2022 AIM Data Support Community of Learning

Tuesday, February 08, 2022, 3:00PM-4:30PM, EST
Welcome

- You are muted upon entry to the call
- You will have the ability to unmute yourself during Q&A times
- We encourage participants to remain muted in an effort to reduce background noise
- If you are experiencing technical difficulties, please chat an AIM staff member or email aimdatasupport@acog.org

This presentation will be recorded
Both Slides and Presentations will be available and sent via email.
## Agenda

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Facilitator/Speaker</th>
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<tbody>
<tr>
<td>3:00PM-3:10PM</td>
<td>Welcome and Introductions</td>
<td>Inderveer Saini</td>
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<tr>
<td>3:10PM-3:55PM</td>
<td>Presentation: Data Collection Strategies &amp; Tools for Facility-Reported Measures</td>
<td>Dan Weiss, MPH, Patricia Lee King, PhD <em>Illinois Perinatal Quality Collaborative (ILPQC)</em></td>
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<tr>
<td>3:55PM-4:10PM</td>
<td>Group Discussion and Q&amp;A Session</td>
<td>All</td>
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<td>4:10PM-4:15</td>
<td>Report-Outs: Oklahoma</td>
<td>Denise Cole</td>
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<tr>
<td>4:15PM-4:20PM</td>
<td>Report-Outs: New Mexico</td>
<td>Mary Kate Hildebrandt</td>
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<tr>
<td>4:20PM-4:25PM</td>
<td>Upcoming Data COL Events and Updates</td>
<td>Inderveer Saini</td>
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<tr>
<td>4:25PM-4:30PM</td>
<td>Closing</td>
<td>Inderveer Saini</td>
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Please reach out to us with any questions related to the AIM Data Support COL at aimdatasupport@acog.org.
Dan Weiss, MPH
Program Manager, Illinois Perinatal Quality Collaborative (ILPQC)

Patricia Lee King, PhD, MSW
State Project Director and Quality Lead for the Illinois Perinatal Quality Collaborative (ILPQC)
Data Collection Strategies & Tools for Facility-Reported Measures

Patricia Lee King, PhD, MSW
Dan Weiss, MPH
Overview
Agenda

- Introduction (10 min)
- Data Collection Strategies & Tools for Facility-Reported Measures (45 Min)
- Peer Learning and Participant report-outs (25 Min)
- Closing (10 min)
Learning Objectives

By the end of the session, participants will be able to:

• Identify at least 3 different tools (e.g., software) that could be used for collecting AIM facility-level data.

• Describe at least 3 strategies for assuring facility-level data quality.

• Describe at least two strategies to actively support persons responsible for facility-level data collection
Discussion of Prework Reflections

- What are your data collection goals? For your collaborative? For the hospitals/sites participating in your collaborative?
- What data collection goals do you feel like you are achieving?
- What data collection goals do you feel like you need more help/resources/tools to achieve?
- How can this COL or AIM help?
Objective 1: Tools to Collect AIM Facility-Level Data
Functions of data tools

Collection  Analysis  Visualization  ACTION!
Considerations for selecting tools

- Goals
- Needs
- Resources
- Other tools/systems in place
To drive change, a data system should

• Allow for data collection of the needed data to drive change
• Include structure, process, and outcome measures identified collectively
• Balances reward with burden for the participating hospitals/sites
• Provide ways to look and understand data at the collaborative and hospital/site level
Survey says COL using following tools

- Excel
- SAS
- REDCap
- Tableau
- PowerBI
- Stata
- Life QI and more…
Focus of data tools

What tools do you use to collect data from your collaborative hospitals/sites?

CHAT
Top-used tools that facilitate data collection

<table>
<thead>
<tr>
<th>Feature</th>
<th>Excel</th>
<th>REDCap</th>
<th>Life QI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human component required</td>
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<tr>
<td>Visualization – automation and quality</td>
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<tr>
<td>Forms – creation and usability</td>
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What is the most important feature of data collection tools for your collaborative?
Achieving your "data system" goals

Example

- Entry via REDCap
- Analysis SQL via Developer
- Visualization via Zoho

Considerations

- What do you need to collect to drive change?
- What makes data collection / submission for your hospitals/sites?
- How does your data collection process set you up for success with analysis and visualization?
- How can you quickly get data reports/visualization back to your hospital teams to drive change?
Considerations for using the AIM Data Center

**Resources**
- Do you have your own data system?
- Do you have staff who work with data?
- Do you have resources to get them?

**Flexibility**
- Do you have other measures you want to collect in addition to AIM?
- Do you have ways you want to show hospital comparisons/data beyond what AIM offers?
Objective 2: Assuring Facility-Level Data Quality
Strategies to Assure Facility-Level Data Quality

- Share Seamlessly & Steal Shamelessly
- Data Collection Form Testing at Hospitals
- AIM Bundle Data Tools
- Stakeholder Input
- Data Training Calls
Share Seamlessly & Steal Shamelessly: Connect with other PQCs

- Data collection & reporting lessons learned shared
- Learn what other PQCs identify as barriers and strategies to overcome
- Identify how different states defined key variables
Key Stakeholder Feedback on Data Collection

Data collection forms and data definitions can be reviewed by:

- Leadership / collaborators
- Initiative-specific clinical leads
- Monthly Advisory Group Meetings
- "Wave 1" Hospital teams
Key Stakeholder Feedback: ILPQC MNO-OB Examples

MNO-OB Clinical Leads & Advisory Group

- ILPQC worked with MNO-OB clinical leads to clarify and update the MAT data collection question in two ways:
  - Added a variable identifying when MAT was provided to the patient (prenatally or delivery admission)
  - Added a variable identifying why a patient did not get connected to MAT including "patient declined," "Not Indicated," and "Counseling not Provided"

MNO-OB "Wave 1" Teams

Identified Challenges

- Length of the form
- Hard to obtain outpatient information if not seen within our system or prenatal record not integrated with EMR
- Maternal and infant data forms should discrete questions
- Mom and baby data need to link within redcap
- Defining the true target population for the project
  - Maternal history
  - Positive urine toxicology

Data Collection Feedback

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<thead>
<tr>
<th>Obstacles</th>
<th>Suggestions</th>
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<tr>
<td>Time consuming</td>
<td>Restate Question #1 &amp; #18 for clarification</td>
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<tr>
<td>Difficult to find education items</td>
<td>Condense education items (23-25)</td>
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<tr>
<td>Difficult to determine start of MAT for moms</td>
<td>Streamline focus on bringing forth true objective</td>
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<tr>
<td>Rooming in and nonpharmacologic bundle for NAS not specifically documented</td>
<td>Provide clear definition to ensure consistent data collection</td>
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<td>Limited resources for data collection in smaller hospitals</td>
<td>Work with OB offices to develop easy to use screening tool which would trigger treatment plan &amp; education</td>
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After the initiative launch, ILPQC holds a few offerings of “Data Training Webinars” for hospitals to review:

- Data definitions
- Data collection forms
- Answer any FAQs identified in Wave 1
- Discuss baseline (retrospective) and active initiative (prospective) data collection strategies
- Live walkthrough of how to access and enter data into the REDCap data form
Utilize the AIM Data Resources

• AIM Data Collection Plan: descriptions and definitions for bundle required measures for collection
• Activity for consideration: Conduct a crosswalk of the measures/definitions your state collaborative collects and how it aligns with the AIM measures.
• The closer they are in similarity; the less manual data maintenance needs to be conducted to recode!
Using Data to Drive Change

**Initiative Aims**
- Identified at the onset of the initiative, created to be SMART

**Key Drivers**
- Work with Clinical leads to determine Key Drivers to achieve aims and create a Drivers Diagram

**Measures**
- Measures are created for each Key Driver (structure, and/or process and outcome measures)

**Data Reporting**
- Create data forms for hospital teams to track monthly progress on achieving Aims & measures (patient and hospital-level)

**Data System**
- Build the data forms into a data system and reports for hospitals to track monthly process on aims & measures

Discussions with other PQCs to learn about their Aims, Drivers, and Measures
Objective 3: Strategies to Support Persons Responsible for Collecting Facility-Level Data
Supporting Persons Responsible for Data Collection

- Balance Burden Versus Value
- Utilize ICD Coding & Partner with HIT
- Strategies to collect baseline/real time data
- Data Reporting
- Tools to share data with stakeholders
- Celebrate Success

Illinois Perinatal Quality Collaborative
Balancing Burden Versus Value

All Cases

- A data collection definition is created to support hospital teams to acquire patient records for all appropriate cases in a given month
- Hospitals utilize techniques like chart audit & bedside data collection to track data
- Example: % of pregnant persons with OUD linked to MAT prenatally or by delivery discharge

Random Sample

- Strategy to acquire a random sample of all deliveries in a given month without having to have teams audit all charts
- Hospitals select a random sample of 10 charts a month among all of their deliveries to identify a representative sample of their birth volume
- Example: % of sample of all deliveries with documentation of screening for OUD on L&D with a universal validated screening tool
ICD Coding & HIT Partnership

• Utilize AIM resources for ICD coding recommendations to share with hospitals in collaborative – allows for uniform case definition of target population

• **Streamline the chart audit process:** Encourage hospitals to partner with their Health Information & Technology departments to build monthly reports in their EMRs to identify all patients who fit the case definitions

• Encourage hospitals to review the data collection forms with their clinical teams - identify what is already built into the medical record, what requires an EMR build
Strategies to Collect Data

- Work with hospital teams to collect both baseline (retrospective) and active initiative (prospective) data as strategies to collect both may differ.

- Baseline data is collected from the prior year's quarter to represent a point in time before the active initiative was implemented.
  - MNO-OB Baseline (Oct – Dec 2017)
  - MNO-OB Active (July 2018 – December 2020)

MNO-OB Example: Strategies for Monthly Patient-Level Data

- Chart review
- Neonatal logs
- Key word search in EMR
- ICD-10 diagnostic codes
- Pharmacy Logs
- Problem list
- Billing codes
Tools to share data with stakeholders

- **Data Collection**: Hospital teams collect data on structure, process, and outcome measures.
- **Input data into Data System**: Team input into Data System for rapid response of real time data.
- **Review of reports with team during monthly QI meetings**: Team uses data to drive quality improvement at their hospital.
- **Decide next QI steps for team**: Review reports on dashboards, process, and outcome measures to compare data across time and hospitals - opportunity to share with stakeholders.

Team uses data to drive quality improvement at their hospital.

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Celebrate Successes!

ILPQC provides various opportunities for recognition including:

- Outstanding QI Initiative Launch Awards
- QI Data Submission Awards
- QI Poster of Excellence Awards
- QI Excellence Awards (Plaques & Banners)
COVID-19 and QI Fatigue Considerations

During the COVID-19 pandemic there are strategies to support hospital teams with competing priorities including:

- Taking time to have teams step back and share their successes from the previous year and what they are looking forward to in the new year
- Slowing down the pace of discussing new QI strategies and taking time to hear about hospital team implementation of current ones
- Adaptive pauses for data submission
- Raffles for meeting interim data goals

We can support hospital teams find joy in their QI work!
Peer Learning & Participant report-outs: Discussion of Prework Reflections

- What are your data collection goals? For your collaborative? For the hospitals/sites participating in your collaborative?
- What data collection goals do you feel like you are achieving?
- What data collection goals do you feel like you need more help/resources/tools to achieve?
- How can this COL or AIM help?
Next Steps

• 30-60-90 day plan
• Attend office hours February 10, 3-4:30PM EST/ 2-3:30PM CST/
1-2:30PM MST/ 12-1:30PM PST
Thank you

Questions?
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Sponsored by
Report-Outs: Oklahoma and New Mexico
Upcoming Data COL Events and Due Dates
Office Hours: Data Collection Strategies & Tools for Facility-Reported Measures

- For one-on-one technical assistance, please sign up for office hours.
  - Share your questions in advance.
- Date and Time: February 10, 2022 @ 3:00PM-4:30PM (EST)
- Registration Link: https://us02web.zoom.us/meeting/register/tZIpd-usrT8oGdMFXYITyPj4IYw_1LSm29rB
- Registration closes: February 9, 2022 @ 4:00PM (EST)
## Upcoming Educational Offerings

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<th>Educational Offering Data and Time</th>
<th>Guest Speaker/Faculty member</th>
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<tr>
<td>Severe Maternal Morbidity</td>
<td>Session: March 16, 2022 (1:00PM-2:30PM) (EST)</td>
<td>Ashley Hirai, PhD</td>
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<td></td>
<td>Office Hour: March 21, 2022 (2:00PM-3:30PM) (EST)</td>
<td>Laurence Reid, PhD, MPH</td>
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<td>Elliot Main, MD</td>
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The registration links for all the upcoming sessions and office hours has been posted on the [AIM Data Resources Webpage](#).
Any Questions?

aimdatasupport@acog.org

After the meeting ends, please take a moment to fill out a brief survey to share your experience.