

Physician Engagement in QI Work

- Welcome and Introduction of panelists
 - San Ramon Regional: Gayle Pfohl, RN
 - Clovis Community: Jonelle Leedy, RN, Ali Bishop, RN, Lura Reddington, MD
 - Anaheim Global: Dorinda Clinton-Hock, RN, George Ahad, MD
- Moderated Discussion: Christa Sakowski and Elliott Main
- Using the Maternal Data Center to Engage Providers: Anne Castles
- Q&A

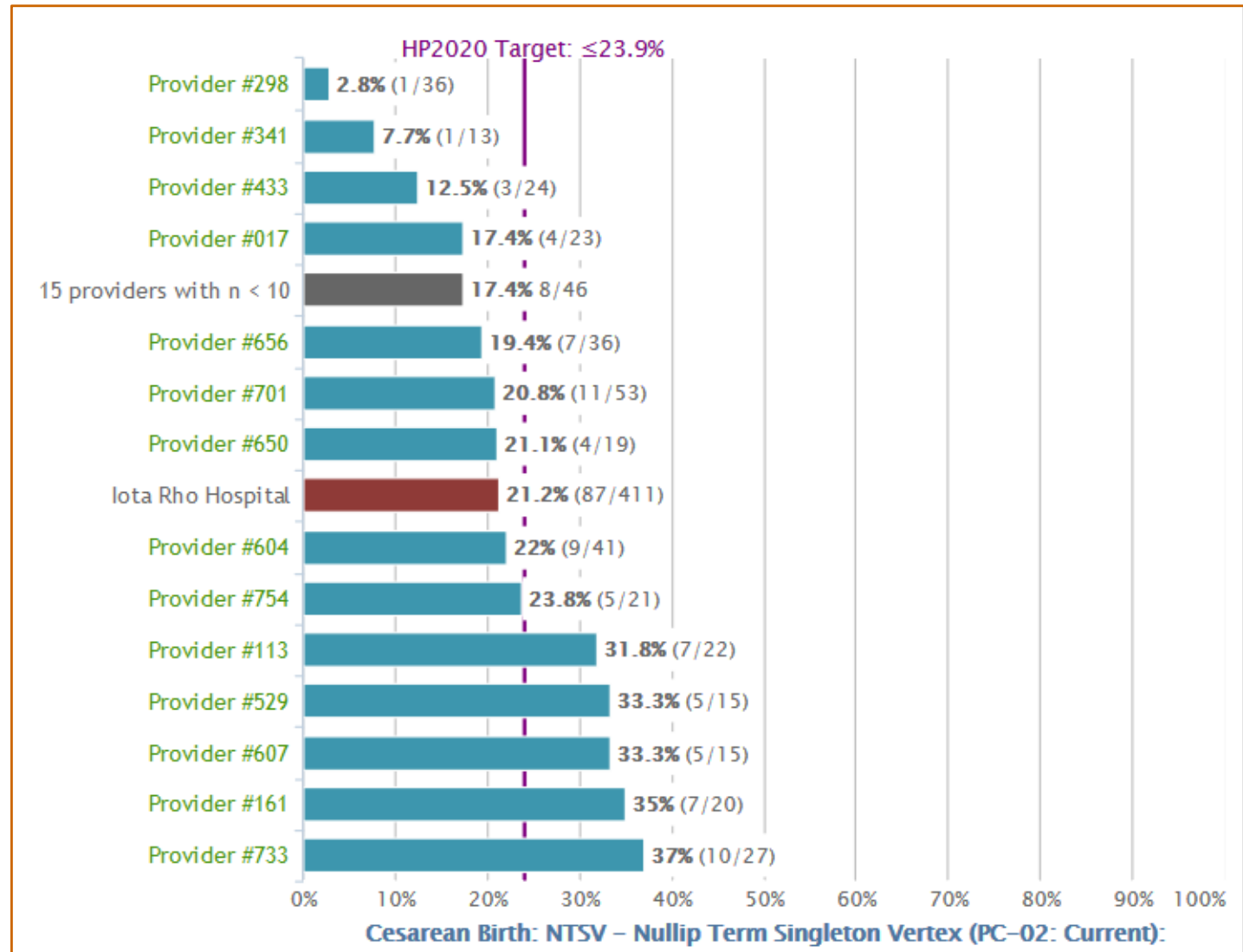
Discussion Questions

- Group - What did you see as the biggest barrier to engaging a physician champion?
- Nursing - What made you choose the physician that you approached?
- Nursing - What recruitment strategies did you try? What failed? What worked?
- Physicians - What made you decide to take on the role?

- Physicians - What has really made the difference in becoming truly engaged versus just agreeing to be a part of the team?
- Group - What was the impact on your QI progress once your physician became engaged?
- Group - Do you feel that this relationship will continue beyond the collaborative?
- Group - What advice would you give teams looking to engage a physician champion?

Using the Maternal Data Center to Engage Providers

Provider reports available to authorized hospital staff in the Maternal Data Center



Provider Reports in the MDC

Demo Hospital
Data Entry Status

Measures
Period: Q2 2016

2017 Leapfrog Group Survey - Maternity Results

Reporting to the CMS EHR Incentive Program? The MDC is a Specialized Registry! See more.

Hospital Clinical Performance Measures

Early Elective Delivery (PC-01)	17.5%	*
Cesarean Birth: NTSV - Nullip Term Singleton Vertex (PC-02: Current)	No Cases	
Cesarean Birth: Primary	0.0%	
Unexpected Newborn Complications: Severe	No Cases	
Severe Maternal Morbidity	0.0%	

View all 42 by name, organization, or topic
View System Dashboard

Hospital Data Quality Measures

Missing / Inconsistent Delivery Method	No Cases
Missing / Inconsistent V27/Z37 (Outcome of Delivery)	No Cases

Data Submission Trends
Correction Reports

View all 18 Hospital Data Quality Measures

Patient Safety Watch

Hemorrhage Patient Safety
Preeclampsia Patient Safety

CS Collaborative Measures

Cesarean Birth: NTSV - Nullip Term Singleton Vertex (PC-02: Current)	No Cases
Structure Measures / To-Do List	11.1% *
NTSV Spontaneous Labor Arrest / CPD: Consistency with Guidelines	No Cases
NTSV Induced Labor Management: Consistency with Guidelines	No Cases

View all 10 CS Collaborative Measures

PRIME Measures

PRIME: Cesarean Birth: NTSV (PC-02)	16.5%	*
PRIME: Exclusive Breast Milk Feeding (PC-05)	53.3%	*
PRIME: Unexpected Newborn Complications	3.7%	*
PRIME: Severe Maternal Morbidity among Hemorrhage Cases	19.2%	*
PRIME: Hemorrhage: Massive Transfusions (≥ 4 Units) per 1000 Delivery Cases	9.7	*
PRIME: Hemorrhage: Blood Product Units Transfused per 1000 Delivery Cases	97.1	*

Provider Performance Measures

by Individual	by Practice Group
Cesarean Metrics	Cesarean Metrics
Elective Delivery Metrics	Elective Delivery Metrics
Vaginal Delivery Metrics	Vaginal Delivery Metrics
Attribution Review	Group Management (37)
Provider Data Summary	

Demo Hospital: All Providers

Masking Crosswalk

Download CSV

Provider: Full Name

Cesarean Metrics

Elective Delivery Metrics

Vaginal Delivery Metrics

Attribution Review (1)

Provider Data

⚠ Since 05/01/2015, 37 providers could not be matched to a name. [Click here](#) to see remapping suggestions.

Start Date* 05/01/2015

Duration* 12 Months

Provider Role* Delivering Provider

Update Page

Print Individual Reports

All Providers Report

Note that the date range applies to the date of discharge, not date of delivery.

Provider	Total Deliveries	Cesarean Birth: Overall	Cesarean Birth: Primary	Cesarean Birth: NTSV (PC-02: Current)	CS Among Induced NTSV Births	VBAC-All
		Rate	Rate	Rate	Rate	Rate
2017 Statewide		31.3% (142823/455794)	19.2% (71954/374295)	24.1% (36733/152143)	32.5% (12348/37936)	13.1% (10645/81251)
Demo Hospital	1851	33.3% (616/1851)	20.9% (320/1530)	19.2% (125/651)	26.5% (36/136)	7.8% (25/321)
Dan, Danny	4 (0.2%)	75.0% (3/4)	66.7% (2/3)	100.0% (1/1)	100.0% (1/1)	0.0% (0/1)
Kerner, John	20 (1.1%)	40.0% (8/20)	25.0% (4/16)	10.0% (1/10)	No Cases (0/0)	0.0% (0/4)

Demo Hospital: All Providers

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Cesarean Metrics

Elective Delivery Metrics

Vaginal Delivery Metrics

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Provider	Total Deliveries	3rd & 4th Degree Lacerations - Vaginal	Operative Vaginal Delivery Rate	Episiotomy
		Rate	Rate	Rate
2017 Statewide		2.5% (7909/312971)	6.8% (21127/312971)	7.5% (23080/307380)
Demo Hospital	1851	2.7% (33/1235)	11.2% (138/1235)	10.2% (124/1215)
Dan, Danny	4 (0.2%)	0.0% (0/1)	0.0% (0/1)	0.0% (0/1)
Kerner, John	20 (1.1%)	8.3% (1/12)	8.3% (1/12)	25.0% (3/12)

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Individual Provider Report

Kerner, John at Demo Hospital

CSV/Excel

See all deliveries by this provider

Provider: Full Name

Start Date 08/01/2017

Duration 12 Months

Provider Role Delivering Provider

Update Page

Print

2017

Aug 2017 - Jul 2018

	Statewide	Hospital	Provider	Provider Contribution
Total Deliveries	455794	3031	142	4.7% (142/3031)
Cesarean Birth: Overall	31.3% (142823/455794)	27.5% (834/3031)	39.4% (56/142)	6.7% (56/834)
Cesarean Birth: Primary	19.2% (71954/374295)	16.3% (420/2581)	28.9% (35/121)	8.3% (35/420)
Cesarean Birth: NTSV - Nullip Term Singleton Vertex (PC-02: Current)	24.1% (36733/152143)	21.0% (185/883)	43.5% (20/46)	10.8% (20/185)
CS Among Induced NTSV Births	32.5% (12348/37936)	38.0% (70/184)	80.0% (8/10)	11.4% (8/70)
Vaginal Birth After Cesarean (VBAC) Rate, All (AHRQ IQI 34)	13.1% (10645/81251)	8.0% (36/450)	0.0% (0/21)	0.0% (0/36)
Early Elective Delivery (PC-01)	N/A (Data not available)	N/A (Data not available)	N/A (Data not available)	N/A (Data not available)
Induction Rate	17.6% (80045/455794)	12.3% (372/3031)	14.8% (21/142)	5.6% (21/372)
Cesareans after Labor Induction	22.0% (17631/80045)	25.3% (94/372)	52.4% (11/21)	11.7% (11/94)
Primary CS: NTSV No Labor	4.1% (6227/150990)	3.8% (33/876)	2.2% (1/46)	3.0% (1/33)
3rd & 4th Degree Lacerations/OB Trauma - All Vaginal Deliveries	2.5% (7909/312971)	0.9% (19/2197)	1.2% (1/86)	5.3% (1/19)
Operative Vaginal Delivery Rate	6.8% (21127/312971)	4.0% (88/2197)	5.8% (5/86)	5.7% (5/88)
Episiotomy Rate	7.5% (23080/307380)	11.1% (242/2190)	5.9% (5/85)	2.1% (5/242)

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Masking Provider Names

CMQCC

Demo Hospital: All Providers

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Provider #063	20 (1.1%)	40.0% (8/20)	25.0% (4/16)	10.0% (1/10)	No Cases (0/0)	0.0% (0/4)



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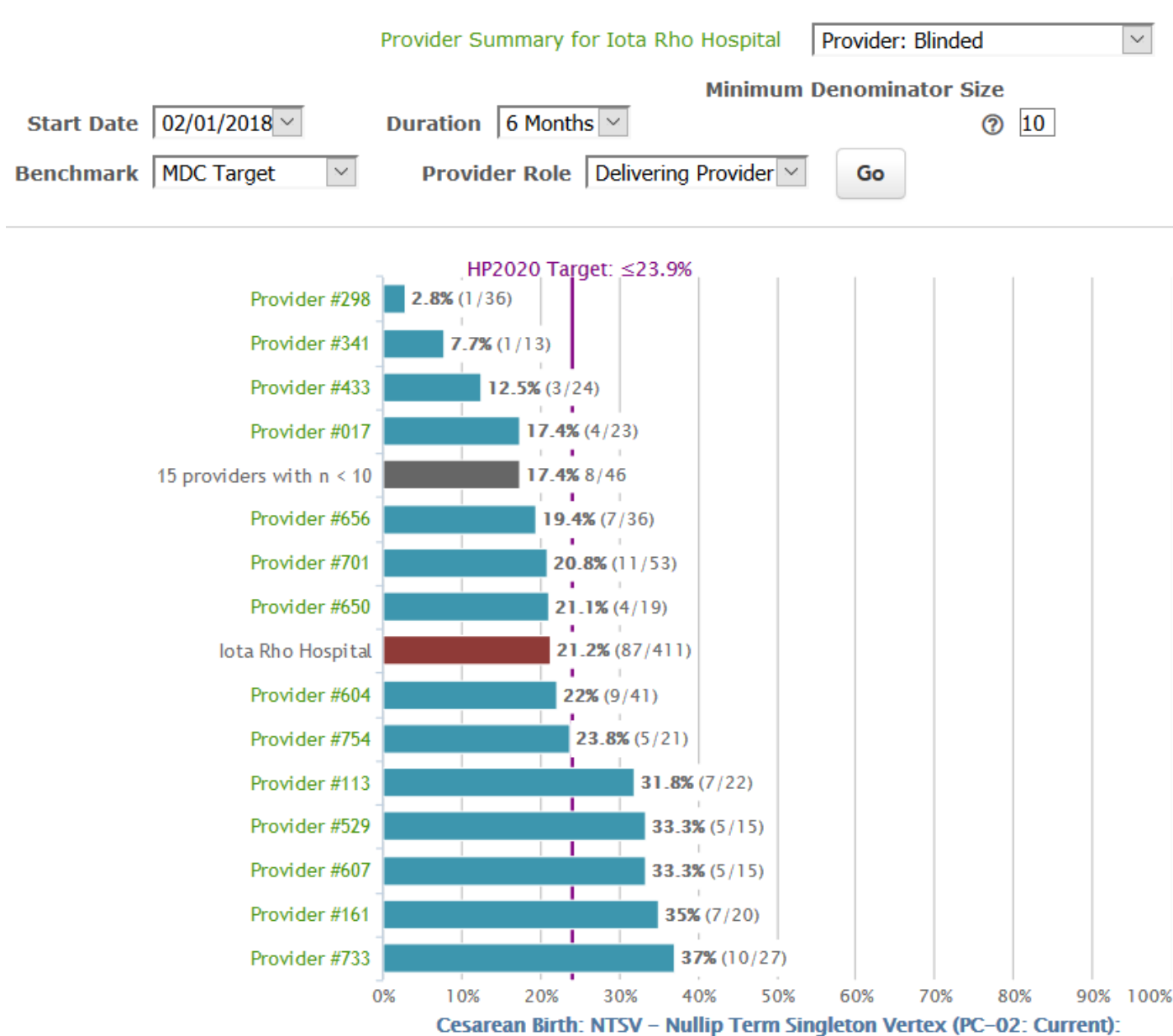
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Provider Variation Graphs

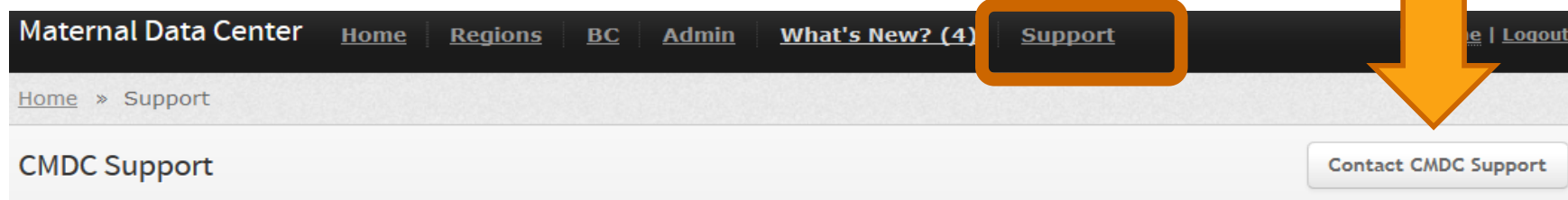


Where does the provider data come from?

- CA Participating Hospitals: Birth Certificate Data
- WSHA/OR Participating Hospitals: Submit in Maternal Clinical File
- Can be edited in the MDC if incorrect

Need Help?

- Support Link *or* datacenter@cmqcc.org



Maternal Data Center [Home](#) [Regions](#) [BC](#) [Admin](#) [What's New? \(4\)](#) **[Support](#)** [Help](#) | [Logout](#)

[Home](#) » [Support](#)

CMDC Support [Contact CMDC Support](#)

Not finding the information you need? Please [Contact CMDC Support](#) and we'll get back to you.

General User Guides

- [User Guide for RPPC Users](#)
- [User Guide for Active Track Hospitals](#)
- [Accessing the Maternal Data Center](#)

Data Submissions

- [Supplemental Data File Specifications](#)
- [Discharge Data File Specifications: The Core Required MDC File](#)
- [Supplemental Files: Transfusions / Blood Bank](#)
- [Supplemental Files: Inductions](#)
- [Removing SSNs from PDD File Submissions](#)
- [Discharge Data: Addendum Files](#)
- [Automated File Submissions via SFTP](#)
- [Summary of MDC Data Files and Submission Options](#)
- [Supplemental Files: Newborn NICU and Birthweight Data](#)
- [Newborn Manual Matching](#)
- [Supplemental Files: Newborn Pulse Oximetry Screening in CMDC](#)
- [Adding Spaces to Fixed Width Files](#)

Topic-Specific User Guides

- [Troubleshooting](#)
- [Managing Users at your Hospital](#)
- [Drill Down to Patient-Level Data](#)
- [Using the Reports](#)
- [Adding and Deleting Users](#)
- [Communications on Patient-Level Issues](#)
- [Submitting Discharge Data Files](#)
- [Authorizing Data Releases to External Programs](#)
- [First Time Registration and Data Submission Steps](#)
- [Resetting Passwords](#)
- [Custom Bundles and Checklists: Summary Steps](#)
- [Custom Bundles and Checklists: Hospital and System Users](#)

Coding and Data Corrections

- [Deleting Discharge Data Files](#)

Provider-Level Reports

- [Navigating the Provider-Level Reports](#)

Reports for External Organizations

- [CMS Quality Net Reports](#)

Upcoming Events

California Hospitals	Oregon and WSHA Hospitals
<i>Navigating the MDC Reports</i> October 19 th 11-12	<i>Navigating the MDC Reports</i> October 26 th 12-1
<i>Data Submissions, Audits and Quality Checks</i> November 9 th 11-12	<i>Data Submissions, Audits and Quality Checks</i> November 16 th 12-1