Severe Maternal Hypertension Initiative Pre-Work Checklist

Please complete all items by <mark>Monday, October 25</mark> (prior to Learning Session #1). Baseline data may be entered up through November 15, 2021

Access all key documents and resources at the Severe Maternal HTN Initiative Website here:

https://wispqc.org/initiatives/maternal-hypertension/aim-severe-hypertension-change-package/
Password: mathtn21

1. Plan to attend monthly learning calls (1 hour) and Learning Sessions
   - ☐ Complete the Doodle poll for recurring monthly learning calls
     - ▪ https://doodle.com/poll/cputn9bhkmi4d2na
   - ☐ Who should attend?
     - ▪ Primary project lead, individuals responsible for data entry, patient care team lead, any other key team members. All team members always welcome!
   - ☐ What will we do?
     - ▪ Active learning and idea sharing with other hospital teams, answers to teams' questions, trainings and hands-on support from WisPQC staff. The schedule of call topics will be shared ahead of time.

2. Develop your project aim and goals.
   - ☐ Use the aim statement worksheet (attached) with your team to develop your goals.
     - ▪ Review Severe Maternal HTN Driver Document and Change Package.
     - ▪ Use your baseline data to set your specific aims (e.g. *Currently we achieve 75% of patient with acute-onset severe hypertension being treated in less than 60 minutes. Our goal is to increase patients treated within one hour to 90% by December 31, 2022.)* Think realistic, achievable, and relevant to your baseline data.
   - ☐ Email your aim statement to williams@perinatalweb.org. **Each team will be asked to briefly share their aim statement during Learning Session 1.**

3. Review the Data Use Agreements (DUA)
   - ☐ Please review, sign, and email the WisPQC/Life QI Data Terms of Use. Please email the signed version to wispqc@perinatalweb.org
   - ☐ Wisconsin Hospital Association will contact the individual responsible for your hospital's DUA to add WAPC/WisPQC as a vendor on your hospital's DUA with WHA. The primary project contact will be copied on that email in case of any project questions.

4. Bookmark the following web pages and login to each so you can access all features.
   - ☐ **Severe Maternal HTN Initiative Website**: https://wispqc.org/initiatives/maternal-hypertension/aim-severe-hypertension-change-package/
     Password: mathtn21
     - ▪ Here you will access; driver document, change package, measure set, and slides/recordings of monthly calls.
   - ☐ **Life QI website**: https://www.lifeqisystem.com/
     - ▪ Watch the following brief training video to familiarize yourself with the platform
       - • https://www.youtube.com/watch?v=6Bxj2ZYKOKY&t=68s (3 minutes)
     - ▪ WisPQC provides 2 (two) licenses to each team. Life QI licenses should be used by the team members who will be responsible for entering monthly data.
     - ▪ The invite to create your login will come directly from Life QI **via email**. Follow the directions/prompts to set up your login and then start your team's project.
     - ▪ Watch this video on how to start a project from a team page: https://help.lifeqisystem.com/starting-a-project-from-a-team-page (3 minutes)
     - ▪ Have the team primary contact login first. They will be asked to complete the following questions on behalf of your team when starting the project:
       - • Project Title- Name of your hospital/ site
       - • Project Aim- a concise description of the issue to be addressed. It should identify the gap between the current (problem) state and desired (aim) state of a process or system. You want to enter your teams specific AIM.
       - • Rationale- the set of reasons for addressing the problem. This should include why you team is addressing the problem now.
       - • Start (October 27, 2021) and end dates (December 31, 2022)
         - *Note:* Dates appear in *reverse* order (day-month) as Life QI is a UK company
       - • Click "Start your project"

5. Baseline data entry
   - ☐ Collect baseline data for Process measures 1-3
     - ▪ Reference Severe Maternal HTN measure set for definitions.
     - ▪ Baseline data is needed for *Quarter 3*: **July, August, September 2021**
   - ☐ Collect baseline data for Process measures 4 and 5.
     - ▪ Reference Severe Maternal HTN measure set (on WisPQC site and attached) for definitions.
     - ▪ Baseline data is needed for *6 months*: **April 1, 2021-September 30, 2021.**
     - ▪ Use the Excel tracking document for manual tracking and organization prior to entry into Life QI. Specifically for the race disaggregation for Measure 4.
   - ☐ Enter baseline data into Life QI by creating a new chart for each measure.
     - ▪ For PM4 you will create **a chart for each race/ethnicity category** that you are reporting on (NH White, NH Black, Hispanic/Latinx, NH American Indian/Alaska Native and NH Asian/Pacific Islander). Life QI will create an aggregate chart for this measure where you will see the total population at your site.

- Create a chart: https://help.lifeqisystem.com/measures-and-charts/creating-a-chart (2:40 min)
- Add data to a chart: https://help.lifeqisystem.com/measures-and-charts/adding-data-to-a-chart
- ☐ Change your 0-5 assessment scale to reflect starting point for the project team.
  - Review assessment scores and determine where you are.
  - How to change your assessment scale: https://help.lifeqisystem.com/projects/project-progress-scores

6. Need help? Schedule a brief 1:1 call with WisPQC project staff.
   - ☐ Use this https://www.signupgenius.com/go/20F0C4FA4AD2BA7F85-htninitiative

Congrats! You completed the pre-work!

Contact us anytime with questions:

- ☐ Christine Williams, QI Project Manager, williams@perinatalweb.org, 608-285-5858
- ☐ Dana Fischer, QI Advisor, fischer@perinatalweb.org, 608-285-5858