

PA PQC

Pennsylvania Perinatal Quality Collaborative

PA PQC Virtual Session

August 13, 2025

CONTINUING EDUCATION

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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Learning Objectives

- Identify the current state of Urgent Maternal Warning Signs (UMWS) education at your hospital.
- Discuss at least two different quality improvement tools for workflow planning.
- Identify related metrics and measures to track throughout implementation of UMWS education.

Agenda

1. **Welcome** – Maureen Saxon-Gioia, MSHSA, BSN, RN, PA PQC QI Coach, Jewish Healthcare Foundation
2. **Baseline Assessment** – Aasta Mehta, MD, MPP, PA PQC Advisory Group Co-Chair
3. **Peer-to-Peer Discussion** – Facilitated by Aasta Mehta, MD, MPP
4. **Stakeholder Engagement** – Kristen Brenneman, MSN, PA PQC QI Coach, Jewish Healthcare Foundation
5. **Workflow Planning** – Jennifer Condel, SCT(ASCP)MT, Senior Program Manager, Perinatal Health, Jewish Healthcare Foundation
6. **Metrics & Measures** – Karena Moran, PhD, QI Coach and NEPaPQC Manager
7. **Wrap-up & Next Steps** – Lisa Boyd, BA, PA PQC Data Manager and QI Coach, Jewish Healthcare Foundation



Baseline Assessment

AASTA MEHTA, MD, MPP



Why is a baseline important?

- Establishes a starting point
- Helps set realistic goals
- Identifies gaps, strengths, and opportunities
- Informs tailored support

The Maternal Early Warning System and Urgent Maternal Warning Signs both play an integral role in recognizing and addressing preventable maternal morbidity and mortality. Read below about the difference between the two:

Maternal Early Warning Signs (MEWS)

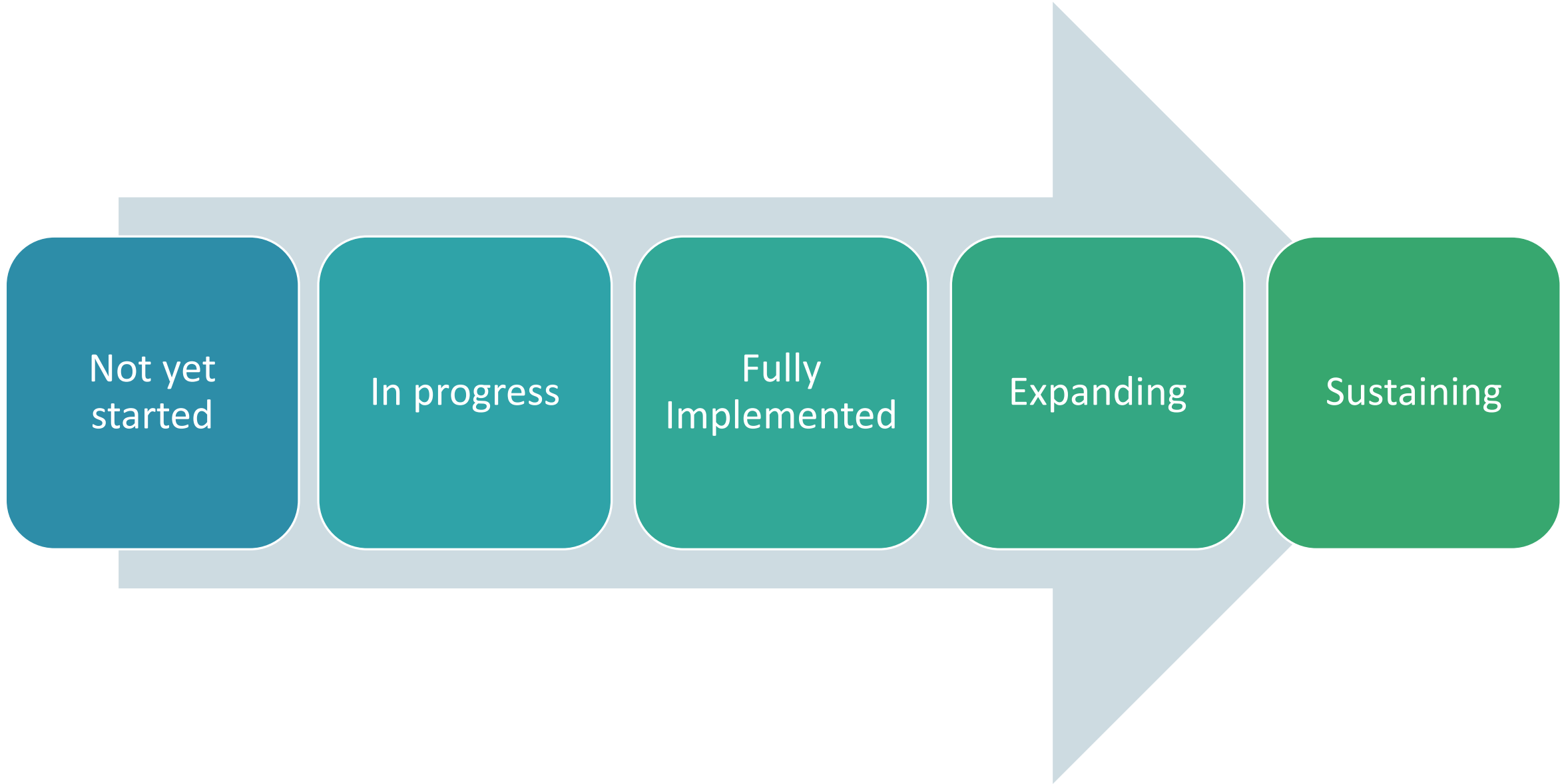
VS.

Urgent Maternal Warning Signs (UMWS)

MEWS

UMWS





Key Elements to Assess

- Current workflows for education
- Staff involved & training received
- Materials used (tool comparison handout is available with AIM/ACOG UMWS, CDC HearHer, AWHONN POST-BIRTH)
- Documentation
- Assessment of patient understanding (e.g., teach-back)
- Data being tracked (if any)

Assessment by Status

NOT YET STARTED

Identify barriers (staffing, time, awareness, materials)

Inventory current resources or gaps

Opportunities to start small (pilot unit/group/etc.)

IN PROGRESS

Assess consistency across staff/units

Identify documentation gaps or workflow issues

Plan for process improvement or spread

IMPLEMENTED & BEYOND

Confirm fidelity & sustainability

Explore spread to new units or populations (prenatal vs hospital discharge)

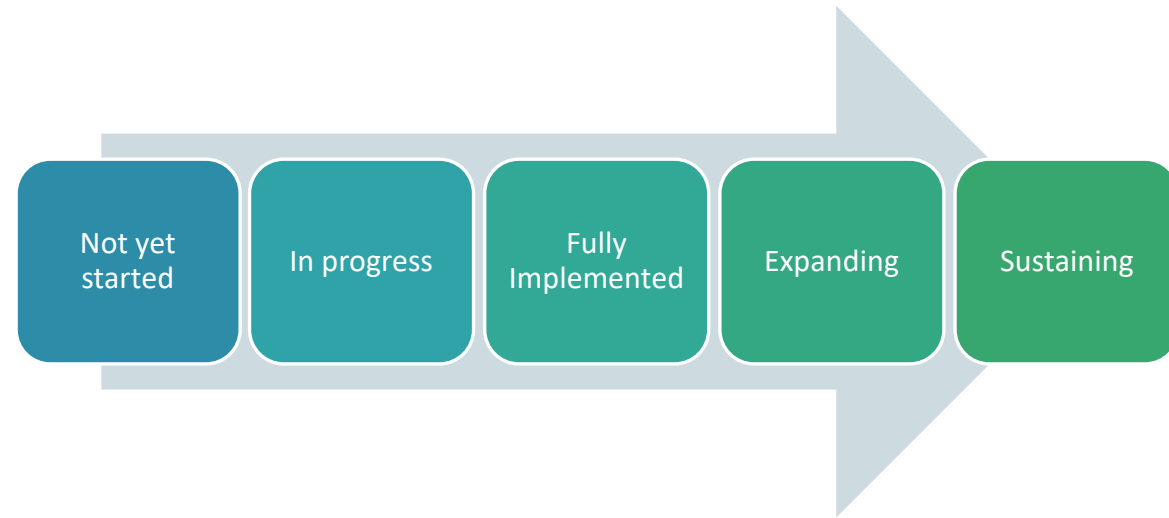
Option to act as ***mentor site***: share tools, co-host check-ins, etc.

Peer-to-Peer Discussion

Facilitated by

Aasta Mehta, MD, MPP

1. What is your current state?



2. What do you hope to get out of the sprint?

An illustration featuring several hands in various colors (pink, orange, brown, light skin) holding and interacting with pieces of paper that have different patterns: a green and white striped pattern, a blue and white grid pattern, an orange pattern with small white dashes, and a blue pattern with small white dots. The background is white and filled with various geometric shapes like circles, triangles, and squares, some with patterns and some plain. The overall style is colorful and abstract.

Stakeholder Engagement

KRISTEN BRENNEMAN, MSN, RN

Depends on the Setting ("Where")

- **Unit or Department:** Needs differ across L&D, postpartum, NICU, ED, outpatient, etc.
- **Patient Flow:** Who touches the patient and when? That defines key education opportunities and stakeholders.
- **Cultural context of the unit:** Some may already value patient education, others may need more buy-in.

Depends on Scope of Implementation

- **Small Test of Change:** May only need a few key influencers or providers to start.
- **Unit-wide Rollout:** Involves broader staff engagement, leadership support, and operational integration.
- **Hospital- or System-level:** Requires buy-in from nursing leadership, QI teams, IT, patient experience, etc.

Identify Core Stakeholder Groups & Roles

Who needs to **approve** changes?
Who needs to **implement** them?
Who will **champion** the effort?
Who can **remove barriers**?

- **Frontline Staff:** Nurses, physicians, midwives, techs—those delivering or reinforcing education.
- **Unit Leadership:** Nurse managers, charge nurses—key for workflow changes and accountability.
- **Educators/Clinical Nurse Specialists:** May have existing tools or be able to support roll-out.
- **QI/Patient Safety Teams:** Can help align with ongoing priorities and provide support.
- **IT/EHR Analysts:** Needed if documentation processes or data collection are affected.
- **Interpreter Services & DEI Teams:** Ensure equity in education access for all patients.
- **Patients & Families (when possible):** To review delivery methods.

Engagement Strategies

- Start early and involve stakeholders in planning—not just informing.
- Use champions to build trust and peer influence.
- Share patient stories or staff feedback to make the case emotionally compelling.
- Tailor messaging to each group's interests (e.g., time-savings, safety, equity, experience).

Tips for Success

ANTICIPATE & ADDRESS CONCERNS

- Time constraints and workload
- Skepticism or past failed initiatives
- Confusion around roles
- Limited training or unclear expectations

LEVERAGE WHAT ALREADY WORKS

- Tie into existing QI efforts, committees, or learning collaboratives
- Use daily huddles, staff meetings, and newsletters to keep people updated
- Celebrate quick wins and show data when available

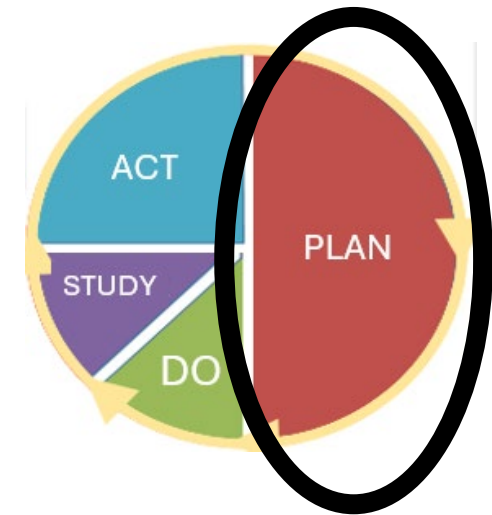
An illustration of three people interacting with a wall covered in colorful sticky notes. On the left, a woman in a yellow top is sitting and looking at a blue sticky note. In the center, a man in a green shirt is standing and holding a purple sticky note. On the right, a man in a blue shirt is standing on a stack of orange sticky notes, reaching up to place a green sticky note. The background is a light beige wall with faint blue lines and a grid of sticky notes in various colors (blue, orange, green, purple, pink).

Workflow Planning

JENNIFER CONDEL, SCT(ASCP)MT

Understanding Your Current Condition: Process Mapping

- Activity of capturing information that graphically represents a process or pathway
- Involves systematically designing, documenting, and managing the steps of a process to improve efficiency and productivity



Process Mapping Benefits



Creates a
visual
document



Explores work
across
departments



Unites a team
in
improvement

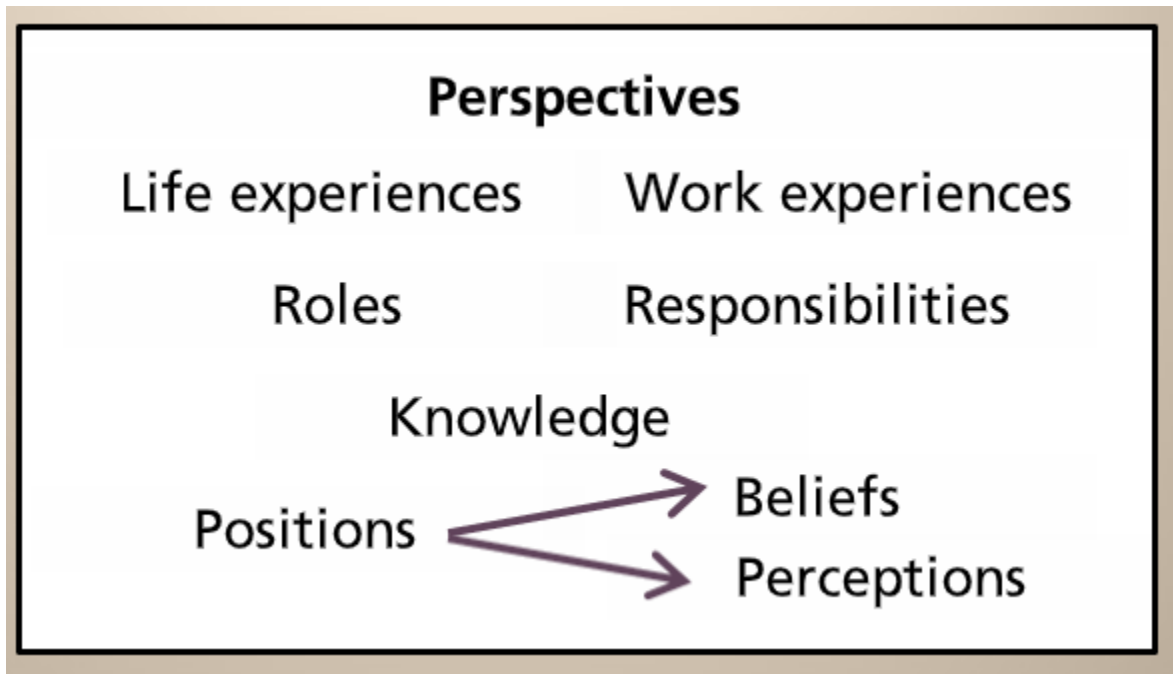


Generates a
deeper
understanding
of work



Identifies
opportunities
for
improvement

Understanding Workflow Across Teams, Departments, and Organizations: Perspective



- People perceive things differently
- See workflow from different points
- Consider the human factor in capturing and creating workflows

Types of Process Maps

- Flowcharts: highlight decision process
- Detailed Process Maps: breakdown of process steps by activities and roles
- Swimlane Diagrams: cross-functional, clarifies individual and team roles across a process



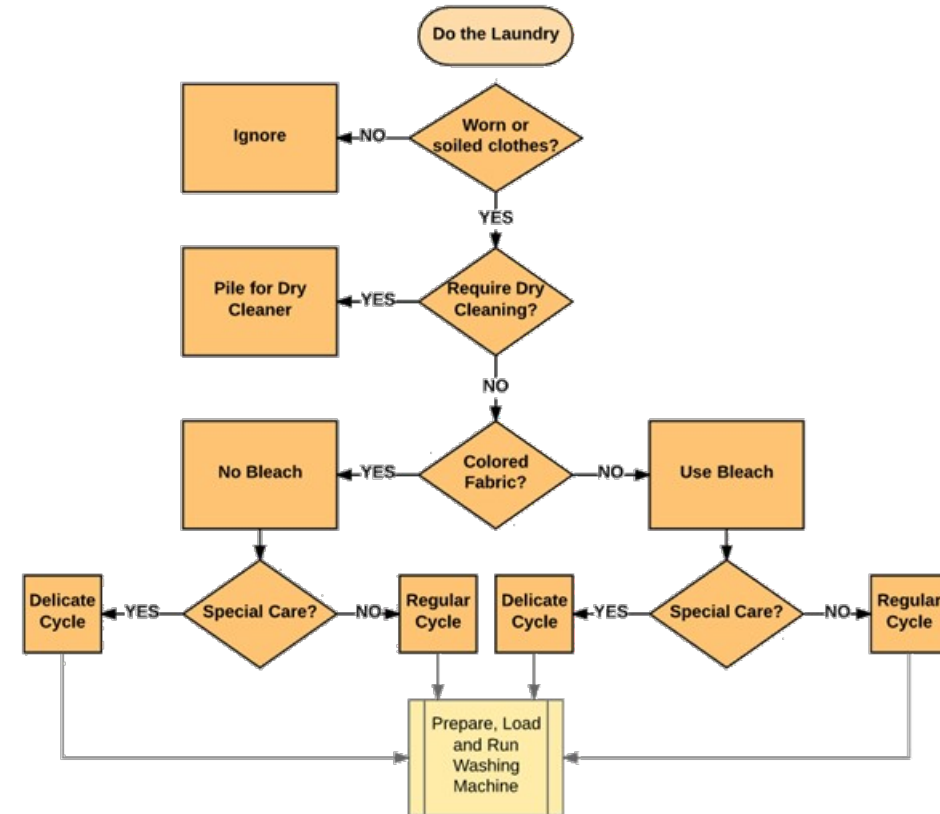
How Do You Do The Laundry?

Written Process

- Collect laundry in baskets
- Take to laundry room
- Separate clothes by color (white, dark)
- Separate clothes by type (denim, delicate, etc.)
- Determine and set wash cycle (delicate, regular) and water temperature
- Add detergent to washer (bleach if needed)
- Run the washing machine

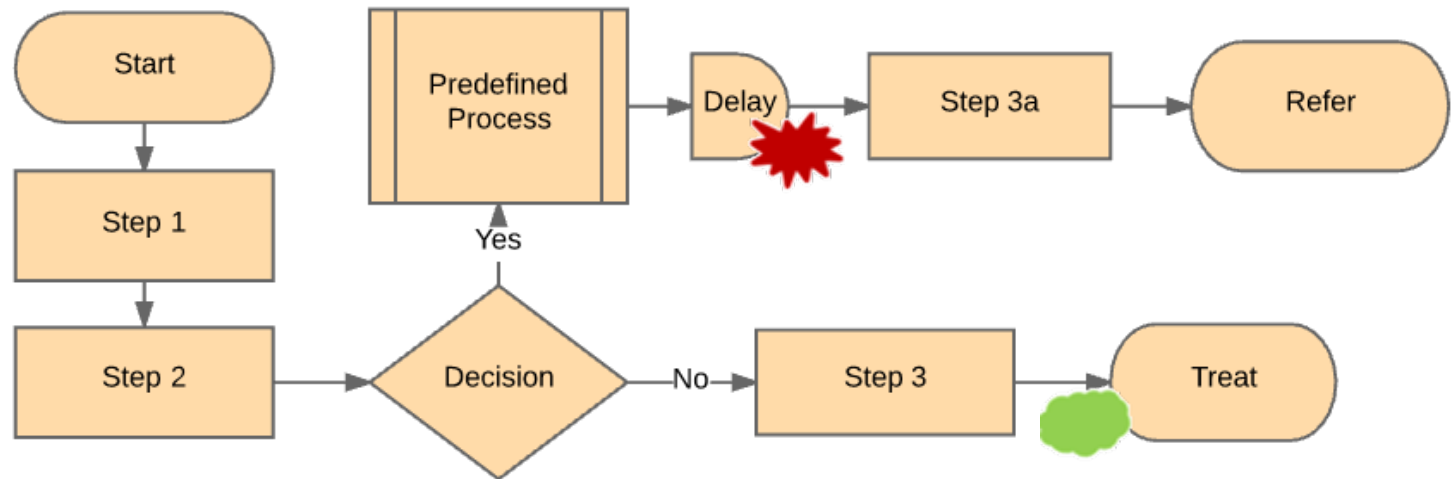


Map



Flowcharts

- Graphic representation showing sequential steps in a process using symbols interconnected with lines and arrows
 - Shows **sequence** of services, people and/or information.
 - Demonstrates when **decisions** are made in a process and the different pathways created.



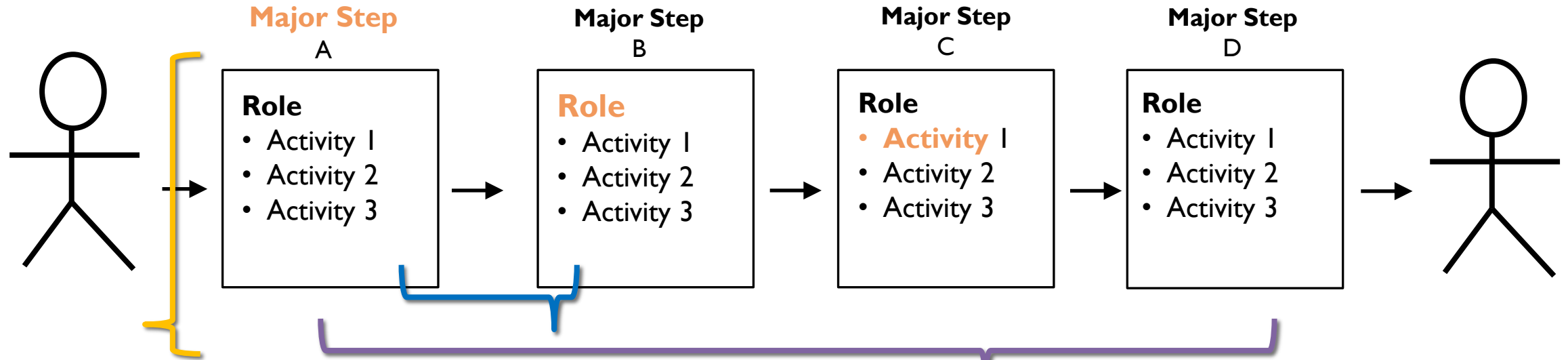
Process Mapping With Post-it Notes

CURRENT



TARGET

Detailed Process Mapping Template



Major Step

What are the specific (individual) activities of work?

Note: identify the role doing the work and each piece of work they do

Connections

How do roles work together? What type of communication is needed to do the work?

Pathway

How does the overall pathway work? Easy to follow for all stakeholders?



Opportunity for Improvement



Recognized benefit

Tool to Define Roles and Responsibilities

RACI Planning Tool for UMWS Sprint

Example:

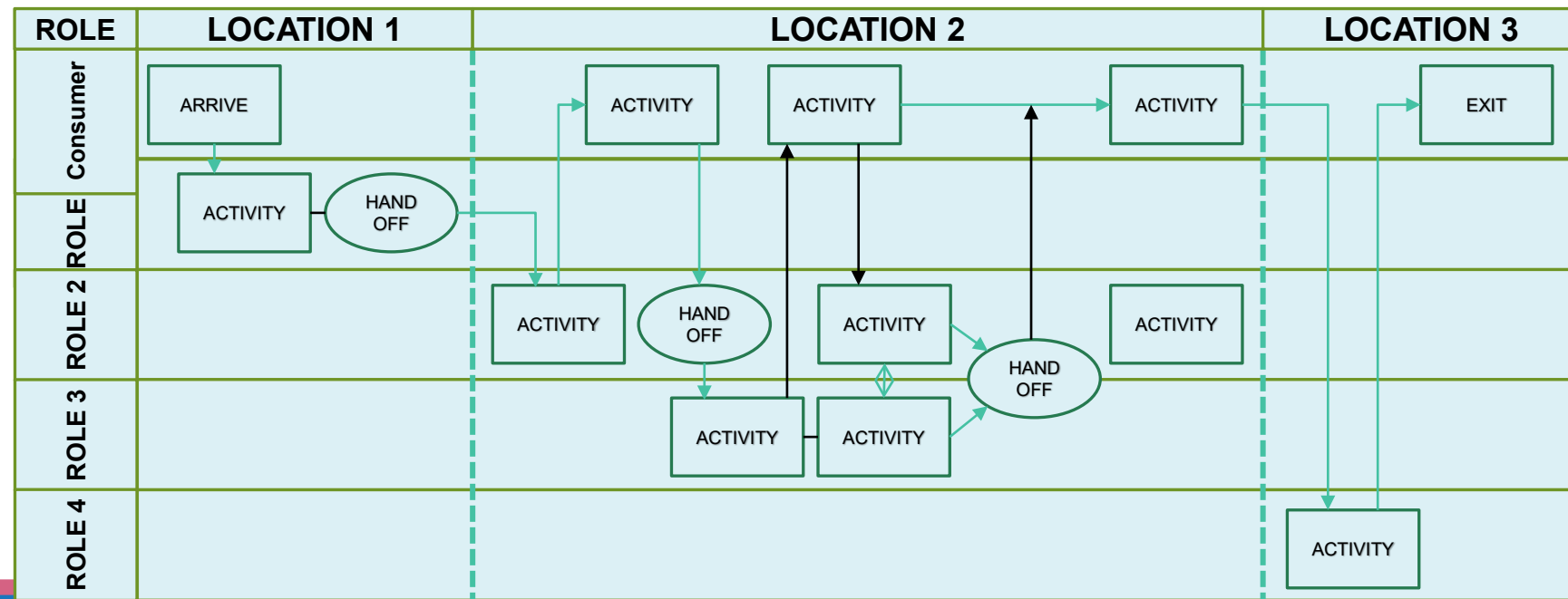
Responsible <i>Who does the work.</i>	Accountable <i>Who makes decisions.</i>	Consulted <i>Who provides input/advice.</i>	Informed <i>Who is kept up-to-date.</i>
-------------------------------------------------	---------------------------------------------------	-------------------------------------------------------	---------------------------------------------------

Sprint Action Item	OB inpatient staff	OB providers	Nursing leadership	Nurse educator	Outpatient staff	ED	Home health
Identify if and how UMWS education is currently provided to patients	R	R	A	C	R	I	R
Determine where UMWS handouts will be stored							
Identify when and how UMWS handouts will be distributed to patients							
Provide UMWS patient education							
Document UMWS patient education occurred							

*This tool is not intended to be all inclusive of tasks within your UMWS patient education process

Swimlane Diagram

- Represents steps in a process that parallel and overlap each other, helping to clarify “Who does what, where, and when?”
- Often used when one or more departments are involved



Key Components of Process Mapping

- Identify and engage all stakeholders (staff, patients) involved in the process or pathway
- Clearly define roles and activities of work
- Demonstrate connections across roles
- Share the visual process with all stakeholders for accuracy
- **Go and See!** Walk the process to see how it actually works

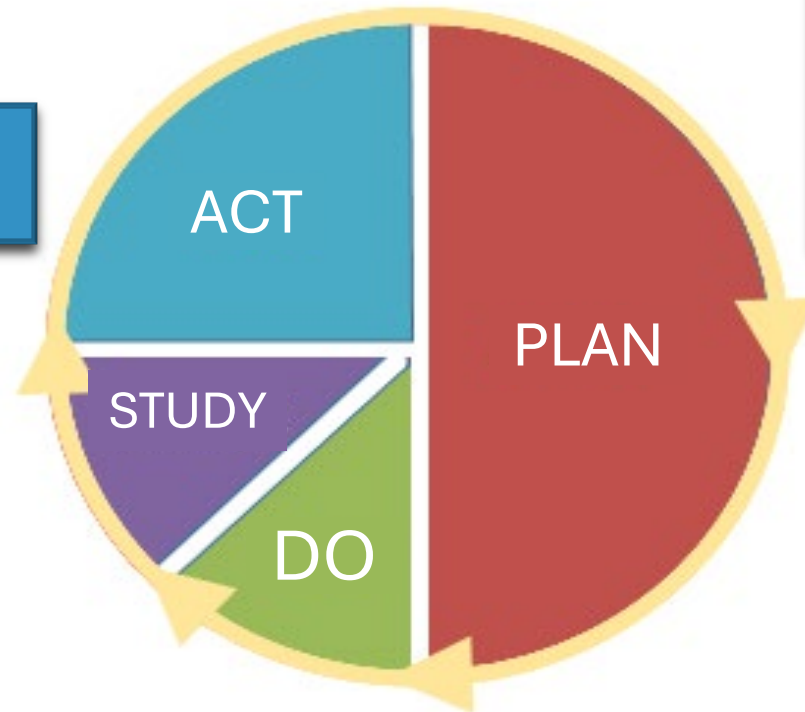


Document Your QI Work:

PLAN - DO - STUDY - ACT

- **Act based** on what you learned
- Adopt, Adapt, Abandon

- Review the test
- **Analyze results**
- Assess learnings



- Identify your goal
- Understand the **current state**
- Design experiment/interventions
- Identify metrics
- Predict results

- Test the change
- Carry out a **small-scale experiment**
- Collect data

The background features a stylized illustration of a woman with grey hair in a bun, wearing a light blue top and a green skirt. She is pointing with her right hand towards a line graph and with her left hand towards a bar chart. The line graph has a green line that rises, dips, and then rises again, set against a white grid. The bar chart has three bars of varying heights, colored in shades of green and yellow. The overall scene is set against a light grey background with yellow horizontal bars at the top and bottom.

Metrics & Measures

KARENA MORAN, PHD

Corresponding Quarterly Survey Question

<p>Patient Education Materials on Urgent Postpartum Warning Signs</p>	<p>Rate progress (1, not yet started – 5, fully in place) towards putting and keeping the structure measure fully in place</p> <p>Has your department developed/curated patient education materials on urgent postpartum warning signs that align with culturally and linguistically appropriate standards?</p>
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Change Concept	Change Idea	Key Resources and Tools
<p>Provide patient education focused on general life-threatening pregnancy and postpartum complications and early warning signs, including sepsis signs and symptoms other than fever, and instructions for who to notify with concerns</p>	<p>Standardize discharge education for patient and their identified support network</p> <ul style="list-style-type: none"> • Include standardized education in child-birthing classes and prenatal appointments • Use teach-back to assess understanding 	<p>AIM: Urgent Maternal Warning Signs¹³ CDC: Urgent Maternal Warning Signs³⁰ The UK Sepsis Trust: How to Spot Sepsis¹⁴ End Sepsis: What is Sepsis?¹⁵ Sepsis Alliance: Pregnancy & Childbirth¹⁶ Association of Women’s Health, Obstetric, and Neonatal Nurses (AWHONN): Save Your Life Poster³¹ to be used in conjunction with the AWHONN Post-Birth Warning Signs Education Program³²</p>
	<p>Ensure patient education materials are aligned with patients’ health literacy, culture, language, and accessibility needs ◊</p> <p>Engage community-based organizations in development of culturally appropriate and language-specific materials ◊ *</p>	<p>CDC: Urgent Maternal Warning Signs³⁰ Centers for Disease Control and Prevention (CDC): Hear Her Campaign²² Sepsis Alliance: Pregnancy & Childbirth¹⁶</p>

Can I create my own measures?

YES!!

EXAMPLES:

- Percent of patients with a delivery that received UMWS education prenatally or on discharge
 - Numerator: patients that received education
 - Denominator: patients that delivered in the XX (month/quarter)
- Percent of patients that successfully teach back or identify X number of UMWS
 - Numerator: patients that demonstrate understanding of UMWS
 - Denominator: random sample 10 patients each month
- Percent of Emergency Dept. staff that complete education on UMWS
 - Numerator: ED staff that completed UMWS education
 - Denominator: total number of ED staff
- *Always align your measures with the specific work that you are doing*



Wrap-Up

LISA BOYD, BA

Upcoming Virtual Sessions

SEPTEMBER 3

UMWS Sprint Check-In

11:00 a.m. – 12:00 p.m.

Zoom

OCTOBER 1

UMWS Sprint Check-In

11:00 a.m. – 12:00 p.m.

Zoom

SEPTEMBER 17

UMWS Sprint Check-In

11:00 a.m. – 12:00 p.m.

Zoom

OCTOBER 15

UMWS Sprint Finale

11:00 a.m. – 12:00 p.m.

Zoom



Learn about the
Initiatives

Access Session
Materials

Pennsylvania Perinatal Quality Collaborative

The PA PQC provides quality improvement support to healthcare teams to improve the standard of care for pregnant and postpartum people and babies.

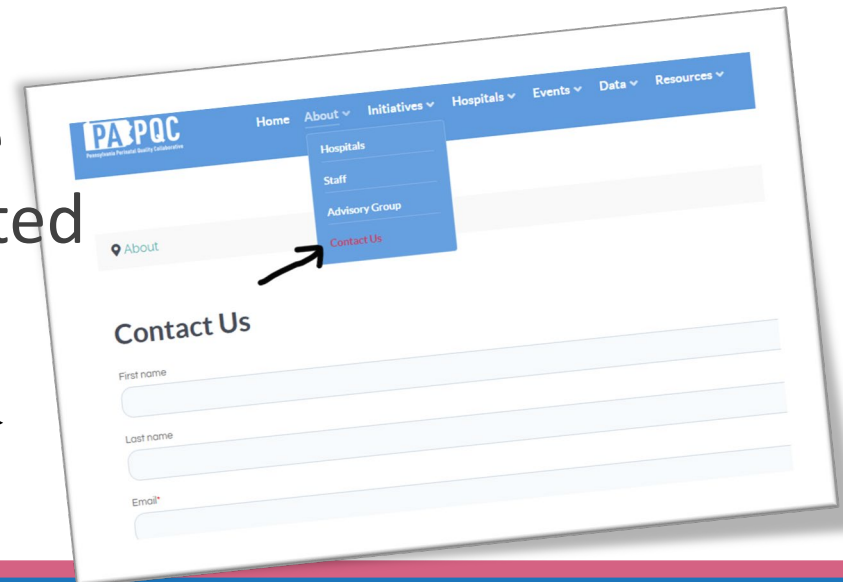
[REGISTER FOR SESSIONS](#)

<https://www.papqc.org/>

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- 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](#) →



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Credentialing Guidelines:

PLEASE complete the electronic evaluations by Wednesday, August 20th: <https://www.surveymonkey.com/r/GY9VD95>

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, August 20th 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!



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