

Please refer to the instructions below on how to obtain the Live Births and Inborn Admissions for the CCS Supplemental Form from the resources listed below. This will assist in fulfilling task# 6 requirement in your Close-Out Checklist.

1. **Your Center’s internal Delivery Log Sheet or EHR abstract**
2. **The Optional NICU Admits Database (NAD)**

The NAD based values can be accessed by clicking on the “Show Values based on NICU Admits DB” button at the bottom right of the CCS Supplemental Form, shown in the screenshot below.



*Note that you must maintain the Optional NICU Admits Database to benefit from this option.

3. CCS Supplemental Form

Clicking on the **Populate Births** button at the bottom of the CCS form will transfer the vital statistics based birth counts obtained from the MDC by birth weight/gestational age into the corresponding boxes of Sections A and D of the CCS form. Note that this transfer is reversible, i.e., you can restore your previous entries.

Use of the **Populate Births** button is optional. If it is known that your hospital or Co-located hospital’s vital statistics data has errors, use another source that is more accurate.

Section A								
A. Hospital Births and Deaths of Infants Born in 2020 by Birth Weight								
Infants Born Between 1/1/2020 and 12/31/2020	< 401 grams	401-500 grams	501-750 grams	751-1,000 grams	1,001-1500 grams	1,501-2500 grams	> 2500 grams	Total
Total Live Births by Birth Weight in your center from 1/1/2020 to 12/31/2020 Should be ... compared to your NICU Data submissions Number of births based on your hospital's vital statistics birth data. Latest birth date reported for this birth year is 08/27/2020. Note that for CMQCC active track NICUs, the number of births shown is <u>not</u> updated per corrections you have provided. You will have to logon to CMQCC to obtain corrected counts.	0	0	0	0	0	0	0	0

- **Important:** If your center is an active track MDC participant, be aware that the vital statistics based counts transferred to the form do not reflect any corrections you might have entered on the MDC website. Active track centers must follow the process outlined in section 4 below for the most accurate births data.
- If your **NICU is a satellite NICU (co-)located at a hospital with delivery services** and if live births are found for the co-located hospital, you can use the Populate Births button to populate the Total Live Births rows in Sections A and D.
- We recommend that you check the vital statistics based births counts around the 15th of each month during the close-out period as some births are updated or reported late to vital statistics. This ensures that the births reported are the most accurate possible.

- Once the **Populate Births** button is clicked, the button's label changes to **Restore Births Entries**. If you click the button **Restore Births Entries**, those entries will be restored that were in the input boxes just before you clicked on **Populate Births**.

4. CMQCC Maternal Data Center (MDC)

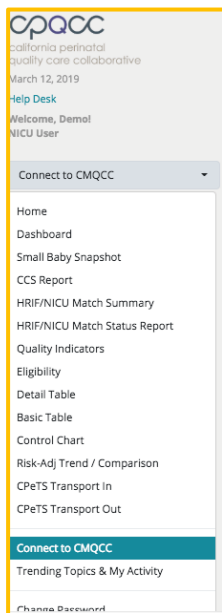
Option A: Direct login to the CMQCC Maternal Data Center

Direct login requires that you have your own CMQCC MDC Account; i.e. you need to be invited to access the MDC by a hospital colleague with an MDC Administrator role. If you need to be able to drill down to see the list of patients in each CCS category in the MDC, ask your MDC administrator to invite you with an MDC User Role of “Read Only: Aggregate and Patient-Level Data” or higher.

To identify the MDC Administrators for your hospital, contact datacenter@cmqcc.org
To log in directly (i.e. you already have an MDC Account), go to

<https://datacenter.cmqcc.org>

Option B: Login to www.cpqccreport.org, and click on the option "Connect to CMQCC" in the sidebar. In the result window, click on [click here](#) to connect to the CMQCC MDC. Note that logons to the MDC from the NICU Reports website are classified as "Guest" sessions. "Guest" sessions do not allow a drill-down to individual patient records. If you need drill-down information, you must use Option A.



NOTE: To benefit from this option, the user must be authorized to access the NICU Reports website. If a the user is not authorized to access the NICU Reports website, this option will not be available.

- Once logged on to the MDC website, follow the steps below to find the vital statistics birth counts by birth weight and by gestational age:

Home » Demo Hospital

Demo Hospital Data Entry Status

Measures Period: Nov 2018 - Jan 2019

Favorite Measures

See how to add "Favorites" to your hospital's home page [here](#)

Episiotomy Rate 8.7%

Hospital Clinical Measures

Early Elective Delivery (PC-01) 0.0%

Cesarean Birth: NTSV - Nullip Term Singleton Vertex (PC-02: Current) 25.0%

Cesareans after Labor Induction: Nullip 66.7%

Unexpected Newborn Complications: Severe 0.0

Severe Maternal Morbidity (SMM) 5.9%

View all 79 by name, reporting org or topic

[Compare Two Measures](#)

Hospital Data Quality Measures

Missing Birth Records (formerly Unlinked Mothers) 0.0%

Missing Mother Records (formerly Unlinked Babies) 0.0%

Data Submission Trends
Correction Reports

View **all 21** Hospital Data Quality Measures

Live Births

Jan 2019 Live Births 15 ▲

YTD Live Births 15 ▲

Birth Equity

Cesarean Birth: NTSV - Nullip Term Singleton Vertex (PC-02: Current)

Severe Maternal Morbidity (SMM)

Race-Ethnicity

[More Measures](#)

Learn more about the [CMQCC Birth Equity Collaborative](#)

Birth Equity PDF

Patient Safety Watch

AIM Hemorrhage Patient Safety

Preeclampsia Patient Safety

Bundles

Bundle: WHO Ten Steps to Successful Breastfeeding 60.0%

[Bundle Management](#)

Home » Demo Hospital » Hospital Clinical Measures » By Reporting Org

Hospital Clinical Measures: By Reporting Org

By Name **By Reporting Org** By Topic Show: Last 12 Months Last 3 Months Last Month

- Cal Hospital Compare Public Reports
- Joint Commission
- The Leapfrog Group
- Blue Distinction
- CMS Inpatient Quality Reporting Program
- Regional Perinatal Programs of California (RPPC)
- California Children's Services (CCS)**

CMQCC supports two reports required by California Children's Services (CCS)

- CCS All Deliveries Report**
The total count of the hospital live births-- by gestational age and birth weight
- CCHD-Pulse Oximetry Screening Results
Generating the CCHD-Pulse Oximetry data for the CCS report requires supplemental data submissions to the Maternal Data Center. [Learn more here](#)

- Download the data needed to propagate the CCS Supplemental Form for births by BWGT and by GA.
- Manually enter the numbers into the **live births sections** of the CCS Form (A and D).
- To see the list of cases for a category, click the green number for that category.

Demo Hospital: CCS Report (2019)

These counts are derived from Birth Certificate data that is submitted by your hospital to Vital Records. These numbers will not match your CPQCC numbers; they include all live births, while CPQCC excludes GA < 22 weeks and BW < 400 grams.

Birth Weight
Derived from Birth Certificate

Category	Count
Missing	0
Less than or equal to 400gms	0
401-500gms	0
501-750gms	0
751-1000gms	0
1001-1500gms	1
1501-2500gms	0
Greater than 2500gms	14

[Download CSV \(Excel\)](#)

Gestational Age
Derived from Birth Certificate's OB Estimate of Gestational Age (weeks only)

Category	Count
Missing	0
Less than or equal to 21+6	0
22+0-31+6	1
32+0-33+6	0
34+0-36+6	1
37+0-38+6	7
39+0-41+6	6
42 weeks or greater	0

[Download CSV \(Excel\)](#)

5. The Automated Vital Statistics System (AVSS) has switched to a new registration system called EBRS.

Please consult your hospital's birth clerk for more detailed information, and how to obtain births counts by birth weight and gestational age through the new system.