



# What's New with NICU Data

October 23, 2024

# Webinar Logistics



All attendees are muted upon entry.



Please use the Q & A function – we will do our best to answer questions during the webinar.



We welcome your feedback and recommendations for improving future webinars.

# Webinar Logistics

- The slides and webinar recording will be sent out after the webinar and will also be posted on the CPQCC website at <https://www.cpqcc.org/engage/annual-data-training-webinars-2024>
- If you attend as a team, please create a sign in sheet and send it to [contactmccpop@stanford.edu](mailto:contactmccpop@stanford.edu) to be eligible for contact hours/CEU's
- Attendees will be eligible for contact hours through the the Mid-Coastal California Perinatal Outreach Program (MCCPOP). MCCPOP is approved as a provider of continuing education by the California Board of Registered Nurses, Provider #3104. This course has been approved for **up to** 1.5 contact hours for the 90-minute events and 1.0 contact hours for the 60-minute events.
- Attendees must remain on the webinar for the entire time and fill out our survey in order to receive contact hours. The survey will be available immediately following this webinar.

# Presenters



**ANNALISA WATSON,  
MPH  
PROGRAM MANAGER**

**FULANI DAVIS  
PROGRAM MANAGER  
LEAD**

**JOCHEN PROFIT,  
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CO-CHAIR and  
CO-PRINCIPAL  
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**HENRY C. LEE, MD  
NICU MEDICAL  
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MEDICAL CENTER,  
UC SAN DIEGO**

# Agenda

DURATION	TOPIC	PRESENTER
<b>12:00 – 12:05 PM</b> (5 min)	Welcome & Introductions	Annalisa Watson
<b>12:05 – 12:20 PM</b> (15 min)	2023 Data Finalization Summary, Awards & Tools	Fulani Davis
<b>12:20 – 12:30 PM</b> (10 min)	2025 NICU Database Changes	Annalisa Watson
<b>12:30 – 12:50 PM</b> (20 min)	NICU Report Updates Family Centered Care (FCC) updates	Jochen Profit
<b>12:50 – 1:00 PM</b> (10 min)	Delivery Room Oxygen (DRO2) updates Language data updates	Henry Lee
<b>1:00 – 1:10PM</b> (10 min)	Q&A Panel	Group



# NICU Data Center

## 2023 Data Finalization Updates & Tools

Fulani Davis, Program Manager Lead

# CPQCC NICU Data Center Team

## Program Managers



**FULANI DAVIS**  
**PROGRAM MANAGER, LEAD**



**ANNALISA WATSON**  
**PROGRAM MANAGER**

# CPQCC NICU Data Center Team

## Developer & Biostatisticians



BEATE DANIELSEN  
DEVELOPER



MIHOKO BENNETT  
BIostatISTICIAN



XIN CUI  
BIostatISTICIAN



JESSICA LIU  
BIostatISTICIAN



TIANYAO LU  
BIostatISTICIAN



# CPQCC Member NICUs

168 total NICUs in California

134 CPQCC Member NICUs

## CCS Level

- 15 Intermediate NICUs
- 86 Community NICUs
- 23 Regional NICUs
- 12 Non-CCS

## Perinatal Regions

- 16 North Coast – East Bay
- 11 Northeastern
- 11 San Joaquin – Central Valley – Sierra Nevada
- 12 Mid-Coastal
- 14 Southern Inland Counties
- 28 Central- North LA – Coastal Valley
- 9 Orange County
- 13 South Coastal and East LA
- 18 San Diego and Imperial
- 8 Kaiser North
- 16 Kaiser South













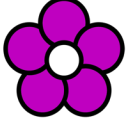

# CPQCC NICU Data Center

## What kind of *tools and resources* are offered at the NICU Data Center?

- **Help Desk:** A portal that allows users to request assistance, ask questions or express concerns
- **Data Reviews:** Submit a help ticket to schedule individual or group specific training over Zoom
- **Annual Data Training Webinars:** A series where we share an overview of the latest updates, projects and tools
- **Data Finalization Checklist:** A powerful tool that allows users to track and complete deliverables for specific deadlines.
- **Custom Query:** A powerful tool that allows users to pull a subsets of infants based on different measures.
- **NICU Data Sharing:** Allows NICUs to share data on transported infants that were seen in their NICU
- **Data Consistency Report (DCR):** A tool that allows you to validate the consistency and accuracy of your data.

# NICU Data Finalization Deadlines

## Production Schedule

FEB 1 <sup>ST</sup>	MAR 15	APR	APR 1 <sup>ST</sup>	MAY 15 <sup>TH</sup>	JUN 1 <sup>ST</sup>	JUN 2 <sup>ND</sup>	JUN 2 <sup>ND</sup>	JUN 7 <sup>TH</sup>	JUN 7 <sup>TH</sup>	JUN 15 <sup>TH</sup>	JUL 15 <sup>TH</sup>	JAN - DEC	OCT 10 <sup>TH</sup>
													
DEADLINE	SUPER STAR AWARD	ANNUAL DATABASE REVISIONS	DEADLINE	GOLD STAR AWARD	DEADLINE	EARLY BIRD AWARD	ALL STAR AWARD	DEADLINE	CROWN AWARD	ANNUAL REPORT	ANNUAL REPORT	SURPRISE AWARD	ANNUAL REPORT
Submit items 1-2 in the Close-Out Checklist  Late Fee if not completed	Submit the April 1 <sup>st</sup> items by March 15th	Submit the Database Change Request Form by April	Submit items 3-8 in the Close-Out Checklist  Late Fee if not completed	Submit the June 1 <sup>st</sup> items by May 15th	Submit items 9-13 in the Close-Out Checklist  Late Fee if not completed	Submit the CCS Report	Earn the Superstar and Early Bird Awards	Submit item 14 in the Close-Out Checklist  Late Fee if not completed	Submit all DF items on time	DF Status Report	CPQCC & CCS Annual Reports		VON Annual QMR Report

# Membership Dues

**Subject:** CPQCC Member Invoices - New Look Coming Next Week!!

Hello valued CPQCC members!

First, thank you as always for your membership in CPQCC – we appreciate your dedication to the babies and families of California's NICUs!

Your 2025 CPQCC membership invoice will be sent to you soon – it has a brand new look! We wanted to let you know in case it gets misdirected to a junk folder or goes unrecognized. Some differences:

1. It will come from the email address: “**Rebecca Robinson** via Smartsheet [automation@smartsheetmail.stanford.edu](mailto:automation@smartsheetmail.stanford.edu)”
2. The subject line will be: “[Your hospital name] CPQCC 2025 Membership Invoice”
3. To get your invoice, **click on the link “Open request”**. This will take you to a web page; **click “1 Attachment”** at the bottom to download your invoice. **Please don't click “Go to the sheet”; you won't find your invoice there.**
4. If you have any questions or concerns, before or after the invoices are sent, please email Jessica Washington at [jwash11@stanford.edu](mailto:jwash11@stanford.edu) or me at [rrobins@stanford.edu](mailto:rrobins@stanford.edu).

**Here's what the invoice email will look like:**

This is the CPQCC membership invoice for [Your Hospital Name] for calendar year 2025. Your annual dues are [Dues Amount]. Please remit by 2/1/2025. Please click "open request," then click on the attachment to open your invoice.

[Open request](#)

## Details







Hospital Name            [Your Hospital Name]

Dues 2025                [Dues Amount]

[Go to the sheet](#)

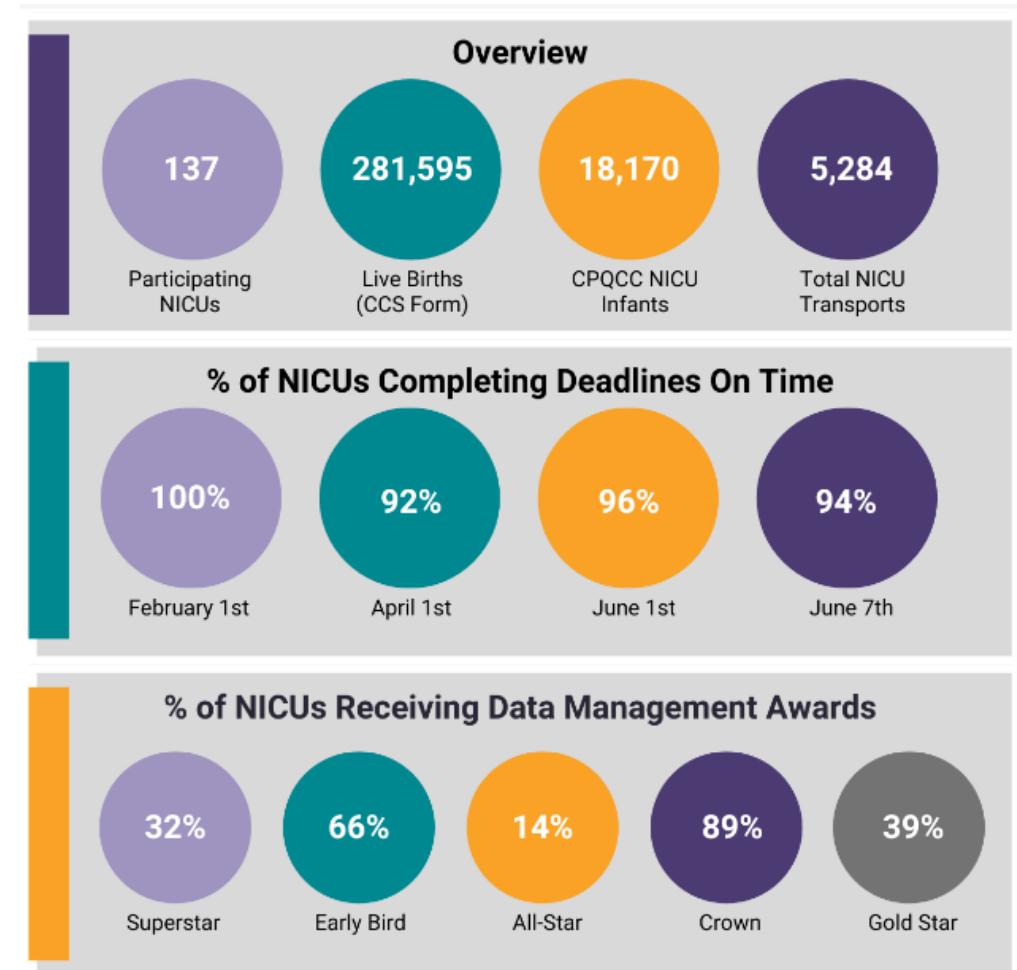
# NICU Data Finalization Deadlines

## Quarterly Deadlines

JAN 1st	JAN 7th	APR 7th	JUL 7th	OCT 7th	OCT
					
Begin data collection for current year	<b>4<sup>th</sup> Quarterly Close Out</b>  Submit all eligible infants for the previous year to be included in the 4th Quarter Report  Quality Achievement Announcements	<b>1<sup>st</sup> Quarterly Close Out</b>  Submit all eligible infants born between Jan 1 <sup>st</sup> – Mar 31 <sup>st</sup> to be included in the 1 <sup>st</sup> Quarter Report	<b>2<sup>nd</sup> Quarterly Close Out</b>  Submit all eligible infants born between Jan 1 <sup>st</sup> – Jun 30 <sup>th</sup> to be included in the 2 <sup>nd</sup> Quarter Report  Quality Achievement Announcements	<b>3<sup>rd</sup> Quarterly Close Out</b>  Submit all eligible infants born between Jan 1 <sup>st</sup> – Sept 30 <sup>th</sup> to be included in the 3 <sup>rd</sup> Quarter Report	<b>Data Trainings</b>

# 2023 Data Finalization Summary

1. **January – June: 2023 Data Closeout & Awards!**
  - **Data sets:** NICU (higher acuity), CPeTS, CCS, HRIF Registration, and All NIU Admits!
  - **Data Management Awards: 352 awardees**
2. **July – November: DF Survey Analysis and Follow-up: 222 Surveys completed**
  - **Responses: 122 Hospitals (89%)**
  - **DF Guidelines useful? 90%**
  - **Close-Out Checklist useful? 93%**
  - **Satisfied with Help Desk: 93%**



# 2024 Achievements

**July 7<sup>th</sup>:** Quality Achievement Announcements – an email announcement was sent out to all NICUs that met one or more of the measures below, which are based on the NICU dashboard report.

## Measures

- **100% Antenatal Steroid Use**
- **100% Eye Exam Performed at Appropriate Chronological Age**
- **0% Healthcare Associated Infections**

**122/135 = 90% NICUs met at least one goal**



Dear CPQCC Member,

Congratulations!

Your NICU is providing outstanding care. We would like to recognize your NICU as a top performer for achieving at least one the following as of July 7<sup>th</sup>, 2024:

**100% Antenatal Corticosteroid (ANS) Use**  
(For infants 23 to 31 weeks born at your NICU's hospital in 2023)

**100% Eye Exams Performed at Appropriate Chronological Age**  
(For infants 401 to 1,500 grams or 21 to 29 weeks' gestation born in 2023 and admitted to your NICU)

**0% Healthcare Associated Infections**  
(For infants 401 to 1,500 grams or 21 to 29 weeks' gestation born in 2023 and in your NICU after DOL 3 with a minimum of 10 exposed infants)

# Higher Acuity Database vs All NICU Admits Database

## Eligibility for Higher acuity CPQCC database

- Small babies ( $\leq 31$  weeks GA, or  $\leq 1,500$  grams)
  - Includes VON Small Babies ( $\leq 29$  weeks GA, or  $\leq 1,500$  grams)
- Big Babies –  $>1,500$  grams that meet specific higher acuity criteria
- Must complete an Admission/Discharge (A/D), CPeTS (transport), or Delivery Room Death (DRD) forms

## Eligibility for All NICU Admits Database (ANAD)

- All babies admitted to the NICU for **any** reason (includes both higher and lower acuity infants)
- Shorter form that can populate CCS Form with aggregate numbers
- Ability to export data to the CPQCC database (for higher acuity infants) and create partially populated forms



# All NICU Admits Database

## How to Access

### All NICU Admits Database (ANAD)

- You already have access
- Log into [www.cpqccdata.org](http://www.cpqccdata.org)
- Data can be entered/viewed by birth year or admission year
- Data can be uploaded via CSV file or entered online
- Data can pre-populate the CCS Supplemental Form (please see the CCS Tip Sheet)
- Data can pre-populate the CPQCC A/D/CPeTS form
- Data can pre-populate the [MatEx](#) form

Home

- Change Password
- Upload EDS File
- Mail/Download Reports/Data
- Custom Query
- My Activity Summary
- NICU Settings
- Update Log / Msg Archive
- Ligon to NICU Reports
- Calculator Tool
- Member Directory
- Add New Data
- Add via Shared Record [0]
- MATEX DB
- 2023
- Edit Data
- CCS Form
- CCS Report
- Data Reports
- Close-Out Checklist
- Optional All NICU Admits DB**
  - By Birth Year
  - By Admission Year

NICU 0000 All NICU Admits DB for Infants Born in 2023

All records

Show All entries CSV CPQCC A/D Refresh Upload New Edit Delete Consistency Check MATEX CPQCC NICU A/D Core Admit Reasons NICU Stay Reasons Other Set Col Vis Query Reset

Search:

ID	DOB	TOB	BW	GA	Mult	Adm Dt	Adm Tm	Birth Loc	Ref Loc	Ac Trs In	Dsch Dt	LOS	Trs Loc	Ac Trs Out	CPQCC Record ID	Updated
6	02-01-2023	00:10	4,000	40/6	S	02-01-2023		MGH		No					1804	06-13-23 16:25
20230001	06-01-2023		400	32/0	S	06-01-2023										06-13-23 16:25

Showing 1 to 2 of 2 entries

Previous 1 Next

Items 2, 3 and 8 **must** be checked manually. All other items are automatically checked.

#	Activity	Deadline	Done	Confirmation Date/Time	Resources
1.	2024 Membership Dues Paid <i>Membership dues were received by NICU Data Center. Data entry for 2024 is enabled.</i>	02/01/2024	<input checked="" type="checkbox"/>	11/18/2023 @ 09:57	If you have questions about your 2024 dues please submit a ticket at the CPQCC Help Desk.
2.	Confirmation of receipt of e-announcement of data finalization guidelines for 2024	02/01/2025	<input type="checkbox"/>		A link to the 2024 Data Finalization Guidelines will be posted here in December 2024
3.	Submission of VON/CPQCC Contact Report for your NICU for birth year 2024.	02/01/2025	<input type="checkbox"/>		No contact link found for your NICU. If this is a problem submit a Help Desk ticket.
4.	Completion of all records for infants born in 2023 who were SIH at the 2023 closeout.	04/01/2025	<input checked="" type="checkbox"/>	10/11/2024 @ 09:52	Pull up Edit SIH ID list for 2023
5.	Submission of ID confirmation form for birth year 2024.	04/01/2025	<input type="checkbox"/>		Review / Confirmation of Record IDs Submitted & Confirmation of CPQCC Conditions for 2024
6.	For infants born in 2024, all CPeTS items for acute transfers into your NICU, all DRD items and all A/D items should be entered into the NICU Database <u>completely</u> . For infants born in 2024 and still in-house all items <u>not related to discharge</u> should be entered into the NICU Database <u>completely</u> .	04/01/2025	<input type="checkbox"/>		Pull up Edit ID list for Record IDs with pending (non-SIH) items for 2024
7.	Submission of error-free CCS form without pending items for birth year 2024. <i>Note that changes to your Higher Acuity NICU Database records might require CCS form updates!</i>	04/01/2025	<input type="checkbox"/>		Open CCS form for 2024
8.	Submission of VON Membership Survey for birth year 2024.	04/01/2025 @ 20:59 PST	<input type="checkbox"/>		Click here to go to VON website to fill out 2024 VON Membership Survey (opens new window)
9.	For infants born in 2024, all CPeTS items for acute transfers into your NICU, all DRD items and all A/D items should be submitted entered into the NICU Database <u>completely and 100% error-free</u> . For infants born in 2024 and still in-house all items <u>not related to discharge</u> should be entered into the NICU Database <u>completely and 100% error-free</u> .	06/01/2025	<input type="checkbox"/>		Pull up Edit ID list of Record IDs with pending (non-SIH) items/errors for 2024
10.	Followed-up all warnings listed in the NICU Database Errors and Warnings Report for birth year 2024. <i>Currently 6 warnings for review.</i>	06/01/2025	<input type="checkbox"/>		Generate Warnings w/out Follow-Up Report for 2024
11.	Minimized use of Confirmed Unknown to $\leq$ 3% for key risk factors and outcomes for <u>inborn infants</u> . <i>Any unknown risk factor: 0.00%. Any unknown outcome: 12.50%.</i>	06/01/2025	<input type="checkbox"/>		Generate Confirmed Unknown Report for Inborn Infants for 2024
12.	Addressed and resolved all inconsistencies listed in the DCR for birth year 2024. <i>Currently no inconsistencies.</i>	06/01/2025	<input type="checkbox"/>		Review Data Consistency Report (DCR) for 2024
13.	HRIF registration is 100% of 2024 VLBW infants, infants < 32 completed weeks gestation, infants with HIE/Active Therapeutic Hypothermia, ECMO, INO, seizures or CHD born in 2024 and discharged home from thereporting NICU or from a non-CCS NICU after transport-out from the reporting NICU. For NICU awards, at least 95% of registration must be timely, i.e., within 60 days of home discharge. <i>Current HRIF registration: 0.0 %</i>	06/01/2025	<input type="checkbox"/>		Review infants born in 2024, discharged home from your NICU or a non-CCS NICU after transport out from your NICU who are eligible for HRIF due to VLBW, GA<32 completed Wks, HIE, ECMO, Active Therapeutic Hypothermia,CHD, INO, Seizures and not registered through 10-20-2024.
14.	Confirmation of CCS report for birth year 2024. The CCS reports will be available for review continuously starting from April 1, 2025. <i>As we have to wait for all centers to finalize their 2024 data and as complete data from all centers is needed to generate several components of the CCS report (e.g., the inborn admission rate comparison of your NICU and the CPQCC network), the CCS report confirmation period opens on 6/2/2025.</i>	06/07/2025	<input type="checkbox"/>		Open current version of CCS report for 2024

Set confirmation status for enabled items

User Comment:

None

CPQCC Staff Comment: [Click here to edit](#)

None

# NICU Data Finalization Deadlines

The Data Consistency Reports (DCRs) were updated on Sunday, 10/13/2024.

The 2024/Q3 quarterly reports are available.

Please sign up here for the [Annual Data Training Webinars!](#)

*Last updated: 10/13/2024*

## Close-Out Checklist Reminders:

- Incomplete records for birth year 2022 infants who were SIH at the 2022 closeout for center 0000. **Record completion is now past due.**
- 2023 IDs not confirmed for center 0000. **ID confirmation is now past due.**
- Warning follow-up incomplete for 2023 for center 0000. **Warning follow-up is now past due.**
- HRIF registration for 2023 HRIF eligible infants incomplete for center 0000. **Complete HRIF registration is now past due.**
- 2023 CCS report not confirmed for center 0000. **CCS report confirmation is now past due.**

Do not show this message again

Close

# Custom Query

Select centers: 1 Selected

Reset

Set Centers & Years for Queries

Recapture

*Demo Ctr A (0000) (RG: Demo Region) (CCS: Regional)*

Check Years:  2006  2007  2008  2009  2010  2011  2012  2013  2014  2015  2016  2017  2018  2019  2020  2021  2022  2023  2024  Check to select all years

Select area:

Infections

40. Early Bacterial Sepsis (on or before Day 3) (rev.2018)

- Demographics
- Maternal HX
- DR
- Congenital Anomalies
- CPeTS
- Respiratory
- Infections**
- Other DX/PX
- Neurological
- Hyperbilirubinemia
- Language
- Disposition
- Auxiliary
- CCS Report Composites
- Other Composites
- Baby MONITOR

(not DRD)  Outborn Admitted by Age 3 Days (not PDH)  Outborn Admitted after Age 3 Days (not PDH)  PDH  
 CPQCC Small Baby  Big Baby  
 NICU  Death at this NICU  Still Hospitalized in this NICU at Age 1 Year  All Other  
 Exclude infants with major congenital anomalies

# Custom Query

## NICU Data Query

Select centers: 1 Selected  Reset

[Set Centers & Years for Queries](#)  Recapture

*Demo Ctr A (0000) (RG: Demo Region) (CCS: Regional)*

Check Years:  2006  2007  2008  2009  2010  2011  2012  2013  2014  2015  2016  2017  2018  2019  2020  2021  2022  2023  2024  Check to select all years

Select area: Infections  Pending

- No
- Yes (add.2018)
- GBS (rmv.2018)
- E.Coli (rmv.2018)
- Other (rmv.2018)
- Confirmed Unknown

[Check / Un-Check All](#)

### Modifiers

Set 1:  DRDs  Inborn (not DRD)  Outborn Admitted by Age 3 Days (not PDH)  Outborn Admitted after Age 3 Days (not PDH)  PDH

Set 2:  VON Small Baby  CPQCC Small Baby  Big Baby

Set 3:  Home from this NICU  Death at this NICU  Still Hospitalized in this NICU at Age 1 Year  All Other

Include deleted records  Exclude infants with major congenital anomalies

[Submit Query](#)

40. Early Bacterial Sepsis (on or before Day 3) (rev.2018)

Select variable/topic ...

- 40. Early Bacterial Sepsis (on or before Day 3) (rev.2018)
- 40. Early Bacterial Sepsis Codes (add.2018)
- 41a. Late Sepsis - Bacterial Pathogen (rev.2008,rev.2018)
- 41a. Late Sepsis - Bacterial Pathogen Codes (add.2018)
- 41b. Late Sepsis - Coag Neg Staph (rev.2008)
- 41c. Late Sepsis - Fungal (rev.2008)
- 42. Congenital Infection
- 42. Congenital Infection Codes (add.2018)

# NICU Data Sharing

## What is it?

NICU Data Sharing is a feature that allows NICUs that care for the same infant to share the below items with each other to simplify the data entry process for transported infants.

- **Infant Demographics (Items 1-8, C.3-C.5, C.11, C.19, C.30-C.32)**
- **Maternal History (Items 9-18, C.7-C.8)**
- **Delivery Room (Items 19-23, C.9)**
- **Congenital Anomalies (Items 52, C.6)**
- **Disposition and Length of Stay (Items 57, 60, 62, 63, 65-67)**

NICU data cannot be shared for:

- CPQCC NICUs that are not participating in NICU data sharing

Or

- Non-CPQCC NICUs

# NICU Data Sharing – Data Consistency Reports (DCR)

The following scenarios have been added to the Data Consistency Report (DCR) that can be resolved using NICU Data Sharing.

- Small Babies who were seen in your NICU as part of their length of stay (within 28 days), but were never recorded in the NICU database
- Small Babies who were registered in HRIF by your NICU but not recorded in the NICU database

**Rationale:** To assist participating NICUs in finding Small Baby infants that visited your NICU but are not currently part of your NICU data set.

# CPQCC NICU Data Center – Goals

As a quality improvement organization, the NICU Data Center strives to contribute to the overall strategic plan by making continual improvements in different areas of our production process. Specifically, we plan to focus on the following:

1. **Timely and informative customer service to our members**
2. **Ongoing, proactive education and resources for data entry and reports analysis**
3. **Strategical and thoughtful database innovations that facilitate the ease of use and data collection needs of the centers**
4. **Ensure each year's data finalization close-out process is timely and high-quality**
5. **Collaborate with internal and external organizations to facilitate perinatal quality improvement**





# NICU Data Center 2025 Database Changes

*Annalisa Watson, Program Manager*

# CPQCC's NICU Database Updates

1. **System Level Reporting** – added in 2024 (Reports feature)
2. **Race/Ethnicity** - update for 2025 birth year (Data collection change)

# CPQCC's NICU Database Updates

## System Level Reporting – added in 2024

- This feature allows users to compare their NICU to other NICUs within a specific system (i.e. Dignity Health, Providence).
- NICU teams who are currently part of such a system need to sign an agreement that allows their data to be viewed this way for each NICU.
  - If interested, submit a ticket to the help desk to request an agreement: [www.cpqcchelp.org](http://www.cpqcchelp.org)
  - Make sure to include the name(s) and email address(es) of people who have the authority to sign contract agreements
  - Agreements will be sent via Adobe Sign and need to be signed by both organizations (ours and yours)
  - Once signed, you will have immediate access
- Once logged in to the NICU Reports website, a user has the options view a "system" dashboard with data that combines all NICUs in the system.

# CPQCC's NICU Database Updates

The following reports have the System Level Reporting option:

- **NICU Dashboard**
- **HE Dashboard**
- **Detail Tables**
- **Control Charts**
- **Risk-Adjusted Tables/Reports**
- **Focusboard: Snapshot**
- **Focusboard: Quality Indicators**

# CPQCC's NICU Database Updates

## Admission/Discharge Form (2024) – Current format

- **Item 10. Maternal Race/Ethnicity:** CPQCC's current race and ethnicity classifications:
  - **Item 10a. Mother's Hispanic Origin [HISP]**
    - Select **Yes** if the biological mother is a person of **Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin**, regardless of race.
    - Select **No** if the biological mother's ethnicity is not of **Hispanic or Latino origin** as defined above.
    - Select **Unknown** if the maternal ethnicity is not known.
  - **Item 10b. Mother's Race [MATRACE]**
    - Select **Black or African American** if the biological mother is a person having origins in any of the black racial groups of Africa.
    - Select **Asian** if the biological mother is a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
    - Select **Native Hawaiian** or Other Pacific Islander if the biological mother is a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
    - Select **American Indian** or Alaska Native if the biological mother is a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
    - Select **White** if the biological mother is a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
    - Select **Other** if none of the race categories above applies to the biological mother.

# CPQCC's NICU Database Updates

## Admission/Discharge Form – 2025 update!

- **Item 10. Maternal Race/Ethnicity:** CPQCC is implementing a new classification and format based on the The Office of Management and Budget (OMB) update for race and ethnicity
  - **The following items will also be added:**
    - Options for: Other, Unknown and Declined
    - Option to allow multiple options

**Reporting:** We plan to use the same basic ranking format that is currently being used for maternal race/ethnicity.

**DF Survey:** 83% out of 172 respondents, agreed that it was feasible to collect the data in this new format.

The screenshot displays the '2025 Admission/Discharge Form' interface. At the top right, the NICU ID is 0000. The form is divided into four tabs: Demographics (Items 1-8), Maternal HX (Items 9-18), DR (Items 19-23), and Respiratory (Items 24-39). The Demographics tab is active. Under '9. Maternal Date of Birth', there is a date input field, a calendar icon, and an 'Unknown' checkbox. Below it, 'Maternal Age' is shown with a numeric input field, the word 'years', and an 'Unknown' checkbox. Under '10. Maternal Race and Ethnicity', there is a list of checkboxes for: American Indian/Native American, Asian, Black, Hispanic or Latino, Middle East/North Africa, Native Hawaiian/Pacific Islander, White, Other, Declined, and Unknown.

# CPQCC's NICU Database Updates

## 10. Maternal Race and Ethnicity

- American Indian/Native American
- Asian
- Black
- Hispanic or Latino
- Middle East/North Africa
- Native Hawaiian/Pacific Islander
- White
- Other
- Declined
- Unknown

## 10. Maternal Race and Ethnicity

- American Indian/Native American
- Asian
- Black
- Hispanic or Latino
- Middle East/North Africa
- Native Hawaiian/Pacific Islander
- White
- Other
- Declined
- Unknown

# CPQCC's NICU Database Updates

## How will the updated Maternal Race/Ethnicity format be reported?

**No change.** While the CPQCC NICU Data form captures race and ethnicity as separate fields, they will still be combined into categories according to the following rules for NICU reports:

- **Non-Hispanic White:** Maternal race is coded as White and ethnicity is coded as Not Hispanic.
- **Hispanic:** Maternal race is coded as White, Other or Unknown and ethnicity is coded as Hispanic.
- **Black:** Maternal race is coded as Black, any ethnicity.
- **Asian:** Maternal race is coded as Asian, any ethnicity.
- **Native Hawaiian/Other Pacific Islander:** Maternal race is coded as Native Hawaiian or Other Pacific Islander, any ethnicity.
- **American Indian/Alaska Native:** Maternal race is coded as American Indian/Alaska Native, any ethnicity.
- **Middle Eastern or North African:** Maternal race is coded as White and ethnicity is coded as Not Hispanic.
- **Other:** Maternal race is coded as Other and ethnicity is coded as Not Hispanic.



# NICU Reporting & FCC Updates

Dr. Jochen Profit, Co-Chair  
and Co-Principal Investigator of CPQCC

# NICU Reports Review

Login to [cpqccreport.org](https://cpqccreport.org) to follow along!

- Data Dashboard – [CPQCC Network](#) trends
- All NICU Admits Focusboard – [Demo Center](#)
- Health Equity Dashboard – [Demo Region](#)
- FCC Focusboard

# Family Centered Care Pilot Project

## 2021-2024 Participant Summary

- 28-31 NICUs participating since initiation in January 2021
- MOMMS participants will collect two FCC items starting in July 2024\*\*

## Metrics

- Days from NICU admission to first skin-to-skin care\*\*
- Days from NICU admission to first social worker contact
- Hours from birth to priming with oral colostrum\*\*

*Point-of-care derived measures developed in collaboration with families.  
Measures selected through a modified Delphi panel that included family representatives.*


# Family Centered Care Pilot Project


## Family Centered Care (FCC)


Our work on disparities in the NICU has revealed considerable gaps in family-centered care. To address these gaps, CPQCC is partnering with NICU families to pilot test measures of family-centered care in the NICU. Improving family-centered care through measurement and feedback will ensure that NICU families, including the most marginalized, are better supported in caring for their infant. Measures being pilot tested include:

- Days from NICU admission to first skin-to-skin care
- Days from NICU admission to first social worker contact
- Hours from birth to priming with oral colostrum

**Family Centered Care (FCC) Items:**

Days from NICU Admission to First Skin-to-Skin Care at Your Hospital  Days, or Enter Date    Prior to NICU Admission  Never Done Here  Unknown

Days from NICU Admission to First Social Worker Contact at Your Hospital  Days, or Enter Date    Prior to NICU Admission  Never Done Here  Unknown

Hours from Birth to Administering Oral Colostrum at Your Hospital  Hours, or Enter Date and Time   at   Never Done Here  Unknown

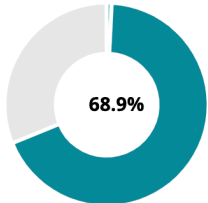
**Comment:**

- A comment box can be used to provide additional details as to why these FCC measures might not be useful or have limitations for this infant.

# Family Centered Care Pilot Project

## Focusboard on NICU Reports Site (Demo NICU)

Priming with Oral Colostrum at this NICU



Percent with Oral Colostrum



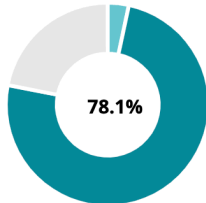
Median Hours to Oral Colostrum

The practice of priming with oral colostrum confers benefits to VLBW infants and signals NICU culture and commitment to use of mother's milk for nutrition.

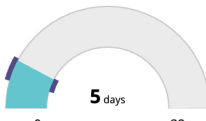
The percent and median shown are based on all inborn infants who were hospitalized at your hospital for at least 48 hours, who did not have anomalies affecting the ability to prime with oral colostrum, and who were not exposed to maternal substance use during fetal life.

[Explore this topic ...](#) [Go](#)

Skin-to-Skin at this NICU



Percent with Skin-To-Skin



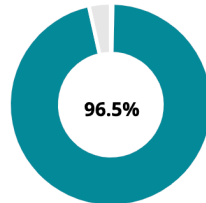
Median Days to Skin-To-Skin

Skin-to-skin care is protective against a variety of adverse neonatal outcomes. SKS requires holding of the infant by a family member. Positive touch is not counted. Infants that are transferred are included.

The percent and median shown are based on all inborn infants, who were hospitalized at your hospital for at least 5 days, and who did not have anomalies affecting the ability to provide skin-to-skin admitted to your NICU, and who never experienced high frequency ventilation.

[Explore this topic ...](#) [Go](#)

Social Worker Visit at this NICU



Percent with Social Worker Visit



Median Days to First Social Worker Visit

Timely social worker assessment is critical to identifying psychosocial and material needs of NICU families and to connect families to appropriate supportive services. Timely social worker contact, within 2 days of NICU admission, is also mandated by CCS regulations in California. The goal of this measure is to examine whether the needs of families are being assessed in a timely manner and to identify opportunities for improvement.

The percent and median shown are based on all inborn and outborn infants who were hospitalized for at least 3 days.

[Explore this topic ...](#) [Go](#)

# Family Centered Care Pilot Project

## Focusboard on NICU Reports Site (Demo NICU)

Family Centered Care (FCC) Focusboard, Demo Center, Birth Year 2021 or Later as of Mar 29, 2024 at 05:52 [Tour](#)

Skin-to-Skin

**Show me ...**  
 Process Summary  
 NICU Outcomes

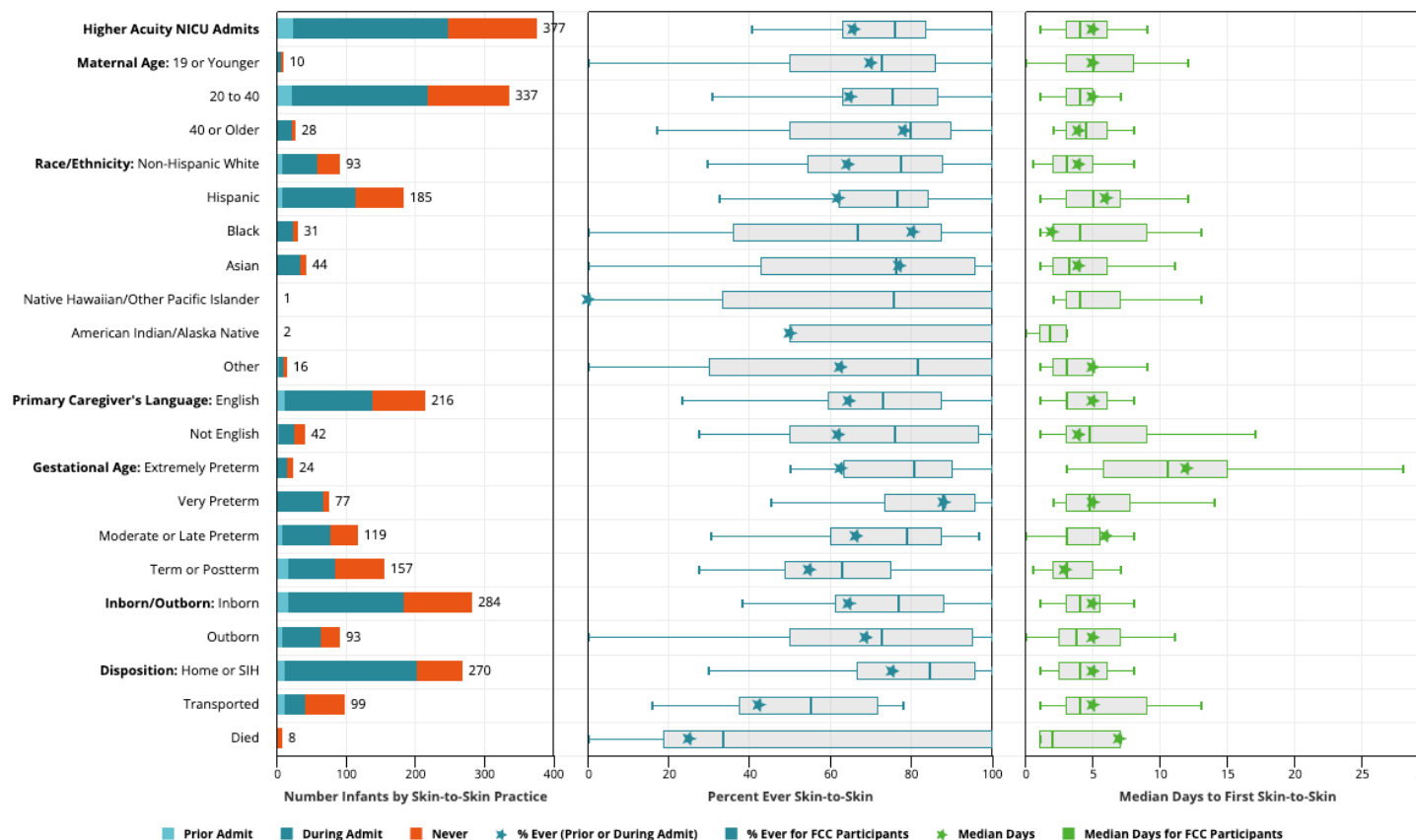
**Exclude infants with ...**  
 Congenital Anomalies <sup>1</sup>  
 High Frequency Ventilation <sup>1</sup>  
 Outborn or Transport-Out/Death prior DOL 7 <sup>1</sup>  
 GA > 31 weeks <sup>1</sup>

**Compare to FCC Participants ...**  
 All  Regional NICUs

[Update](#)

Number and Percent of Infants with Skin-to-Skin Ever and Median Days from NICU Admission to First Skin-to-Skin Compared to FCC Participants

Number of high acuity infants after exclusions: 460. Percent for which skin-to-skin practice is captured as not missing/unknown: 82.0%



Show Table

CPQCC

# Family Centered Care Pilot Project

## Research Updates

- **Research Abstract presented at Gravens Conference in March 2024**
  - **Data from Jan 2021 – Aug 2023; 28 participating hospitals**
  - **Large variation in time to first skin to skin care and first oral colostrum.**
  - **Little variation in time to first social worker contact.**
  - **Safety net hospitals had longer times to first skin-to-skin or oral colostrum**

# Family Centered Care Pilot Project

## Next Steps In Progress

- Publicizing FCC Taskforce to our CPQCC member hospitals
- Presenting FCC updates to our Family Advisory Council

## Future Directions

- FCC webinar for our CPQCC member hospitals
- Using current and future analyses/learnings from NEOBrain and MOMMS to determine next steps for metrics
- Decrease gaps and disparities in FCC, particularly among safety net NICUs



# Delivery Room Oxygen & Language Data Updates

Dr. Henry C. Lee, University of California San Diego  
Chair – DIOC, CPQCC

# Delivery Room Oxygen (DRO<sub>2</sub>) - Background

- Practice has shifted and continues to evolve regarding oxygen management in preterm infants right after birth
- Questions:
  - What fraction of inhaled oxygen (FiO<sub>2</sub>) do babies end up (after starting at 21-30%) after several minutes?
  - What is the oxygen saturation (SaO<sub>2</sub>) of preterm babies at ~5 minutes (when targeting term newborn norms)?
  - How does FiO<sub>2</sub> / SaO<sub>2</sub> relate to later clinical outcomes?

In a study of 284 preterm infants, SpO<sub>2</sub> < 80% vs > 80% was associated with:

- Higher rates of any or severe intraventricular hemorrhage
- Higher rates of death 16% vs 4% (p < 0.001)



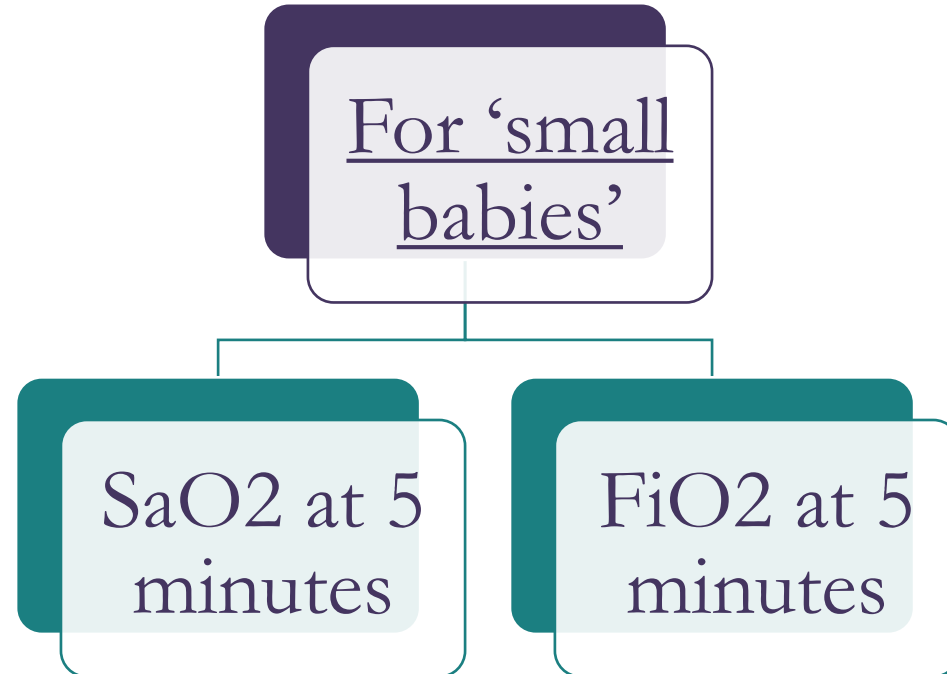
Katheria et al , J Perinatol 2019 Dec;39(12):1635-1639

In an individual patient data, network meta-analysis, high oxygen (90% or more) compared to medium (50-65%) or low oxygen (21-30%) was associated with the lowest risk of death.



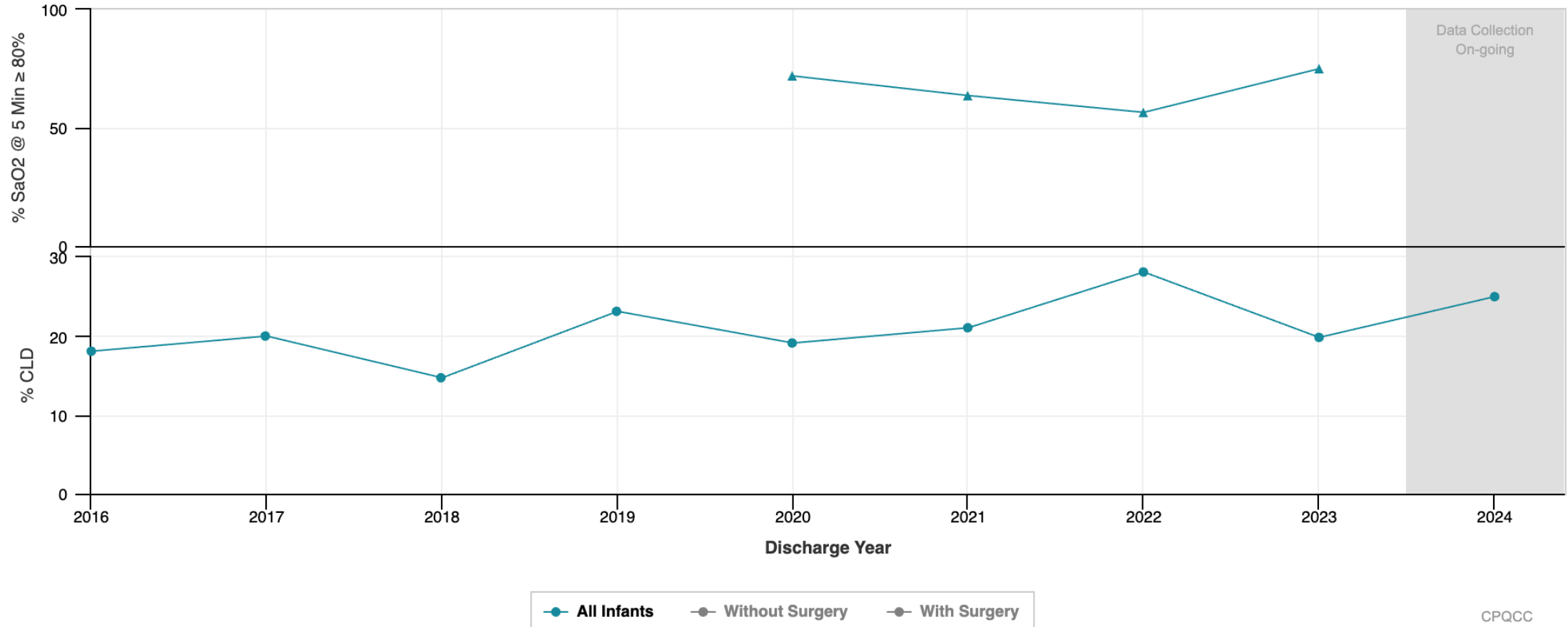
Sotiropoulos JX et al. JAMA Pediatrics 2024

# CPQCC Optional Variables for DRO2



# CLD Focusboard

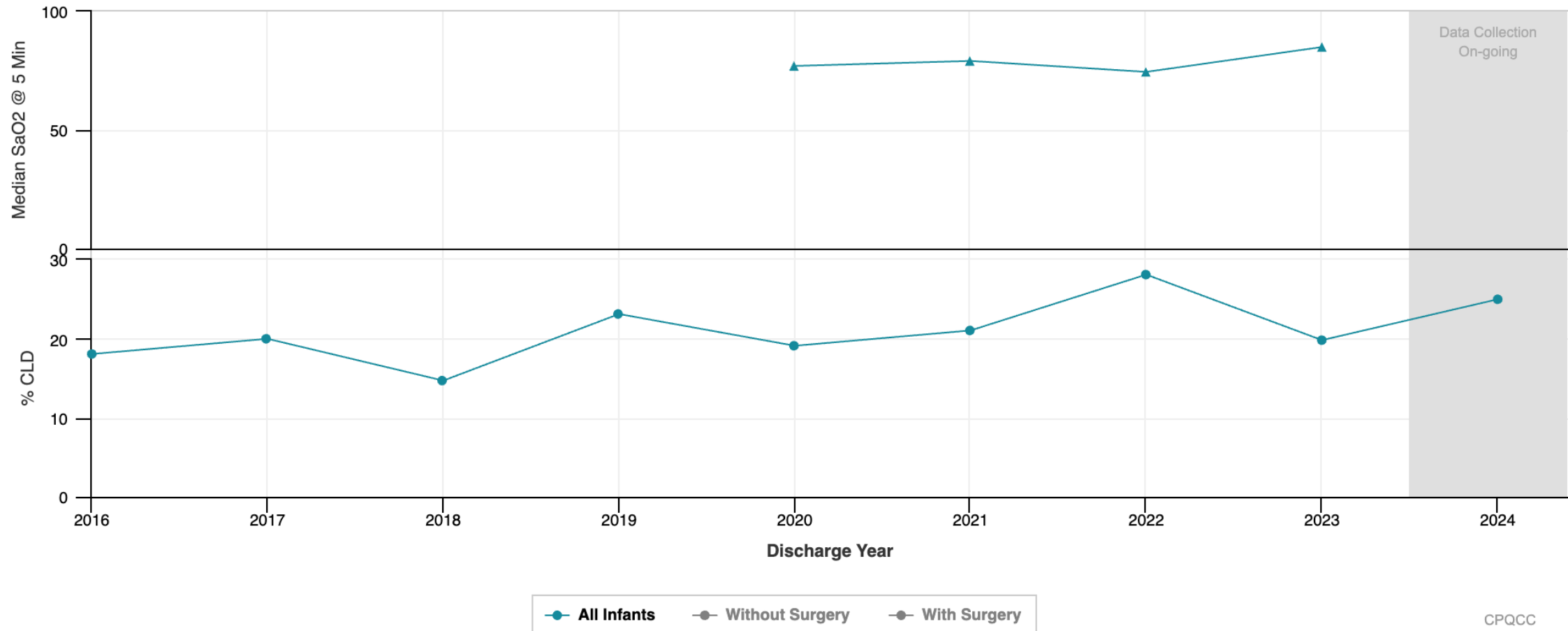
## % CLD & %SaO2 @ 5 min $\geq$ 80%



CPQCC

# CLD Focusboard

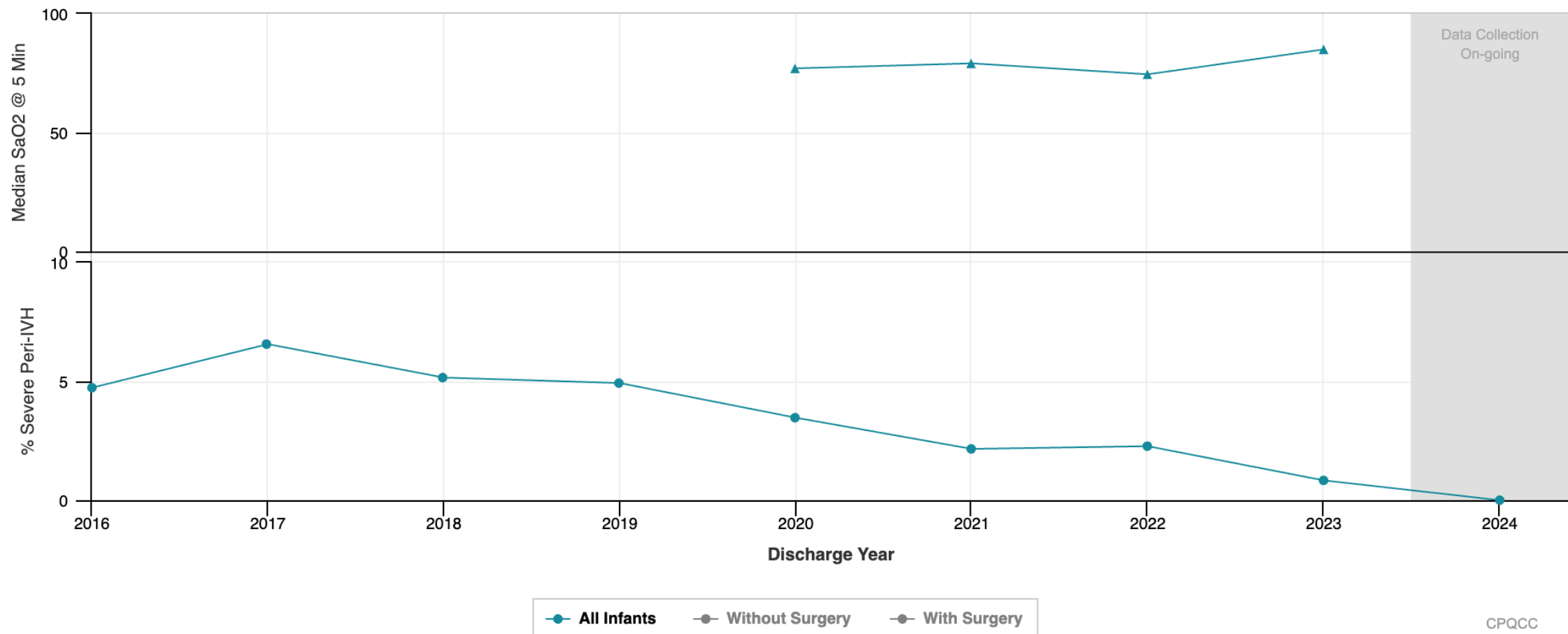
## % CLD & Median SaO2 @ 5 min



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# CLD Focusboard

## % Severe Peri-IVH & Median SaO2 @ 5 min

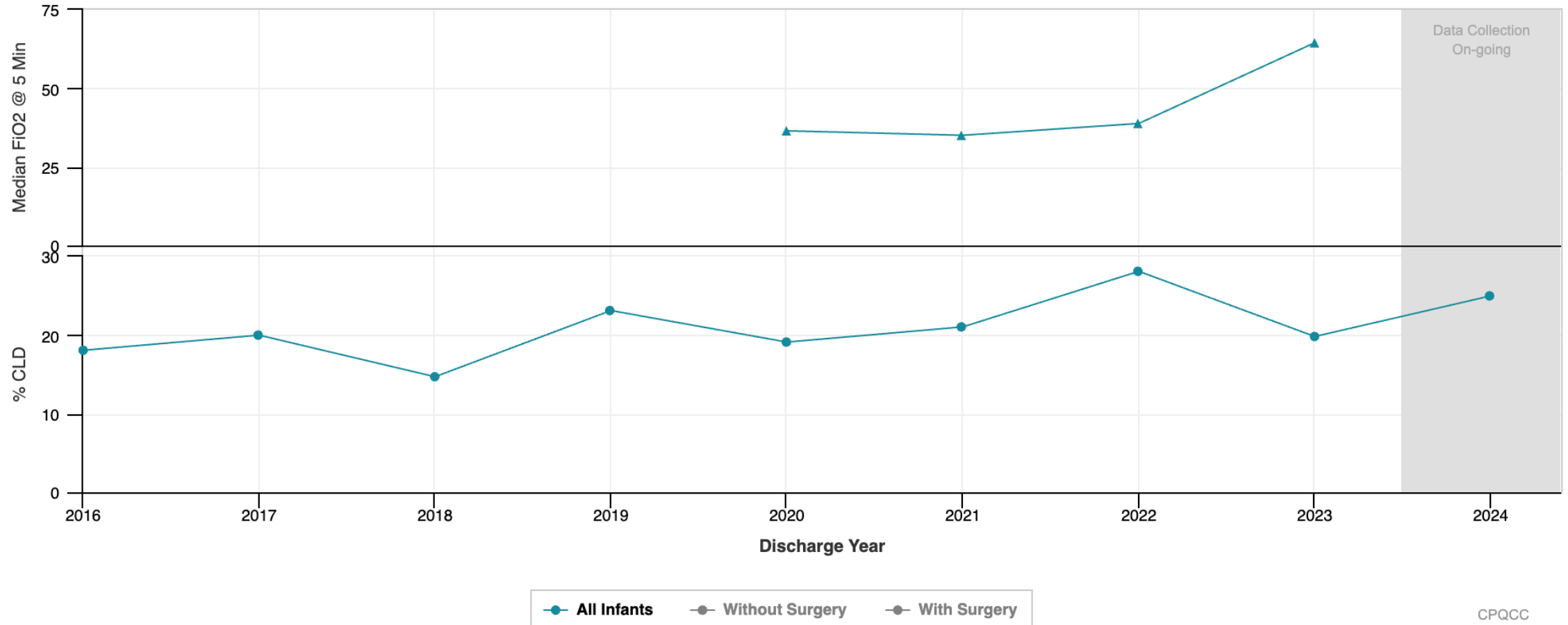


CPQCC



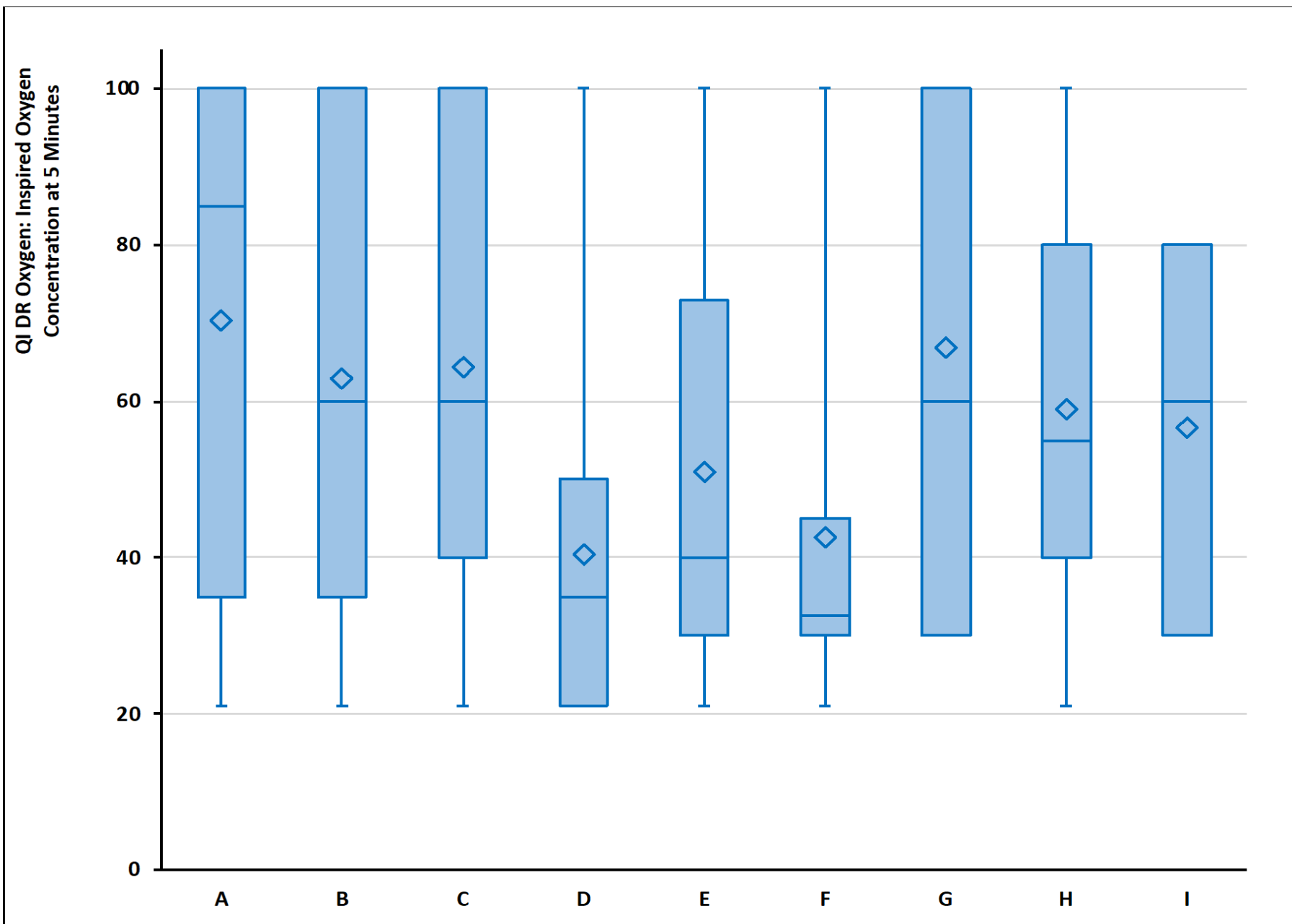
# CLD Focusboard

## % CLD & Median FiO2 @ 5 min



CPQCC

# 5 minute FiO2 by hospital



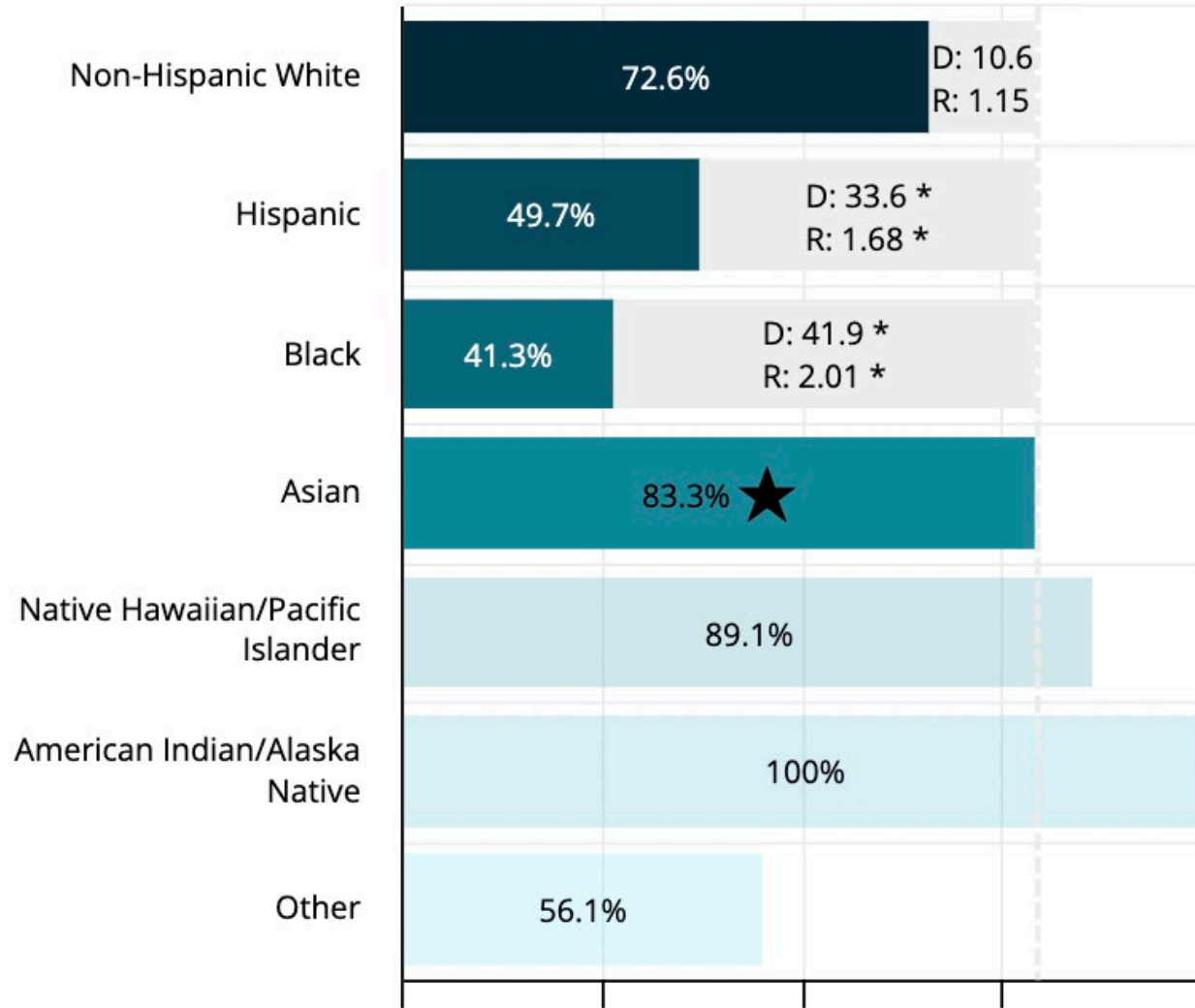
Article in revision  
process at Journal of  
Perinatology

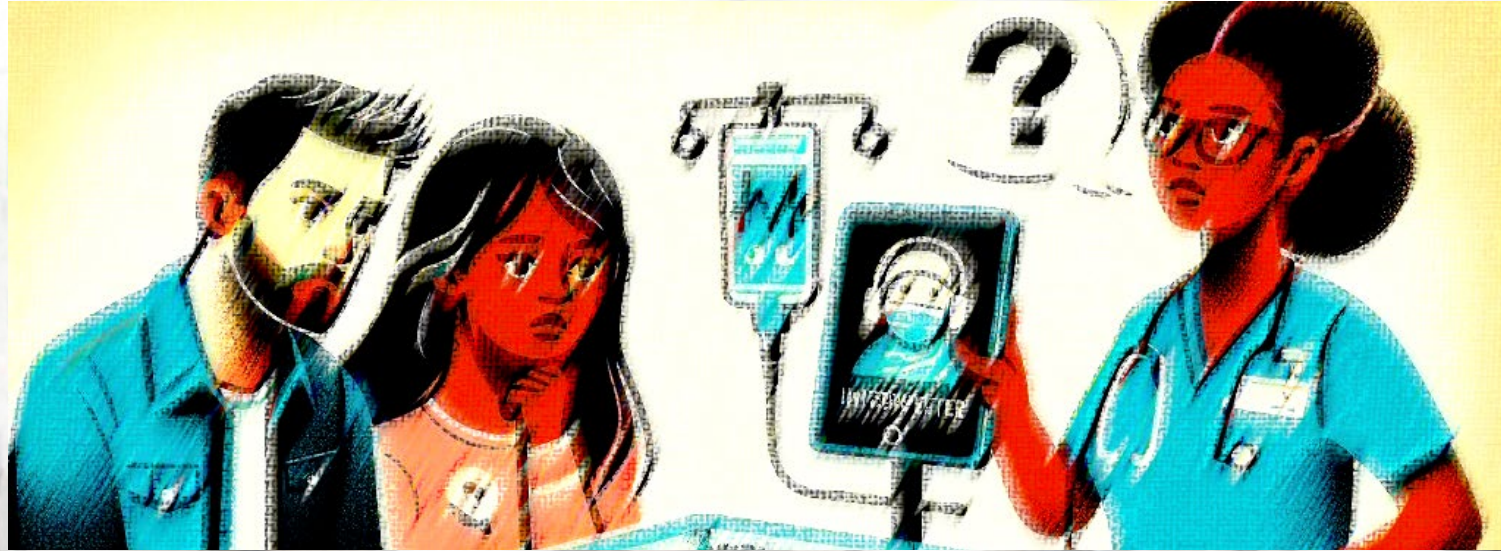
# CPQCC Health Equity Dashboard



## Human Milk Nutrition by Race/Ethnicity

Reset zoom





## Data Points new for 2022:

1) **Mother's Preferred Language: Please list mother/primary care giver's preferred language.**

Arabic • Armenian • Cantonese • English • Farsi/Persian • Hindi • Hmong/Miao • Japanese • Korean • Mandarin • Mixtec • Mon-Khmer/Cambodian • Punjabi • Russian • Spanish • Tagalog • Thai • Vietnamese • Other/Describe • Unknown

2) **Did mother/primary caregiver require interpreter services (either in-person or remote) during this hospitalization?**

Yes • No • Unknown

## Improving Outcomes for NICU Families with a Non-English Language of Preference

Stay Informed

[Annual Improvement  
Palooza](#)

[Annual Data Training](#)

[Annual Reports](#)

[FAQs](#)

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Join our third IP2022 Conversation Circle on Improving Outcomes for NICU Families with a Non-English Language of Preference (NELP)!

Research shows disparities in infant outcomes for families with a non-English language of preference. Join this multidisciplinary webinar to gain insight into how you can take actionable steps to reduce these disparities and learn about materials you can share with your unit. We will discuss new CPQCC data on languages of preference and interpreter use in the NICU and specific evidence-based recommendations you and your colleagues can implement

**Date:**

Jan 31, 2023, 12:00pm to 1:00pm

**Event slides:**

 [Webinar Slides](#)

[WEBINAR RECORDING »](#)

## Resource Bundle: NICU Families with a Non-English Language of Preference

[Stay Informed](#)

[Annual Improvement  
Palooza](#)

[Annual Data Training](#)

[Annual Reports](#)

[FAQs](#)

[Connect With Us](#)

[Glossary](#)

[Media Inquiries](#)

Research shows disparities in infant outcomes for families with a non-English language of preference (NELP). The NELP Resource Bundle includes action-oriented, evidence-based, or evidence-derived change ideas that NICU team members can implement to improve outcomes for families with a non-English language of preference and advance health equity.

View the [webinar recording](#) from January 31, 2023.

**The NELP Resource Bundle includes:**

A **mini-toolkit** of action-oriented change ideas broken out by

**Resource Category:**  
Tools

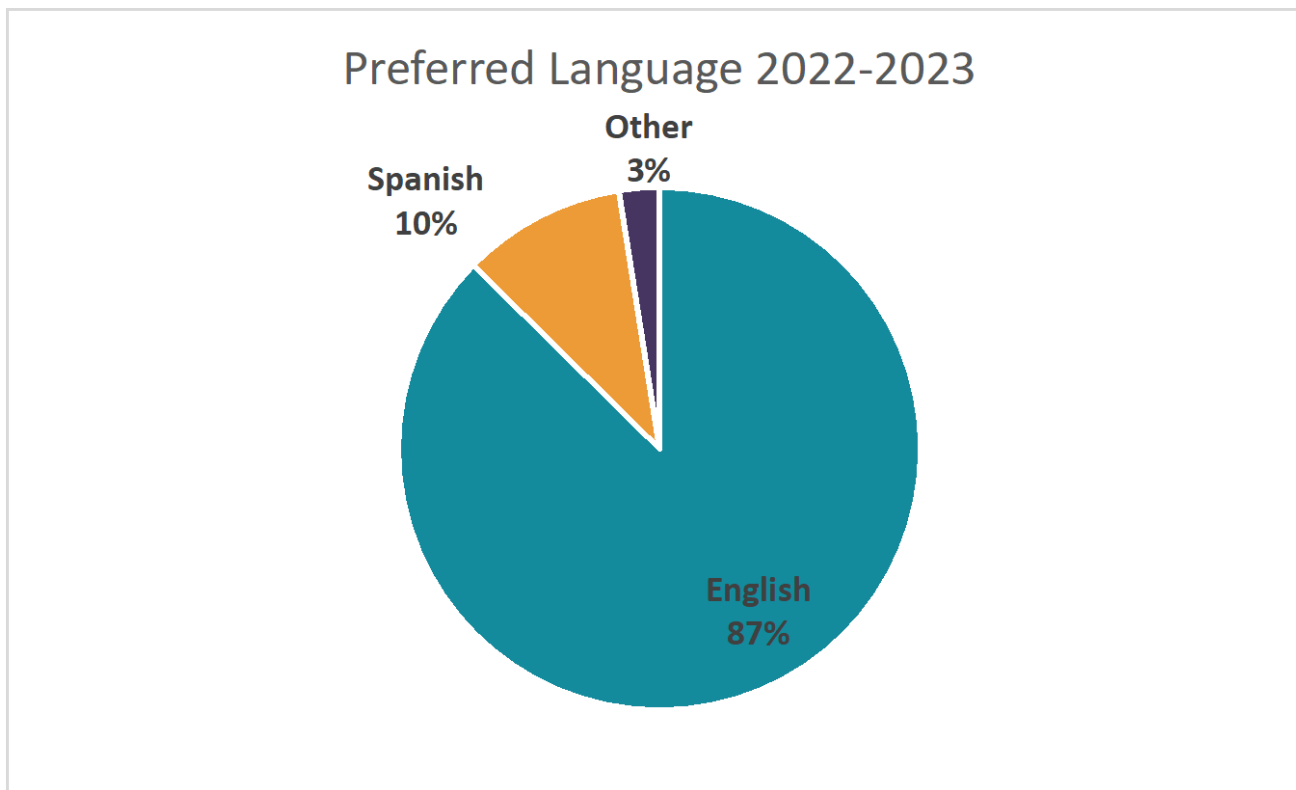
**Date:**  
January 2023

**Additional PDFs:**

 [Download Nurses\\_NELP](#)

[Mini  
Toolkit\\_FINAL\\_012623.pdf](#)

# Data from 2022-2023 (n=35,235)



Of Spanish speaking, 90% indicated interpreter services were required

Other languages n > 15:

- Mandarin
- Farsi/Persian/Dari
- Arabic
- Mixteco
- Vietnamese
- Punjabi
- Pashto
- Haitian/French Creole
- Russian
- Cantonese
- Armenian
- Korean



# Basic Table → Topic: Communicating with Caregiver



Demo NICU

*This report is final for 2022 and 2023.*



- Basic Table ▾
- Demo Center ▾
- All CPQCC Babies ▾
- Communication with Caregiver ▾
- Compare to: CPQCC Network ▾
- Inborn and Outborn (incl PDH) ▾
- 2023 ▾

Update Results



LOGOUT

	Demo Center (N = 122)			CPQCC Network NICUs (N NICUs = 137)			Demo Center Compared to CPQCC Network NICUs
	N	%	Last Year %	% Median	% Lower Quartile	% Upper Quartile	
<b>Primary caregiver's preferred language</b>							
Arabic	0	0.0	NA	0.0	0.0	0.0	↓
Armenian	0	0.0	NA	0.0	0.0	0.0	↓
Cambodian/Khmer	0	0.0	NA	0.0	0.0	0.0	↓
Cantonese	0	0.0	NA	0.0	0.0	0.0	↓
English	107	88.4	NA	89.3	79.3	96.2	↔
Farsi/Persian	2	1.7	NA	0.0	0.0	0.0	↓
Hindi	0	0.0	NA	0.0	0.0	0.0	↓
Hmong/Miao	0	0.0	NA	0.0	0.0	0.0	↓
Japanese	1	0.8	NA	0.0	0.0	0.0	↓
Korean	0	0.0	NA	0.0	0.0	0.0	↓
Mandarin	3	2.5	NA	0.0	0.0	0.1	↓
Mixteco	0	0.0	NA	0.0	0.0	0.0	↓
Punjabi	0	0.0	NA	0.0	0.0	0.0	↓
Russian	0	0.0	NA	0.0	0.0	0.0	↓
Sign Language	0	0.0	NA	0.0	0.0	0.0	↓
Spanish	7	5.8	NA	8.3	2.9	17.5	↔
Tagalog	0	0.0	NA	0.0	0.0	0.0	↓
Thai	0	0.0	NA	0.0	0.0	0.0	↓
Vietnamese	0	0.0	NA	0.0	0.0	0.0	↓
Other	1	0.8	NA	0.0	0.0	1.1	↓
<b>Total NICU Admissions</b>	<b>121</b>	<b>100.0</b>	<b>NA</b>				
<b>Did primary caregiver require interpreter services?</b>							
No	5	35.7	NA	0.0	0.0	14.3	↔
Yes	9	64.3	NA	100.0	85.7	100.0	↔
<b>Total with Preferred Language not English</b>	<b>14</b>	<b>100.0</b>	<b>NA</b>				

# Q&A Session

# Closing

# Recording and Webinar Evaluation

## ATTENTION!

At the end of this webinar please click the evaluation link provided to submit your evaluation for this data trainings.

Note: CEU's will be accumulated and distributed after all data training sessions have been completed (for live sessions only)

The webinar recording and slides will also be posted at:

<https://www.cpqcc.org/engage/annual-data-training-webinars-2024>

# Upcoming Data Trainings

October 30<sup>th</sup> – What's New with HRIF Data



[Register for What's New with HRIF Data](#)

THANK YOU!

CPQCC

california perinatal  
quality care collaborative