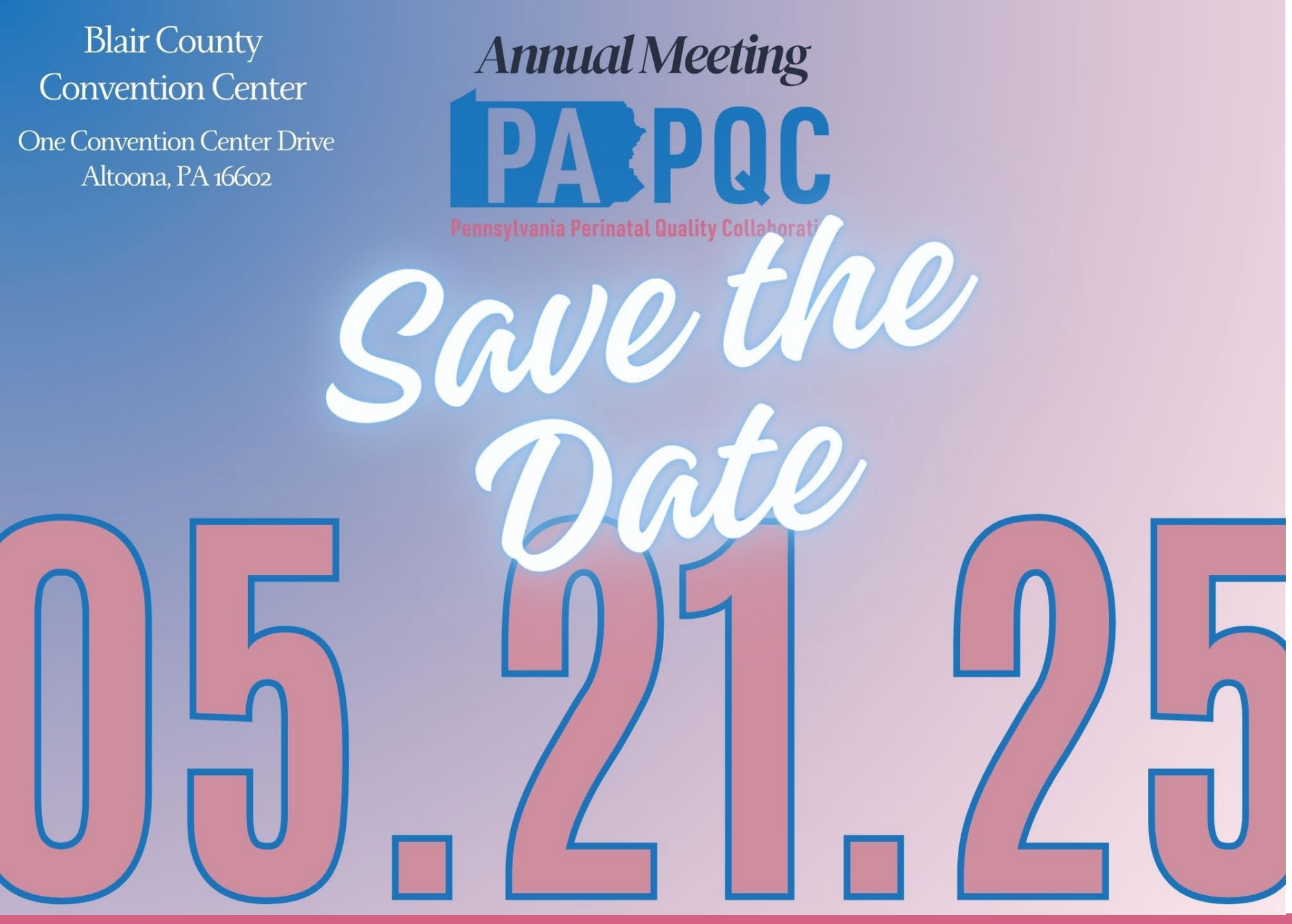
Zoom

8/13-10/15

Urgent Maternal Warning Signs Sprint

Sepsis in Obstetric Care

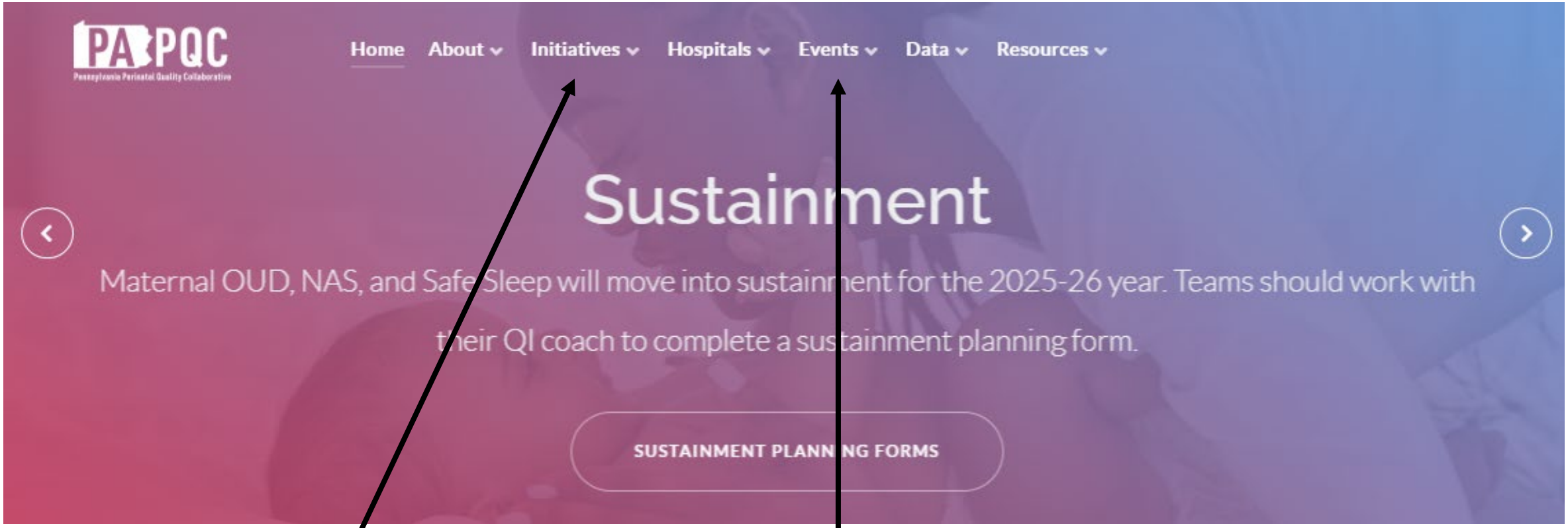
Register for the kickoff here!!



Register today
deadline is 5/19!

The PA PQC Annual Meeting is an in-person event, there is no option to attend virtually.

© 2023 JHF, PRHI & WHAMglobal



Learn about the Initiatives

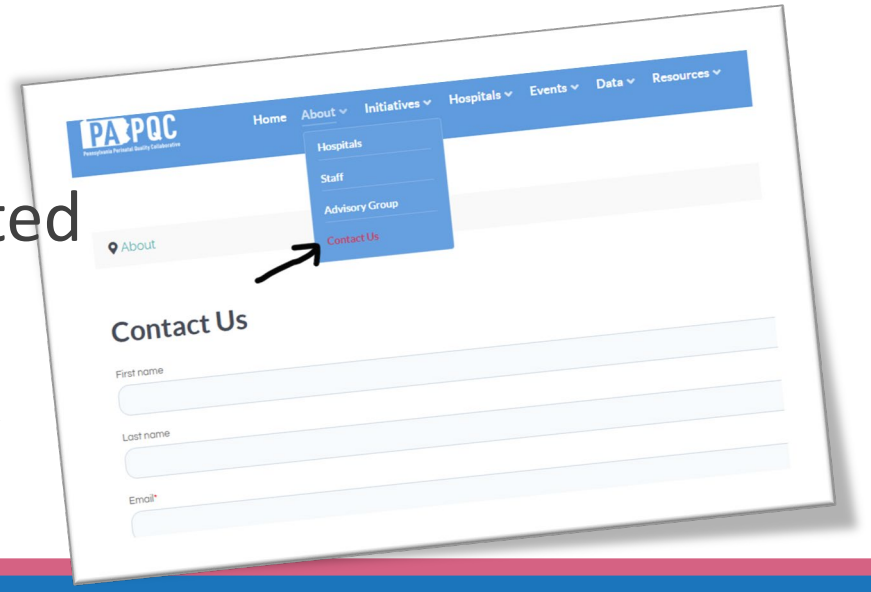
Access Session Materials

https://www.papqc.org/

Updated Contact Info.

Upcoming changes to your email address? Haven't heard from us in a while?

- Please reach out to your coach to provide them updated contact info. for anyone at your site who is involved in the PA PQC
- If you haven't gotten a newsletter or PA PQC emails in a while, check to make sure you are subscribed to our newsletter with your updated email address
- You can always reach us here



© 2023 JHF, PRHI & WHAMglobal

PA PQC QI Coaches

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

Lisa Boyd, BA
Program Associate, Jewish Healthcare 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

Credentialing Guidelines:

PLEASE complete the electronic evaluations by Wednesday, April 23rd: https://www.surveymonkey.com/r/5D73SSC

1. Please indicate on the evaluation which CEUs you are requesting: CME, CNE or Social Worker credits.
2. The UPMC Center for Continuing Education will follow up with you, via email, after Wednesday, April 23rd 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!

www.papqc.org

papqc@whamglobal.org