



# Partnering to Improve Health Care Quality for Mothers and Babies

Promoting Primary Vaginal Deliveries (PROVIDE) Initiative

## **BASELINE AND PROSPECTIVE DATA COLLECTION**

### **Submission Instructions**

For both baseline AND prospective data collection, you will audit the hospital record using the same PROVIDE data form and submit each individual chart audit data via the REDCap link that was sent to your Data Lead. **Please bookmark or save this link.**

### **BASELINE DATA**

For Baseline data collection, please audit the hospital record and complete the REDCap data submission form for **up to 20** NTSV C-sections per month, for 3 months (**July, August, and September 2017**) to determine what your hospital's main focus area(s) will be. *You should not have picked a focus area, yet.* Please submit on ALL areas during baseline.

Some hospitals will not have 20 NTSV cesareans in one month; submit all that you have. If more than 20, please audit the first 20 each month.

For **Baseline data collection ONLY**, you may select 'Other' as the case's category area. This option will not be available during your prospective data submission. Please see the category area definitions below to determine whether your case audit may fall into the 'other' category.

#### **Cesarean Category Definitions**

- **Cesarean with Induction** = cases that are NTSV per TJC ( $\geq 37$  weeks, parity 0, single gestation pregnancy, vertex fetal presentation), and were induced labor and had a cesarean birth for labor arrest, excluding those with birth weight  $\geq 4250$ g or with ICD-10 codes for: ·Fetal heart rate concern or ·Medical indication for cesarean section\*
- **Cesarean for Labor Dystocia** = cases that are NTSV per TJC ( $\geq 37$  weeks, parity 0, single gestation pregnancy, vertex fetal presentation), and were spontaneous labor and had a cesarean for labor arrest, excluding those with birth weight  $\geq 4250$ g or with ICD-10 codes for: ·Fetal heart rate concern or ·Medical indication for cesarean section\*
- **Cesarean for Fetal Heart Rate Concern** = cases that are NTSV per TJC ( $\geq 37$  weeks, parity 0, single gestation pregnancy, vertex fetal presentation), and had a cesarean for fetal heart rate (FHR) concern/indications, excluding those with birth weight  $\geq 4250$ g or with ICD-10 codes for: ·Labor arrest / CPD
- **Cesarean for Other Reason (Baseline Only)** = Cases that are NTSV per TJC ( $\geq 37$  weeks, parity 0, single gestation pregnancy, vertex fetal presentation), might include birth weights  $\geq 4250$  g, or with ICD-10 codes for medical indication for cesarean, or cesarean delivery at maternal request.

❖ **Study ID:** This is a number that you choose to assign to the patient whose chart you are auditing. We suggest beginning with 001 and counting up from there, and putting this Study ID# in your own on-site log so you know to which patient chart the data correspond. This will help you keep track so that you can go back and check on previous patient charts to review cases.

At the very bottom of the page there are two buttons: “Submit” and “Save & Return Later”. You can save and return later, but you must remember to click Submit for us to receive your data entry.

**Baseline Data is due December 1<sup>st</sup>!** We will have baseline quality improvement data reports back to you by January.

### **PROSPECTIVE DATA**

Prospective data submission begins in January, when the initiative officially starts. By this point, we hope you will have reviewed your baseline data report and chosen your priority focus area(s).

For Prospective data collection, please audit the hospital record and complete the REDCap data submission form for **up to 20** NTSCV C-sections per month on **ONE** (or more, if you choose) of the 3 primary indication areas\*: Induction, Labor Dystocia, and/or Fetal Heart Rate Concern. If more than 20 NTSCV C-sections, please audit the first 20 each month.

Submit one REDCap survey per chart audit each month. For example, if you have audited 20 charts for the month, you will submit 20 REDCap surveys for the month.

**Prospective Data for each month is due by the 15<sup>th</sup> of the following month** (for example, January NTSV cesarean chart audits will be due by February 15<sup>th</sup>). This will allow us to return monthly quality improvement data reports to you by the end of each month so that you can track your progress.

### **DATA FORMS**

The most updated data audit sheets, data entry instructions, FAQ answers, the measurement grid, and more will always be posted at the online [PROVIDE Tool Box](#) under “Data Resources”.