



What's New with the NICU

October 21, 2020

Webinar Logistics

- Attendees are automatically muted upon entry
- The “chat” function has been disabled. **Please utilize the Q&A box if you are having technical difficulties and to submit any questions you have for the presenters. We will answer as many questions as possible during the Q&A portion of the webinar.**
- 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-2020>

Presenters

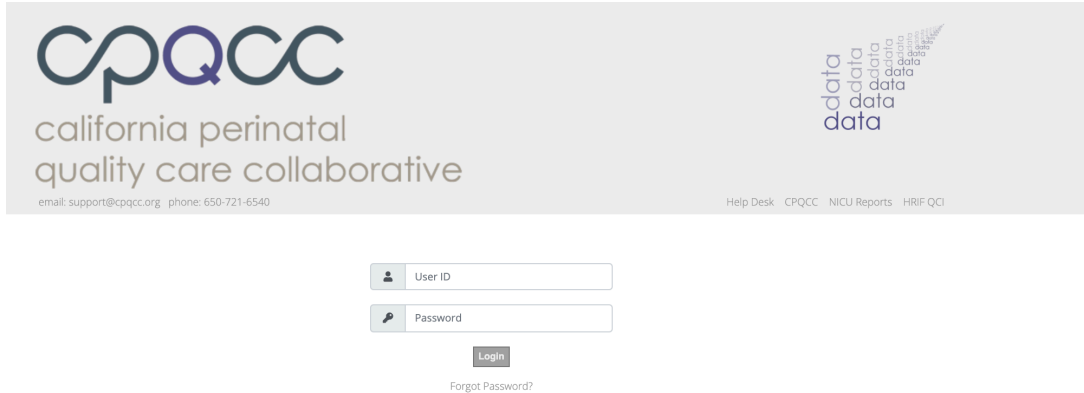
- **Henry Lee, MD, MPH**, Chief Medical Officer, CPQCC
- **Jochen Profit, MD, MPH**, Chief Quality Officer, CPQCC
- **Janella Parucha, BS**, Program Manager, CPQCC
- **Fulani Davis**, Program Manager, CPQCC

Introduction to NICU Data Entry

Janella Parucha
NICU Program Manager

Access

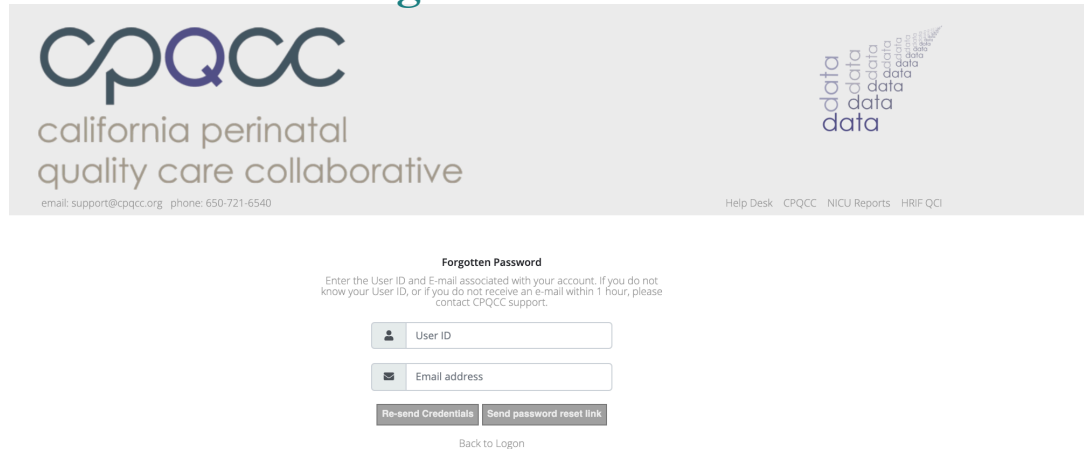
Login page



The screenshot shows the CPQCC login page. At the top left is the CPQCC logo and the text "california perinatal quality care collaborative" with contact information. At the top right is a decorative graphic of the word "data" repeated in a triangular shape. Below the header are two input fields: "User ID" and "Password", followed by a "Login" button and a "Forgot Password?" link.

- Submit a Help Ticket if you need access or reactivation for the NICU data site (www.cpqccdata.org) or NICU report site (www.cpqccreport.org)
- Select "Forgot Password?" to send reset link or credentials.

Forgot Password



The screenshot shows the CPQCC forgot password page. It features the same header as the login page. Below the header, there is a heading "Forgotten Password" followed by a paragraph of instructions: "Enter the User ID and E-mail associated with your account. If you do not know your User ID, or if you do not receive an e-mail within 1 hour, please contact CPQCC support." Below this are two input fields: "User ID" and "Email address". At the bottom are two buttons: "Re-send Credentials" and "Send password reset link", and a "Back to Logon" link.

Passwords

- Your password must be changed once a year.
- Members can change their passwords on the NICU Data site or the NICU Reports site by selecting “Change Password”
- If a user attempts to login 5 times with an incorrect pw, the account is locked for 15 minutes.

Change Password for jpickle

A user password has to fulfill the following requirements:

1. At least 8 positions long.
2. At most 24 positions long, spaces not allowed.
3. At least 1 upper case character.
4. At least 1 lower case character.
5. At least 1 number.

Also allowed, but not required, are the following characters: ? - _ ^ ! . :

Enter current password

Enter new password

Re-enter new password

Update Password

Eligibility

WWW.CPOCCC.ORG > NICU Data Resources

[About](#) [NICU](#) [Analysis](#) [Improvement](#) [Follow-Up](#) [Engage](#)

Small Babies

An infant is considered a “small baby” if they:

- Were born between 22 weeks, 0 days and 31 weeks, 6 days of gestation or
- Had a birth weight between 401-1,500 grams

All small babies are eligible for entry into the NICU Database, regardless of whether they were born at your hospital (“inborn”) or were born at a different hospital (“outborn”) but were acutely transferred to your hospital for care by any service (not just the NICU), as long as the transfer occurred before the baby’s 28th day of life.

Big Babies

Several factors determine whether “big babies,” or those with birth weights greater than 1,500 grams and born at 32 weeks of gestation or greater, are eligible for entry into the database. They must either have been born at your hospital or have been transferred in within 28 days of their birth. In addition, they must have been admitted into the NICU or cared for by the NICU service team and meet one of the following criteria:

1. Death
2. Acute transport into your NICU
3. Acute transport out of your NICU
4. Nasal IMV/SIMV (or any other form of non-intubated assisted ventilation) for greater than four continuous hours
5. Intubated assisted ventilation for greater than four continuous hours
6. Early bacterial sepsis
7. Major surgery requiring anesthesia
8. Previously discharged home and then readmitted for a total serum bilirubin of greater than or equal to 25 mg/dl (427 micromols/liter) and/or exchange transfusion. *Babies readmitted for hyperbilirubinemia are eligible whether they are readmitted directly to the NICU or elsewhere in the hospital.*
9. Suspected encephalopathy or perinatal asphyxia
10. Active therapeutic hypothermia
11. Seizures (Babies born in 2019 or later)

Confused? Use the flow-chart below to determine if a baby is eligible for entry into the NICU Database.

Is This Baby Eligible?



Was the baby born alive?

Yes



Did the baby die within 12 hours of birth, before being admitted to the NICU?

No



Was the baby born between 22 weeks and 31 weeks, 6 days gestation or with a birth weight between 401-1,500 grams?

Yes

Start Again

The baby qualifies as a “Small Baby” and is eligible for entry into the NICU Database.

Add New Data

Add New DRD, A/D or CPeTS Record

Eligibility Help

- Home
- Change Password
- Upload EDS File
- Mail/Download Reports/Data
- Custom Query
- My Activity Summary
- Update Log / Msg Archive
- Logon to NICU Reports
- Calculator Tool
- Member Directory

NICU 0000

Add New Data

Add via Shared Record [0]

NICU Settings

2020

Edit Data

CCS Form

CCS Report

Data Reports

Close-Out Checklist

Optional NICU Admits DB

MATEX DB

LOGOUT

CPeTS Acute Inter-facility Transport: Was the infant transported to your NICU within 28 days of life, who requires medical, diagnostic, or surgical therapy that is not provided, or for 2018 that cannot be efficiently provided due to temporary staffing /census issues, or due to insurance restrictions at the referring hospital?

Yes No

Note that starting from 2019, an infant transported solely for insurance reasons or staffing/census issues is not considered an acute transport!

Did the infant die in the delivery room or any other location in your hospital within 12 hours of birth AND prior to NICU admission? (Infants who died in the delivery room with a birth weight of 400 grams or less should not be included unless their gestational age is 22 to 29 (prior to 2013) / 31 (2013 or later) completed weeks)

Yes No

Birth weight: 401 - ≤ 1,500 grams who was born or admitted at your hospital within 28 days of birth.

Yes No

Gestation: 22 weeks 0 days - < 30 weeks of gestation prior 2013 (29 weeks and 6 days should be checked as 'Yes') who was born or admitted at your hospital within 28 days of birth.

Gestation: 22 weeks 0 days - < 32 weeks of gestation 2013 or later (31 weeks and 6 days should be checked as 'Yes') who was born or admitted at your hospital within 28 days of birth.

Yes No

Does the infant meet at least one of the following criteria:

1. Infant Death, or
2. Surgery, or
3. Intubated Assisted Ventilation for > 4 continuous hours, or
4. Nasal IMV/SIMV (or any other form of non-intubated assisted ventilation) for > 4 continuous hours (2009 or later), or
5. Acute transport-in, or
6. Acute transport-out, or
7. Early bacterial sepsis, or
8. previously discharged home and readmitted to your hospital for exchange transfusion and/or bilirubinemia level ≥ 25 mg/dL AND birth weight > 1,500 grams who was born or admitted at your hospital within 28 days of birth (2007 or later), or
9. Suspected encephalopathy or suspected perinatal asphyxia (2013 or later), or
10. Active therapeutic hypothermia (2013 or later), or
11. Seizures (2019 or later)

Yes No

[The infant is eligible for the NICU database.](#)

To start the process of submitting data on-line, check birth year of infant, enter record ID, and retrieve the correct form. Note that you will only be able to continue if you check the birth year and enter a valid record ID!

Birth Year: 2019 2020

NICU ID: 0000

Record ID:

Last 3 Record IDs Entered: 1531 1523 1522

Admission/Discharge Form

NICU Data

2018 CPQCC Admission/Discharge Form

Started by HIS
on 05/02/2018 @ 17:34.

Last update by HIS
on 08/22/2018 @ 09:21.

59:34

Center Number: 0000

Infant ID: 01300

Birth Year: 2018

DOB: 4-15-2018 BW: 3251 GA: 39/4 CPQCC Eligible Infant

- Minimum 5 variables to start a record
- 1) BIRTH YEAR, 2.) Infant ID, 3.) BWGT, 4) DOB, TOB, 5) SEX
- Check Form and Save

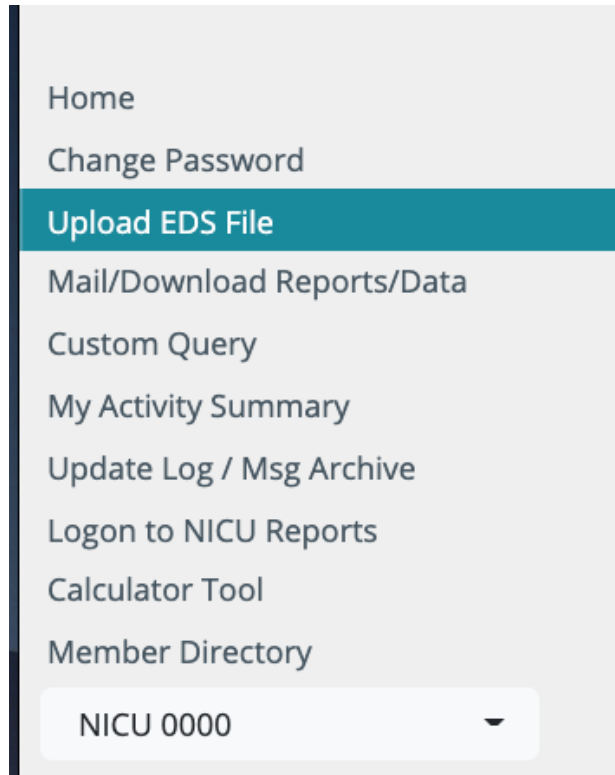
Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bill Items 52-55	Disposition Items 56-60
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Demographics

1. Birth Weight grams
2. Head Circumference at Birth cm Unknown
3. Best estimate of gestational age a) Weeks: b) Days:
4. Date/Time of Birth at Time Unknown
5. Infant Sex
6. Died in Delivery Room
7. a) Location of Birth
Note: For infants who were previously home, always check Outborn, even if the infant was born at your hospital or was born at the co-located hospital (for satellite NICUs only).
b) Age in Days at Admission to your NICU
c) Select hospital of birth for outborn infants
8. Hospital Admission History
Note: The Hyperbilirubinemia Items 53 to 55 are activated ONLY IF the infant Was Home after Birth (Item 8a).
a) Discharged Home after Birth?
b) NICU Re-Admission Status after PDH

Mark this record as deleted

Electronic Data Submission



- EDS (CSV) files can be uploaded through the link on your navigation bar 'Upload EDS File'.
- If you are interested in EDS submission please review the EDS Instructions located at www.cpqcc.org → NICU resources.
- Then submit a CPQCC Help Ticket at www.cpqcchelp.org for additional help.

Edit Data

NICU 0000

Add New Data

Add via Shared Record [0]

NICU Settings

2020

Edit Data

CCS Form

CCS Report

Data Reports

Close-Out Checklist

Optional NICU Admits DB

MATEX DB

LOGOUT

IDs submitted by NICU 0000 for Birth Year 2020 as of 2020-10-13 at 17:40

All records

Eligible: Y = Eligible, N = Not Eligible, C = Eligibility based on NICU Confirmation, I = Outborn Infant w/out CPeTS Form and no other eligibility criterion met, H=HRIF eligible and NICU responsible for registration other.

Show 30 entries

CSV

NICU

HRIF

ID	LNK	MM-DD	BW	GA	MULT	BTHLOC	REFLOC	XFRLOC	Last Updated	STTS	ELIG	FORM	TOOL	ERR	PND	UNK	FORM
01408		04-05	2,010	34	S	000003	000001	na	2020-06-29 10:11	PND	Y	A/D		0	61	0	TRS
01501		01-03	900	27	S	HERE	na	na	2020-10-10 10:23	CMPLT	Y	DRD		0	0	0 / 1	
01502		01-02	870	29	S	000001		na	2020-10-10 10:23	PND	Y	A/D		0	54 / 3	4	TRS
01503		01-01	900	27	-	000003			2020-10-10 10:23	PND	YH	A/D		0	137 / 3	1	TRS
01504		01-04	3,500	39	S	000001			2020-10-10 10:23	PND	Y	A/D		0	128 / 3	0	TRS

2021 NICU Database Changes

Delivery Room Death Form

Item 19 a-e Delayed Cord Clamping [DCC]

Recommendation

- **Remove Delayed Cord Clamping items 19 a-e.** from the Delivery Room Death Form.

Rationale:

- No one would be collecting delayed cord clamping for a delivery room death patient.

Current Definition

- Item 19a. Was delayed umbilical cord clamping performed?[DCCDONE]
- Item 19b. How long was umbilical cord clamping delayed?[DCCTIME]
- Item 19c. If DCC was not done, reason why [DCCNOTWHY], [DCCNOTWHYDESC]
- Item 19d. Was umbilical cord milking performed? [DCCCORDMILK]
- Item 19e. Did breathing begin before umbilical cord clamping? [DCCBREATH]

Updated Definition

- No updates to the definition

Admission/Discharge Form and CPeTS

Item 24d. Cooling for HIE Method [ACOOILINGMETHOD]

Recommendation

- Remove **Selective Head**

Rationale:

- Keeping up to date with current clinical practice; selective head cooling units are no longer marketed or sold in California. We want to keep our data item choices up to date and as efficient as possible and not retain out of date choices.

Current Definition

- Item 24d. Cooling for HIE Method [ACOOILINGMETHOD]
 - Select **Passive**
 - ~~Select **Selective Head**~~
 - Select **Whole Body**
 - Select **Other**
 - Select **Unknown**

Updated Definition

- No Update

Admission/Discharge Form and CPeTS

Item 38a-f. Respiratory Support at 36 weeks [OX]

Recommendation

- Updated from “at any time” to “**at any time after leaving the delivery room/initial resuscitation area**”.

Rationale:

- To clarify that we want to collect data for infants after leaving the delivery room/initial resuscitation area.

Current Definition

- Item 38b. Conventional Ventilation [VENT36]**

Select **Yes** if the item is applicable based on the Eligibility Criteria for Respiratory Support at 36 Weeks, and the infant was given intermittent positive pressure ventilation through an endotracheal tube with a conventional ventilator (IMV rate <240/minute) **at any time** on the date of week 36.

Updated Definition

- Item 38b. Conventional Ventilation [VENT36]**

Select **Yes** if the item is applicable based on the Eligibility Criteria for Respiratory Support at 36 Weeks, and the infant was given intermittent positive pressure ventilation through an endotracheal tube with a conventional ventilator (IMV rate <240/minute) **at any time after leaving the delivery room/initial resuscitation area** on the date of week 36.

Admission/Discharge Form

Item 48e. Cerebellar Hemorrhage [CERHEM]

Recommendation

- **Add** Cerebellar Hemorrhage [CERMEM] to **Item 48e**.
- **Move** [OTHHEM] & [OTHHEMDESC] to **Item 48f**.

Rationale:

- Cerebellar hemorrhage is increasingly recognized as a risk factor for neurodevelopmental impairment.

Current Definition

- **Item 48e. Other Intracranial hemorrhage (on or before Day 28) [OTHHEM], [OTHHEMDESC]**

Select **Yes** if neural imaging (either ultrasound, CT scan, MRI scan, etc.) showed evidence of intracranial hemorrhage other than Peri-IVH grades 1 to 4. Includes subdural, epidural, subarachnoid bleeds and parenchymal hemorrhage not related to P/IVH. Do not include extracranial bleeds such as subgaleal hemorrhages or cephalhematomas. Specify the type of intracranial hemorrhage in the space provided.

Updated Definition

- **Item 48e. Cerebellar Hemorrhage [CERHEM]**

Select **Yes** if neural imaging (either ultrasound, CT scan, MRI scan, etc.) showed evidence of cerebellar hemorrhage.

Select **No** if no evidence of cerebellar hemorrhage was found.

Select **Unknown** if this information cannot be obtained.

Note: This item is N/A if no head imaging was ever done.

Admission Discharge Form

Item 48e. Cerebellar hemorrhage [CERHEM]

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Dispo Items
Post-Delivery Diagnoses and Interventions - Neurological								
48. Intracranial Hemorrhage <i>Date of day 28: 1-28-2020</i>								
a) Neural imaging done on or before Day 28 ...								
b) If neural imaging was done on or before Day 28, enter worst grade of peri-intraventricular hemorrhage: ...								
c) If peri-intraventricular hemorrhage was present, where was it first diagnosed? ...								
d) If peri-intraventricular hemorrhage was present, was shunt placed for bleed? ...								
e) If neural imaging was done on or before Day 28, was any other intracranial hemorrhage found? ...								
If Yes, describe: <input type="text"/>								

Add Cerebellar Hemorrhage [CERMEM] to Item 48e.



(48f) Move [OTHHEM] & [OTHHENDESC] to Item 48f.

Admission/Discharge Form

Item 5 I. Hypoxic Ischemic Encephalopathy [HIE]

Recommendation

- Lower GA to 35 weeks

Rationale:

- To capture infants who may be missed that are at 35 weeks

Current Definition

- Select **Not Applicable** if the infant has a gestational age at birth of less than 36 weeks and your center does not participate in the VON expanded data collection. If your center participates in the VON expanded data collection, this item applies to all NICU admissions starting from 2017.

Updated Definition

- Select **Not Applicable** if the infant has a gestational age at birth of less than 35 weeks and your center does not participate in the VON expanded data collection. If your center participates in the VON expanded data collection, this item applies to all NICU admissions starting from 2017.

Pilot Data Collection

Delivery Room Oxygen Pilot

Recommendation

- Add 2 variables to collect oxygen saturation/concentration given in the delivery room. Inclusion criteria: VLBW infants (<1500 grams or < 32 weeks gestation; Inborn infants only - A/D forms and DRD forms.)

Rationale:

- There is a significant need to determine if a low 5 minute SpO₂ is a significant predictor of poor neonatal outcomes including death and/or severe IVH.

Variables

- Item DR O₂ - 1. Mean Oxygen Saturation (SaO₂) at 5 Minutes [DRSAO2]
- Item DR O₂ - 2. Inspired Oxygen Concentration (FiO₂) at 5 Minutes [DRFIO2]

Definition

- Enter the infant's average oxygen saturation (SaO₂) as a percentage ranging from **0%** to **100%** at 5 minutes as noted in the Labor and Delivery record, if available.
- Enter the infant's inspired oxygen concentration (FiO₂) ranging from **21%** to **100%** at 5 minutes as noted in the Labor and Delivery record, if available.

Delivery Room Oxygen Pilot

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Disposition Items 56-60
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Delivery Room and First Hour after Birth

19. Delayed Cord Clamping

a) Was delayed umbilical cord clamping performed?

No

For the purposes of this definition, clamping performed less than 30 seconds after delivery is not considered delayed cord clamping even if there was intent to perform delayed cord clamping.

b) How long was umbilical cord clamping delayed?

Not Applicable

c) Why was umbilical cord clamping not performed? [optional]

Neonatal causes

If other, description:

d) Was umbilical cord milking performed?

No

e) Did breathing begin before umbilical cord clamping?

No

20. Apgar Scores: 1-min: 3 5-min: 3 10-min: Not Done

21. Perinatal Asphyxia *Note that items 21a-21e apply only to infants > 1,500 grams*

a) Suspected Encephalopathy/Perinatal Asphyxia or Low 5-min and/or 10-min Apgar Score: Not Applicable

Note that items 21b-21e apply only to infants > 1,500 grams that meet at least one of the following criteria:

- admitted with suspected encephalopathy (Yes to item 21a),*
- admitted with suspected perinatal asphyxia (Yes to item 21a),*

QI Delivery Room Oxygen Items:

Mean Oxygen Saturation (SaO₂) at 5 Minutes [0-100]

UNK

Inspired Oxygen Concentration (FiO₂) at 5 Minutes [21-100]

UNK

Family Centered Care

Days to First Skin to Skin Care

Recommendation

Add to NICU Database
Disposition Tab:

Days to First Skin to Skin
Care*

Rationale: as one of four
FCC measures selected by an
expert panel, skin to skin care
is protective against a variety
of adverse neonatal outcomes.

(*Not just positive touch, should involve transfer of infant)

Variables

Days to First Skin to Skin Care

- Or enterable as “day of
NICU stay” (1 = smallest
value)
- Enterable as a date

Definition

Enter the day of NICU stay on
which the first instance of
skin-to-skin care occurred by
any member of the family. If
skin-to-skin care happened on
the day of NICU admission,
enter "1". If skin-to-skin care
happened on day 5 of the
NICU stay, enter "5". Can also
enter the date (dd/mm/yyyy)
as an alternative.

Family Centered Care

Days to First Social Worker Contact

Recommendation

Add to NICU Database
Disposition Tab:

Days to First Social Worker
Contact

Rationale: CA state requires
social worker assessment
within 2 days of NICU
admission; is this being done?
(one of four FCC measures
being piloted)

Variables

Days to First Social Worker
Contact

- Enter as “day of NICU
stay” (1 = smallest value)
- Enterable as a date

Definition

Days to first social worker
encounter with infant's family
from NICU admission. Timely
social worker assessment is
mandated by CCS regulations
in California; this item will
facilitate detection of cases in
which a timely needs
assessment was not performed.

Family Centered Care

Time to Priming with Oral Colostrum

Recommendation

Add to NICU Database
Disposition Tab:

Time to Priming with Oral
Colostrum

Rationale: one of four FCC
measures selected by an expert
panel, this practice confers
benefits to VLBW infants and
signals NICU culture and
commitment to mother's milk.

Variables

Time to Priming with Oral
Colostrum

- Enterable as hours from
NICU admission

Definition

Time (in hours) to oral
administration (buccal swab)
of colostrum to infant.

Family Centered Care

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Disposition Items 56-60
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Initial Disposition

Note that responses in this section will be ignored if you do not answer item 57, initial disposition from your center!

- Enteral Feeding at Discharge
- Initial Disposition from your Center
- Weight at Initial Disposition grams Unknown
- Head Circumference at Initial Disposition (cm) cm Not Done Unknown
- Initial Discharge Date Unknown

The initial length of stay for this infant is 70 days.

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 Here Unknown
- Days from NICU Admission to First Social Worker Contact at Your Hospital Days, or Enter Date Prior to NICU Admission Never Here Unknown
- Hours from Birth to Priming with Oral Colostrum at Your Hospital Hours, or Enter Date and Time at Never Here Unknown

NICU Data Finalization

Fulani Davis

NICU Program Manager

NICU Data Finalization Deadlines

Production Schedule

FEB 1 ST	MAR 15	APR	APR 1 ST	MAY 15 TH	JUN 1 ST	JUN 2 ND	JUN 2 ND	JUN 7 TH	JUN 7 TH	JUN 15 TH	JUL 15 TH	JAN - DEC	OCT 10 TH
													
DEADLINE	Super Star Award	Annual Database Revisions	DEADLINE	Gold Star Award	DEADLINE	Early Bird Award	All-Star Award	DEADLINE	Crown Award	ANNUAL REPORTS	ANNUAL REPORTS	Surprise Award	ANNUAL REPORTS
Submit items 1-2 in the Close-Out Checklist	Submit the April 1 st items by March 15th	Submit the Database Change Request Form by April	Submit items 3-8 in the Close-Out Checklist	Submit the June 1 st items by May 15th	Submit items 9-13 in the Close-Out Checklist	Submit the CCS Report	Earn the Superstar and Early Bird Awards	Submit item 14 in the Close-Out Checklist	Submit all DF items on time	DF Status Report	CPQCC & CCS Annual Reports		VON Annual QMR Report
Late Fee if not completed			Late Fee if not completed		Late Fee if not completed			Late Fee if not completed		PDF downloaded			

Database Change Request Form

- Please go to www.cpqcc.org → NICU Resources
- Please submit all requests to the CPQCC Help Desk by April 2021
- Requests received by April 2021 will be processed and considered for 2022
- Questions? Submit a Help Desk ticket.



CPQCC DATABASE CHANGE REQUEST FORM

CPQCC is committed to ensuring that any updates made to our CPQCC Data and Report websites serve a quality improvement purpose and add value to the data and reports we generate. Please use the form below to structure your recommendations for revising, adding, or deleting data items in the database. When completing this form, please:

- Refer to the data items and definitions in the respective CPQCC Manuals (NICU, CPETS, CCS, MatEx, All NICU Admissions, HRIF) for the current data collection year.
 - The above manuals can be found on the www.cpqcc.org website
- Refer to the current definitions in the NICU Reports Home page or the NICU Reports Start Guide for current definitions of NICU, CPeTS, CCS and MatEx focus board reports
- Use a separate form for each request
- Requests will be reviewed every April for the following calendar year (e.g. requests will be reviewed in April 2020 for birth year 2021).

Change Type (choose one)		
<input type="checkbox"/> Population Update <small>(i.e. alter existing population definition)</small>	<input type="checkbox"/> Database Change <small>(i.e. add, delete or update a data item)</small>	<input type="checkbox"/> Report Change <small>(i.e. add or update a report)</small>
Database (choose one) <small>(Please select a database below. Please skip if not a database change.)</small>		
<input type="checkbox"/> CPeTS Data/Reports (Transport)	<input type="checkbox"/> NICU Data/Reports	<input type="checkbox"/> HRIF Data/Reports
<input type="checkbox"/> CCS Data/Reports	<input type="checkbox"/> MatEx Data/Reports	<input type="checkbox"/> Optional All NICU Admissions Data/Reports
Add/Delete/Change (choose one)		
<input type="checkbox"/> Revise existing item	<input type="checkbox"/> Delete existing item	<input type="checkbox"/> Add new item
Description <small>(Please enter a brief description of your request)</small>		
Reason for Change		
Rationale for Recommendation <small>(Please provide a brief analysis of the pros and cons for the recommendation. Points to address include feasibility, accuracy, and ease of data collection, utility of the item (for risk adjustment or assessing practice or outcomes), consistency with prior years, and comparison to similar items in other relevant neonatal databases (see below).)</small>		

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(650) 721-6540 • info@cpqcc.org • www.cpqcc.org

NICU Data Finalization Deadlines

COVID-19 Extensions

1

APRIL 1st extended to JUNE 1st

\$300 late fee waived

2

FEBRUARY 1ST

132/136= **97%** completed on time

3

AUGUST 1st

129/136= **95%** completed on time

4

JUNE 1st extended to AUGUST 1st

\$300 late fee waived

5

JUNE 1st

127/136= **93%** completed on time

6

AUGUST 7TH

121/136= **89%** completed on time

Data Finalization Survey

- Please respond by November 1st
- Questions? Submit a Help Ticket.



california perinatal
quality care collaborative

Dear CPQCC Participant,

We want to thank all of you for your participation in the 2019 NICU and 2020 HRIF data collection!

Please take a moment to complete the [Annual Data Finalization Survey](#) by **clicking on the link below**. Please complete the survey by **November 1, 2020**.

If you have any questions or need assistance, please submit a [CPQCC Help Desk ticket](#).

Thank you,
CPQCC Data Center

Follow this link to the Survey:

[Take the Survey](#)

Or copy and paste the URL below into your internet browser:

https://stanforduniversity.qualtrics.com/jfe/preview/SV_ac7x8ATRoDvCQfz?Q_CHL=preview

Follow the link to opt out of future emails:

[Click here to unsubscribe](#)

Data Mentorship Program

Peer mentoring to assist with best practices in:

- Data collection
- Meeting deadlines
- Interpreting reports
- Internal quality improvement



Who We Are
What We Do
Membership
 Becoming a Member
 Current Members
 Member Awards
 Mentorship Program
Our Staff
Our Partners
News and Events

Mentorship Program

Our Mentorship Program is designed to pair NICUs that require additional support with data abstraction, entry, and analysis with experienced mentors from other member centers. Mentorship relationships have led to rich and long-lasting partnerships between member centers. If you are interested in being paired with a mentor or in mentoring another member center, fill out the survey below and our team will be in touch with you.

[I'm interested in the member mentor program!](#)

Testimonials

*"I have been mentored by **Julie Evans, Children's Hospital Los Angeles**. She has promptly responded to all my questions, even when she was home sick (I didn't know that at the time of course!), and she also gave me much needed moral support during my first Data Finalization process". - Megan Javidi, Providence Tarzana Medical Center*

*"**Beth Berry, Bakersfield Memorial Hospital**, was SO patient and knowledgeable about the process of CPQCC Data collection. When I started the data collection alone, she was always available to return my calls on any CPQCC questions. Beth is a great resource mentor for CPQCC and I shall always appreciate her kindness, patience and knowledge-----Thank You Beth." - Jean Yaussi RN BSN, Glendale Memorial Hospital and Health Center*

*"**Amy Johnson, Sutter Roseville Medical Center**, goes above and beyond in her role as the clinical data coordinator for our hospitals. Her thoroughness has made it possible for all of the departments involved in CPQCC and HRIF-QCI data collection and patient tracking to have the information needed to complete the data from hospital to age three." - Teresa Androvich RN PNP, Anderson Lucchetti Women's and Children's Center*

*"**Cindy Bell at UCLA** has been a wonderful resource for me for the many years I have been doing CPQCC data collection. She is always prompt in returning my calls and has a wealth of knowledge. Our work relationship has created a wonderful friendship." - Cheri Mudryk, RN CCRN, Kern Medical Center*

Data Mentorship Program

- Registration form
- Options:
 - I want to be a mentor
 - I need a mentor
 - I want to nominate a mentor

The screenshot shows the CPQCC Data Mentorship Registration Form. At the top left is the CPQCC logo (california perinatal quality care collaborative). At the top right are links for 'Resize font' and 'Returning?'. The form title is 'CPQCC Data Mentorship Registration Form'. It is divided into two main sections: 'Contact Information' and 'Mentorship Type'. The 'Contact Information' section includes fields for First Name, Last Name, Current Role (with checkboxes for NICU Data Contact, CPeTS (Transport) Contact, HRIF Program Coordinator, Maternal Data Center (MDC) Contact, and Other), Hospital Name, Phone number (with an 'Include Area Code' checkbox), and E-mail. The 'Mentorship Type' section has radio buttons for 'I want to be a Mentor', 'I need a Mentor', and 'I want to nominate a Mentor'. At the bottom are 'Submit' and 'Save & Return Later' buttons.

Data Mentors

ANN ACKERMAN, RN, PHN, MSN
KAISER WALNUT CREEK

PAM ARON-JOHNSON, RN
UC IRVINE MEDICAL CENTER

CINDY BELL, RNC-NIC, BSN, CLE
UCLA MATTEL CHILDREN'S HOSPITAL

BETH BERRY, RN
BAKERSFIELD MEMORIAL HOSPITAL

DAVID BRAUN, MD
KAISER SOUTHERN CALIFORNIA

DIANE CUNNINGHAM, CCRN, RNC
ALTA BATES SUMMIT MEDICAL CENTER

LINDA GOODMAN, NNP
VENTURA COUNTY MEDICAL CENTER

ANGELA HUANG, RN
SANTA CLARA VALLEY MEDICAL CENTER

AMY JOHNSON, RN
ANDERSON LUCCHETTI WOMEN'S AND CHILDREN'S CENTER

BERNADETTE NEVE, RNC, BSN, MSN
COMMUNITY REGIONAL MEDICAL CENTER

AMY RENFRO, NNP
DOCTORS MEDICAL CENTER OF MODESTO

ERLINDA VALERIO, RN, BSN, RNC-NIC
TORRANCE MEMORIAL MEDICAL CENTER

CHANDRA WARFIELD, RN, MSN, PHN, CCM
KAISER FONTANA

YOLANDA WINTERS, CLINICAL QI COORDIATOR
LPCH STANFORD

ANGELA WOOLLEY, RNC
ANAHEIM REGIONAL MEDICAL CENTER

NICU DATA SHARING



WHAT IS NICU DATA SHARING?

NICU Data Sharing

What is it?

NICU Data Sharing is a new feature on the www.cpqccdata.org site that allows NICUs that care for the same infant to share data (about that patient) with each other. This simplifies the data entry process and increases data consistency and quality, helping members to:

- Complete data items for transported infants
- Obtain follow-up status for infants transported out to another CPQCC NICU

Note - NICU data cannot be shared for:

- CPQCC NICUs not participating in NICU data sharing, or
- Non-CPQCC NICUs

WHAT NICU DATA IS BEING SHARED?


What Data is Being Shared?

NICU ID: 0000 Record ID: 01507 Birth Year: 2020 DOB: 02-01-2020 BW: 2499 GA: 32/1 NICU Data Eligible Infant

Infant demographics

- A/D form items 1-8
- CPeTS form items c.3-c.5, c.11, c.19, c.30-c.32

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Disposition Items 56-60	Network Info
---------------------------	---------------------------	-------------------	----------------------------	---------------------------	----------------------------	-----------------------------	-----------------------------	----------------------------	-----------------

Demographics 

1. Birth Weight grams
2. Head Circumference at Birth cm Not Done Unknown
3. Best estimate of gestational age a) Weeks b) Days:
4. Date/Time of Birth at Time Unknown
5. Infant Sex
6. Died in Delivery Room
7. a) Location of Birth
Note: For infants who were previously home, always check Outborn, even if the infant was born at your hospital or was born at the co-located hospital (for satellite NICUs only).
b) Age in Days at Admission to your NICU
c) Select hospital of birth for outborn infants
8. Hospital Admission History
Note: The Hyperbilirubinemia Items 53 to 55 are activated ONLY IF the infant Was Home after Birth (Item 8a).
a) Discharged Home after Birth?
b) NICU Re-Admission Status after PDH

What Data is Being Shared?

Maternal history

- A/D form items 9-18
- CPeTS form items c.7-c.8

NICU ID: 0000 Record ID: 01507 Birth Year: 2020 DOB: 02-01-2020 BW: 2499 GA: 32/1 NICU Data Eligible Infant

Demographics Items 1-8 Maternal HX Items 9-18 DR Items 19-23 Respiratory Items 24-39 Infections Items 40-42 Other DX/PX Items 43-47 Neurological Items 48-51 Anom. / Bili Items 52-55 Disposition Items 56-60 Network Info

Maternal History & Delivery

9. Maternal Date of Birth Unknown
 Maternal Age years Unknown

10. a) Maternal Hisp. origin
 b) Maternal Race

11. Prenatal Care

12. Group B Strep Positive

13. a) Antenatal Steroids
 Documentation for NOT
 b) initiating antenatal steroid therapy?
 Documented reason for
 c) NOT administering antenatal steroids

14. Spontaneous Labor

15. a) Multiple Gestation
 b) # Infants Delivered
 c) Birth order

16. Delivery Mode

17. a) Maternal Antenatal Conditions None
 Hypertension
 Chorioamnionitis
 Other Infection
 Diabetes
 Previous Cesarean
 Antenatal Magnesium Sulfate
 Other Maternal (describe)

b) Fetal Antenatal Conditions None
 IUGR
 Non-reassuring Fetal Status
 Anomaly
 Other Fetal (describe)

c) Obstetrical Conditions None
 Preterm (< 37 wks) Labor
 Preterm (< 37 wks) Premature ROM before onset of labor
 Term (≥ 37 wks) Premature ROM before onset of labor
 Prolonged ROM (> 18 hours)
 Malpresentation/Breech
 Bleeding/Abruption/Placenta Previa
 Other Obstetrical (describe)

18. Indications for Cesarean Section NA
 Elective
 Malpresentation/Breech
 Dystocia/Failure to Progress
 Multiple Gestation
 Placental Problems
 Non-reassuring Fetal Status
 Hypertension
 Other (describe)

What Data is Being Shared?

Delivery Room

- A/D form items 19-23
- CPeTS form item c.9

NICU ID: 0000 Record ID: 01507 Birth Year: 2020 DOB: 02-01-2020 BW: 2499 GA: 32/1 NICU Data Eligible Infant

Demographics Items 1-8 Maternal HX Items 9-18 DR Items 19-23 Respiratory Items 24-39 Infections Items 40-42 Other DX/PX Items 43-47 Neurological Items 48-51 Anom. / Bili Items 52-55 Disposition Items 56-60 Network Info

Delivery Room and First Hour after Birth

19. Delayed Cord Clamping

a) Was delayed umbilical cord clamping performed?

For the purposes of this definition, clamping performed less than 30 seconds after delivery is not considered delayed cord clamping even if there was intent to perform delayed cord clamping.

b) How long was umbilical cord clamping delayed?

c) Why was umbilical cord clamping not performed? [optional] If other, description:

d) Was umbilical cord milking performed?

e) Did breathing begin before umbilical cord clamping?

20. Apgar Scores: 1-min: 5-min: 10-min:

21. Perinatal Asphyxia *Note that items 21a-21e apply only to infants > 1,500 grams*

a) Suspected Encephalopathy/Perinatal Asphyxia or Low 5-min and/or 10-min Apgar Score:

Note that items 21b-21e apply only to infants > 1,500 grams that meet at least one of the following criteria:

1. admitted with suspected encephalopathy (Yes to item 21a),
2. admitted with suspected perinatal asphyxia (Yes to item 21a),
3. 5-minute Apgar ≤ 3 or 10-minute Apgar ≤ 4 (Item 20),
4. received active hypothermia (Selective or Whole Body to item 24d),
5. diagnosis of HIE (Mild/Moderate/Severe to item 51).

b) Is there an umbilical cord blood gas or a baby blood gas in the first hour of life available?

c) Source of the blood gas: d) pH within 1 hour of life: Unknown e) Base deficit: Too low to register Unknown

22. Delivery Room Resuscitation None

a) Supplemental Oxygen b) CPAP c) Bag/Mask PPV d) ETT Ventilation

e) Epinephrine f) Cardiac Compressions g) NIPPV h) Laryngeal Mask Airway (LMA)

23. Surfactant Treatment

a) Was Surfactant given in Delivery Room

b) Was Surfactant given at any time?

c) Age at first dose: hours minutes Unknown

or Date/Time of First Surfactant Treatment: at NA Unknown

[Click here to copy birth date and time.](#)

QI Delivery Room Oxygen Items:

Mean Oxygen Saturation (SaO₂) at 5 Minutes [0-100] UNK

Inspired Oxygen Concentration (FiO₂) at 5 Minutes [21-100] UNK

What Data is Being Shared?

Congenital Anomalies

- A/D form item 52
- CPeTS form item c.6

NICU ID: 0000 Record ID: 01507 Birth Year: 2020 DOB: 02-01-2020 BW: 2499 GA: 32/1 NICU Data Eligible Infant

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Disposition Items 56-60	Network Info
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Congenital Malformations

52. a) Congenital anomalies

b) Enter up to 5 congenital anomaly codes: Click here to select from a list of codes

Code 1: Code 2: Code 3: Code 4: Code 5:

Enter congenital anomaly description for codes 100 150 200 300 400 504 601 605 800 900:

What Data is Being Shared?

Disposition and length of stay

- A/D form items 57, 60, 62, 63, 65-67

NICU ID: 0000 Record ID: 01408 Birth Year: 2020 DOB: 04-05-2020 BW: 2010 GA: 34/2 NICU Data Eligible Infant

Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bili Items 52-55	Disposition Items 56-60
Initial Disposition								
Note that responses in this section will be ignored if you do <u>not</u> answer item 57, initial disposition from your center!								
56. Enteral Feeding at Discharge			Human Milk with Fortifier or Formula <input type="button" value="v"/>					
57. Initial Disposition from your Center			Home <input type="button" value="v"/>					
58. Weight at Initial Disposition			2900 grams <input type="checkbox"/> Unknown					
59. Head Circumference at Initial Disposition (cm)			28.0 cm <input type="checkbox"/> Not Done <input type="checkbox"/> Unknown					
60. Initial Discharge Date			06-15-2020 <input type="button" value="calendar"/> <input type="checkbox"/> Unknown					
<i>The initial length of stay for this infant is 70 days.</i>								
Family Centered Care (FCC) Items:								
Days from <u>NICU Admission</u> to First Skin-to-Skin Care <u>at Your Hospital</u>			17 Days, or Enter Date			04-23-2020 <input type="button" value="calendar"/> <input type="checkbox"/> Prior to NICU Admission <input type="checkbox"/> Never Here <input type="checkbox"/> Unknown		
Days from <u>NICU Admission</u> to First Social Worker Contact <u>at Your Hospital</u>			1 Days, or Enter Date			04-07-2020 <input type="button" value="calendar"/> <input type="checkbox"/> Prior to NICU Admission <input type="checkbox"/> Never Here <input type="checkbox"/> Unknown		
Hours from <u>Birth</u> to Priming with Oral Colostrum <u>at Your Hospital</u>			56 Hours, or Enter Date and Time			04-07-2020 <input type="button" value="calendar"/> at 12:05 <input type="checkbox"/> Never Here <input type="checkbox"/> Unknown		

HOW DO I ACCESS NICU DATA SHARING?

NICU Data Sharing

How to access Data Sharing

1

Sign up!

- Download the Data Sharing Agreement from our website
- Sign and submit it to Renee Triolo, our Administrative Assistant at renee@cpqcc.org

2

Data Sharing must be turned “on” for your NICU

- Each NICU must submit a ticket to the NICU Data Center to request data sharing to be turned on

3

Records entered for transported infant must be linked across NICU stays

- All NICU data records are linked daily within 24 hours of being entered.

NICU Data Sharing

- Go to www.cpqcc.org,
→ NICU →
NICU Data
Resources to
download the
**NICU Data
Sharing
Agreement**

The screenshot shows the CPQCC website's NICU Data Resources page. The header includes the CPQCC logo and navigation links for About, NICU, Analysis, Improvement, Follow-Up, and Engage. A search bar is located in the top right corner. The main content area features a sidebar with links to NICU Data, NICU Reports, NICU Data Resources, NICU Data Mentorship, and Committee Oversight. The main heading is "NICU Data Resources", followed by a paragraph explaining the resources and a link to the Help Desk. Below this, there is a section for "2020 Birth Year" with two columns of resources. The "NICU Data Sharing" column is highlighted with an orange border and contains links to "Getting Started with NICU Data Sharing", "NICU Data Sharing FAQ", and "NICU Data Sharing Agreement".

CPQCC
california perinatal
quality care collaborative

About NICU Analysis Improvement Follow-Up Engage

Search this site...

NICU Data
NICU Reports
NICU Data Resources
NICU Data Mentorship
Committee Oversight

NICU Data Resources

The resources below are designed to assist NICU Data Contacts in abstracting and entering data into the NICU Database as efficiently and effectively as possible. They are organized by birth year. If you have a question regarding any of these resources, please submit a ticket through our [Help Desk](#).

Resources for entering data into the HRIF Reporting System can be found on the [Data Resources](#) page under Follow-up.

2020 Birth Year

Manuals

- Getting Started
- Is That Baby Eligible?
- NICU Database Changes
- NICU Data Manual, CD, &...

NICU Data Sharing

- Getting Started with NICU Data Sharing
- NICU Data Sharing FAQ
- NICU Data Sharing Agreement

NICU Data Sharing

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[Help Desk](#)

Welcome, Demo!
NICU 0000

Home

[Change Password](#)

[Upload EDS File](#)

[Mail/Download Reports/Data](#)

[Custom Query](#)

[My Activity Summary](#)

NICU Settings

[Update Log / Msg Archive](#)

[Logon to NICU Reports](#)

[Calculator Tool](#)

[Member Directory](#)

[Add New Data](#)

Add via Shared Record [1]

2020

[Edit Data](#)

[CCS Form](#)

[CCS Report](#)

[Data Reports](#)

[Close-Out Checklist](#)

[Optional NICU Admits DB](#)

[MATEX DB](#)

[LOGOUT](#)

Settings for NICU 0000 [NICU Member] Access member directory entry

NICU ID:	0000		
NICU Name:	Demo Center 'A'		
NICU Name (shortened, used in labels):	Demo Ctr A		
NICU Name (used in menus):	Demo Ctr A		
First year of Participation:	2000		
CCS Level(s) for 2006 or later:	2006: Regional - 2007: Regional - 2008: Regional - 2009: Regional - 2010: Regional - 2011: Regional - 2012: Regional - 2013: Regional - 2014: Regional - 2015: Regional - 2016: Regional - 2017: Regional - 2018: Regional - 2019: Regional - 2020: Regional		
Perinatal Region:	00.0 - Demo Region		
IDs used for this NICU:	CPeTS Transport ID (OSHPD ID): 000000	VON Hospital ID: 99999	
	HRIF Program ID: 9999	CDPH Maternity Hospital ID: None	
Satellite NICU:	Main NICU with 1 satellite NICU CPQCC participant: Demo Center C (Satellite of A at non-CPQCC member D)		
May submit EDS files?	EDS submissions enabled for 2019 and 2020. EDS password: Test2.14		
Users for cpqccdata.org:	Demo, A (demo0000); Pickle, Joe (jpickle); User, Demo (DEMOuser). <i>Suspended (if any) / Primary users</i>		
NICU Users for cpqccreport.org:	Gupta, Munish (mugupta); Kaplan, Heather (hkaplan); Nisbet, Courtney (cnisbet); Pickle, Joe (jpickle); User, Demo (DEMOuser). <i>Suspended (if any) / Primary users</i>		
HRIF Users for cpqccreport.org:	No HRIF users have access to HRIF reports for this center on cpqccreport.org.. <i>Suspended (if any) users</i>		
Access on cpqccreport.org to this NICU's perinatal region	Arora, Vasudha; Bain, Lisa; Braun, David; Davis, Alexis; Gupta, Munish; Jegatheesan, Priya; Joe, Priscilla; Kaplan, Heather; Morton, Christine; Nisbet, Courtney; Payton, Kurlen; Paz, Pedro; Pickle, Joe; Rogers, Elizabeth; Sey, Rachelle; Slagle, Terri; User, Demo; VanWoerkom, Richard.		
Data Sharing <u>outside</u> user's NICU group	Data sharing turned ON . ←		
QI Projects:	Breast Milk Nutrition (2009-2011): No	Health-care Associated Infections (2008-2009): No	
	Delivery Room Management (2011-2012): No	Length Of Stay (2013-2015): No	
	Antibiotic Stewardship (2016-2017): No	Grow, Babies, Grow! (2018-current): No	
Miscellaneous:	Children's Hospital: No	Optional DCC [2016/7]: Yes	VON expanded DS: No
	MATEX DB: Yes	MBSEI DB: Yes	Delivery Room Oxygen: Yes
Comment:			
Responsible NICU Data Center Agent:	Fulani Davis (fkDavis@stanford.edu)		

Logon to www.cpqccdata.org and go to NICU Settings to confirm whether Data Sharing is on or off.

To turn data sharing on or off, please submit a help ticket to www.cpqcchelp.org

HOW DO I USE NICU DATA SHARING?

NICU Data Sharing

How to use it

1

Add via Shared Record

In the side menu bar, there's a link for "Add via Shared Record [xx]". The number in the [xx] represent the number of records entered by other NICUs caring for the same baby.

Note: This number is updated in real-time.

2

Network Info Tab

This shows up as the last tab in the Admission/Discharge form and includes sync buttons that can be used to:

- Update your current NICU record (with data from the other NICU)
- Give access to follow-up information required for babies that were transported out

3

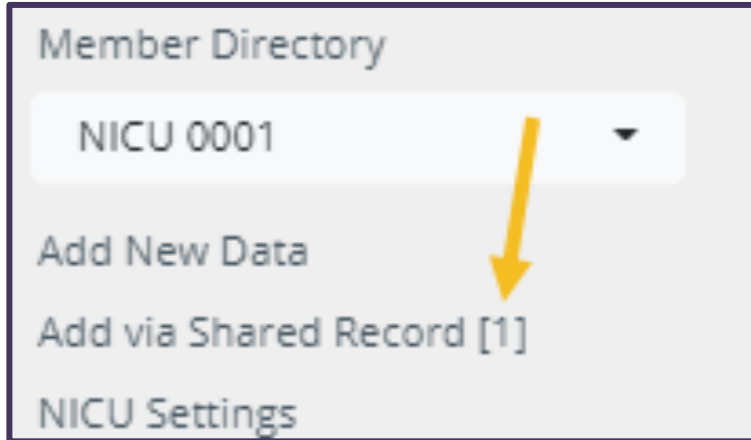
Manually Add a New Record

When adding a new record for a transported infant, the following items must be entered to link to another NICU's record

- NICU Name
- Infant's Record ID **at that NICU**
- Infant's exact birth weight

NICU Data Sharing

How to use it



1. Clicking on **Add via Shared Record [xx]** opens a list of opportunities of records that can be shared with your NICU.
2. The list defaults to the **OUTSTANDING** filter, where only new and unused records are listed. Other search filters are: **COMPLETED** (shared record was already used), **UNUSED** (a 'cannot use reason' was selected for this record) or **REVIEWED** (record was either **COMPLETED** or **UNUSED**).

Add New Record Via Shared Record - Opportunities

Show 10 entries CSV

Search: **OUTSTANDING**

#	Source NICU Name (OSHDP ID)	Source NICU Record ID	Infant DOB	Infant BW	Multiple Status	How related?	DOL (?) Admitted at Your Hospital	Status	Cannot Use Reason
5	Demo NICU 0000 (000000)	01504	01-04-2020	3,500	Pending	Source indicates that your NICU's hospital is the birth location, and that your NICU's hospital is a location that referred a transport.	1	<input type="button" value="New ID"/> <input type="radio"/> Only A/D Form <input type="checkbox"/> PDH <input type="radio"/> CPeTS + A/D <input type="button" value="Add 2020 Record"/>	Click to select!

Showing 1 to 1 of 1 entries (filtered from 9 total entries)

Previous 1 Next

NICU Data Sharing

How to use it

Included in each list of records is the following columns:

- Source NICU (NICU that first entered the data)
- Source NICU ID (the ID number that the source NICU used)
- Infant's date of birth
- Infant's birth weight
- Multiple Status
- How related? (explains the reason why this infant is on the list)
- Age in Days when the infant was admitted to **your** NICU
- Status
- Cannot Use Reason

NICU Data Sharing

How to use it

The **Status** column is where you can choose to accept this record. If you choose to accept it, you'll need to:

- Enter a New ID number
- Select whether you want to prepopulate only the A/D Form or both the CPeTS and the A/D Form
- Then select the Add 2020 Record button to accept the form

A close-up of the 'Status' column form. It features a 'New ID' input field, two radio button options: 'Only A/D Form' and 'CPeTS + A/D', and a checkbox labeled 'PDH'. Below these options is a grey button labeled 'Add 2020 Record'.

← Add New Record Via Shared Record - Opportunities

Show 10 entries CSV Search: OUTSTANDING

#	Source NICU Name (OSHPD ID)	Source NICU Record ID	Infant DOB	Infant BW	Multiple Status	How related?	DOL (?) Admitted at Your Hospital	Status	Cannot Use Reason
1	Demo NICU 0001 (000001)	00701	02-01-2020	2,499	Singleton	Source indicates that this infant was transported from the source NICU to your NICU's hospital.	1	<input type="text" value="New ID"/> <input type="radio"/> Only A/D Form <input type="checkbox"/> PDH <input type="radio"/> CPeTS + A/D <input type="button" value="Add 2020 Record"/>	Click to select!

Showing 1 to 1 of 1 entries Previous 1 Next

NICU Data Sharing

NICU ID: 0000 Record ID: 01408 Birth Year: 2020 DOB: 04-05-2020 BW: 2610 GA: 34/2 NICU Data Eligible Infant

Accepting the record takes you to the A/D form where you can review all the tabs in the form.

To save the record, you'll need to:

- Click the Check Form button
- Click the Save button

The record is **saved** (and removed from your shared list) **only if the above items are completed.**

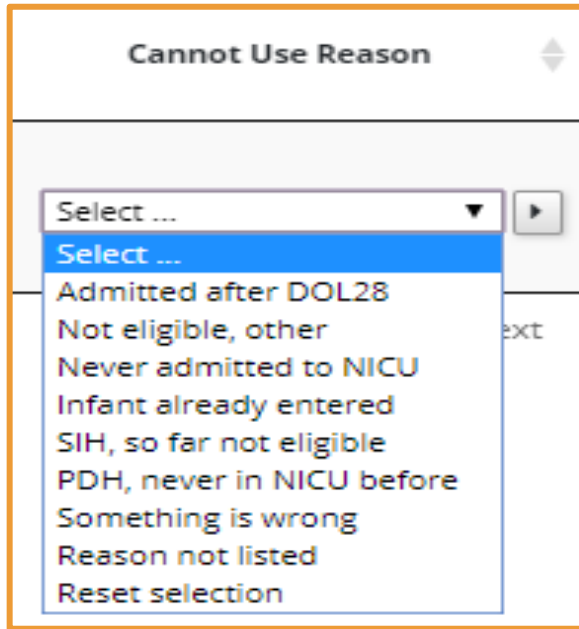
The screenshot displays a web-based form for NICU data entry. At the top, there are navigation tabs: Demographics (Items 1-8), Maternal HX (Items 9-18), DR (Items 19-23), Respiratory (Items 24-39), Infections (Items 40-42), Other DX/PX (Items 43-47), Neurological (Items 48-51), Anom. / Bill (Items 52-55), and Disposition (Items 56-60). The 'Demographics' tab is active, showing a list of 8 items to be completed. Item 1 is 'Birth Weight' (2610 grams). Item 2 is 'Head Circumference at Birth' (29.9 cm). Item 3 is 'Best estimate of gestational age' (34 weeks, 2 days). Item 4 is 'Date of Birth' (04-05-2020) and 'Time of Birth' (04:05). Item 5 is 'Infant Sex' (Female). Item 6 is 'Died in Delivery Room' (No). Item 7 is 'Location of Birth' (Outborn) with a note: 'Note: For infants who were previously home, always check Outborn, even if the infant was born at your hospital or - for satellite NICUs - was born at the co-located hospital.' Item 8 is 'Hospital Admission History' with a note: 'Note: The Hyperbilirubinemia Items 59 to 55 are activated ONLY if the infant was Home after Birth (Item 8a)'. Item 8a is 'Discharged Home after Birth?' (Never Discharged Home from a Hospital after Birth). Item 8b is 'NICU Re-Admission Status after PDH' (Not Applicable). At the bottom of the form, there are five buttons: 'Check Form', 'List Pending Items', 'List Unknown Items', 'Save & Summary', and 'Save'. An orange box highlights these buttons, and an arrow points from the 'Save' button to the 'Save & Summary' button in the bottom navigation bar. The bottom navigation bar also includes 'Check Form', 'List Pending Items', 'List Unknown Items', 'Save & Summary', 'Save', and two checkboxes: 'Mark this record as deleted' and 'Allow Errors to be written to CPQCC DBs'.

NICU Data Sharing

How to use it

If you choose not to accept this record, you can select a reason in the **Cannot Use Reason** column.

Click the link for a list of the following options which explains why this record cannot be used.



← Add New Record Via Shared Record - Opportunities

Show 10 entries CSV Search: OUTSTANDING







#	Source NICU Name (OSHPD ID)	Source NICU Record ID	Infant DOB	Infant BW	Multiple Status	How related?	DOL (?) Admitted at Your Hospital	Status	Cannot Use Reason
1	Demo NICU 0001 (000001)	00701	02-01-2020	2,499	Singleton	Source indicates that this infant was transported from the source NICU to your NICU's hospital.	1	<input type="checkbox"/> Only A/D Form <input type="checkbox"/> CPeTS + A/D <input type="checkbox"/> PDH Add 2020 Record	Click to select!

Showing 1 to 1 of 1 entries Previous 1 Next

Click the **purple sync** icon to update my NICU's record (Demo Ctr A) with non-missing values for items 1-5, 7c, 9-23 and 52 from the previous NICU stay (Demo Ctr B)

Click the **teal sync** icon to reset my NICU's record (Demo Ctr A) for items 1-5, 7c, 9-23 and 52 back to the original values that I entered.

Discharge dates can be copied and pasted in my record

	Demographics Items 1-8	Maternal HX Items 9-18	DR Items 19-23	Respiratory Items 24-39	Infections Items 40-42	Other DX/PX Items 43-47	Neurological Items 48-51	Anom. / Bill Items 52-55	Disposition Items 56-60	Transport-Out Items 61-67	Network Info
	ID 1			ID 2			ID 3				
NICU	Demo Ctr C (Satellite NICU)			Demo Ctr B			Demo Ctr A				
Record ID at NICU (Last Update)	00701 (2020-03-23 12:52) 			00702 (2020-05-20 12:54) 			01508 (2020-03-25 13:19) 				
Birth date / time	01-02-2020 / 13:56			01-02-2020 / 13:56			01-02-2020 / 13:56				
Date of / Age @ Admission	01-02-2020 / 1 day			01-02-2020 / 1 day			01-04-2020 / 3 days				
Birth Weight	1,489 grams			1,489 grams			1,489 grams				
Gestational Age	32 weeks 0 days			32 weeks 0 days			32 weeks 0 days				
Sex	Male			Male			Male				
Birth Location	DEMO CENTER D (000003)			DEMO CENTER D (000003)			DEMO CENTER D (000003)				
PDH / Re-Admit	Not Applicable			Never Discharged Home from a Hospital after Birth			Never Discharged Home from a Hospital after Birth				
Multiple	2A			2A			2A				
Mother's Birth Date / Age	04-14-1981 / 38 years			04-14-1981 / 38 years			04-14-1981 / 38 years				
Delivery Mode	Cesarean			Cesarean			Cesarean				
Initial Disposition	Transported			Transported			Home				
Discharge Date / Initial LOS	01-02-2020  / 1 day			01-04-2020  / 3 days			03-15-2020  / 72 days				
Transport Location	Demo Ctr B (000001)			Demo Ctr A (000000)							
Disposition after Transport	Pending			Pending							
Disposition after Re-Admission											
Final Disposition											
Final Discharge Date/ Total LOS	Pending			Pending							
Previous Transport Referring Location	No CPeTS form			NOT APPLICABLE (777777)			Demo Ctr C (Satellite NICU) (000002)				
Referring Location	No CPeTS form			Demo Ctr C (Satellite NICU) (000002)			Demo Ctr B (000001)				

Network connections last updated May 16, 2020

Mark this record as deleted
 Allow Errors to be written to CPQCC DBs

Purple sync = update my record based on non-missing infant level items in that NICU's record

Cyan sync = reset my record to all non-missing infant level items at load

CPeTS Acute Inter-facility Transport: Was the infant transported to your NICU within 28 days of life, who requires medical, diagnostic, or surgical therapy that is not provided, or for 2018 that cannot be efficiently provided due to temporary staffing /census issues, or due to insurance restrictions at the referring hospital?

Yes No

Note that starting from 2019, an infant transported solely for insurance reasons or staffing/census issues is not considered an acute transport!

Acute Transport-in: The infant is eligible for data submission.

To start the process of submitting data on-line, check birth year of infant, enter record ID, and retrieve the correct form. Note that you will only be able to continue if you check the birth year and enter a valid record ID!

Birth Year: 2019 2020

NICU ID: 0000

Record ID:

Last 3 Record IDs Entered: 1508 1507 1506

Has this infant stayed at another NICU, and if so do you know the record ID number and birth weight for this infant for this NICU?

Yes No

NICU:

Record ID at this NICU:

Birth Weight:

PDH

Transport-In Form

A/D Form for Transport

Add New Data Screen:

- 1) Select Yes if the infant stayed at another NICU
- 2) Select the NICU where the infant stayed (only NICUs participating in Data Sharing can be selected)
- 3) Enter the infant's Record ID at that NICU
- 4) Enter the birth weight in grams

Note: If you select your own NICU, you'll need to check the Previously Discharged Home (PDH) box

HOW CAN I TELL IF MY RECORDS ARE LINKED?

Eligible: Y = Eligible, N = Not Eligible, C = Eligibility based on NICU Confirmation, I = Outborn Infant w/out CPeTS Form and no other eligibility criterion met, H=HRIF eligible and NICU responsible for registration based on NICU DB, H=HRIF eligible other.

Show 30 entries

Search:

ID	LNK	MM-DD	BW	GA	MULT	BTHLOC	REFLOC	XFRLOC	Last Updated	STTS	ELIG	FORM	TOOL	ERR	PND	UNK	FORM	ERR	PND	UNK	FORM
01408		04-05	2,010	34	S	000003	000001	na	2020-06-29 10:11	PND	Y	<u>A/D</u>		0	61	0	<u>TRS</u>	0	59	0	<u>MTX++</u>
01501		01-03	900	27	S	HERE	na	na	2020-10-10 10:23	CMPLT	Y	<u>DRD</u>		0	0	0 / 1					
01502		01-02	870	29	S	000001		na	2020-10-10 10:23	PND	Y	<u>A/D</u>		0	54 / 3	4	<u>TRS</u>	0	0	0	
				27	-	000003			2020-10-10 10:23	PND	YH	<u>A/D</u>		0	137 / 3	1	<u>TRS</u>	0	56	1	
				39	S	000001			2020-10-10 10:23	PND	Y	<u>A/D</u>		0	128 / 3	0	<u>TRS</u>	0	36	0	<u>MTX+</u>
				32	-	HERE	na		2020-10-10 10:23	PND	N	<u>A/D</u>		0	133 / 3	0					
01506		02-03	2,230	38	S	HERE	na	na	2020-10-10 10:23	CMPLT-	Y	<u>A/D</u>		0	0 / 3	1					<u>MTX+</u>
01507		02-01	2,499	32	-				2020-10-10	DEL		A/D		0	137 / 5	0	<u>TRS</u>	0	68	0	
01508		01-02	1,481											0	71 / 3	0	<u>TRS</u>	0	57	0	
01509		02-05	790											0	57 / 2	0					
01510		04-29	3,201											0	141 / 3	0					<u>MTX+</u>
01511		02-28	899											0	139 / 5	0	<u>TRS</u>	0	65	0	

Select the **Edit Data** link in the left side menu to navigate to the Edit Data list.

The **teal dots** in the LNK column represent records that are currently linked (used shared opportunity) and visible in the Network Info tab. A **pale teal dot** means that this baby had two or more stays but the other NICU(s) haven't entered the record yet.

Getting Started with Transported Patient Data Sharing

- Please download this guide from www.cpqcc.org → NICU → NICU resources
- Questions? File a Help Ticket.



Getting Started with Transported Patient Data Sharing

What is Data Sharing?

Data Sharing is a new feature on the CPQCC NICU Data site that allows two or more NICUs that care for the same patient to share data about that patient with each other. This simplifies data entry and increases data consistency and quality, helping members to:

- Complete data items for transported infants
- Obtain follow-up status for infants transported out to another CPQCC NICU
- Make patient data consistent across NICUs.

Each NICU must decide whether to use the new functionality, and if they wish to use it, must activate it for their center. Data will not be shared from NICUs that do not activate Data Sharing, even if they share patients with other member centers. For the sake of brevity, so that we do not have to specify “for all NICUs that have activated Data Sharing” repeatedly, please assume that all NICUs mentioned in the rest of the document have activated Data Sharing.

→ **Activate Data Sharing by signing the authorization letter, found on NICU Data Resources, and emailing it to CPQCC.**

→ **Check to see if your NICU has activated Data Sharing on the NICU Data site at “NICU Settings”:**

The screenshot shows the 'Settings for NICU 8888 (NICU Member)' page. The 'NICU Settings' section is highlighted in blue. The 'Data Sharing' section is expanded, showing a table of data sharing settings for various data items. A yellow callout box on the right side of the screenshot contains the text: 'Log in to www.cpqcc.org and go to NICU Settings to confirm whether Data Sharing is on or off. If you data sharing is on, still please submit a help ticket to www.cpqcc.org.'

NICU Data Sharing Participants!

1. Adventist Health Glendale
2. Arrowhead Regional Medical Center
3. Dignity Health Dominican Hospital
4. El Camino Hospital
5. Glendale Memorial Hospital and Health Center
6. Grossmont Hospital, Women's Health Center
7. Kaweah Delta Healthcare District
8. KFH Baldwin Park
9. KFH Modesto
10. KFH Oakland
11. KFH Roseville
12. KFH San Francisco
13. KFH San Leandro
14. KFH Santa Clara
15. KFH Walnut Creek
16. LAC/Olive View - UCLA Medical Center
17. Miller Children's and Women's Hospital at Long Beach
18. Mercy San Juan Medical Center
19. Methodist Hospital of Sacramento
20. Natividad Medical Center
21. Northbay Medical Center
22. Providence Little Company of Mary Medical Center - Torrance
23. Providence St. John's Health Center
24. Rady Children's Hospital San Diego
25. RCHSD at Palomar Medical Center Escondido
26. RCHSD at Scripps Encinitas
27. RCHSD at Scripps La Jolla
28. RCHSD at Scripps Mercy Chula Vista

NICU Data Sharing Participants!

29. Rady Children's Hospital San Diego at Scripps Mercy San Diego
30. San Antonio Regional Hospital
31. St. Francis Medical Center
32. St. Mary Medical Center
33. Torrance Memorial Medical Center
34. UC San Diego Medical Center - Hillcrest
35. UCSD Health La Jolla - Jacobs Medical Center
36. UCSF Benioff Children's Hospital in San Francisco
37. University of California, Irvine Medical Center (UCI)
38. Ventura County Medical Center (VCMC)

NICU Data Finalization

Data Management Awards

Superstar Award:

Granted to centers who complete the April 1st deliverables (Items 3-8) by March 15th.



All Star Award:

Granted to centers who achieve the Superstar Award and the Early Bird Award and completes the June 1st deliverables (Items 9-13) by May 15th.



Early Bird Award:

Granted to centers who confirm their CCS Final Report (Item 14) by June 2nd.

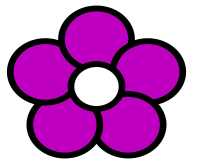


Crown Award: Granted to centers who complete ALL deliverables on time by their designated deadlines (April 1st, June 1st and June 7th).



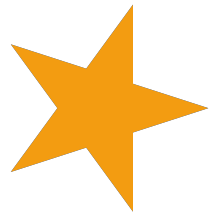
Surprise Award:

Granted to centers that are recognized for a random positive performance aspect.



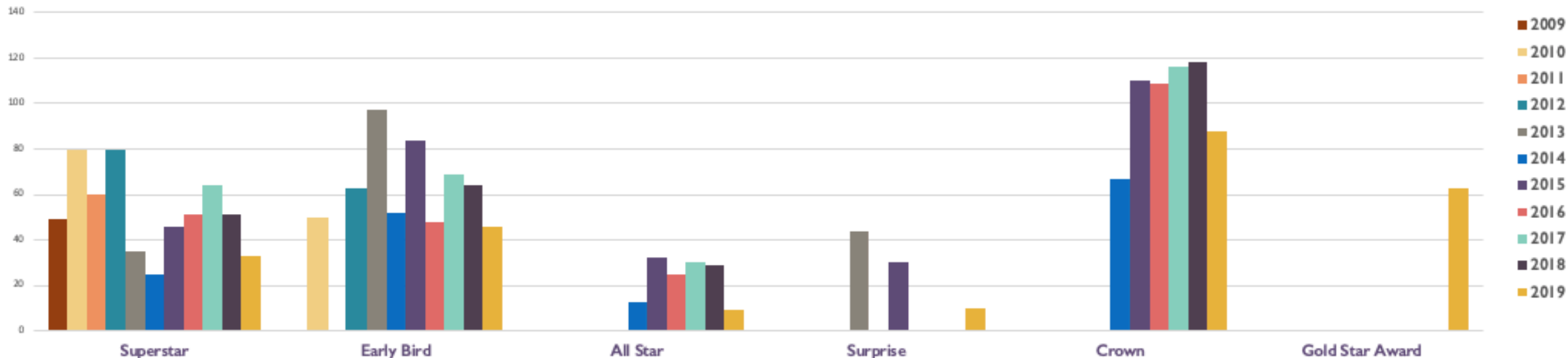
Gold Star Award:

Granted to centers who complete the June 1st deliverables (Items 9-13) by May 15th.



CPQCC Data Management Awards

Number of Award Types per Data Collection Year



	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Total Awards
Superstar	49	79	60	79	35	25	46	51	64	51	33	572
Early Bird	NA	49	0	62	97	52	84	48	69	64	46	571
All Star	NA	NA	NA	NA	NA	13	32	25	30	29	9	138
Surprise	NA	NA	NA	NA	44	0	30	0	0	0	10	84
Crown	NA	NA	NA	NA	NA	67	110	109	116	118	88	608
Gold Star Award	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	63	63
Total	49	128	60	141	176	157	302	233	279	262	249	2036

NICU Data Management Awards

1

SUPERSTAR AWARD

33/136=24% completed on time

2

EARLY BIRD AWARD

46/136=34% completed on time

3

ALL STAR AWARD

9/136=7% completed on time

4

CROWN AWARD

88/136=87% completed on time

5


GOLD STAR AWARD

63/136=46% completed on time

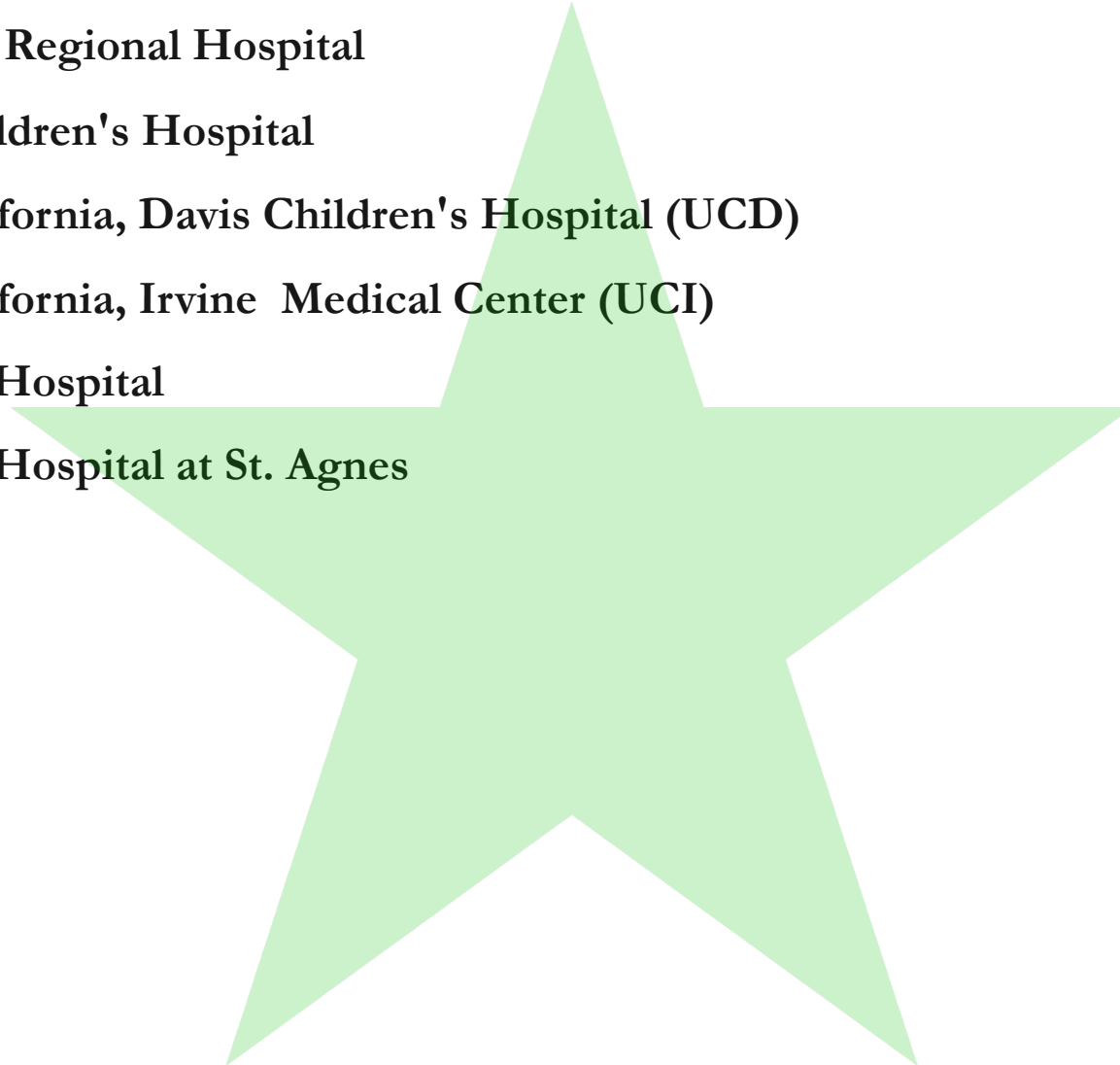


WHO ARE THE WINNERS?

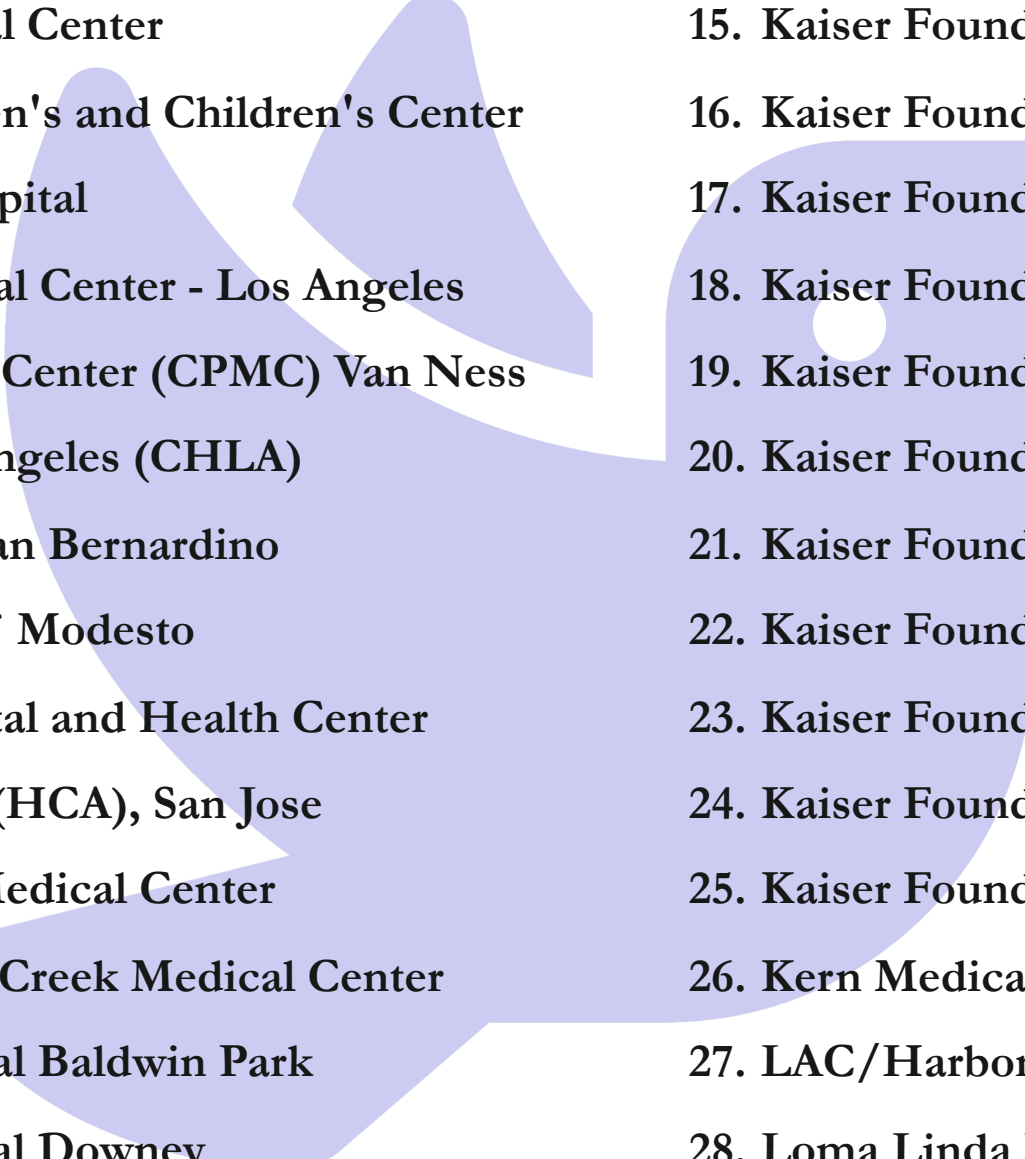
Congratulations to our 33 Superstar Award Winners!

- 
1. Anderson Lucchetti Women's and Children's Center
 2. Bakersfield Memorial Hospital
 3. CHOC Children's
 4. Dignity Health Dominican Hospital
 5. Emanate Health Queen of the Valley Hospital
 6. Grossmont Hospital, Women's Health Center
 7. Henry Mayo Newhall Memorial Hospital
 8. Hollywood Presbyterian Medical Center
 9. Huntington Hospital
 10. John Muir Health, Walnut Creek Medical Center
 11. Kern Medical
 12. KFH Riverside
 13. LAC/Harbor - UCLA Medical Center
 14. LAC/Olive View - UCLA Medical Center
 15. Loma Linda University Children's Hospital
 16. Los Robles Hospital and Medical Center
 17. Northridge Hospital Medical Center
 18. Orange County Global Medical Center
 19. PIH Good Samaritan Hospital
 20. Providence Cedars-Sinai Tarzana Medical Center
 21. Providence St. Joseph Medical Center
 22. Rady Children's Hospital San Diego (RCHSD)
 23. Regional Medical Center of San Jose
 24. Santa Clara Valley Medical Center (SCVMC)
 25. Santa Monica-UCLA Medical Center & Orthopaedic Hospital
 26. St. Bernardine Medical Center
 27. Sutter Roseville Medical Center

Congratulations to our 33 Superstar Award Winners!

- 
28. Sutter Santa Rosa Regional Hospital
 29. UCLA Mattel Children's Hospital
 30. University of California, Davis Children's Hospital (UCD)
 31. University of California, Irvine Medical Center (UCI)
 32. Valley Children's Hospital
 33. Valley Children's Hospital at St. Agnes

Congratulations to our 46 Early Bird Award Winners!

- 
1. Alta Bates Summit Medical Center
 2. Anderson Lucchetti Women's and Children's Center
 3. Bakersfield Memorial Hospital
 4. California Hospital Medical Center - Los Angeles
 5. California Pacific Medical Center (CPMC) Van Ness
 6. Children's Hospital Los Angeles (CHLA)
 7. Community Hospital of San Bernardino
 8. Doctors Medical Center of Modesto
 9. Glendale Memorial Hospital and Health Center
 10. Good Samaritan Hospital (HCA), San Jose
 11. Hollywood Presbyterian Medical Center
 12. John Muir Health, Walnut Creek Medical Center
 13. Kaiser Foundation Hospital Baldwin Park
 14. Kaiser Foundation Hospital Downey
 15. Kaiser Foundation Hospital Fontana
 16. Kaiser Foundation Hospital Moreno Valley
 17. Kaiser Foundation Hospital Ontario Medical Center
 18. Kaiser Foundation Hospital Orange County – Anaheim
 19. Kaiser Foundation Hospital Orange County – Irvine
 20. Kaiser Foundation Hospital Panorama City
 21. Kaiser Foundation Hospital Riverside
 22. Kaiser Foundation Hospital San Diego
 23. Kaiser Foundation Hospital South Bay
 24. Kaiser Foundation Hospital West Los Angeles
 25. Kaiser Foundation Hospital Woodland Hills
 26. Kern Medical
 27. LAC/Harbor - UCLA Medical Center
 28. Loma Linda University Children's Hospital

Congratulations to our 46 Early Bird Award Winners!

29. Methodist Hospital of Southern California

30. PIH Health Hospital

31. PIH Health, Good Samaritan Hospital

32. Pomona Valley Hospital Medical Center

33. Providence Cedars-Sinai Tarzana Medical Center

34. Rady Children's Hospital San Diego at Scripps La Jolla (RCHSD)

35. San Joaquin General Hospital

36. Santa Barbara Cottage Hospital

37. Sharp Chula Vista Medical Center

38. St. Jude Medical Center

39. Tri-City Medical Center

40. UCSF Benioff Children's Hospital Oakland

41. University of California, Irvine Medical Center (UCI)

42. Valley Children's Hospital

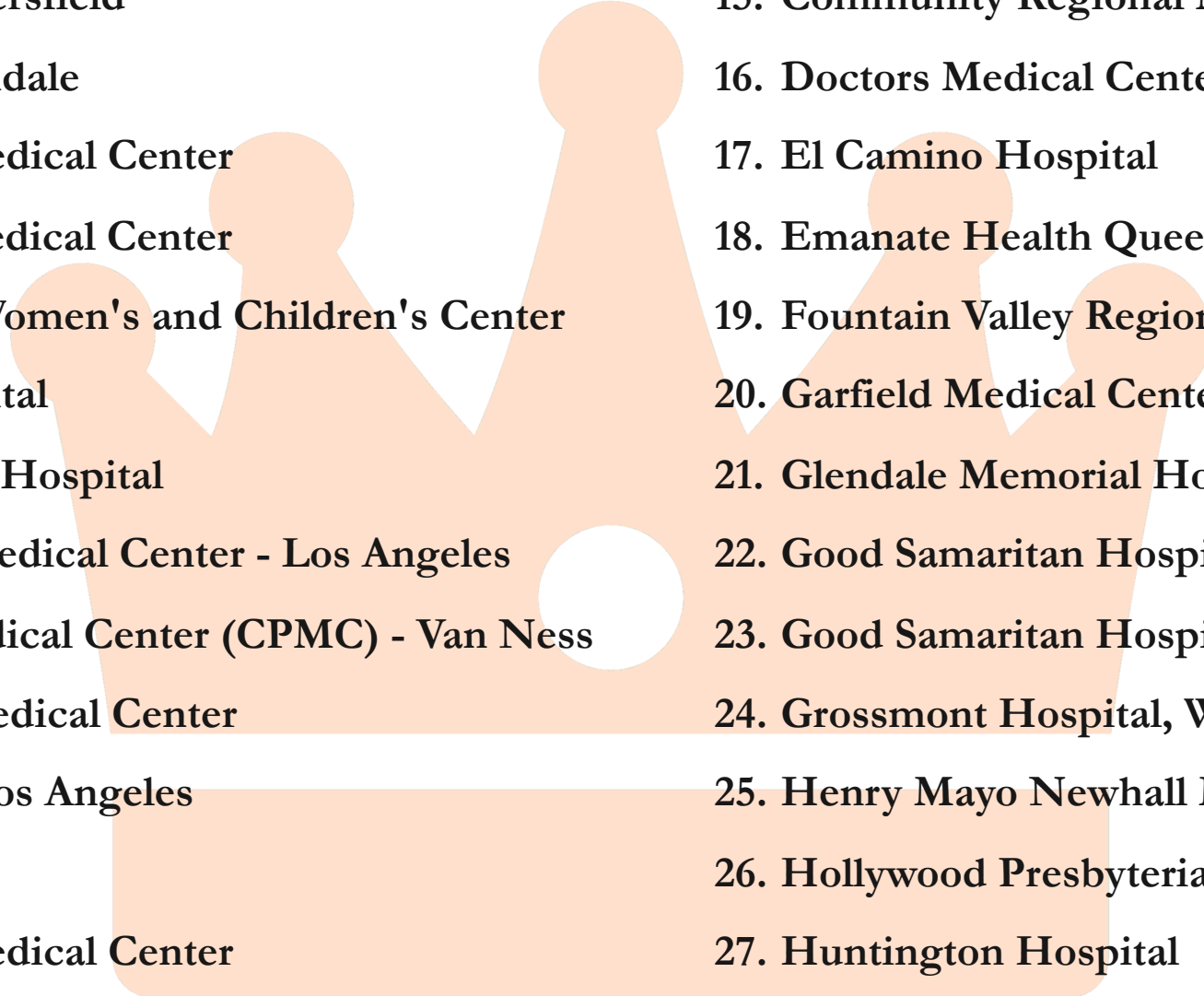
43. Valley Children's Hospital at St. Agnes

44. Valley Presbyterian Hospital

45. Washington Hospital Health Care System - Fremont

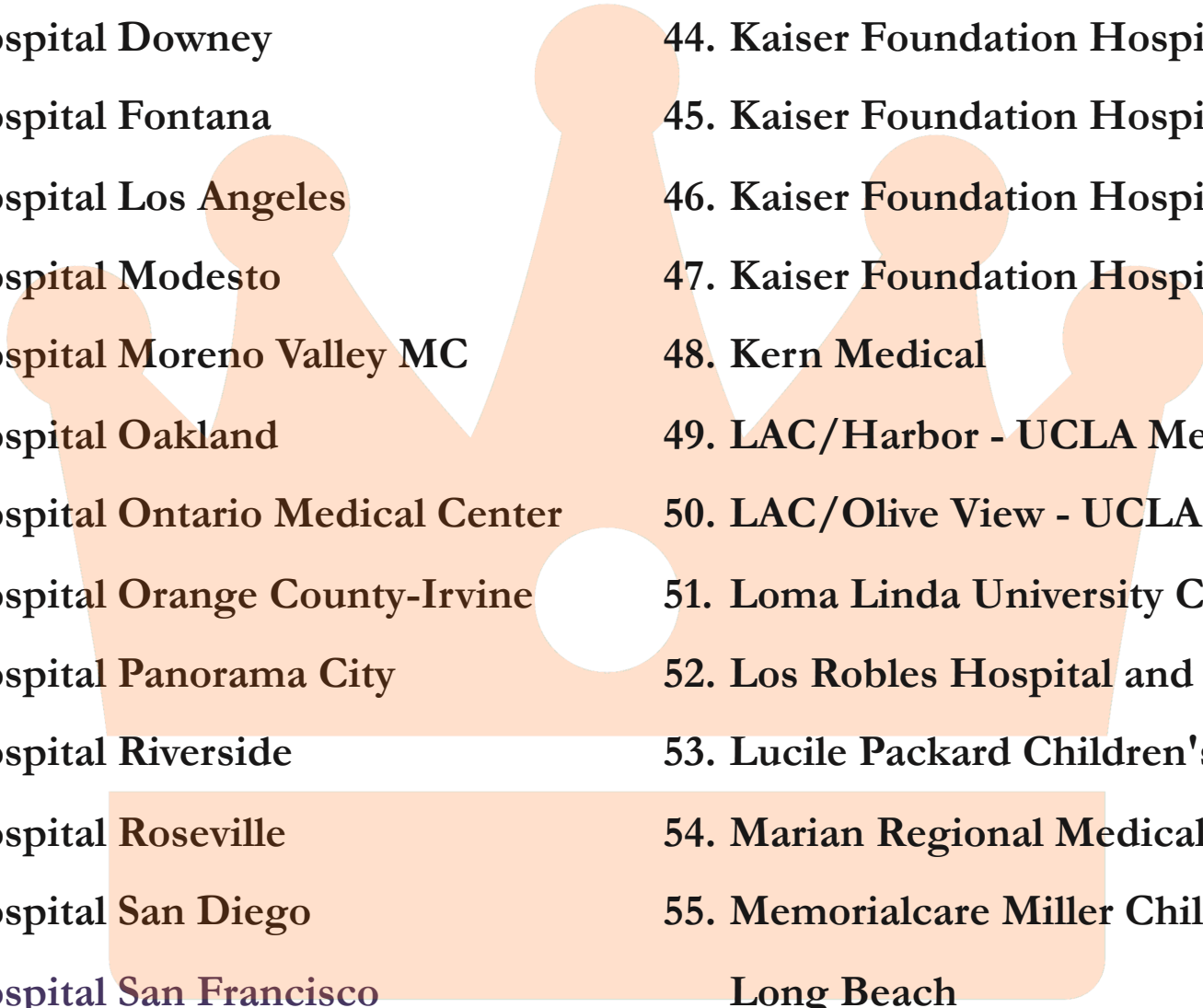
46. Watsonville Community Hospital

Congratulations to our 88 Crown Award Winners!



1. Adventist Health Bakersfield
2. Adventist Health Glendale
3. Alta Bates Summit Medical Center
4. Anaheim Regional Medical Center
5. Anderson Lucchetti Women's and Children's Center
6. Antelope Valley Hospital
7. Bakersfield Memorial Hospital
8. California Hospital Medical Center - Los Angeles
9. California Pacific Medical Center (CPMC) - Van Ness
10. Centinela Hospital Medical Center
11. Children's Hospital Los Angeles
12. CHOC Children's
13. Clovis Community Medical Center
14. Community Memorial Hospital of Ventura
15. Community Regional Medical Center (CRMC)
16. Doctors Medical Center of Modesto
17. El Camino Hospital
18. Emanate Health Queen of the Valley Hospital
19. Fountain Valley Regional Hospital & Medical Center
20. Garfield Medical Center
21. Glendale Memorial Hospital and Health Center
22. Good Samaritan Hospital (HCA), San Jose
23. Good Samaritan Hospital, Los Angeles
24. Grossmont Hospital, Women's Health Center
25. Henry Mayo Newhall Memorial Hospital
26. Hollywood Presbyterian Medical Center
27. Huntington Hospital
28. John Muir Health, Walnut Creek Medical Center

Congratulations to our 88 Crown Award Winners!



29. Kaiser Foundation Hospital Baldwin Park

30. Kaiser Foundation Hospital Downey

31. Kaiser Foundation Hospital Fontana

32. Kaiser Foundation Hospital Los Angeles

33. Kaiser Foundation Hospital Modesto

34. Kaiser Foundation Hospital Moreno Valley MC

35. Kaiser Foundation Hospital Oakland

36. Kaiser Foundation Hospital Ontario Medical Center

37. Kaiser Foundation Hospital Orange County-Irvine

38. Kaiser Foundation Hospital Panorama City

39. Kaiser Foundation Hospital Riverside

40. Kaiser Foundation Hospital Roseville

41. Kaiser Foundation Hospital San Diego

42. Kaiser Foundation Hospital San Francisco

43. Kaiser Foundation Hospital San Leandro

44. Kaiser Foundation Hospital Santa Clara

45. Kaiser Foundation Hospital South Bay

46. Kaiser Foundation Hospital Walnut Creek

47. Kaiser Foundation Hospital Woodland Hills

48. Kern Medical

49. LAC/Harbor - UCLA Medical Center

50. LAC/Olive View - UCLA Medical Center

51. Loma Linda University Children's Hospital

52. Los Robles Hospital and Medical Center

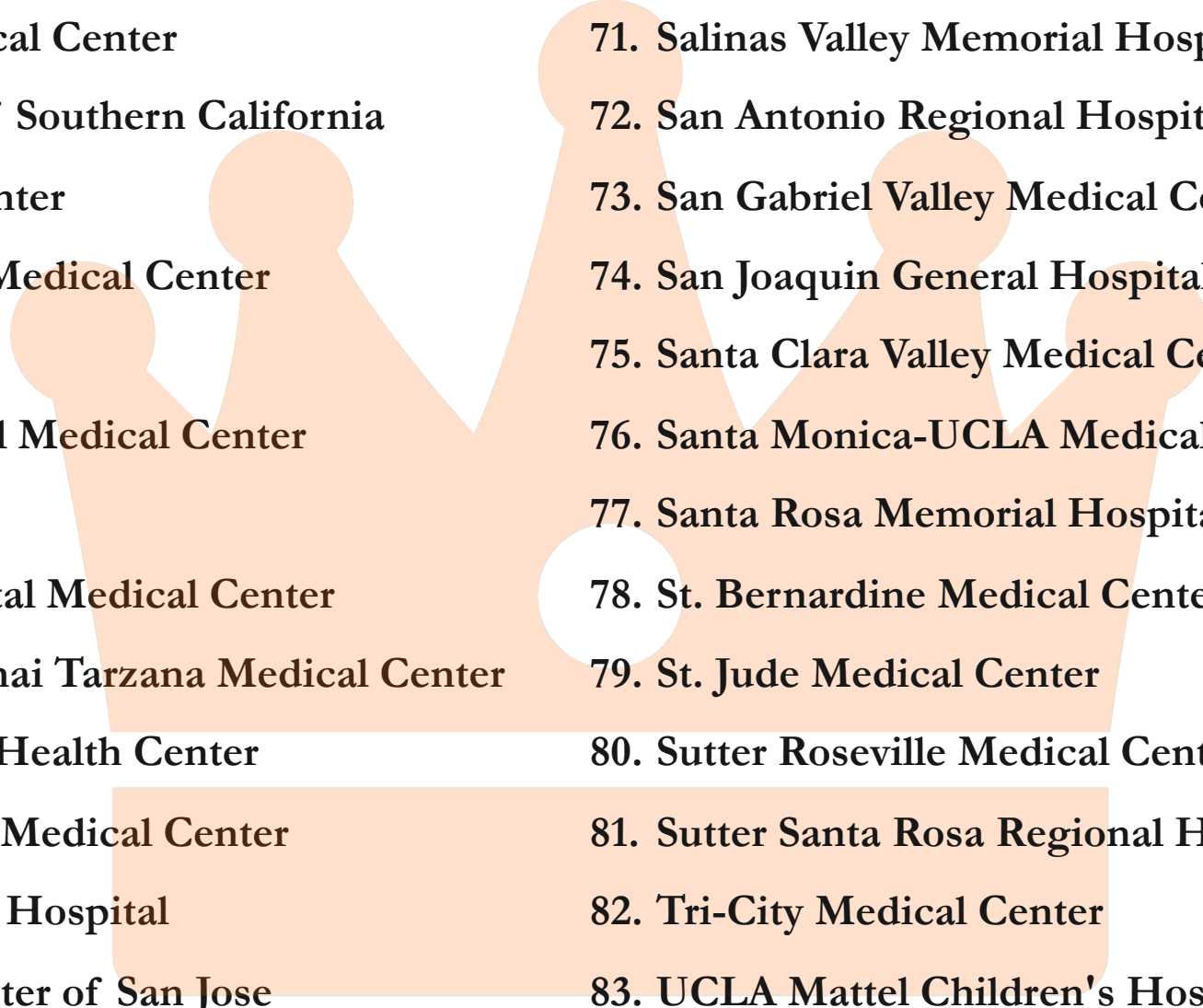
53. Lucile Packard Children's Hospital at Stanford (LPCH)

54. Marian Regional Medical Center

55. Memorialcare Miller Children's and Women's Hospital at

Long Beach

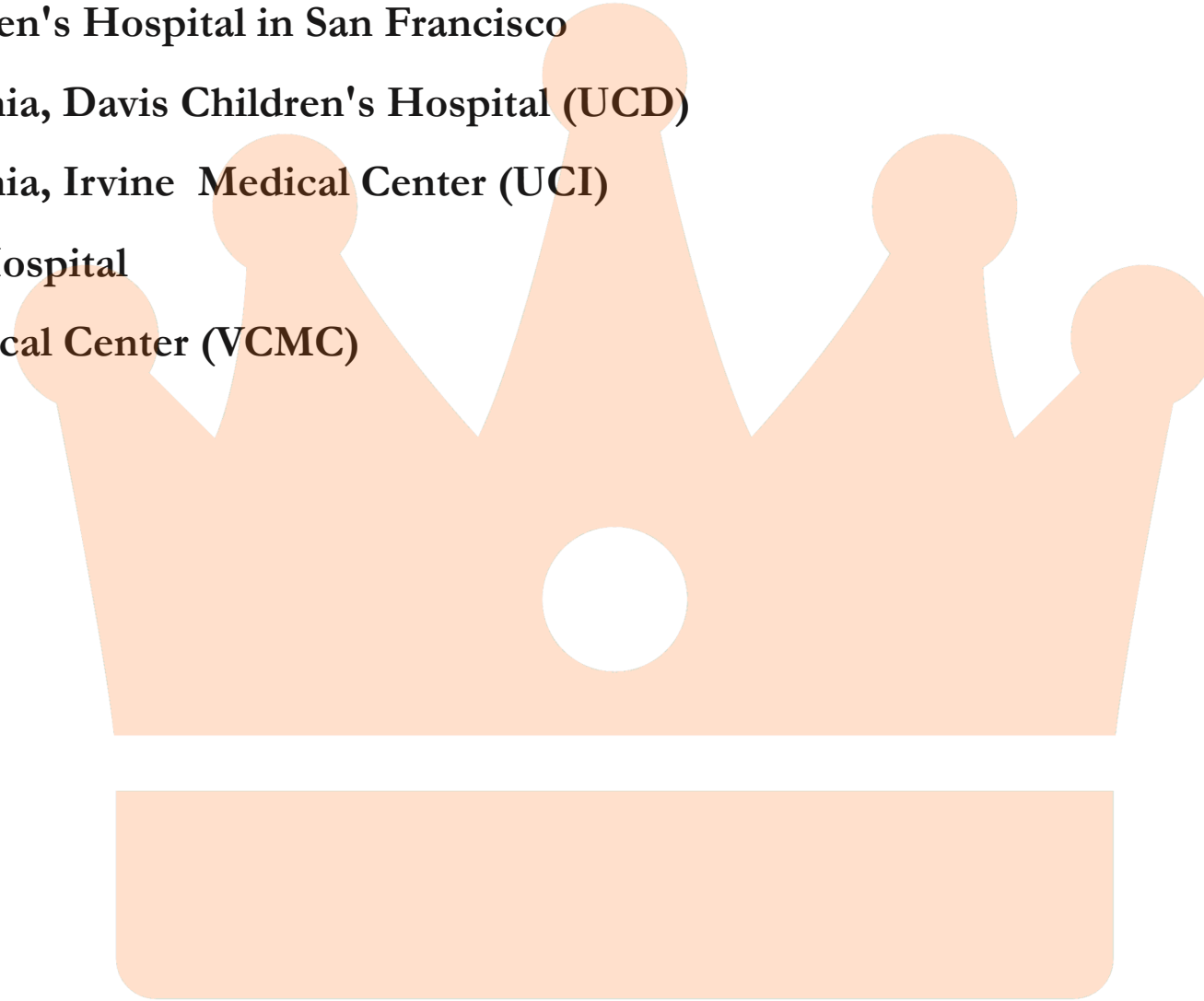
Congratulations to our 88 Crown Award Winners!



56. Memorialcare Saddleback Medical Center
57. Mercy San Juan Medical Center
58. Methodist Hospital of Southern California
59. Northbay Medical Center
60. Northridge Hospital Medical Center
61. O'Connor Hospital
62. Orange County Global Medical Center
63. PIH Health Hospital
64. Pomona Valley Hospital Medical Center
65. Providence Cedars-Sinai Tarzana Medical Center
66. Providence St. John's Health Center
67. Providence St. Joseph Medical Center
68. Redlands Community Hospital
69. Regional Medical Center of San Jose
70. Riverside University Health System Medical Center
71. Salinas Valley Memorial Hospital
72. San Antonio Regional Hospital
73. San Gabriel Valley Medical Center
74. San Joaquin General Hospital
75. Santa Clara Valley Medical Center (SCVMC)
76. Santa Monica-UCLA Medical Center & Orthopaedic Hospital
77. Santa Rosa Memorial Hospital
78. St. Bernardine Medical Center
79. St. Jude Medical Center
80. Sutter Roseville Medical Center
81. Sutter Santa Rosa Regional Hospital
82. Tri-City Medical Center
83. UCLA Mattel Children's Hospital

Congratulations to our 88 Crown Award Winners!

84. UCSF Benioff Children's Hospital in San Francisco
85. University of California, Davis Children's Hospital (UCD)
86. University of California, Irvine Medical Center (UCI)
87. Valley Presbyterian Hospital
88. Ventura County Medical Center (VCMC)



Congratulations to our 9 Allstar Award Winners!


1. **Anderson Lucchetti Women's and Children's Center**
2. **Bakersfield Memorial Hospital**
3. **Emanate Health Queen of the Valley Hospital**
4. **Good Samaritan Hospital, Los Angeles**
5. **John Muir Health, Walnut Creek Medical Center**
6. **Kern Medical**
7. **Loma Linda University Children's Hospital**
8. **Santa Monica-UCLA Medical Center & Orthopaedic Hospital**
9. **University of California, Irvine Medical Center (UCI)**



Congratulations to our 63 Gold Star Award Winners!

1. Adventist Health Glendale
2. Adventist Health Ukiah Valley
3. Anaheim Regional Medical Center
4. Anderson Lucchetti Women's and Children's Center
5. Bakersfield Memorial Hospital
6. California Hospital Medical Center - Los Angeles
7. Centinela Hospital Medical Center
8. Clovis Community Medical Center
9. Doctors Medical Center of Modesto
10. El Camino Hospital
11. Emanate Health Queen of the Valley Hospital
12. Garfield Medical Center
13. Good Samaritan Hospital (HCA), San Jose
14. Good Samaritan Hospital, Los Angeles
15. Grossmont Hospital, Women's Health Center
16. Henry Mayo Newhall Memorial Hospital
17. Huntington Hospital
18. John Muir Health, Walnut Creek Medical Center
19. Kaiser Foundation Hospital Modesto
20. Kaiser Foundation Hospital Moreno Valley Medical Center
21. Kaiser Foundation Hospital Oakland
22. Kaiser Foundation Hospital Panorama City
23. Kaiser Foundation Hospital San Leandro
24. Kaiser Foundation Hospital Santa Clara
25. Kaiser Foundation Hospital South Bay
26. Kaiser Foundation Hospital Woodland Hills
27. Kern Medical
28. Loma Linda University Children's Hospital

Congratulations to our 63 Gold Star Award Winners!

- 
29. Marian Regional Medical Center
 30. Memorialcare Saddleback Medical Center
 31. Methodist Hospital of Southern California
 32. Northbay Medical Center
 33. Northridge Hospital Medical Center
 34. O'Connor Hospital
 35. Orange County Global Medical Center
 36. Providence St. Joseph Medical Center
 37. Rady Children's Hospital San Diego (RCHSD)
 38. RCHSD at Palomar Medical Center Escondido
 39. RCHSD at Rancho Springs
 40. RCHSD at Scripps La Jolla
 41. RCHSD ego at Scripps Mercy Chula Vista
 42. RCHSD at Scripps Mercy San Diego
 43. Redlands Community Hospital
 44. Regional Medical Center of San Jose
 45. Riverside University Health System Medical Center
 46. Salinas Valley Memorial Hospital
 47. San Antonio Regional Hospital
 48. Santa Clara Valley Medical Center (SCVMC)
 49. Santa Monica-UCLA Medical Center & Orthopaedic Hospital
 50. Santa Rosa Memorial Hospital
 51. Sharp Chula Vista Medical Center
 52. St. Bernardine Medical Center
 53. St. Francis Medical Center
 54. St. Jude Medical Center
 55. Sutter Roseville Medical Center
 56. Sutter Santa Rosa Regional Hospital

Congratulations to our 63 Gold Star Award Winners!

57. Torrance Memorial Medical Center

58. Tri-City Medical Center

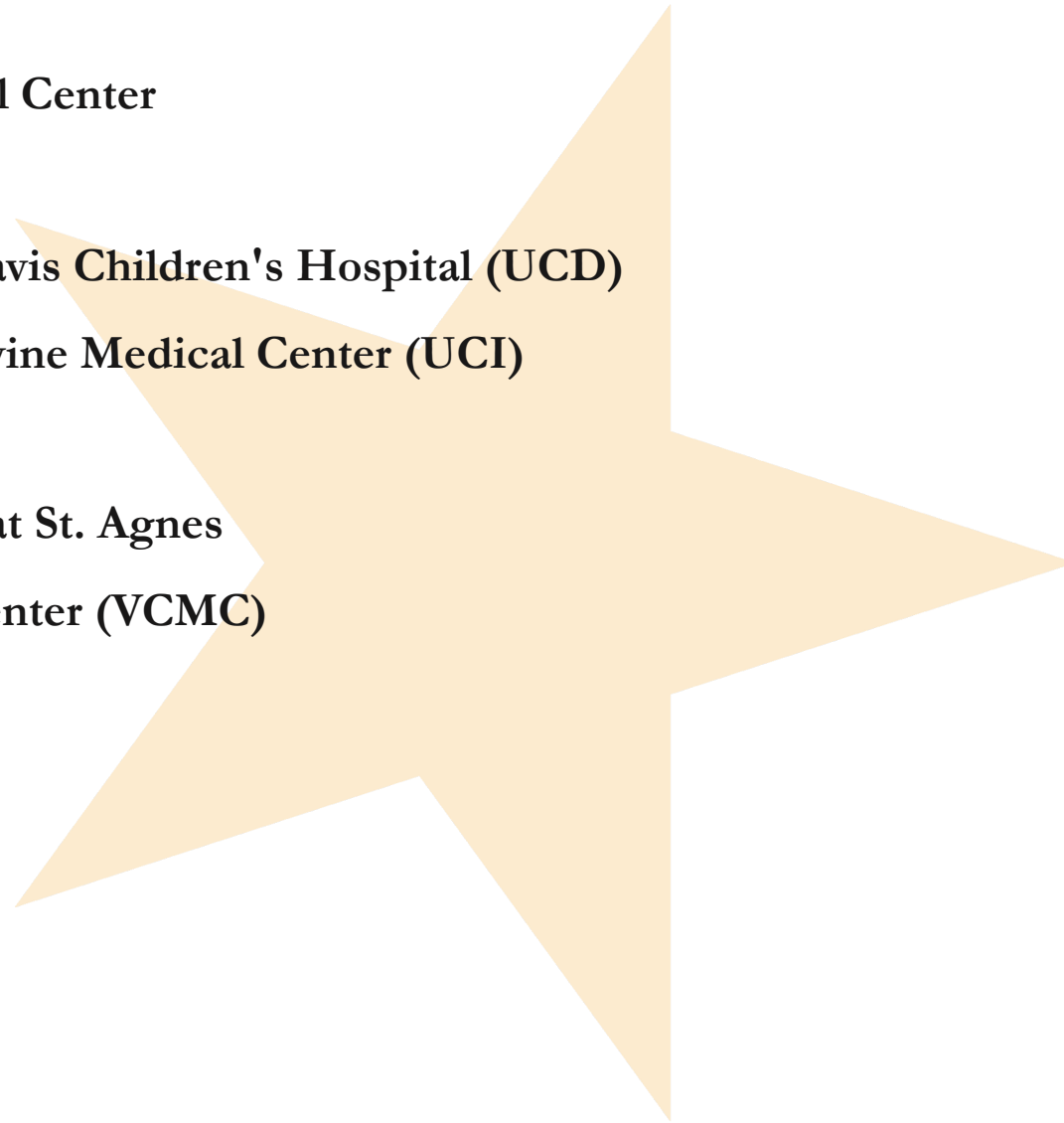
59. University of California, Davis Children's Hospital (UCD)

60. University of California, Irvine Medical Center (UCI)

61. Valley Children's Hospital

62. Valley Children's Hospital at St. Agnes

63. Ventura County Medical Center (VCMC)



Data Management Awards

- NICU Awards
- HRIF Awards

- [Who We Are](#)
- [What We Do](#)
- [Membership](#)
- [Our Staff](#)
- [Our Partners](#)
- [News and Events](#)

- [Who We Are](#)
- [What We Do](#)
- [Membership](#)
 - [Becoming a Member](#)
 - [Current Members](#)
 - [Member Awards](#)
 - [Mentorship Program](#)
- [Our Staff](#)
- [Our Partners](#)
- [News and Events](#)

Member Awards

We present the following awards to members who go above and beyond to meet data entry deadlines. Data abstraction for our NICU and HRIF databases takes a lot of time and hard work and we are honored to work with such dedicated teams across California! For more information on CPQCC's quality improvement awards, visit the [Quality Improvement Awards](#) page.

NICU Super Star



Awarded to NICUs that submit items 2-8 on the NICU Closeout Checklist before March 15th.

[View award certificates.](#)

HRIF Super Star



Awarded to HRIF clinics that submit items 1-4 on the HRIF Closeout Checklist by April 1st.

[View award certificates.](#)

NICU Early Bird



Awarded to NICUs that submit item 14 on the close-out checklist (CCS Report confirmation) on June 2nd.

[View award certificates.](#)

HRIF Follow-up



Awarded to HRIF clinics with core visit follow-up rates for the closing birth year of $\geq 80\%$ for the first visit, $\geq 70\%$ for the second visit, and $\geq 60\%$ for the third visit as of April 2nd.

[View award certificates.](#)

THANK YOU!

Q&A Session

Panelists

- **Henry Lee, MD, MPH**, Chief Medical Officer, CPQCC
- **Jochen Profit, MD, MPH**, Chief Quality Officer, CPQCC
- **Janella Parucha, BS**, Program Manager, CPQCC
- **Fulani Davis**, Program Manager, CPQCC
- **Erika Gray** – Program Manager, HRIF

Closing

Recording and Webinar Evaluation

- An email will be sent out after the webinar with a link to:
 - The slides and webinar recording
 - An evaluation survey
- The webinar recording and slides will also be posted at:
<https://www.cpqcc.org/engage/annual-data-training-webinars-2020>

Upcoming Data Training Webinars



<https://www.cpqcc.org/engage/annual-data-training-webinars-2020>

CPQC