

## 2024 CMQCC Quality and Engagement Awards

*Note: All following award specifications are reflective of hospitals' accomplishments from the prior calendar year (2023).*

### **Maternal Data Center (MDC) Superstar Award: Small Birth Volume Hospitals**

Description: Awarded to hospitals with fewer than 1,000 annual births that exhibited high levels of engagement with the MDC.

Specifications: In 2023, this award will be given to hospitals with fewer than 1,000 annual births that:

- a) accrued 300+ MDC utilization points\* ;
- b) earned at least three MDC education hours<sup>♦</sup> ; **and**
- c) participated in an annual CMQCC Member Outreach Call between Fall 2022 and Summer 2023

### **Maternal Data Center (MDC) Superstar Award: Medium Birth Volume Hospitals**

Description: Awarded to hospitals with between 1,000 and 2,499 annual births that exhibited high levels of engagement with the MDC.

Specifications: In 2023, this award will be given to hospitals with between 1,000 and 2,499 annual births that:

- a) accrued 700+ MDC utilization points\* ;
- b) earned at least five MDC education hours<sup>♦</sup> ; **and**
- c) participated in an annual CMQCC Member Outreach Call between Fall 2022 and Summer 2023

### **Maternal Data Center (MDC) Superstar Award: Large Birth Volume Hospitals**

Description: Awarded to hospitals with greater than 2,499 annual births that exhibited high levels of engagement with the MDC.

Specifications: In 2023, this award will be given to hospitals with greater than 2,499 annual births that:

- a) accrued 1,000+ MDC utilization points\* ;
- b) earned at least seven MDC education hours<sup>♦</sup> ; **and**
- c) participated in an annual CMQCC Member Outreach Call between Fall 2022 and Summer 2023

#### **\*What are MDC utilization points?**

MDC utilization points reflect frequency of hospital use of the MDC across 4 categories: Overall Login Counts, Supplemental Data Completeness, Hospital Report Views, and Provider Report Views.

#### **♦What are MDC education hours?**

The MDC team strongly believes that in order to get the most out of the Maternal Data Center, engagement in additional resources such as MDC webinars, user group meetings, and education modules is beneficial. As such, attendance at MDC webinars or completion of the MDC education modules will count toward the eligibility criteria for the MDC Superstar Awards.

Attendance by a member of your hospital at an MDC-focused webinar will earn your hospital **one** MDC education hour per hour of the webinar, with each individual attending earning your hospital one MDC education hour per person. Completion of the MDC *Basic User* education module curriculum (i.e., spending at least three hours to review the modules in their entirety) will earn your hospital **three** MDC education hours. You can use a combination of webinar attendance and completion of the *Basic User* education module curriculum to achieve the minimum number of MDC education hours required based on your hospital's birth volume, as described above.

Examples:

- 2 individuals attending two different one-hour MDC webinars + 1 individual completing the MDC *Basic User* education module curriculum = 5 MDC education hours
- 3 individuals attending one 30-min MDC webinar + 2 individuals attending another one-hour MDC webinar = 3.5 MDC education hours

**Maternal Data Center (MDC) Early Implementers Award**

Description: Awarded to hospitals that implemented a new MDC measure or feature.

Specifications: In 2023, this award will be given to hospitals that either:

- a) Submitted 12 months of supplemental data for the *Labor Care Provider* tool
- OR**
- b) Submitted 12 months of supplemental data for the *Prenatal Care Group* tool

*User guides with detailed steps for submitting data for these new measures are hyperlinked within each measure name above.*

**Quality & Sustainability Award: Cesarean Birth Rate (NTSV)**

Description: Awarded to hospitals that meet and maintain California’s target rates for their cesarean birth rate among their Nulliparous, Term, Singleton, and Vertex (NTSV) birthing population for the most recent three consecutive years.

Specifications: In 2024, this award will be given to hospitals that achieved California’s *Healthy People 2030* NTSV Cesarean Birth target rate of 23.6% or below for Calendar Years 2021-2023.

**Quality & Sustainability Award: QI Academy Collaborative Hospitals**

Description: Awarded to hospitals that meet and maintain their target rate for their selected Quality Initiative in QI Academy.

Specifications: Specifications: In 2024, this award will be given to hospitals that achieved the target rate for their selected quality initiative and have demonstrated evidence of sustainability, as based on their MDC metrics. Target rates were set by each hospital at the beginning of their cohort group. NOTE: Only cohorts 1, 2, 4, 5, and 6 will be eligible for this award in 2024, given that Cohort 3 was suspended due to COVID-19.

Learn more about QI Academy [here!](#)

**Quality & Sustainability Award: Maternal Safety Standards Implementation Award**

Description: Awarded to hospitals that documented implementation of *Maternal Safety Standards* and key practices for Hypertension or OB Hemorrhage—per the guidance available in the MDC *Patient Safety Watch* section: *Maternal Safety Standards* checklists.

Specifications: In 2024, this award will be given to hospitals that either:

- a) Documented their 2023 work on Hypertension by:
  - Documenting completion of all of the *Maternal Safety Standards for HTN/Preeclampsia* under the *Patient Safety Watch* section in the MDC in CY 2023 (or re-affirming continued implementation of the *Standards* in CY 2023);

- Completing 12 months of CY 2023 chart review for the measure *Timely Treatment for Severe Hypertension*; **and**
- Achieving a *Timely Treatment for Severe Hypertension* rate of at least 80% (a CMQCC sustainability recommendation) in CY 2023

**OR**

b) Documented their 2023 work on OB Hemorrhage by:

- Documenting completion all of the *Maternal Safety Standards for OB Hemorrhage* under the *Patient Safety Watch* section in the MDC in CY 2023 (or re-affirming continued implementation of the *Standards* in CY 2023);
- Completing 12 months of CY 2023 chart review for the measure *Hemorrhage Risk Assessment* or the measure *Hemorrhage Risk Assessment and QBL*; **and**
- Achieving a 100% “Yes” rate for the chart review question, “OB hemorrhage risk assessed and recorded in the medical record?” in CY 2023