

# Data: What to Expect

Terrill Flakes, MPH
GaPQC Core Team Staff

Perinatal Quality Improvement Data Consultant - Department of Public Health

# **Data Template**

Process Measures (P)	Description		Reporting time period (QUARTERLY): April 1, 2018 - June 30, 2018
P1: Unit Drills	Report # of Drills and the drill topics		neporang ame period (quantitate), ripin 2, 2020 June 30, 2020
2. Olik Brills	The port in or or in a direct in it to pies	l	
	P1a: In this quarter, how many OB drills (In Situ and/or Sim Lab) were performed on your unit for any maternal	P1a:	
	safety topic?		
	and the second s	l	
	P1b: In this quarter, what topics were covered in the OB drills?	P1b:	1
	(Note: add more numbers for additional topics covered, as needed)	l	2.
		l	3.
		l	4.
		l	5.
		l	6.
		l	7.
		l	8.
		l	9.
		l	10.
P2: Provider Education	P2a: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within	P2a:	Numerator:
	the last 2 years) an education program on Obstetric Hemorrhage? How many OB physicians and midwives does		
	your hospital have (denominator)?	l	Denominator:
	Date Andrew of Attitudes to the Company of the Comp	P2b:	N
	P2b: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within the last 2 years) an education program on the Obstetric Hemorrhage bundle elements and the unit-standard	P 20:	Numerator:
	protocol? How many OB physicans and midwives does your hospital have (denominator)?	l	Denominator:
	protocol: now many Ob physicans and midwives does your nospital have (denominator):	l	
P3: Nursing Education	P3a: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an	P3a:	Numerator:
	education program on Obstetric Hemorrhage? How many OB nurses does your hospital have (denominator)?	l	
		l	Denominator:
	P3b: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an	P3b:	
	education program on the Obstetric Hemorrhage bundle elements and the unit-standard protocol? How		Numerator:
	many OB nurses does your hospital have (denominator)?	l	Denominator:
		_	
P4: Risk Assessment	P4: At the end of this quarter, how many mothers (numerator) had a hemorrhage risk assessment with risk	P4:	Numerator:
	level assigned, performed at least once between admission and birth and shared among the team? How many	l	
	mothers did you have this quarter (denominator)?	l	Denominator:
P5: Quantified Blood Loss	P5: In this quarter, how many mothers (numerator) had measurement of blood loss from birth through the	P5:	Numerator:
	recovery period using quantitative and cumulative techniques? How many mothers did you have this quarter	l	
	(denominator)?	l	Denominator:
Structure Measures (S)	Description		Report only ONCE
S1: Patient, Family & Staff	51: Has your hospital developed OB specific resources and protocols to support patients, family and staff	51:	
Support	through major OB complications?	l	
		l	Date of Completion:
S2: Debriefs	S2: Has your hospital established a system in your hospital to perform regular formal debriefs after cases with	52:	
	major complications?	_	
	major comprisations.	I _	Date of Completion:
S3: Multidisciplinary Case	S3: Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases of	53:	
Reviews	severe maternal morbidity (including women admitted to the ICU, receiving ≥4 units RBC transfusions, or	1	
	diagnosed with a VTE)?	l	Date of Completion:
S4: Hemorrhage Cart	S4: Does your hospital have OB hemorrhage supplies readily available, typically in a cart or mobile box?	54:	
24. HEMOITHORE COIL	24. DOCS YOU HOSPINSH HAVE OUT HERHOLTHINGS SUPPLIES TEACHING AVAILABLE, LYDICARY III & CART OF MODILE DOX:	_	
		I _	Date of Completion:
SS: Unit Policy and Procedure	S5: Does your hospital have an OB hemorrhage policy and procedure (reviewed and updated in the last 2-3	55:	
	years) that provides a unit-standard approach using a stage-based management plan with checklists?	Ī	
	, , , , , , , , , , , , , , , , , , , ,	l	Date of Completion:
S6: EHR Integration	56: Were some of the recommended OB Hemorrhage bundle processes (i.e. order sets, tracking tools)	56:	
and a second	integrated into your hospital's Electronic Health Record system?		
	and the second of the second o	I _	Date of Completion:

#### **Outcome Measure**



Outcome Measures (O)	Description	Reporting time period (QUARTERLY): April 1, 2018 - June 30, 2018
O1: Severe Maternal Morbidity	Numerator: Among the denominator, all cases with any SMM code	Numerator:
	<b>Denominator:</b> All mothers during their birth admission, excluding ectopics and miscarriages	Denominator:
O2: Severe Maternal Morbidity	Numerator: Among the denominator, all cases with any non-transfusion SMM code	Numerator:
(excluding cases with only a	Denominator: All mothers during their birth admission, excluding ectopics and miscarriages	Denominator:
transfusion code) among All		
Delivering Women		
O3: Severe Maternal Morbidity	Numerator: Among the denominator, all cases with any SMM code	Numerator:
among Hemorrhage Cases	Denominator: All mothers during their birth admission, excluding ectopics and miscarriages,	Denominator:
	meeting one of the following criteria:	
	Presence of an Abruption, Previa or Antepartum hemorrhage diagnosis code	
	Presence of transfusion procedure code without a sickle cell crisis diagnosis code	
	Presence of a Postpartum hemorrhage diagnosis code	
O4: Severe Maternal Morbidity	Numerator: Among the denominator, all cases with any non-transfusion SMM code	Numerator:
(excluding cases with only a	Denominator: All mothers during their birth admission, excluding ectopics and miscarriages,	Denominator:
transfusion code) among	meeting one of the following criteria:	
Hemorrhage Cases.	Presence of an Abruption, Previa or Antepartum hemorrhage diagnosis code	
	Presence of transfusion procedure code without a sickle cell crisis diagnosis code	
	Presence of a Postpartum hemorrhage diagnosis code	

Data already being received from HDD file

#### **Process Measure**

P1: Unit Drills	Report # of Drills and the drill topics
	P1a: In this quarter, how many OB drills (In Situ and/or Sim Lab) were performed on your unit for any maternal safety topic?
	P1b: In this quarter, what topics were covered in the OB drills? (Note: add more numbers for additional topics covered, as needed)
P2: Provider Education	P2a: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within the last 2 years) an education program on Obstetric Hemorrhage? How many OB physicians and midwives does your hospital have (denominator)?
	P2b: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within the last 2 years) an education program on the Obstetric Hemorrhage bundle elements and the unit-standard protocol? How many OB physicans and midwives does your hospital have (denominator)?
P3: Nursing Education	P3a: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an education program on Obstetric Hemorrhage? How many OB nurses does your hospital have (denominator)?
	P3b: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an education program on the Obstetric Hemorrhage bundle elements and the unit-standard protocol? How many OB nurses does your hospital have (denominator)?
P4: Risk Assessment	P4: At the end of this quarter, how many mothers (numerator) had a hemorrhage risk assessment with risk level assigned, performed at least once between admission and birth and shared among the team? How many mothers did you have this quarter (denominator)?
P5: Quantified Blood Loss	<b>P5</b> : In this quarter, how many mothers (numerator) had measurement of blood loss from birth through the recovery period using quantitative and cumulative techniques? How many mothers did you have this quarter (denominator)?

## **Structure Measure**



S1: Patient, Family & Staff	S1: Has your hospital developed OB specific resources and protocols to support patients, family and staff
Support	through major OB complications?
S2: Debriefs	<b>S2</b> : Has your hospital established a system in your hospital to perform regular formal debriefs after cases with major complications?
S3: Multidisciplinary Case	S3: Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases
Reviews	of severe maternal morbidity (including women admitted to the ICU, receiving ≥4 units RBC transfusions, or diagnosed with a VTE)?
S4: Hemorrhage Cart	S4: Does your hospital have OB hemorrhage supplies readily available, typically in a cart or mobile box?
S5: Unit Policy and Procedure	S5: Does your hospital have an OB hemorrhage policy and procedure (reviewed and updated in the last 2-
	3 years) that provides a unit-standard approach using a stage-based management plan with checklists?
S6: EHR Integration	S6: Were some of the recommended OB Hemorrhage bundle processes (i.e. order sets, tracking tools) integrated into your hospital's Electronic Health Record system?

## Who to submit data to

# Send completed data template via email to: terrill.flakes@dph.ga.gov

Process Measures (P)	Description		Reporting time period (QUARTERLY): April 1, 2018 - June 30, 2018
P1: Unit Drills	Report # of Drills and the drill topics		
P.L. OHIL DING	report if or brins and the drin topics		
	P1a: In this quarter, how many OB drills (In Situ and/or Sim Lab) were performed on your unit for any maternal	D1=-	
		F 10.	
	safety topic?		
	NIL Laborator de Laboratorio de Labo	P1b:	<u></u>
	P1b: In this quarter, what topics were covered in the OB drills?	P16:	E-
	(Note: add more numbers for additional topics covered, as needed)		2
			3.
			4.
			5.
			6.
			7.
			8.
			a a
			10.
P2: Provider Education	P2a: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within	P2a:	Numerator:
	the last 2 years) an education program on Obstetric Hemorrhoge? How many OB physicians and midwives does		
	your hospital have (denominator)?		Denominator:
	P2b: At the end of this quarter, how many OB physicians and midwives (numerator) have completed (within	P2b:	Numerator:
		F 2.0.	Numerator.
	the last 2 years) an education program on the Obstetric Hemorrhage bundle elements and the unit-standard		Denominator:
	protocol? How many OB physicans and midwives does your hospital have (denominator)?		
P3: Nursing Education	P3a: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an	P3a:	Numerator:
F3. Hursing Education	education program on Obstetric Hemorrhage? How many OB nurses does your hospital have (denominator)?	r.Ja.	Numerator.
	education program on Obstetric nemorrhage: now many Ob nurses does your nospital have (denominator):		L .
			Denominator:
	P3b: At the end of this quarter, how many OB nurses (numerator) have completed (within the last 2 years) an	P3b:	Numerator:
	education program on the Obstetric Hemorrhage bundle elements and the unit-standard protocol? How		Numerator:
	many OB nurses does your hospital have (denominator)?		Denominator:
	many ob horses does you hospital have (denominator).		
P4: Risk Assessment	P4: At the end of this quarter, how many mothers (numerator) had a hemorrhage risk assessment with risk	P4:	Numerator:
	level assigned, performed at least once between admission and birth and shared among the team? How many		
	mothers did you have this quarter (denominator)?		Denominator:
P5: Quantified Blood Loss	P5: In this guarter, how many mothers (numerator) had measurement of blood loss from birth through the	P5:	Numerator:
PS: Quantified blood Loss		PS:	Numerator:
	recovery period using quantitative and cumulative techniques? How many mothers did you have this quarter		Denominator:
	(denominator)?		Denominator.
Structure Measures (S)	Description		Report only ONCE
S1: Patient, Family & Staff	S1: Has your hospital developed OB specific resources and protocols to support patients, family and staff	51:	
Support	through major OB complications?		
		l	Date of Completion:
			out or compression.
S2: Debriefs	S2: Has your hospital established a system in your hospital to perform regular formal debriefs after cases with	52:	
	major complications?		
			Date of Completion:
53: Multidisciplinary Case	53: Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases of	53:	
Reviews	severe maternal morbidity (including women admitted to the ICU, receiving ≥4 units RBC transfusions, or	l	ļ
	diagnosed with a VTE)?	l	Date of Completion:
	,		
S4: Hemorrhage Cart	S4: Does your hospital have OB hemorrhage supplies readily available, typically in a cart or mobile box?	54:	
			Date of Completion:
		_	
S5: Unit Policy and Procedure	S5: Does your hospital have an OB hemorrhage policy and procedure (reviewed and updated in the last 2-3	55:	
	years) that provides a unit-standard approach using a stage-based management plan with checklists?	l	Date of Completion:
		ı	Date of Completion:
		_	
S6: EHR Integration	ISB: Were some of the recommended OB Hemorrhage bundle processes (i.e. order sets, tracking tools)	S6:	
S6: EHR Integration	S6: Were some of the recommended OB Hemorrhage bundle processes (i.e. order sets, tracking tools) integrated into your hospital's Electronic Health Record outtom?	56:	
S6: EHR Integration	36: Were some of the recommended OB Hemorrhage bundle processes (i.e. order sets, tracking tools) integrated into your hospital's Electronic Health Record system?	S6:	Date of Completion:

# Submission Due Date(s)



•	JUL	Y 2	018	3
	Tue	Wed	Thu	

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
		3	4	3	0	
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

#### Note:

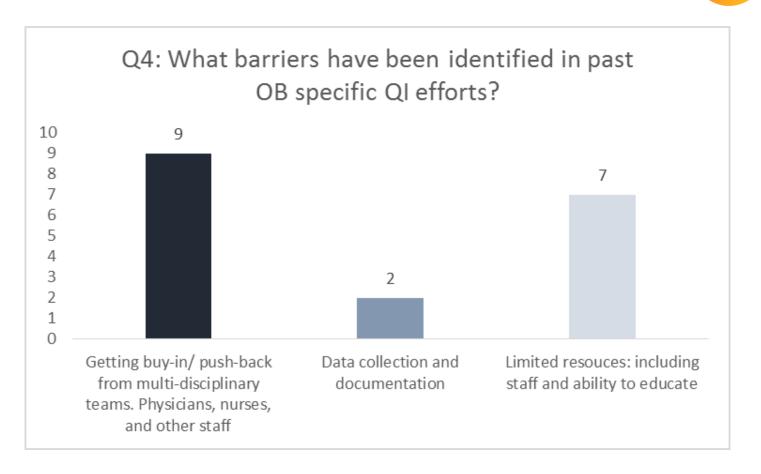
If the 15<sup>th</sup> falls on a weekend/holiday, then the submission is due on the following business day.

Data analyzed and report returned

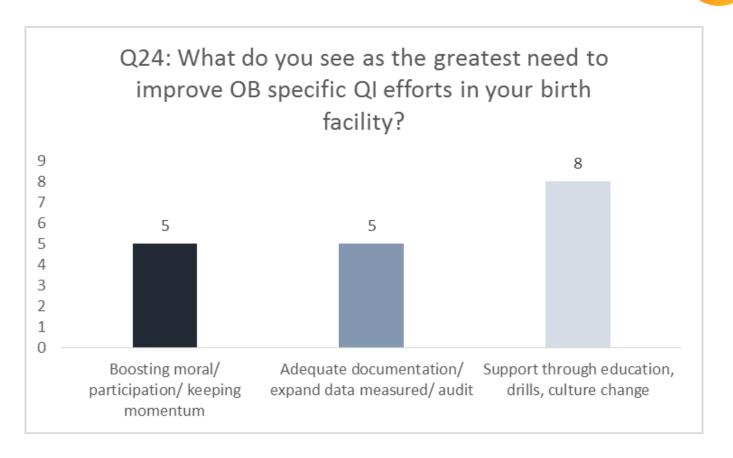
Report returned by the 15<sup>th</sup> day of the following month that we receive your data



# Baseline Survey Results



# Baseline Survey Results





# Sharing Feeling