



## BCI Webinar

# Improving Reporting Accuracy:

## *Total Number of Prenatal Visits*

August 23<sup>rd</sup>, 2018

Partnering to Improve Health Care Quality  
for Mothers and Babies

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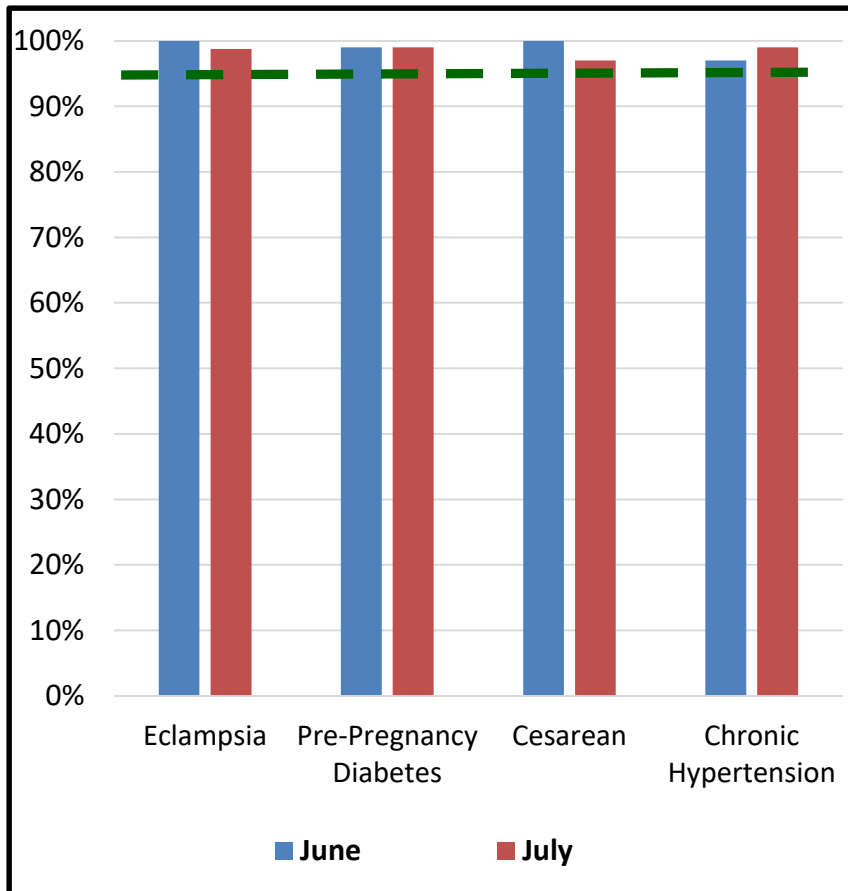
# Overview

- 👶 What is the Baseline Data Showing?
- 👶 Recommended Guidance on Reporting
- 👶 Process Mapping
- 👶 Hospital Feedback
- 👶 Potential Issues
- 👶 Upcoming Webinar
- 👶 Questions
- 👶 Adjourn

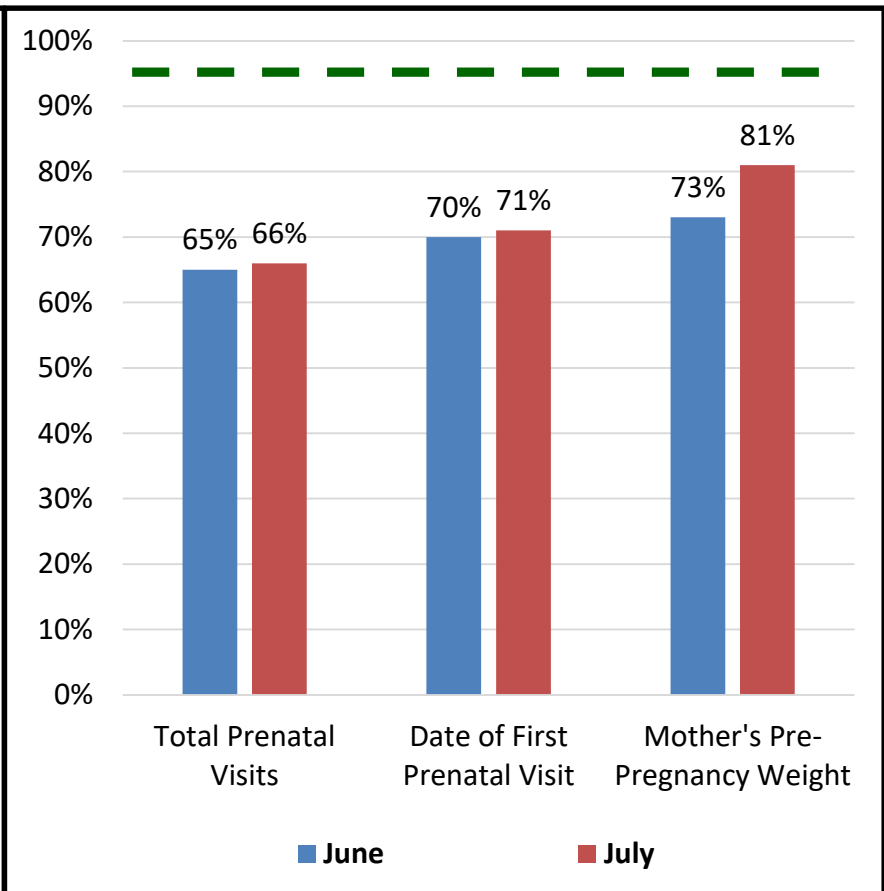
# What is the Baseline Data Showing?

# Average Percent Accuracy for BCI Hospitals

## Most Accurate Measures (Average)



## Least Accurate Measures (Average)



# Recommended Guidance on Reporting

# Number of Prenatal Visits

**DEFINITION:** The total number of visits recorded in the most current medical record available

**SOURCE:** Prenatal care record

- **Count** the number of prenatal visits from the most current prenatal record
- Do not include visits for classes, laboratory or other testing in which the pregnant woman was not individually examined or counseled
- **Do not** ask the mother
- If prenatal record does not look complete, such as the latest visits are missing, contact the prenatal provider's office to obtain more information

# Who are the Experts?

# Process Mapping

*“If this is the recommended guidance,  
how can it be accomplished?”*





TIME!!!

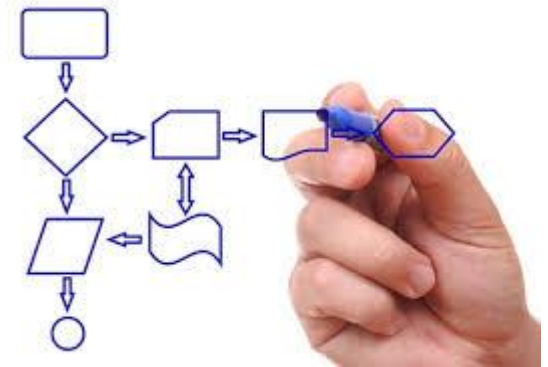
# Defining Process

- 👤 A series of actions or steps taken in order to achieve a particular end result

**HOW THINGS GET DONE!**

# What is Process Mapping?

- 👤 Graphical chart communicating a clear understanding of the process under study
- 👤 Shows who and what is involved in a process
- 👤 Can reveal areas where a process should be improved
- 👤 Leads to possible solutions



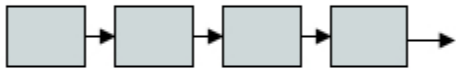
# Benefits of Process Mapping

- ➊ Promotes process improvement
- ➋ Identify issues/weaknesses
- ➌ Eliminates wasteful steps
- ➍ Links duties amongst employees
- ➎ Helps train people
- ➏ Defines and standardizes how work is done
- ➐ Builds consensus

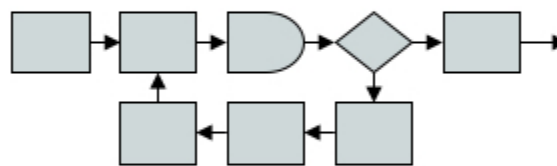
# Process Mapping

Usually, there are at least three versions of the same Process

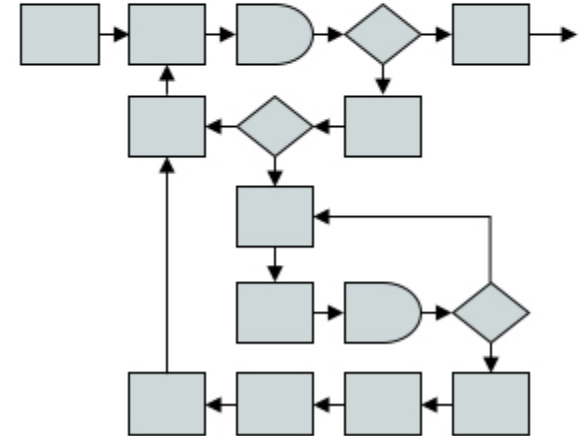
*What people wish  
it was...*



*What people think  
it is...*



*What it  
actually is...*



# Creating a Process Map

## Step 1: Identify the problem

- What is the process that needs to be visualized?

Reporting mother's total number of prenatal visits

("What is Process Mapping", 2017)

# Creating a Process Map

## Step 2: Determine the boundaries

- Where/when does the process start? **(INPUT)**

Mother admitted to L&D unit

- Where/when does the process end? **(OUTPUT)**

Birth certificate is completed and filed

# Creating a Process Map

## **Step 3: Determine all steps & sequence**

- What activities are involved in this process?

Determine what is done, who does what, and when it is done



# Creating a Process Map

## Step 4: Draw flowchart using symbols

- Basic symbols are used in a process map to describe key process elements
- Each process element is represented by a specific symbol:

 Arrow

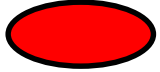





 Oval/Circle

 Diamond

 Box/Rectangle

("What is Process Mapping", 2017)

# Symbols

	<b>START/END:</b> Indicates the start and end points of a process
	<b>PROCESS/ACTIVITY:</b> A specific task or activity that is performed
	<b>DECISION:</b> A point in the process where a yes/no question or a decision is required before moving on to the next step
	<b>DIRECTION:</b> Arrows connect steps in the process and direct flow of information
	<b>DELAY:</b> Indicates the workflow goes into a wait
	<b>UNCLEAR:</b> Use this when a step in the process is unknown or not clear

# Creating a Process Map

## Step 5: Finalize the process flowchart

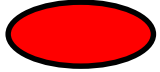





- Review with other team members
- Analyze for areas of weaknesses
  - Is the process being run how it should?
  - Will team members follow the charted process?
  - Is everyone in agreement with the process map flow?
  - Is anything redundant?
  - Are any steps missing?
- Adjust chart with improvements and solutions
- Ensure consensus

("What is Process Mapping", 2017)

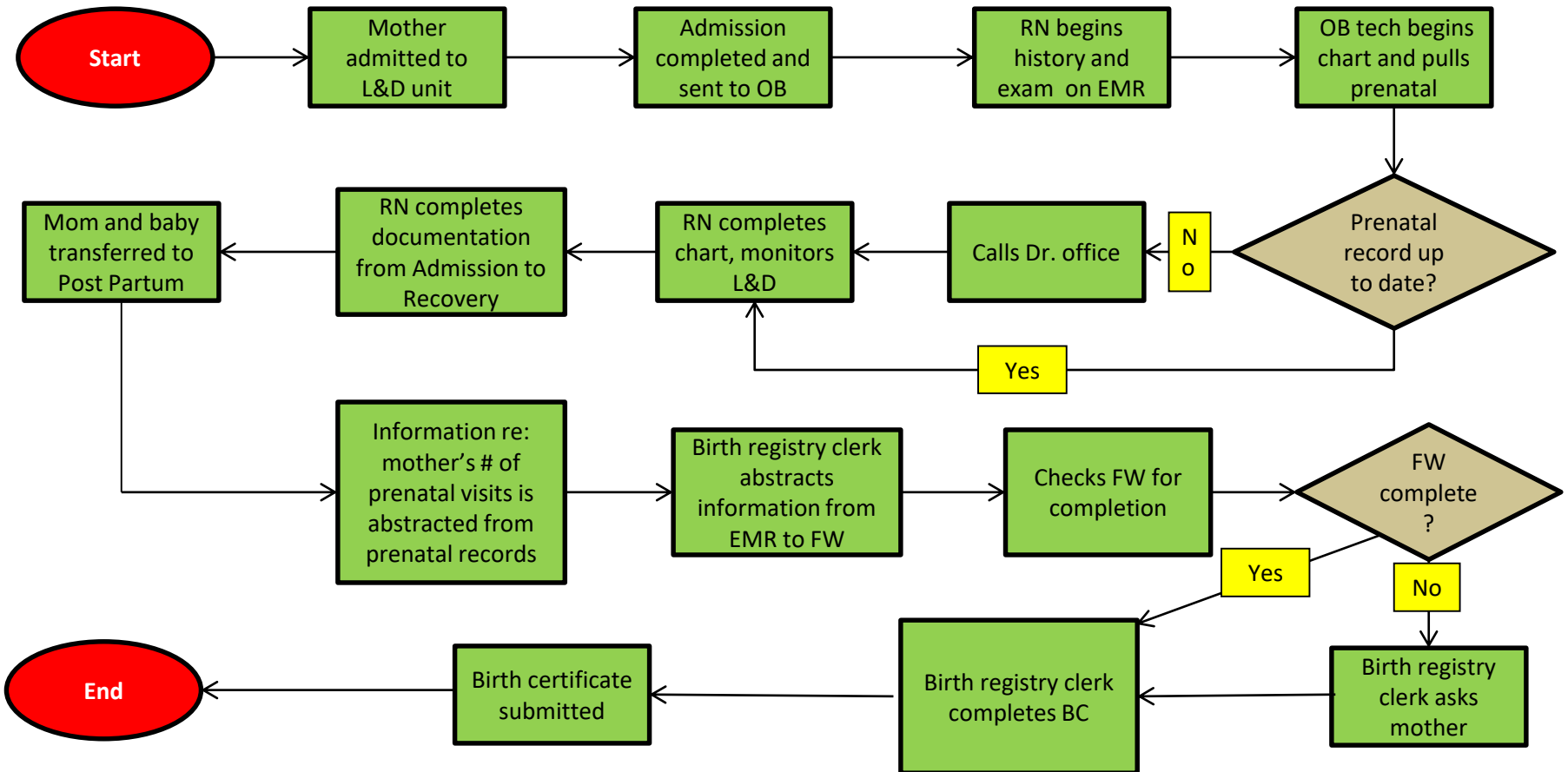
# 'DO NOT' TIPS!!

- 👤 Map out the processes you *wish* you had
- 👤 Ignore the opinions of those people who know the process best
- 👤 Put your workflow map on the shelf and don't look at it again

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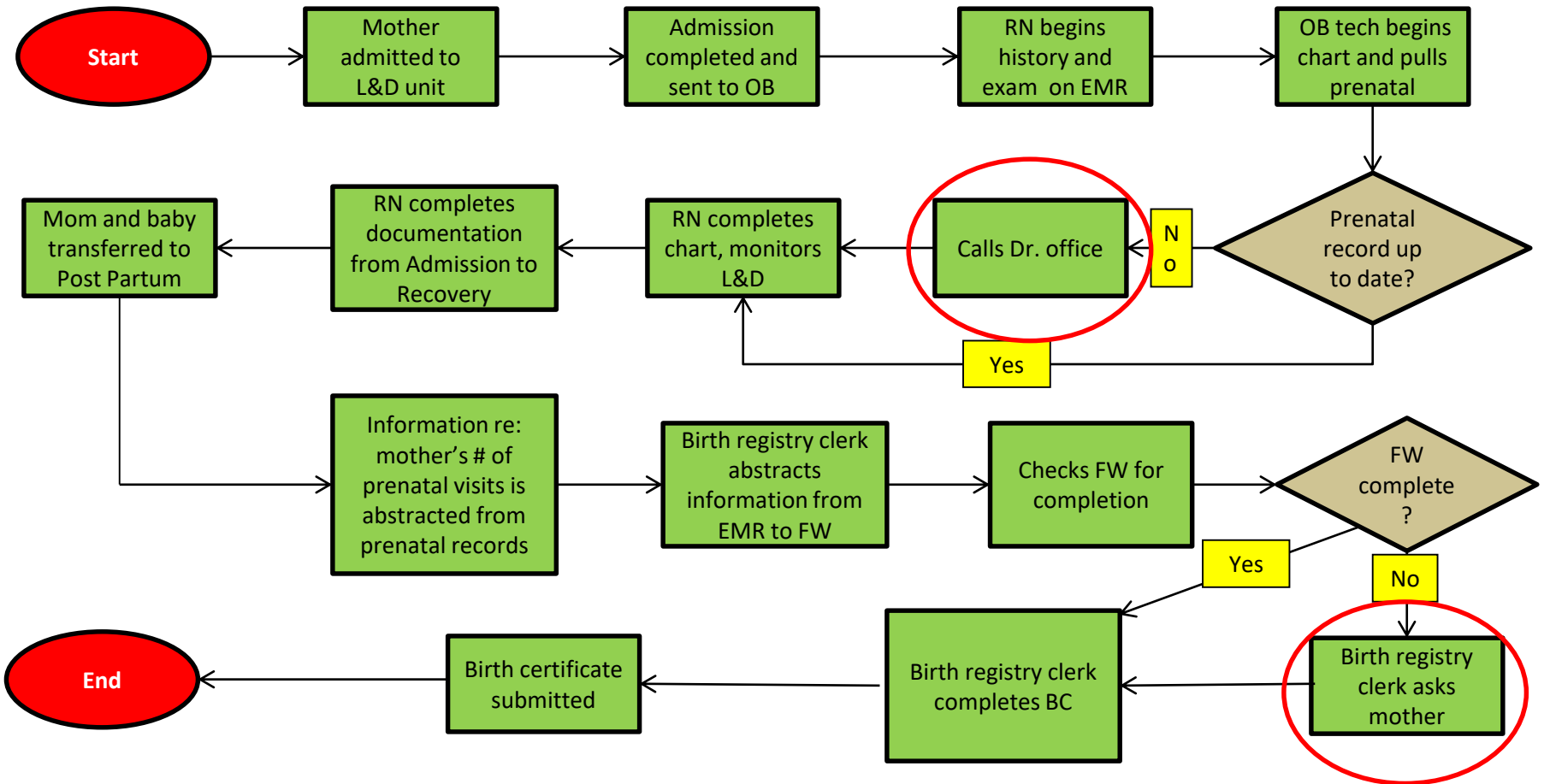
# Hospital Example



- **BC** – Birth Certificate
- **EMR** - Electronic Medical Record
- **FW** – Facility Worksheet
- **L&D** – Labor & Delivery

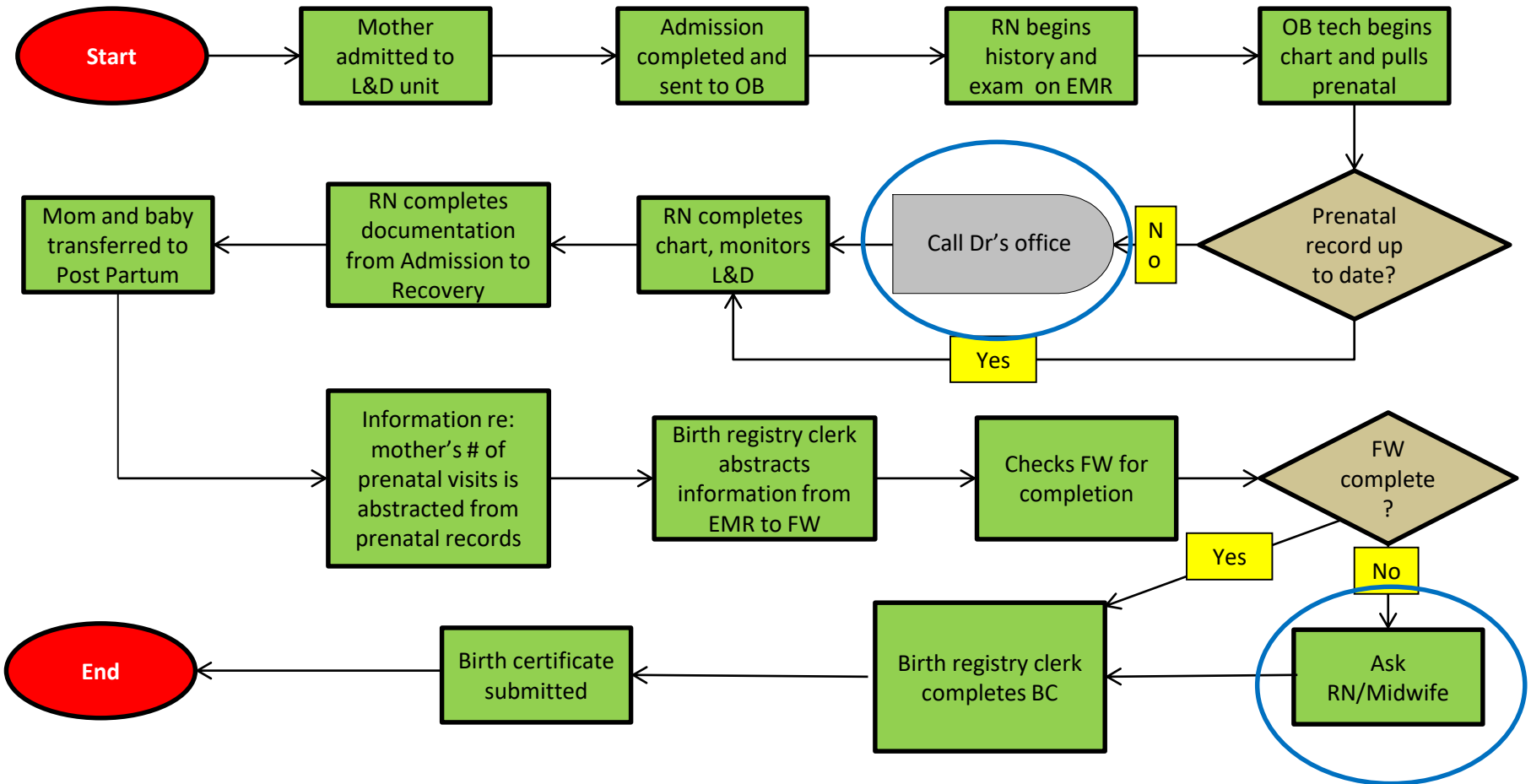
Adapted from OPQC

# Hospital Example



Adapted from OPQC

# Hospital Example



Adapted from OPQC



What is your experience with  
***'Total Number of Prenatal Visits'?***



# Potential Issues

## Access to the prenatal record

- Benefit of electronic medical record
- Call doctor's office for prenatal records

## Prenatal record is not always complete

- Ask delivery physician or midwife
- Call doctor's office for complete prenatal records

## Asking the mother

- **Never** resort to asking mother how many prenatal visits she had
- Studies show that mother's recollection is least accurate compared to medical records (Clark, Fu & Burnett, 1997)

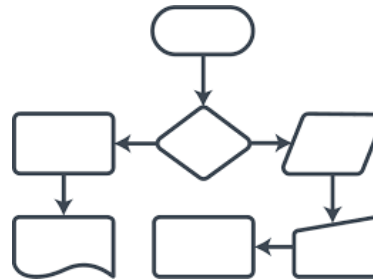
# Improvement Strategies

- 👤 Data collection procedures – Process Map?
- 👤 Training of hospital staff
- 👤 Communication between clinical and clerical birth registry staff
- 👤 Audits of hospital records



# Process Mapping Summary

- 👤 Process maps can identify who, when, what
- 👤 Provide valuable insights into how your hospital can improve processes
- 👤 When important information is presented visually, it ↑ understanding and collaboration for any project
- 👤 Changes in process of gathering data at birth facility, & ↑ training of BC clerks will help improve BC data accuracy



# Important Reminders

# Reminders

- 👶 A total of **10 audits** should be submitted monthly, including births <34 weeks
- 👶 **Prenatal visits** – for cases where mothers are coming from other countries and have no local prenatal records, **do not** ask the mother. Instead enter it as ‘Unknown’.
- 👶 **Weight** variables have a little leeway ( $\pm$  values) for audits.
- 👶 **Cesarean** variable includes audit of vaginal deliveries.

# Weight variables

Variable	Birth Certificate	Medical Record	Audit Disagreement
Weight of infant at birth ( $\pm$ 1oz or 30g)	3000g	3000g	No
Weight of infant at birth ( $\pm$ 1oz or 30g)	3000g	2980g	No
Weight of infant at birth ( $\pm$ 1oz or 30g)	3000g	3085g	Yes

# Cesarean

Variable	Birth Certificate	Medical Record	Audit Disagreement
Cesarean delivery	Cesarean	Cesarean	No
Cesarean delivery	Vaginal	Vaginal	No
Cesarean delivery	Vaginal	Cesarean	Yes
Cesarean delivery	Cesarean	Vaginal	Yes



# Upcoming Webinar

# Upcoming Webinar

**September 27<sup>th</sup>, 2018:**

*Improving Reporting Accuracy: ‘Prepregnancy Weight’*

- What issues have you been finding with this variable?

Comments?  
Questions?

# Thank you!

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