



CALIFORNIA PERINATAL QUALITY CARE COLLABORATIVE

CPQCC Data Center

Data Finalization Guidelines for Infants Born in 2008

Version 1.0, February 3, 2009



CPQCC Data Finalization Guidelines for Infants Born in 2008
February 3, 2009

Table of Contents

I.	Introduction	4
	<ul style="list-style-type: none">• Revised Hours of Operation• CPQCC Data Center Fax Number and Mailing Address	
II.	CPQCC Data Finalization Timeline for 2008	5
	<ul style="list-style-type: none">• CPQCC Data Finalization Checklist	
III.	Procedures for Finalizing Your Data	
	<ol style="list-style-type: none">1. By February 3, confirm the electronic receipt of the Data Finalization Guidelines	8
	<ol style="list-style-type: none">2. By April 1, submit data for all eligible infants	9
	<ol style="list-style-type: none">3. By June 1, edit data for completeness and accuracy	12
	<ol style="list-style-type: none">4. By April 1, submit the CCS Supplemental Form	13
	<ol style="list-style-type: none">5. By April 1, confirm the Draft CCS Report	14
	<ol style="list-style-type: none">6. By April 1, submit the ID Verification Form – Verify IDs of submitted records	15
	<ol style="list-style-type: none">7. By April 1, submit the Eligibility Verification Plan	17
	<ol style="list-style-type: none">8. By April 1, submit the CPQCC/VON Contact Report	17

9. By April 1, submit the VON Membership Survey	17
10. By June 1, confirm the Data Consistency Report – Duplicates and Re-Encounters	18
11. By June 1, review the Confirmed Unknown Report	20
12. By June 1, confirm the Final CCS Report	20
13. By June 7, confirm the electronic receipt of the 2008 Data Finalization Status Report	21

CPQCC Data Finalization Guidelines for Infants Born in 2008

Introduction

Beginning with infants born in 2004, CPQCC is responsible for all data finalization procedures for its member hospitals. The purpose of these guidelines is to assist our Members in meeting the CPQCC Network and the Vermont Oxford Network's goals for complete, accurate and timely submission of records for infants born in 2008.

The following tasks are required for Data Finalization:

- 1. Confirm the electronic receipt of the Data Finalization Guidelines.**
- 2. Data for all eligible infants must be submitted.**
- 3. Each submitted record must be complete and accurate.**
- 4. The CCS Supplemental Form must be submitted.**
- 5. The Draft CCS Report must be confirmed for accuracy and completeness.**
- 6. The ID Verification Form must be downloaded, signed, and submitted.**
- 7. The Eligibility Verification Plan must be downloaded and submitted.**
- 8. The CPQCC/VON Contact Report must be submitted.**
- 9. The VON Membership Survey must be submitted.**
- 10. Confirm the Data Consistency Report – Duplicates and Re-encounters.**
- 11. Review the Confirmed Unknown Report.**
- 12. The Final CCS Report must be confirmed for accuracy and completeness.**
- 13. Confirm the electronic receipt of the Data Finalization Status Report.**

For each center to be included in: the Vermont Oxford Network (VON) Database and Annual VON Quality Management Report (QMR), the Annual CCS Report, the Annual CPeTS Report, and the Annual CPQCC Web Report, CPQCC must verify by June 1, 2009, that the Center has met the above requirements.

Only centers for which items 1, 2 and 4 through 9 above are verified by April 1st will be eligible for inclusion in the 2008 VON Quality Management Report. Centers which do not complete the membership survey will not receive some parts of the VON QMR.

Only Centers for which items 1 through 13 above are verified will be eligible for inclusion in the Annual CCS Report, the Annual CPeTS Report and the Annual CPQCC Web Report.

**CPQCC DATA CENTER
Revised Hours of Operation**

Effective January 29, 2009, the CDPH and other departments under the Governor's executive authority will move forward to implement the Administration's plan to close state offices the first and third Fridays of the month. The first furlough day will be February 6, 2009.

Until further notice, during these days the Data Center staff will be working remotely during the hours of 7am through 3pm and checking their voicemail on the hour.

During these days, we would like to kindly request for our Members to send faxes to 510.620.3144 during regular business hours Mondays through Thursdays.

Please email support@cpqcc.org for technical assistance.

For urgent issues, please contact the CPQCC Main Office at 650.723.4763.

Please fax all documents to the CPQCC Data Center at **510.620.3144** or mail to:

**CPQCC Data Center
State of California, Department of Health Services
Maternal, Child, Adolescent Health Branch
850 Marina Bay Parkway, Building P, Third Floor
Richmond, CA 94804-6403**

We will send you an email confirmation acknowledging the receipt of all received documents.

For additional technical assistance, send an email to support@cpqcc.org. Additionally, each Center will be assigned a Data Center Staff to assist members during the Data Finalization process.

**Grace Villarin Dueñas 510.620.3146
Fulani Irving 510.620.3148
Pemita Pa'aga 510.620.3152**

CPQCC Data Finalization Timeline for Infants Born in 2008
CPQCC Data Finalization Checklist

NOTE: Shaded items are required tasks for CPQCC Members.

DUE DATE	STATUS	DATA FINALIZATION ACTIVITY
October 2008 - January 2009		Initial outreach calls are made to Centers with late submission of 2007 data.
February 3, 2009		<p>Member release of the 2008 Data Finalization Guidelines</p> <ul style="list-style-type: none"> • A confirmation receipt is required from each Center's CPQCC Data Contact in order to receive a copy of the Center-specific CPQCC/VON Contact Report and the VON Membership Survey. • The 2008 CCS Report is ready to be compiled. After completing the on-line CCS Supplemental Form, members must send a request to support@cpqcc.org in order for the Data Center to compile and activate the on-line CCS Report.
February 4, 2009		Follow-up emails will be sent to any Center with zero submissions or less than 76% forms completed to date and/or incomplete CCS Supplemental Form submission.
February 9, 2009		Follow-up calls to any Center with zero submissions or less than 76% forms completed to date and/or incomplete CCS Supplemental Form submission.
March 2, 2009		<ul style="list-style-type: none"> • Follow-up emails sent to any Center without a confirmed receipt of the Data Finalization Guidelines and who have not requested the CPQCC/VON Contact Report and the VON Membership Survey to date. • Second electronic notice to any Center with zero submissions or less than 76% forms completed to date and/or incomplete CCS Supplemental Form submission.
March 9, 2009		Second round of follow-up calls to any Center with zero submissions or less than 76% forms completed to date and/or incomplete CCS Supplemental Form submission.
March 17, 2009		A two-week electronic reminder will be sent before the April 1st deadline.
March 23, 2009		A one-week electronic reminder will be sent before the April 1st deadline.

<p>April 1, 2009 11:59 pm</p>		<p>Deadline to submit the following:</p> <ol style="list-style-type: none"> 1) Submission of CPeTS items C.1 through C.33 and Admission/Discharge items 1 through 52 for all infants born in 2008; Updated data for all Still In-House infants born in 2007 2) CCS Supplemental Form 3) Draft CCS Report confirmed for accuracy and completeness 4) ID Verification Form 5) Eligibility Verification Plan 6) CPQCC/VON Contact Report 7) VON Membership Survey <p>Deadline to submit any CPeTS Override requests to the CPeTS Staff.</p>
<p>April 3, 2009</p>		<p>The CPQCC Data Center is closed for an internal data audit.</p>
<p>April 7, 2009</p>		<p>Member release of the Center-specific Data Finalization Status Reports.</p>
<p>April 8, 2009</p>		<p>The Data Consistency Report is released using data submitted by April 1st.</p>
<p>April 2, 2009 to May 31, 2009</p>		<p>Using www.cpqccdata.org, complete the following:</p> <ol style="list-style-type: none"> 1) Make corrections and updates to all submitted 2008 records including 2007 Still In-House infants. 2) Review and confirm the Data Consistency Report – Duplicates and Re-Encounters. Coordinate data with transfer hospitals as needed. 3) Review the Confirmed Unknown Report. 4) Mandatory Review Period – CCS Report. During this period, both CCS and Member Centers can request re-runs of the CCS Report. If the Draft CCS Report requires corrections, update the on-line CCS Supplemental Form and/or the CPQCC Network data, then send a request to support@cpqcc.org to re-run your CCS Report.
<p>April 20, 2009</p>		<p>Follow-up emails sent to any Center with pending Data Consistency Report and/or pending CCS Report.</p>

April 27, 2009		Follow-up calls sent to any Center with pending Data Consistency Report and/or pending CCS Report.
May 4, 2009		Second electronic notice to any Center with pending Data Consistency Report and/or pending CCS Report.
May 11, 2009		Second round of follow-up calls with any Center with pending Data Consistency Report and/or pending CCS Report.
May 18, 2009		A two-week electronic reminder will be sent before the June 1 st deadline.
May 26, 2009		A one-week electronic reminder will be sent before the June 1 st deadline.
June 1, 2009 11:59 pm		Deadline for submission of the following finalized data: 1) All records for 2008 and prior years are complete, accurate and 100% error-free. All unknown items have been verified. 2) CCS Report confirmed for accuracy and completeness.
June 1, 2009		The 2008 CPQCC Data Finalization is due. Data Finalization is complete. Only Centers with finalized data and complete data finalization documents on file, without exception, will be included in the VON Database and the Annual NICU Quality Management Report, the Annual CCS Report, the Annual CPeTS Report, and the Annual CPQCC Web Report. Due to the very large volume of data which must be processed, no exceptions will be made unless there are extenuating circumstances. The 2008 CCS Report will be locked and finalized. After this deadline, without exception, the CPQCC Data Center will not grant any data extensions or any additional CCS Report re-run requests.
June 3, 2009		The CPQCC Data Center is closed for an internal data audit.
June 7, 2009		Member release of the Final Data Finalization Status Reports.
June 8-16, 2009		The CPQCC Data Center is closed for internal data finalization. The finalized CPQCC Network Database is due to VON on June 15. The Final CCS Reports will be delivered to CCS on June 16.
September 2009		Member release of the Annual Reports. 1) The finalized 2008 Annual CPeTS Report and the finalized 2008 Annual CPQCC Web Report are electronically released to the CPQCC Membership. 2) The VON Annual NICU Quality Management Report is mailed to each Center via certified mail.

Procedures for Finalizing Your Data

1. By February 3, confirm the electronic receipt of the Data Finalization Guidelines.

- A confirmation receipt to support@cpqcc.org is required from each Center's CPQCC Data Contact in order to receive a copy of the Center-specific CPQCC/VON Contact Report and the VON Membership Survey.
- With the confirmation receipt, the Data Center will provide instructions on how to access the Center-specific reports:
 - Follow the link to the "**Data Contacts Only**" page
http://www.cpqcc.org/data/data_contacts_only
 - Click on the "**Contact Report and Membership Survey**" sub-page
http://www.cpqcc.org/data/data_contacts_only/2008_contact_report_membership_survey
 - Click on the zipped file link and follow the instructions.
 - Find your Center's name in the list and then click the PDF file to view and save your report.
 - Use your **cpqccdata password** to open the link.
- The 2008 CCS Report is ready to be compiled. After completing the on-line CCS Supplemental Form, members must send a request to support@cpqcc.org in order for the Data Center to compile and active the on-line CCS Report.

2. By April 1, submit data for all eligible infants.

- Members are required to assign IDs for each eligible infant born in 2008, as well as, submit CPeTS Items C.1 to C.33 and items 1 to 52 in the Admission/Discharge Form or Delivery Room Death Form. Furthermore, the 2007 Still-In House data must be entered into www.cpqccdata.org.
- **By April 1st, members must submit a CPeTS Override Request for items that are confirmed pending to the CPeTS Staff.**
- The data submitted through www.cpqccdata.org, the CPQCC Network Database, is linked in real-time to your CCS Supplemental Form and to www.cpqccreport.org. By April 1st, this data MUST be 100% complete (meaning assign IDs to all CPQCC-eligible infants and submit the items above). However, this data does NOT have to be 100% error-free until June 1st. Centers that do not meet this requirement may not be included in the Annual Reports.
- **Navigating the Data Management website www.cpqccdata.org.**
 - Go to http://www.cpqcc.org/data/electronic_data_submission to download the On-line Web-based Data Entry (OWDES) Instructions.
 - Log-in using your **Center Number** and **cpqccdata password**
 - What are the minimum variables needed to start a record? Open an empty form, and then click on **"Check Form."**

CPETS ACUTE TRANSPORT-IN FORM	ADMISSION/DISCHARGE FORM OR DELIVERY ROOM DEATH FORM
Birth Year Infant ID Birth Weight (C.3) Gestational Age (C.4) Sex (C.5) Congenital Anomalies (C.6a) Antenatal Steroids (C.8) Surfactant Use (C.9b) Birth Date (C.12) Location of Birth (C.33)	Birth Year Infant ID Birth Weight (1) Birth Date (4) Sex (5)

- **Procedures for Submitting Records for Infants Born in 2008 and Still Hospitalized As of the June 1st Deadline**

Data forms for infants whose records have Items 1 through 34, and Items 36 through 52 completed and which have no final disposition status and no errors will have a Record Status coded "SIH." A record status code of "S" indicates that the infant is still hospitalized, has not been discharged home or reached his/her first birthday.

A Record Status code of SIH is temporary and will be changed to a Complete status code when the record is complete and correct. The SIH status code is not appropriate for infants who are more than a year old. If an infant is still hospitalized and has reached his or her first birthday, the record

should be finalized. Data Contacts should periodically check to be sure that records are finalized when an infant dies, is discharged home or reaches his or her first birthday.

If there are infants who are still hospitalized when data is finalized by the June 1st deadline, a minimum of items 1 through 34, and items 36 through 52 on the Admission/Discharge Form must be completed. While it is possible that items coded “No” may later change to “Yes”, the purpose of completing these items is to assure that data for the Annual Reports is as complete as possible.

Centers should use the following guidelines when completing items for infants who are still hospitalized:

- **If the infant is still in your center and has not been transferred,** complete Items 1 through 34, and 36 through 52 on the Admission/Discharge Form. Leave Items 35, and 53 through 64 blank.
- **If the infant transferred from your center to another hospital and is still in the “transferred-to” hospital,** complete Items 1 through 59 on the Admission/Discharge Form (code Item 54 as Transferred). Leave Items 60 through 64 blank.
- **If the infant transferred to another hospital and was transferred again to a third hospital (no readmission),** complete Items 1 through 60 (code Item 54 as Transferred, code Item 60 as Transferred) on the Admission/Discharge Form. Code Items 61 and 62 as Not Applicable and leave Items 63 and 64 blank.
- **If the infant transferred from your center to another hospital, was readmitted to your center and is still hospitalized at your center,** complete Items 1 through 60 (code Item 54 as Transferred, code Item 60 as Readmitted) on the Admission/Discharge Form. Leave Items 61 through 64 blank.
- **If the infant transfers again following initial transfer from and readmission to your center,** complete Items 1 through 62 on the Admission/Discharge form (code Item 54 as Transferred, code Item 60 as Readmitted, code Item 62 as Transferred). Leave Items 63 and 64 blank.
- Refer to the summary table on the following page.

**Procedures for Submitting Data for Infants Born In 2008 and Still Hospitalized
as of the June 1st Data Finalization Deadline**


	Item 54. Infant is still in your Center and has not been transferred	Item 54. Infant Transferred from your Center to another hospital and is still in "transferred to" hospital	Item 60. Infant Transferred to another hospital and was transferred to a third hospital (no readmission)	Item 60. Infant Transferred to another hospital, was readmitted to your hospital and Still In-House	Item 62. Infant transfers again following initial transfer from and readmission to your Center
2008 Item					
35. Respiratory Support at Discharge	Blank	Submit	Submit	Submit	Submit
49. Congenital Anomalies	Submit 1-52	Submit	Submit	Submit	Submit
53. Enteral Feeding at Discharge	Blank	Submit	Submit	Submit	Submit
54. Initial Disposition from your Center	Blank=SIH	Transferred	Transferred	Transferred	Transferred
55. Weight at Initial Disposition	Blank	Submit	Submit	Submit	Submit
56. Head Circumference at Initial Disposition (cm)	Blank	Submit	Submit	Submit	Submit
57. Initial Length of Stay	Blank	Submit	Submit	Submit	Submit
58. Reason for Transfer	Blank	Submit	Submit	Submit	Submit
59. Select the Hospital the infant was transferred to	Blank	Submit 1-56	Submit	Submit	Submit
60. Post-Transfer Disposition	Blank	Blank=SIH	Transferred (SIH)	Readmitted (SIH)	Readmitted
61. Weight at Disposition after Re-admission	Blank	Blank	N/A	Blank	Submit
62. Disposition at Re-admission	Blank	Blank	N/A	Blank=SIH	Transferred (SIH)
63. Ultimate Disposition	Blank	Blank	Blank=SIH	Blank	Blank=SIH
64. Total Length of Stay	Blank	Blank	Blank	Blank	Blank

3. By June 1, edit your data for completeness and accuracy.

- After submitting data for all eligible infants on April 1st, CPQCC centers will have until June 1st to verify data completeness and accuracy, and to submit any additional data or make corrections. **By June 1st, all data must be 100% error-free.**
- Use the "Edit Data" feature in www.cpqccdata.org to review the Record Status of each ID submitted.
- Use the "Error Report" feature in www.cpqccdata.org to request a copy of your Center's real-time Error & Warning Report. Review this report for accuracy.
- Use the "Send Reports/Data via Email" feature in www.cpqccdata.org to request a copy of your Center's Database in order to review the descriptions entered such as for Birth Defects and Other Surgeries.
- Use the "Other Reports" feature in www.cpqccdata.org to review the Data Consistency Report which is scheduled for release on April 8.
- For data to be considered finalized, all records of infants born in 2008 must either have a record status of **Complete or SIH**, while all records of SIH infants born in 2007 must be **Complete**.
- **Finalized data for all infants born in 2008.** The CPQCC Data Finalization Form will be sent to CPQCC when the tasks below are completed. Centers that do not complete these requirements by June 1, 2008, may not be included in the reports.
 - Records for all eligible inborn and outborn infants who were born in 2008 have been submitted.
 - All records of eligible infants born in 2008 with known dispositions (i.e., the infant has been discharged home, has died or is still hospitalized as of his/her first birthday) have status=**Complete**. The records must be completed if the final disposition is known.
 - All errors on records of eligible infants born in 2008 or previous years have been corrected (**no records with status=Errors or Errors + Pending Items**).
 - All incomplete records of eligible infants born in 2008 have been received (**no records with status=Pending**).
 - At least Items 1 through 34, and items 36 through 52 on the Admission/Discharge Form have been submitted for eligible infants who were born in 2008 and who are still hospitalized without having gone home or reached his/her first birthday (Record Status=SIH).
 - All records of infants born in years prior to 2008 must be complete, correct and have a final disposition status.

4. By April 1, submit the on-line CCS Supplemental Form.

- Every year CPQCC produces reports on each Center's NICU activity, and submits this report to CCS on behalf of the entire CPQCC membership. The report is generated by combining the finalized 2008 CPQCC Network Database with finalized data submitted in the 2008 CCS Supplemental Form.
- **After submitting the 2008 CCS Supplemental Form, CPQCC centers will have until April 1st to verify the Draft CCS Report's completeness and accuracy.**
- The 2008 CCS Report is ready to be compiled. **After completing the on-line CCS Supplemental Form, members must send a request to support@cpqcc.org in order for the Data Center to compile and activate the on-line CCS Report.**
- Before you enter data in the CCS Supplemental Form, please finalize your 2008 data. Make sure that your 2008 data is complete and 100% error-free. This is very important since your 2008 CPQCC Data propagates the real-time comparison of the CCS Supplemental Form data to the submissions to the CPQCC Network Database (which appears green font throughout the form), as well as, Tables E, F, and G.
- Members are strongly encouraged to use the real-time data comparison feature as a data validation tool and to verify the number of eligible infants into the CPQCC Network Database.
- To access the 2008 CCS Supplemental form, follow these instructions:
 - Log-on to www.cpqccdata.org
 - Click on **"CCS Materials"** on the left side navigation page
 - Click on **"Click here to load the 2008 CCS Supplemental Form for your Center"**
 - Click on **"Click here for help with this form."** at the top of the page for instructions.
 - To save your data at any point of entry, simply press the **Submit Form button** at the end of the form. You can then come back and Edit the form.

A rectangular button with a thin border and a light yellow background, containing the text "Submit Form" in a dark font.

- Members can download the 2008 CCS Supplemental Form MSEXcel Spreadsheet from http://www.cpqcc.org/data/ccs_downloads to get started in abstracting this data throughout the data collection year.
- If there are discrepancies between the CPQCC Network Database submissions and the CCS Supplemental Form, changes should be made immediately in order to meet the June 1st deadline.

5. By April 1, confirm the Draft CCS Report.

12. By June 1, confirm the Final CCS Report.

- Every year CPQCC produces reports on each Center's NICU activity, then submits this report to CCS on behalf of the entire CPQCC membership. The report is generated by combining the finalized 2008 CPQCC Network Database with finalized data submitted in the CCS Supplemental Form. **Each Center is required to confirm the accuracy and completeness of their Draft CCS Report BEFORE the CPQCC Data Center forwards the report to CCS.**
- To access the Draft CCS Report, follow these instructions:
 - After completing the CCS Supplemental Form, send a request to support@cpqcc.org in order for the Data Center to compile and activate the on-line CCS Report. At this point, the CPQCC Data Center will provide you instructions on how to access the CCS Report Review Instructions.
 - Once you receive a confirmation that the report is active, log-on to www.cpqccdata.org.
 - Click on **"CCS Materials"** on the left side navigation page.
 - Click on **"Click here to load the 2008 CCS Report for your Center"**
 - To confirm the report, Members must click the Confirm Report button in **Section N. Report Confirmation**. This action records the date and time when you confirmed your report for accuracy and completeness authorizing the CPQCC Data Center to forward your report to CCS.
- **If the Draft CCS Report requires corrections, update the on-line CCS Supplemental Form and/or the CPQCC Network data, then send a request to support@cpqcc.org to re-run your CCS Report.**
- **CCS Report Re-run Requests.** The CCS Report is designed as a static report. On June 1st, the system will be locked and the report will be finalized and delivered to CCS on behalf of the CPQCC Membership. **Each Center MUST critically review the report for accuracy and completeness by June 1st.** If you detect an error or a discrepancy in the report between April 2nd and May 31st, please follow these instructions:
 - Send an email to support@cpqcc.org detailing the issue.
 - You will be advised to review your Center's dataset for the specific variables in question.
 - Each Center has the ability to edit data for all IDs submitted by the June 1st deadline in order to ensure the completeness and accuracy of your Center's data.
 - After you have made corrections to either your Center's data in the CPQCC Network Database and/or the CCS Supplemental Form, send an email to support@cpqcc.org to request a re-run of your CCS Report.
 - You will be required to reconfirm your report.

6. By April 1, submit the ID Verification Form -- Verify IDs of submitted records.

- Use the Error Report feature in www.cpqccdata.org to generate your Center's 2008 ID Verification Form. Data Contacts are required to sign-off verifying that all IDs of eligible infants born in 2008 have been included and that they understand the data deliverables and the 2008 Data Finalization deadlines. Please fax this form to the Data Center at 510-620-3144.
- To access the ID Verification Form, follow these instructions:
 - Click on **“Other Reports”** on the left side navigation page
 - Select Year: **2008**
 - Select Type: **Confirm IDs**
 - Click **“Generate Report”**
 - Print out this page
- Review the “IDs Submitted to CPQCC” for completeness and accuracy. If there are discrepancies, changes should be made immediately in order to meet the April 1st deadline. If there are significant changes to the IDs submitted, you may be required to re-run your ID Verification Form and re-submit the form.



January 23, 2009
[Contact Support](#)

[Database Management](#)
[Home](#)

[Add New Data](#)

[Edit Data:](#)
[2005 2006 2007](#)
[2008 2009](#)

[View Quarterly](#)
[Reports](#)

[Other Reports](#)

[Send Reports/Data](#)
[Via E-Mail](#)

[CCS Materials](#)

[Calculator Tool](#)

[LOGOUT](#)

NOTE: The error and status reports are obtained in real-time which means that they will take a moment to load.

2008 ID Verification Form: Summary of IDS Submitted to CPQCC

Center: 0000

Demonstration Center

Note that the ID or Network Patient Identification Number should be sequential starting from the Start ID number. The Start ID number is the lowest ID number that has been submitted by your center.

Current Start ID: 125
Current End ID: 99998

The following IDs were skipped.

126-128, 130-202, 204, 206-221, 223-706, 708-1000, 1002-1004, 1009-1014, 1018, 1019, 1021-9499, 9501-88999, 89003-99997

I intend to submit these additional IDs:

Additional IDs if applicable

I have reviewed the above list of ID numbers for birth year 2008 and I verify that all eligible infants have been included. _____ INITIAL

I understand that I must assign an ID for all eligible infants by entering the required minimum variables no later than April 1, 2009 in order to be included in the Annual Reports. _____ INITIAL

I understand that I must submit completed and 100% error-free data for all eligible infants no later than June 1, 2009 in order to be included in the Annual Reports. _____ INITIAL

Sign

Printed Name

Date

Please print and fax this page to 510-620-3144.

[Click here for more detailed Printing Instructions](#)

Last Updated: 2009-01-23 at 14:43 .



This request took 0.68 seconds of real time (v9.1.3-3 build 1471).

7. By April 1, submit the Eligibility Verification Plan.

- VON requires that each Center confirm their Eligibility Verification Plan for 2009. The Eligibility Verification Plan is a tool to help centers identify all eligible infants, which is necessary for assuring that data submitted are complete.
- Download a copy of this form from the Data Contacts Only page at http://www.cpqcc.org/data/data_contacts_only.

8. By April 1, submit the CPQCC/VON Contact Report.

- A confirmation receipt of the 2008 Data Finalization Guidelines released on February 3rd is required from each Center's CPQCC Data Contact in order to receive a copy of the Center-specific CPQCC/VON Contact Report and the VON Membership Survey.
- With the confirmation receipt, the Data Center will provide instructions on how to access the Center-specific reports:
 - Follow the link to the "**Data Contacts Only**" page http://www.cpqcc.org/data/data_contacts_only
 - Click on the "**Contact Report and Membership Survey**" sub-page http://www.cpqcc.org/data/data_contacts_only/2008_contact_report_membership_survey
 - Click on the zipped file link and follow the instructions.
 - Find your Center's name in the list and then click the PDF file to view and save your report.
 - Use your **cpqccdata password** to open the link.
- CPQCC and VON require each Center to indicate who will serve as the Team Leader, as well as, confirm the contact information for each Center's designated Report Contact, Data Contact, Administrative Contact, Neonatologist, and Quality Improvement Contact. This year's form has been revised to add contact information for your Center's Clinical Nurse Specialist, Transport Contact, and CEO.

9. By June 1, submit the VON Membership Survey.

- A confirmation receipt of the 2008 Data Finalization Guidelines released on February 3rd is required from each Center's CPQCC Data Contact in order to receive a copy of the Center-specific CPQCC/VON Contact Report and the VON Membership Survey.
- With the confirmation receipt, the Data Center will provide instructions on how to access the Center-specific reports:
 - Follow the link to the "**Data Contacts Only**" page http://www.cpqcc.org/data/data_contacts_only
 - Click on the "**Contact Report and Membership Survey**" sub-page http://www.cpqcc.org/data/data_contacts_only/2008_contact_report_membership_survey
 - Click on the zipped file link and follow the instructions.

- Find your Center's name in the list and then click the PDF file to view and save your report.
- Use your **cpqccdata password** to open the link.
- The 2008 Membership Survey collects information on each CPQCC hospital's characteristics and capabilities. Summarized hospital data are tabulated in the Annual NICU Quality Management Report (QMR). Based on the characteristics of each center, the QMR also provides data comparing the infant outcomes and interventions at the center to centers with similar characteristics.

10. By June 1, Confirm the Data Consistency Report – Duplicates and Re-Encounters.

- In order to correctly associate records for the same baby at different Centers, we have generated a per baby database. As a result of this process, we have found a few records that were likely reported twice (Duplicates) or reported inconsistently (Drift/Re-encounters).
- **Duplicates/ Double-entry of the same record using different ID Number.** There are two possible situations:
 - 1) ***Duplicate record: Same data, different ID.*** (NOTE: The CPQCC Data Management System has an automatic ID verification system that prevents the entry of duplicate ID Numbers).
 - 2) ***Birth order of multiples not correctly identified*** (i.e., both twins are indicated as being twin B even though there are clearly differences in birth weight, gestational age, and/or head circumference such that we can infer that this is not a duplicate record, but two different infants in a set of multiples).
- **Drift/ Re-encounters of the same baby at different centers.** Result of incorrect data coding of initial length of stay, initial disposition, disposition after transfer, total length of stay, and/or disposition after re-admission. In these cases, we find inconsistent situations because a baby is transferred, and the information in the hospital it was transferred to does not match the information from the sending hospital (usually the birth hospital). For example, a baby in the sending hospital isn't marked as transferred out.
- To access these reports, follow these instructions:
 - Log-on to www.cpqccdata.org
 - Click on **“Other Reports”** on the left side navigation page
 - Select Year: **2008**
 - Select Type: **Data Consistency Report – Duplicates and Re-encounters**
 - Click **“Generate Report”**
 - Provide **“Your Comment”** for each Potential Inconsistency.
 - If the record is a duplicate, you must indicate the ID that you are planning to delete. Then you are required open the actual record and mark it "Delete."
 - If the record is a re-encounter, you must contact the Data Contact from the Transfer Hospital, and confirm the accuracy of your data.

- Submit **“Data Consistency Comments”**
- Then, click on **"Edit Data"** on the left side navigation page and make the necessary corrections to the actual record.
 - If the record is a duplicate, then you are required to open the actual record and mark it "Delete."
 - If the record is a re-encounter, you must edit the required items and make corrections. Submit the record and verify that the record is 100% error-free.
- Below is the list of variables used and the associated weighted value (most important, adds considerable value, and adds value) in calculating data consistency. Data Contacts are strongly encouraged to reduce the number of confirmed unknown for these variables, as well as, to collaborate with other Data Contacts to ensure the accuracy of these variables when transferring records.

ITEM	VARIABLE DESCRIPTION	WEIGHTED VALUE
1	Birth Weight (in Grams)	Most Important
2	Head Circumference at Birth (in cm to nearest 10th of a cm)	Adds Considerable Value
3a	Best Estimate of Gestational Age -- Weeks	Most Important
3b	Best Estimate of Gestational Age -- Days	Most Important
4	Birth Date	Most Important
5	Sex of infant	Most Important
6	Delivery Room Death	Most Important
7a	Location of Birth	Most Important
7b	Day of Admission (for gt 1500 Grams or Outborn Infants)	Most Important
7c	Hospital of Birth (for Outborn Infants)	Most Important
9	Mother's Age at Infant's Birth (Age Last Birthday)	Most Important
10a	Is Mother of Hispanic Origin?	Adds Considerable Value
10b	Maternal Race	Adds Considerable Value
11	Prenatal Care	Adds Value
13	Antenatal Steroids Received Prior to Delivery	Adds Value
14	Spontaneous Labor. Did the Mother Go into Labor on Her Own?	Adds Value
15a	Multiple Births or Gestation	Most Important
15c	Birth Order for Multiple Births	Most Important
16	Mode of Delivery	Most Important
19	Apgar Score - 1 minute	Adds Considerable Value
19	Apgar Score - 5 minute	Adds Considerable Value
19	Apgar Score - 10 minute	Adds Considerable Value

37a	Sepsis -- Late - Bacterial Pathogen	Adds Value
54	Initial Disposition From Your Hospital	Adds Value
57	Initial Length of Stay	Adds Value
60	Post-Transfer Disposition	Adds Value
62	Disposition after Re-Admission	Adds Value
64	Total Length of Stay	Adds Value

11. By June 1, review the Confirmed Unknown Report.

- To better understand areas of your data that are frequently reported as Unknown by your Center, we have added an Unknown Data Report. Note that this report is updated at 1 AM daily in other words, changes that you make to your data as a result of the report will not be reflected until after 1AM the next day. For this report, we list all variables reported as Confirmed Unknown for at least 20% of the records.
- Log-on to www.cpqccdata.org, then follow these instructions:
 - Click on **“Other Reports”** on the left side navigation page
 - Select Year: **2008**
 - Select Type: **Confirmed Unknown Report**
 - Click **“Generate Report”**

12. By June 1, confirm the Final CCS Report.

- Every year CPQCC produces reports on each Center’s NICU activity, then submits this report to CCS on behalf of the entire CPQCC membership. The report is generated by combining the finalized 2008 CPQCC Network Database with finalized data submitted in the CCS Supplemental Form. Each Center is required to confirm the accuracy and completeness of their Draft CCS Report BEFORE the CPQCC Data Center forwards the report to CCS.
- To access the Draft CCS Report, follow these instructions:
 - After completing the CCS Supplemental Form, send a request to support@cpqcc.org in order for the Data Center to compile and activate the on-line CCS Report. At this point, the Data Center will send you a link for the CCS Report Review Instructions which will be posted in http://www.cpqcc.org/data/ccs_downloads.
 - Once receive a confirmation that the report is active, log-on to www.cpqccdata.org.
 - Click on **“CCS Materials”** on the left side navigation page.
 - Click on **“Click here to load the 2008 CCS Report for your Center”**
 - To confirm the report, Members must click the Confirm Report button in **Section N. Report Confirmation**. This action records the date and time when you confirmed your report for accuracy and completeness authorizing the CPQCC Data Center to forward your report to CCS.

- If the Draft CCS Report requires corrections, update the on-line CCS Supplemental Form and/or the CPQCC Network data, then send a request to support@cpqcc.org to re-run your CCS Report.
- **CCS Report Re-run Requests.** The CCS Report is designed as a static report. On June 1st, the system will be locked and the report will be finalized and delivered to CCS on behalf of the CPQCC Membership. **Each Center MUST critically review the report for accuracy and completeness by June 1st.** If you detect an error or a discrepancy in the report between April 2nd and May 31st, please follow these instructions:
 - Send an email to support@cpqcc.org detailing the issue.
 - You will be advised to review your Center's dataset for the specific variables in question.
 - Each Center has the ability to edit data for all IDs submitted by the June 1st deadline in order to ensure the completeness and accuracy of your Center's data.
 - After you have made corrections to either your Center's data in the CPQCC Network Database and/or the CCS Supplemental Form, send an email to support@cpqcc.org to request a re-run of your CCS Report.
 - You will be required to reconfirm your report.

13. By June 7, confirm the electronic receipt of your Center's 2008 Data Finalization Status Report.

- Each Data Contact is requested to send a confirmation receipt to support@cpqcc.org to acknowledge the accuracy of the Center's Data Finalization Status Report.
- With the confirmation receipt, the Data Center will provide instructions on how to access the Center-specific reports:
 - Follow the link to the "**Data Contacts Only**" page
http://www.cpqcc.org/data/data_contacts_only
 - Click on the "**2008 Data Finalization Reports**" sub-page
http://www.cpqcc.org/data/data_contacts_only/2008_data_finalization_reports
 - Click on the zipped file link and follow the instructions.
 - Find your Center's name in the list and then click the PDF file to view and save your report.
 - Use your **cpqccdata password** to open the link.
- The CPQCC Data Center is in the process of developing an end of the year report that incorporates the Data Finalization Status Report.