

Reports for California Children's Services

- CCS-Certified Hospitals must report overall perinatal stats by GA and BW
- MDC provides these data in CCS required format in Hospital Statistics Section

Measures Period: Q1 2015

See your Leapfrog Results in Leapfrog Survey Format

<p>Hospital Clinical Performance Measures</p> <hr/> <p style="text-align: right;">Elective Delivery (PC-01) 13.2%</p> <p style="text-align: right;">C-Section Rate: Low Risk-NTSV (PC-02) 32.0%</p> <p style="text-align: right;">Vaginal Birth After Cesarean (VBAC) Rate, 11.5%</p> <p style="text-align: right;">Uncomplicated (AHRQ IQI 22)</p> <p style="text-align: right;">C-Section Rate: Overall 35.0%</p> <p style="text-align: right;">C-Section Rate: Primary 22.6%</p> <p style="text-align: right;">Failed Induction 16.2%</p> <p style="text-align: center;">View all 32 Hospital Clinical Performance Measures</p> <p>Provider Performance Measures</p> <hr/> <p style="text-align: center;">Cesarean Births</p> <p style="text-align: center;">Elective Deliveries</p> <p style="text-align: center;">Vaginal Births</p> <p>Hospital Data Quality Measures</p> <hr/> <p style="text-align: right;">Missing / Inconsistent Delivery Method 0.8%</p> <p style="text-align: right;">Missing / Inconsistent V27 (Outcome of Delivery) 0.0%</p> <p style="text-align: center;">Data Submission Trends</p> <p style="text-align: center;">Correction Reports</p> <p style="text-align: center;">View all 15 Hospital Data Quality Measures</p>	<p>CPMS/PSF Hemorrhage Safety Initiatives</p> <hr/> <p style="text-align: right;">Massive transfusions (≥ 4 RBC units) per 1000 mothers 4</p> <p style="text-align: right;">Total RBC/FFP blood products transfused per 1000 mothers 34</p> <p style="text-align: right;">Severe Maternal Morbidity with Obstetric Hemorrhage 5.6%</p> <p style="text-align: right;">Hemorrhage Case Debriefs 13</p> <p style="text-align: right;">Hemorrhage Safety Bundle 44.4% *</p> <p style="text-align: center;">View all 7 CPMS/PSF Hemorrhage Safety Initiatives</p> <p>CPMS Preeclampsia Safety Initiatives</p> <hr/> <p style="text-align: right;">Severe Maternal Morbidity with Preeclampsia 0.0%</p> <p style="text-align: right;">Preeclampsia Timely Treatment 66.7%</p> <p style="text-align: right;">Preeclampsia Case Debriefs 12</p> <p style="text-align: right;">Preeclampsia Safety Bundle 0.0% *</p> <p>Hospital Statistics</p> <hr/> <p style="text-align: center;">Demographic Statistics</p> <p style="text-align: center;">Delivery Statistics</p> <p style="text-align: center;">Maternal Comorbidity Statistics</p> <p style="text-align: center;">Baby/Prematurity Statistics</p> <p style="text-align: center;">Utilization Statistics</p> <p style="text-align: center;">CCS Report</p>
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How to Access

Hospital is already MDC Active Track

- Most hospitals are *Active Track* in the MDC (see [MDC Participant List](#))
- Contact personnel at your hospital with MDC *Administrator* status (usually Director of MCH)
- Contact CMQCC (below) if you can't identify the MDC *Administrator*

Hospital is Not Active Track

- Contact CMQCC to request access with your name, role, supervisor name and e-mail, and hospital name (not CPQCC ID)
- CMQCC will invite you to access the MDC as a *View-Only Hospital**
- Registration takes less than 1 minute--NO PAPERWORK
- ***Note: *View-Only* is being phased in March 2017**

CMQCC Contact

Datacenter@cmqcc.org

Where to Find the CCS Reports

- 2016 Data will be available **AFTER** February 20, 2017
- Once registered (or have logged into the MDC at datacenter@cmqcc.org)
 - On the Home Page, find the **Hospital Statistics** section in the lower right corner
 - Click the last link: “CCS Report”

Measures Period: Q1 2015

Hospital Clinical Performance Measures

Elective Delivery (PC-01)	13.2%
C-Section Rate: Low Risk-NTSV (PC-02)	32.0%
Vaginal Birth After Cesarean (VBAC) Rate, Uncomplicated (AHRQ IQI 22)	11.5%
C-Section Rate: Overall	35.0%
C-Section Rate: Primary	22.6%
Failed Induction	16.2%

[View all 32 Hospital Clinical Performance Measures](#)

Provider Performance Measures

Cesarean Births	.....
Elective Deliveries	.....
Vaginal Births	.....

Hospital Data Quality Measures

Missing / Inconsistent Delivery Method	0.8%
Missing / Inconsistent V27 (Outcome of Delivery)	0.0%
Data Submission Trends	.....
Correction Reports	.....

[View all 15 Hospital Data Quality Measures](#)

[See your Leapfrog Results in Leapfrog Survey Format](#)

CPMS/PSF Hemorrhage Safety Initiatives

Massive transfusions (≥ 4 RBC units) per 1000 mothers	4
Total RBC/FFP blood products transfused per 1000 mothers	34
Severe Maternal Morbidity with Obstetric Hemorrhage	5.6%
Hemorrhage Case Debriefs	13
Hemorrhage Safety Bundle	44.4% *

[View all 7 CPMS/PSF Hemorrhage Safety Initiatives](#)

CPMS Preeclampsia Safety Initiatives

Severe Maternal Morbidity with Preeclampsia	0.0%
Preeclampsia Timely Treatment	66.7%
Preeclampsia Case Debriefs	12
Preeclampsia Safety Bundle	0.0% *

Hospital Statistics

Demographic Statistics	.....
Delivery Statistics	.....
Maternal Comorbidity Statistics	.....
Baby/Prematurity Statistics	.....
Utilization Statistics	.....
CCS Report	.....

CCS Reports

- Drill down to see patient level lists for preterm, postterm and low BW records
- If your hospital is Active Track, you can click into any number in green to see list of cases

Birth Weight
 Derived from Birth Certificate

Category	Count
Missing	0
Less than or equal to 400gms	0
401-500gms	1
501-750gms	0
751-1000gms	4
1001-1500gms	18
1501-2500gms	118
Greater than 2500gms	1733

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

Gestational Age
 Derived from Birth Certificate's OB Estimate of Gestational Age

Category	Count
Missing	2
Less than or equal to 21+6	0
22+0-31+6	31
32+0-33+6	27
34+0-36+6	120
37+0-38+6	421
39+0-41+6	1231
42 weeks or greater	42

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