



# Quality Improvement Data Reports

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Partnering to Improve Health Care Quality  
for Mothers and Babies

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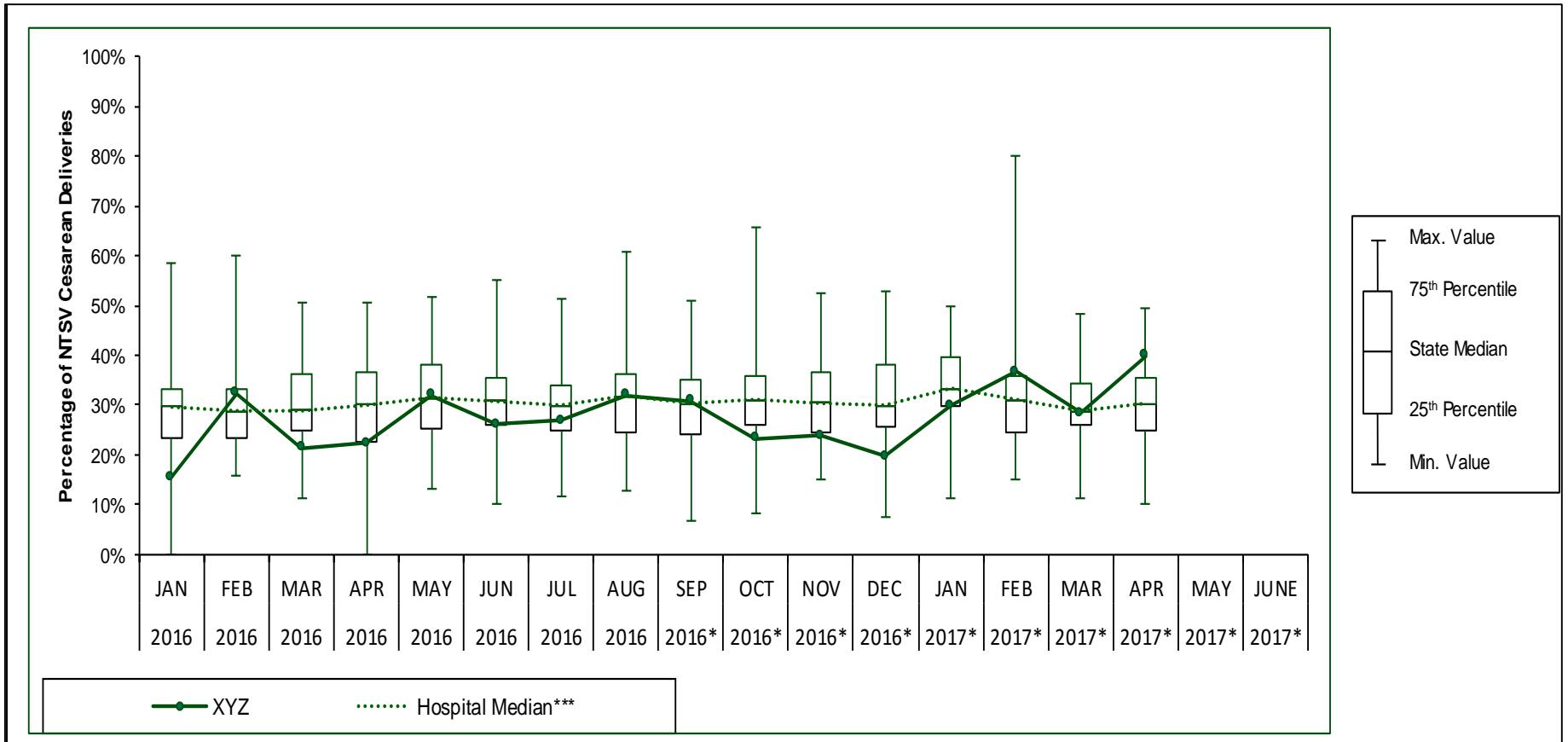
**PROVIDE's Goal:** To improve maternal and newborn outcomes by applying evidence-based interventions to promote primary vaginal deliveries at Florida delivery hospitals and ultimately reduce NTSV cesareans.

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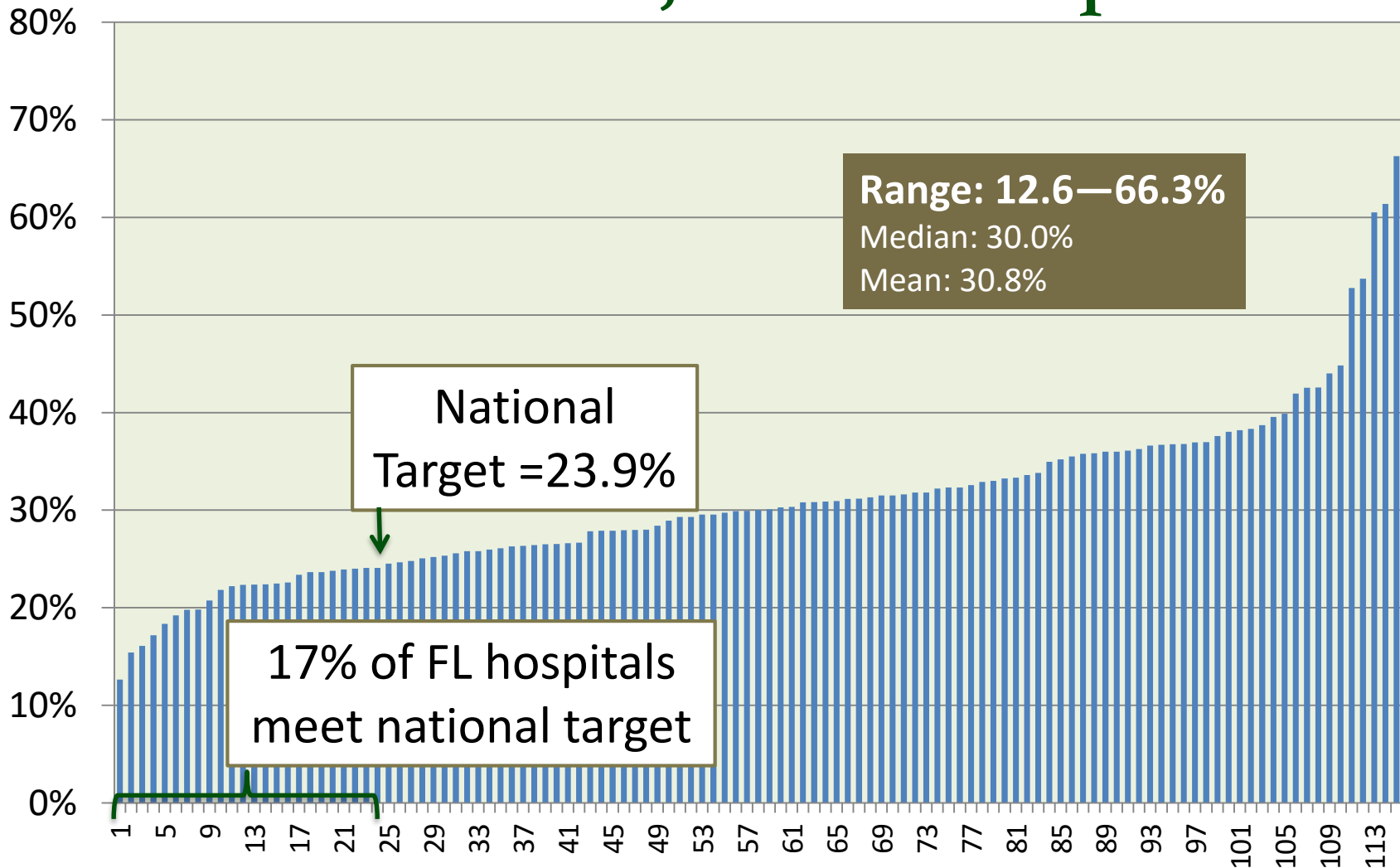


# Percent of Cesarean Deliveries Among NTSV Births For Sample Delivery Hospital, Jan 2016 – Apr 2017

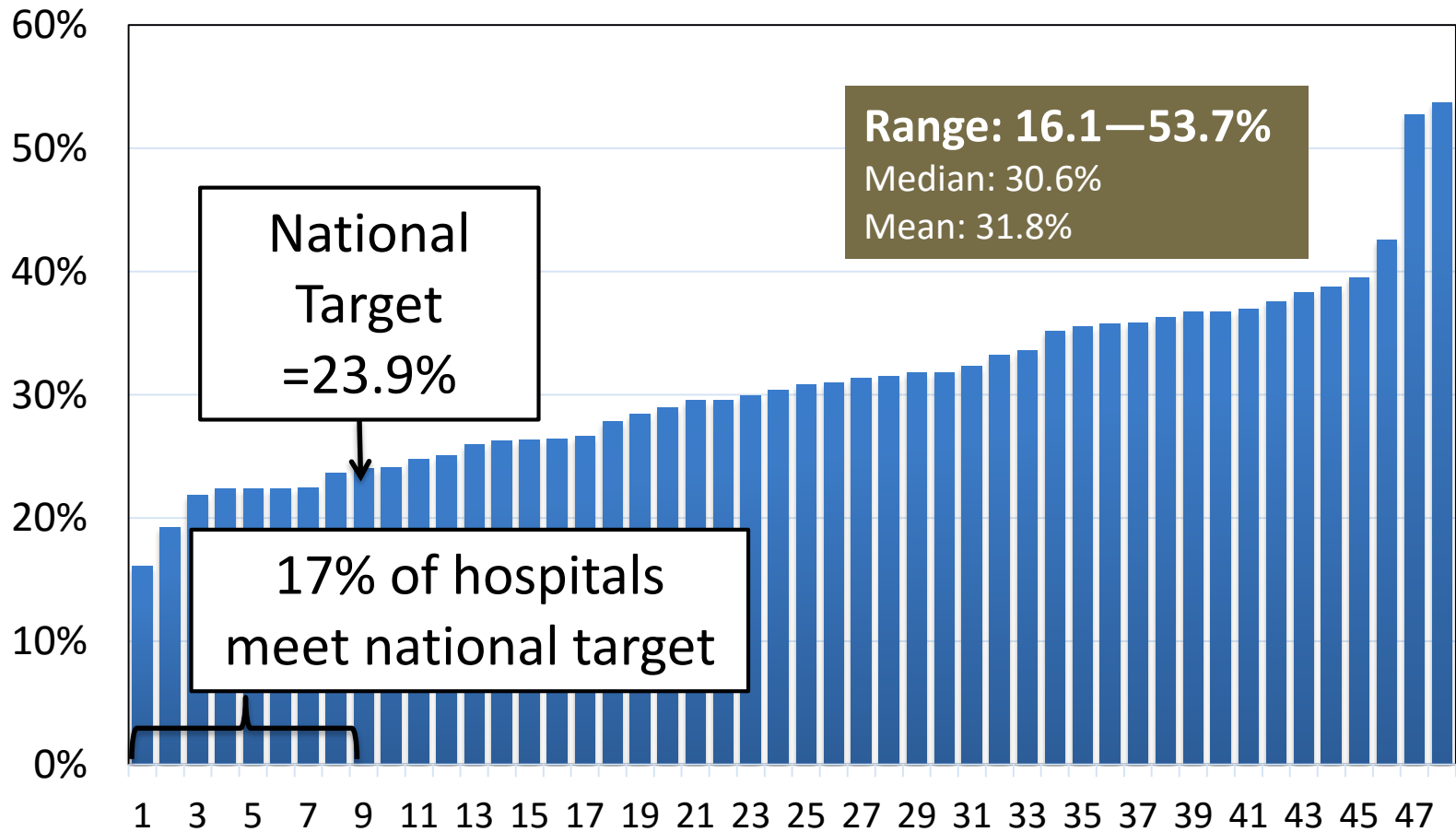


# Low-Risk First-Birth (Nulliparous Term Singleton Vertex)

## Cesarean Rate, 115 FL Hospitals



# Low-Risk First-Birth (Nulliparous Term Singleton Vertex) Cesarean Rate, 48 PROVIDE Hospitals



# PROVIDE Outcome Measures

Indicator	Time Period	Data Source
Severe Maternal Morbidity	Semi-annually	Hosp. Disch.
Severe Maternal Morbidity (excluding transfusion codes)	Semi-annually	Hosp. Disch.
Cesarean Delivery Rate among NTSV Live Births	Monthly	Birth Cert.
Cesarean Delivery Rate among NTSV Live Births after Labor Induction	Monthly	Birth Cert.

# PROVIDE Balancing Measures

Indicator	Time Period	Data Source
5 min Apgar < or = 5 among NTSV Vaginal Births	Monthly	Birth Cert.
3 <sup>rd</sup> & 4 <sup>th</sup> Degree Lacerations Among NTSV Vaginal Births	Semi-annually	Hosp. Disch.
Severe Unexpected Newborn Complications Among NTSV Vaginal Births	Semi-annually	Hosp. Disch.

# PROVIDE Process Measures

## “Those Deliveries Not Meeting Criteria”

Indicator	Time Period	Data Source
Labor Dystocia Failure to Progress	Monthly	Chart Audit
Induction	Monthly	Chart Audit
Fetal Heart Rate Concerns	Monthly	Chart Audit



# Process Criteria

## “See Back Page of Chart Audit Form”

### Definitions and Clinical Criteria

Primary Indication for NTSV Cesarean	Fall out if these not met:	Reference
<b>Labor Dystocia/Failure to Progress</b>	<p>Chart Review: looking for Yes answers to the following (a no answer would indicate inconsistency with the ACOG guidelines):</p> <ul style="list-style-type: none"> <li>• If &lt;6cm dilated, automatic fallout</li> <li>• If 6-10cm dilated, was there at least 4h with adequate uterine activity or at least 6h with inadequate uterine activity and with oxytocin?</li> <li>• If completely dilated, was there 3h or more in Second Stage (4h with epidural)?</li> </ul>	<p>ACOG/SMFM criteria (Ob Gyn 2014;123:693–711)</p> <p>CMQCC</p>
<b>Failed Induction</b>	<p>Chart Review: looking for Yes answers to the following (a no answer would indicate inconsistency with the ACOG guidelines):</p> <ul style="list-style-type: none"> <li>• If &lt;6cm dilated, were there at least 12 hours of oxytocin after rupture of membranes?</li> <li>• If 6-10cm dilated, was there at least 4h with adequate uterine activity or at least 6h with inadequate uterine activity and with oxytocin? (identical to the question for Labor arrest/CPD above)</li> <li>• If completely dilated, was there 3h or more in Second Stage (4h with epidural)?</li> </ul>	<p>ACOG/SMFM criteria (Ob Gyn 2014;123:693–711)</p> <p>CMQCC</p>
<b>Fetal Heart Rate Concern</b>	<p>Cesarean deliveries performed for “fetal heart rate concern” using listed resuscitation techniques listed below based on the FPQC FHR Concern algorithm:</p> <ul style="list-style-type: none"> <li>• Antepartum testing which preclude labor: no techniques required.</li> <li>• All Cat. II and III FHR concerns should use some techniques listed under “any intrauterine resuscitation efforts.”</li> <li>• Category Cat. II FHR concerns should also use additional techniques if the following: <ul style="list-style-type: none"> <li>○ Receiving oxytocin—reduced or stopped oxytocin</li> <li>○ Clinically significant variable decelerations—possibly Amnioinfusion (not required)</li> <li>○ Minimal/absent variability—elicited stimulation</li> <li>○ Uterine tachysystole—any combination listed to correct</li> </ul> </li> </ul>	<p>Spong et al (Ob Gyn 2012;120:1181-93)</p> <p>Clark et al (AJOG 2013;209:89-97)</p> <p>ACOG/SMFM criteria (Ob Gyn 2014;123:693–711)</p> <p>CMQCC</p> <p>FPQC</p>

# Process Criteria

## “See Back Page of Chart Audit Form”

### Fetal Heart Rate Concern

Cesarean deliveries performed for “fetal heart rate concern” using listed resuscitation techniques listed below based on the FPQC FHR Concern algorithm:

- Antepartum testing which preclude labor: no techniques required.
- All Cat. II and III FHR concerns should use some techniques listed under “any intrauterine resuscitation efforts.”
- Category Cat. II FHR concerns should also use additional techniques if the following:
  - Receiving oxytocin—reduced or stopped oxytocin
  - Clinically significant variable decelerations—possibly Amnioinfusion (not required)
  - Minimal/absent variability—elicited stimulation
  - Uterine tachysystole—any combination listed to correct

# Structural Measures

## Collected Every 6 months by Survey

- 👤 Patient, Family & Staff Support
- 👤 Shared Decision Making
- 👤 Unit Policy & Procedures (6 categories)
- 👤 HER Integration (6 categories)
- 👤 Multidisciplinary Case Review (3 categories)
- 👤 Staff Education (Providers, Nurse, Topics)

# Hospital Reporting of Delivery Attendant NTSV Cesarean Rates

## Special Opportunity:

- 👤 FPQC will select 4-6 pilot hospitals
- 👤 Hospitals receive monthly named/coded attendant reports

## Eligibility:

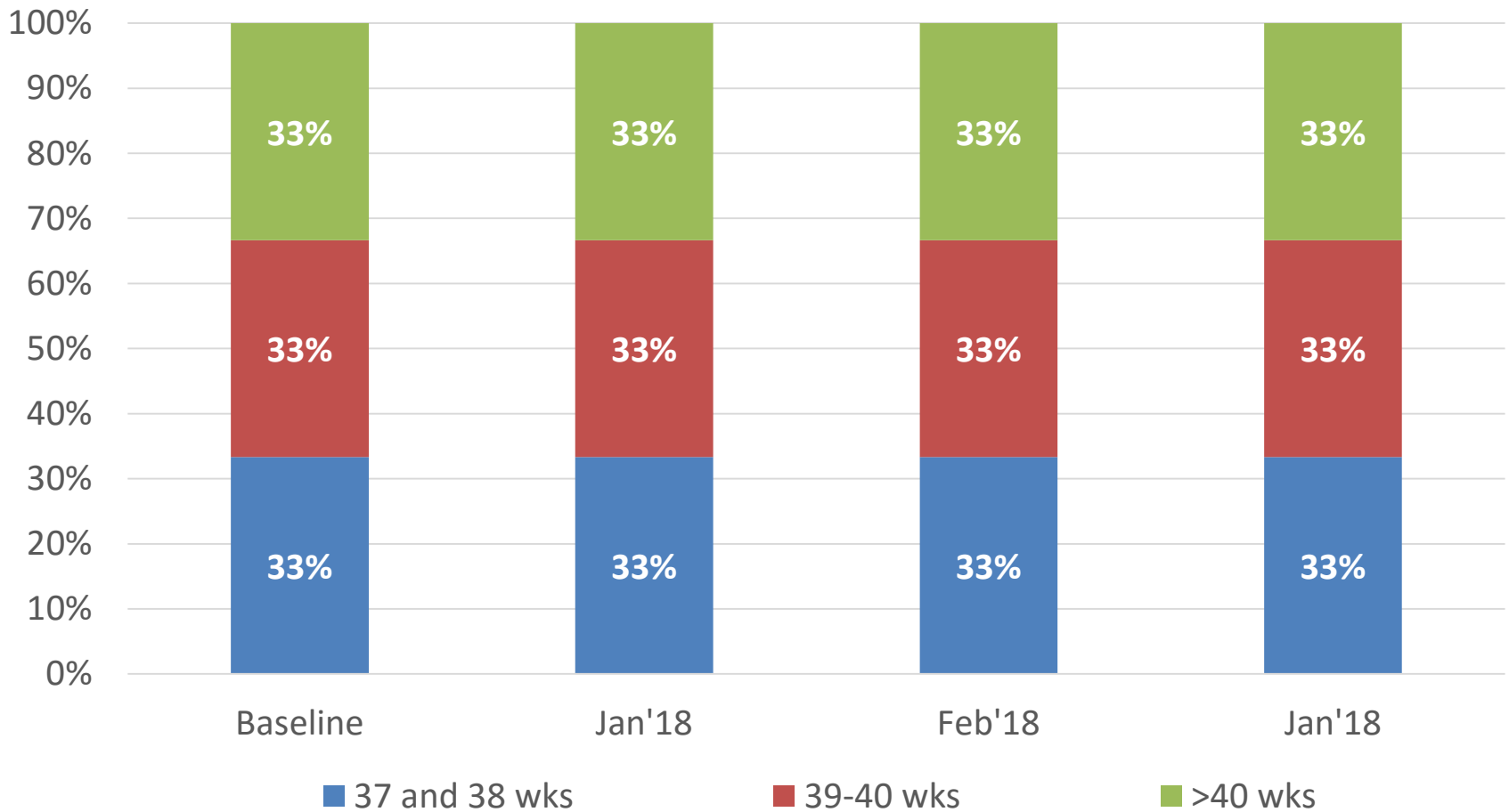
- 👤 CEO/Administrator and QI Team approval
- 👤 Will standardize attendant reporting on birth certificate
- 👤 Participate in required hospital report user training
- 👤 Provide ongoing feedback and suggestions to the FPQC



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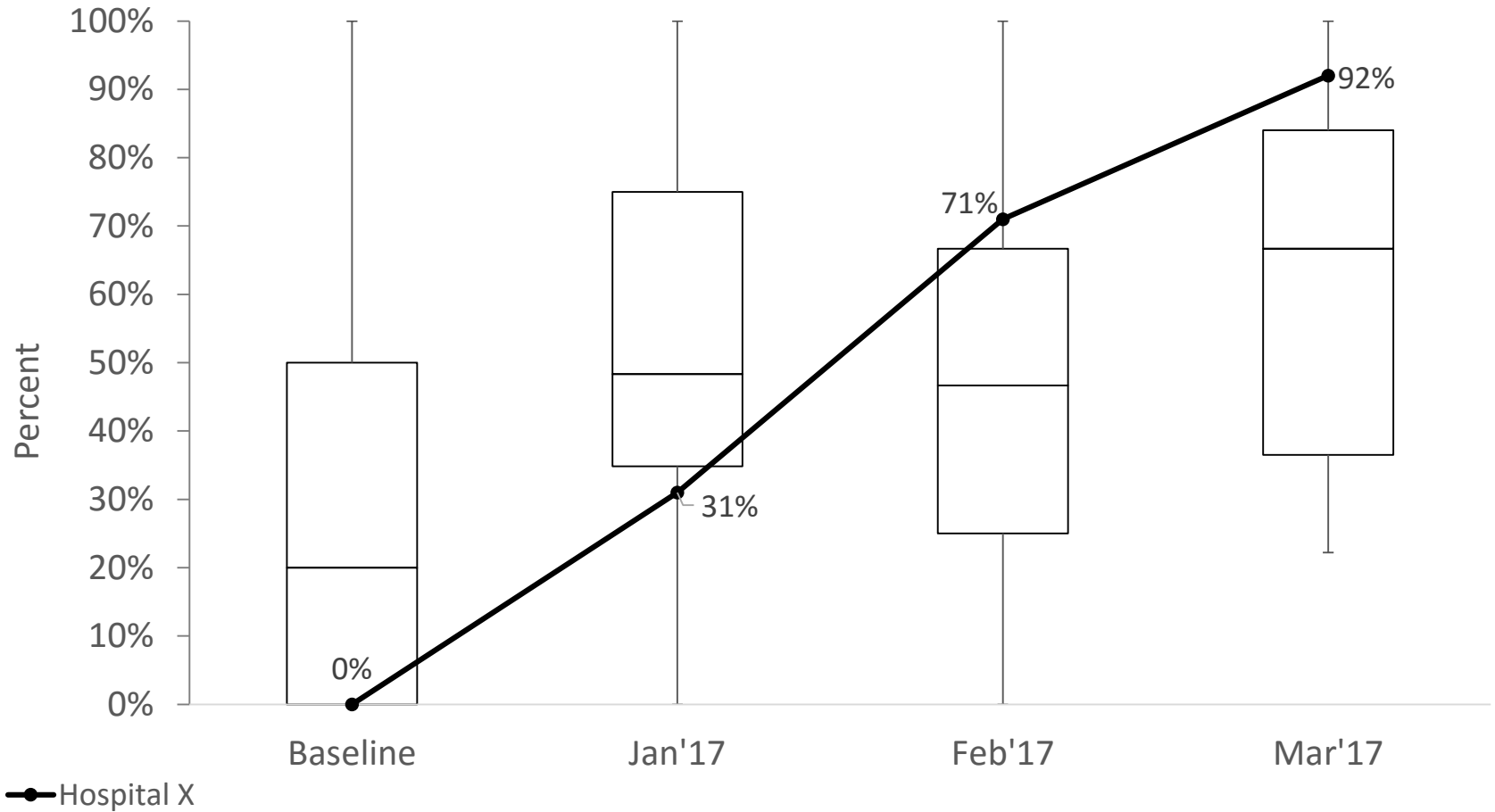
# INDUCTION CASE AUDIT

# I-1: Percent of NTSV Cesarean Deliveries with Failed Induction by Gestational Age



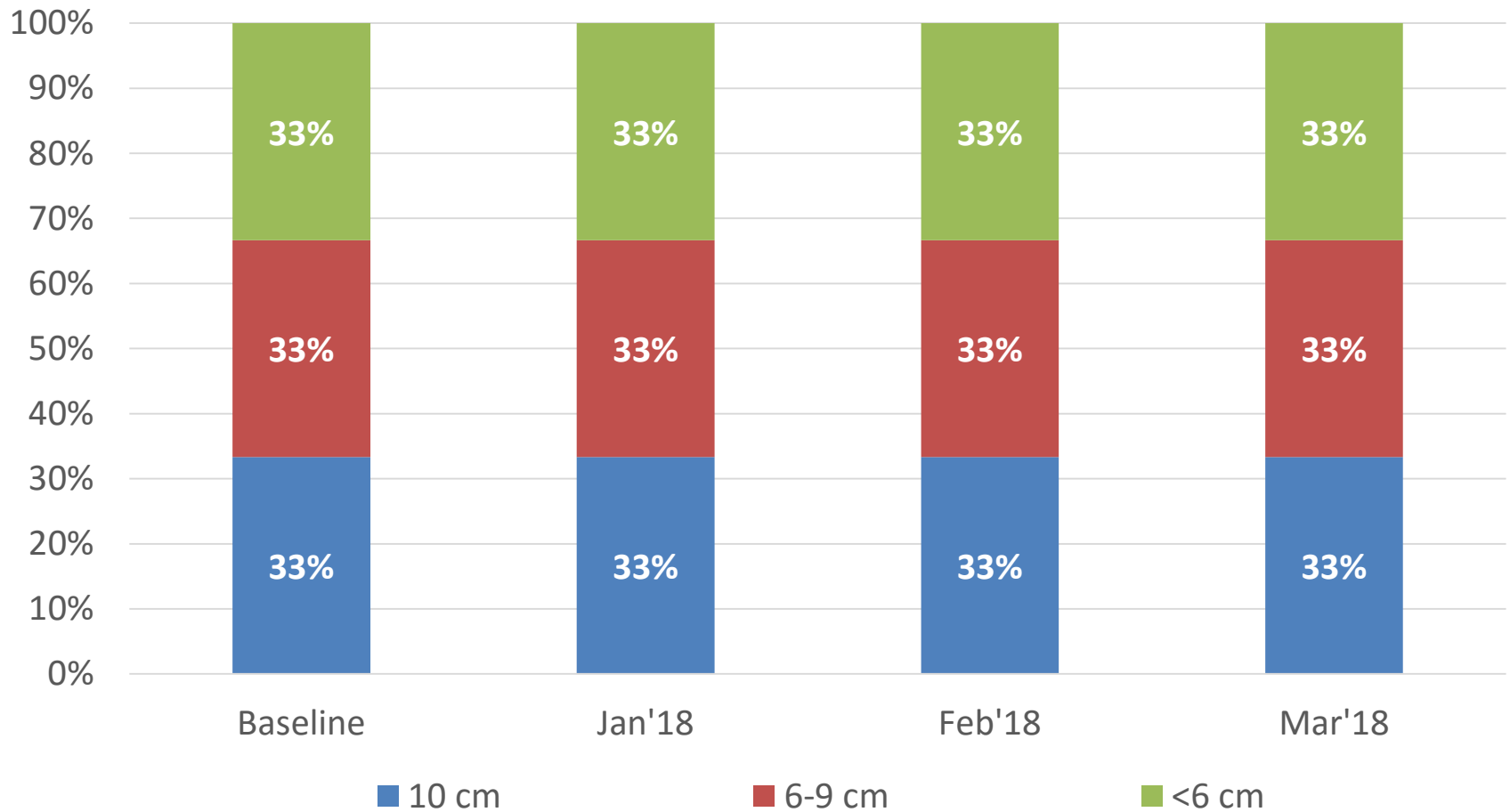
Data Source: Chart Audits

# I-2: Percent of NTSV Cesarean Deliveries with Failed Induction that Met ACOG/SMFM Criteria



Data Source: Chart Audits

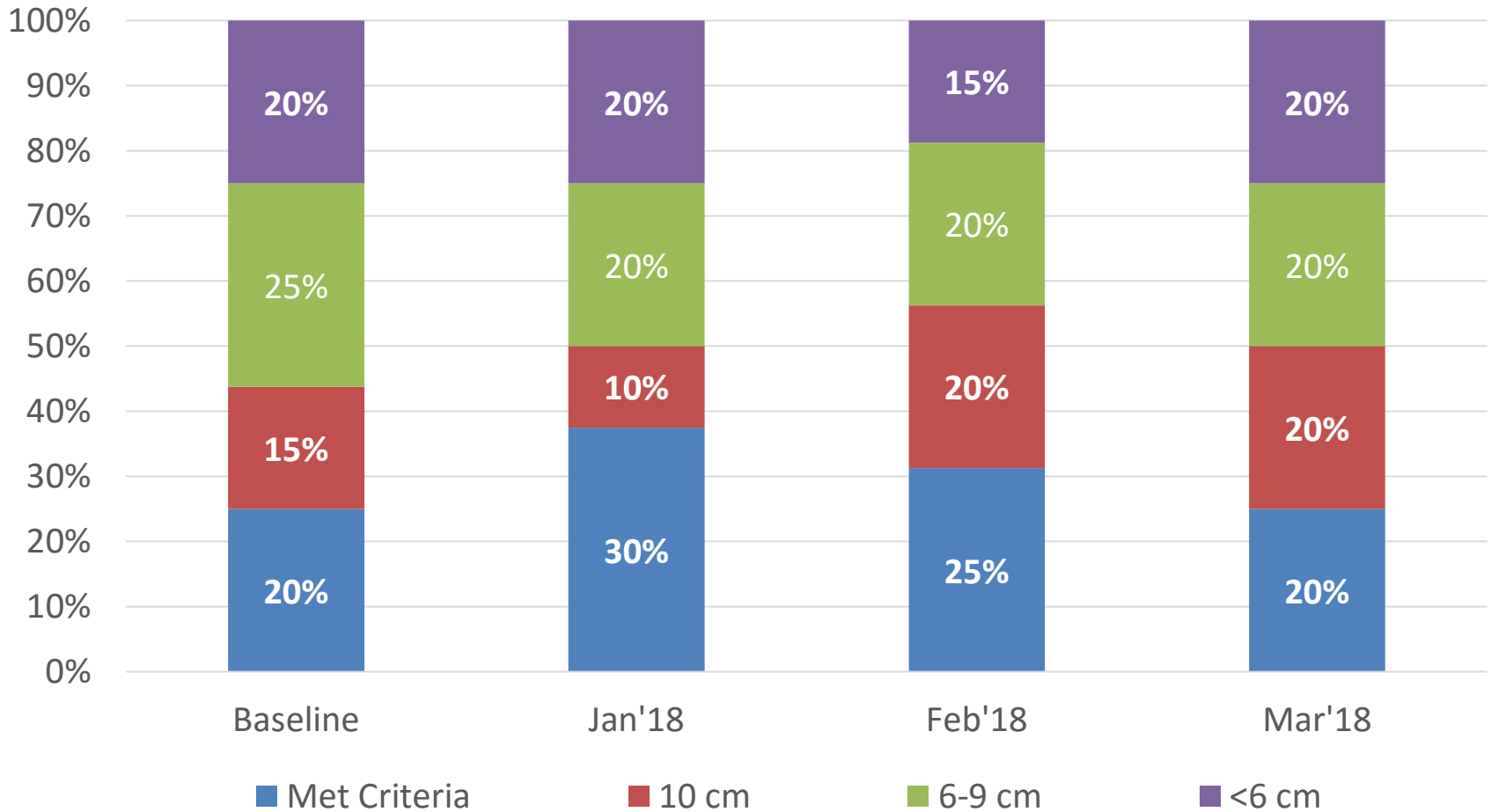
# I-3. Percent of NTSV Cesarean Deliveries with Failed Induction by Cervix Dilation at Delivery



Data Source: Chart Audits

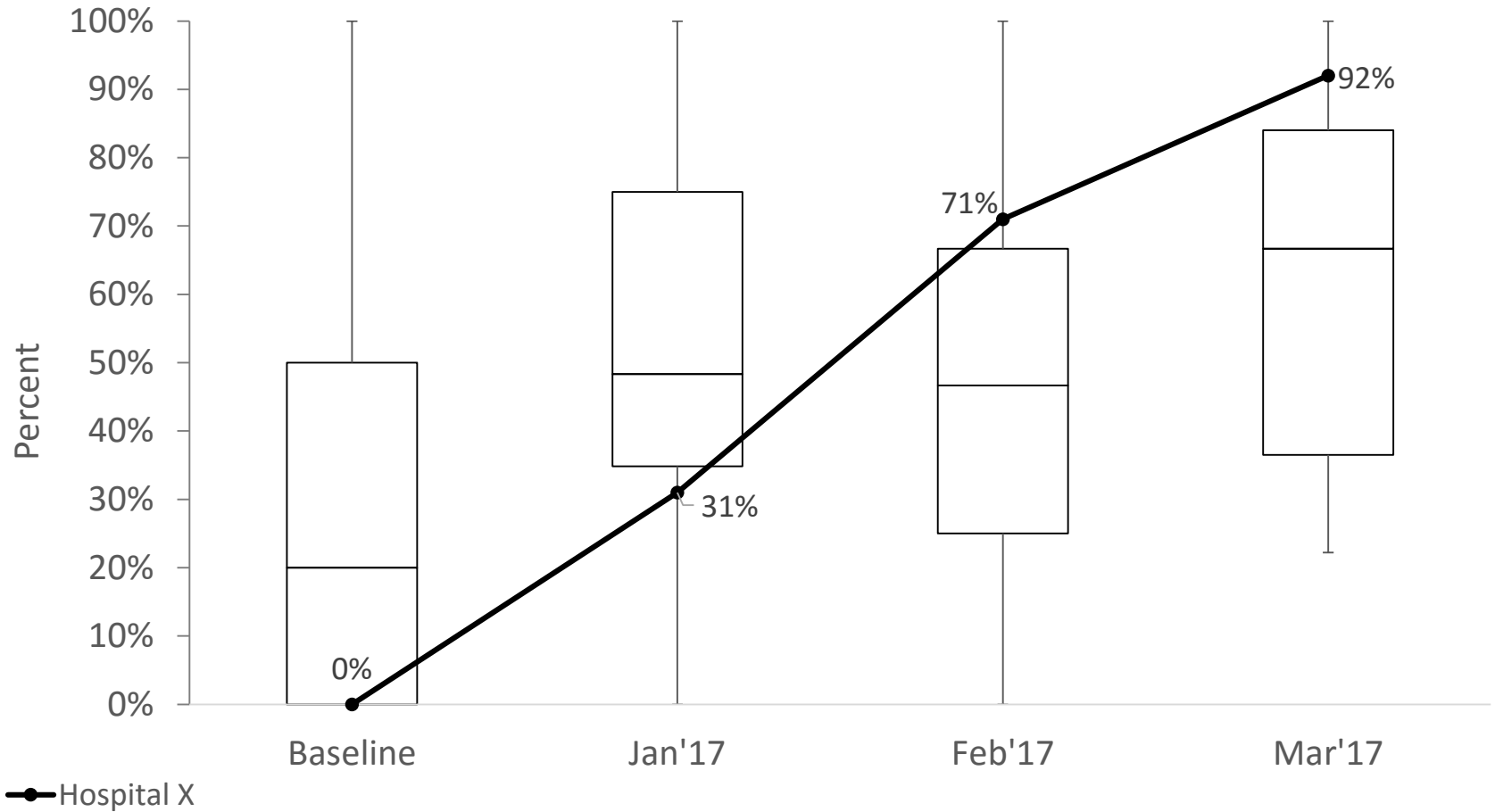


# I-4: Percent of Cesarean Deliveries with Failed Induction that Did Not Meet ACOG/SMFM Criteria by Cervical Dilatation



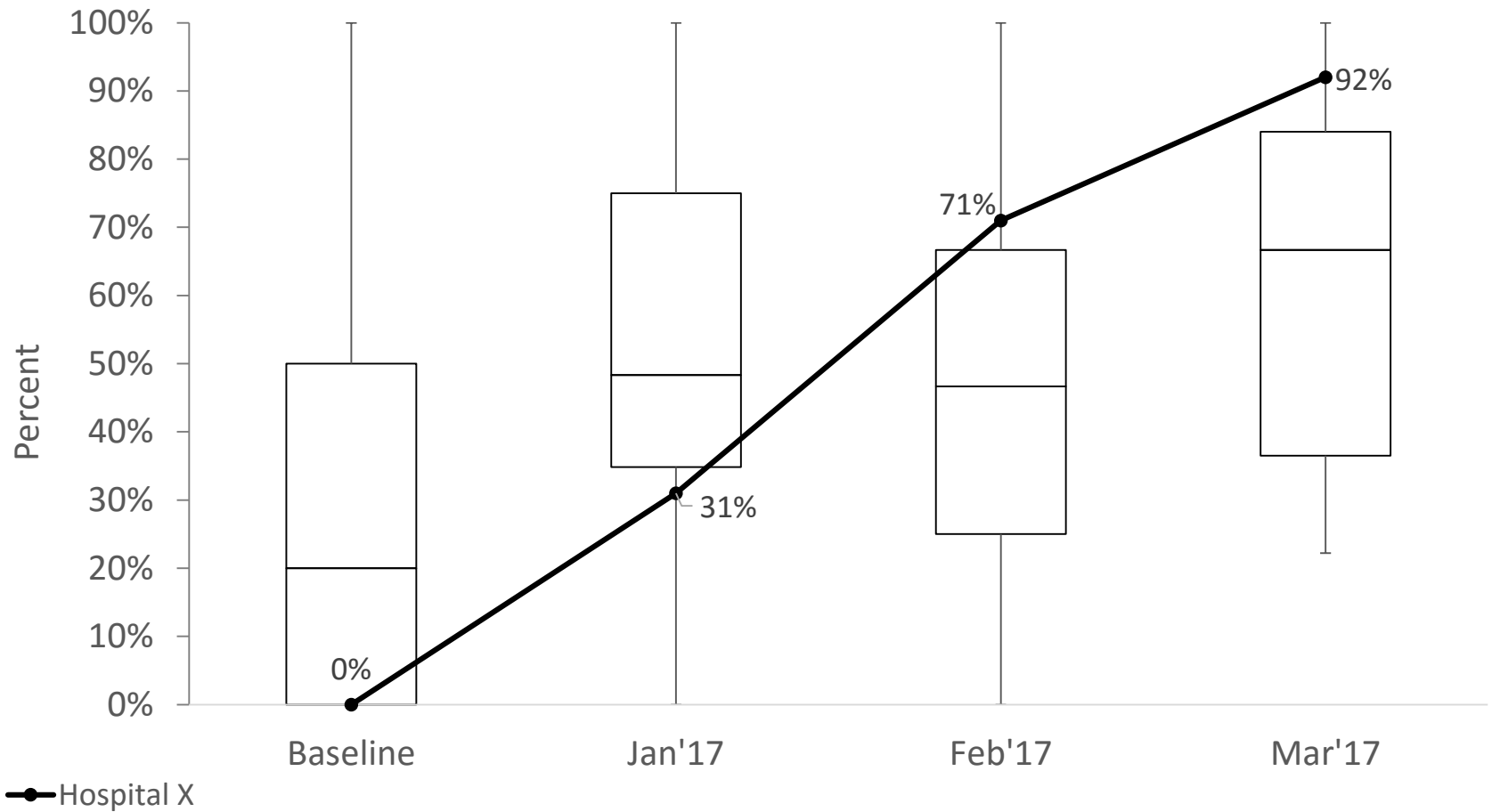
Data Source: Chart Audits

# I-5: Percent of NTSV Cesarean Deliveries with Failed Induction that Met ACOG/SMFM Criteria - <6 cm



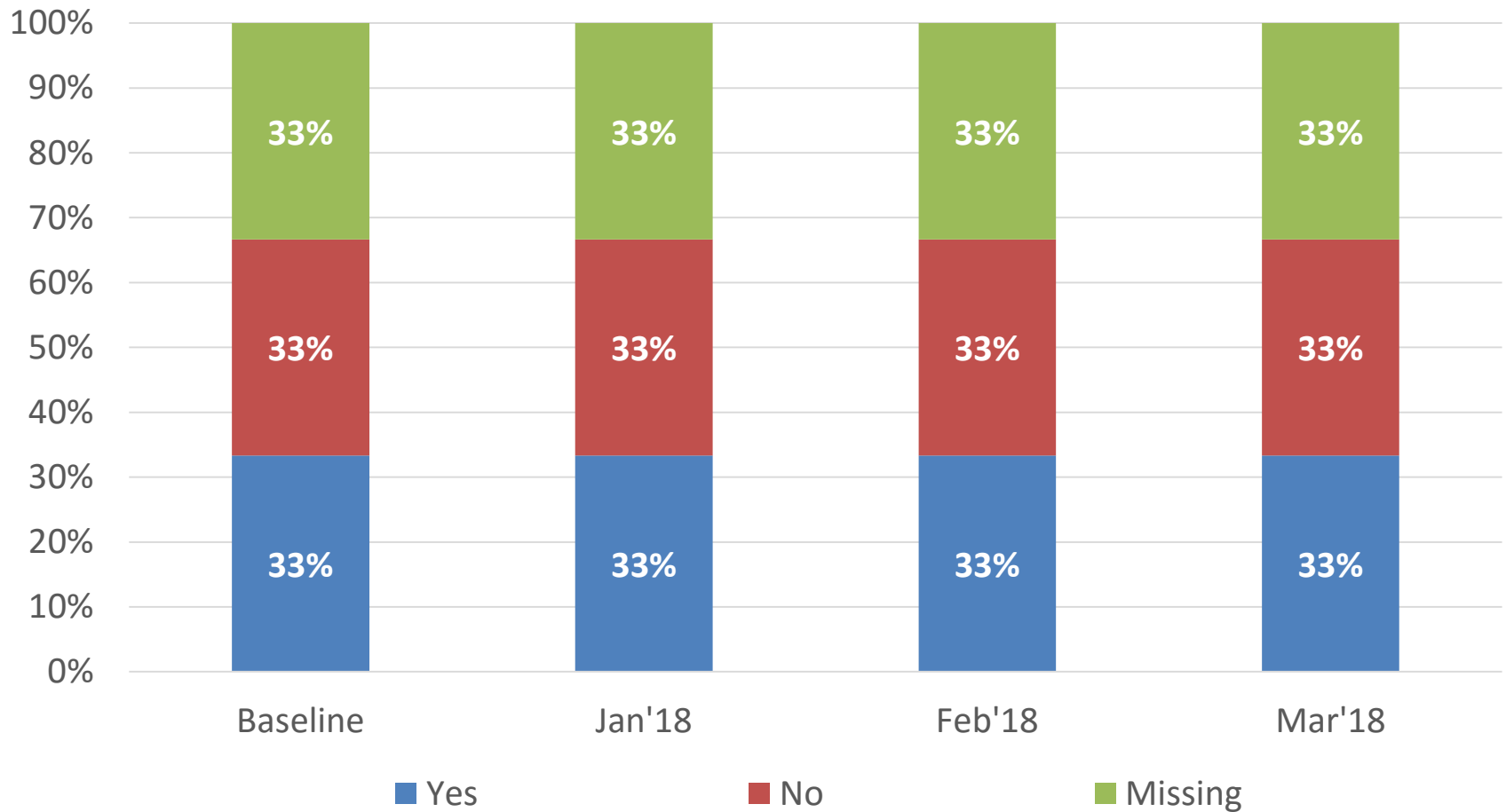
Data Source: Chart Audits

# I-6: Percent of NTSV Cesarean Deliveries with Failed Induction that Met ACOG/SMFM Criteria – 6-9 cm



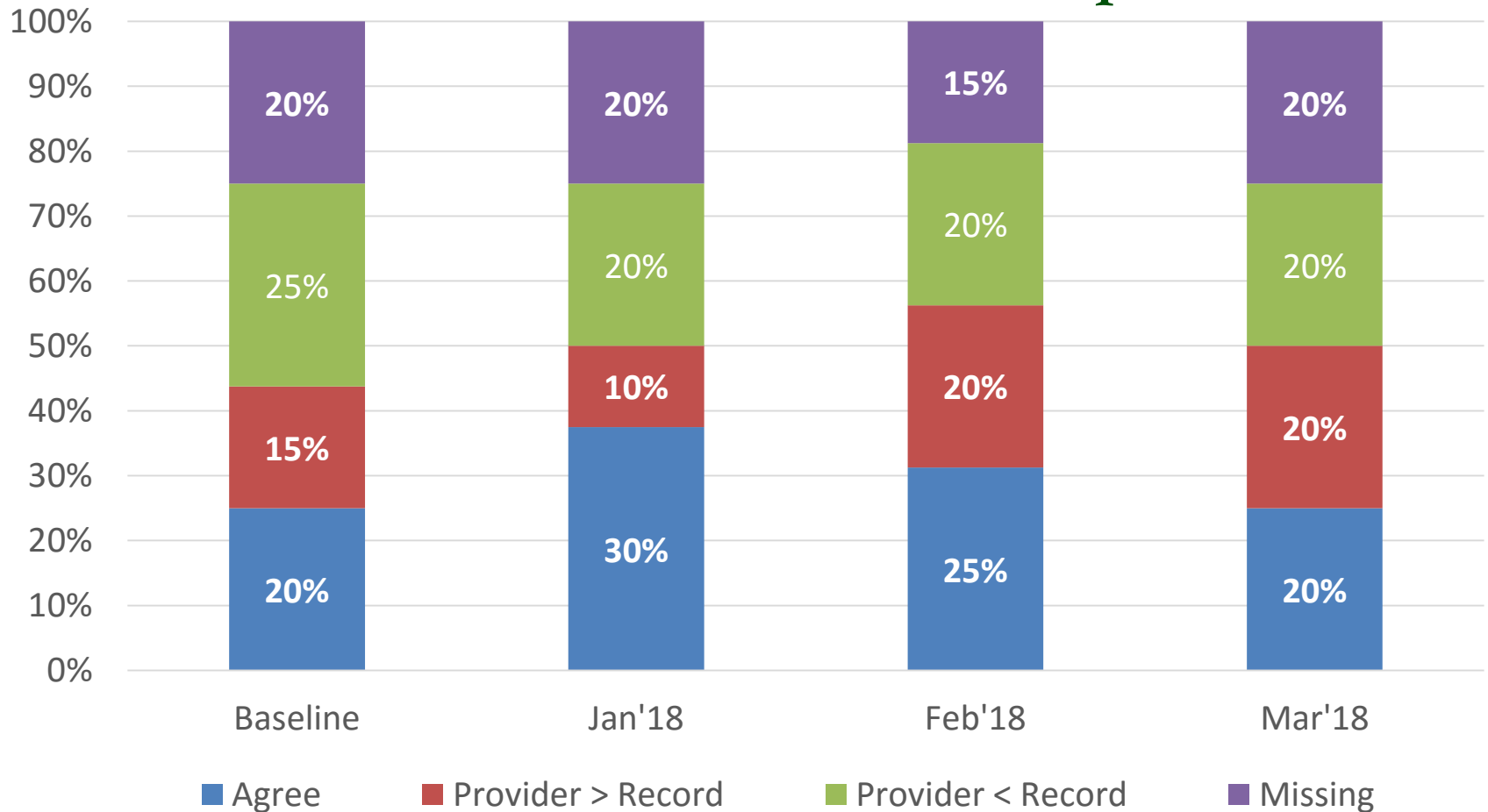
Data Source: Chart Audits

# I-7. Percent of NTSV Cesarean Deliveries with Failed Induction that Met ACOG/SMFM Criteria – 10 cm



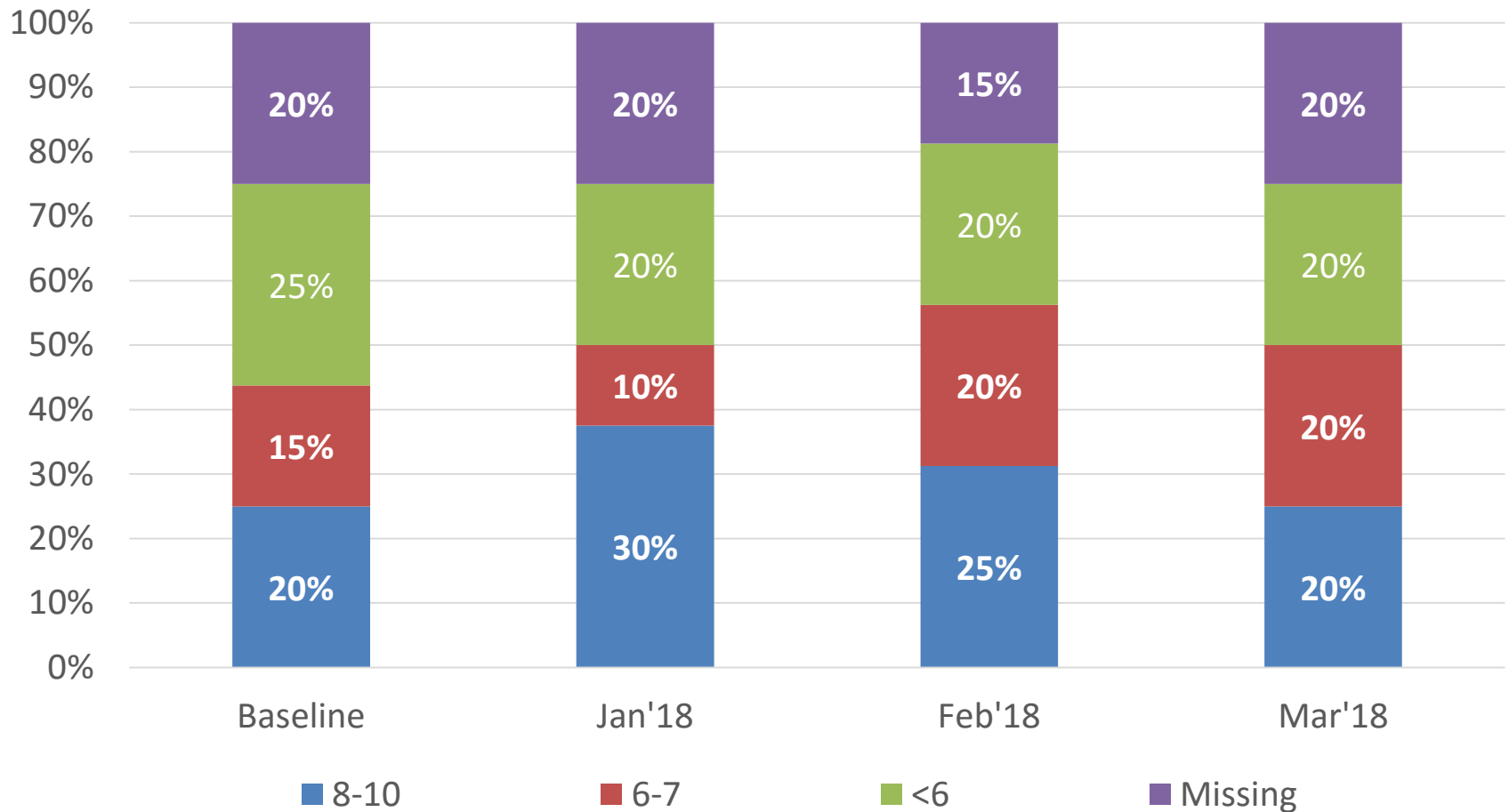
Data Source: Chart Audits

# I-8: Percent of NTSV Cesarean Deliveries with Failed Induction by Bishop Score Agreement at Time of Induction between Provider and Hospital Record



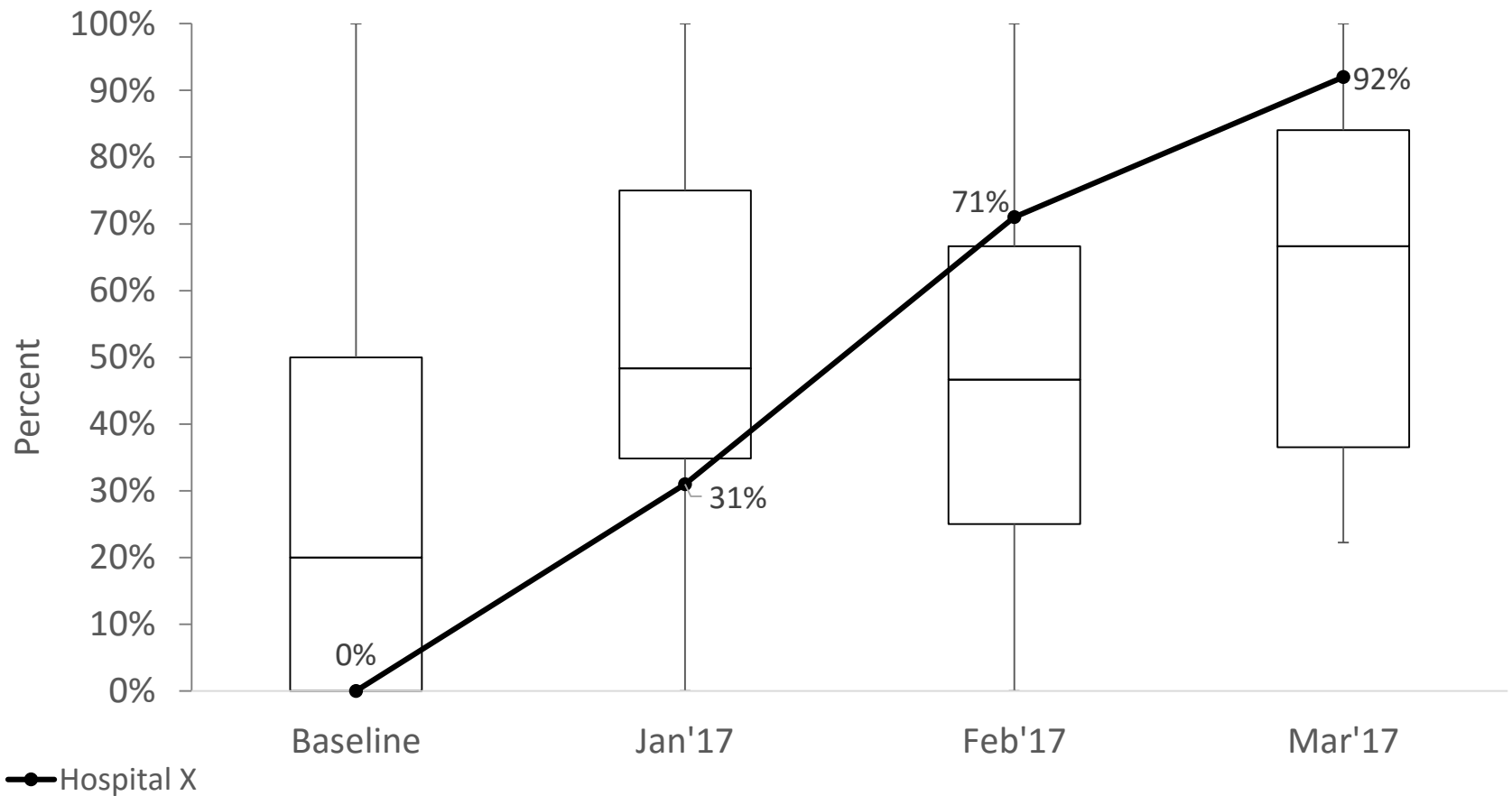
Data Source: Chart Audits

# I-9: Percent of NTSV Cesarean Deliveries with Failed Induction by Bishop Score at Time of Induction



Data Source: Chart Audits

# I-10: Percent of All NTSV Cesarean Deliveries with Failed Induction and a Bishop Score <8 with Cervical Ripening Agent Used



Data Source: Chart Audits

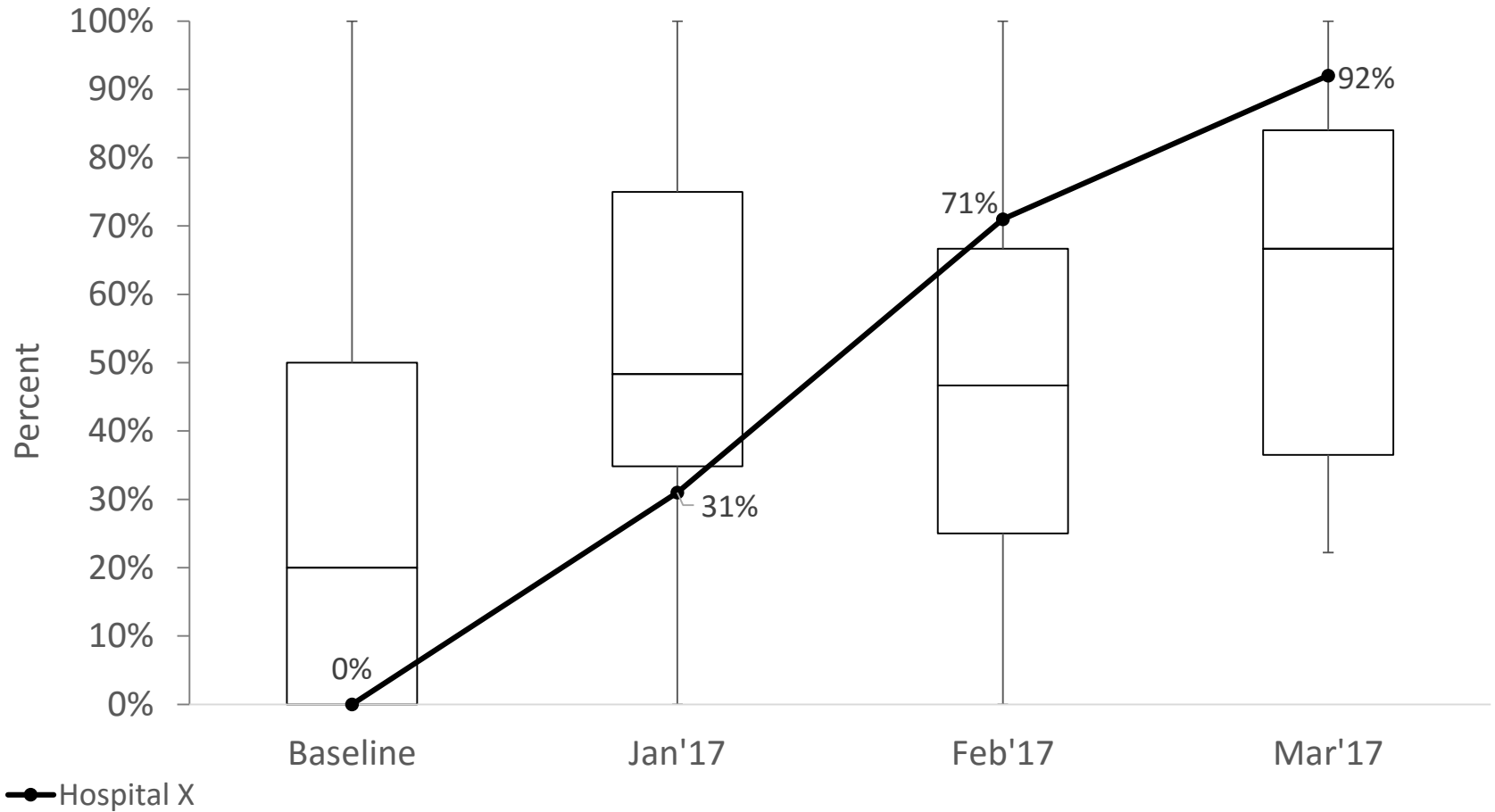


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# LABOR DYSTOCIA/FAILURE TO PROGRESS AUDIT

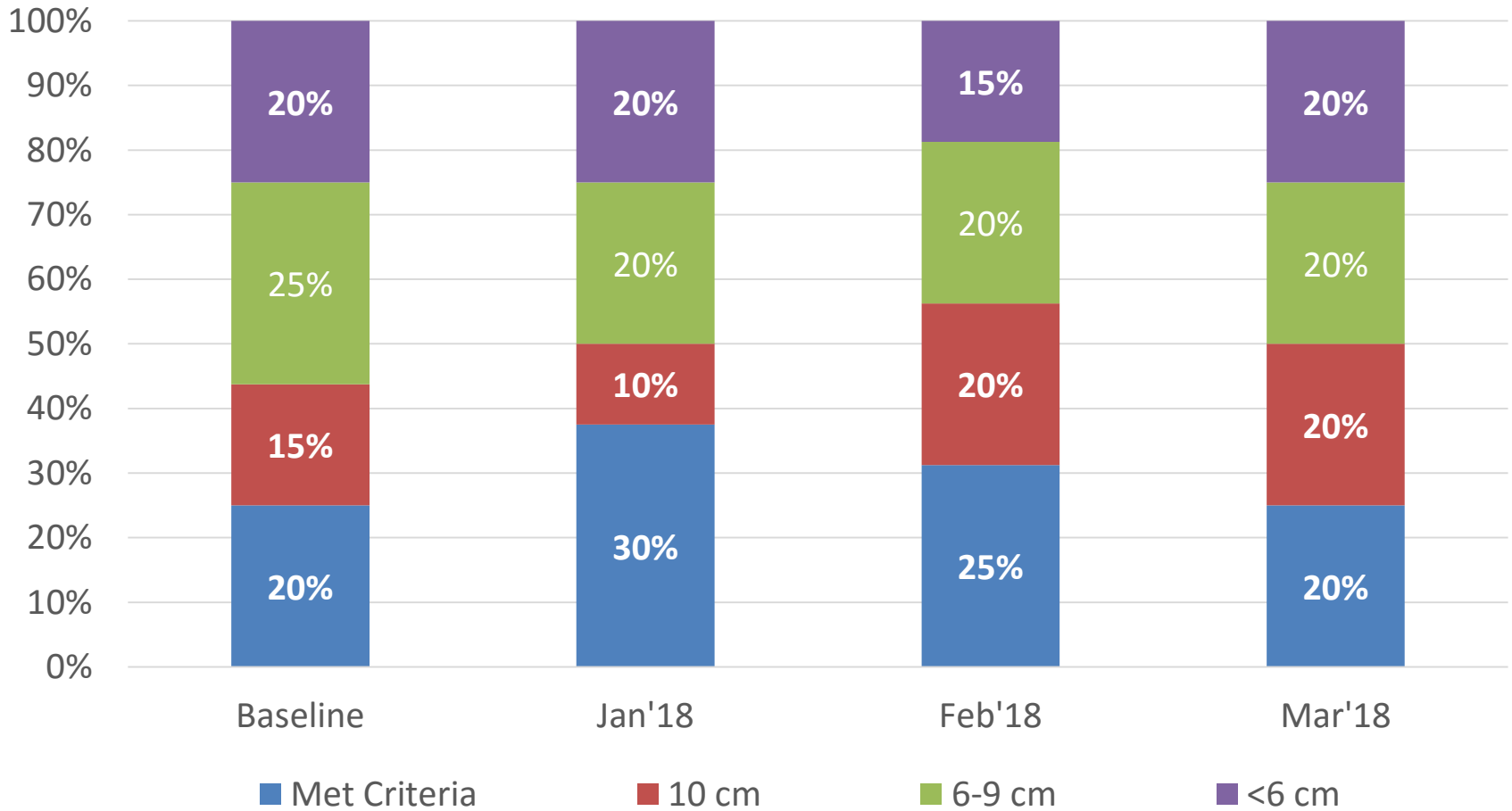


# D-1: Percent of NTSV Cesarean Deliveries with Dystocia that Met ACOG/SMFM Criteria



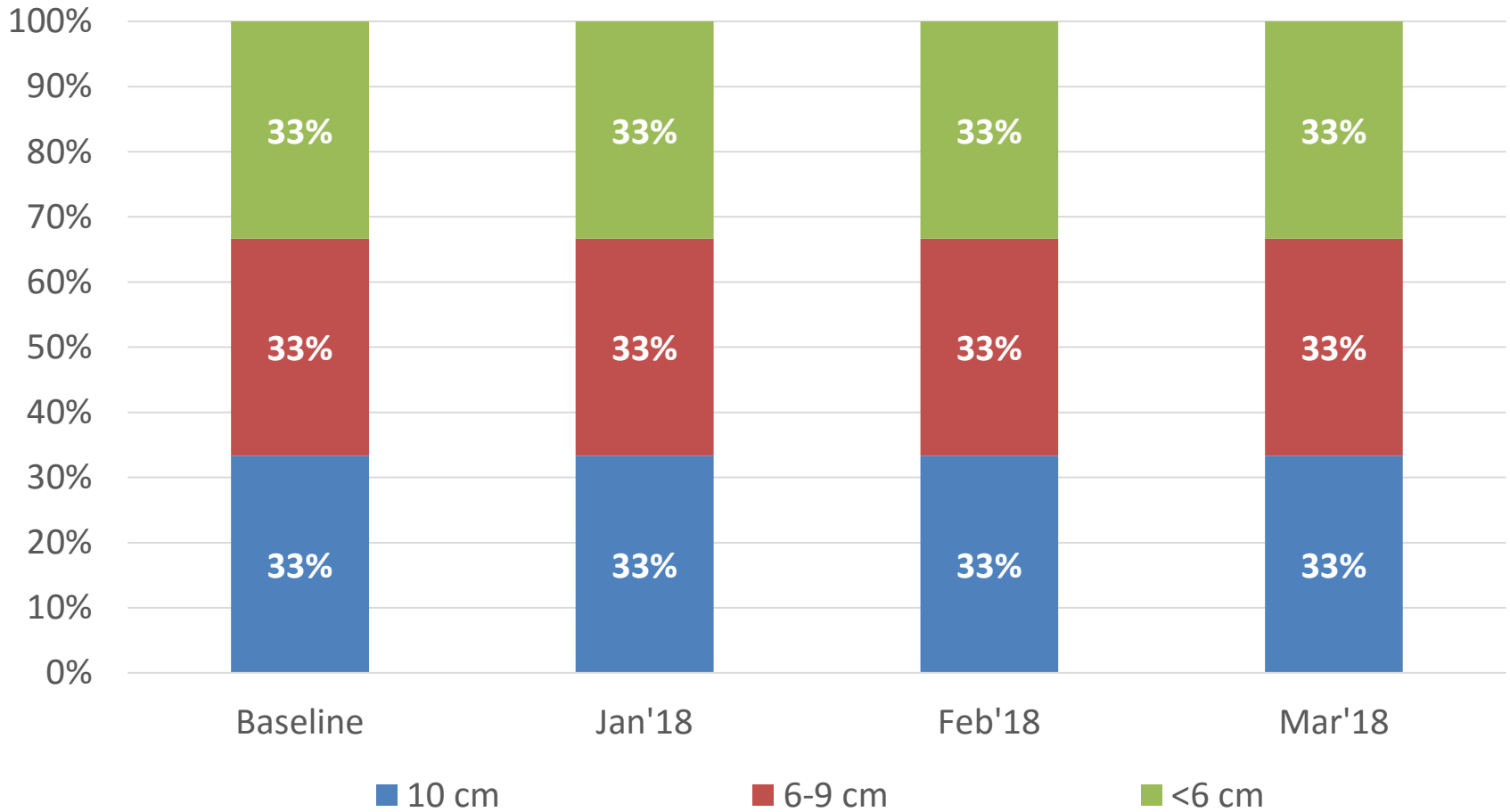
Data Source: Chart Audits

# D-2: Percent of NTSV Cesarean Deliveries with Dystocia that Did Not Meet ACOG/SMFM Criteria by Cervical Dilatation



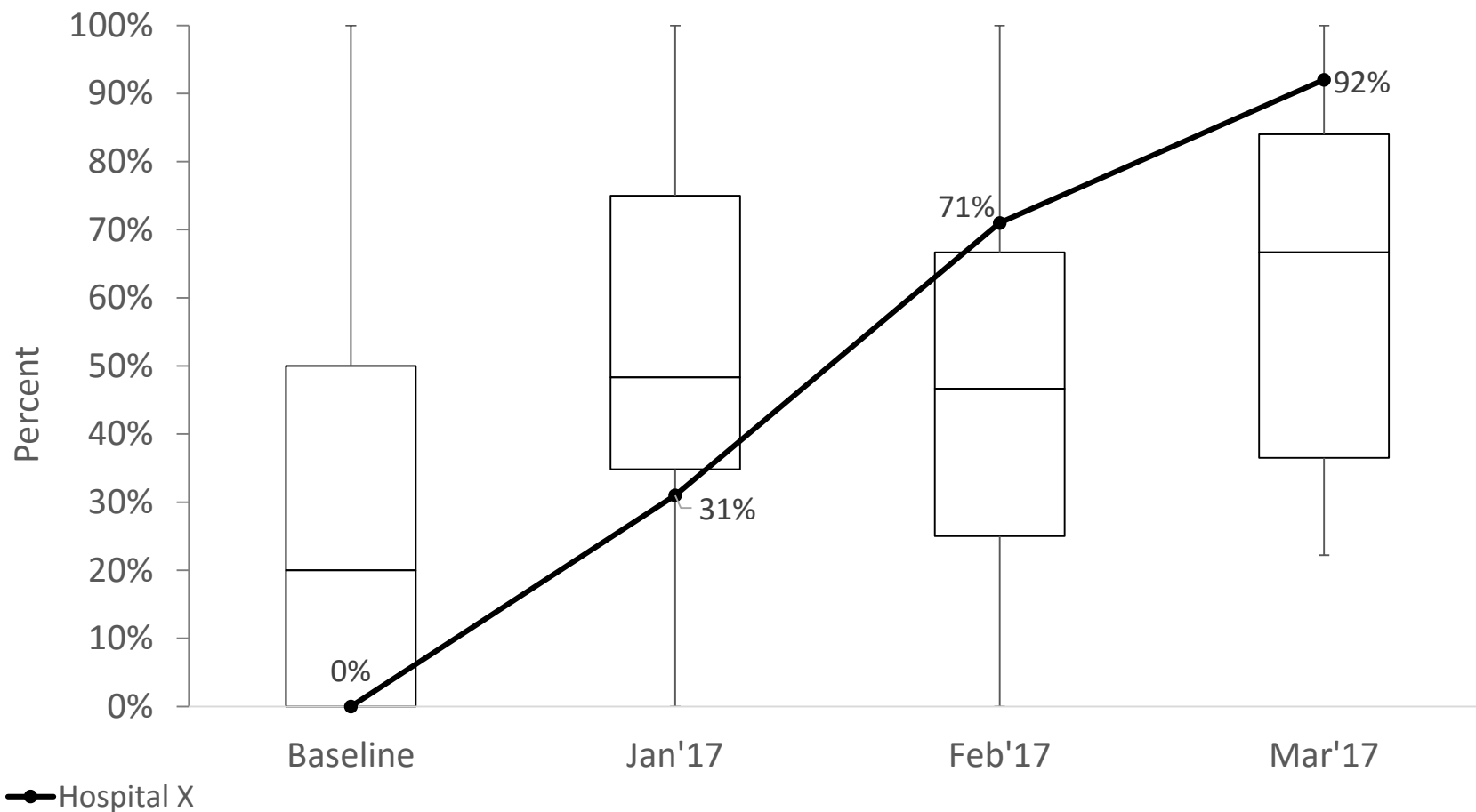
Data Source: Chart Audits

# D-3. Percent of NTSV Cesarean Deliveries with Dystocia by Cervix Dilation at Time of Delivery



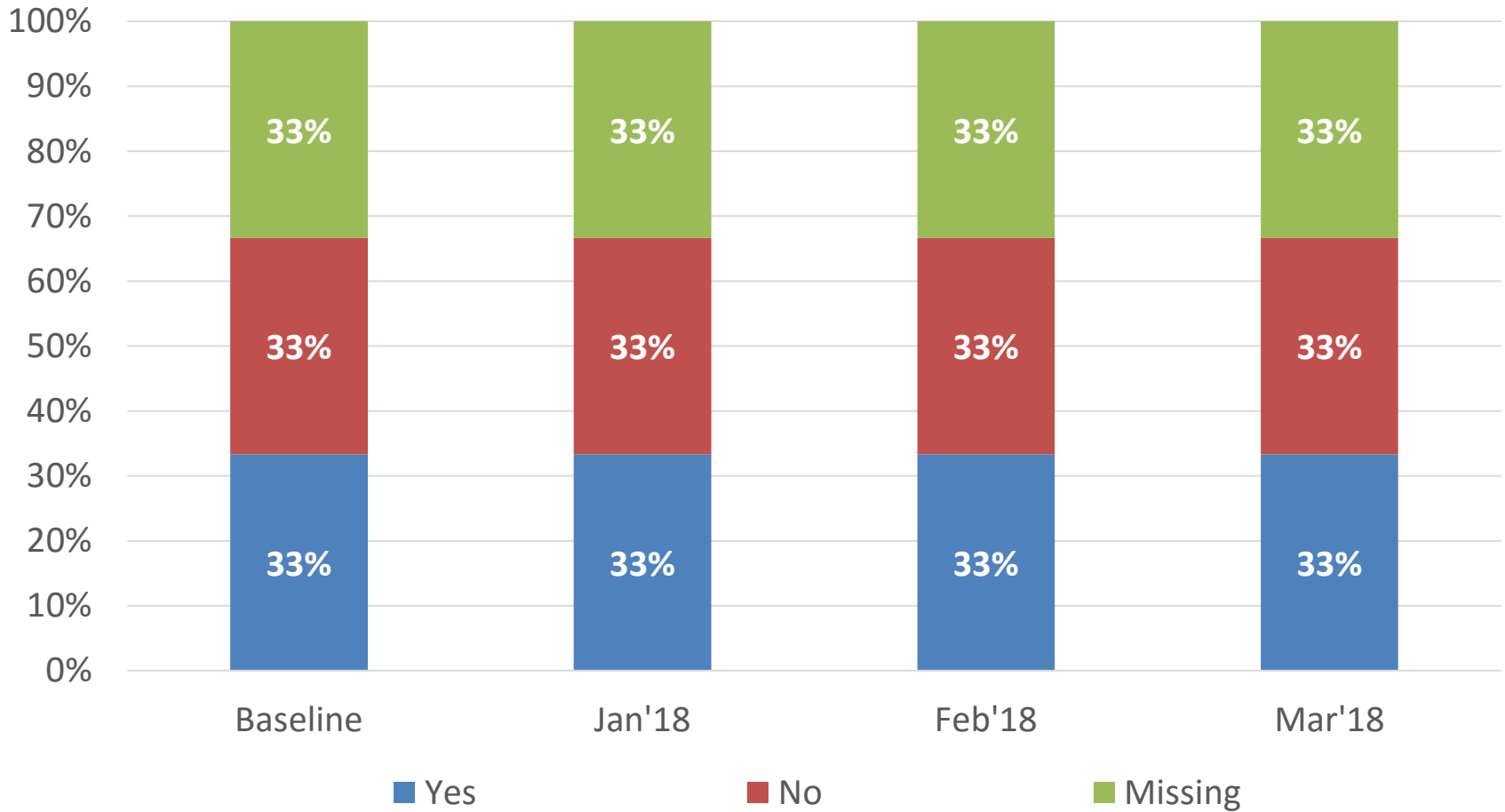
Data Source: Chart Audits

## D-4: Percent of NTSV Cesarean Deliveries with Dystocia that Met ACOG/SMFM Criteria – 6-9 cm



Data Source: Chart Audits

# D-5. Percent of NTSV Cesarean Deliveries with Dystocia that Met ACOG/SMFM Criteria – 10 cm



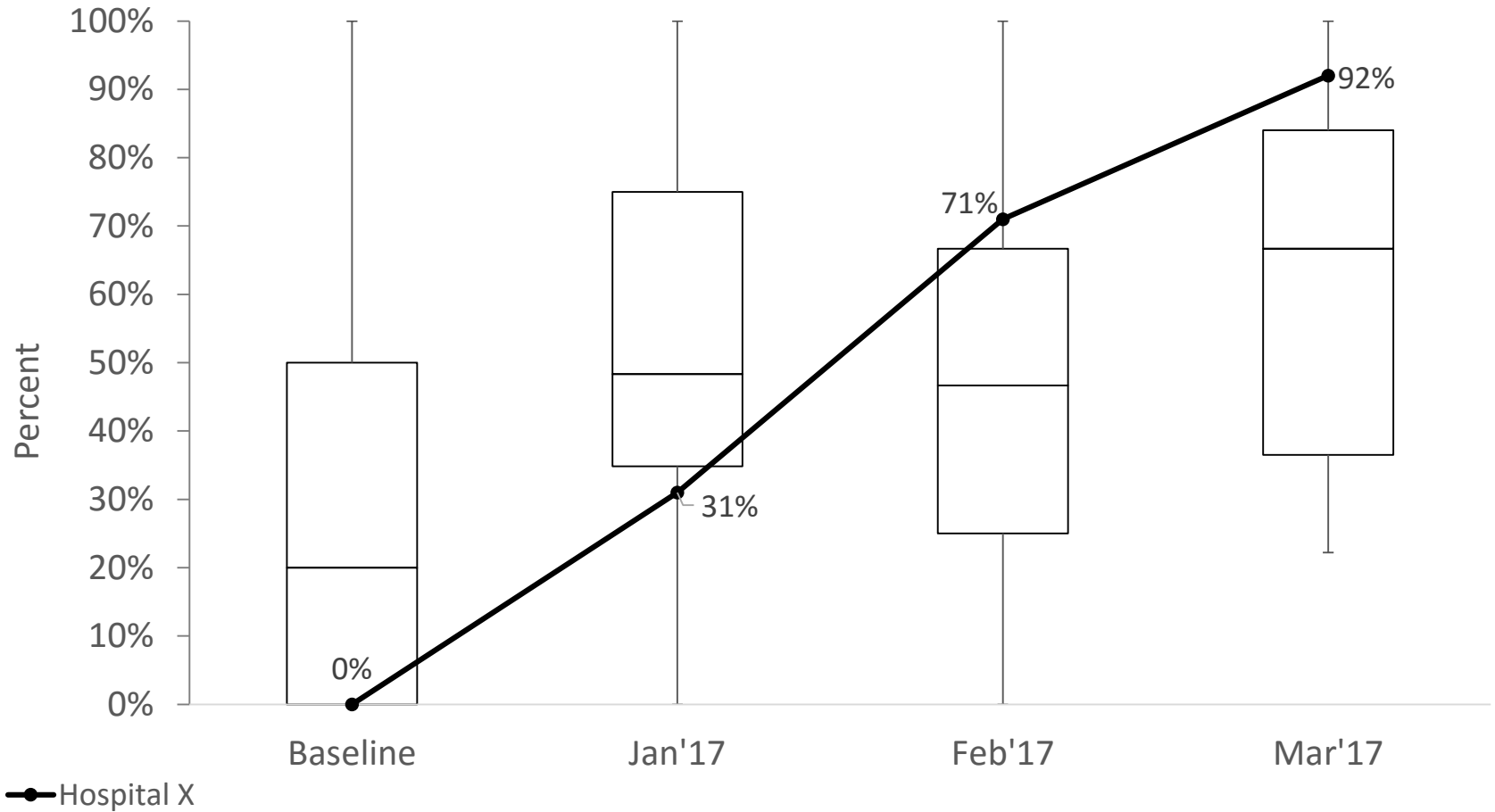
Data Source: Chart Audits



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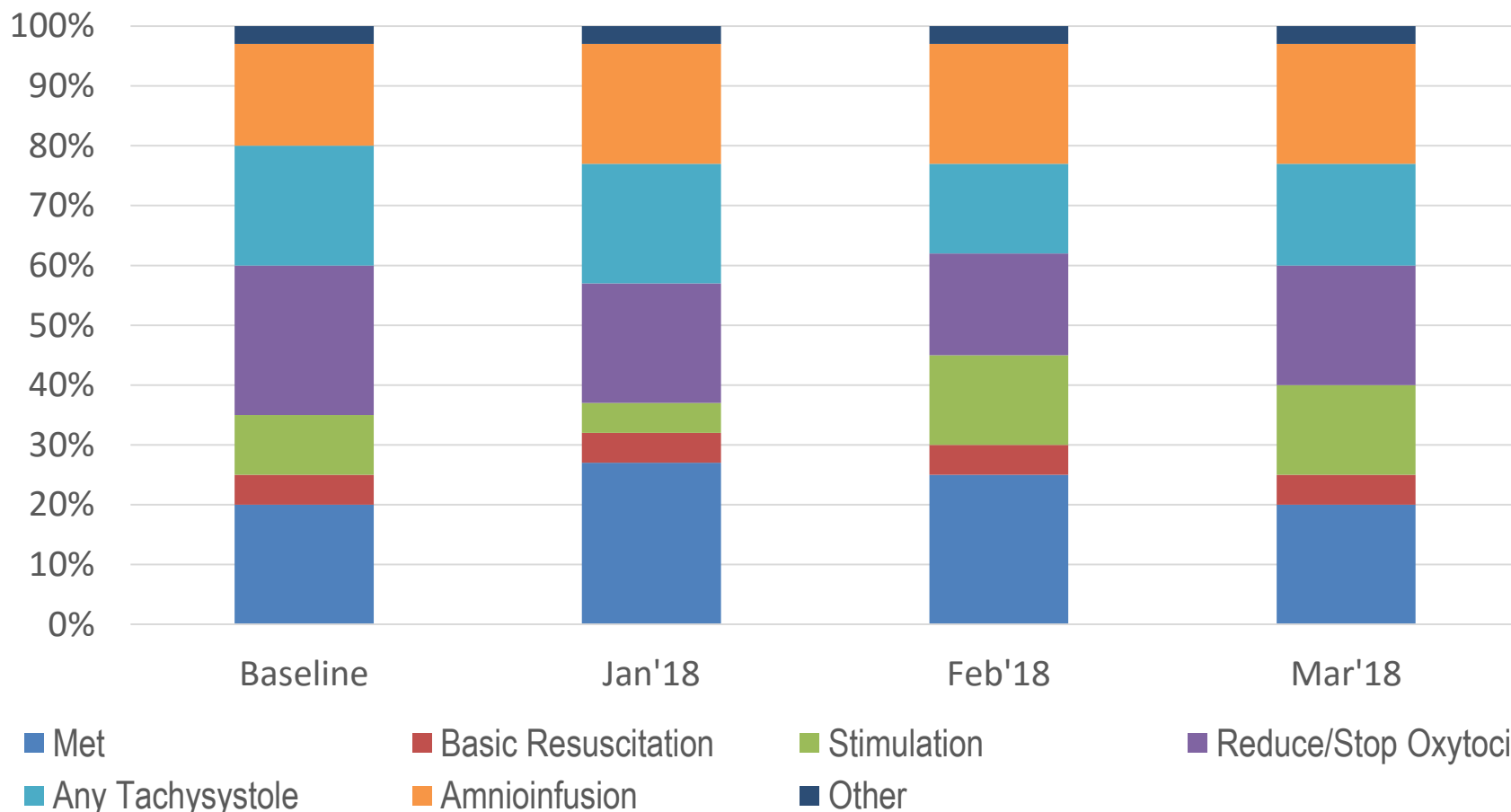
# FETAL HEART RATE CONCERN AUDIT

# FHR-1: Percent of NTSV Cesarean Deliveries with Fetal Heart Rate Concerns that Met FPQC Criteria for Corrective Measures



Data Source: Chart Audits

# FHR-2: Percent of Cesarean Deliveries with Fetal Heart Rate Concerns that Did Not Meet FPQC Criteria by Corrective Measure

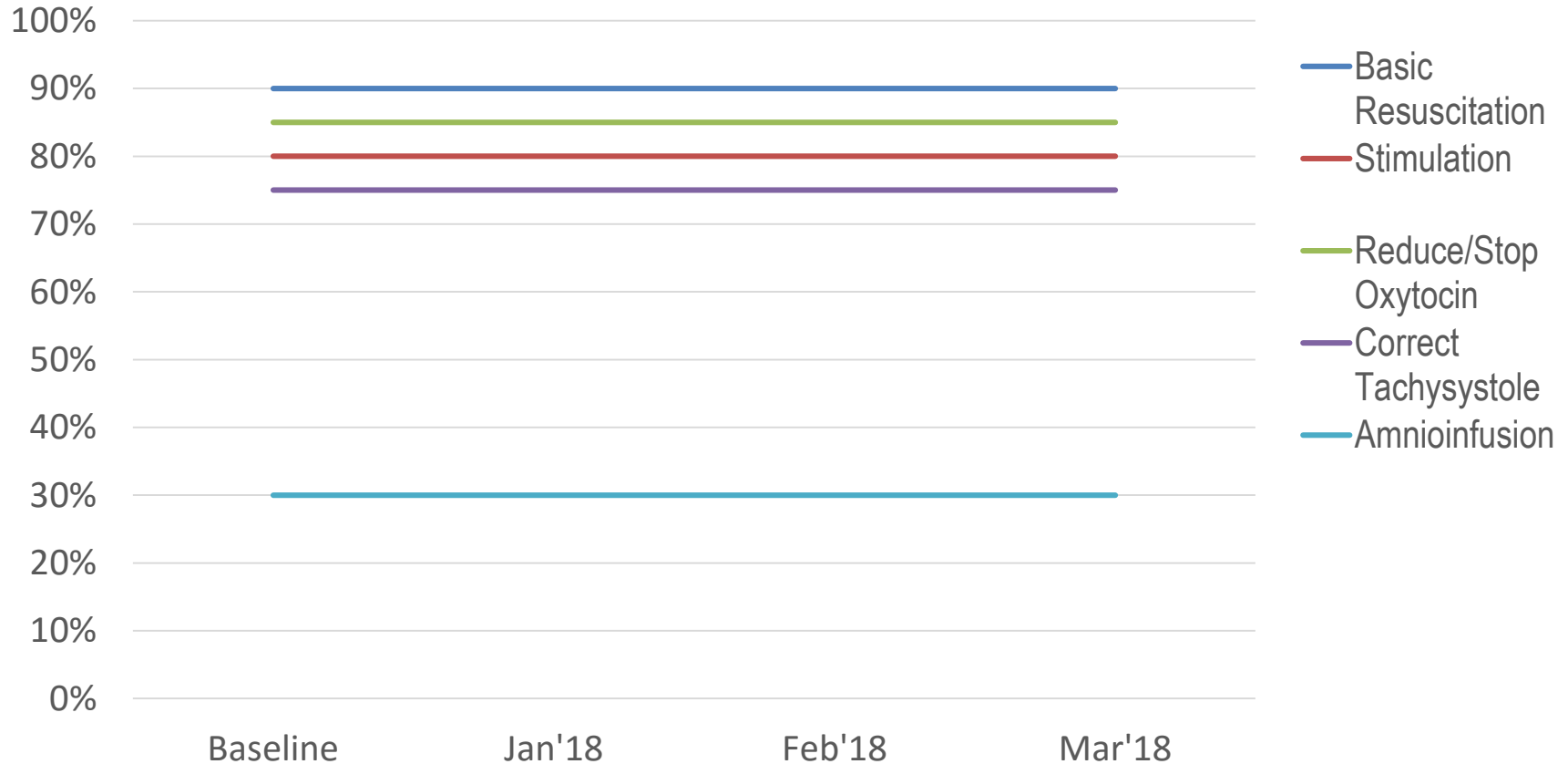


Data Source: Chart Audits

Note: All other corrective measures require that basic measures be used



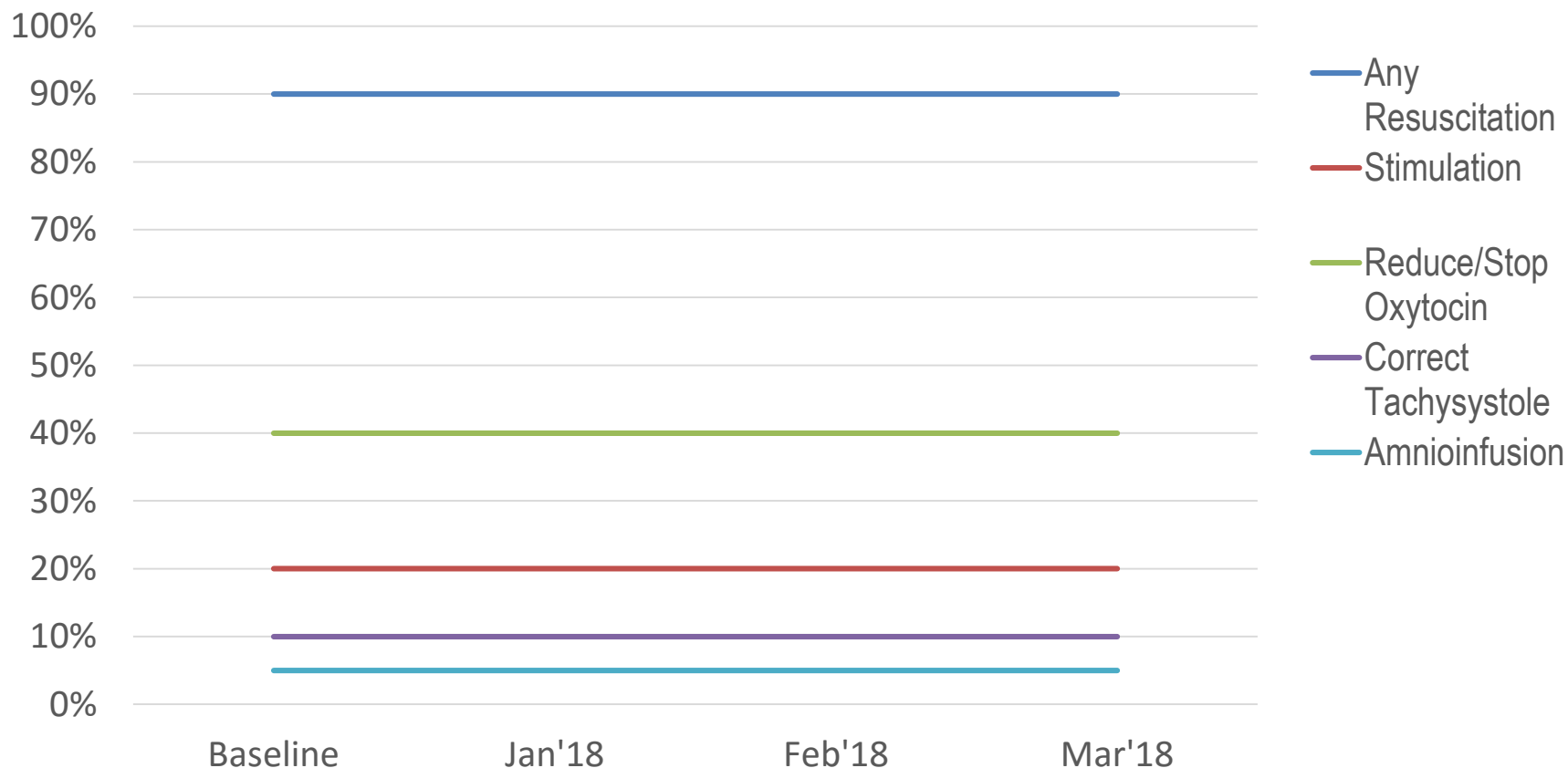
# FHR-3: Percent of Cesareans with Category 2 Fetal Heart Rate Concerns that Met FPQC Criteria by Corrective Measure



Data Source: Chart Audits

Note: All other corrective measures require that basic measures be used

# FHR-4: Percent of All NTSV Cesareans with Fetal Heart Rate Concerns that Received this Corrective Measure

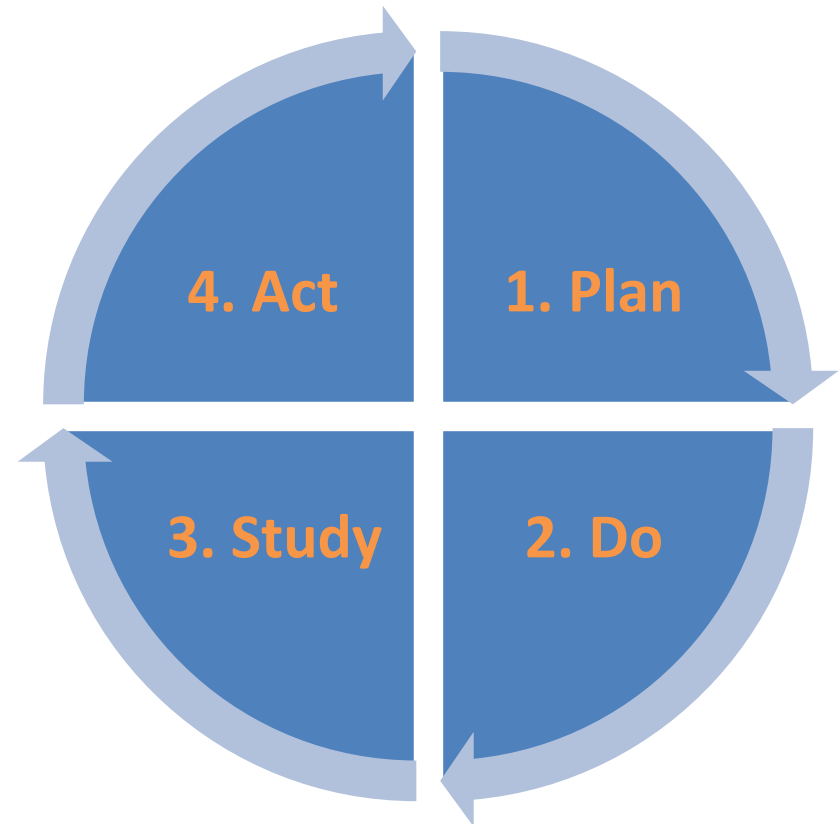


Data Source: Chart Audits

Note: All other corrective measures require that basic measures be used

# What is a PDSA cycle?

- 👤 Useful tool for developing and documenting tests of change to **improve**
- 👤 **P** – **Plan** a test
- 👤 **D** – **Do** a test
- 👤 **S** – **Study** and learn from test results
- 👤 **A** – **Act** on results





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QUESTIONS?