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## PQCNC Quality Improvement Award

### **Purpose**

The PQCNC Quality Improvement Award annually recognizes a North Carolina delivery hospital that has made a measurable and sustained positive change in a major perinatal quality improvement indicator/issue through the implementation of quality improvement activities within the previous three years.

Major perinatal indicators are those indicators endorsed or recognized by national and other quality improvement efforts including the National Quality Forum (NQF), Vermont Oxford Network (VON), Leapfrog, Alliance for Innovation on Maternal Health (AIM), the Center for Medicare and Medicaid Services (CMS), and the Agency for Healthcare Research and Quality (AHRQ).

### **Eligibility**

All delivery hospitals in the state of North Carolina are encouraged to apply whether actively participating in PQCNC or not, and whether a well-established quality improvement program or a beginner.

If you submitted an application for the PQCNC Quality Improvement Award in the previous year and were not awarded, you may re-submit your project as long as it fits within the time frame described below. One member of the team that wins the PQCNC Quality Improvement Award will be asked to serve on the PQCNC Quality Improvement Award committee.

### **Criteria**

- North Carolina delivery hospital.
- Demonstrable perinatal health care quality improvement initiative since 2015 leading to the change.
- Measurable and sustained improvement in a major perinatal quality improvement indicator.
- Tangible population impacts especially among high risk or vulnerable populations of mothers and infants.
- Have not been awarded the PQCNC Quality Improvement Award in the previous two years (award cycles).
- Application

Please submit a complete application and all attachments in one e-mail to [qiadvisor@pqnc.org](mailto:qiadvisor@pqnc.org) by July 1, 2023.

Applicants will be notified of award status by September 1, 2023

## Application

The completed application should include the following elements:

Name of Project Program:

Project Leaders Names and Positions:

Project Timeframe (start and stop month/year):

***Introduction: Why did you start?*** [15 points - Word Limit: 500]

This section should include

- Problem Description (nature and significance of the local problem)
- Available Knowledge (summary of what is currently known about the problem)
- Rationale (any reasons or assumptions that were used to develop the intervention, reasons why the intervention was expected to work)
- Specific Aims (the purpose of the project)

***Methods: What did you do?*** [30 points - Word Limit: 500]

This section should include

- Context (contextual elements considered important at the outset of introducing the intervention)
- Project design (description in sufficient detail that others could reproduce it and specifics of the team involved)
- Assessing the project (approach chosen for assessing the impact of the project and whether outcomes were actually due to the implementation)
- Measures chosen for studying structural changes, processes and outcomes (include their operational definitions, methods employed for assessing completeness and accuracy of data)
- Analysis (methods used to draw inferences from the data and understanding variation within the data)

***Results: What did you find?*** [30 points - Word Limit: 500]

This section should include

- Initial steps of the intervention and their evolution over time (e.g. time line, flowchart, or table)
  - Details of the structural, process and outcome measures (append charts/figures)
  - Observed associations between outcomes, interventions, and relevant contextual elements
  - Unintended consequences such as unexpected benefits, problems, failures, or costs
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***Discussion: what does it mean?*** [25 points - Word limit: 500]

This section should include

- Key findings (including relevance to the rationale and specific aims, and particular strengths of the project)
- Interpretation (nature of association between the interventions and the outcomes, impact of the project on people and systems, reasons for any differences between observed and anticipated outcomes, recognition of the influence of context, costs and strategic trade-offs)
- Limitations (limits of the work (in design, measurement or analysis) and sustainability of the improvement over time)
- Conclusions and Lessons Learned (usefulness of the work, sustainability, potential to spread to other contexts, implications for practice or further study, suggested next steps)

***Attachments***

Include tables and figures that provide data demonstrating the QI activities' improvement and impact on the population. Please list and label your attachments here:

[Limit: a maximum of five tables and figures]

***Contact/Facility Information***

Unit Name  
Website  
Nominator Name  
Affiliation with Hospital  
Phone  
Email

***Questions? Email [qiadvisor@pqcnc.org](mailto:qiadvisor@pqcnc.org)***