Quality Improvement Projects: Needs, Costs, and Fund Raising

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The Straw Man on a Burning Platform

- Proposal: The Straw Man
  - Proposal that to have healthy women and babies, they must have access to care

- The Burning Platform
  - U.S. maternal mortality rate ranks worst among all developed nations
  - Texas has one of the highest maternal mortality rate in the developed world

Michelle Zavala poses with her newborn baby. Michelle died from a blood clot eight days after giving birth.
OECD Maternal Mortality Rate is Highest in the U.S.

California: 4.0 per 100,000 live births

Data: Data reflect UNICEF estimates because of missing internationally comparable data for the U.S. National statistics are available for most countries from the OECD.

For Every Woman Who Dies In Childbirth In The U.S., 70 More Come Close

<table>
<thead>
<tr>
<th>Severe Maternal Morbidity (SMM) 1993 - 2014</th>
<th>Rate per 10,000 deliveries</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARDS</td>
<td>2</td>
</tr>
<tr>
<td>Cardiac Arrest</td>
<td>0.4</td>
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<tr>
<td>Shock</td>
<td>1.1</td>
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<tr>
<td>Sepsis</td>
<td>2.4</td>
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<td>DIC</td>
<td>6</td>
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</tbody>
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Samantha Blackwell's pregnancy with second son Devon went well. But just days after delivery, she was in a medically induced coma following severe sepsis.

CDC: Rates in Severe Morbidity Indicators per 10,000 Delivery Hospitalization, 1993 - 2014
Easiest Approach: TxAIM Collaborative

207 of 226 Birthing Hospitals participating (91.6%)
Birthing Centers to be added
Access to best practice, mentoring
Maternal Early Warning Systems

Team building
Data acquisition and analysis
Community Collaboration
  Engaging mothers

THAF QI Nurses available to assist in developing QI projects
TexasAIM Hospitals and SMM Rate/Hemorrhage

Legend
- Enrolled hospitals (n=166)
- Rate of SMM among hemorrhage cases
  - 0.1% - 30.9% (at or below state average)
  - 31.0% - 40.2%
  - 40.3% - 49.4%
  - 49.5% - 58.7%
  - 58.8% and above
  - 0 SMM cases

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Delayed Response to Clinical Warnings

- Cardiovascular disease (n=49)
- Preeclampsia or eclampsia (n=36)
- Obstetric hemorrhage (n=20)
- Venous thromboembolism (n=20)
- Amniotic fluid embolism (n=18)

Pregnancy-related deaths due to healthcare provider factors

- Delayed response to clinical warning signs
- Ineffective care
- Misdiagnosis
- Lack of continuity of care
- Failure to consult

Determining Need

What do you need
A clear document stating what is needed and why (AIM statement or QI Charter)
Refine what you are asking for
AIM statement must be compelling
Must be done before searching for support or funding
How can you demonstrate improvement if you proceed? Was grant worth it to donor?

Cost
After you evaluate existing resources including staff or board members with the right skill sets:
Software, Hardware
People time
Analysis time
Project time

Krystine Toledo-Gonzales died from staph infection 6 days after her VBAC.
Kira Dixon Johnson died 12 hours after giving birth to her second son from obstetrical bleeding.
Determining Cost – Determine Available Resources

- What do you have. What do you need:
  - Existing staff or board members with the right skillsets? Outsource?

- Equipment/supplies (hemorrhage cart, software, hardware, printing)

- People time
  - Training, simulation
  - Analysis time
  - Community outreach

Cost:
  - Cost of equipment, etc

Cost of People:
  - Administrating and planning time
  - Trainer/staff cost by hours
  - Analysis time
Fundraising Resources

- Grant seeking or general fundraising
  - Grant vs. charity event, in memoriam?
- TDSHS Funding Information Center
- www.ahp.org
  - Association for Healthcare Philanthropy
- www.foundationcenter.org
Funding Information Center

Our mission is to help organizations in Texas pursue public health funding opportunities by disseminating funding information through the Funding Alert and our website. Our services are limited to clients living in Texas.

Contact Us

Physical Address:
Funding Information Center, Mail Code 1955
Texas Department of State Health Services
1100 West 49th Street, Moreton Building, Room 652
(see Central Campus-Austin map)
Austin, TX 78756-3199

Postal Service Mailing Address:
Funding Information Center, MC 1955
Texas Department of State Health Services
P.O. Box 149347
Austin, TX 78714-9347

Toll free: 1-888-963-7111 ext.7684
Phone: (512) 776-7684
Fax: (512) 776-7474
E-mail: fundctr@dshs.texas.gov

Quick Links

- Assistance Listing (CFDA)
- Federal Register
- Foundation Center
- Grants.gov
- Grantsmanship Center
- NIH Guide
- Small Business Assistance-TX
- Small Business Development
- Texas E-Grant
- Texas FSRD
- Texas Register

Disclaimer: External links to other sites are intended to be informational and do not have the endorsement of the Department of State Health Services. These sites may also not be accessible to persons with disabilities.

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Finding Resources:
There is philanthropy out there and you must find it

• Obvious:
  • Communities Foundation in Your County
    • Clearing house for local not for profit grant makers
    • Vet those needing grants as well as grant makers
    • There is a reality: There are people who want to fund you but don’t know who you are

• Local Creativity
  • There is local money looking for you
  • Individuals interested in supporting your concern
Foundations

- Communities Foundation of Texas
- North Texas Community Foundation
  - Child and Family Wellness
- East Texas Communities Foundation
- Austin Community Foundation
- Greater Houston Community Foundation
- Community Foundation of West Texas
- The Community Foundation of the Texas Hill Country
- Texas Womens Foundation
- ...and many more
- But no guarantee of funding
- You must convince

https://www.cof.org/community-foundation-locator
Thank You For Your Commitment to Healthy Mothers and Babies!

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