ILPQC BE Monthly Data Collection Form						
REDCAP Study Identifiers						
1.	REDCap Record ID	REDCap Record ID:				
2.	Hospital ID Number	Hospital ID Number:				
3.	Please select the time period for this monthly data:	•	(Oct - Dec l 021 eer 2021 2021 er 2021 er 2021 2022		March 2022 April 2022 May 2022 June 2022 July 2022 August 2022 September 2022 October 2022 November 2022 December 2022	
	ucture Measures	1				
4.	Hospital has implemented standardized social determinants of health screening tools for screening all pregnant women during delivery admission in order to link patients to needed resources and services	l Haven't s l Working l In place				
5.	Hospital has provided affiliated prenatal care sites options for standardized social determinants of health screening in order to screen pregnant patients early in pregnancy and link to needed resources and services	l Haven't s l Working l In place				
6.	Hospital has completed ILPQC social determinants of health community resources mapping tool to assist linking patients to needed resources and services and share with affiliated outpatient prenatal care sites and hospital OB units	l Haven't s l Working l In place				
7.	Hospital has strategy for incorporating discussion of social determinants of health and discrimination as potential factors in hospital maternal morbidity reviews	l Haven't s l Working l In place				
8.	Hospital has implemented a protocol for improving the collection and accuracy of patient-reported race/ethnicity data	l Haven't s l Working l In place	on it			
9.	Hospital has developed a process to review maternal health quality data stratified by race/ethnicity and Medicaid status	l Haven't s l Working l In place	on it			
10.	Hospital has engaged patients and/or community members to provide input on quality improvement efforts	l Haven't s l Working l In place	on it			
	Hospital has a strategy for sharing expected respectful care practices with delivery staff and patients (i.e. posting in L&D) including appropriately engaging support partners and/or doulas	l Haven't s l Working l In place	on it			
12.	Hospital has implemented a Patient Reported Experience Measure (PREM) patient survey to obtain feedback from	l Haven't s l Working				

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postpartum patients on respectful care practices and a process to review and share results	☐ In place					
13. Hospital has standardized system to provide all patients the recommended postpartum safety patient education materials prior to hospital discharge including urgent maternal warning signs and where patients call for immediate help with concerns	☐ Haven't started☐ Working on it☐ In place					
as well as scheduling early postpartum follow-up						
Process Measures						
14. Percentage of providers completing education on the importance of listening to patients, providing respectful care, and addressing implicit bias	 □ 0% □ 10% □ 20% □ 30% □ 40% □ 50% □ 60% □ 70% □ 80% 					
	90%					
	100%					
15. Percentage of nurses completing education on the importance of listening to patients, providing respectful care, and addressing implicit bias	 □ 0% □ 10% □ 20% □ 30% □ 40% □ 50% □ 60% □ 70% □ 80% □ 90% □ 100% 					
16. Percentage other staff completing education on the importance	0%					
of listening to patients, providing respectful care, and						
addressing implicit bias. Should consider all staff who have contact with patients during the delivery admission.	□ 20% □ 30% □ 40% □ 50% □ 60% □ 70% □ 80% □ 90%					
	100%					
Outcome Measures						
The goal is to review a sample of 10 records patients delivered from the specified race/ ethnicity categories or on Medicaid/						
uninsured per month.						
• Example 1: If your hospital has 102 patients delivered from the specified race/ethnicity categories in a month, then						
divide 102 by 10=10.2 and you will select every 10th birth for that month.						

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Example 2: If your hospital has 28 patients delivered from the specified race/ ethnicity categories in a month, then 28 divided by 10 is 2.8 and you will select every 2nd birth for that month.

If you have less than 10 deliveries of the specified race/ ethnicity categories per month include all of them and select additional deliveries with Medicaid/ uninsured, to complete sample of 10 total charts.

- 1. Begin by systematically selecting **10 records per month** from deliveries to patients of the specified race/ ethnicity categories.
 - a. Patients of these race/ ethnicity categories:
 - i. Black or African American
 - ii. Hispanic or Latino
 - iii. Native American or Alaskan Native
 - iv. Asian/Pacific Islander
 - v. Multiracial or Biracial
- 2. Divide the total number of deliveries to patients of the specified race/ ethnicity categories occurring at your facility in a given month by 10 and then select every nth chart where 'n' is the result of that division
 - a. Step 1: develop a process to identify deliveries to patients of the specified race/ ethnicity categories
 - b. Step 2: use the ILPQC direction to establish a sampling protocol
 - c. Step 3: once a sampling protocol is determined you can use every month

	documented and completed
В)	# of sample patient charts with social determinants of health (SDoH) screening documented using a SDoH screening tool (prenatal and L&D) iprenatally iiduring delivery admission
C)	# of sample patient charts screen positive for social determinants of health (SDoH) (answer yes to any question on SDoH screening tool) iprenatally iiduring delivery admission
	a. # of sample patient charts screen positive for social determinants of health that have documentation of patient linkage to needed

A) # of patients in monthly sample race/ethnicity

E) # of patients in monthly sample with documentation of receiving postpartum safety education materials prior to hospital discharge including urgent maternal warning signs and where patients call for immediate help with concerns as well as scheduling early postpartum follow-up

resources/services (prenatal and L&D) prenatally

i. urgent maternal warning signs where patients call for immediate ii.

during delivery admission

help with concerns

iii. scheduling early postpartum follow-up

i.

ii.