



PA PQC Maternal Sepsis: Sustainability Plan

Compliance Monitoring of key process measures:

1. Cases coded as sepsis during the birth admission
2. Severe maternal morbidity (excluding transfusion codes alone)
3. Multidisciplinary case reviews for obstetric sepsis
4. Proportion of clinical OB providers and nursing staff that have received education on the recognition of and/or unit-standard response to suspected and confirmed obstetric sepsis within the last 2 years
5. Proportion of clinical OB providers and nursing staff that have completed an education program on respectful and equitable care within the last 2 years

Measures will be collected **QUARTERLY** (please continue to submit data for the first year of sustainment)

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 decline?

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 Maternal Sepsis education, workflows, and protocols into hospital new hire education?

Ongoing Education for all staff

What education tool(s) will you use for ongoing education for all staff?

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

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

Drafted Date: _____ Quarterly Review Dates: _____

Hospital Name: _____