

V.14.1 Special Report: NPIC/QAS Perinatal Quality Improvement Dashboard.

I. Introduction

This V14.1 Special Report provides a perinatal quality improvement dashboard that uses NPIC/QAS Quarterly Report data. During our last set of Quarterly Report webinars we asked members to share their own dashboards, particularly how they were using data from the NPIC/QAS Quarterly Report. We had several members respond, and have used their samples to help develop the dashboard we are providing to you*.

II. Purpose of Dashboards

Dashboards provide an easy to read (often one page) performance “snapshot” of a hospital, typically including trend data that allows the user to track progress on key perinatal variables. Dashboards can help identify negative trends that may need corrective action and provide useful comparison data. Like a car’s dashboard, they can provide the data needed to help “drive” (inform) decision making.

Dashboards are often web-based, allowing for “real time” data sharing. We intend to incorporate a dashboard in CAIRN, our interactive reporting network that is still in development. *We are very interested in your feedback regarding how to further refine this report, as well as how frequently and through what venue this information should be provided to you.* We look forward to continuing to dialog with you about this topic.

III. Description of Tables

The tables in this special report provide data for selected quality metrics for your hospital as well as data for your NPIC/QAS subgroup and the NPIC/QAS database average. *The report includes data for discharge date range 4/1/13 – 3/31/14.* Medical record numbers for the cases contributing to your hospital’s rates are available by emailing mservices@npic.org. We are also happy to answer any questions you may have regarding this report.

Table 1: Perinatal Quality Comparative Data

Section A: Total Deliveries displays the count of total deliveries and total inborns for your Hospital, your Subgroup and the NPIC/QAS Member Database. The column to the far right illustrates if your Hospital’s rate is significantly above the Database average rate, below that rate, or not significantly different from the Database average rate (see legend). For each metric, the Quarterly Report table/page reference is provided.

Section B: Quality Metrics displays the rate for selected quality metrics for your Hospital, your Subgroup and the NPIC/QAS Member Database. The column to the far right illustrates if your Hospital’s rate is significantly above the Database average rate,

below that rate, or not significantly different from the Database average rate (see legend). For each metric, the Quarterly Report table/page reference is provided.

Table 2: Perinatal Quality Trend Analysis

Section A: Total Deliveries displays the count of total deliveries and total inborns for your Hospital for the (trend) years 2009 – 2013, as well as the first quarter of 2014. The column to the far right illustrates if your Hospital’s trend rate is a significant upward trend, a significant downward trend, or stable over time (see legend). For each metric, the Quarterly Report table/page reference is provided.

Section B: Quality Metrics displays the rate for selected quality metrics for your Hospital for the (trend) years 2009 – 2013, as well as the first quarter of 2014. The column to the far right illustrates if your Hospital’s trend rate is a significant upward trend, a significant downward trend, or stable over time (see legend). For each metric, the Quarterly Report table/page reference is provided.

REFERENCES

Briggs, Jonathan. “Management Reports and Dashboard Best Practice.” Target Dashboard. 18 February 2013.

***CONTRIBUTING HOSPITALS**

Christiana Hospital (Christiana Care Health Services)-DE

Cone Health Women’s Hospital-NC

Magee-Womens Hospital of UPMC-PA

Phoebe Putney Memorial Hospital-GA

St. Vincent’s Birmingham-AL

St. Vincent’s East-AL

Texas Health Presbyterian Hospital Dallas-TX

Virtua Voorhees-NJ

Women and Infants Hospital of Rhode Island-RI

V14.1 Special Report: NPIC/QAS Perinatal Quality Improvement Dashboard


Table 1: Perinatal Quality Comparative Data NPIC ID: SAMPLE	Table/Page Reference	Hospital	Subgroup Average	Database Average	Hospital Rate vs. Database Average *
Section A: Total Deliveries					
Total Deliveries	OB1, p.8	2,286	4,095	3,972	
Total Inborns	OB1, p.8	2,343	4,194	4,055	
Section B: Quality Metrics					
C-Section Delivery Rate (% of total deliveries)	OB4, p.13	36.4%	32.5%	34.9%	--
Primary C-Section Rate (% of total deliveries)	OB4, p.13	19.6%	18.1%	19.1%	--
AHRQ IQI 33: Primary Cesarean Delivery Rate, Uncomplicated	QM1, p.66	19.6%	17.1%	19.1%	--
Repeat C-Section Rate (% of total deliveries)	OB4, p.13	16.8%	14.4%	15.8%	--
Induction Rate (% of total deliveries)	OB9, p.24	24.8%	24.4%	21.3%	▲
NPIC/QAS Rate of Inductions resulting in Cesarean Delivery	QM1, p.66	23.3%	20.5%	22.7%	--
NPIC/QAS Postpartum Hemorrhage Rate	QM1, p.66	2.9%	4.4%	3.3%	--
AHRQ PSI 18: Obstetric Trauma - Vaginal Deliveries with Instruments	QM1, p.66	19.0%	17.0%	14.5%	--
AHRQ PSI 19: Obstetric Trauma - Vaginal Deliveries without Instruments	QM1, p.66	1.9%	2.3%	2.1%	--
AHRQ PSI 17: Birth Trauma - Injury to Neonate	QN1, p.87	0.0%	0.3%	0.2%	▽
Vaginal Deliveries with coded Shoulder Dystocia linked to an inborn ≥ 2500 grams with birth trauma	QL1, p.98	5.6%	15.2%	13.3%	--
Total Unexpected Newborn Complication Rate	QN2, p.92	3.3%	4.1%	3.7%	--
Special Care Discharges (% of Total Neonates) **	N11, p.52	24.7%	20.2%	16.2%	▲
Inborn mortality ≥ 500 grams (% of Total Inborns)	N8, p.42	0.3%	0.4%	0.3%	--

*** Hospital rate with 95% Confidence Interval:**



- ▽ Significantly below database average rate
- ▲ Significantly above database average rate
- Not significantly different from database average rate

** Special Care discharges are those having NICU and/or NINT days/charges > 0

V14.1 Special Report: NPIC/QAS Perinatal Quality Improvement Dashboard

Table 2: Perinatal Quality Trend Analysis NPIC ID: SAMPLE	Table/Page Reference	2009	2010	2011	2012	2013	2014 (Q1)	Hospital Trend *
Section A: Total Deliveries								
Total Deliveries	OB5, p.15	3,467	3,339	3,066	2,964	2,353	654	
Total Inborns	N1a, p.32	3,536	3,398	3,156	3,060	2,409	674	
Section B: Quality Metrics								
C-Section Delivery Rate (% of total deliveries)	OB5, p.15	35.0%	36.4%	37.2%	38.4%	35.2%	37.6%	--
Primary C-Section Rate (% of total deliveries)	OB5, p.16	24.5%	25.3%	25.9%	28.5%	23.8%	24.7%	--
AHRQ IQI 33: Primary Cesarean Delivery Rate, Uncomplicated	N/A	20.5%	20.7%	20.9%	24.1%	20.3%	19.0%	--
Repeat C-Section Rate (% of total deliveries)	OB5, p.16	89.6%	89.0%	87.7%	90.3%	90.6%	91.3%	--
Induction Rate (% of total deliveries)	OB9A, p.25	23.7%	22.5%	21.8%	21.7%	24.8%	21.1%	--
NPIC/QAS Rate of Inductions resulting in Cesarean Delivery	N/A	21.4%	24.0%	23.8%	27.0%	23.1%	23.9%	--
NPIC/QAS Postpartum Hemorrhage Rate	QM1o, p.82	1.6%	2.0%	2.0%	1.7%	2.9%	3.1%	
AHRQ PSI 18: Obstetric Trauma - Vaginal Deliveries with Instruments	N/A	18.5%	23.5%	18.6%	19.6%	19.2%	20.0%	--
AHRQ PSI 19: Obstetric Trauma - Vaginal Deliveries without Instruments	N/A	2.3%	2.4%	1.7%	1.6%	1.7%	1.9%	--
AHRQ PSI 17: Birth Trauma - Injury to Neonate	N/A	0.1%	0.1%	0.1%	0.1%	0.0%	0.0%	--
Vaginal Deliveries with coded Shoulder Dystocia linked to an inborn ≥ 2500 grams with birth trauma	N/A	4.8%	10.0%	4.7%	8.3%	1.8%	16.7%	--
Total Unexpected Newborn Complication Rate	N/A	3.6%	3.8%	4.1%	3.9%	3.2%	3.7%	--
Special Care Discharges (% of Total Neonates) **	N12, p.53	23.3%	22.6%	25.8%	25.7%	23.4%	26.6%	--
Inborn mortality ≥ 500 grams (% of Total Inborns)	N9a, p.47	0.43%	0.36%	0.33%	0.33%	0.13%	0.45%	--

*** Hospital trend rate:**

-  Significant Upward Trend
-  Significant Downward Trend
- Stable over time
- I - Insufficient data for trend

** Special Care discharges are those having NICU and/or NINT days/charges > 0