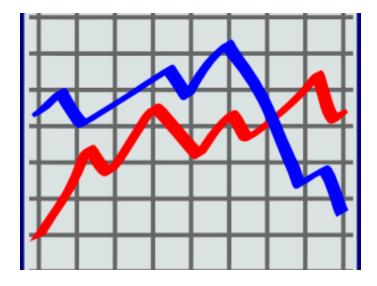


Quality Improvement Data for Access LARC

William M. Sappenfield, MD, MPH, CPH FPQC Director

Partnering to Improve Health Care Quality for Mothers and Babies





"WHAT GETS MEASURED GETS MANAGED"





Pre-Implementation Phase Measures

"Pre-Implementation Phase focuses on creating and modifying hospital systems to enable acquisition and availability of and reimbursement of immediate postpartum LARC placement."

Process & Structural Measures are meant to guide, measure & prepare your hospital for implementation







Project Lead Role

Second Hospitals will need to designate a LARC Project Lead

SThe Project Lead will need to:

- Organize and encourage collaboration across departments
- Enter monthly hospital data in REDCap
- Discuss hospital score card with team members





Monthly Data and Reports

Data Submission:

Enter monthly data in REDCap by the 7th of the following month

S Hospital Reports:

- Receive monthly score card and initiative-wide report no later than the 15th of the following month
- For example: January data should be entered by February 7th and the reports should be received by February 15th



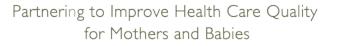


Pre-Implementation Phase Data Reporting

Hospital Report

- Simple monthly reporting
 - "Cumulative percent of" providers & nurses trained
 - "Yes/no" on completion of operational steps
- Seport until pre-implementation stage is complete
 Hospitals Receive
- Solutions Nice-looking one-page hospital status report
- Solution Access LARC Initiative-wide report for comparison





Hos	Hospital Information		
1.	Which hospital are you reporting for?		
2.	Which month are you reporting for? * must provide value		





3. Cumulative percentage of <u>OB physicians and midwives</u> that have completed an education program on the importance of offering immediate postpartum LARC placement since the initiative started



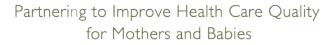
4. Cumulative percentage of <u>nurses</u> that have completed an education program on the importance of offering immediate postpartum LARC placement since the initiative started



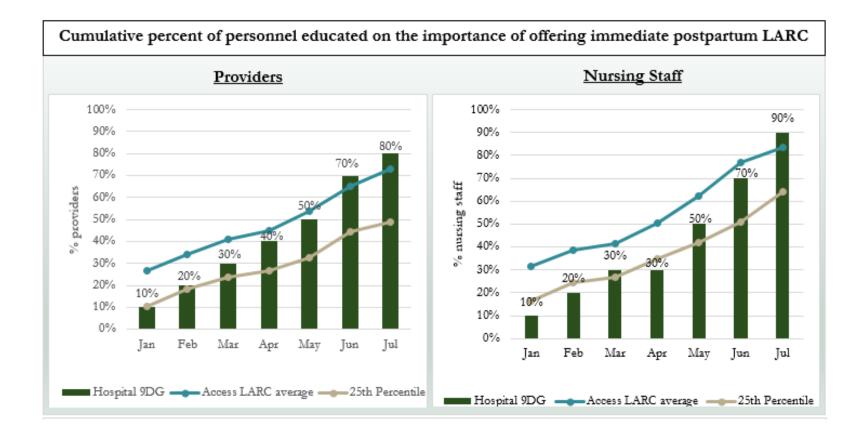
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* must provide value









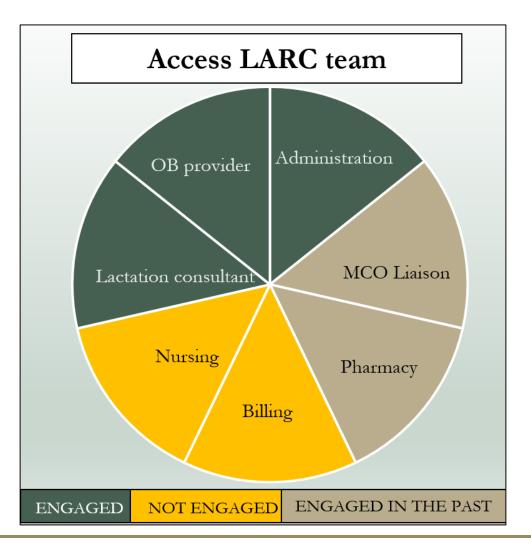




Structural Measures			
5.	Who is an active part of the Access LARC initiative team in your hospital this month? Check all that apply * must provide value	 Administration MCO Liaison Pharmacy Billing Nursing Lactation consultant OB provider All of the above Other 	
6.	What team-challenges are you experiencing regarding non- participation?		











7.	Select the LARC devices that have been added to the hospital formulary * must provide value	 IUD Implant Both None
8.	Select the LARC devices and ancillary equipment available at all delivery sites and/or on the postpartum unit * must provide value	 IUD Implant Both None







	IUD	Implant	None
Devices added to the			
hospital formulary	✓		
Devices and ancillary			
equipment available			✓
at all delivery sites			
Devices for which			
policies, procedures	\checkmark	\checkmark	
and guidelines have			
been modified or			
created			
Devices for which			
billing codes have			✓
been established and			
tested			
Devices for which IT			
revisions are being		✓	
completed			

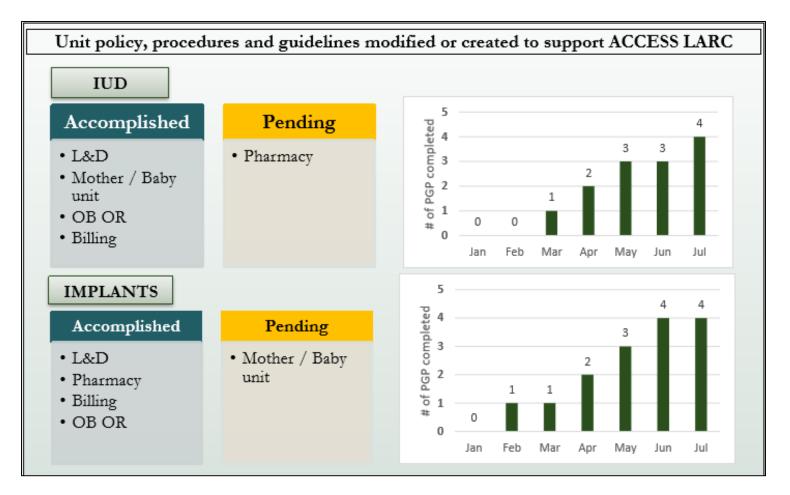




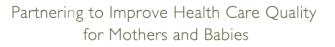
9.	Select the LARC devices for which policies, procedures, guidelines have been modified or created to support immediate postpartum placement * must provide value	 IUD Implant Both None
9.1.	Select the departments that have modified or created policies, procedures, guidelines to support immediate postpartum placement of IUDs * must provide value	 L & D Mother/Baby unit OB OR Pharmacy Billing All of the above
9.2.	Select the departments that have modified or created policies, procedures, guidelines to support immediate postpartum placement of Implants * must provide value	 L & D Mother/Baby unit OB OR Pharmacy Billing All of the above





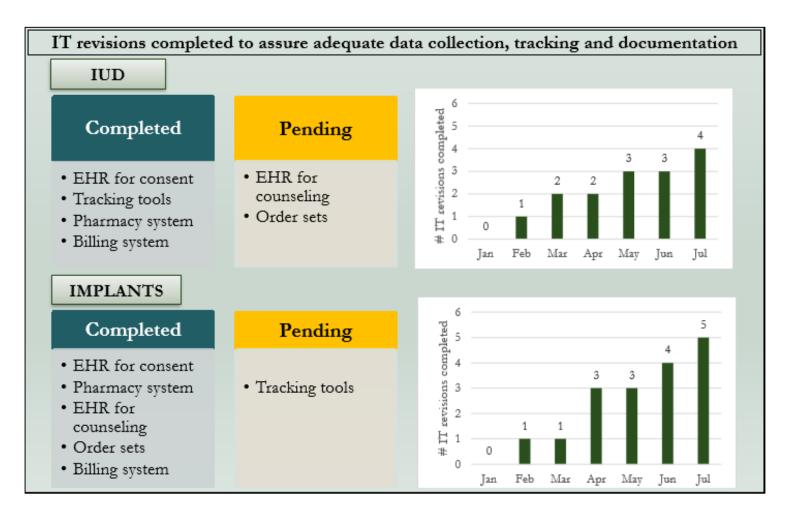








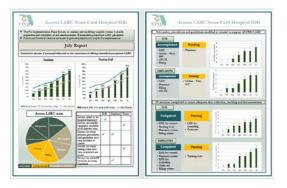
10.	Select the LARC devices for which billing codes have been established and tested * must provide value	 IUD Implant Both None
11.	Select the devices for which IT revisions have been completed to assure adequate data collection, tracking and documentation * must provide value	 IUD Implant Both None
11.1.	Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for IUDs * must provide value	 EHR for consent EHR for contraceptive choice counseling Order sets Pharmacy system Billing system Tracking tools All of the above
11.2.	Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for Implants * must provide value	 EHR for consent EHR for contraceptive choice counseling Order sets Pharmacy system Billing system Tracking tools All of the above







Hospital Score Card vs Initiative-Wide Report



Score Card

- S Hospital focus
- Current status
- S Monitor progress
- Share with QI Team, Departments & Leaders



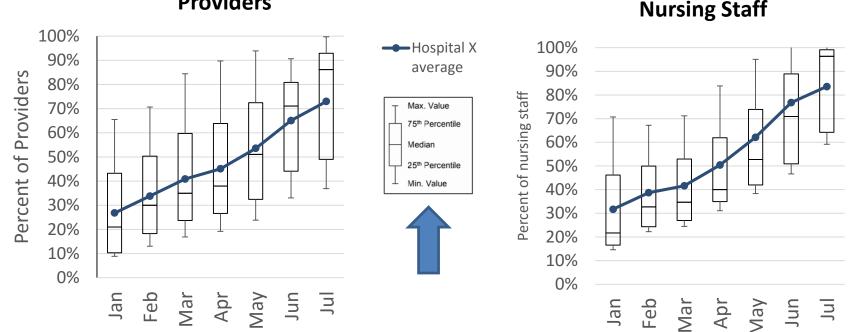
Initiative-Wide Report

- Initiative-wide focus
- S Monitor progress
- Comparative status
- Share with QI Team & selectively





Cumulative percent of staff educated on importance of offering immediate postpartum LARC



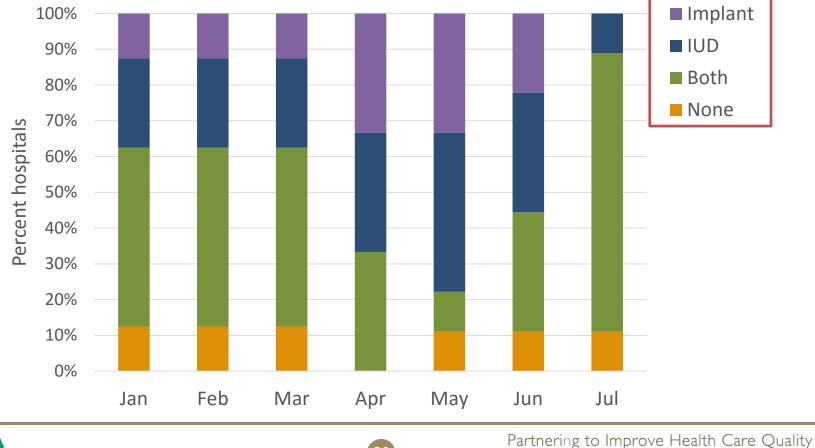
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Providers





EXAMPLE: Percent of hospitals that have added LARC devices to the hospital formulary

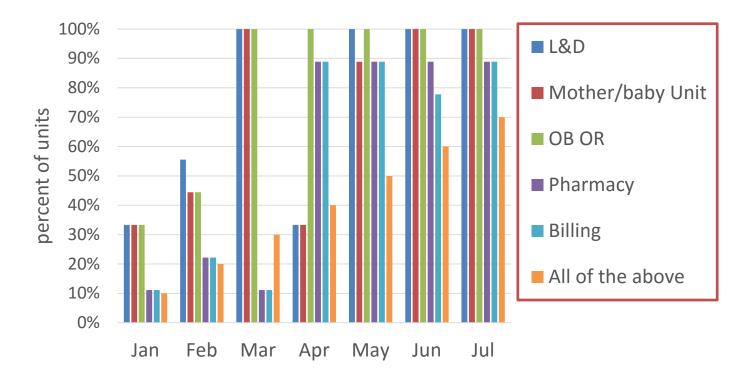


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for Mothers and Babies



Percent of hospital units that modified or created policies, procedures, guidelines to support (IUDs or Implants)







Percent of hospital IT system components that have been revised (IUDs or Implants)







Implementation Phase Reports

- Seady for submission when your hospital is ready
- S Monthly submission through a different data portal
 - Structural measures—one time changes
 - Process measures—patient and provider education
 - Outcome measures—percent of participating hospitals providing immediate postpartum LARC and numbers of LARCs inserted
- S Different hospital and initiative reports







Questions?

Partnering to Improve Health Care Quality for Mothers and Babies

