



## **Learning Session 1-October 2019**

### **Hosts:**

Kate Remick, MD  
Diana Fendya, MSN (R), RN  
Meredith Rodriguez, PhD  
Krystle Bartley, MA

# ACKNOWLEDGEMENTS

The HRSA, MCHB EIIC is supported in part by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U07MC29829. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

# ACKNOWLEDGEMENTS

This continuing nursing education activity was approved by the Emergency Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation for 1.5 contact hours.

# LEARNING SESSION DISCLOSURES

Note Faculty/Speakers and Planners for this learning session:

Kate Remick, MD

Diana Fendya, MSN (R), RN

Meredith Rodriguez, PhD

Krystle Bartley, MA

have no conflicts of interest. Additionally, no commercial support has been received for this activity.

Should participants detect any bias in this presentation please note such on the evaluation or reach out to Diana Fendya, nurse planner for continuing education.

# TO OBTAIN NURSING CEs

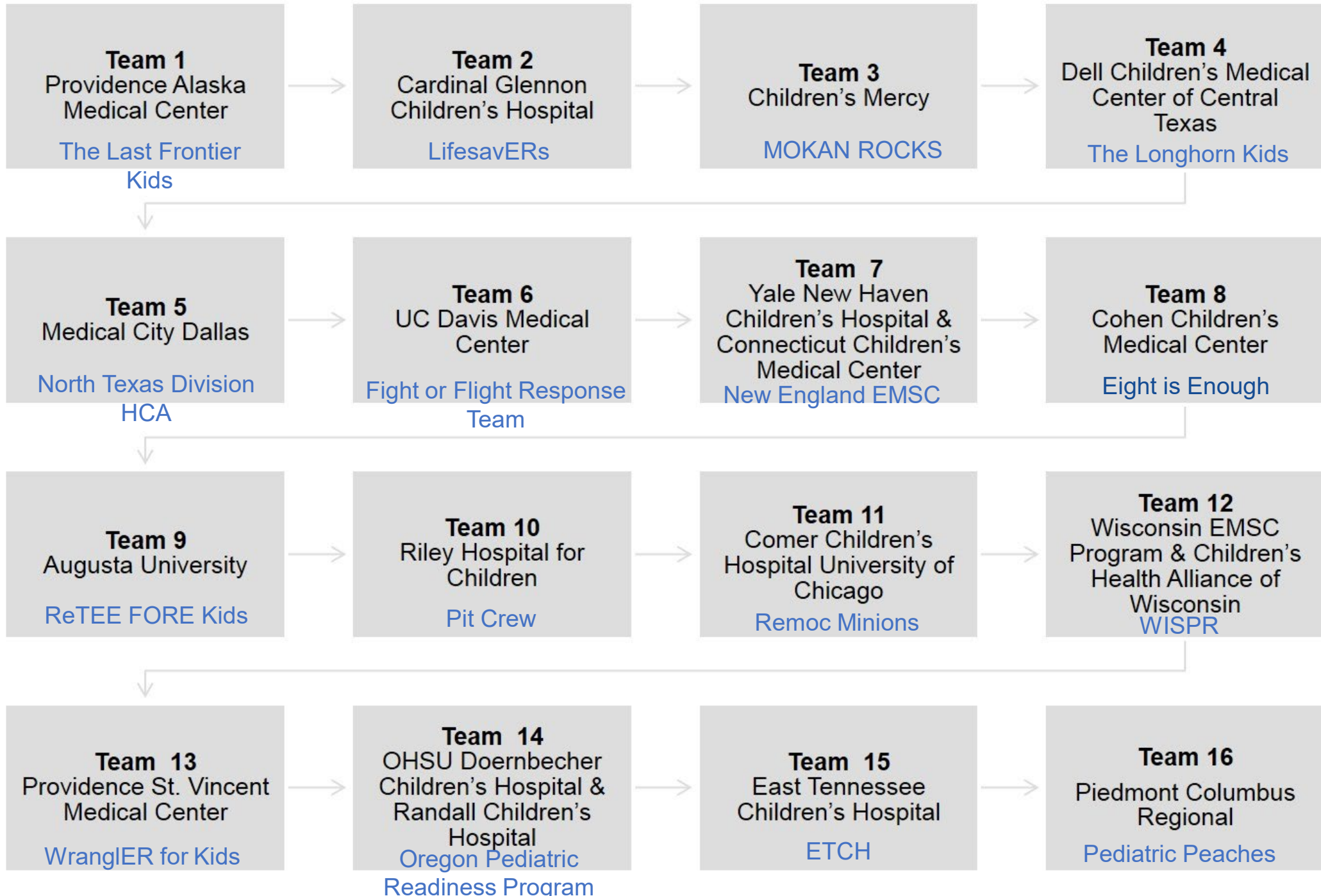
- Sign into the webinar: name, email address and name of your facility.
- At the completion of the presentation a link will be provided which will take you to a short evaluation form which you will need to complete.
- The evaluation must be completed within 2 weeks:  
<https://tch-redcap.texaschildrens.org/REDCap/surveys/?s=C3CHENDRY8>
- Within 48 hours of receiving your evaluation, your certificate will be sent to you electronically.





# MEMBERSHIP

- Subject Matter Experts
- Advisory Committee
- NEDARC
- EIC
- HRSA



# AGENDA

## 1-OCTOBER 2019 LEARNING SESSION



**State of the Collaborative – 10”**  
Meredith Rodriguez



**Step x Step Guide: PRQC Data – 45”**  
PRQC Admin Team & NEDARC



**PDSA Cycle Timeline – 5”**  
Kate Remick



**Aggregate Performance – 10”**  
Kate Remick



**Housekeeping – 5”**  
Meredith Rodriguez



# STATE OF THE COLLABORATIVE

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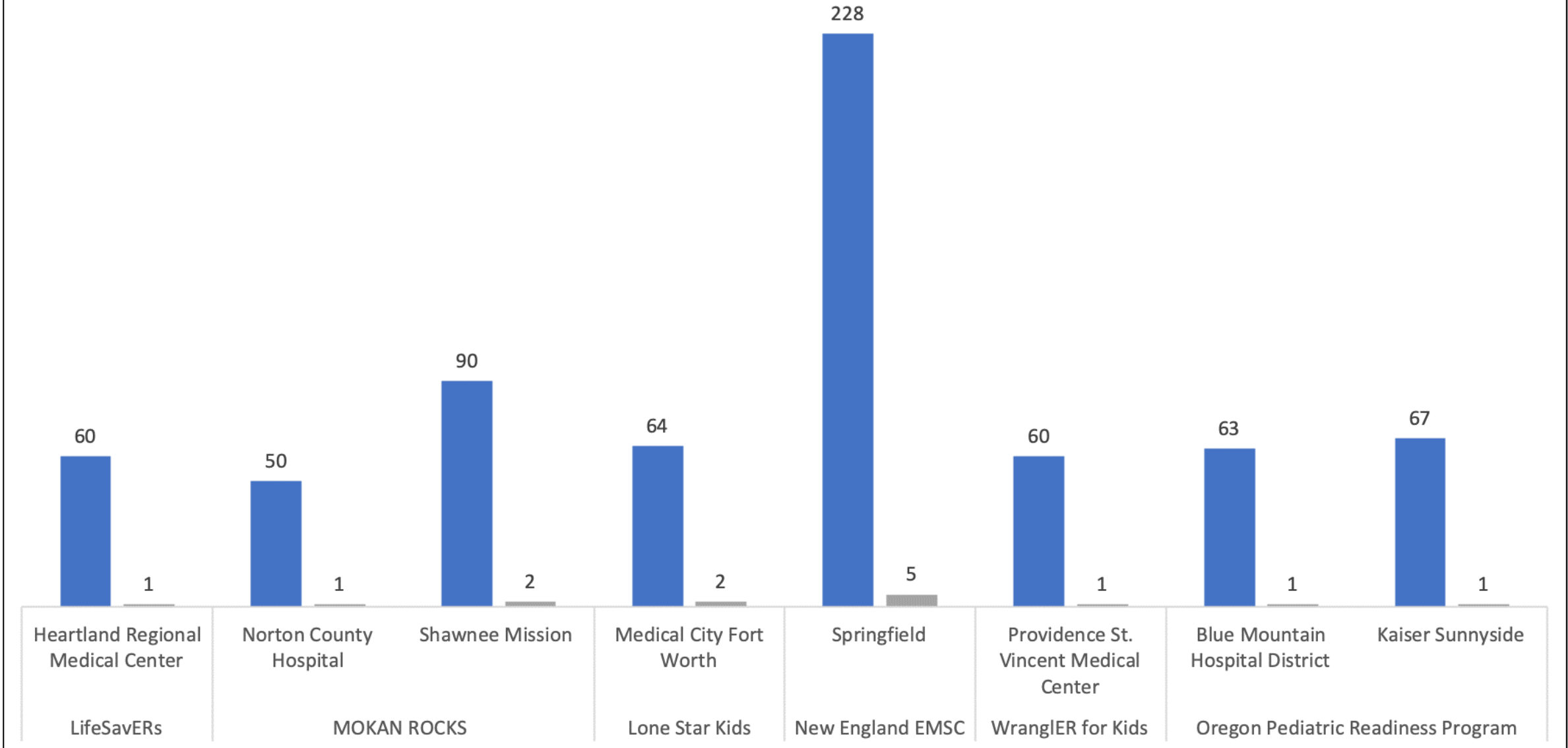
# State of the Collaborative

- 127 fully executed DUAs
- Total # completed NPRP Assessments: 122
- Total # completed environmental scan: 72
- Total # participating in the DES: 61

# Leaderboard: Weight in Kilograms

September 30, 2019

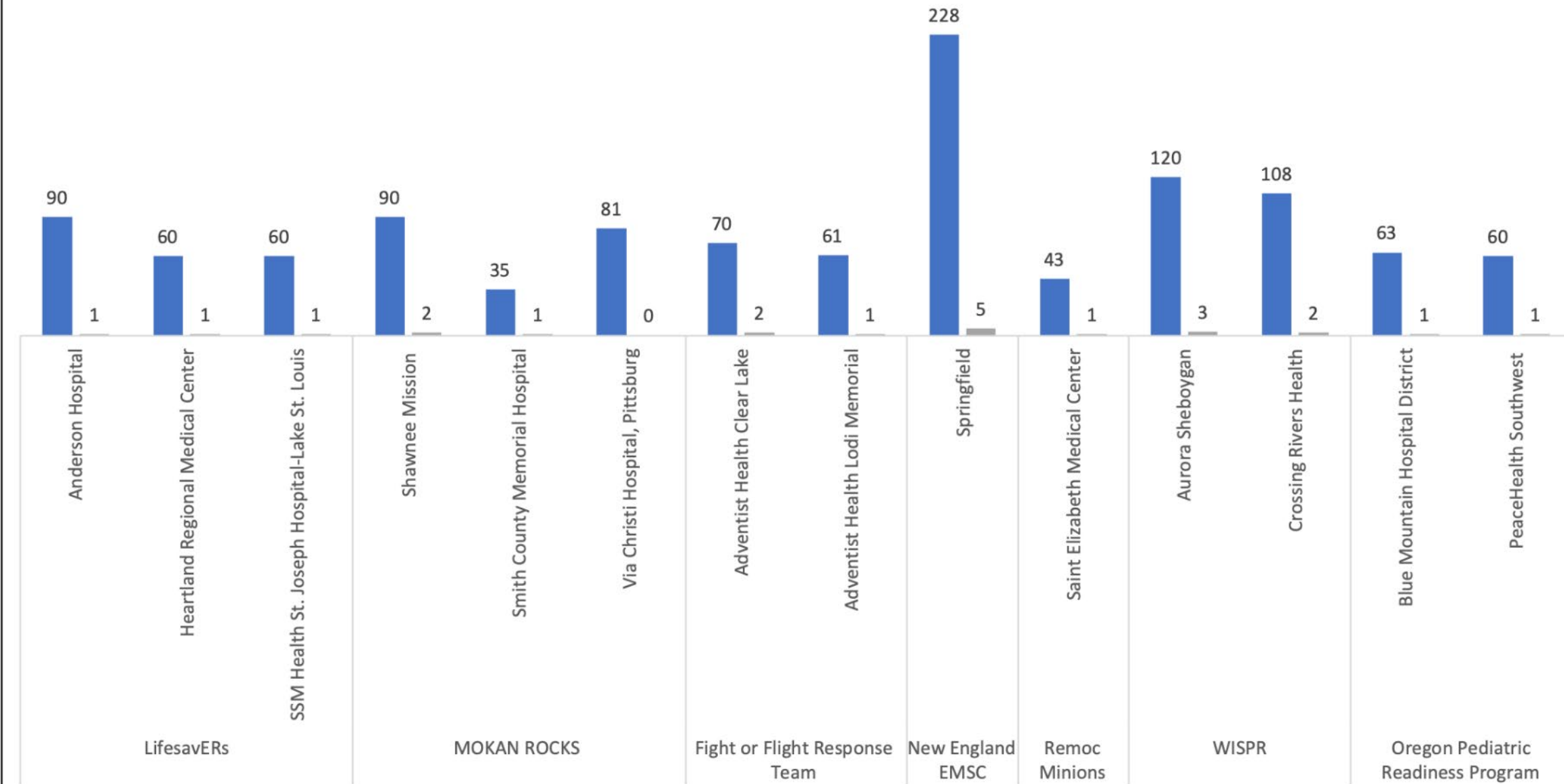
■ Charts Entered (n) ■ PDSA Cycle



# Leaderboard: Abnormal Vital Signs

September 30, 2019

■ Charts Entered (n) ■ PDSA Cycle



LifesavERs

MOKAN ROCKS

Fight or Flight Response Team

New England EMSC

Remoc Minions

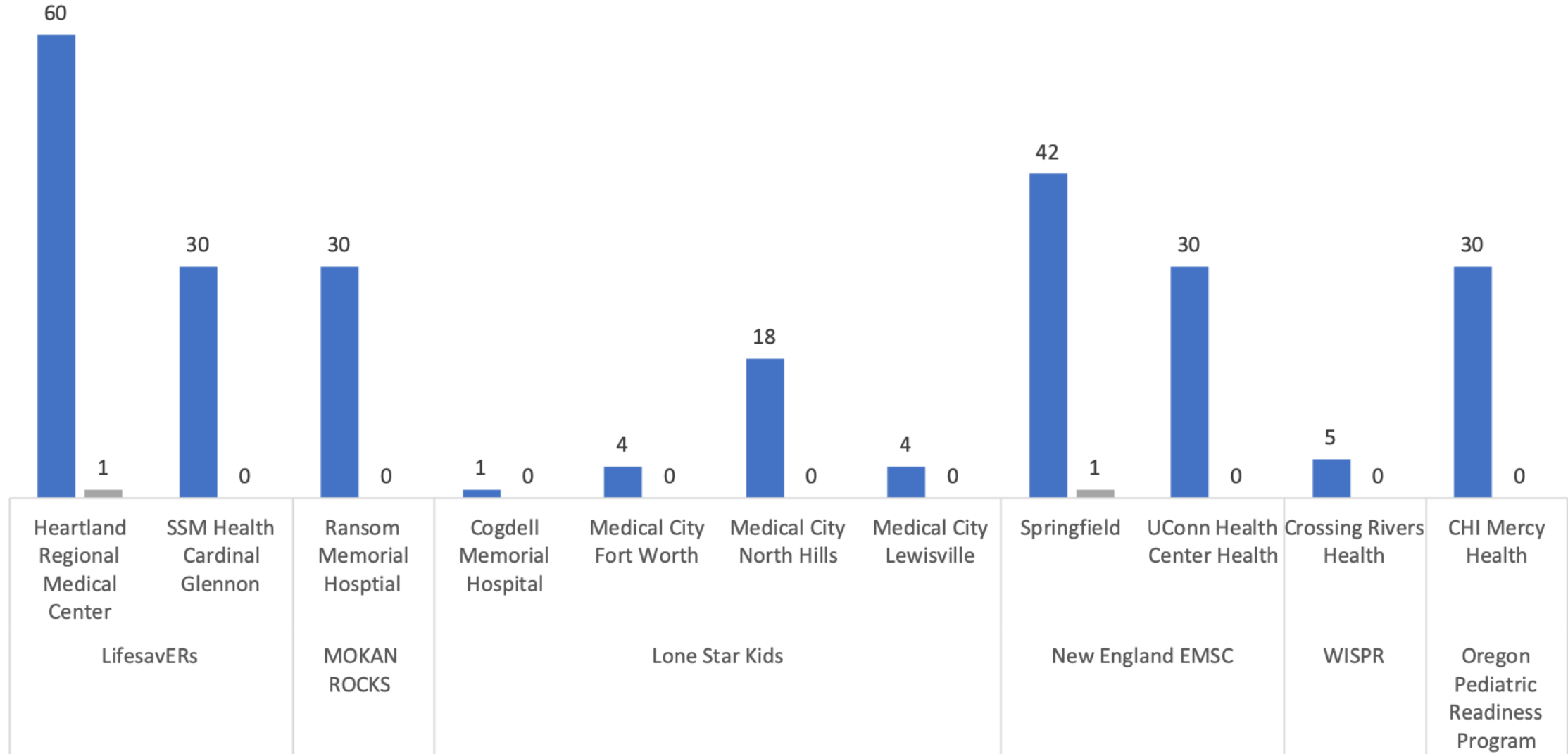
WISPR

Oregon Pediatric Readiness Program

# Leaderboard: Inter-Facility Transfer

September 30, 2019

■ Charts Entered (n) ■ PDSA Cycle



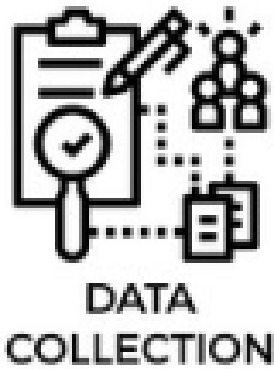
# Sites with **Baseline** Data Only

1	The Last Frontier Kids	Providence Alaska Medical Center
1	The Last Frontier Kids	Providence Seward Medical Center
2	LifesavERs	SSM Health - DePaul Hospital
2	LifesavERs	SSM Health Cardinal Glennon Childrens Hospital
3	MOKAN ROCKS	McPherson Hospital
3	MOKAN ROCKS	Ransom Memorial Health
3	MOKAN ROCKS	Trego County Lemke Memorial Hospital
3	MOKAN ROCKS	Via Christi Hospital, Pittsburg
5	Lone Star Kids	Cogdell Memorial Hospital
5	Lone Star Kids	Medical City Dallas
5	Lone Star Kids	Medical City Denton
5	Lone Star Kids	Medical City Flower Mound
5	Lone Star Kids	Medical City Las Colinas
5	Lone Star Kids	Medical City Lewisville
5	Lone Star Kids	Medical City North Hills
5	Lone Star Kids	Medical City Plano
6	Fight or Flight Response Team	Enloe Medical Center
6	Fight or Flight Response Team	Fairchild Medical Center
7	New England EMSC	Greenwich Hospital
7	New England EMSC	Hospital of Central Connecticut
7	New England EMSC	Saint Mary's Hospital
7	New England EMSC	University of Connecticut Health Center Health
7	New England EMSC	Yale New Haven Children's Hospital

10	Pediatric Pit Crew	Witham Health
11	Remoc Minions	Advocate Good Shepherd Hospital
12	WISPR	Ascension Franklin
12	WISPR	Mile Bluff Medical Center
12	WISPR	Sauk Prairie Hospital
12	WISPR	Southwest Health
12	WISPR	UnityPoint Health Meriter
13	Wrangler for Kids	Providence Hood River Memorial Hospital
13	Wrangler for Kids	Providence Milwaukie Hospital
13	Wrangler for Kids	Providence Newberg Medical Center
13	Wrangler for Kids	Providence Portland Medical Center
13	Wrangler for Kids	Providence Seaside Hospital
13	Wrangler for Kids	Providence Willamette Falls Medical Center
14	Oregon Pediatric Readiness Program	Adventist Medical Center - Portland
14	Oregon Pediatric Readiness Program	CHI Mercy Health
14	Oregon Pediatric Readiness Program	Legacy Silverton Medical Center
14	Oregon Pediatric Readiness Program	Tuality Healthcare
15	ETCH	East Tennessee Children's Hospital

# Sites **On Track** with PDSA Cycles

2	LifesavERs	Anderson Hospital
2	LifesavERs	Heartland Regional Medical Center
2	LifesavERs	SSM Health - St. Joseph Hospital - Lake St. Louis
3	MOKAN ROCKS	Norton County Hospital
3	MOKAN ROCKS	Shawnee Mission Medical Center
3	MOKAN ROCKS	Smith County Memorial Hospital
5	Lone Star Kids	Medical City Fort Worth
6	Fight or Flight Response Team	Adventist Health Clear Lake Medical Center
6	Fight or Flight Response Team	Adventist Health Lodi Memorial
7	New England EMSC	Springfield Hospital
8	Eight is Enough	Cohen Childrens Medical Center
11	Remoc Minions	Saint Elizabeth Medical Center
12	WISPR	Aurora Sheboygan Memorial Medical Center
12	WISPR	Crossing Rivers Health
12	WISPR	Mercy Health System and Trauma Center - Janesville
13	Wrangler for Kids	Providence Medford Medical Center
13	Wrangler for Kids	Providence St. Vincent Medical Center
14	Oregon Pediatric Readiness Program	Blue Mountain Hospital District
14	Oregon Pediatric Readiness Program	Kaiser Sunnyside Medical Center
14	Oregon Pediatric Readiness Program	PeaceHealth Southwest Medical Center



# Step x Step Guide: Baseline through First PDSA Cycle

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### Prep for QI Efforts

- NPRP Assessment
- Environmental Scan
- Confirm QI and Data Stewards
- Intervention Bundle Guides
- Sampling Strategy
- Login to Data Entry System

### Prep for Data Entry

- Pull/Review relevant policies
- Pull/Identify initial patient records
- Review patient charts to identify variables
- Create spreadsheet to link MRN to DES record numbers

### Enter Baseline Data

- Site-level data
- Activate bundle, date for baseline
- Enter patient records
- Log MRN & record number
- Close out after 30 charts minimum

### Enter PDSA Cycle 1 Data

- Activate PDSA cycle (start date)
- Implement change strategy
- Collect patient records (sampling)
- Enter patient records into DES
- Log MRN to record number on spreadsheet

### Plan Next Steps: PDSA Cycle 1

- Gather internal team
- Discuss performance
- Create aim statement
- Review possible change strategies
- Choose first change/intervention
- Develop necessary tools/resources/education

### Interpret Baseline Performance

- Review dashboard
- Note performance for process and outcome metrics
- Benchmark performance to other sites

### Review Performance and Monitor for Improvement

- Re-visit dashboard and run chart regularly
- Evaluate for shifts/trends/steady state
- Consider aim statement
- Review performance with internal team
- Decide when to close cycle and implement next change strategy

### Plan Next Steps: PDSA Cycle 2

- Gather internal team
- Review aim statement and performance
- Review possible change strategies
- Choose next change/intervention
- Develop necessary tools/resources/education

### Enter PDSA Cycle 2 Data ... and so on





### Prep for QI Efforts

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### Enter PDSA Cycle 2 Data ... and so on



# Prep for QI Efforts

## NPRP Assessment

<http://www.pedsready.org/>

## Environmental Scan

<https://tch-redcap.texaschildrens.org/REDCap/surveys/?s=CLK37DTARD>

## QI and Data Stewards

<https://tch-redcap.texaschildrens.org/REDCap/surveys/?s=CXELJK8ECF>

## Intervention Bundle Guides

<https://emscimprovement.center/collaboratives/prqc/members/intervention-bundles/>

Password: EMSCPRQC

## Select Sampling Strategy

<https://emscimprovement.center/collaboratives/prqc/members/data/qi-education/>

Section: Planning Your 1<sup>st</sup> PDSA Cycle

Slides 16-20

## Login to Data Entry System

Password Reset: <https://reset.utah.dcc.org>

The screenshot shows a web-based survey form titled "PRQC: Environmental Scan". At the top right, there is a "Resize Form" option with a plus sign icon. Below the title, a note states: "All data-contributing sites must complete the environmental scan which covers aspects of all four intervention bundles." The form contains several input fields, each with a red asterisk and the text "\* must provide value":

- Respondent Name**: A text input field.
- Respondent Email**: A text input field.
- State**: A dropdown menu.
- Hospital Name**: A dropdown menu.

Below these fields are two sections of questions:

- Bundle 1 - Weight in Kilograms**:
  - Question: "Does your Emergency Department have a scale that weighs in pounds and kilos?" with radio buttons for "Yes" and "No". A "reset" link is to the right.
  - Question: "Do you have a policy that defines frequency for assuring your scale is locked in kilograms?" with radio buttons for "Yes" and "No". A "reset" link is to the right.
- Bundle 2 - Abnormal Vital Signs**: A section header with "TRIAGE DETAILS" below it.

# Data Sampling

Technique	Definition	Advantages	Disadvantages
Random	Sample randomly selected	Likely to include all subgroups	Requires large sample size otherwise high likelihood of error
Stratified	Specific subgroup selected	Subgroups represented	Must know subgroups, can be complicated to apply
Systematic	Inclusion of every Nth patient	Time efficient	Can cause bias if periodicity exists
Judgement	Sampling done based on judgement of team lead	Time efficient	Personal bias, not representative
Quota	Sample selected based on numbers alone	Easy, reliable	Sampling error
Convenience	No requirements or stratification	Simple and easy	Selection bias and sampling error

## Data Collection: Scale and Scope

- Aim for 30 charts per cycle
- Inclusion and exclusion criteria:
  - Pediatric patients\*\*\*
  - Bundle 1 – All pediatric patient encounters
  - Bundle 2 – Consider higher triage levels (i.e. 1-3), those with abnormal vital signs
  - Bundle 3 – Transferred patients
  - Bundle 4 – Drills only

\*\*\*As defined by your institution

# Login Data Entry System

PRQC | WorkBench v.1

https://prqc.org/Login.aspx?ReturnUrl=%2f

Pulse Adobe Connect Centr... ACS Gatewau X Checkbox® Survey PedsIntranet\_Home\_P... Tableau Server Box | Login

**National PRQC**  
Pediatric Readiness Quality Collaborative  
Ensuring Emergency Care For All Children

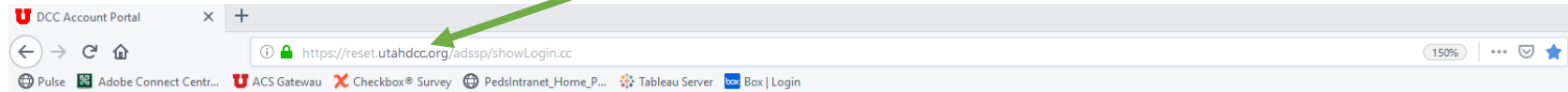
**Username**

**Password**

Login

# Password Reset

<https://reset.utah.dcc.org>



DATA COORDINATING CENTER



**Reset Password**

Reset your forgotten password

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[Need Help?](#)

[Passwords must follow these Security Guidelines](#)

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### Enter PDSA Cycle 2 Data ... and so on



# Review Patient Charts to Identify Variables

Patient 1: 20190001

## ED Triage Assessment

Physician Information		Vital Signs		Additional Info		
<b>Chief Complaint:</b>	CHI VOMITING	<b>Temp R:</b>	97.9	<b>Level of Consciousness:</b>	Alert	
<b>Recent Travel Location Time Frame:</b>	No recent travel	<b>Pulse:</b>	129		<b>Orientation:</b>	Not applicable due to age, Identifies parents
<b>HPI/MOI:</b>	Slipped and fell while in tub @2230, denies LOC but vomiting x2 since, minor LAC above R eye below eyebrow	<b>Respirations:</b>	36			<b>Respiratory Status:</b>
<b>Immunizations Current:</b>	Yes	<b>Blood Pressure:</b>	115/65		<b>Capillary Refill:</b>	
<b>Tracking Acuity:</b>	3 - Urgent	<b>Oxygen Therapy:</b>	Room air			<b>Mucous Membrane Color:</b>
<b>Pregnancy Status:</b>	Prenatal	<b>SpO2 sat/Flow Rate:</b>	98% L/min		<b>Mucous Membrane Description:</b>	
<b>LMP:</b>	10/12/09	<b>Home Medications [ 2 ]</b>		<b>Coma Scale</b>		
<b>Treatments Prior To Arrival:</b>	Other: Cefdinir 1900	<b>acetaminophen (acetaminophen 160 mg/5 mL oral liquid)</b>	3 mL, PO (oral), q6h, PRN for fever, 90 mL, 0, 0, 15mg/kg/dose	<b>Pediatric Coma Scale</b>		
<b>Additional Info</b>		<b>ibuprofen (ibuprofen 100 mg/5 mL oral suspension.)</b>	3.5 mL, PO (oral), q6h, PRN for fever, 90 mL, 0, 0, 10mg/kg/dose	<b>Eye Opening Response:</b>	Spontaneously	
<b>Allergies</b>		<b>Pain</b>		<b>Best Verbal Response:</b>	Coos and babbles, age appropriate verbal	
<b>Allergy 1:</b>	penicillins	<b>Pain Interventions/Comfort Measures:</b>	Caregiver/Parent Present	<b>Best Motor Response:</b>	Spontaneous, purposeful	
<b>Additional Info</b>		<b>Pain Intervention Effectiveness:</b>		<b>Pediatric Coma Score:</b>	15	
<b>Allergy History:</b>	Reviewed/Updated this visit	<b>Pain Evaluation Comments &amp;/or Notes:</b>		<b>General</b>		
<b>Has PT been told of latex Allergy?:</b>	Unknown	<b>Primary Pain</b>		<b>Exposure to Tobacco Smoke:</b>	None	
<b>Health History</b>		<b>Intensity (0-10 Scale):</b>	7	<b>Patient Smoking Status:</b>	N/A	
<b>Health History:</b>	Reviewed with patient/guardian	<b>Primary Pain Location:</b>	Pelvis	<b>Mode of Arrival:</b>	Private vehicle	
<b>Previous Illness/Hospitalizations</b>		<b>Pain Location Detail:</b>	Anterior	<b>Abuse/Neglect:</b>	No	
<b>Family Health History/Family Previous Surgeries/Procedure</b>		<b>Additional Info</b>		<b>Assessment</b>		
<b>Date</b>	<b>Description</b>	<b>FLACC</b>		<b>Gen'l Asmt Interventions/Note:</b>	Emesis at 0300 and 0500, acting baseline per parents, easy	
<b>Medical Devices:</b>		<b>Pain Score Total (0-10 Scale):</b>	2			



Quick View	9/28/2019 6:37 CDT	9/28/2019 6:13 CDT	9/28/2019 6:05 CDT
<b>Weight</b>			
Dosing Weight (kg)		8.570 *	
Measured Weight (kg)			8.57
<b>Vital Signs</b>			
Temperature Rectal (DegF)			97.9
Temperature Rectal (DegC)			36.6
Peripheral Pulse Rate			129
Respiratory Rate			36
Systolic Blood Pressure			115 (!)
Diastolic Blood Pressure			65
Mean Arterial Pressure			81.7
<b>Oxygenation</b>			
Oxygen Saturation			98
Oxygen Delivery Method			Room air
<b>Pain Scale Scores</b>			
FLACC Pain Score Total	0		2
<b>Pain Assessment Details</b>			
Pain Interventions/Comfort Measures	Caregiver/Parent		Caregiver/Parent
<b>Visit Information</b>			
Hx of Present Illness/Mech of Inj/Onset			Slipped and fell w
Abuse/Neglect Screen			No
Mode of Arrival, ED			Private vehicle
Pediatric Immunizations Current			Yes
<b>Triage Information</b>			
Treatments Prior to Arrival			Other: Cefdinir 15
<b>EVENT TRACKING</b>			
Tracking Acuity			3 - Urgent
Tracking Group			DC ED Track Gro
Visit Reason			CHI VOMITING
<b>Infectious Disease Risk Screening</b>			
Recent Travel History			No recent travel

ED Triage Assessment

Patient 2: 20190002

Physician Information		Vital Signs	
<b>Chief Complaint:</b>	Pos BLD Culture	<b>Triage</b>	
<b>Recent Travel Location Time Frame:</b>	No recent travel	<b>Temp R:</b>	98.3
<b>HPI/MOI:</b>	Here yesterday, call back for positive blood cultures	<b>Pulse:</b>	115
<b>Immunizations Current:</b>	No	<b>Respirations:</b>	36
<b>Tracking Acuity:</b>	3 - Urgent	<b>Blood Pressure:</b>	96/65
<b>Treatments Prior To Arrival:</b>	None	<b>Oxygen Therapy:</b>	Room air
+ <b>Additional Info</b>		<b>O2 sat/Flow Rate:</b>	100% L/min
		+ <b>Additional Info</b>	
Allergies		Home Medications [ 0 ]	
<b>Allergy 1:</b>	NKA	<b>No documentation</b>	
+ <b>Additional Info</b>		+ <b>Additional Info</b>	
Health History		Pain	
<b>Health History:</b>	Reviewed with patient/guardian	<b>Pain Interventions/Comfort Measures:</b>	Caregiver/Parent Present
<b>Previous Illness/Hospitalizations</b>		<b>Pain Intervention Effectiveness:</b>	
<b>Family Health History</b>		<b>Pain Evaluation Comments &amp;/or Notes:</b>	
<b>Previous Surgeries</b>			
<b>Date</b>	<b>Description</b>		
<b>Medical Devices:</b>			
Assessment		NIPS (Newborn Pain)	
<b>Gen'l Asmt Interventions/Note:</b>	No fever since discharge	<b>NIPS Pain Score Total (0 - 7 Scale):</b>	0
<b>Level of Consciousness:</b>	Sleeping	+ <b>Additional Info</b>	
<b>Orientation:</b>	Not applicable due to age		
<b>Respiratory Status:</b>	No distress		
<b>Capillary Refill:</b>	Less than/equal to 3 seconds		
<b>Mucous Membrane Color:</b>	Pink		
<b>Mucous Membrane Description:</b>	Moist		

- Pediatric Coma Scale	
<b>Eye Opening Response:</b>	Spontaneously
<b>Best Verbal Response:</b>	Coos and babbles, age appropriate verbal
<b>Best Motor Response:</b>	Spontaneous, purposeful
<b>Pediatric Coma Score:</b>	15

- General	
<b>Patient Smoking Status:</b>	N/A
<b>Mode of Arrival:</b>	Private vehicle
<b>Abuse/Neglect:</b>	No

Quick View	9/28/2019 3:17 CDT	9/27/2019 4:49 CDT	9/27/2019 4:19 CDT	9/27/2019 3:43 CDT
<b>Vital Signs Details</b>				
<b>Oxygenation</b>				
Oxygen Saturation	100		99	
Oxygen Delivery Method	Room air		Room air	
<b>Pain Scale Scores</b>				
NIPS Pain Score Total	0			
<b>Pain Assessment Details</b>				
Pain Interventions/Comfort Measures	Caregiver/Parent			
<b>Visit Information</b>				
Hx of Present Illness/Mech of Inj/Onset	Here yesterday, c			
Abuse/Neglect Screen	No			
Mode of Arrival, ED	Private vehicle			
Accompanied by		Parent		
Pediatric Immunizations Current	No			
Reason for Missing Immunizations	Other: Only Hep			
<b>Triage Information</b>				
Treatments Prior to Arrival	None			
<b>EVENT TRACKING</b>				
Tracking Acuity	3 - Urgent			
Tracking Group	DC ED Track Gro			
Visit Reason	POS BLOOD CUL			
<b>Infectious Disease Risk Screening</b>				
Recent Travel History	No recent travel			

Medications	9/28/2019 6:10 CDT
<b>Scheduled</b>	
<b>cefTRIAxone (Rocephin)</b>	
565 mg IV Piggyback Once Indication: Other Bacteremia Stop date: 09/28/19 6:00:00 CDT, Form: Injection Target Dose: Rocephin 75 mg/kg (Actual Dose: ...	
cefTRIAxone	565 mg Auth
Injectable Med Waste-mg	

# Tracking Patient Record Number


PRQC Data Entry System - User's Guide Home

Created by Sean Green, last modified by Patricia Schmuhl on Jan 23, 2019

## This is the Official Pediatric Readiness Quality Collaborative Data Entry System - User's Guide

The **purpose** of this website (WIKI) is to serve as a **User's Guide to the Data Entry System** for Affiliate and Training Hospital Sites. Here you will find the information you need to get up and running with the PRQC Data Entry System.

**Simply use the navigation bar on the left hand side of this site in order to find the information you are looking for.**



**National PRQC**  
Pediatric Readiness Quality Collaborative  
Ensuring Emergency Care for All Children

The PRQC is a two-year, grassroots initiative, focused on frontline providers in participating emergency departments. The collaborative will run through **December 2019**. Sixteen teams consisting of several affiliate hospitals will collaborate to improve their pediatric readiness and overall capacity to provide pediatric emergency care.

Teams consist of a training site (Comprehensive Medical Center or Children's Hospital) and a group of affiliate sites representing urban, suburban, rural, and frontier emergency departments. The collaborative teams are geographically spread across the United States. Champions from the participating emergency departments will be provided resources, tools, quality improvement education, strategies, and metrics that will assist in improving pediatric readiness in their respective emergency departments. Participating facilities will work on any of four interventions based on gaps identified during the 2013 National Pediatric Readiness Assessment.

# Tracking Patient Record Number

enter (DCC) - Wiki Spaces

Dashboard

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patient record log

110 search results. Have an account? [Log in](#) to expand your search. [Search tips](#)

- PRQC **Patient Record Log.xlsx**  
PRQC Data Entry System / ... / The Workbench Feb 28, 2019
- PRQC **Patient Record Log.xlsx**  
PRQC Data Entry System / ... / Single Bundle Data Entry Feb 28, 2019
- CCDP Manual of Operations v1.06.10 13 Feb 15 - Data Management...  
CPCCRN Core Data Project / ... / CCDP Submission Specifications Mar 06, 2015 submission. The following tips may help you prepare for this study: 1. Familiarize yourself with PICU charts, forms, computer **records**, and
- Removing a **Record**  
PRQC Data Entry System Mar 11, 2019  
would like to remove. Verify that the **record** you'd like to remove matches the system **patient record** number AND your **patient record**
- PCDP MOO 2014 Study Management.pdf  
PECARN Core Data Project / ... / PCDP Data Submission Specifications Aug 27, 2... tips may help you prepare for this study: 1. Familiarize yourself with the Emergency Department charts, forms, computer **records**, and **patient**
- CCDP Manual of Operations v1.06.10 3 Feb 15.pdf  
CPCCRN Core Data Project / ... / CCDP Submission Specifications Feb 05, 2015 . Familiarize yourself with PICU charts, forms, computer **records**, and **patient logs**. Identify where the required data elements can be found.
- CCDP Manual of Operations v1.06.10 13 Feb 15.pdf  
CPCCRN Core Data Project / ... / CCDP Submission Specifications Feb 13, 2015 . Familiarize yourself with PICU charts, forms, computer **records**, and

# Tracking Patient Record Number

PRQC Patient Record Log.xlsx [Read-Only] - Excel

PRQC Data Entry System Patient Number Matching Log						
PDSA Cycle / Cycle Start Date	Data Entry System Patient Record Num	Our Hospital Patient Record Num	Date Bundle 1 Data Entered	Date Bundle 2 Data Entered	Date Bundle 3 Data Entered	Date Data Entry Completed
Baseline (11/28/2018)	620181130111521	1234567890	1/28/2019	N/A	IP	IP

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- Intervention Bundle Guides
- Sampling Strategy
- Login to Data Entry System

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- Close out after 30 charts minimum

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### Plan Next Steps: PDSA Cycle 1

- Gather internal team
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- Develop necessary tools/resources/education

### Interpret Baseline Performance

- Review dashboard
- Note performance for process and outcome metrics
- Benchmark performance to other sites

### Review Performance and Monitor for Improvement

- Re-visit dashboard and run chart regularly
- Evaluate for shifts/trends/steady state
- Consider aim statement
- Review performance with internal team
- Decide when to close cycle and implement next change strategy

### Plan Next Steps: PDSA Cycle 2

- Gather internal team
- Review aim statement and performance
- Review possible change strategies
- Choose next change/intervention
- Develop necessary tools/resources/education

### Enter PDSA Cycle 2 Data ... and so on



# Baseline Data Entry- Live Demonstration

- Entering baseline data
- Closing out baseline data



# Interpret Baseline Data

PRQC | WorkBench v.1

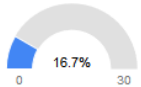
https://prqc.org/Workbench.aspx

PRQC National  
Pediatric Readiness Quality Collaborative  
Ensuring Emergency Care for All Children

Select Site: Medical City Fort Worth

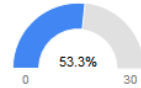
PRQC Dashboards Bundle REDCap PRQC User's Guide Logout

**Bundle 1 : Cycle Active**  
\* PDSA Cycle : 2



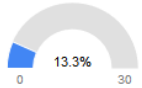
0 16.7% 30

**Bundle 2 : Baseline Active**  
\* PDSA Cycle :



0 53.3% 30

**Bundle 3 : Baseline Active**  
\* PDSA Cycle :

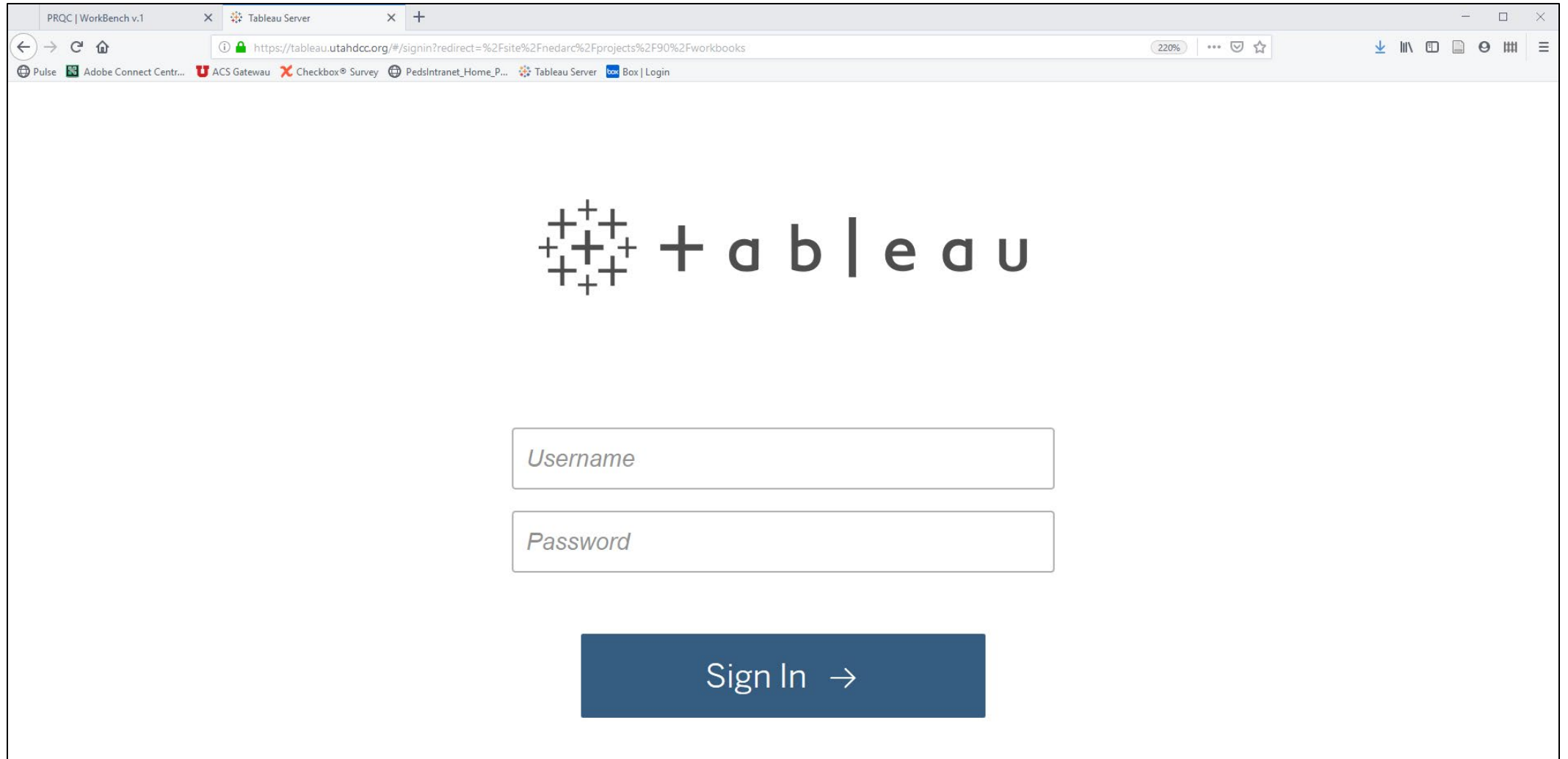


0 13.3% 30

**Active Records**

WorkBenchId	System Patient Record Number	Bundle 1	Bundle 2	Bundle 3	Go to Record
2767	612019912134016	CLOSED	BASELINE	NOT USED	<a href="#">➔</a>
2765	612019912133358	CLOSED	BASELINE	NOT USED	<a href="#">➔</a>
2764	612019912132659	CLOSED	BASELINE	NOT USED	<a href="#">➔</a>
1809	61201971984821	PDSA CYCLE # 2	NOT USED	NOT USED	<a href="#">➔</a>

# Interpret Baseline Data



# Interpret Baseline Data

The screenshot shows a web browser window with the Tableau interface. The browser's address bar displays the URL: <https://tableau.utahdccc.org/#/site/nedarc/projects/90/workbooks>. The Tableau header includes the logo, a search bar, and navigation links for Home, PRQC, and other project-related items. Below the header, there are tabs for 'Projects 0', 'Workbooks 3', 'Views 5', 'Data sources 0', and 'Details'. The main content area shows a list of workbooks. Two workbooks are visible:

- B(1-3) PRQC Overall Process/Out...**: 460 views, 0 stars. The thumbnail shows a table titled 'Overall Process/Outcome Measures Information' with columns for 'Measure Name', 'Type of Measure', 'Number of Outcomes', 'Number of Outcomes', and 'Measure Name'. The table contains data for 'Project & Outcomes' and 'Measure Name'.
- B4 PRQC Overall Structural/Proc...**: 114 views, 0 stars. The thumbnail shows a table titled 'Overall Structural & Process Measures Information' with columns for 'Measure Name', 'Type of Measure', 'Number of Outcomes', 'Number of Outcomes', and 'Measure Name'. The table contains data for 'Public System' and 'Overall'.

# Interpret Baseline Data

PRQC | WorkBench v.1    B(1-3) PRQC Overall Process/Outcome Measures Infor...

https://tableau.utahdccc.org/#/site/nedarc/workbooks/326/views    120%

Home / PRQC / B(1-3) PRQC Overall Process/Outcome Measures Infor...

## B(1-3) PRQC Overall Process/Outco...

WORKBOOK • By Harshan Nagulapally • 460 views • ☆ 0 • Extract: Sep 30, 2019, 7:35 AM

Views 2    Data sources 3    Refresh Schedules 1    Subscriptions 0    Details

▼ 0 items selected    Sort by Sheet (First–Last)

**Process and Outcome Measures**

Intervention Burden	Size of Data Participating	Total # of Data Entered	Measures in Name	
Weight in Kilograms	14	1	402	<ul style="list-style-type: none"> <li>WKG - % of Being Entered</li> <li>WKG - % with Weights Documented in Data Entry</li> <li>WKG - % of Objects with Standard Units</li> <li>WKG - % of Objects with Standard Units Entered in Configuration or Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Configuration</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> </ul>
Revised Data Entry	20	2	800	<ul style="list-style-type: none"> <li>WKG - % of Being Entered</li> <li>WKG - % with Weights Documented in Data Entry</li> <li>WKG - % of Objects with Standard Units</li> <li>WKG - % of Objects with Standard Units Entered in Configuration or Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Configuration</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> <li>WKG - % of Objects with Standard Units Entered in Data Entry</li> </ul>

**PDSA Metrics**

PDSA Metrics for All in All

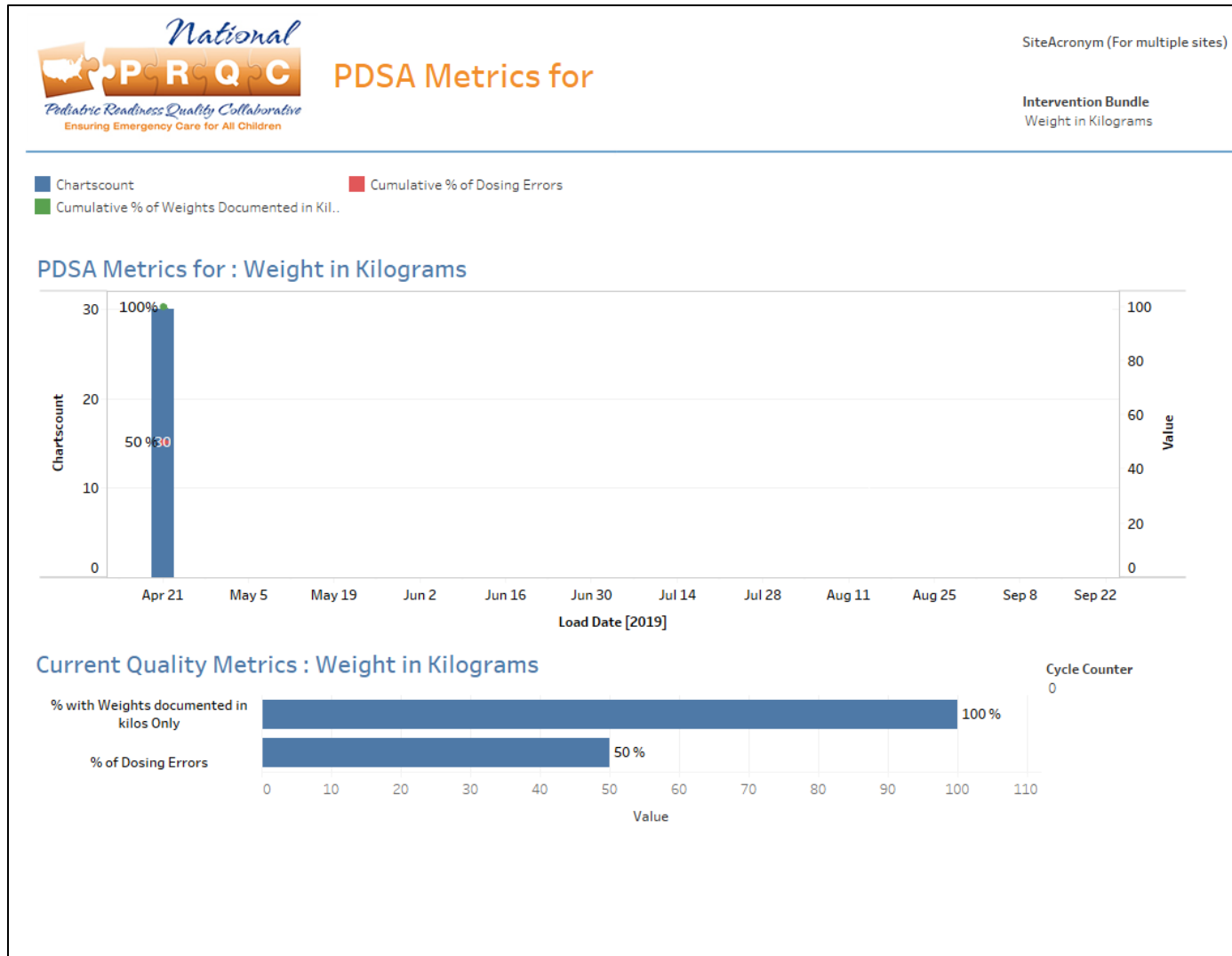
Current Quality Metrics : Weight in Kilograms

% with Weights Documented in

Process and Outcome Measures  
318 views    ☆ 0

PDSA Metrics  
142 views    ☆ 0

# Interpret Baseline Data



### Prep for QI Efforts

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### Plan Next Steps: PDSA Cycle 2

- Gather internal team
- Review aim statement and performance
- Review possible change strategies
- Choose next change/intervention
- Develop necessary tools/resources/education

### Enter PDSA Cycle 2 Data ... and so on

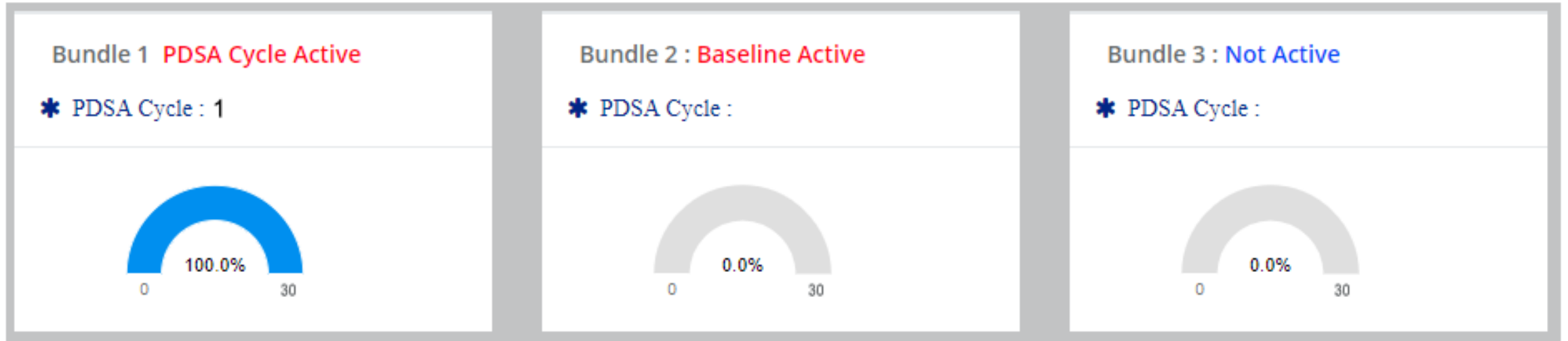


# Plan Next Steps: PDSA Cycle 1

Activating PDSA Cycle (Live Demo)

Closing out PDSA Cycle (Screenshots)

# First PDSA Cycle- Closing





# First PDSA Cycle- Closing

Active Records ^

WorkBenchId	System Patient Record Number	Bundle 1	Bundle 2	Bundle 3	Bundle 4	Go to Record
67	62019111102839	NOT USED	OPEN	NOT USED	NOT USED	<a href="#">➔</a>
66	6201911110217	NOT USED	OPEN	NOT USED	NOT USED	<a href="#">➔</a>
65	62019110181834	NOT USED	OPEN	NOT USED	NOT USED	<a href="#">➔</a>
63	62019110175725	CLOSED	OPEN	NOT USED	NOT USED	<a href="#">➔</a>

# First PDSA Cycle- Closing

## Baseline/PDSA Cycles and Local Policy Information

Baseline/PDSA Cycle Selection and Dates



Local Policy and Guidelines Information

Download BaseLine and Cycle Information

# First PDSA Cycle- Closing

**Set/Edit Baseline or PDSA Cycle Dates :**

- Weight in Kilograms
- Abnormal Vitals
- Interfacility Transfers

**Current Bundle Status:**

- \* Weight in Kilograms Cycle Active
- \* Abnormal Vitals Baseline Active
- \* Interfacility Transfers Cycle Active

**Weight in Kilograms :**

Bundle Options : [✎ Edit Baseline/PDSA Cycle Start Date](#) [✖ End PDSA cycle](#)

[Close](#)

# First PDSA Cycle- Closing

Weight in Kilograms :

---

Bundle Options :  Edit Baseline/PDSA Cycle Start Date  End PDSA cycle

---

End Active PDSA cycle

---

Smart Aim achieved during reporting period?

Yes  
 No

---

Set PDSA cycle end date :

---

# First PDSA Cycle- Closing

Weight in Kilograms :

---

Bundle Options :

---

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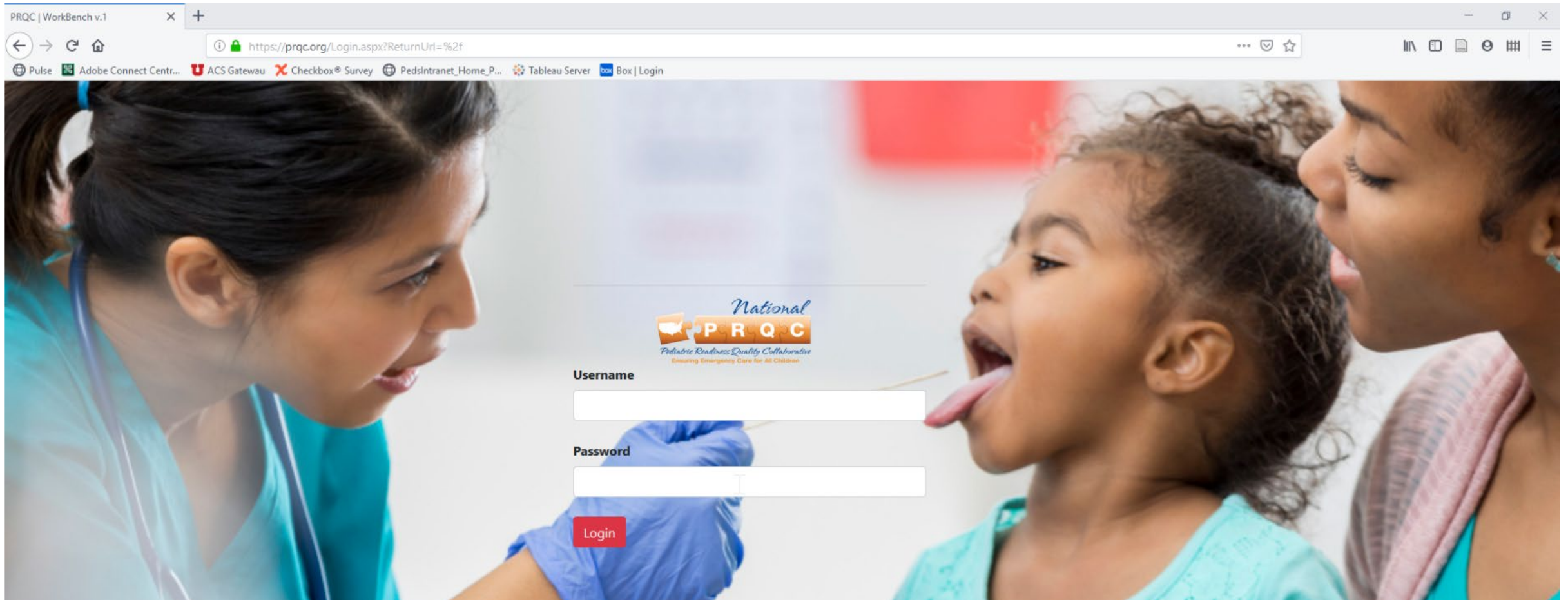
### Plan Next Steps: PDSA Cycle 2

- Gather internal team
- Review aim statement and performance
- Review possible change strategies
- Choose next change/intervention
- Develop necessary tools/resources/education

### Enter PDSA Cycle 2 Data ... and so on



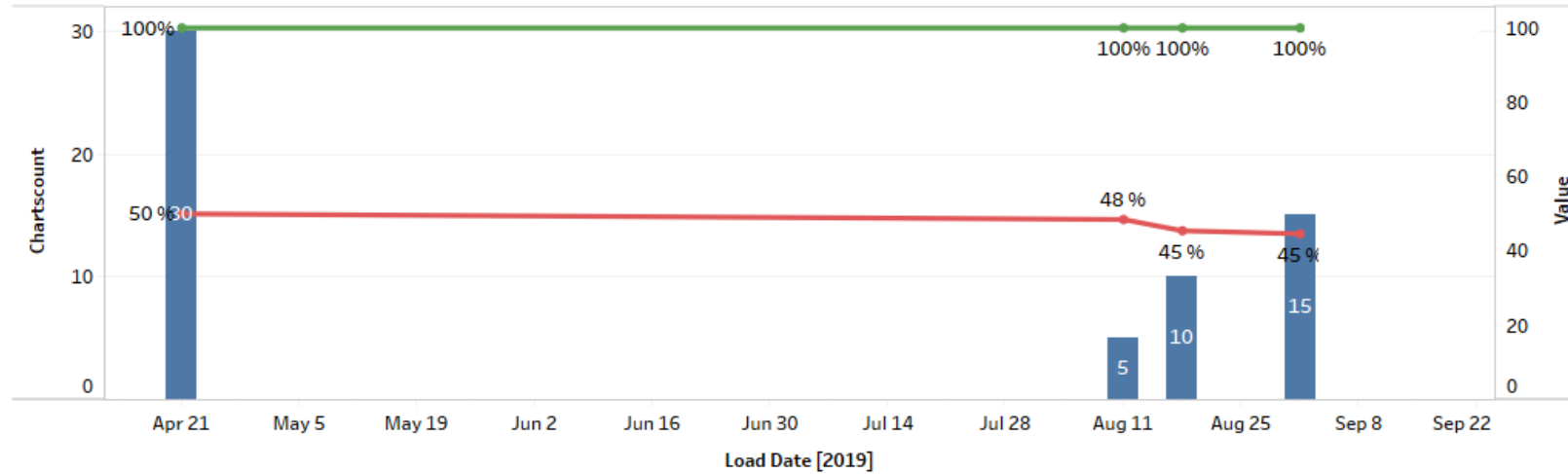
# Review Performance & Monitor for Improvement



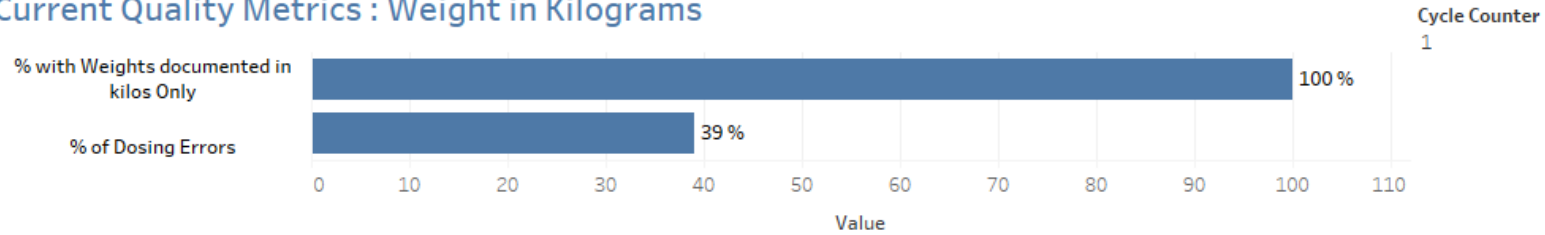
The image shows a web browser window with the URL <https://prqc.org/Login.aspx?ReturnUrl=%2f>. The browser's address bar and tabs are visible at the top. The main content of the page is a login form overlaid on a background image of a healthcare professional in blue scrubs and gloves examining a young child's mouth. The child is sticking their tongue out. The login form includes the PRQC logo, which reads "National PRQC Pediatric Readiness Quality Collaborative Ensuring Emergency Care for All Children". Below the logo are two input fields labeled "Username" and "Password", and a red "Login" button.

■ Chartscout  
■ Cumulative % of Weights Documented in Kil..  
■ Cumulative % of Dosing Errors

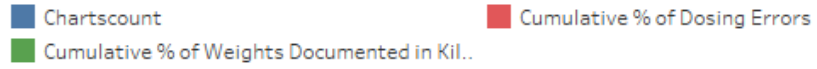
PDSA Metrics for : Weight in Kilograms



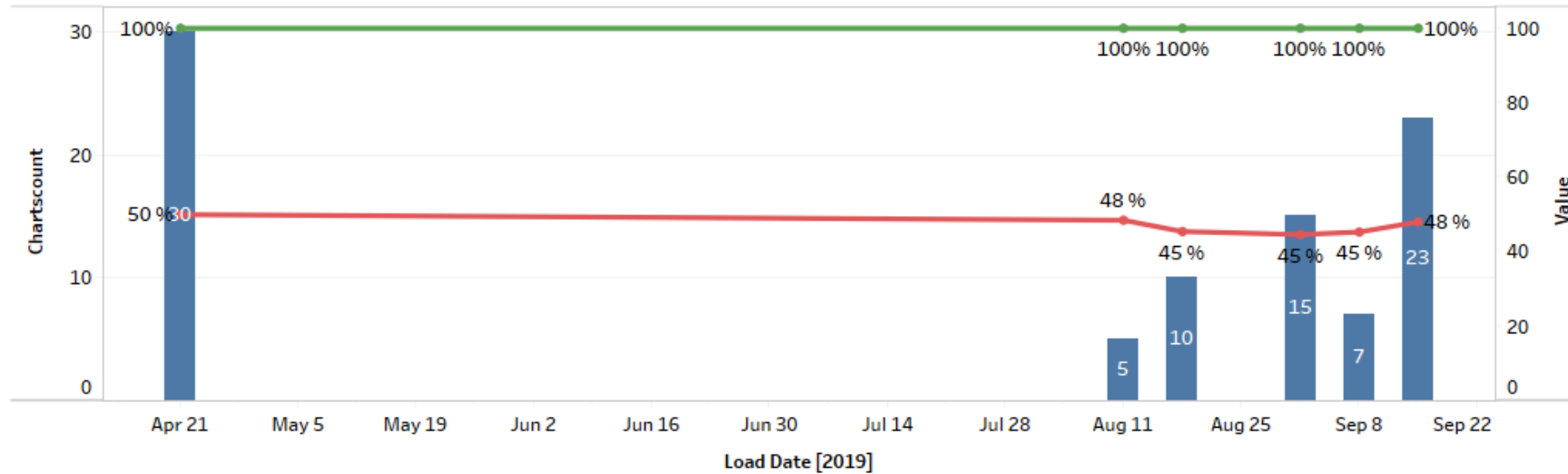
Current Quality Metrics : Weight in Kilograms



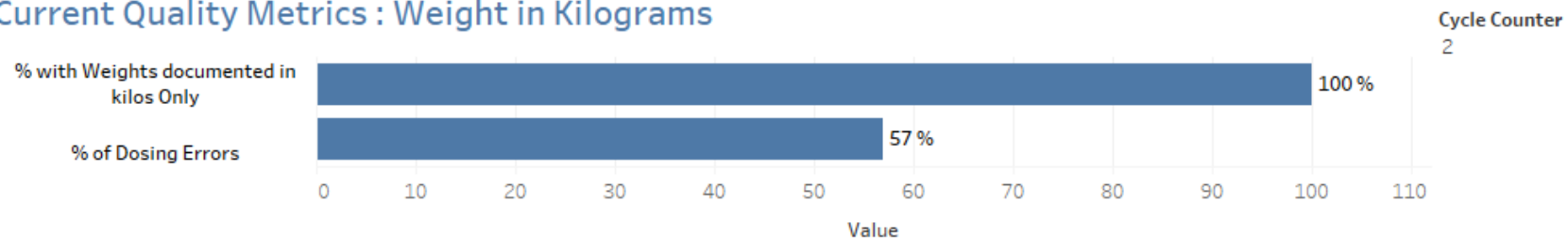




**PDSA Metrics for : Weight in Kilograms**



**Current Quality Metrics : Weight in Kilograms**



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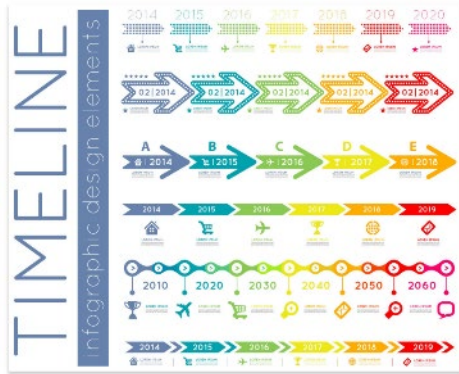
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### Enter PDSA Cycle 2 Data ... and so on





# PDSA CYCLE TIMELINES

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# PDSA Cycle Timeline



## Mile Marker 1: Start with Baseline Data

- Goal: Must be submitted by July 12

## Mile Marker 2: Begin Collecting & Entering Data for 1<sup>st</sup> PDSA

- Goal: July 16 to Labor Day (September 2)

## Mile Marker 3: Begin Collecting & Entering Data for 2<sup>nd</sup> PDSA

- Goal: Labor Day to Halloween

## Mile Marker 4: Begin Collecting & Entering Data for 3<sup>rd</sup> PDSA

- Goal: Halloween to MLK (January 2, 2020)



# AGGREGATE PERFORMANCE

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# HOUSEKEEPING

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# Housekeeping

## Reminders

- Requests for CNE credit must be submitted within 2 weeks of sponsored event
- Extension letter can be found on Members Only Section of PRQC Website

## Action Items

- Environmental Scan
- Submit Baseline Data
- Mid-Collaborative Survey

# Housekeeping

## **Resources Available**

- PRQC Newsletter
- Yammer

## **Learning Sessions**

- November 19
- December 3rd



# Key Information

**CNE Link:** <https://tch-redcap.texaschildrens.org/REDCap/surveys/?s=C3CHENDRY8>

**Google:** EMSC PRQC (Password also)

**Email:** [qeca@texaschildrens.org](mailto:qeca@texaschildrens.org) | [dcc\\_prqcsupport@hsc.utah.edu](mailto:dcc_prqcsupport@hsc.utah.edu)

