OKLAHOMA PERINATAL QUALITY IMPROVEMENT COLLABORATIVE
Welcome!
Thank you for joining us!

• Please sign in using the chat box feature

• The webinar will start on the hour

• All phones should be muted, but you may still mute yours by pressing *6 or the mute button

• Unmute your phone if you would like to speak

• Please do not place your phone line on hold!
OPQIC Updates

• 2016 Severe Maternal Morbidity outcome measures now available
• Please check your individual hospital rates
• Oklahoma level data show ~ 20% decline from baseline data
• This is a significant level of improvement
Severe Maternal Morbidity among All Delivering Women

- Oklahoma Hospital 50th Percentile
- Oklahoma Collaborative-wide Rate
- Oklahoma Hospital Average
- Oklahoma 50th to 75th Percentile
- Oklahoma 25th to 50th Percentile
OPQIC Updates

• Quarterly Reports coming 2018
• OPQIC staff are available to speak with OB providers and/or administrators
• Added files of AIM resources for HTN and Hemorrhage Bundles [http://opqic.org/aim/](http://opqic.org/aim/)
• Send feedback regarding barriers/strategies for success
• Telephone survey beginning soon!
5 Areas of Priority

• Management Plan for Postpartum Hemorrhage
  – 90.5% of hospitals have in place
• Management Plan for Severe Hypertension
  – 83.3% of hospitals have in place
• Timely Treatment of Severe Hypertension
• Postpartum Hemorrhage Risk Assessment
• Quantitative Blood Loss
Timely Treatment of Severe HTN

- Oklahoma Hospital 50th Percentile
- Oklahoma Collaborative-wide Rate
- Oklahoma 50th to 75th Percentile
- Oklahoma 25th to 50th Percentile
Discussion

• Integrate into EMR
• Data collection?
• Medication pack
• BELIEVE IT! TREAT IT!
• RETAKE! TREAT!
• New webcast from experts – require all providers and nurses to view
  – http://opqic.org/aim/
• Print off resources and place in call rooms, bathroom walls, around unit
• Complete 4 Rs Assessment
  – http://opqic.org/initiatives/emc/hypertension/
• Audit who is compliant/noncompliant
Discussion

• Integrate into EMR
• Communicate risk category to team members
• Measure asks regarding assessment X1
  – Best to do again before birth, postpartum, prn with clinical changes
• Risk assessment tool http://opqic.org/initiatives/emc/pphm/
• Complete Obstetric Hemorrhage-Readiness Assessment
  http://opqic.org/initiatives/emc/pphm/
Discussion

• Integrate into EMR
• Start with vaginal deliveries or C/S
• QBL videos
  – http://opqic.org/initiatives/emc/pphm/
  – AWHONN and YouTube from Minnesota (recently added to website)
• Complete Obstetric Hemorrhage-Recognition Assessment http://opqic.org/initiatives/emc/pphm/
• QBL Paper tool
• Audit who is compliant/noncompliant
• Getting providers on board?
To Do List

• Establish a Work Group
  – If you already have one, set up a meeting
  – Meet weekly or monthly, depending on your needs

• **Set a deadline for implementation or 90% compliance**
  – Creates pressure to increase follow-through

• Complete assessment worksheets
  – PDSA
  – Driver Diagram

• Monitor individual compliance and follow-up

• Would you like education on quality improvement?
Reminders

• Q3 Data due

• LABOR RNs Study
  – Kathleen Rice Simpson & Audrey Lyndon
  – Email will come to nurse leaders
  – Distribute to staff RNs or send emails to researchers to send email for staff RNs to complete survey on nurse staffing and its effect on outcomes

• Ideas for 2018 OPQIC Summit?
  – September 14th, 2018
How Can We Help?

• Discussion