

Hospital Quality Improvement Toolkit

Overview

The goal of the toolkit is to improve patient-centered care during the critical postpartum transition from hospital to home. It provides care teams with standardized resources to help deliver better outcomes for birthing people.

Readiness

Goals	Interventions	Resources
Establish a community resource and referral map, reviewed and updated annually	Resource mapping template example Develop a protocol for sharing information and resources with patients	Postpartum Resource Mapping Tool
Establish a multidisciplinary care team to coordinate clinical pathways for patient discharge	Create and facilitate a group that meets at a regular cadence (recommended quarterly) Use a group charter	An Inpatient-Outpatient Care Coordination Workgroup Guide
Develop and implement a standardized discharge summary form	Ensure your facility's current discharge information includes the minimum info recommended by CPCQC	CPCQC Discharge Summary Minimum Requirements

Recognition

Goals	Interventions	Resources
Screening for current or recent pregnancy within 365 days in the Emergency Department	Emergency Department education Develop a protocol for screening Conduct simulations in	Patient-facing signage Educational slides Badge buddies Computer monitor stickers Bathroom signs
Conduct Emergency Department education on life threatening postpartum complications and warning signs (consider OBLS, drills, rural hospital outreach)	partnership with Emergency Department team One page handouts	ACOG handouts, webinars, and guidelines (web link)
Provide universal screenings for Perinatal Mental Health Conditions, Social Determinants of Health, and Intimate Partner Violence	Develop protocol for screening all patients using validated tools Implement protocols for managing positive screens before hospital discharge	Perinatal Mental Health Resources:* Edinburgh Postnatal Depression Scale PHQ-9 Scripting for introducing PMHC screening IPV screenings resources:* HITS Screening Tool Women Abuse Screening Tool Scripting for IPV screening Social Determinants of Health Resources:* PRAPARE

The Accountable Health Communities Health-Related Social Needs Screening Tool
Scripting for SDoH screening
Other:
Other: Script for substance use screening

Response

Goals	Interventions	Resources
Standardize patient education materials on life threatening postpartum complications and postpartum warning signs, including PMHCs	Adopt or develop curated patient education materials on urgent postpartum warning signs that align with culturally and linguistically appropriate standards.	Postpartum warning signs handout (Spanish, Vietnamese, Chinese Mandarin, Chinese Cantonese)
	Implement a workflow for providing patient education and resources before discharge Consider tools such as wallet cards, bracelets, magnets	Postpartum Discharge Education Guide for Nurses
Ensure a postpartum follow up visit is scheduled before hospital discharge or within 1 business day of discharge	Implement a process for ensuring all postpartum patients have a follow up appointment scheduled with their care team prior to discharge or within 1 business day of discharge.	Workflows for scheduling postpartum follow up before hospital discharge

Respectful and Equitable Care

Goals	Interventions	Resources
Include the patient and their support system as part of the multidisciplinary care team	Adopt or develop resources (handouts, videos, websites) tailored specifically to patient's support systems.	Postpartum Guide for Partners and Support People (Spanish, Chinese Mandarin, Vietnamese, Chinese Cantonese)
Include patients as part of your hospital's multidisciplinary workgroup	Recruit a person with lived experience to be part of your facility's quality improvement efforts.	# Family Integration to ReStore T CMS Patient Safety Structural Measure

For additional support, contact qi@cpcqc.org or visit cpcqc.org