



### ILPQC BASIC REDCAP Data Training



#### **Call Overview**



- What is the ILPQC Data System (REDCap)?
- Accessing REDCap
- Overview of ILPQC BASIC Data Collection Strategies
- Live REDCap demo
- Data Collection Strategies Examples
  - Matt Derrick, MD, NorthShore University HealthSystem Evanston Hospital
  - Alex Lahart, MD, St. Louis Children's Hospital
- Data Collection Timelines (Baseline & Prospective Data)
- Questions from you

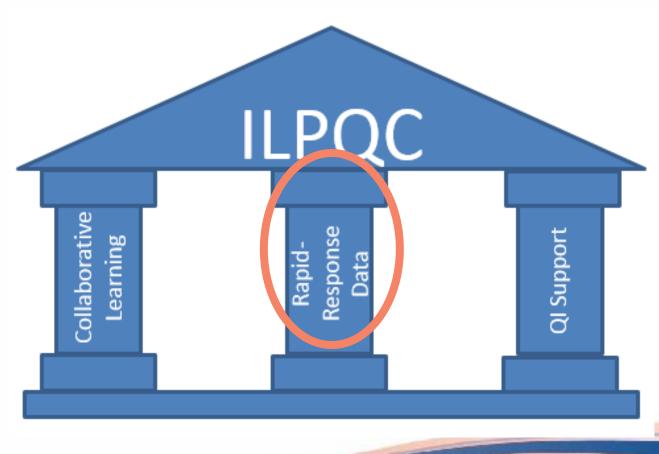


#### ILPQC DATA SYSTEM

3

#### ILPQC: Three Pillars Support Quality Improvement Success









- REDCap is the platform for data entry
- Currently hosted on a site called "healthlnk"
- Rapid-response data
  - A dashboard will be available in early 2021 for teams to quickly review real-time data
  - Upgraded format and tools for hospitals to better use their data

#### Data is yours!



- ILPQC manages the rapid-response data sytem (REDCap), but data collection and reporting is designed for your hospital team
  - Share success with others at your hospital
  - Review areas that you still need to work on and use data to compel others on your team to work for change
  - Compare your hospital progress over time with aggregate data of all ILPQC BASIC teams



#### **ACCESSING REDCAP**

No. of Concession, Name

#### REDCAP ACCESS





- REDCap access will be granted by those identified when you submitted your BASIC team roster
- If you have edits to those who need access, please email <u>dweiss@northshore.org</u>

### Key Steps to Access REDCap



Add <u>https://redcap.healthlnk.org</u>
 to your bookmarks bar on your
 computer

 Use your username & password to log in. Please email <u>redcap@healthlnk.org</u> or <u>info@ilpqc.org</u> if you have trouble logging in

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Also available on the ILPQC website

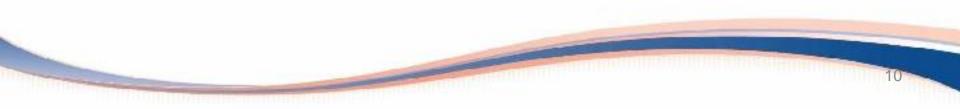
#### **REDCap Interface**



#### Overview

REDCap Log In Page https://redcap.healthlnk.org

REDCap	
Log In Please log in with your user name and password. If you are by Username: Password:	aving trouble logging in, please contact redcap admin.



### **REDCap Interface OverviewIL PQC**

REDCap Landing Page After Logging in

REDCap "My Projects" Landing Page

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	lew Project 🕜 Help & FAQ 🛛 🖽 Training Videos 🛛	Send-It 📮 Messenger						
Welcome to REDCap!	2							
REDCap is a secure web platform(or surveys, REDCap's streamline) or sec offers a vast array of tools that can b strategy.	uilding and managing online databases and solor rapidly creating and designing projects to bred to virtually any data collection	Build online surveys a - Create and design you software required. Aco						
	procedures for seamless data downloads to	East and flexible - Go						
Excel and common statistical packa project calendar, a scheduling mod features, such as branching logic, fi	My Projects 🕒 Organize 🖿 Collapse All	)		Filter	project	s by title	×	B
Learn more about REDCap by watc	Project Title		PID	Records	Fields	Instruments	Type	Status
would like to view other quick video its features, please see the Training	BASIC 2020 (3)							
NOTICE: If you are collecting data fo	BASIC Statewide QI Roster		100	62	73	1 survey	•	
review and approval of the project	BASIC Toolkit Feedback		119	2	32	1 survey	•	
If you require assistance or have an admin.	BASIC Monthly Newborn Data Form		122	0	59	1 form	•	
2010/01/2010/2 <sup>4</sup>	HNO SE & Neo (6)							
	+ Face-to-Face (4)							
	₱VB 2020 (5)							
	IPLARC & IPAC (6)							
	Annual Conference Surveys (8)							
	Hypertension (7)							
	Golden Hour (2)							
	• Birth Equity 2020 (1)							

#### Participating in multiple **ILPQC** Initiatives?



REDCap		roj-coordinator   My Profile   Log out
Listed below are the REDCap projects to which you currently have access. Click the project title to oper Development status and begin to build and design them. When you are ready to begin entering production status and to designate the project as officially collecting data. When you are finished colle may be set to <b>Inactive status</b> and the unit of the project is in <b>classic</b> or <b>longitudinal</b> and the unit listed is the project type, which designates if the project is in <b>classic</b> or <b>longitudinal</b> and the unit of the project is in <b>classic</b> . It is recommended that you access	real data in the projecting data or if you we net you are ready to I tion format.	Home W Projects     Request New Project     Training Resources     Help & FAQ     Send-It      Listed below are the REDCap projects to which you currently have access. Click the project title to open the project. Newly created projects begin in     Development status as you begin to build and design them. When you are ready to begin entering real data in the project, you may move it to     Production status at the project as officially collecting data. When you are finished collecting data or if you wish to stop collecting, the project     may be set to Inactive status at any time when you are ready to begin collecting data again. Also     Organize Projects
Access Dashboard at least once a month to review which users still have access to your projects.  My Projects Proiect Title	Records f	Project Folders are a way to organize the projects on your My Projects page by putting them into groups. You may create new folders below and then assign your projects to them on the right. A project can be assigned to multiple folders at the same time. To reorder your folders, you can drag and drop them in the left-hand table. Note: Only you can see your folders; they are for your own personal organization.
ILPQC Early Elective Delivery Initiative	Loading.	
ILPQC Birth Certificate Initiative	Loading.	STEP 1: Create Folders STEP 2: Assign Projects To Folders
ILPQC Golden Hour	Loading.	My Folders MNO Add
ILPQC Severe Hypertension Data Form	Loading.	Hide archived projects
ILPQC AIM Yearly Measures	Loading	No folders created j 1 Add one above.
ILPQC AIM Quarterly Measures	Loading	
ILPQC Severe HTN Implementation Checklist	Loading	
ILPQC Severe Maternal HTN Compliance Form	Loading.	
ILPQC MNO OB/Neo Monthly Mothers with OUD and Opioid-Exposed Newborns Data Form	Loading	N)
ILPQC Golden Hour Sustainability	Loading.	
ILPQC MNO OB Quarterly Structure Measures	Loading	
ILPQC IPLARC	Loading	
ILPQC MNO Neo Quarterly Structure Measure	Loading	
ILPQC MNO OB Monthly Sample of Documentation of OUD Screening	Loading	
ILPQC MNO OB Monthly Sample of Opioid Prescribing & ILPMP Lookup	Loading	

REDCap Software - Version 6.11.3 - @ 2018 Vanderbilt University



#### ILPQC BASIC DATA FORMS OVERVIEW

13

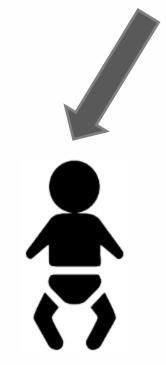
# What We'll Review for Each Control PQC Ulinois Perinatal Data Form

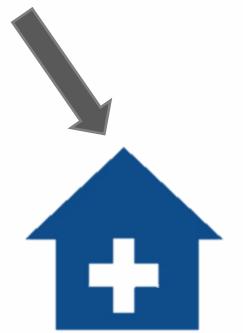
- <u>Who</u> to collect data on
- How to find the data
- <u>How</u> to submit data into REDCap
- When & how often to submit data

#### **BASIC Data Collection**



#### There are **2 parts** to monthly data collection





#### Patient-level Data

#### Hospital-level Data

#### **BASIC Data Collection**



#### Patient-level Data

ILPQC Bables Antibiotic Stewardship Improvement Collaborative (BASIC)

#### Monthly Newborn Data Form

#### Deta Collection Instructions:

- Please collect data on all newborns of all gestational ages receiving any intravenous (IV) antibiotics within the first 72 hours of life.
- Exclude newborns requiring surgical procedures or antibiotics for surgical prophylaxis within the first 72 hours of life.
- If a newborn that receives any intravenous (N) antibiotics within the first 72 hours of life is transferred, the receiving hospital will submit data on the newborn and should request from the transferring hospital any information pertinent to completion of the data form.
- Data will be submitted monthly for all newborns born that month who meet the following definition.
   Data should be submitted by the 15th of the month for the previous month.

REDCAP Identifiers		
SEDCen Record ID	6EDCap.Record ID: (automatically generated)	
Hospital ID Number	Hospital ID Number:	
A. Maternal Demographics		
1. Maternal Age	Maternal Age:	
2. Type of Delivery	Vaginal     Cesarean section without labor     Cesarean section with labor	
8. Infant Demographics		
3. Location of initial admission	Neonatal Intensive Care Unit (Level 3/4)     Immediate Care/Special Care Nursery (Level 2/2E)     Newborn Nursery (Level 1)	
4. Date of Birth (MM/DD/YYYY)	Date of Delivery//	
5. Time of Birth (Musua)	Time of Birth:	
6. Gestational age at birth (weeks, 0-44)	Gestational age, weeks:	
<ol> <li>Gestational age at birth (days, 0-6)</li> </ol>	Gestational age, days:	
8. Birth Weight (grams)	Birth weight:	
9. Insurance Status	o Medicaid/Public o Private	



ILPQC BASIC Monthly Structure Me	sures flata Collection For	
REDCAP Study Identifiers		
1. BEDCap Record ID	REDCap Record ID:	(automatically
	generated)	(account of any
2. Hospital ID Number	Hospital ID Number:	
	Baseline (Oct -Dec	July 2021
<ol><li>Please select the time period for this quarterly data:</li></ol>		
	2020)	August 2021
	□ January 2021	September 2021
	February 2021	Cotober 2021
	March 2021	November 2021
	April 2021	December 2021
	May 2021	
	June 2021	
Data Monitoring, Transparency, and Stewardship Infrastructure		
Total number of newborns admitted <35 weeks gestation this mo		mund multical blocednes
or antibiotics for surgical prophylaxis within the first 72 hours of it		
Total number of newborns admitted <35 weeks gestation this mo		
requiring surgical procedures or antibiotics for surgical prophylaxi		
Total number of newborns born at ≥35 0/7 weeks gestation this n		equiring surgical procedures
or antibiotics for surgical prophylaxis within the first 72 hours of it		
Total number of newborns born at ≥35 0/7 weeks gestation this n		Sing newborns requiring
surgical procedures or antibiotics for surgical prophylaxis within the		
Total number of newborns born at <35 weeks gestation this mont	h that had a brood culture dr	awn within 72 hours of
birth?		
Total number of newborns born at 285 0/7 weeks gestation this n	nonth that had a blood cultur	e drawn within 72 hours of
birth?		
<ol><li>Hospital has implemented a process for standardized</li></ol>	Haven't started	
education for healthcare team on neonatal antibiotic	Working on it	
stewardship best practices and equitable care	In place	
At the end of this month, cumulative proportion of	10%	
neonatal/pediatric providers educated on neonatal antibiotic	20%	
stewardship best practices and equitable care	30%	
	40%	
	S0%	
	60%	
	70%	
	80%	
	90%	
	100%	
<ol><li>At the end of this month, cumulative proportion of</li></ol>	10%	
neonatal/pediatric nurses educated on neonatal antibiotic	20%	
stewardship best practices and equitable care	30%	
	40%	
	50%	
	60%	
	70%	
	ao%	

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# 1. BASIC Monthly Newborn

17

#### **BASIC Monthly Patientlevel Data Collection**



- Please collect data on all newborns of all gestational ages receiving any intravenous (IV) antibiotics within the first 72 hours of life.
- Exclude newborns requiring surgical procedures or antibiotics for surgical prophylaxis within the first 72 hours of life.
- Data will be submitted monthly for all newborns born that month who meet the following definition. Data should be submitted by the 15th of the month for the previous month.

### Identifying Newborns for A IL O PQC Monthly Data (Here's Help!

- Strategies for identifying newborns receiving antibiotics
  - Engage pharmacy to run reports on newborns receiving antibiotics
  - Engage microlab to identify newborns who had a culture to identify antibiotic use
  - Chart review
  - Neonatal logs
  - Key word searches in EMR
  - Billing codes





Newborns on antibiotics notated in problem list if cultures are **negative**:

- Z05.01 'Observation and evaluation of newborn for suspected infectious condition'
- P00.89 'Newborn (suspected to be) affected by other maternal conditions'

#### **Billing Codes**



## Newborns on antibiotics notated in problem list if cultures are **positive** (CDC):

P36 Bacterial sepsis of newborn Notes : Includes : Use Additional Code :Excludes2 :

P36.0 Sepsis of newborn due to streptococcus, group B Notes : Includes : Use Additional Code :Excludes2 : P36.1 Sepsis of newborn due to other and unspecified streptococci Notes : Includes : Use Additional Code :Excludes2 : P36.10 Sepsis of newborn due to unspecified streptococci Notes : Includes : Use Additional Code :Excludes2 : P36.19 Sepsis of newborn due to other streptococci Notes : Includes : Use Additional Code :Excludes2 : P36.2 Sepsis of newborn due to Staphylococcus aureus Notes : Includes : Use Additional Code :Excludes2 : P36.3 Sepsis of newborn due to other and unspecified staphylococci Notes : Includes : Use Additional Code :Excludes2 : P36.30 Sepsis of newborn due to other and unspecified staphylococci Notes : Includes : Use Additional Code :Excludes2 : P36.39 Sepsis of newborn due to unspecified staphylococci Notes : Includes : Use Additional Code :Excludes2 : P36.4 Sepsis of newborn due to escherichia coli Notes : Includes : Use Additional Code :Excludes2 : P36.5 Sepsis of newborn due to anaerobes Notes : Includes : Use Additional Code :Excludes2 : P36.5 Sepsis of newborn due to anaerobes Notes : Includes : Use Additional Code :Excludes2 : P36.8 Other bacterial sepsis of newborn Notes : Includes : Use Additional Code :Excludes2 : P36.9 Bacterial sepsis of newborn, unspecified

#### How to submit data into Redcap

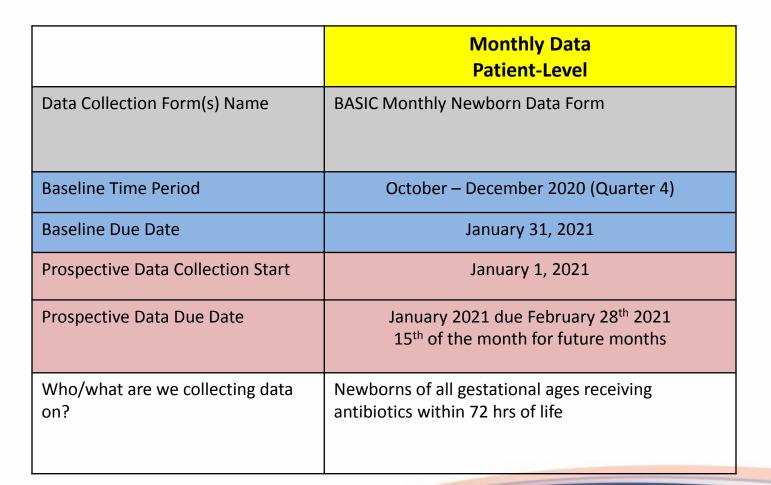


Please see screen for REDCap tutorial for:

#### **BASIC Monthly Newborn Data Form**

\*This session is being recorded and will be posted on <u>www.ilpqc.org</u>

# When and how often to submit the data



#### **BASIC Monthly Patientlevel Data Collection**



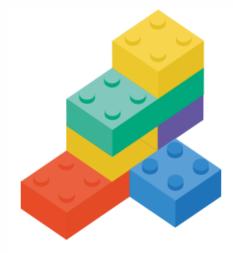
- Please collect data on all newborns of all gestational ages receiving any intravenous (IV) antibiotics within the first 72 hours of life.
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- Data will be submitted monthly for all newborns born that month who meet the following definition. Data should be submitted by the 15th of the month for the previous month.



### 2. BASIC Monthly Hospital-Level Data Form

### BASIC Monthly Hospital-level Data Collection

- Hospital-Level Measures: Hospital policies, protocols, and educational curriculum for providers, staff, and patients
- It is important to build a foundation with hospital-level (structure) measures to standardize systems & drive optimal care



This is how you start planning for sustainability at the onset



#### How to find the data



- Use baseline readiness survey to identify where your team is at to start
- Track monthly hospital measures at your hospitals monthly BASIC QI team meetings to monitor progress

# How to submit data into REDCap



Please see screen for REDCap tutorial for:

#### **BASIC Monthly Hospital Data Form**

\*This session is being recorded and will be posted on <u>www.ilpqc.org</u>

# When and how often to submit the data

	Monthly Hospital Measures
Data Collection Form(s) Name	BASIC Monthly Hospital Data Form
Baseline Time Period	October – December 2020 (Quarter 4)
Baseline Due Date	January 31, 2021
Prospective Data Collection Start	January 1, 2021
Prospective Data Due Date	January 2021 due February 28 <sup>th</sup> 2021 15 <sup>th</sup> of the month for future months
Who/what are we collecting data on?	Track your QI work: patient and provider education, protocol implementation, mapping resources, process flow etc.

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#### Data Collection Strategies: Learning from Wave 1 Hospitals

### Wave 1 Data Collection Strategies



- Matt Derrick, MD, NorthShore University HealthSystem Evanston Hospital
- Alex Lahart, MD, St. Louis Children's Hospital



#### **Additional Information**

32

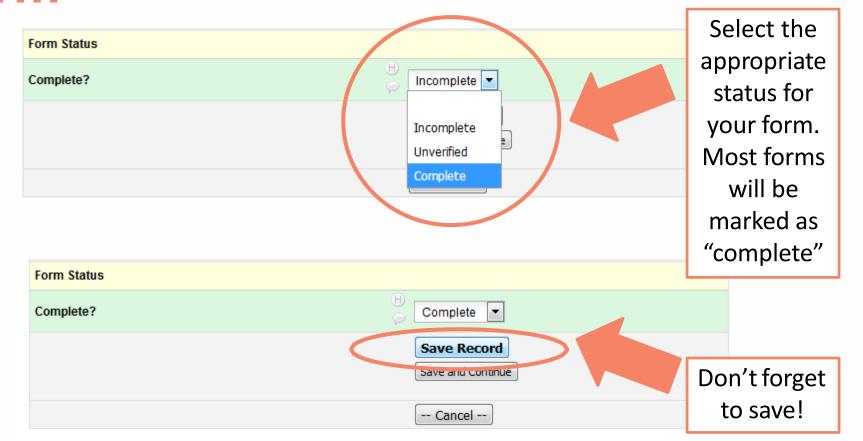
### Avoid Common Data Entry Mistakes



- Make sure you enter the correct hospital ID
- Do not enter a patient's medical record number
- Make sure to select the appropriate dates
- Questions asking about time are on a 2400 clock
- If you do not know your hospital ID, please email <u>dweiss@northshore.org</u>

## Close Out and Save the Form







# Helping you use your data for BASIC success



We are SO excited to introduce a new data dashboard to optimize your monthly data review

Overall Antibiotics prescribing rate with improved hospital comparison

Monthly summary of key performance measures

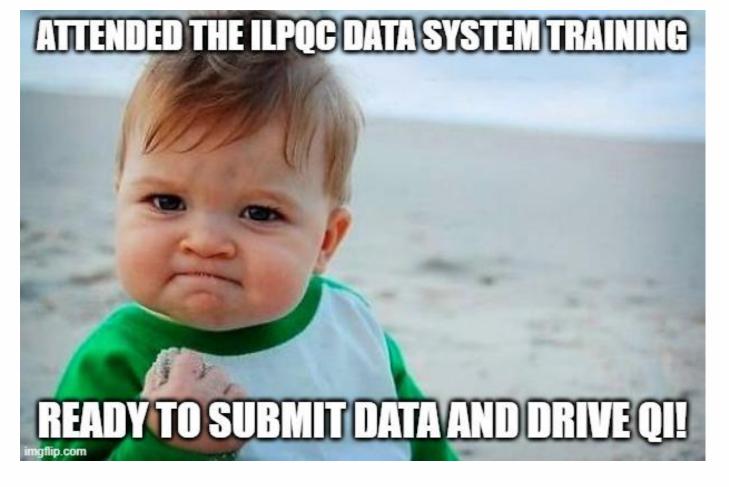
**Race/Ethnicity Comparisons** 



Access to real time data allows your hospital to see the effects of QI strategies and drive QI efforts.







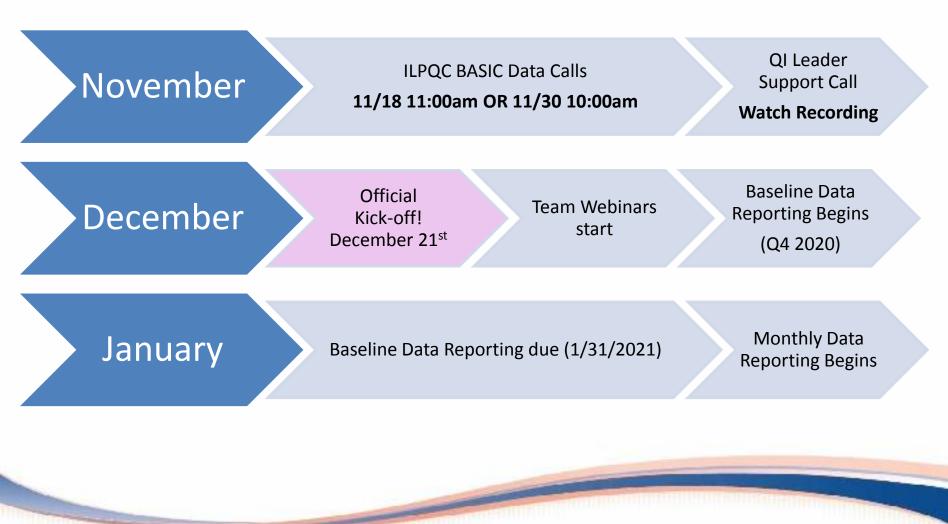


Date	Торіс
November 2020	2x Data Training Webinar offerings 11/18 (11am-12pm) & 11/30 (10am-11am)
December 21, 2020 1-2pm	BASIC Initiative Launch Call
2021 Monthly Webinars	Monthly BASIC Teams Calls (3 <sup>rd</sup> Monday of Month from 1-2pm CST) (Starting January 2021)

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#### **BASIC Timeline**





#### **Next Steps**



- Review data form with QI team and begin data collection for baseline Quarter 4 2020 (October December 2020).
- Data Forms opened December 1<sup>st</sup>, 2020 for those who had requested REDCap access.
- Add <u>info@ilpqc.org</u> & <u>dweiss@northshore.org</u> to your "Safe Sender List"
- Email <u>info@ilpqc.org</u> or <u>dweiss@northshore.org</u> with any questions.