

The logo for Pennsylvania Perinatal Quality Collaborative (PA PQC) features the letters 'PA' in white inside a blue silhouette of the state of Pennsylvania. To the right of the state outline are the letters 'PQC' in a bold, blue, sans-serif font. Below this graphic, the full name 'Pennsylvania Perinatal Quality Collaborative' is written in a red, sans-serif font.

PA PQC
Pennsylvania Perinatal Quality Collaborative

PA AIM Virtual Meeting
February 17, 2022

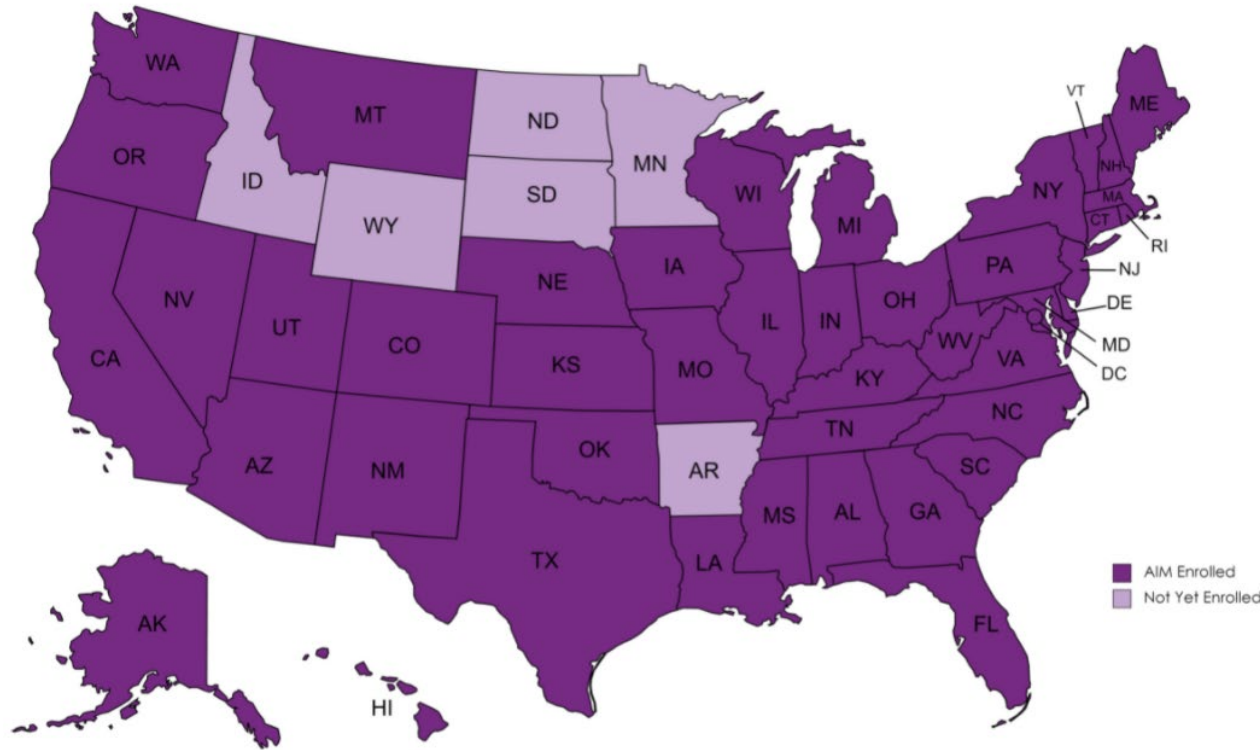


ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

- ✓ Operated by ACOG
- ✓ Funded by HRSA

AIM:

- ✓ Develops Safety Bundles
- ✓ Provides TA to state PQC
- ✓ Tracks aggregated, de-identified data from participating hospitals via their AIM Data Center for QI purposes
- ✓ PA selected the Severe Hypertension and Disparities Bundles
 - PA AIM Task Force, including healthcare and community organizations, created the integrated PA AIM Bundle



Created with mapchart.net

PA AIM Initiative Aims

1. Reduce the rate of severe maternal morbidity (SMM) among those with eclampsia/preeclampsia by 25% and reduce the racial/ethnic disparities by 25%
2. Increase the proportion of birthing patients with acute-onset severe hypertension who are treated within 60 minutes to 75% across races/ethnicities

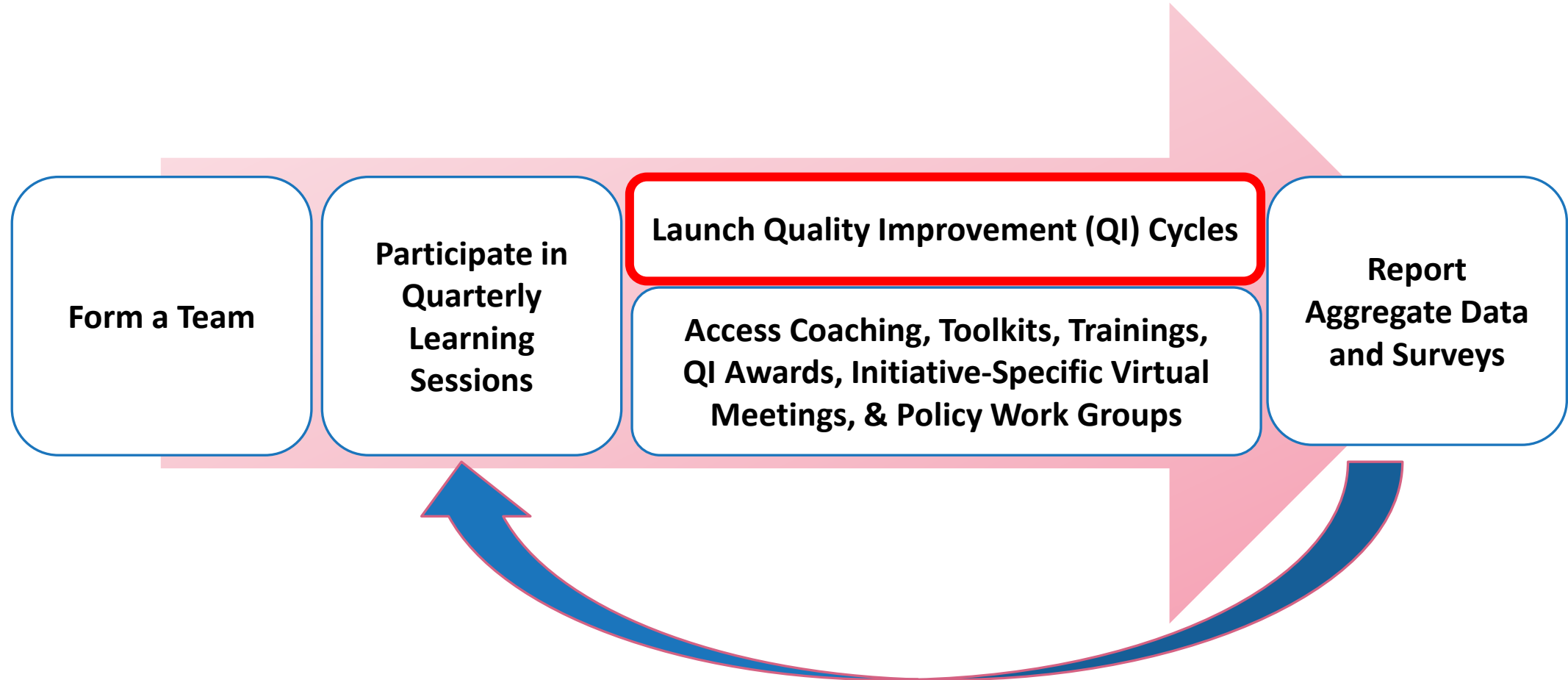
PA AIM Bundle

PA PQC 2022 Initiative Timeline



- ✓ QI Report Outs or Surveys indicate a key intervention was implemented
- ✓ Submitted data for a process or outcome measure indicates the team's goal was achieved and is starting to be sustained over time.

PA PQC Implementation Structure



Implementation Phase Expectations for all 2022 PA PQC Initiatives

1. Further form, structure, and expand your multi-disciplinary team
2. Attend the quarterly PA PQC Learning Sessions
3. Prioritize the initiative-specific key interventions to adopt based on your current condition
4. Develop and implement a QI plan and protocols with your team to translate the key interventions into practice
5. Complete quarterly initiative-specific surveys to track your impact on the structure measures
6. Submit quarterly aggregated information for the PA PQC process and outcome measures via the PA PQC data portal and annually by race/ethnicity
7. Submit a Quality Improvement Report Out, using the QI Report Out Template

PA AIM Quarterly QI Award Structure

Milestone 1: Attend the PA PQC Learning Sessions

Milestone 2: Submit a Quality Improvement (QI) Report Out, showing work related to implementing Key Intervention(s) from the PA AIM Bundle

Milestone 3: Complete the PA AIM survey

Milestone 4: Submit at least one new quarter's worth of aggregate data for the PA AIM process measure through the PA PQC Data Portal

Milestone 5: Communicate and celebrate your team's impact in the PA PQC within your hospital and community

Minimum Criteria for all 2022 PA PQC Initiatives

1. Submitting a QI Report Out, using the QI Report Out Template, during a **six-month** period
2. Submitting a quarterly initiative-specific survey during a **six-month** period
3. Having at least one hospital-level representative attend a quarterly Learning Session during a **six-month** period
4. Submitting at least one quarter's worth of aggregated data for the PA PQC process and outcome during a **12-month period**

PA AIM Survey

PA AIM Measure Submitted to the PA PQC Data Portal

Quarterly

By Race/Ethnicity Annually

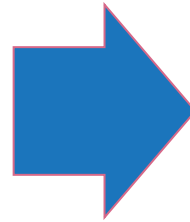
treated within 1 hour from first severe BP reading with IV Labetalol, IV Hydralazine, or PO Nifedipine

with acute-onset severe hypertension (SBP \geq 160 or DBP \geq 110) that persists for 15 min. or more (incl. those with preeclampsia, gestational, or chronic hypertension)

Process for Submitting PA AIM Data to AIM Data Center

1.

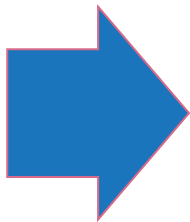
PA PQC extracts the PA AIM Hospital's PA PQC Data Portal and Survey Submissions



PA PQC submits the PA AIM data to the PA AIM Data Center quarterly

2.

PA DOH analyzes PHC4 data to calculate hospital and state-level SMM rates at least semi-annually and by race/ethnicity annually



PA DOH submits SMM rates to the AIM Data Center

3.

PA AIM hospitals will be able to review all data submitted to the AIM Data Center within two weeks of data submission to the AIM Data Center

Process to Join PA AIM in 2022

If your PA PQC birth hospital is one of the 19 PA AIM hospitals that joined in 2021 and would like to continue in 2022:

1. By March 30, 2022, re-commit to the PA AIM initiative by submitting an online form to (1) select PA AIM initiative for the Implementation Period; (2) create or update your multi-disciplinary PA PQC healthcare team; (3) agree to work towards the initiative's goals; and (4) agree to follow the expectations for the implementation and sustaining periods
2. Execute a PA AIM MOU/DUA with the Jewish Healthcare Foundation
3. Review your AIM Hospital Demographics File

If your PA PQC birth hospital is not yet part of PA AIM and would like to join in 2022:

1. Complete step 1 from above
2. Complete step 2 from above
3. Submit an AIM Hospital Demographics File

2021 PA AIM Hospitals

Commonwealth Health – Moses Taylor Hospital
Evangelical Community Hospital
Geisinger – Medical Center, Danville
Geisinger – Wyoming Valley Hospital
Penn Medicine – Chester County Hospital
Penn Medicine – Hospital of the University of Pennsylvania
Penn Medicine – Pennsylvania Hospital
Penn State Health – Milton S. Hershey Medical Center and Children’s Hospital
St. Clair Hospital
Temple Health – Temple University Hospital
Tower Health Medical Group – Reading Hospital
UPMC – Hamot
UPMC – Horizon
UPMC – Magee Womens Hospital
WellSpan – Ephrata Community Hospital
WellSpan – Gettysburg Hospital
WellSpan – Good Samaritan Hospital
WellSpan – Summit Health Chambersburg Hospital
WellSpan – York Hospital

PA AIM Hospital Demographics File

PA AIM MOU & DUA

Learning Sessions & PA AIM Virtual Meetings

<https://www.whamglobal.org/member-content/register-for-sessions>

Quarterly Learning Sessions

- March 31 from 830am to 1230pm via Zoom
- June 30
- September 14
- December 14

PA AIM Virtual Meetings

- February 17 from 11am-12pm
- July 7 from 11am-12pm
- November 3 from 11am-12pm