Ohio Gestational Diabetes Mellitus Postpartum Care Learning Collaborative
Check her risk. Protect her health.

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Data Collection and Methodology

Wave 1 continuation and Wave 2 pilot

Eligibility: Track 1 is required for pilot sites seeing women during both their prenatal and postpartum periods. **All Continuous Quality Improvement data will be collected via medical record review (EMR or Paper) at 33-36 weeks gestation.**

Measure and Indicators	Measure Description	Collection Instrument
Prenatal Diabetes Screen		
Timeliness of Prenatal Diabetes Screen	The percentage of pregnant women that had a GDM screen during the recommended timeframe. • Prior to 28 6/7 weeks gestation for women without a history of GDM • By second prenatal visit for women at high risk* for GDM *High-risk is defined as: 1) Previous medical history of GDM, 2) Known impaired glucose metabolism, 3) Obesity (BMI>=30), 4) Previously delivered a baby weighing greater than 10 lbs, 5) Has polycystic ovarian syndrome.	Sites will complete monthly medical record review targeting women with GDM. Medical record review will consist of up to 20 chart reviews of women between 33-36 weeks pregnant.
Prenatal Lifestyle Education		
Health and Wellness Education	The percentage of pregnant women diagnosed with GDM who had evidence of prenatal education on benefits and/or risks in all of the following areas: • Postpartum family planning • Breastfeeding	Medical record review at 33 to 36 weeks gestation Patient Survey*

Measure and Indicators	Measure Description	Collection Instrument
Prenatal Lifestyle Education (continued)		
Diabetes Education	The percentage of pregnant women diagnosed with GDM who had evidence of prenatal education on benefits and/or risks in all of the following areas: • Type 2 Diabetes for mother and baby • Diabetes screen during postpartum appointment at 6-12 weeks post-delivery	Medical record review at 33 to 36 weeks gestation Patient Survey*
Postpartum Care		
Postpartum Care	The percentage of women diagnosed with GDM during the prenatal period who attended at least one postpartum care visit after delivery.	Medical record review at 10 weeks postpartum
Care Coordination	The percentage of women who received one or more care coordination strategies to improve the rate of postpartum T2DM screen by 56 days postpartum If care coordination strategies were provided, identify the strategy(ies) below: 1) OGTT screen ordered while women is in hospital postpartum 2) Postpartum T2DM reminder sent to women via postcard, follow up phone call, e-mail and/or text message within 56 days after delivery 3) Outreach to woman's PCP via fax letter, phone call or other means to inform them of need for Postpartum T2DM screen and request verification that screen was conducted. 4) Other strategy: please describe.	Notation in the patient chart- record review at 10 weeks postpartum

Measure and Indicators	Measure Description	Collection Instrument
T2DM Postpartum Screen	The percentage of women with GDM during the prenatal period who had an oral glucose tolerance test (OGTT) prior to 12 weeks postpartum (from either OB or PCP).	Medical record review at 10 to 12 weeks postpartum; Chart review for notation of faxed form by PCP; OR Follow up phone call from OBGYN