

PA PQC Timeline

If you have any questions, please email [papqc@whamglobal.org](mailto:papqc@whamglobal.org). The tasks are color-coded as follows: onboarding, Vermont Oxford Network (VON) items, Learning Collaborative Sessions and Webinars, quality improvement, and data reporting. The PA PQC staff will be working with your team’s PA PQC Administrative Champion team member on most of these tasks (especially the onboarding tasks). If your team did not identify an Administrative Champion in your PA PQC team registration form, please send the contact information for your team’s Administrative Champion to [papqc@whamglobal.org](mailto:papqc@whamglobal.org).

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| Month | Tasks |
| April 2019 | 1. Join the PA PQC by forming a team for your provider site/system or for your health plan and submitting the team registration form (https://www.whamglobal.org/papqc/get-involved) 2. View the March 11 PA PQC introductory webinar and FAQs at https://www.whamglobal.org/papqc 3. Review the PA PQC Driver Diagrams, required quality metrics, and the prioritized, optional metrics to determine whether new data collection systems will be needed at your site 4. Participate in the April 24 Learning Collaborative Session in Harrisburg 5. Via your PA PQC Administrative Champion, receive an email from your designated PA PQC staff to touch base on next steps 6. Confirm whether your PA PQC team roster is correct, and send any changes to papqc@whamglobal.org 7. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (baseline) 8. Determine whether your team would like quality improvement coaching from the PA PQC and NEPaPQC staff 9. Register for the PA PQC Learning Collaborative sessions on June 28, September 24, and December 11 (https://www.whamglobal.org/papqc/get-involved) 10. To receive data collection stipends and to be eligible for the Patient Safety Awards, apply for the Patient Safety Fellowship Awards by April 30 by describing your site’s existing perinatal process and its results for severe hypertension, hemorrhage, depression, social determinants of health, substance misuse (including opioid use disorders), and/or opioid-exposed newborns (https://www.whamglobal.org/papqc/get-involved) |
| May 2019 | 1. Determine how to focus and prioritize your first quality improvement (QI) project in the PA PQC 2. Determine whether your site will participate in the VON Day Quality Audit for NAS (this is optional) 3. Execute a Memorandum of Understanding (MOU) with the Jewish Healthcare Foundation (JHF) for the PA PQC 4. Execute a VON Participation Agreement with JHF to access the VON Universal Training Program for NAS and the VON Day Quality Audits for NAS if your hospital is not already a VON member 5. Submit the VON Day Quality Audits and the PA PQC to your IRB 6. Confirm who will be your VON Day Data Collector (e.g., your PA PQC Data Champion) 7. Confirm who will be your VON Champion (e.g., your PA PQC Administrative Champion) 8. Via the VON Champion, review the current list of users from your organization who already have access to the VON Universal Training Program users, and confirm who from your PA PQC team should have a new user login for the VON Universal Training Program 9. Attend or view the webinar training for the PA PQC Data Portal and Dashboard on May 20 from 11am to 12pm 10. Review the VON Day Materials (Manual of Operations, FAQs, and Data Forms) 11. Have the VON Champion attend the VON Champion Training via Webinar on May 16 from 11am to 12pm 12. Attend the PA PQC Topic-Specific Webinar on Data Collection Strategies (to be scheduled) 13. Report baseline aggregate data by May 31 for the PA PQC required metrics and the optional, prioritized metrics (if this is not feasible, you can report it in June) |
| June 2019 | 1. Launch your first QI cycle in the PA PQC 2. Report aggregate data for the PA PQC required metrics and the optional, prioritized metrics during the first week of each month 3. Attend the VON User Training and the VON Day Quality Audit Training via Webinar on June 10 from 11am to 12pm 4. Use the PA PQC storyboard format to capture your QI experience and report out at the next Learning Collaborative 5. Participate in the June 28 Learning Collaborative Session in Harrisburg |
| July 2019 | 1. Report PA PQC data the first week of each month 2. Between July 8-12, submit the VON Day Audit baseline information for the time period of April 1, 2019 to June 30, 2019 3. Continue to work on your QI Plan, Do, Study, Act (PDSA) cycles 4. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (time 2) 5. Attend Topic-Specific Webinars |
| August 2019 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Attend Topic-Specific Webinars |
| September 2019 | 1. Report PA PQC data the first week of each month 2. Use the PA PQC storyboard format to capture your QI experience and report out at the next Learning Collaborative 3. Participate in the September 24 Learning Collaborative Session in Harrisburg |
| October 2019 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Attend Topic-Specific Webinars 4. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (time 3) |
| November 2019 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Attend Topic-Specific Webinars |
| December 2019 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Use the PA PQC storyboard format to capture your QI experience and report out at the next Learning Collaborative 4. Participate in the December 11 Learning Collaborative Session in Harrisburg |
| January 2020 | 1. Report PA PQC data the first week of each month 2. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (time 4) 3. Continue to work on your QI PDSA cycles 4. Attend Topic-Specific Webinars |
| February 2020 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Attend Topic-Specific Webinars |
| March 2020 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Use the PA PQC storyboard format to capture your QI experience and report out at the next Learning Collaborative 4. Participate in the Learning Collaborative session (which may be organized regionally in 2020)   Expectation: Aim to conduct at least one QI project on all three PA PQC topics (Maternal Mortality, OUD, and NAS) by the end of March 2020. These projects can be phased in. |
| April 2020 | 1. Report PA PQC data the first week of each month 2. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (time 5) 3. Continue to work on your QI PDSA cycles 4. Attend Topic-Specific Webinars |
| May 2020 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Attend Topic-Specific Webinars |
| June 2020 | 1. Report PA PQC data the first week of each month 2. Continue to work on your QI PDSA cycles 3. Use the PA PQC storyboard format to capture your QI experience and report out at the next Learning Collaborative 4. Participate in the Learning Collaborative session (which may be organized regionally in 2020) |
| July 2020 | 1. Report PA PQC data the first week of each month 2. Complete the quarterly PA PQC surveys for maternal mortality, NAS, and OUD (time 6) 3. Continue to work on your QI PDSA cycles |

*A timeline for activities beyond June/July 2020 will be distributed at a later date. The second VON Day Audits for time period two will occur in July 2021.*