

## LaPQC Participation Pledge Overview

Louisiana birthing facilities interested in participating in the Louisiana Perinatal Quality Collaborative (LaPQC) Breakthrough Series on Maternal Morbidity Reduction should complete the Participation Pledge, available [here](#).

### What is the LaPQC?

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The Louisiana Perinatal Quality Collaborative (LaPQC) is an initiative of the Louisiana Commission on Perinatal Care and Prevention of Infant Mortality. The LaPQC is a voluntary network of perinatal care providers, public health professionals and patient and community advocates who work to advance equity and improve outcomes for women, families, and newborns in Louisiana. The work of the LaPQC is a part of a national effort to reduce maternal morbidity in partnership with the American College of Obstetricians and Gynecologists (ACOG), the Institute for Healthcare Improvement (IHI), the Centers for Disease Control (CDC), and the Alliance for Innovation on Maternal Health (AIM).

The LaPQC provides support to birthing facilities for continuous quality improvement on perinatal outcomes. Through collaborative opportunities like Learning Sessions, monthly calls, and Listening Tour visits, the LaPQC facilitates the implementation of best practices by bringing teams from across the state together. In addition to face-to-face and virtual meetings, the LaPQC provides facilities with a data portal to allow for real-time evaluation and decision-making. Teams have access to quality improvement and subject-matter experts in order to enhance improvement work at the facility level.

The first initiative of the LaPQC is the Reducing Maternal Morbidity Initiative, focused on the implementation of best practices related to hemorrhage, severe hypertension/preeclampsia, and racial/ethnic disparities. **The goal of this initiative is twofold:**

- Achieve a 20% reduction in severe maternal morbidity among women who experience hemorrhage and severe hypertension/preeclampsia, during pregnancy or postpartum, in LaPQC participating birthing facilities, by May 2020;
- To reduce the Black-white disparity in this outcome by May 2020.

### Requirements for Participation in Reducing Maternal Morbidity Initiative

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Teams participating in the initiative are expected to:

- Create, or update, an internal facility Charter **by June 1<sup>st</sup>, 2019** that includes the team aim, measures, change ideas, and team composition;

- Identify a team that consists of a senior sponsor, a day-to-day lead, data lead, a nurse and a physician champion, as well as a patient or family advisor (advisor to be embedded on the team **by the end of the initiative**);
- Complete all pre-work activities required to prepare for the monthly calls and Learning Session;
- Send 3-5 representatives from the facility team to all Learning Sessions;
- Perform tests of changes using PDSA rapid cycle method and **report them monthly** to the LaPQC;
- Make well-defined measurements related to the teams' aims and **report them monthly** in the IHI Extranet interface for the duration of the Collaborative;
- Complete facility equity assessment as a team, and Implicit Association Test for all team members;
- Stratify key measures by race/ethnicity **by the end of the initiative**;
- Share information with the Collaborative, including details and measurements of changes made, both during and between Learning Sessions;
- Present the teams' experiences and results at a Louisiana Perinatal Quality Collaborative event to celebrate success and prepare for spread of changes to practice teams beyond the Collaborative;

#### Important dates for **all teams**:

- Complete participation pledge by **May 1<sup>st</sup>, 2019**;
- Complete facility charter by **June 1<sup>st</sup>, 2019**;
- Attend the Learning Session in August.

#### Important dates for **teams pledging for the first time**:

- Attend one of two virtual meetings with the LaPQC to address sign-on questions and concerns; calls will be on **April 15<sup>th</sup> and April 26<sup>th</sup>**. Email [lapqc@la.gov](mailto:lapqc@la.gov) for information about these calls.
- Attend monthly web-based QI and Initiative orientation meetings with the LaPQC Team; dates forthcoming.

#### Important dates for **teams re-pledging**:

- Continue to attend **monthly coaching calls** on March 27<sup>th</sup>, April 24<sup>th</sup>, May 22<sup>nd</sup>, June 26<sup>th</sup>, and July 24<sup>th</sup>.
- Attend monthly **Office Hours** and **Topic Forums** as-needed;
- Submit monthly data and narratives by the **15<sup>th</sup> of each month**.

## Ground Rules for Facility Participation

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By signing with the Collaborative, you understand that all data shared in this space is for quality improvement purposes only. Data entered by quality teams will be de-identified of all patient identifiers. The Louisiana Department of Health - Bureau of Family Health has signed a cooperative agreement with the Alliance for Innovation in Maternal Health. This agreement allows Louisiana to transfer de-identified hospital-level aggregate data on perinatal outcomes shared via the LaPQC to a national collaborative database allowing hospitals to receive the benefits of national efforts in comparison and quality improvement coaching.

Participating facilities are expected to respect the confidentiality of data and information shared among the participants. Hospital-specific data will not be shared outside of Collaborative meetings, data interfaces, trainings, and sessions without permission from the Collaborative advisory team. Birthing facilities pledge to share data that are accurate to the best of their knowledge, in the spirit of transparency and continuous quality improvement. **It is important to know that all data shared is confidential, and not accessible through public records or discovery.**

Taking part in the LaPQC satisfies state rule requirements for perinatal quality collaborative participation and data sharing for level III and IV delivery hospitals (see Title 48, Public Health—General, Subchapter S. Obstetrical and Newborn Services (Book 2 of 2)). While state rule participation requirements are minimally satisfied by attending two calls a year and creating an Extranet account with the LaPQC and the Institute for Healthcare Improvement, the LaPQC was established to support facilities in their efforts to achieve substantial breakthrough gains in maternal health outcomes. **As such, the commitment required for participation in the LaPQC Reducing Maternal Morbidity Initiative is more rigorous.**