

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.**

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.

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 Maureen Saxon-Gioia, MS HSA, RN, Nurse Project Manager, 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 Jason Komasz, MD, FAAP, Medical Director, CHOP, Newborn and Pediatric Care
 - **Trinity Health – St. Mary Medical Center:** Elizabeth Buck, BSN, RNC-OB, c-EFM, Perinatal Clinical Education Specialist
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



	PA PQC BRONZE	PA PQC SILVER	PA PQC GOLD
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

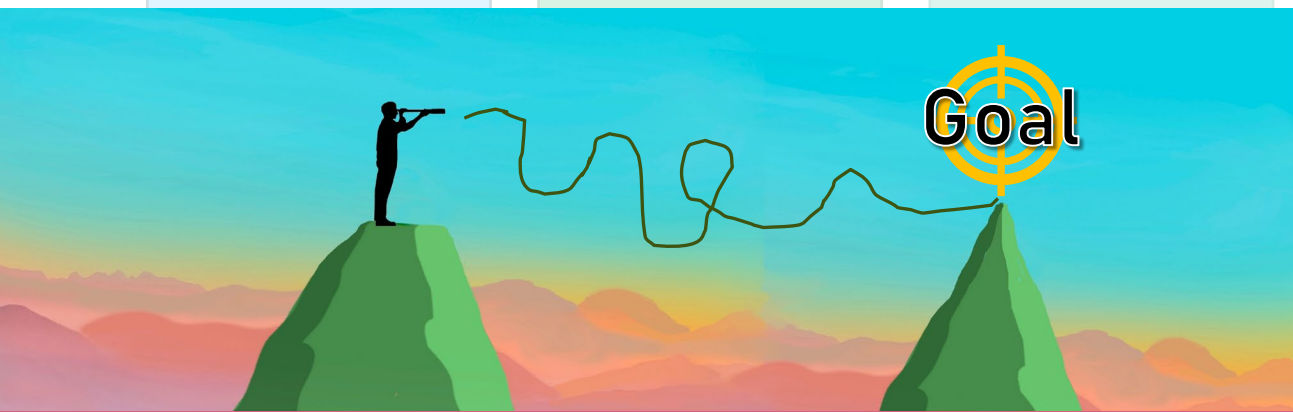
JENNIFER CONDEL

LISA BOYD

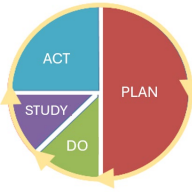
Quality Improvement Action Planning



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



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)



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, 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)



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, 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		

Milestone 5 Examples

Upcoming Pa PQC Sessions

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	SEPTEMBER 19	SEPTEMBER 23
Neonatal Initiative Peer-to-Peer Networking 11:00 a.m. – 12:00 p.m. Zoom	IPLARC Sustainment Check-In 11:00 a.m. – 12:00 p.m. Zoom	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	



© 2024 JHF, PRHI & WHAMglobal

© WellSpan Health 34

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 12-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)

© WellSpan Health 14

PA PQC Events

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	SEPTEMBER 19	SEPTEMBER 23
Neonatal Initiative Peer-to-Peer Networking 11:00 a.m. – 12:00 p.m. Zoom	IPLARC Sustainment Check-In 11:00 a.m. – 12:00 p.m. Zoom	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	



© 2024 JHF, PRHI & WHAMglobal

Quality Touchbase

Hospital 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 (Bashaa, 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

Metrics Review: JULY 2024

- Immediate Postpartum Depression Screening: 98.0%
- Severe HTN: 6 patients, 31 events, 66% repeated within 15 minutes, 1 treated.

Upcoming Learning Sessions

SEPTEMBER 16	SEPTEMBER 19	SEPTEMBER 23
Neonatal Initiative Peer-to-Peer Networking 11:00 a.m. – 12:00 p.m. Zoom	IPLARC Sustainment Check-In 11:00 a.m. – 12:00 p.m. Zoom	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	



© 2024 JHF, PRHI & WHAMglobal

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.

Keeping babies safe while sleeping is as easy as ABC:

Alone: Nothing in the crib but baby and a fitted sheet.

Back: Always place baby on their back for naps or bedtime.

Crib: Bedsharing is not safe, babies need their own crib.

Roughly 80 Pennsylvania babies die each year from sleep related deaths. **That's 4 kindergarten classes that will never be.** Make sure your baby is placed safely to sleep for **EVERY** sleep.

Visit us online at PASafeSleep.org

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.

The Safe Sleep Guidelines
Follow these 8 steps to keep your baby safe and healthy.
Teach these tips to other people who take care of your baby!

PASafeSleep

1. Put your baby on their back to sleep until their first birthday.
2. A baby should sleep in the same room as an adult, but in their own separate crib.
3. Don't put crib bumpers, blankets, pillows or toys in your baby's crib.
4. The only thing in baby's crib should be a firm mattress & fitted sheet.
5. Never put your baby to sleep in a crib made more than 10 years ago or that has missing or broken parts.
6. Don't make the room your baby sleeps in too hot.
7. Always put your baby on their back in their crib after feeding.*
8. Keep your baby away from smoke, alcohol & illegal drugs.

*Breastfeeding has been shown to reduce the risk of SIDS.

This project is funded, in part, under a contract with the Pennsylvania Department of Health in collaboration with Penn Medicine & Maternity Care Coalition. Visit us online at PASafeSleep.org

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 EDC parents, and added the additional GOALS courses for DEI at Gelsinger, 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 GHS
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 20% of all maternal deaths. This category includes drug-related overdose deaths. In 2013, only 15% 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 MMRDC)

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=83)

Cause of Death	Number of Deaths	Overall Percentage
Accidental Poisoning	20	24%
Other Direct Obstetric Deaths	9	11%
Transportation Accidents	8	10%
Assault	7	8%
Other Pregnancy Related	4	5%
Intentional Self-Harm	4	5%

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

Maureen Saxon-Gioia
Hadar Re'em

- ***Holy Redeemer Hospital:*** Patient Voice in Maternal OUD
- ***Armstrong Center for Medicine and Health Hospital:*** Patient Voice in Safe Sleep
- ***Penn Medicine Chester County:*** Patient Voice in NAS Huddles & Neonatal Advocacy Group (NAG)
- ***Trinity St. Mary's Medical Center:*** Health Equity in Maternal Sepsis



PA PQC – ACMH SAFE SLEEP PATIENT VOICE PROJECT

KRISTINA LYNCH BSN, RN, PRENATAL EDUCATOR

LINDSAY FEITKNECHT BSN, RN, OB NURSE MANAGER

FOCUSING ON SAFE SLEEP

- MANAGEMENT PHASE OF PA SAFE SLEEP PROGRAM
- IDENTIFIED AN OPPORTUNITY FOR IMPROVEMENT FOR THE OUTPATIENT EXPERIENCE
- SAFE SLEEP QUESTIONNAIRE (IN PROGRESS)
 - 5 OUTPATIENT OFFICES
 - INITIATION OF ELECTRONIC KIOSKS
- OUTPATIENT SAFE SLEEP POLICY (COMPLETED)
- EMPLOYEE EDUCATION (INITIATED)
- PATIENT EDUCATION (INITIATED)

PATIENT VOICE PROJECT

- EXPANDING ON THE PATIENT EXPERIENCE, OUTSIDE OF SAFE SLEEP EDUCATION
- ELECTRONIC SURVEY (IN PROGRESS)
 - DEMOGRAPHIC INFORMATION
 - AN OVERVIEW OF THE PATIENT EXPERIENCE RELATED TO THEIR PREGNANCY JOURNEY, BIRTH

IMPROVING COMMUNICATION WITH FAMILIES IMPACTED BY OUD



IMPROVING COORDINATION OF CARE

Penn Medicine Chester County Hospital

December 11, 2024

Stefanie Schwartz, DPT, NTMTC, CNT

Jason Komasz, MD, FAAP

Susan Paris, BSN, RN, CPN



PROGRAM GOALS

- Foster a team approach between staff and families
- Ensure families understand expectations of NOWS inpatient care
- Create a specialized team to ensure consistent care of infants with NOWS in all units
- Enhance NOWS education for all staff



- Nurse will send Secure Chat message to NAGS team upon infant with NOWs admission.
- Team consists of pediatric physicians, nurses, & PT
- The NAGS team will:
 - Verify assessments with ESC
 - Answer clarifying questions
 - Assist with optimizing NPIs
 - Assess developmental vs withdrawal cues
 - Educate parents and support person
 - Address questions and concerns
 - Foster transfers to pediatrics as needed

NAGS CONSULTATION: NOWS ADVOCACY GROUP

+

○

●

NAGS TEAM CONSULT NOTE

NOWS/NAS ADVOCACY GROUP NOTE

PATIENT'S NAME:

PATIENT'S DATE OF BIRTH:

PATIENT'S PROBLEM LIST:

MOST RECENTLY DOCUMENTED ESC ASSESSMENT:

In reviewing the recent ESC Assessments .

INTAKE & OUTPUT

SUBJECTIVE

Boy-Kolleen McIsaac is a 6 day old male who is currently under ESC Protocol for NOWS/NAS.

RECOMMENDATIONS

Educated on . Educated on .

INITIAL FAMILY HUDDLE

Baby and mother transfer to pediatrics together upon admission.

Maternity nurses call and coordinate transfer with pediatric staff with the mother present.

Meeting is led by pediatrician with nurse, parent(s), designated support people, and other staff as able.

Our goal is to orient mother to the unit, discuss the plan of care in detail, educate about ESC.

Facilitates a team approach and sets expectations early, provides better consistency of care.






INITIAL FAMILY HUDDLE HANDOUT

A Support Person is Welcome	Your Baby's ESC Goals	Ways to Keep Baby Calm & Consoled	A Calming Environment Includes	Doctor & Nursing Assessments & Caregiving
<ul style="list-style-type: none"> Is there a friend or family member who can come help console your baby? 	<ul style="list-style-type: none"> EATS: Baby should eat good amounts within 30 minutes max SLEEPS: Baby should sleep for at least 1 hour undisturbed CONSOLES: Baby should calm within 10 minutes and stay calm for at least 1 hour If baby is not meeting goals, morphine may be needed. 	<ul style="list-style-type: none"> Swaddling Rocking Shushing Sucking Patting their back Holding skin-to-skin Feeding early & often 	<ul style="list-style-type: none"> Dim, quiet room Baby is swaddled Clustering care and assessments around baby's awake time Use of gentle piano or guitar music or white noise. 	<ul style="list-style-type: none"> Nursing cares are completed every 3 hours Doctors examine the baby every 12 hours Nurses & doctors assess for withdrawal symptoms Weights are done every evening Swaddle baths are done every 2-3 days

Feeding Amounts & Weight Gain are Very Important	Changes in Your Baby's Medical Status	Safe Sleep	Discharge Baby is ready to go home when:	Check Out the Following Education Tools
<ul style="list-style-type: none"> Feeding amounts will change every few days as baby's weight increases Sometimes morphine can be used to help with weight gain Typical bottle and/or breast feedings do not last more than 30 minutes 	<ul style="list-style-type: none"> We will do our best to contact you with changes in your baby's status or treatment protocol If medically necessary, treatment changes may be made prior to reaching you Please ensure we have your accurate updated contact information. 	<ul style="list-style-type: none"> Always place baby on their back to sleep, in a crib, alone with no pillows or lovies Staff will place infant in a crib if a parent falls asleep holding their baby Communicate with CCH staff and/or prescription provider if you are having trouble staying awake Utilize call bell if you feel drowsy while holding your baby 	<ul style="list-style-type: none"> Baby meets all ESC goals Baby has not had morphine for 2 days Baby is eating goal amounts and gaining weight for 2 consecutive days Discharge teaching and plan of safe care are reviewed with parents or caregivers 	<ul style="list-style-type: none"> 7 "S"s of Consoling Rainbow Handout (hanging in baby's room) My ESC Progress Chart (hanging in baby's room) Parent Welcome Folder (received in Mother Baby Unit) White Board in baby's room

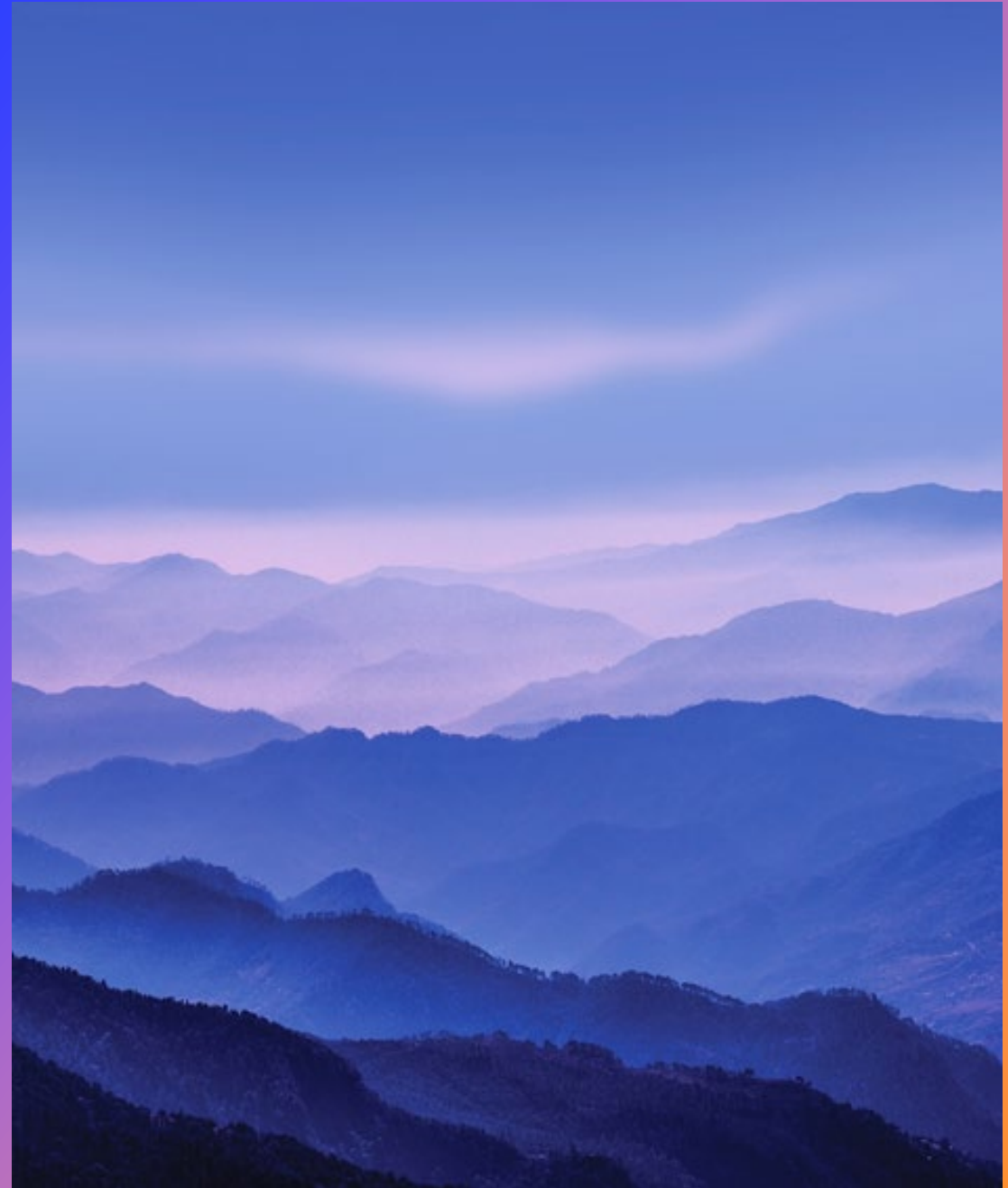
ESC DAILY PROGRESS TOOL

- Daily ESC progress tool will be displayed at the bedside.
- RN will review and update caregivers at bedside, minimally every 4 hours, to provide ongoing education and updates on progress.

MY ESC PROGRESS		DATE:
 <p>My Feeding Goal Today is _____ mL each feed.</p>	 <p>At _____ I was able to:</p> <p><input type="checkbox"/> Eat <input type="checkbox"/> Sleep <input type="checkbox"/> Console</p>	 <p>At _____ I was able to:</p> <p><input type="checkbox"/> Eat <input type="checkbox"/> Sleep <input type="checkbox"/> Console</p>
 <p>At _____ I was able to:</p> <p><input type="checkbox"/> Eat <input type="checkbox"/> Sleep <input type="checkbox"/> Console</p>	 <p>At _____ I was able to:</p> <p><input type="checkbox"/> Eat <input type="checkbox"/> Sleep <input type="checkbox"/> Console</p>	 <p>At _____ I was able to:</p> <p><input type="checkbox"/> Eat <input type="checkbox"/> Sleep <input type="checkbox"/> Console</p>

PROGRAM STRENGTHS

- Improvement noted in:
 - Team communication
 - Family compliance with NPIs and treatment methods
 - Parent satisfaction (informal reporting). Less behavioral issues noted.
 - Nursing satisfaction (informal reporting)
 - Improved attendance at weekly family meetings
- Compliance of NAGS team consults, weekly family meetings, and initial family huddles are being tracked as a QI project.
- We have very committed champions of the project that are truly multi-disciplinary.



- CYF and disposition issues
- Inpatient treatment program restrictions
- Lack of transportation for parents
- Decreased mental health resources for families

CHALLENGES IMPACTING PROGRAM

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 **SS**

AHN – Forbes Hospital **SS**

AHN – Jefferson Hospital **SS**

AHN – Saint Vincent Hospital **OUD NAS SS**

AHN – West Penn Hospital **MS SS**

AHN – Wexford Hospital **OUD SS**

Commonwealth Health – Moses Taylor Hospital **OUD NAS MS SS**

Conemaugh Memorial Medical Center **NAS**

Doylestown Hospital **OUD NAS MS SS**

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,
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

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

Annual Meeting



Pennsylvania Perinatal Quality Collaborati

*Save the
Date*

05.21.25



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!



www.papqc.org

papqc@whamglobal.org