

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA

AIM Safe Reduction of Primary Cesarean Section Data Collection Plan



This is a guide of the data to be collected and the frequency of data collection for the AIM Safe Reduction of Primary Cesarean Section (AIM RPC) initiative. A sample of the data collection forms are included for reference. All data will be entered into the PQCNC Delphi database.

Summary of Data Collection

Document	Frequency
PQCNC AIMRPC Snapshot	November 2018 and December 2019 (beginning and end of initiative)
PQCNC AIMRPC Patient Data Collection Sheet	All NTSV patients
PQCNC AIMRPC Monthly Totals Sheet	Each month
PQCNC AIMRPC Education Process Measures	Once every quarter (3 months)
PQCNC AIMRPC Bundle Compliance/Chart Audit Process Measures	Once every quarter (3 months)

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PQCNC AIMRPC Snapshot

Complete the AIMRPC Snapshot in November 2018 and in December 2019 (the beginning and end of the initiative). Each team will receive a link to complete this snapshot. This is the only data that will not be entered into Delphi.

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AIM Reducing Primary Cesarean Section Snapshot



1. Your facility: _____

2. Date of Snapshot: _____

3. How many total deliveries did your facility perform in 2017? _____

4. Does your hospital have current labor guidelines policy/procedure (reviewed and updated in the last 2-3 years) that provides a unit standard approach for providing labor support, freedom of movement and management protocols for labor challenges?
__Yes
__No

5. Does your hospital have a multidisciplinary process in place that routinely reviews a random sample of NTSV Cesarean section deliveries each month?
__Yes
__No

6. Has your staff received education regarding ACOG/SMFM Criteria for labor dystocia in the last 2 years?
__Yes
__No

7. Has your hospital developed OB specific resources and protocols to support patients and family through an unexpected/traumatic Cesarean delivery?
__Yes
__No

8. Do Labor and Delivery nurses receive initial training or refresher training after hire in Labor Support methods?
__Yes
__No

9. Do Labor and Delivery nurses at your facility ever perform intermittent auscultation for specific patients in labor?
__Yes
__No

10. Does your facility have 24/7 in-house obstetric coverage?
__Yes
__No

AIM RPC Snapshot

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AIM RPC Snapshot

11. Does your hospital have dedicated obstetric anesthesia?
___ Yes
___ No
12. What percentage of women delivering at your facility receive childbirth education prior to delivery? _____
13. Does your hospital perform external cephalic version?
___ Yes
___ No
14. Does your hospital allow/utilize doulas?
___ Yes
___ No
15. Does your hospital have a standardized Pitocin administration policy?
___ Yes
___ No
16. Please review the last 10 NTSV CS deliveries at your facility to determine the reason indicated for the Cesarean section (entries should total 10):
_____ labor dystocia
_____ fetal indication
_____ other

Where labor dystocia was chosen, please indicate the dilation at delivery (total should equal labor dystocia number in previous question):

- _____ Less than 6 cm dilation
_____ 6cm – 10cm dilation
_____ >10 cm dilation

Where fetal indication was chosen, please indicate category of fetal tracing (total should equal fetal tracing number in previous question)

- _____ Category II
_____ Category III

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AIM RPC Snapshot

17. Please enter the NTSV rate for your hospital for the following months:

July 2018 _____

August 2018 _____

September 2018 _____

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PQCNC AIMRPC Patient Data Collection Sheet

Complete the AIM RPC Patient Data Collection form for all patients who are NTSV. You will indicate on the form if the patient was delivered vaginally or by cesarean section. You will generate this form in Delphi as you enter each patient.

Sample form:

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA
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1) Chart #: _____

2) Date of Delivery: _____

3) What was the mode of delivery for the NTSV patient? SVD or Primary CS

4) Was infant's 5 minute Apgar 6 or less? Yes/No

5) Was infant admitted to the SCN/NICU? Yes/No _____

5a) If yes, choose **primary** reason for admission to SCN/NICU:

- Respiratory distress
- Infection
- Hypoglycemia
- NAS
- Suspected/confirmed congenital anomaly
- Other (free text)

6) Ethnicity

- White
- Asian American
- Black or African American
- Hispanic or Latino
- Native Hawaiian and Other Pacific Islander
- American Indian or Alaska Native
- Multiracial
- Refused

7) ~~Payor~~

- Medicaid
- BCBS/State
- Uninsured
- Other

AIM Reducing Primary Cesarean Section Patient Data Collection

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PQCNC AIMRPC Monthly Totals Data Collection Sheet

Complete the AIM RPC Monthly Totals Data Collection form each month and include all patients (not only NTSV patients). This form will be automatically generated each month in Delphi.

Sample form:

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA
Reducing Primary Cesarean Section Monthly Totals Data Collection



1) Month: _____

2) Total number of deliveries: _____

3) Total number of cesarean deliveries: _____

4) Total number of women receiving epidurals or spinal anesthesia during labor _____

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PQCNC AIMRPC Quarterly Education Process Measures

Complete the AIM RPC quarterly Education Process Measures Data Collection form once every quarter (three months). This form will be automatically generated in Delphi at the beginning of each quarter.

Sample form:

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA
Reduction of Primary Cesarean Section Education Process Measures



1) What cumulative percent of OB physicians and midwives have completed an education program (within the last 2 years) on the ACOG/SMFM labor management guidelines that includes teaching on the Safe Reduction of Primary C/S: Support for Intended Vaginal Birth bundle and the unit standard protocol? Report estimate in 10% increments (round up) _____ %

2) What cumulative percent of OB nurses have completed an education program (within the last 2 years) on the ACOG/SMFM labor management guidelines that includes teaching on the Safe Reduction of Primary C/S: Support for Intended Vaginal Birth bundle and standard unit processes? Report estimate in 10% increments (round up) _____ %

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PQCNC AIMRPC Quarterly NTSV patient Maternal Safety Bundle compliance chart audit

Complete the AIM RPC NTSV Maternal Safety Bundle compliance sheet for a sample of NTSV patients every quarter who were delivered via cesarean section. The minimum number of charts to audit is 15 and the target number is 20% of the NTSV CS deliveries in each quarter. This sheet will be an ad hoc survey that you generate for each patient entered.

Sample form:

PERINATAL QUALITY COLLABORATIVE OF NORTH CAROLINA

Reduction of Primary Cesarean Section Bundle Compliance/Chart Audit Process Measures



AIM RPC Maternal Safety Bundle Compliance: Audit charts of patients who were NTSV and delivered via CS. Minimum number of charts is 15 and target number of charts is 20% of the NTSV deliveries in a quarter.

- 1) Chart number: _____
 - 2) Choose one of the following indications for the NTSV cesarean delivery:
 - a. Labor dystocia or Failure to Progress
 - b. Failed Induction (including cervical ripening)
 - c. Fetal Concern
 - d. No labor
- (Questions cascade based on indication for delivery that is chosen)
- 3) If Labor Dystocia or Failure to Progress, please indicate which criteria were present (choose all that apply):
 - a. Cervix 6 cm or greater at time of delivery
 - b. Membranes ruptured
 - c. No cervical changes x 4 hours with adequate uterine activity (or 6 hours with oxytocin)
 - 4) If Failed Induction, please indicate which criteria were present (choose all that apply):
 - a. Less than 6 cm dilation (if greater than or equal to 6cm dilation include under labor dystocia or failure to progress)
 - b. Bishop score greater than or equal to 6 before elective induction
 - c. Oxytocin use for a minimum of 12 hours after membrane rupture
 - 5) If Fetal Concern, please indicate the following (choose all that apply):
 - a. Category II tracing with clinically significant variable decelerations and/or minimally absent fetal heart rate variability without significant decelerations
 - b. Category III tracing
 - c. Maternal position change
 - d. Maternal fluid bolus
 - e. Administration of oxygen
 - f. Reduced or stopped oxytocin or uterine stimulant
 - g. Amnioinfusion with significant variable decelerations after other measures failed
 - h. Stimulation (scalp, vibroacoustic or abdominal wall) with minimal or absent fetal heart rate variability

AIM Reduction of Primary Cesarean Section Bundle Compliance/Chart Audit Process Measures

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Process Measures

- 6) If No labor, please indicate reason for cesarean delivery (choose one option):
- a. Suspected macrosomia
 - b. Previous myomectomy/uterine scar
 - c. Third trimester bleeding
 - d. Active HSV infection
 - e. Maternal request
 - f. Other (free text)
- 7) If No labor, was documentation appropriate for indicated reason for cesarean delivery?
- Yes
 - No
- 8) Did the patient receive education regarding normal healthy labor and birth?
- Yes
 - No
- 9) Ethnicity
- White
 - Asian American
 - Black or African American
 - Hispanic or Latino
 - Native Hawaiian and Other Pacific Islander
 - American Indian or Alaska Native
 - Multiracial
 - Refused

AIM Reduction of Primary Cesarean Section Bundle Compliance/Chart Audit Process Measures

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