CCS LAINA Q&A
For Lower Acuity Inborn NICU Admits

LAINA – Data Entry

When is this data required to be collected?
Starting January 1, 2022.

How is LAINA defined?
Lower Acuity Inborn NICU Admissions (CPQCC ineligible infants).

What hospitals are required to submit this data?
Any CCS hospital with inborn NICU admissions.
Note: Freestanding children’s hospitals are not required to participate.

What are my options in submitting this data?
1. CPQCC: Enter all NICU admissions (inborn and outborn) into the All NICU Admits Database via the NICU Data site.
   Or
2. Contact Dr. Schulman joseph.schulman@dhcs.ca.gov and follow his guidance on how to collect and report the data.

Can I enter only inborn NICU admissions?
If you choose to enter your data in the All NICU Admits Database, you must enter all NICU admissions (inborn and outborn).

If you choose not to use the All NICU Admits Database, please contact Dr. Schulman joseph.schulman@dhcs.ca.gov for an alternative method.

Am I required to enter admission reasons in the All NICU Admits Database?
No. Admission reasons is optional; problems during the NICU stay are required. If you enter an admission reason, you can use the teal links to pre-populate the problems during NICU stay and make any needed edits.

Do I need to enter a specific diagnosis per ICD-10?
No. Enter one of the 15 listed diagnostic categories which represent the major problems encountered in our NICU admissions. Each category may contain several different specific diagnoses, but these do not have to be entered.

What are the advantages of using the All NICU Admits Database?
Entering your NICU admissions into the All NICU Admits database will allow you to:

- Pre-populate the CCS Supplemental form (for all sections pertaining to NICU admissions)
- Review real-time reports, the All NICU Admits Focusboards for all NICU admits
- In the future, “Problems during NICU Stay” will be captured from administrative data based on ICD-10 codes.

Do I have access to the All NICU Admits Database?
Access to the All NICU Admits Database is included in access to the NICU Data site. If you do not have access to NICU Data, please submit a Help Desk ticket at www.cpqcchelp.org. How do I access the optional All NICU Admits Database?
On the NICU Data site, look for the Optional NICU Admits DB link in the left hand menu bar (as seen on the left).

What fields am I required to complete?
You are required to complete all fields, except for those that are marked “[optional]”.

Should I include infants being observed but not officially admitted to the NICU in the LAINA data collection?
Only infants who have been officially admitted to the NICU, i.e billed/charged for the NICU stay, would qualify for the LAINA data collection.

If an infant was observed in the NICU but not billed/charged for the NICU stay, that infant would NOT qualify for the LAINA data collection.

Where can I find information about how to submit data in the All NICU Admits Database?
The All NICU Admits Database manual can be found on top of the All NICU Admits Database screen, which can also be accessed at https://www.cpqc.org/sites/default/files/optionalNICUadmitsDB20210305.pdf.
● The All NICU Admissions webpage (https://www.cpqcc.org/nicu/nicu-data/all-nicu-admits-database)

**How do I enter data into the All NICU Admits Database?**

Records can be added or modified in 3 ways:

- Using the on-line form to add, edit or delete NAD records.
- Uploading a CSV file by clicking on the Upload button.
- Adding existing CPQCC NICU A/D Records by clicking on the CPQCC A/D Refresh button.

Each of these options are explained in detail in the All NICU Admits Instruction Manual.

**LAINA – Reports**

**Where will the LAINA data be reported?**

The LAINA data will be reported in the CCS report and the All NICU Admits Focusboards.

**How do I access the All NICU Admits Focusboards?**

CPQCC members that have access to NICU Reports also have access to the All NICU Admits Focusboards.

If you do not have access to the NICU Reports, or are unsure if you do, please submit a Help Desk ticket at www.cpqcchelp.org.

**How will the LAINA data be reported in the CCS report?**
% of Live Births in Your Center considered Laina by BW and GA
% of Inborn Admissions to Your NICU considered Laina by BW and GA
% of Total Admissions to Your NICU considered Laina by BW (includes outborns)

Section A. Hospital Births and NICU Admissions by Birth Weight

<table>
<thead>
<tr>
<th></th>
<th>&lt; 401 grams</th>
<th>401-500 grams</th>
<th>501-750 grams</th>
<th>751-1000 grams</th>
<th>1001-1500 grams</th>
<th>1501-2000 grams</th>
<th>&gt; 2000 grams</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Live Births in Your Center</td>
<td>0</td>
<td>2</td>
<td>5</td>
<td>7</td>
<td>30</td>
<td>158</td>
<td>1,285</td>
<td>1,487</td>
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<tr>
<td>Total Admissions to Your NICU</td>
<td>0</td>
<td>3</td>
<td>12</td>
<td>14</td>
<td>43</td>
<td>63</td>
<td>231</td>
<td>386</td>
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<tr>
<td>Inborn Admissions to Your NICU</td>
<td>0</td>
<td>2</td>
<td>6</td>
<td>7</td>
<td>80</td>
<td>35</td>
<td>38</td>
<td>117</td>
</tr>
<tr>
<td>Lower Acuity Inborn NICU Admissions (LAINA)</td>
<td>NA</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>22.2</td>
<td>3.0</td>
<td>7.9</td>
</tr>
<tr>
<td>% of Live Births in Your Center Admitted to Your NICU</td>
<td>NA</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>22.2</td>
<td>3.0</td>
<td>7.9</td>
</tr>
<tr>
<td>% of Inborn Admissions to Your NICU considered LAINA</td>
<td>NA</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>22.2</td>
<td>3.0</td>
<td>7.9</td>
</tr>
<tr>
<td>% of Total Admissions to Your NICU considered LAINA</td>
<td>NA</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>22.2</td>
<td>3.0</td>
<td>7.9</td>
</tr>
<tr>
<td>Outborn Admissions to Your NICU</td>
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<td>1</td>
<td>7</td>
<td>7</td>
<td>13</td>
<td>48</td>
<td>193</td>
<td>269</td>
</tr>
<tr>
<td>Acute Outborn Admissions to Your NICU</td>
<td>0</td>
<td>1</td>
<td>7</td>
<td>7</td>
<td>13</td>
<td>48</td>
<td>193</td>
<td>269</td>
</tr>
</tbody>
</table>

*sections in gold will be automatically added in the CCS report to satisfy the CCS mandate – no additional data entry required

Section D. Hospital Births and Inborn NICU Admissions by GA

<table>
<thead>
<tr>
<th></th>
<th>≤ 28 6/7 weeks</th>
<th>29 0/7 - 31 6/7 weeks</th>
<th>32 0/7 - 33 6/7 weeks</th>
<th>34 0/7 - 36 6/7 weeks</th>
<th>37 0/7 - 38 6/7 weeks</th>
<th>39 0/7 - 41 6/7 weeks</th>
<th>≥ 42 6/7 weeks</th>
<th>Unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Live Births in Your Center</td>
<td>0</td>
<td>63</td>
<td>46</td>
<td>100</td>
<td>577</td>
<td>647</td>
<td>0</td>
<td>0</td>
<td>1,487</td>
</tr>
<tr>
<td>Total Admissions to Your NICU</td>
<td>0</td>
<td>55</td>
<td>7</td>
<td>20</td>
<td>14</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>117</td>
</tr>
<tr>
<td>Inborn Admissions to Your NICU</td>
<td>0</td>
<td>55</td>
<td>7</td>
<td>20</td>
<td>14</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>117</td>
</tr>
<tr>
<td>Lower Acuity Inborn NICU Admissions (LAINA)</td>
<td>NA</td>
<td>87.3</td>
<td>17.5</td>
<td>12.5</td>
<td>3.7</td>
<td>2.5</td>
<td>NA</td>
<td>NA</td>
<td>7.9</td>
</tr>
<tr>
<td>% of Live Births in Your Center Admitted to Your NICU</td>
<td>NA</td>
<td>87.3</td>
<td>17.5</td>
<td>12.5</td>
<td>3.7</td>
<td>2.5</td>
<td>NA</td>
<td>NA</td>
<td>7.9</td>
</tr>
<tr>
<td>% of Inborn Admissions to Your NICU considered LAINA</td>
<td>NA</td>
<td>87.3</td>
<td>17.5</td>
<td>12.5</td>
<td>3.7</td>
<td>2.5</td>
<td>NA</td>
<td>NA</td>
<td>7.9</td>
</tr>
</tbody>
</table>

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How will the LAINA data be reported in the All NICU Admits Focusboards?
The All NICU Admits Focusboards shows a number of different panels looking at different aspects of a NICU’s admissions.
For the first visit to the All NICU Admits Focusboard, the home page is loaded. Subsequent visits are started where the user left off.

The All NICU Admits Focusboard Home page shows the top 3 reasons for NICU admissions for Database participants only. The “Go” buttons or the drop-down menu in the upper right corner are used to select sections of the report. Clicking on the All NICU Admits Focusboard header in the top left corner always takes you back to the Home page.

You can click the “i” in the upper left corner of the page for more information about the All NICU Admits Focusboard.

NICU Admits Table

The NICU Admits table shows hospital births, NICU admissions, inborn NICU admissions and low acuity inborn NICU admissions by birth weight and gestational age that are derived from the CCS Form for closed-out years or the NICU Admits Database by year. You can change the table year using the drop-down in the header of the first column.

- The birth weight table resembles Section A of the CCS report.
- The gestational age table resembles Section D of the CCS report.
Inborn NICU Admit % over Time

The Inborn NICU Admit % over Time report features NICU admit trends by year. For each year, a boxplot shows the NICU's observed percentage with box statistics derived either from the CPQCC network or the set of NICUs that provided a similar level of NICU care. The comparison group can be modified using the right drop-down above the chart. The left drop-down above the chart allows the selection of different inborn admit metrics.

NOTE: This report is not available for freestanding children's hospitals.

Inborn NICU Admit % Funnel Charts

The funnel charts give an alternative way to review annual Inborn NICU Admit percentages in comparison to all CPQCC network NICUs or the set of NICUs providing a similar level of NICU care. Each point in a funnel chart represents one NICU. The point for the currently active NICU is highlighted, slightly larger than all the other points and labeled with the observed, unadjusted Inborn NICU Admit percent metric selected.

The funnel chart also features confidence limits that are constructed based on the selected comparison group at the 95% and 99.8% confidence level.

NOTE: This report is not available for freestanding children’s hospitals.
Admit Reasons / Problems during NICU Stay Table

The Admit Reasons table shows the number and percent of NICU Admits (or subgroup) for each of the 17 admit reasons (derived from the All NICU Admits Database) for your NICU and a comparison group. The comparison group either consists of all Network NICUs or of those NICUs that provide a similar level of care. By default, the table is sorted by the largest to smallest admit reasons for the selected group. Length of stay (LOS) statistics are shown.

Problems during the NICU stay will be added as another option for this table starting with birth year 2022.

Admit Reasons / Problems during NICU Stay Heatmaps

Heatmaps are used to display NICU admission counts and other metrics for each of 17 admission reasons by birth weight or gestational age. A heatmap is a visual tool that focuses the user’s attention on those combinations of admit reason and birth weight / gestational age that have the largest impact. In addition to specifying birth weight or gestational age as stratifiers, users may select the birth year, all NICU admissions or a subgroup based on inborn/outborn status and/or acuity, the metric shown in the heatmap (NICU admissions, NICU average length of stay, total NICU days, etc.), and either the network or the group of NICUs that provide a similar level of care as the selected NICU to be displayed in a comparison heatmap.
Problems during the NICU stay will be added as another heatmap option starting with birth year 2022.

**Daily Occupancy**

The daily occupancy charts summarize NICU admits either as a column or as a line chart. The line chart distinguishes admits, discharges, infants seen, end-of-day census (hidden by default), and a simple moving average based on the previous 30 days for the last two metrics. Legend entries are clickable turning a line on (visible) or off (invisible). The bar chart distinguishes admits discharges and all-day infants.

**NOTE:** When a NICU begins entering data into the All NICU Admits DB by birth year (rather than admit year), the first few months in the chart will show a steady increase until the birth years entered account for all NICU admits.