Application Deadline: By September 29, 2021 (Reviewed and Notified on a Rolling Basis Until the Number of Available Awards is Reached)



#### **BACKGROUND**

With support from the State Opioid Response grant funds from the Pennsylvania Department of Drug and Alcohol Programs (DDAP), the Pennsylvania Perinatal Quality Collaborative (PA PQC) will provide a **fourth round of Awards** to PA PQC hospitals to recognize and support efforts to further build their infrastructure for collecting and submitting data for the PA PQC's Neonatal Abstinence Syndrome (NAS), Opioid Use Disorder (OUD), or immediate postpartum LARC (IPLARC) quality measures and implementing a PA PQC quality improvement project for NAS, maternal OUD, or IPLARC.<sup>1</sup>

The NAS/OUD/IPLARC quality improvement milestones outlined in Table 1 in the section, "Submission Process & Criteria," must be completed by Wednesday, September 29, 2021. As a result, these Awards are designed to recognize and support the OUD/NAS/IPLARC quality improvement projects that your PA PQC team has already been working on through the PA PQC. The Awards are not intended to start a new quality improvement project, because the milestones must be completed by September 29, 2021.

#### **TIMELINE**

Award Opportunity Announcement: September 14, 2021

Application deadline: September 29 (11:59 PM ET) on a rolling basis

Awardees notified: By September 30 on a rolling basis

Project End Date (completion of milestones): By September 29, 2021

#### **FUNDING AMOUNTS**

Estimated Total Funding Available:\* \$150,000 Award Ceiling for each Award: \$15,000 Estimated Number of Awards:\* 10

\*The exact number of awards is dependent upon available funds.

<sup>&</sup>lt;sup>1</sup> The IPLARC initiative is included in this award opportunity since it is a key intervention on the PA PQC's maternal OUD Driver Diagram.

Application Deadline: By September 29, 2021 (Reviewed and Notified on a Rolling Basis Until the Number of Available Awards is Reached)

#### **ELIGIBILITY CRITERIA**

Hospitals that are currently participating in the PA PQC are eligible to apply for the fourth round of Awards.

Those who received a previous PA PQC award in 2020 may still apply for this fourth round since this fourth round is for activity completed during a different time interval—from October 1, 2020 through September 29, 2021.

The Award applications are for individual hospitals and not an entire health system.

### **SUBMISSION PROCESS & CRITERIA**

By or before September 29, 2021 11:59 PM EST, please send the three items below to <a href="mailto:papqc@whamglobal.org">papqc@whamglobal.org</a> with the subject line, "PA PQC Award 4 Application \_ SUBMITTING HOSPITAL NAME". Please use the following nomenclature to name your PDF file: "SUBMITTING HOSPITAL NAME PAPQC Award 4 App."

- "Evidence of Completing the Milestones between October 1, 2020 and September 29, 2021" that is outlined in Table 1
- 2. Your organization's W-9 form (<a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf">https://www.irs.gov/pub/irs-pdf/fw9.pdf</a>) for where the monetary award should be made out to if your application is approved
- 3. The mailing address for where to send the Award letter and check to if your application is approved\*

The applications will be accepted on a rolling basis, meaning the PA PQC will accept and respond to applications on a continuing basis between September 14, 2021 and September 29, 2021 or until the number of available funding slots are filled for the fourth round of the Awards.

<sup>\*</sup>The "mailing address" must be associated with the organization (hospital) that is listed on the W-9.

Application Deadline: By September 29, 2021 (Reviewed and Notified on a Rolling Basis Until the Number of Available Awards is Reached)

## Table 1: Milestones

Milestones	Evidence to Verify Completion of the Milestone between October 1, 2020 and September 29, 2021
Organize and facilitate monthly PA PQC team meetings	Provide at least two (2) meeting agendas, including attendee lists, from team meetings that occurred in separate months.
Attend the PA PQC Learning Sessions	Evidence of at least one (1) person from your hospital team attending at least three (3) of the four Learning Sessions that occurred on 12/16/20, 3/24/21, 6/29/21, and 9/14/21 based on the RSVPs, Zoom log-in records, or Zoom chat records.
	(Your team's Quality Improvement Coach from the PA PQC can provide these records to you if you request them. A copy of the coach's email response that confirms attendance will suffice as evidence of completion.)
Submit Quality Improvement (QI) Report Outs, showing work related to implementing Key Intervention(s) on the PA PQC's OUD, NAS, or IPLARC Driver Diagrams	Submission of at least two (2) QI Report Outs that show progression with the QI initiative (i.e., an identical QI Report Out that was submitted at different time periods will only be counted as one QI Report Out since according to the QI Report out, nothing changed).
	(The PA PQC QI Report Out template is available under the Quality Improvement section of the PA PQC Resources webpage: <a href="https://www.whamqlobal.org/resources#Quality-Impprovement">https://www.whamqlobal.org/resources#Quality-Impprovement</a> . This is the same QI Report Out template that teams are always asked to submit prior to each quarterly PQC Learning Session.)
Complete the PA PQC OUD, NAS, <u>or</u> IPLARC survey	Submission of at least two (2) OUD surveys, at least two (2) NAS surveys, or at least two (2) IPLARC surveys through SurveyMonkey.
	(The surveys are available here <a href="https://www.whamqlobal.org/data-collection#PA-PQC-Site-Surveys">https://www.whamqlobal.org/data-collection#PA-PQC-Site-Surveys</a> . The PA PQC surveys that your team submits must align with or relate to the work summarized in the QI Report

Application Deadline: By September 29, 2021 (Reviewed and Notified on a Rolling Basis Until the Number of Available Awards is Reached)

Milestones	Evidence to Verify Completion of the Milestone between October 1, 2020 and September 29, 2021
Submit at least one month's worth of data through the PA PQC Data Portal for at least one	Out template. Your team's PA PQC Quality Improvement Coach can provide these records to you if you request them. A copy of the coach's email response that confirms completion of the surveys will suffice as evidence of completion.) Reports from the PA PQC Data Portal that show the data was successfully submitted between
of the PA PQC NAS, OUD, <i>or</i> IPLARC quality measures listed on page 5. <sup>1</sup>	10/1/20 and 9/29/21.  (The PA PQC NAS, IPLARC, or OUD quality measure that your team submits must align with or relate to the quality improvement work summarized in the QI Report Out template. Your team's Quality Improvement Coach from the PA PQC can provide these records to you if you request them. A copy of the coach's email response that confirms data submission for the quality measures will suffice as evidence of completion.)
Communicate and celebrate progress and results with stakeholders, the community, and/or your entire team.	Communication materials that show results and progress being celebrated within your team, department, or organization (e.g., a presentation about your hospital's PA PQC project during a Learning Session, an internal presentation to your hospital, a press release, or an internal or external announcement).

Application Deadline: By September 29, 2021 (Reviewed and Notified on a Rolling Basis Until the Number of Available Awards is Reached)

<sup>1</sup> The following PA PQC quality measures apply for this Award opportunity. Please refer to the PA PQC's quality measurement specifications here <a href="https://www.whamglobal.org/data-collection#PA-PQC-Measurement-Specifications">https://www.whamglobal.org/data-collection#PA-PQC-Measurement-Specifications</a>, and please be sure that you are using the 2/26/20 OUD, 8/10/20 NAS, and 11/11/20 IPLARC versions of the quality measurement specifications. As a reminder, the PA PQC NAS, OUD, or IPLARC quality measure that your team submits must align with or relate to your quality improvement work summarized in the QI Report Outs.

- Median hospital length of stay for newborns with NAS
- Percent of newborns with NAS who are treated with a non-pharmacologic bundle
- Percent of newborns with NAS who receive pharmacologic treatment
- Percent of newborns with NAS who receive appropriate follow-up at discharge
- Percentage of pregnant women screened for SUD with a validated screen
- Percentage of pregnant women diagnosed with OUD at any time of pregnancy
- Percentage of pregnant and postpartum women diagnosed with OUD who initiate MAT
- Percentage of women diagnosed with OUD receiving postpartum care
- Percentage of eligible individuals with OUD who received IPLARC

#### **QUESTIONS & TECHNICAL ASSISTANCE**

Please email any questions about the fourth round of the PA PQC Award opportunity and application to your hospital's PA PQC Quality Improvement Coach for guidance and advice on the application. Or you may email <a href="mailto:papqc@whamglobal.org">papqc@whamglobal.org</a>.