


## Checklist for ILPQC OB Teams to Complete ILPQC Maternal Hypertension Initiative

- Submit data through December 2017 by **Feb 15, 2018** in REDCap, including:
  - ILPQC Severe Hypertension Data Form (monthly)
  - ILPQC AIM Quarterly Measures (quarterly)
  - ILPQC Severe HTN Implementation Checklist (quarterly)
- Facilitate completion of education with all providers and nurses (options include: [AIM e-modules](#), [AIM webcast](#), [Grand Rounds](#))
- Review time to treatment data with your team
  - ✓ Connect with your Perinatal Network Administrator if you are not yet at the 80% time to treatment goal
- Develop sustainability plan with your QI team (draft plan provided by ILPQC), submit to your Perinatal Network Administrator
- Continue to collect / submit basic data on cases of Severe HTN for compliance monitoring. Compliance data form active in March

 All teams that (1) submit all data through December 2017 by **February 15, 2018**, and (2) meet or exceed the 80% time to treatment goal **by December 2018** will receive a certificate of QI Achievement for the ILPQC Maternal Hypertension Initiative and a letter sent to their hospital leadership acknowledging their achievement. 