Birth Equity (BE) QI Topic Call

August 2\textsuperscript{nd}, 2021
Overview

• Review of ILPQC Tools for Implementing Respectful Care Practices and PREM
• Teams Sharing Strategies for Implementation
  • St Mary’s Hospital, St Louis
  • Loyola University Medical Center, Chicago
  • SSM Health Good Samaritan Hospital, Mt. Vernon, IL
  • Northwestern Medicine Palos Hospital
  • UW Health- Swedish American Hospital
  • Carle BroMenn Medical Center
Review implementation steps for Respectful Care / PREM key strategies

Consider how your team can use these steps as you plan your work
Steps for Implementing Respectful Care Practices

- Make sure your team has received the Respectful Posters ILPQC sent to your hospital.
- Provide all providers and nurses a copy of the Respectful Care Practices to read and sign off on to acknowledge they commit to these practices.
- Post Respectful Care Practices posters in patient facing areas where patients can read them: such as labor and delivery rooms, triage, check in.
- Create a process flow to:
  - Identify a team member responsible for providing patients the expected Respectful Care Practices on arrival to L&D and briefly reviewing to make sure patient has received.
  - At discharge, make sure all patients receive the PREM Survey QR Code and are asked to anonymously complete the PREM Survey on their phone before discharge to report back on their respectful care experience during their delivery admission.
- Review PREM Survey Reports and provide feedback to clinical team.
We commit to...

1. Treating you with dignity and respect throughout your hospital stay
2. Introducing ourselves and our role on your care team 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. Practicing “active listening”—to ensure that you, and your support persons are heard
8. Valuing personal boundaries and respecting your dignity and modesty at all times, including asking your permission before entering a room or touching you
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 after 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
Our Respectful Care Commitments for Every Patient

1. Treating you with dignity and respect throughout your hospital stay.
2. Introducing ourselves and our role on your care team 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. Practicing “active listening”—to ensure that you, and your support persons are heard.
8. Valuing personal boundaries and respecting your dignity and modesty at all times, including asking your permission before entering a room or touching you.
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 after 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.

As a provider, nurse, or staff member caring for pregnant and postpartum patients on this unit, I have reviewed and commit to these respectful care practices with every patient.

______________________________  ________________________________
Signature                                      Date
Labor & Delivery

PREM

Respectful Care Practices
PREM Implementation

• **QI code form is customizable** - Hospitals will have an unique number to put on their QR code paper for patients to identify the correct hospital name. Please use the English PREM survey to receive your hospital #. *It is located in front of your hospital name on the survey!*

• Provider instructions

• Sample survey

• Currently available in 5 languages
  • English and Spanish
  • 8 more languages coming soon!

• Surveys completed by patients on smart phone, tablet or computer **before discharge:**
  • Laminate QR code with your hospital number
  • Create script for your hospital (example scripts in toolkit)
  • PREM QR Code
Example of Introduction of PREM to Patients from NYSPQC

- This survey is an opportunity for birthing people to provide feedback on their experience of care during labor and delivery and postpartum.

- **XXX Hospital** in partnership with **New York State** both aim to improve the care of birthing people.

- This survey is anonymous and takes only a few minutes to complete.

- We encourage **ALL** our birthing people to participate.

- Please scan the QR code. I will give you your privacy while you complete the survey and will return in a few minutes.

Thank you
Tell Us About Your Experience at Albany Med!

Your input is valuable as we ensure patients are having a positive experience.

Below are several ways to let us know how your stay with us went. You can also provide feedback by filling out the PPS survey that you will receive at the end of your visit by your nurse manager.

**Patient Relations**
- Contact a patient relations representative to share your experience or voice any concerns. You may contact them at (518) 262-8889.

**Albany Med CARES**
- Speak with the nurse manager, lactation consultant, nursing supervisor, and/or bedside nurse or physician about your experience.

**Virtual Survey**
- Scan the QR code (right) and fill out a survey to provide us with more information about your stay at Albany Med, and to report any instances of inequitable care.

*Why Do We Want to Know?*

New York State Birth Equity Improvement Project (NYSEIP). This project assists birthing facilities in identifying how individual and systemic racism impacts birth outcomes at their organization, and take action to improve the patient experience and prenatal outcomes for Black birthing people in our community. Scan the QR code to learn more.

Office of Health Equity, Diversity & Inclusion

Albany Medical Center NYSPQC
Team Example Flyer for PREM promotion to patients
**PREM Reports Updates**

- Proposed PREM Timeline:
  - PREM reports to launch August 2022
  - ILPQC is done validating the reports
  - We will be working on granting access to teams within the next two weeks

- PREM Reports:
  - Will stratify responses by:
    - Overall respondents
    - Report will be available for overall % completed per month by total deliveries per month
    - Reports will be available monthly and quarterly at five 5 response per month
    - Public Insurance compared to Private Insurance responses
    - Non-Hispanic White compared to BIPOC responses
    - Black, White, Asian, Hispanic, Other (will report only if sufficient numbers > 5 patients per category)
Helpful resources to start working on implementing patient-centered respectful care

- Respectful Care Practices poster and handout:
  - Developed with IL patients
  - All providers and nurses should read and sign off on the Respectful Care Commitments
  - Post Respectful Care Practices in labor and delivery rooms, triage and check in
- Patient Reported Experience Measure (PREM) – approved by HCAHPS for use with OB patients
  - Provider/staff script and instructions
  - Process to distribute the PREM survey QR Code to all birthing patients
Teams Sharing Strategies for Implementation
Approaches and Strategies for Implementation of Respectful Care Practices and the PREM Survey
St Mary’s Hospital St Louis
Respectful Care Practices

Accomplishments within last year:

• Respectful Care Practices Posters re-branded with permission from ILPQC

• Large Posters posted in all Women’s Services inpatient units and in all SSM outpatient clinics in St Louis area

• Smaller posters hung in each inpatient room in Antepartum, Labor and Delivery, and Postpartum

• Pamphlets added to admission materials for Antepartum and L&D
Respectful Care Practices

Education Supporting Core Commitments of RCP:

• Held Community/Hospital viewing party and discussion of Aftershock film that addresses the reasons Respectful Care commitments are necessary and makes a powerful example of why it is critical for nurses and healthcare providers to “be ready to hear concerns” to save lives.

• Toxic Moving Viewing and Discussion to be held for Providers this fall

• Challenges: need to increase frontline staff participation, and significant work needs to be done regarding awareness

• Currently in progress: introduction of required education modules ‘Dignity in Pregnancy and Childbirth’ to help staff understand background of Respectful Care commitments
Respectful Care Practices

In Progress Work:

- Badge buddies created and distributed with RCP elements
- All staff in L&D will be signing off on RCP agreements once Diversity Science modules have been completed
- PREM Survey Implemented 6/1
  - PREM Survey discussed with patients in Leader rounding on L&D
  - Staff on Postpartum unit go over information on PREM on admission to PP unit – in process of creating new scripting to help patients understand reason for survey and anonymous nature of results to encourage participation
- QR code posted on Whiteboards in front of patients
- Small survey QR codes placed in patient folders
Thank you!
ILPQC BIRTH EQUITY INITIATIVE

Loyola University Medical Center
BIRTH EQUITY TEAM MEMBERS

- YARA ANDERSON: PROJECT TEAM LEADER
- JULIE DERVISHOSKI: OB NURSE CHAMPION
- DR. ANN LAL (MFM)
- TRACIE SHELTON, DIRECTOR
- KAREN RICHARDSON, Clinical Lead MacNeal
- LAURA DE LA PENA: CO-CHAMPION
- AURORA TRNKA: PRENATAL/OUTPATIENT REPRESENTATIVE
- JULIE MARKS: MIDWIFE REPRESENTATIVE
- SUE BUERGER: HIT REPRESENTATIVE/INFORMATICS
- JAYME ANDERKO: TEAM MEMBER, CLINICAL LADDER
- LYNSEY RIEDL: TEAM MEMBER, CLINICAL LADDER
- Daniela Munoz, Social Services
ACTION PLAN

• PREM SURVEY TENTS HAVE ARRIVED IN ENGLISH/SPANISH
• TENT TO BE PLACED IN PP DISCHARGE FOLDER
• FOLD/CREATE TENT AND PLACE AT PATIENTS BEDSIDE (RN/PCT)
• NURSES: SCRIPTING ON TENT
• ENCOURAGE PATIENT TO FILL OUT DURING THEIR STAY
• CHECK-OFF ON SMART NOTE THAT PATIENT COMPLETED PREM SURVEY
• JULIE D. TO RECEIVE MONTHLY ANONYMOUS RESULTS
• NO RESULTS YET. ONLY 2 SURVEYS SUBMITTED FOR JUNE 2022.
• HOW ARE WE GOING TO GET MORE PATIENTS TO COMPLETE SURVEY?
• 8/10 SDOH FORMS COMPLETED IN EPIC 7/19/22.
• 9/10 SDOH FORMS COMPLETED IN EPIC 7/26/22
ILPQC Birth Equity Initiative
Patient Reported Experience Measure (PREM) Survey

Loyola University Medical Center

Cuéntenos sobre su atención. No le pediremos su nombre. Sus respuestas individuales no se compartirán con su proveedor.

Cuéntenos sobre su atención

Escaneé el código QR
Ingresé el siguiente vínculo:
https://rockep.healthink.org/surveys/?s=77KHJALX

44
Loyola University
Medical Center
# SOCIAL DETERMINANTS OF HEALTH SCREENING FORM

## PHYSICAL ACTIVITY

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>On average, how many days per week do you engage in moderate to strenuous exercise (like a brisk walk)?</td>
</tr>
<tr>
<td>• 0 days</td>
</tr>
<tr>
<td>• 1 day</td>
</tr>
<tr>
<td>• 2 days</td>
</tr>
<tr>
<td>• 3 days</td>
</tr>
<tr>
<td>• 5 days</td>
</tr>
<tr>
<td>• 7 days</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>On average, how many minutes do you engage in exercise at this level?</td>
</tr>
<tr>
<td>• 0 min</td>
</tr>
<tr>
<td>• 10 min</td>
</tr>
<tr>
<td>• 20 min</td>
</tr>
<tr>
<td>• 30 min</td>
</tr>
<tr>
<td>• 60 min</td>
</tr>
<tr>
<td>• 90 min</td>
</tr>
</tbody>
</table>

## FINANCIAL RESOURCE STRAIN

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>How hard is it for you to pay for the very basics like food, housing, medical care, and heating?</td>
</tr>
<tr>
<td>• Very hard</td>
</tr>
<tr>
<td>• Hard</td>
</tr>
<tr>
<td>• Somewhat hard</td>
</tr>
<tr>
<td>• Not very hard</td>
</tr>
<tr>
<td>• Not very hard at all</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

## HOUSING STABILITY

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 12 months, was there a time when you were not able to pay the mortgage or rent on time?</td>
</tr>
<tr>
<td>• Yes</td>
</tr>
<tr>
<td>• No</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 12 months, how many places have you lived?</td>
</tr>
<tr>
<td>• 1</td>
</tr>
<tr>
<td>• 2</td>
</tr>
<tr>
<td>• 3 or more</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 12 months, was there a time when you did not have a steady place to sleep or slept in a shelter (including now)?</td>
</tr>
<tr>
<td>• Yes</td>
</tr>
<tr>
<td>• No</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

## TRANSPORTATION NEEDS

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the past 12 months, has lack of transportation kept you from medical appointments or from getting medications?</td>
</tr>
<tr>
<td>• Yes</td>
</tr>
<tr>
<td>• No</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

## FOOD/SECURITY

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within the past 12 months, you worried that your food would run out before you got the money to buy more food.</td>
</tr>
<tr>
<td>• Never true</td>
</tr>
<tr>
<td>• Sometimes true</td>
</tr>
<tr>
<td>• Often true</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within the past 12 months, the food you bought just did not last and you did not have money to get more.</td>
</tr>
<tr>
<td>• Never true</td>
</tr>
<tr>
<td>• Sometimes true</td>
</tr>
<tr>
<td>• Often true</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

## BARRIERS

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you feel stress-tense, restless, nervous, or anxious, or unable to sleep at night because your mind is troubled all the time?</td>
</tr>
<tr>
<td>• Not at all</td>
</tr>
<tr>
<td>• Only a little</td>
</tr>
<tr>
<td>• To some extent</td>
</tr>
<tr>
<td>• Rather much</td>
</tr>
<tr>
<td>• Very much</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

## SOCIAL CONNECTIONS

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>In a typical week, how many times do you talk on the phone with family, friends, or neighbors?</td>
</tr>
<tr>
<td>• Never</td>
</tr>
<tr>
<td>• Once a week</td>
</tr>
<tr>
<td>• Twice a week</td>
</tr>
<tr>
<td>• Three times a week</td>
</tr>
<tr>
<td>• More than 3 times a week</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>How often do you get together with friends or relatives?</td>
</tr>
<tr>
<td>• Never</td>
</tr>
<tr>
<td>• Once a week</td>
</tr>
<tr>
<td>• Twice a week</td>
</tr>
<tr>
<td>• Three times a week</td>
</tr>
<tr>
<td>• More than 3 times a week</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>How often do you attend church or religious services?</td>
</tr>
<tr>
<td>• Never</td>
</tr>
<tr>
<td>• 1 to 4 times per year</td>
</tr>
<tr>
<td>• More than 4 times per year</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CIRCLE ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you belong to any clubs or organizations such as church groups, unions, fraternal or athletic groups, or school groups?</td>
</tr>
<tr>
<td>• Yes</td>
</tr>
<tr>
<td>• No</td>
</tr>
<tr>
<td>• Refuse to answer</td>
</tr>
</tbody>
</table>
WHAT HAVE WE ACCOMPLISHED?

- SDOH SCREENING TOOL IN PLACE
- ACCESS TO NOWPOW
- DIVERSITY TRAINING COMPLETED
- POSTERS IN UNIT
- SMART NOTES IN EPIC
- PREM SURVEY IN PLACE
- MONTHLY COMMITTEE MEETINGS
Birth Equity
Respectful Care
PREM survey

• SSM Health Good Samaritan Hospital
• Mt. Vernon, IL
SSM Health Good Samaritan Hospital
Women’s Center

*Level 2 facility
*1000 births per year
*We have 6 LDRs and 18 postpartum/GYN rooms
*2 bed Level 2 nursery
*Our staff consists of RNs, unit secretaries, scrub techs, and IBCLCs
*We serve a 11 county area in southern Illinois
Information about Respectful Care begins at admission with this personalized flyer in all admission charts. This is reviewed with each patient at admission.

All staff and providers were asked to commit to these practices by signing the commitment form.

Our Respectful Care Commitments for Every Patient

1. Treating you with dignity and respect throughout your hospital stay.
2. Introducing ourselves and our role on your care team 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 care that is right for you.
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.

As a provider, nurse, or staff member caring for pregnant and postpartum patients on this unit, I have reviewed and commit to these respectful care practices with every patient.

______________________________
Signature

______________________________
Date

End note: Each hospital is a member of the Women’s Health Collaborative, SSM Health and the村镇 Partnership.

End note: This information is provided in accordance with the latest guidelines and recommendations of the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine (SMFM).
Privacy is part of respectful care

Each patient is given a paper questionnaire on a clipboard when they are alone. This allows the patient to answer honestly. Also, any bias in asking questions or response to answers by staff may be minimized. The nurse can ask for more information depending on the answers to these questions. Answers are transposed into the EHR and the paper copy is shredded.

SSM Health Women’s Center wants to help all patients with their needs. Please circle or provide the best answer to each question below. We are asking this on paper to provide privacy for your answers.

1. In the past 30 days, have you wished you were dead or wished you could go to sleep and not wake up?
   - Yes
   - No

2. In the past 30 days, have you actually had any thoughts about killing yourself?
   - Yes
   - No

3. In your lifetime, have you ever done anything, started to do anything, or prepared to do anything to end your life?
   - Yes
   - No

4. Do you feel safe at home?
   - Yes, feel safe
   - No do not feel safe
   - comments____________________

5. Have you ever been hit/hurt or feel threatened by someone?
   - Yes, have been hit/hurt or feel threatened
   - Yes, in the past and don’t need support currently
   - No, have not been hit/hurt or feel threatened
   - comments____________________

6. In the last 12 months was there a time when you were not able to pay the mortgage (house payment) or rent on time?
   - Yes
   - No

7. In the last 12 months have you had little interest?
   - Yes
   - No

8. In the past 2 weeks have you felt down, depressed or hopeless?
   - Yes
   - No

9. In the past 2 weeks have you had little interest?
   - Yes
   - No

10. How hard is it for you to pay for the very basics like food, housing, medical care, and heating?
    - Very hard
    - Hard
    - Somewhat hard
    - Not very hard
    - Not hard at all

11. In the past 12 months, has lack of transportation kept you from medical appointments or from getting medications?
    - Yes
    - No

12. In the past 12 months, has lack of transportation kept you from meetings, work, or from getting things needed for daily living?
    - Yes
    - No

13. In the past 12 months, were you worried that your food would run out before you got money to buy more.
    - Never true
    - Sometimes true
    - Often true

14. Within the past 12 months, the food you bought just didn’t last and you didn’t have money to get more.
    - Never true
    - Sometimes true
    - Often true

15. Have you had or been treated for any of these infections in this pregnancy?
    - Yes
    - No
    - Gonorrhea
    - Syphilis
    - Chlamydia
    - HIV

16. Have you had any miscarriages/abortions that you want to keep private?
    - dates

17. In the past year how often have you used the following?
    a. 4 or more alcoholic drinks a day
    b. Tobacco products
    c. Prescription drugs for Non-Medical Reasons
    d. Illegal drugs

Please go to the History activity in EPIC and complete the more detailed assessment for these items. Please sign the BC worksheet “Information for Medical and Health Purposes Only” page

*******This is not a part of the chart. Please place in shred bin after transposing*******
We created a smartphrase to be used on in the instructions section of every patient’s discharge printout. This covers all the needed information. It pulls in the provider name and number.

This is our discharge checklist which includes the information for standardized discharge instructions and doing the PREM survey.

Mother Discharge Checklist
- TIGR Videos
- Birth certificate typed, printed & signed
- Paternity papers typed/parent info given
- Birth announcement/media release
- Tdap vaccine given – oral administration
- Rubella vaccine given – oral administration
- Flu vaccine given
- COVID vaccine given
- Rhogam given
- Depression screen >10 = Dr. notified/Referral
- Follow-up appointments made on AVS
- Discharge education handouts:
  - Postpartum Preeclampsia handout
  - POST BIRTH Warning Signs magnet
  - Maternal Health Safety Check handout
  - Baby News booklet
- GSAMPFDC Smart phrase added to AVS
- Care plan completed and note sent
- Education done and resolved
- SDoH resources given/document in note
- PREM survey
We organized our discharge area to facilitate the different parts of the Birth Equity Initiative. The After Visit Summary prints off of the printer shown. The education papers that we give to every patient are in the stacked rack. The PREM survey laminated card is on a hook with the discharge education. The SDoH resources accordion file is also next to the rack for easy access.
ILPQC Initiative
Birth Equity Updates
Northwestern Medicine Palos Hospital
Goal 1

Improving accuracy of Race and Ethnicity data.

Action:
- Involved Birth Certificate clerk in cases where patient response was “unknown” or “declined to answer” – sending updated information to Patient Registration.

Outcomes:
- Less records with “unknown” or “declined to answer”
Goal 2

Education and roll out of “Respectful Care Practices” information.

Actions:

- Posted Respectful Care Practices posters in unit public and staff areas
- Provided education to all staff and physicians on the principles of Respectful Care
- Distributed Respectful Care Practices handout to patients at admission

Outcomes:

- Increased awareness among nurses and physicians
Goal 3

Initiation of the Patient Reported Experience Measure (PREM) survey.

Actions:
- Created scripting for staff for presenting the PREM survey to patients
- Began asking patients to participate in the PREM survey on day of discharge

Outcomes:
- Staff using PREM survey as instructed
- Awaiting results of survey from ILPQC
Goal 4

Implementation of the Social Determinants of Health (SDOH) screening.

Action:
- Initiated SDOH screening on paper until our transition to NM epic is complete in October
- Developed workflow for RN & Social Services
- Provided Social Services with resources to aid those patients with a positive screen

Outcome:
- All patients are being screened on paper
- Paper copies are tracked for compliance
- Electronic screening will commence when we transition to the NM instance of Epic in October
UW Health- Swedish American Hospital
Strategies

Presented by:
Courtney Pemberton, MSN, RNC-OB, C-EFM
Staff and providers participating in mandatory education days gave the opportunity to go over the 13 Respectful Care Measures and the posters that will be hung in L&D patient rooms.

Scripting provided to L&D staff on how to initiate the conversation and provide awareness of the care measures to our patients.

Educated staff included L&D, MB and NICU.
Go Live was April 1st on postpartum unit
Education provided to postpartum and L&D staff during monthly staff meetings
2 iPads purchased in case of no smart phone access
Scripting provided to staff (see next slide)
Went live July 1st on L&D with PREM survey for patients with fetal demise or infant loss
Education and reminders provided at huddles and through email for L&D staff
Similar scripting provided
“This survey is an opportunity for our patients to provide feedback on their experience of care during their stay from labor and delivery all the way through discharge. We want to ensure that we are providing respectful and equitable care to all of our patients and by completing this anonymous survey you are helping us identify possible areas for improvement. This should only take a few minutes to complete and I will step out of the room while you complete it.”
PREM Survey

- Provided the survey in paper format to staff prior to Go Live for them to be able to read the questions that were being asked of the patients
- Every room has the QR code hanging on white board as a visual reminder for staff to complete prior to discharge
- Encouraging staff to now bring the iPad into the room for all patients as it enlarges the survey for them and also makes it appear less lengthy
- Throughout entire process we have remained diligent in providing staff with diversity, equity and inclusion training to increase their awareness of why a survey like this is so important
Implementing Respectful Care Practices
Getting Started...

- Email sent to providers, nurses and staff with the following information:
  - Overview of Birth Equity (BE) Initiative
  - Copy of Respectful Care Practices (review, commit, and sign poster on unit)
  - Overview of PREM survey and a copy of PREM survey to review

- BE goals & PREM survey process reviewed at unit staff meeting & OB/GYN provider meeting
Implementing Respectful Care Practices
Spreading the Message...

- Respectful care commitment poster hung in triage
- Respectful care commitment flyer hung in patient rooms
- PREM survey with QR code flyer hung in patient rooms
- Respectful care commitment poster with provider, nurse, staff member signatures hung on outside of charge nurse office door facing patient hallway
Implementing Respectful Care Practices, PREM Survey
The Process...

- Discharge nurse informs patient the purpose and use of the PREM survey and walks them through how to take the survey
- Discharge nurse ask the patient to electronically complete the survey by using a cell phone/tablet and scanning the QR code located on the flyer hanging on the wall
Implementing Respectful Care Practices
Next Steps...

- Review PREM survey reports
- Provide feedback to clinical team
- Create action plan if needed
# Upcoming BE Webinars:

<table>
<thead>
<tr>
<th>Event</th>
<th>Day/Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementing postpartum early schedule two-weeks (AIM PP bundle)</td>
<td>August 15&lt;sup&gt;th&lt;/sup&gt; at 12:00pm</td>
</tr>
<tr>
<td>Implementing postpartum education</td>
<td>September 19&lt;sup&gt;th&lt;/sup&gt; at 12:00pm</td>
</tr>
</tbody>
</table>

Register and Join here: [https://northwestern.zoom.us/meeting/register/tJMod-uoqDotGtzzJICE1O5TphPWT2-pZfmY](https://northwestern.zoom.us/meeting/register/tJMod-uoqDotGtzzJICE1O5TphPWT2-pZfmY)
Thanks to our Funders

In kind support:

IL & PQC
Illinois Perinatal Quality Collaborative

IDPH
Illinois Department of Public Health

I PROMOTE-IL
Innovations to Improve Maternal Outcomes in Illinois

IDHS
Illinois Department of Human Services

AIM
Alliance for Innovation on Maternal Health

CDC
Centers for Disease Control and Prevention

NorthShore
University Health System

Northwestern Medicine
Northwestern University Feinberg School of Medicine

Saint Louis University

Ann & Robert H. Lurie
Children's Hospital of Chicago