

The PNQIN Maternal Equity Bundle

Optimizing Racial Equity Action Across Massachusetts



**Team Presentation:
Mount Auburn Hospital**

April 16, 2024



WELCOME!

- Please type your name and institution into the chat
 - *Optional: Share a QI success, big or small, that your hospital team has had over the last month!*
- Please mute yourselves when not speaking.
- Feel free to type your questions into the chat during the webinar.
- We will record this session and upload the recording and webinar slides to our website afterwards!

Agenda

12:00–12:15 Welcome &

PNQIN

Announcements

12:15–12:35 Team

Presentation

12:35–1:00 Discussion,

Q&A





Happy Black Maternal Health Week!

April 11-17th, 2024

The campaign and activities for [Black Maternal Health Week](#) serve to amplify the voices of Black mamas and center the values and traditions of the reproductive and birth justice movements. Activities during BMHW are rooted in human rights, reproductive justice, and birth justice frameworks.

AGENDA

12:00-12:15

**Welcome & PNQIN
Announcements**

Kali Vitek

12:15-12:35

Team Presentation

Mount Auburn Hospital

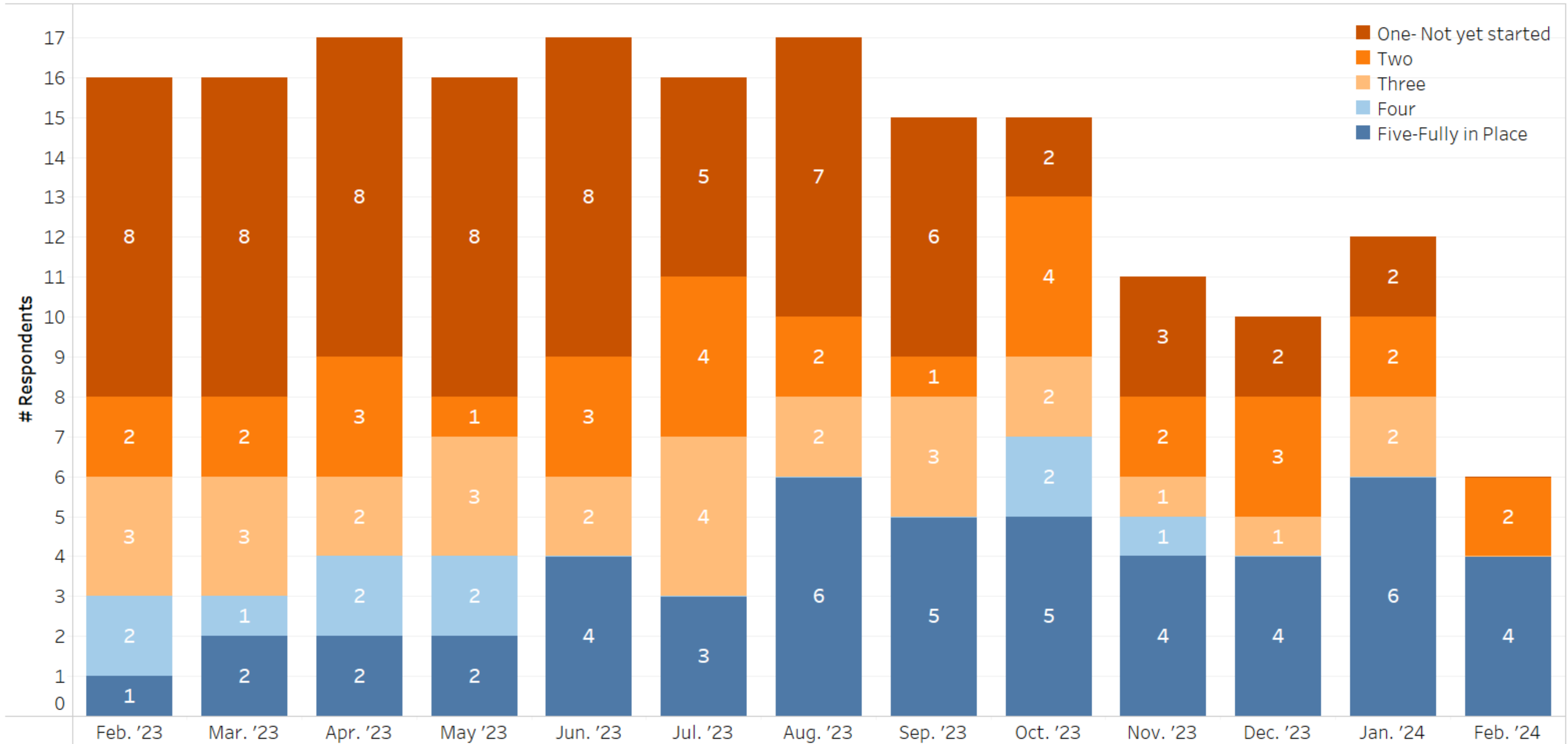
12:35-1:00

Discussion, Q&A

All



S.2 Obstetric Equity Goals Include: SMART Goals/AIM Statement





PNQIN MATERNAL EQUITY BUNDLE WORKGROUP



Audra Meadows, MD
PNQIN



Kali Vitek, MPH
PNQIN



Hafsatou Diop, MD
DPH



Andrew Healy, MD
Baystate/PNQIN



Anna Kheyfets
PNQIN/Tufts



Bonnell Glass, MN
PNQIN/UMass



Candice Belanoff, ScD
BUSPH



Caroline Somerville
PNQIN/JHU



Claire Conklin
PNQIN/UCSD



Chloe Zera, MD
PNQIN/BIDMC



Christin Price, MD
PNQIN



Elysia Larson, ScD
HMS/BIDMC



Karen Manganaro, DNP
PNQIN/BWH



Lee Edwards
First Alter Doula Services



Luu Ireland, MD
UMass



Maryanne Bombaugh,
MD, CHC



Matt Medina, CNM
BWH



Melissa Abell-Bardsley,
RN, CHA



Michaela Farber, MD
BWH



Michele Sinopoli, MD
St. Vincent



Mimi Pomerleau, DNP
PNQIN/BWH



Rachel Wood, MD
BWH



Raj Reddy, MD
BWH



Ron Iverson, MD
PNQIN/BMC



Sarah Thibodeau, RN
Lowell



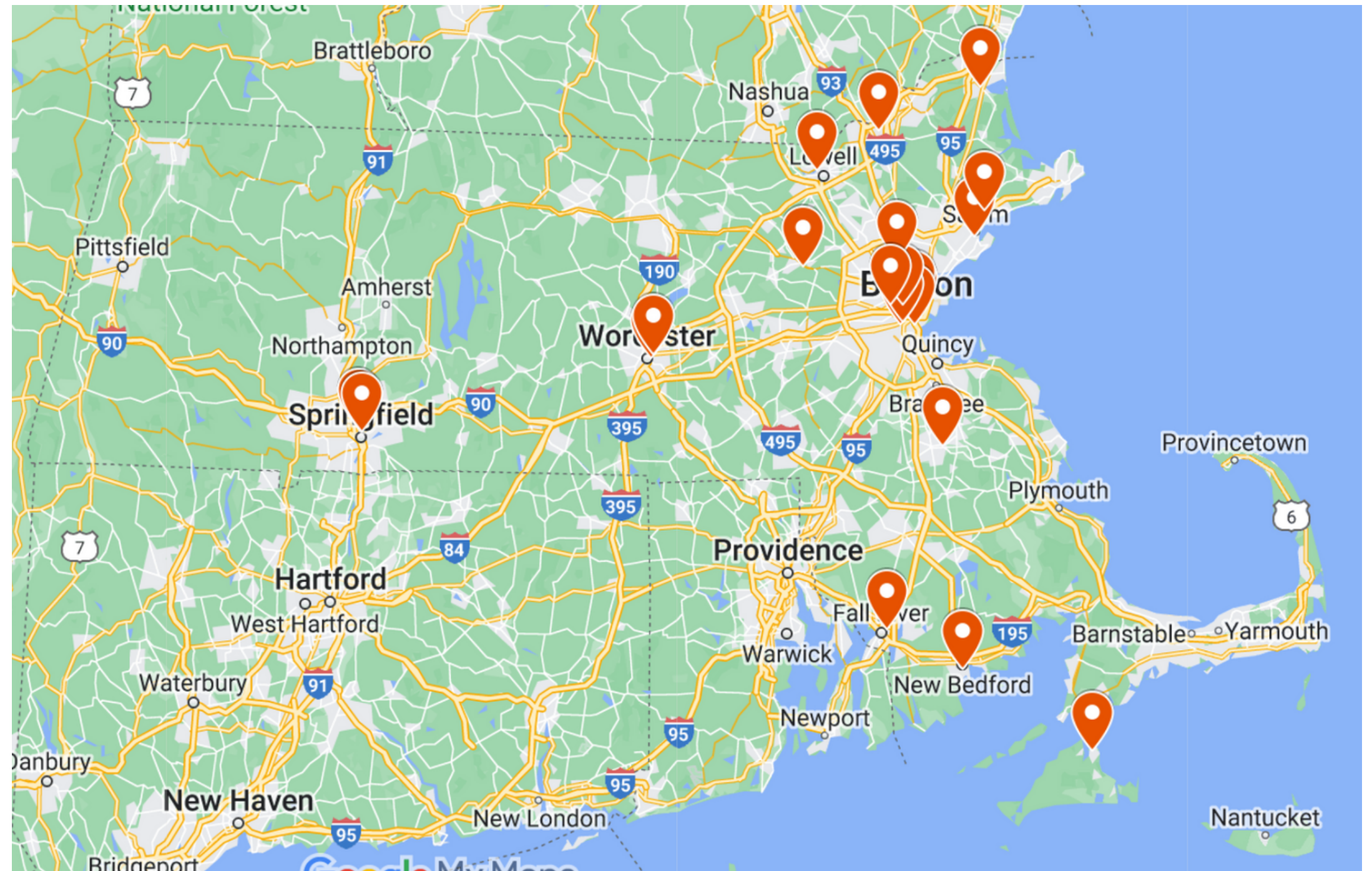
Shaniqua Choice
PNQIN



Teju Adegoke, MD
BMC

EQT BUNDLE: PARTICIPATING HOSPITALS

1. Anna Jaques Hospital
2. Baystate Medical Center
3. Beth Israel Deaconess Medical Center
4. Beverly Hospital
5. Brigham and Women's Hospital
6. Boston Medical Center
7. Cambridge Health Alliance
8. Charlton Memorial Hospital
9. Emerson Hospital
10. Holy Family Hospital
11. Lowell General Hospital
12. Mount Auburn Hospital
13. Massachusetts General Hospital
14. Martha's Vineyard Hospital
15. Mercy Medical Center
16. Saint Vincent Hospital
17. Salem Hospital



18. Signature Healthcare Brockton Hospital
19. St. Luke's Hospital
20. Tufts Medical Center
21. UMass Memorial Medical Center
22. Winchester Hospital



Maternal Equity Bundle: Reminders & Announcements



Kali Vitek, MPH
PNQIN Project Manager

Agenda

12:00–12:15 Welcome &

PNQIN

Announcements

12:15–12:35 Team

Presentation

12:35–1:00 Discussion,

Q&A



Upcoming Team Presentations!

2024 Webinars (12-1pm ET):

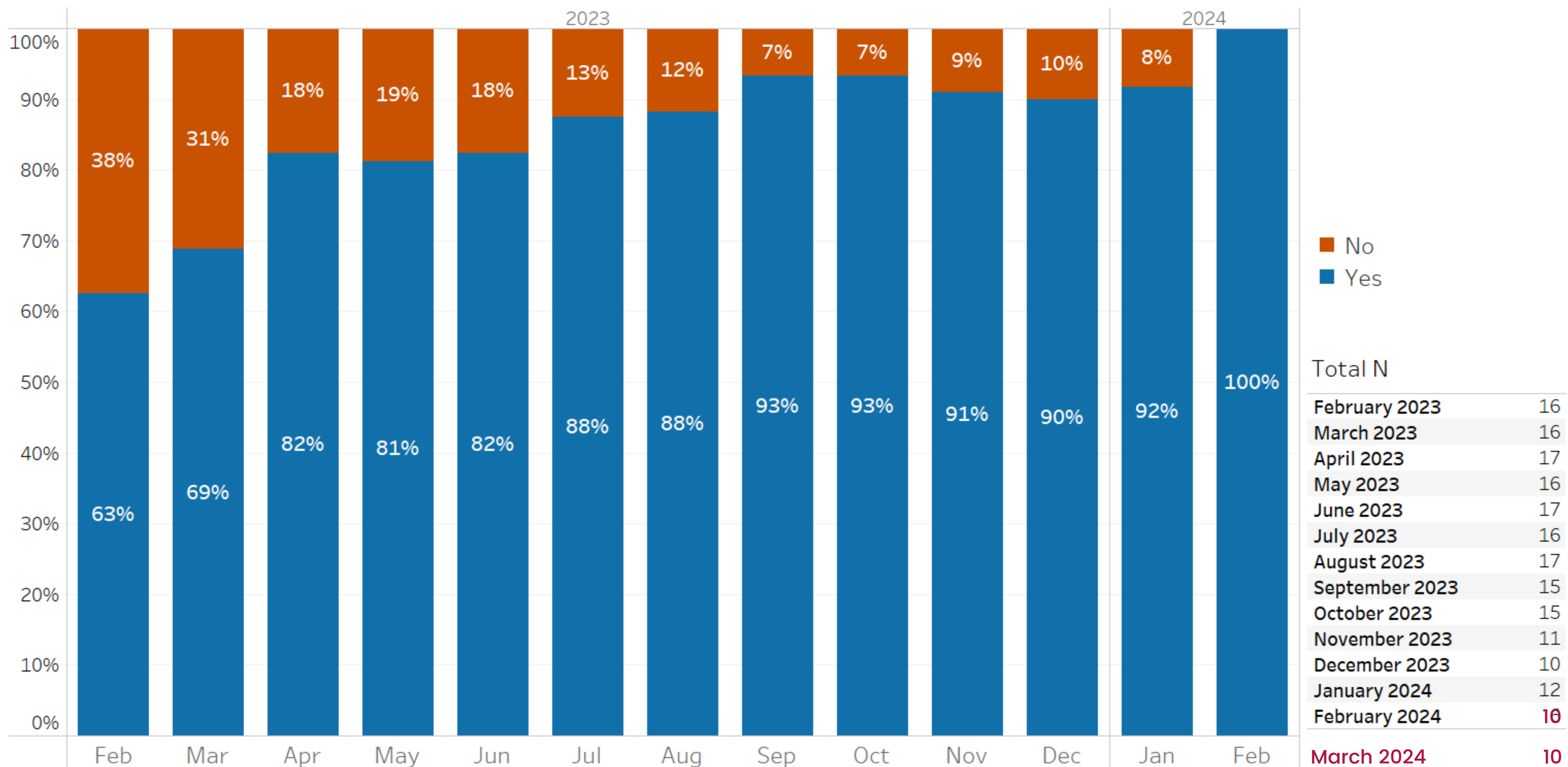
April 16th, 2024 (Mount Auburn)

May 21st, 2024 (Lowell General)

July 16th, 2024 (Tufts)



S1.1 Formal Equity Team Based in Obstetrics/Reproductive Health



Future Bundle Implementation

JUNE 2024						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

**Equity Bundle (current version) ending
at the PNQIN Spring 2024 Summit**

**Perinatal Mental Health Bundle with an
equity lens launching Fall 2024
(hospital onboarding to start in July)**

SEPTEMBER 2024						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

We have 3 months left of this bundle, let's finish strong!

Please share any feedback with the PNQIN team about data submission.



AIM Bundle Data Reports

Reports Available Upon Request

If you have submitted data for any of the AIM Bundles (OUD, HEM, HTN, Equity, or C/S) and would like a report of your hospital's performance thus far, please email Kali to make a request! *Reports are created in the order they are received.*



JOB POSTING: AIM Sustainment Lead

PNQIN is seeking a new team member to help lead sustainment activities for the MA AIM Initiative. This position will collaborate with the PNQIN Leadership Team and Project Management to promote best practices through collaborative learning and QI tools.

Qualifications:

- OB, CNM, RN/NP with interest and experience in caring for birthing people with complications from obstetric hemorrhage and severe hypertension in pregnancy.
- Currently works in Massachusetts.
- Training and/or experience with QI initiatives recommended.
- Previous participation in a PNQIN initiative preferred.

Time commitment (1 year):

- 1 year commitment

Compensation:

- \$3,000/year

To apply, submit a CV and brief cover letter to PNQINAdmin@pnqinma.org



FREE VIRTUAL COURSE

Motivational Interviewing: Foundations and Strategies

Empower individuals to make positive change by exploring and resolving ambivalence through MI's evidence-based communication style. Learn about MI principles, processes and strategies through self-paced learning, partner activities, and live sessions, with personalized written and verbal feedback to support your skill development.

Important Logistics:

This training course will run for five weeks from 5/13/2024 – 6/14/2024.

Expect to dedicate 4-5 hours of your time per week, including:

- 2 hours weekly in live Zoom sessions
 - Live sessions will be held on Wednesdays 10AM – 12PM
 - Live session dates: 5/15, 5/22, 5/29, 6/5, 6/12
- 2-3 hours weekly of self-paced work
 - Pre-recorded presentations, readings, activities, and partner practice work
 - Complete each on your own time during the week it is assigned

Learn more and apply here:



FREE WEBINAR

New England Maternal Health Webinar Progress Through Policy: Advancing Birth Equity and Maternal Health in New England

This webinar builds upon the September 2022 New England Maternal Health Summit, which showcased community triumphs on maternal health care that support birthing people having a safe, respectful, and empowering birth and postpartum experience.

Date: Thursday, April 25, 2024

10:00am to 12:30pm ET

Location: Zoom

Free

Register Here!



FREE WEBINAR

Thursday, April 25
1 - 2 PM ET

PQI Innovation FREE Webinar Series:

Lessons Learned from a State-Wide Learning Collaborative to Improve Severe Hypertension Recognition and Response



Emma Trucks
MPH



Christina Southey
MSc



Dak Ojuka
BS

Learn more and Register!

Webinar Objectives:

- Outline why the state focused collaboration was formed.
- Describe how the collaboration was structured.
- Discuss lessons learned.

Register
Here!



UPCOMING EVENT



March for Babies 2024: “A Mother of a Movement™”

March for Babies is back and bigger than ever! Register your team for our largest community-facing event today at the following link for our Boston event.

Email Julia Vose, Executive Director for MoD MA (JVose@marchofdimes.org) or Karen Fullwood, Donor Development Specialist for MoD MA (KFullwood@marchofdimes.org) with any questions.

EVENT DETAILS: May 11th, 2024

Hatch Shell (on the Esplanade) in Boston

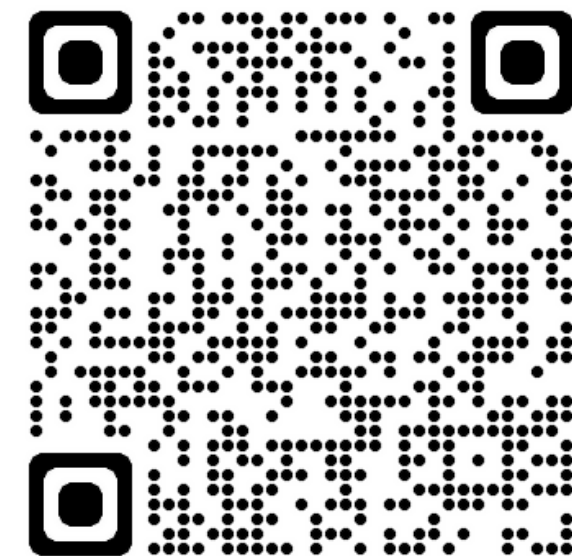
9:00am: Registration, Family Friendly Activities and Food Trucks

10am and 10:15am: Super Hero Sprint on the Field

10:30am: Show of Hands and Program from the stage

10:45am: Walk begins! 1.2 Mile path along the Charles River

Learn more and register here:



UPCOMING TRAINING

The SPEAK UP Ambassador™ Implicit and Explicit Racial Bias Education

Training outlines strategies to help individuals and groups dismantle racism, provide quality equitable care, and reduce health disparities. The education is provided via a live virtual interactive format.

Date: Friday, May 17 8:30AM-2:30PM

Location: Zoom

Cost: FREE

Presenters: Renée Byfield, MS, RN, FNP and
Debra Bingham, DrPH, RN, FAAN

Contact: India Olchefske,
info@perinatalqi.org

Register Here



ANNOUNCEMENT

Become SPEAK UP Faculty!

If you have completed the Champion and Ambassador courses, applying to become SPEAK UP Faculty is the next step on your SPEAK UP journey.

PQI developed a train-the-trainer approach to prepare a cohort of SPEAK UP Faculty to spread the program. This is an opportunity for SPEAK UP Faculty to host their own SPEAK UP course.

Application Deadline:

June 1, 2024

SPEAK UP Faculty

After completing the SPEAK UP Champion and Ambassador Courses, participants can apply to become SPEAK UP Faculty which allows them to teach the education with the support of PQI.

**SPEAK
UP**
AGAINST
RACISM

PERINATAL
QUALITY
IMPROVEMENT

Learn more & apply here:



Save the Date!

PNQIN Spring Summit

June 26, 2024

8:30am - 4:30pm

Please join us in-person for our biannual meeting at the Four Points Sheraton in Norwood, MA!

The theme of this summit agenda is *Partners in Purpose: Collaboration is Key to Family Health and Equity*. You will also hear from hospitals participating in PNQIN's grant-funded work under the CDC Equity Grant, Perinatal Opioid Project, and more!

Register here!



FREE EDUCATION 4/1 - 9/30

PQI Birth Equity Modules Course, V1 (Non-CNE)

The Birth Equity Modules course includes four ~30 minute web-based modules that provide interactive education designed for perinatal healthcare professionals who are working to ensure health equity in their organizations.

1. Creating an Anti-Racism Statement for Perinatal Facilities
2. Improving Data Collection and Data Review by Race and Ethnicity
3. Performing Team and Family Debriefs From a Racial Equity Lens
4. Ensuring Perinatal Care Standards Are Met for Birth Equity

Free access for MA perinatal providers from April 1st through September 30th, 2024! Use the code [BEMSMAPR2024100%](#) at check out.

Access here:



RESOURCES

Archived PQI-PNQIN Equity Webinar Series

These were created to help you complete structure measures!



- **Webinar #1 (Jan 2022):** Creating Anti-Racism Statements for Perinatal Facilities
- **Webinar #2 (Feb 2022):** Improving Data Collection and Review Process by Race/Ethnicity
- **Webinar #3 (April 2022):** Performing Team and Family Debriefs from a Racial/Equity Lens
- **Webinar #4 (May 2022):** Ensuring Maternal Care Standards are Met for Birth Equity



RECORDED WEBINAR

Tuesday, January 30
12 - 1 PM ET

PQI Innovation FREE Webinar Series:

A Narrative Review of the Role of PQC's in Promoting Birth Racial Equity



Audra Meadows
MD, MPH, FACOG



Renée Byfield
MS, RN, FNP, C-EFM



Hafsatou Diop
MD, MPH

Learn more and Register!

Webinar Objectives:

- Describe why birth equity efforts are needed in the United States.
- Discuss the role of quality improvement methods and tools to achieve birth equity.
- Outline the findings from the narrative review that was published in the Green Journal: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10510807/>

**Watch
Recording
Here!**



RESOURCES

March of Dimes Report

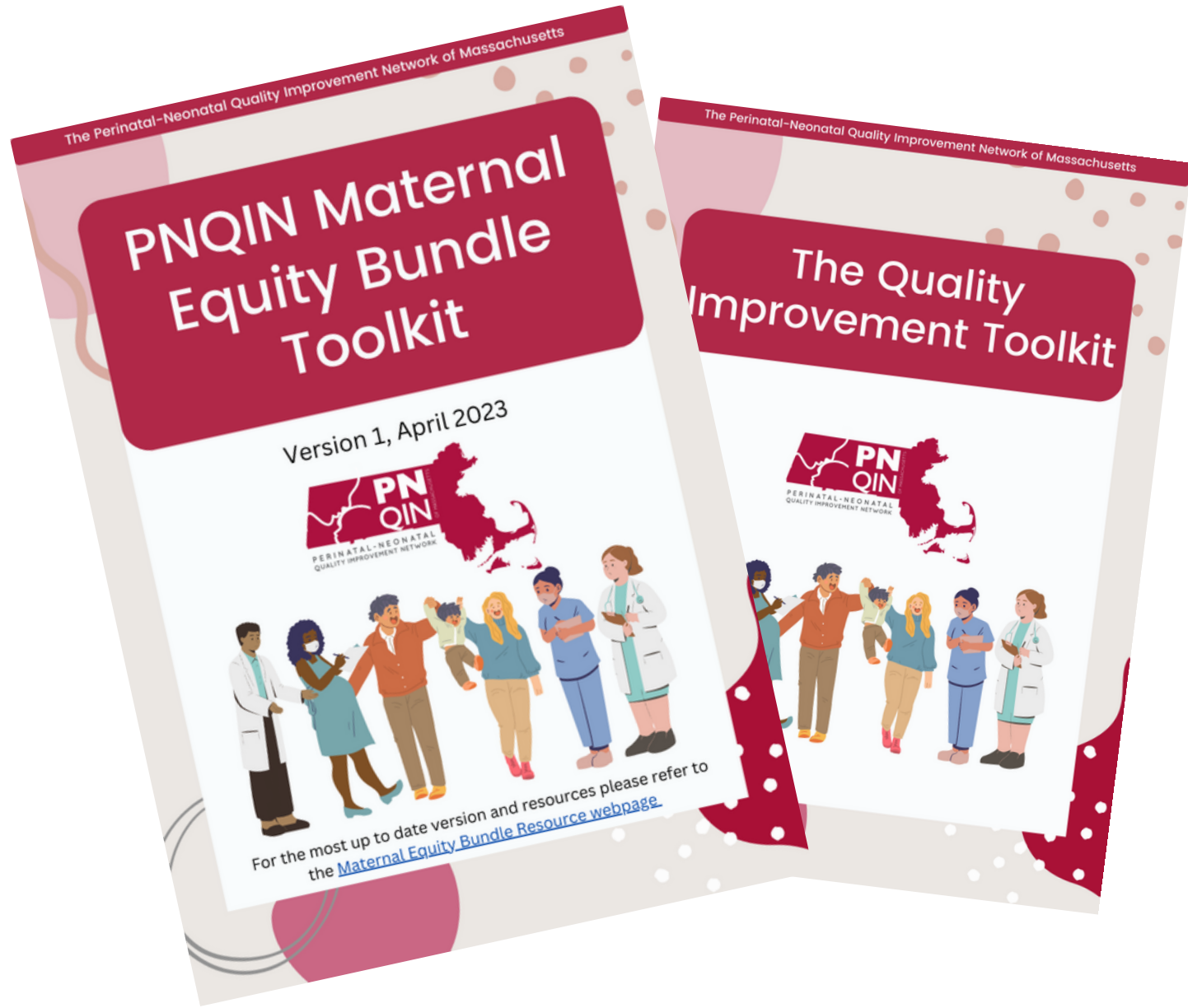
Where You Live Matters: Maternity Care in Massachusetts

As part of March of Dimes' continued commitment to exploring the state of maternal and infant health in the U.S., they've released [Where you Live Matters: Maternity Care Deserts and the Crisis of Access and Equity](#), their latest set of reports reflecting their work in maternity care deserts.

Download the report here:



RESOURCES



Download these & more on our website!



Our Respectful Care Commitments to *Every* patient



- 1 **Treating you with dignity and respect**
throughout your hospital stay
- 2 **Introducing ourselves and our role**
on your careteam to you and your support persons upon entering the room
- 3 **Learning your goals for delivery and postpartum:**
What is important to you for labor and birth? What are your concerns regarding your birth experience? How can we best support you?
- 4 **Working to understand you,**
your background, your home life, and your health history so we can make sure you receive the care you need during your birth and recovery
- 5 **Communicating effectively**
across your health care team to ensure the best care for you
- 6 **Partnering with you for all decisions**
so that you can make choices that are right for you
- 7 **Valuing personal boundaries and respecting your dignity and modesty at all times,**
including asking your permission before entering a room or touching you
- 8 **Practicing “active listening”**
to ensure that you, and your support persons are heard
- 9 **Recognizing your prior experiences with healthcare may affect how you feel during your birth,**
we will strive at all times to provide safe, equitable and respectful care
- 10 **Making sure you are discharged a er delivery with an understanding of postpartum warning signs,**
where to call with concerns, and with postpartum follow-up care visits arranged
- 11 **Ensuring you are discharged with the skills, support and resources to care for yourself and your baby**
- 12 **Protecting your privacy**
and keeping your medical information confidential
- 13 **Being ready to hear any concerns**
or ways that we can improve your care
- 14 **Timely attention to your needs,**
including taking your pain level seriously



Ariadne Labs and the Perinatal-Neonatal Quality Improvement Network (PNQIN) of Massachusetts work with patients, nurses, midwives, doctors, hospitals and community organizations to making birthing safer and eliminate maternal disparities by ensuring all patients receive respectful and high-quality care.



Team Presentation



Caroline Regelous, RN
Natalya Carney, RN, NP
Leslie MacDonald, MD

Agenda

12:00–12:15 Welcome &
PNQIN Announcements

12:15–12:35 Team
Presentation

12:35–1:00 Discussion,
Q&A



The PNQIN Maternal Equity Bundle

Optimizing Racial Equity Action Across Massachusetts

2023-2024 Team Reports

Mount Auburn Hospital

Cambridge, MA

April 16th, 2024



Mount Auburn Hospital Cambridge MA

- Teaching community hospital, associated with BILH Network & Harvard Medical School
- 2200 – 2500 deliveries/yr over the past 5 yrs
- 10 bed Level IIb Nursery
- Approximately 40% of deliveries are performed by midwives
- Partner with Charles River Community Health Center, primarily CNM staffing with MD support



Racial Justice & Equity Committee Members

- Caroline Regelous, CNM – Lead
- Leslie Mosley, CNM
- Shae Street, CNM
- Kat Rowen, CNM
- Miriama Danker, CNM
- Amanda Gecht, MSW
- Theresa Brock, RN
- Meghan McGowan-Claflin, RN
- Brittany Gunn, RN
- Natalya Carney, RN
- Nicole Grady, MD (Neonatology)
- Leslie MacDonald, MD (OBGYN)



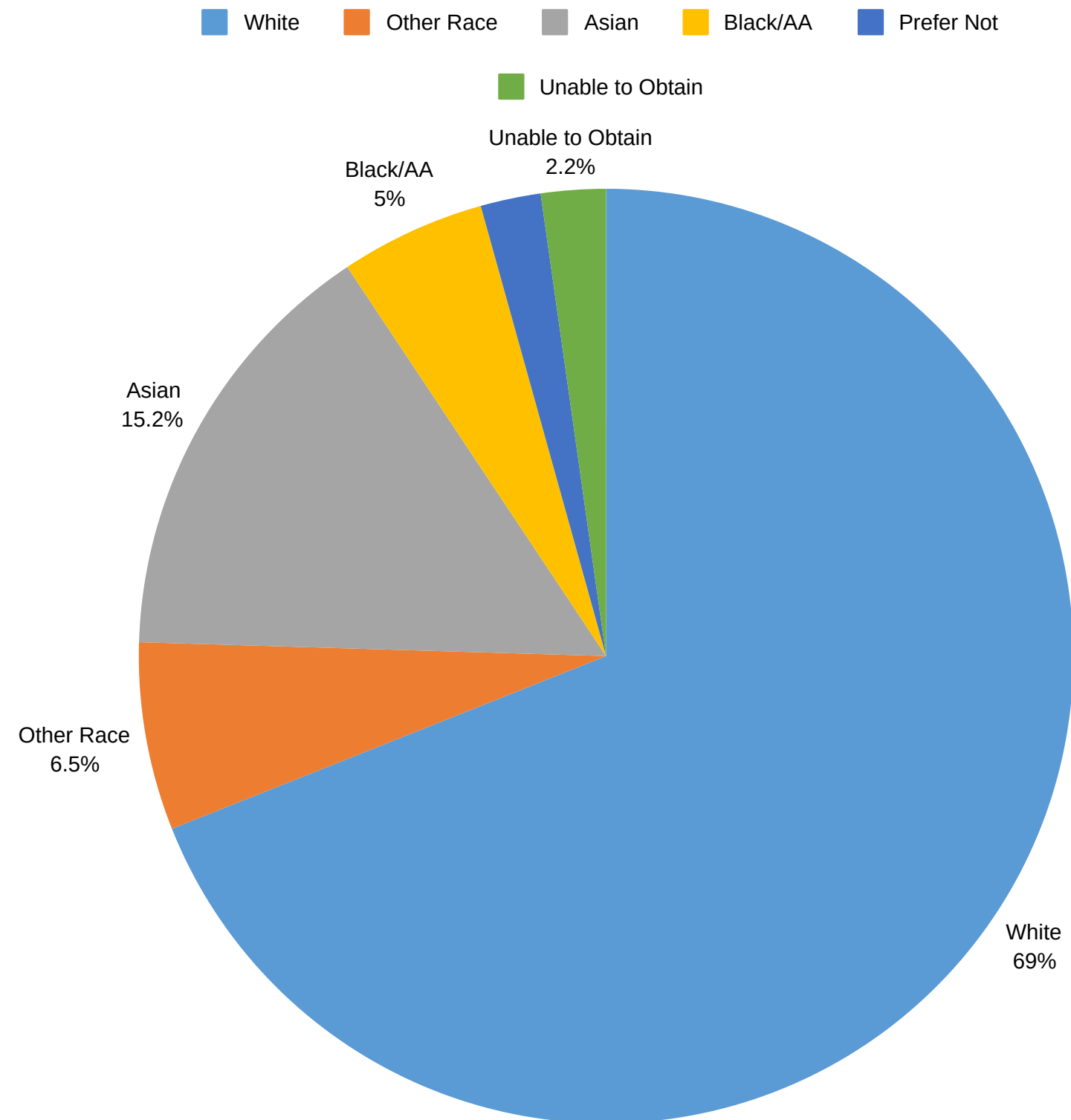
MAH DEI Committee Partner

- Val Harris, Mount Auburn Hospital DEI Committee Co-Chair

Department & Hospital Leadership

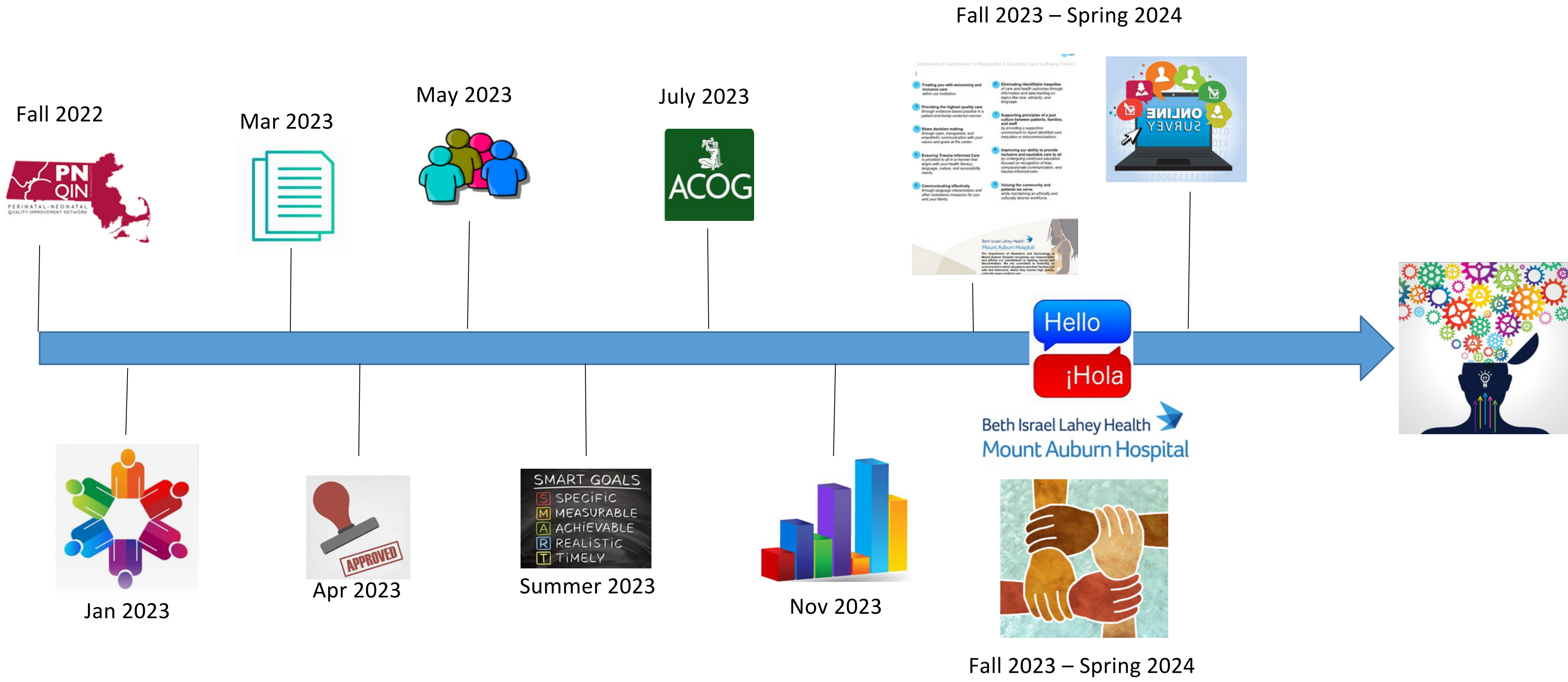
- Julie Mann, CNM Director of Obstetrics
- Brett Young, MD Chair, Dept. of OBGYN
- Ed Huang, MD President & CEO, Mount Auburn Hospital

Who we serve: Total Patient Population FY 2019 - 2023



<u>Race</u>	<u>Total = 11,630 pts</u>
White	6236 (54%)
Other	587 (5%)
Asian	1372 (12%)
Black/AA	454 (4%)
Prefer Not to Say	188 (2%)
Unable to obtain	202 (2%)
Hispanic (any race)	1710 (14.7%)

Timeline of our Equity Journey





Equity Statement

MOUNT AUBURN HOSPITAL OBGYN DEPARTMENT

STATEMENT OF COMMITMENT TO RESPECTFUL AND EQUITABLE CARE:

The Department of Obstetrics and Gynecology at Mount Auburn Hospital recognizes our responsibility and affirms our commitment to fighting racism and discrimination. We understand that persons of color continue to experience maternal mortality and severe obstetric morbidity at disproportionately higher rates. We are committed to fostering an environment in which all patients and their families feel safe and welcomed, and where they receive high quality, culturally aware medical care regardless of race, ethnicity, gender identity, sexual orientation, language preference, religious beliefs, or immigration status. We are also dedicated to creating and supporting a culture of equity, inclusion, and respect for all patients, families, healthcare providers, staff and learners.

To that end, we make the following commitments:

We expect every healthcare setting, staff and care provider within our institution to be welcoming and inclusive of all people regardless of background, race, ethnicity, gender, social class, language, ability, and other personal or social characteristics. Discrimination in any form will not be tolerated.

All patients will receive the highest quality evidenced based medical care in a patient- and family-centered manner.

Patients and their supports are considered an integral part of the multidisciplinary care team. By providing open, transparent, and empathetic communication with patients and their identified support networks we aim to establish trust and create a platform for informed bidirectional shared decision making with patient values and goals at the center of the process.

Patients should receive trauma informed care, including but not limited to, review and discussion of birth events, social services support, recommendations for follow-up care, timely scheduling of necessary appointments, and available resources. A verbal, and ideally, written summary of events that aligns with the person's health literacy, language culture and accessibility needs will be provided. This is particularly important for those patients experiencing emergency obstetric events and/or unexpected outcomes.

Language interpretation and other assistance will always be available for patients and their families who have limited English proficiency or who require ASL services. Staff and providers will undergo training to use and access these relevant services.

We will track information on race, ethnicity, and language as they relate to health outcomes to better identify disparities so we may actively seek ways to eliminate identified inequities of care.

Patients, families and staff are encouraged to identify instances of care inequity, miscommunication or disrespect with the understanding that the principles of just culture will be used to understand and address these reported cases. A confidential forum will be provided to support this reporting.

Providers and staff will regularly undergo education focused on recognition of bias, compassionate communication, and trauma-informed care with the goal of continually improving our ability to provide inclusive and equitable care to all.

We value an ethnically and culturally diverse workforce and strive to have providers and staff that reflect the community and patients we serve.



Statement of Commitment to Respectful & Equitable Care to *Every Patient*

- 1 Treating you with welcoming and inclusive care**
within our institution.
- 2 Providing the highest quality care**
through evidence-based practice in a patient-and-family-centered manner.
- 3 Share decision making**
through open, transparent, and empathetic communication with your values and goals at the center.
- 4 Ensuring Trauma Informed Care**
is provided to all in a manner that aligns with your health literacy, language, culture, and accessibility needs.
- 5 Communicating effectively**
through language interpretation and other assistance measures for you and your family.
- 6 Eliminating identifiable inequities**
of care and health outcomes through information and data tracking on topics like race, ethnicity, and language.
- 7 Supporting principles of a just culture**
between patients, families, and staff
by providing a supportive environment to report identified care inequities or miscommunications.
- 8 Improving our ability to provide inclusive and equitable care to all**
by undergoing continued education focused on recognition of bias, compassionate communication, and trauma-informed-care.
- 9 Valuing the community and patients we serve**
while maintaining an ethically and culturally diverse workforce.

Sharing Our Commitment

- Poster for every L+D and PP room
- Partnered with Department Ambulatory Patient Safety Committee to place posters in ambulatory offices
- Translated into top 4 languages (English, Spanish, Haitian Creole & Brazilian Portuguese)

Beth Israel Lahey Health 
Mount Auburn Hospital

The Department of Obstetrics and Gynecology at Mount Auburn Hospital recognizes our responsibility and affirms our commitment to fighting racism and discrimination. We are committed to fostering an environment in which all patients and their families feel safe and welcomed, where they receive high quality, culturally aware medical care.



AIM #1

By 11/1/23, the MAH OBGYN Department Racial Justice & Equity Committee will initiate a PREMS survey, with more than 30% of postpartum patients responding. The data will be analyzed and used to impact the provision of racially just and equitable maternal care.

Outcomes: Process and Structure measures

READINESS

S1. Identify PREMs survey to be used
S2. Share PREMs survey with Department



IMPLEMENTATION

S3. Provide survey to PP patients at postpartum visit + in PP rooms
P1. Ensure all PP pts receive the survey



REPORTING

S4. Collect PREMs survey data stratified by race, ethnicity, language.
P2. Measure the # of PP patients receiving the survey vs the # of patients delivering over a set time frame



Where we are now

RESPONSE

S5. Use PREM survey results to heighten awareness of disparities and implement practice changes where indicated
P3. Ensure perinatal care standards are met across race/ethnicity



Future steps



PREM Survey

- Utilizing PNQIN/Team Birth Tool
- Partnered with MAH DEI Committee for translation funding
- Now available in top 5 languages for our population: English, Spanish, Haitian Creole, Brazilian Portuguese
- Staff/Providers educated regarding the survey
- **Survey launched late February 2024**
 - QR code link to survey posted in each PP room
 - Also provided to patients at 6 wk postpartum visits
 - Available via QR code for electronic version in Qualtrix
 - Paper copy available in the offices if patient prefers
- Results – limited to date
- Next Steps
 - Analyze data – overall & disaggregated
 - Identify disparities/opportunities for improvement based on feedback
 - Share data with leadership, providers, staff
 - Consider interventions to create change
 - Resurvey after intervention to assess effectiveness of actions



AIM #2

By 1/2024, the MAH OBGYN Department Racial Justice & Equity Committee will implement a plan for increasing the number of staff undergoing bias and respectful care training, with the goal of 50% of Nursing and 50% of OB Providers completing such training by 1/2025.

Outcomes: Process and Structure measures

READINESS

- S1. Survey providers/nursing/staff to obtain baseline data on formal equity training.
- S2. Create a list of options for integration of training into existing forums (OB Sim, Grand Rounds, Healthstream)
- S3. Create a subgroup to develop formal curriculum for training

IMPLEMENTATION

- S4. Provide formal bias and respectful care training over the course of a specified timeframe
- S5. Develop evaluation/feedback form for assessment of training
- P1. Increase number of providers/nurses/staff undergoing training

REPORTING

- S4. Create mechanism for analyzing data from surveys/evaluation/feedback.
- P2. Measure the number of providers/staff completing training vs total provider/staff numbers
- P3. Compare pt PREM survey responses before + after staff training

RESPONSE

- S5. Use PREM survey results, provider/staff feedback to evolve training curriculum to meet identified needs.
- P4. Ensure ongoing, evolving racial equity and respectful care training



Just getting started



Provider/Staff Equity Education

CRICO Supported mandatory 4 hour annual simulation-based education, including units focused on:

- 2017 - Compassionate Communication
- 2019 - Respect for pts right of refusal of medically indicated care
- 2020 - Implicit Bias Awareness
- 2021 - Accepting cultural customs in the setting of IUFD
- 2022 - Bias related to refusal of care for religious reasons
- 2023 - Trauma informed care
- **2024 – RJ&E Committee members involved in planning for simulation to include scenarios and discussions related to discrimination, racism, and respectful communication**

• Grand Rounds

- 2/2023 Uncovering the Dark History of America's Maternal Mortality Crisis
- 2/2023 The Time is Now: Improving Perinatal Mental Health
- 1/24 Pregnancy Associated Violent Death
- **Inclusion of an annual lecture specifically related to Equity**

• M&M

- **Encourage inclusion of discussions around care equity and potential bias during care in monthly M+M case presentations**

• Racial Justice & Equity Training

- Exploring the use of departmental meeting time for **formal training** (Speak Up, Upstander, etc)
- Recent **philanthropic gift** directed at education focused on equity and gender bias



ACOG Foundation Grant

- **ACOG Goals**

- Decrease SMM
- Combat culture of racism/inequity
- Increase data-driven practice change
- Advance public education in a post-Dobbs era

- **MAH Partnership with Charles River Community Health**

- 71% of CRCH population identifies as Hispanic/Latino
- 73% are best served in a language other than English
- 80% are in families who live below the poverty level

- **Proposal**

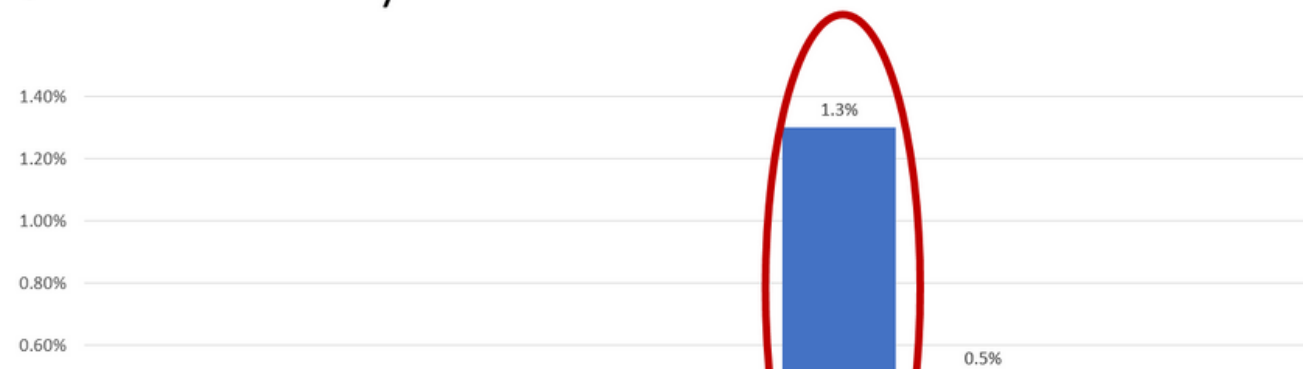
- Funding for part-time community health worker at CRCH with the goal of enhancing perinatal services for Latina patients
- This position would
 - Support CenteringPregnancy care model
 - Facilitate social supports and connection to resources
 - Lead a PP support group
 - Increase staff capacity to address PMHC
- Partnered with MAH OBGYN Dept. PMH Committee

- **Declined, but lessons learned**



Disaggregated OB data: Round 1

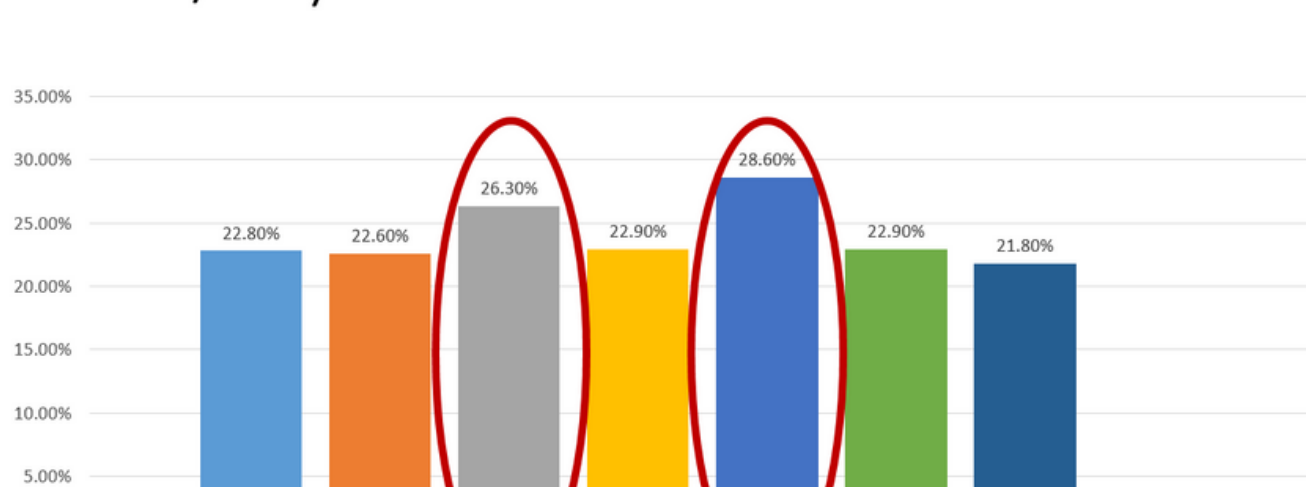
% of IUFDs by Race



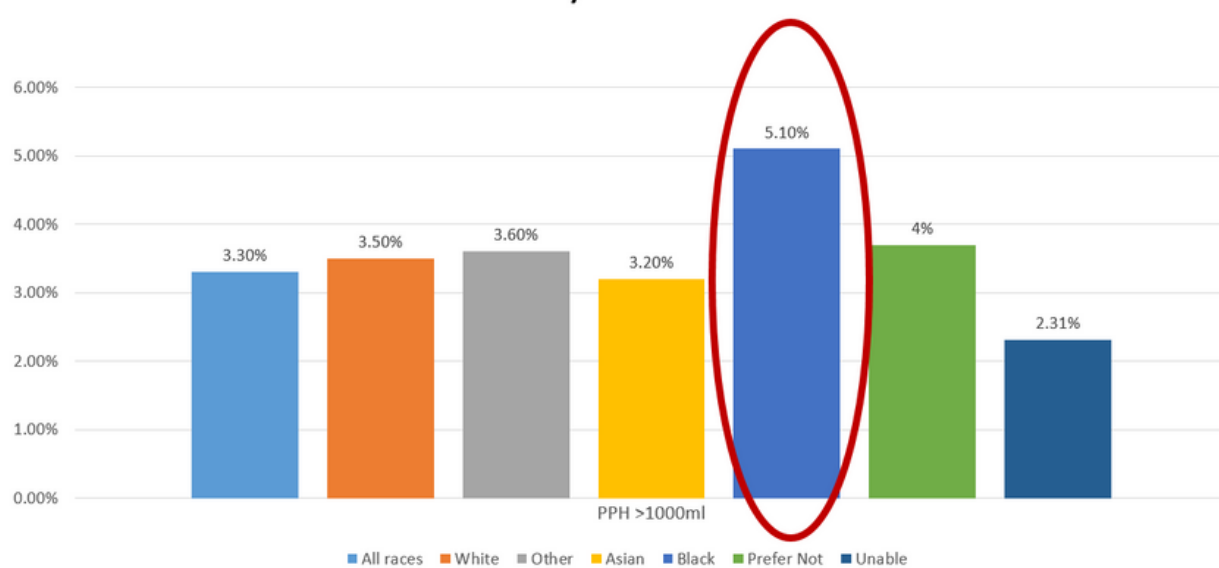
% of C/S by race



% of PPH >1000mL by race



% of PPH >1000mL by race



PPH>1000ml for those identifying as Hispanic = 3.2%

*“The goal is to transform data into information, and information into insight”**

Challenges:

- No single data source
- REaL data is incomplete
- Difficult to identify statistically significant differences
- Providers/staff expressed skepticism related to the validity of data

*Carly Fiorina, former CEO of Hewlett-Packard



QA Committee Data

Readmissions – 28 total (Jan – Sept 2023) Possibly Preventable - 5

Disaggregated by Race

- White – 13 (46%)
- Black/AA – 5 (18%)
- Other – 4 (14%)
- Asian – 3 (11%)
- Prefer Not – 1 (3.5%)
- Unable – 2 (7%)

Hispanic/Latino – 7 (25%)

Reasons for Readmission

- Obstetric hypertensive disorders (39%)
 - GHT - 1
 - PET-severe - 10
- Gyn Post-op complications (25%)
 - Pelvic abscess - 4
 - Cuff bleeding - 2
 - Wound infection - 1
- Mastitis/Breast Abscess – 3 (11%)
- Delayed PPH – 3 (11%)

Comparison of Total OB Deliveries to Charts Reviewed by QA Committee

Race	Overall OB Deliveries (13,000+ patients from 2018 to present)	Proportion of all QA Case Reviews (Jan – Sept 2023)
White	58.3%	53%
Black/AA	4.4%	13% (3x) ↑
Other	14.7%	15%
Asian	13.1%	8.5%
Prefer Not to Say	3.5%	2.3%
Unable to Obtain	3.5%	8.5%
Hispanic(any race)	15%	21% (1.5x) ↑

PPH Data: FY 2019 - 2023

PPH >1000ml: Overall rate 3%

Race – number of patients	Actual Number	Percentage
White 6236	216	3.5%
Other 587	21	3.5%
Asian 1372	44	3.2%
B/AA 454	23	5%
Prefer Not 188	7	3.7%
Unable 202	9	4.4%
Hispanic 1710	55	3.2%

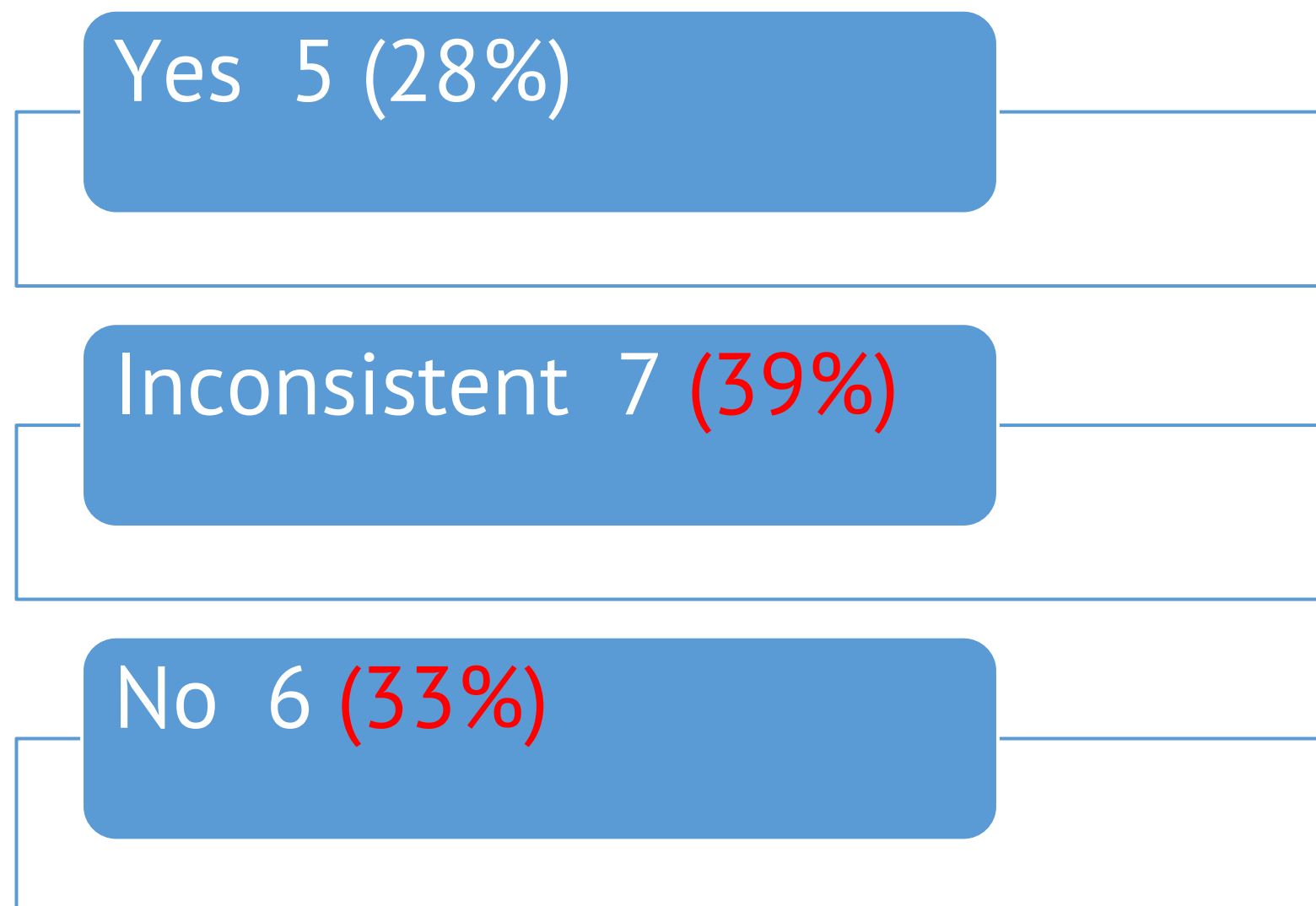
Transfusion in patient's w/PPH: Overall rate 33%

Race – number of patients	Actual Number	Percentage
White 216	68	31%
Other 21	9	43%
Asian 44	14	32%
B/AA 23	7	30%
Prefer Not 7	1	14%
Unable 9	4	44%
Hispanic 55	25	45%



Translation and Interpreter Services

Documentation of Interpreter Use OR Provider Proficiency in Language* QA Chart Review Jan – Sept 2023



*During key points of care:
Admission, Decision for Induction/Surgery, Consents, Discharge Planning

Actions:

- Reviewed available Epic SmartPhrase to ease burden of appropriate provider documentation at Faculty Meeting
- Partnered with Mount Auburn Hospital DEI Committee for funding for translation of Equity Commitment Poster and PREM Survey
- OBGYN Leadership has committed to placing a priority on finding funding for translation of all patient information
- MAH Interpreter Services has provided more iPads with a broader range of available languages to improve access to interpreter services 24/7.
- Continue to gather data on provider use of interpreter services for patients with a preferred language other than English



Pebbles in our shoes

- Recruitment of more **diverse members** of our RJ&E Committee, including a patient/community representative
- Improving **data collection and analysis**
- Identifying **funding sources** for equity work
- Maintain focus on **measurable outcomes** and goals
- **Engaging our provider/staff community** to prioritize this work

Thoughts, Suggestions, Questions?



Caroline Regelous, RN,
Natalya Carney, RN, NP
Leslie MacDonald, MD

Agenda

12:00–12:15 Welcome &
PNQIN Announcements

12:15–12:35 Team
Presentation

12:35–1:00 Discussion,
Q&A



Thanks for joining, see you on 5/21!

Have questions?

Email PNQINAdmin@pnqinma.org!

