

Key Driver Diagram: Maternal Hypertension Initiative

GOAL: To reduce preeclampsia maternal morbidity in Illinois hospitals

AIM: By December 2017, to reduce the rate of severe morbidities in women with preeclampsia, eclampsia, or preeclampsia superimposed on pre-existing hypertension by 20%

Key Drivers

Readiness: Implementation of standard processes for optimal care of severe maternal hypertension in pregnancy

Recognition: Screening and early diagnosis of severe maternal hypertension in pregnancy

Response: Care management for every pregnant or postpartum woman with new onset severe hypertension

Reporting/Systems Learning: Foster a culture of safety and improvement for care of women with new onset severe hypertension

Interventions

- ❑ Implement standard order sets and/or algorithms for early warning signs, diagnostic criteria, timely triage, monitoring and treatment of severe hypertension
- ❑ Ensure rapid access to medications used for severe hypertension with guide for administration and dosage
- ❑ Implement system plan for escalation, obtaining appropriate consultation, and maternal transport
- ❑ Perform regular simulation drills of severe hypertension protocols with post-drill debriefs
- ❑ Integrate severe hypertension processes (e.g. order sets, tracking tools) into your EHR
- ❑ Standardize protocol for measurement and assessment of blood pressure and urine protein for all pregnant and postpartum women
- ❑ Standardize response to early warning signs including listening to and investigating symptoms and assessment of labs
- ❑ Implement facility-wide standards for patient-centered education of women and their families on signs and symptoms of severe hypertension
- ❑ Educate OB, ED, and anesthesiology physicians, midwives, and nurses on recognition and diagnosis of severe hypertension that includes utilizing resources such as the AIM hypertension bundle and/or unit standard protocol
- ❑ Execute facility-wide standard protocols for appropriate medical management in under 60 minutes
- ❑ Create and ensure understanding of communication and escalation procedures (e.g. implementing a rapid response team through the use of TeamSTEPs)
- ❑ Develop OB-specific resources and protocols to support patients, families, staff through major complications
- ❑ Provide patient-centered discharge education materials on preeclampsia and postpartum preeclampsia
- ❑ Implement patient protocols to ensure follow-up within 7-10 days for all women with severe hypertension and 72 hours for all women on medications
- ❑ Establish a system to perform regular debriefs after all new onset severe hypertension cases
- ❑ Establish a process in your hospital to perform multidisciplinary systems-level reviews on all severe hypertension cases admitted to ICU
- ❑ Continuously monitor, disseminate, and discuss your monthly data in ILPQCREDCap system at staff/administrative meetings
- ❑ Add maternal hypertension assessment and treatment protocols and education to provider and staff orientations, and annual competency assessments