# 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
  - Pele Dina, MD, FAAP; SIU School of Medicine
  - Susan L. McCarty MSN, RNC-LRN, Memorial Medical Center
- Data Collection Timelines (Baseline & Prospective Data)
- Questions from you

ILPQC DATA SYSTEM

ILPQC: Three Pillars Support Quality Improvement Success
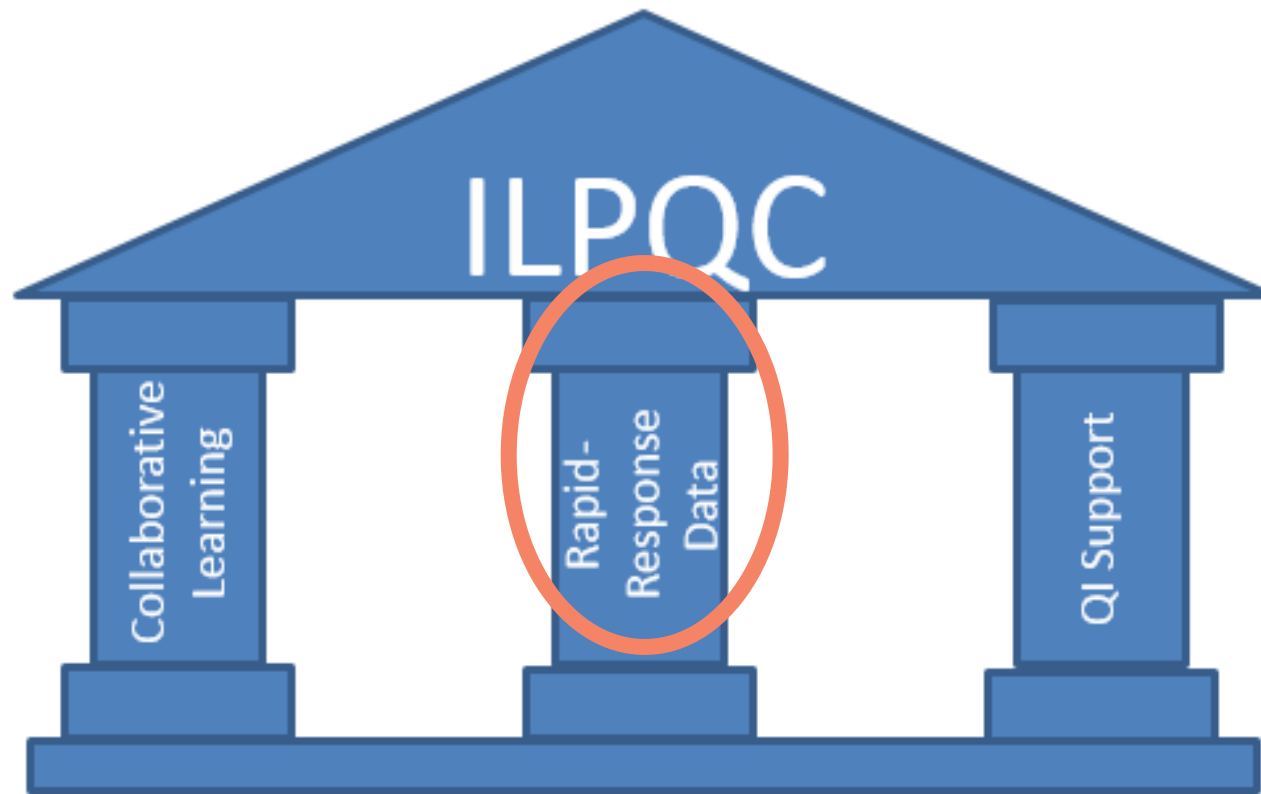
REDCap

- 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

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 dweiss@northshore.org

Key Steps to Access REDCap
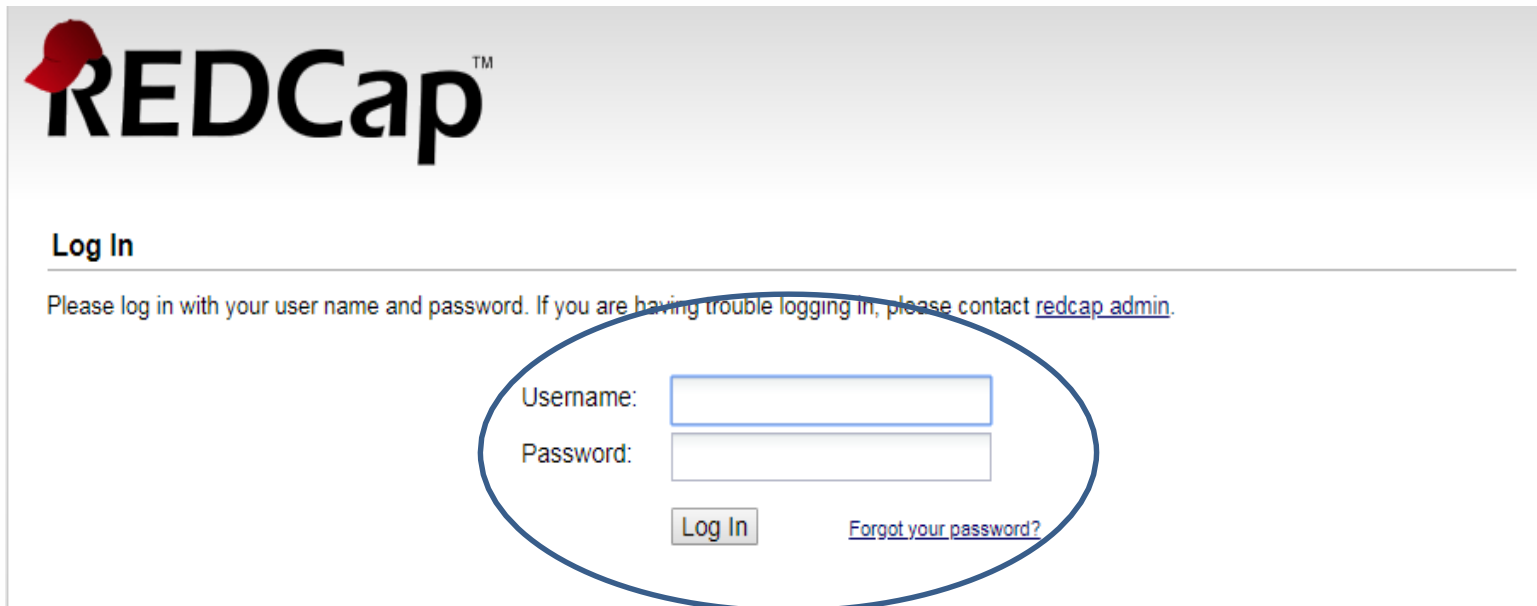
1. Add https://redcap.healthlnk.org to your bookmarks bar on your computer

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

Over 95%

99%

100%

Making Illinois the Best Place to Give Birth and be Born

New PQC article in Clinics in Perinatology

Also available on the ILPQC website

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REDCap Interface Overview

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

REDCap Interface Overview

REDCap Landing Page After Logging in

REDCap "My Projects" Landing Page

Participating in multiple ILPQC Initiatives?

ILPQC BASIC DATA FORMS OVERVIEW

What We'll Review for Each Data Form

- **Who** to collect data on

- **How** to find the data

- **How** to submit data into REDCap

- **When** & how often to submit data

BASIC Data Collection

There are **2 parts** to monthly data collection
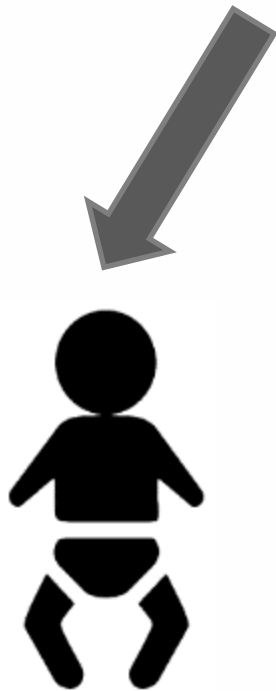
Patient-level Data

Hospital-level Data

BASIC Data Collection

Patient-level Data

Hospital-level Data

1. BASIC Monthly Newborn Data Form

BASIC Monthly Patient-level 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.

- If a newborn that receives any intravenous (IV) 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.

Identifying Newborns for 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

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 unspecified staphylococci Notes : Includes : Use Additional Code :Excludes2 :

P36.39 Sepsis of newborn due to other 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 :

P36.8 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 www.ilpqc.org

When and how often to submit the data

	Monthly Data Patient-Level
Data Collection Form(s) Name	BASIC Monthly Newborn Data Form
Baseline Time Period	October – December 2020 (Quarter 4)
Baseline Due Date	January 15, 2021
Prospective Data Collection Start	January 1, 2021
Prospective Data Due Date	January 2021 due February 28th 2021 15th of the month for future months
Who/what are we collecting data on?	Newborns of all gestational ages receiving antibiotics within 72 hrs of life

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

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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

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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 15, 2021
Prospective Data Collection Start	January 1, 2021
Prospective Data Due Date	January 2021 due February 28th 2021 15th 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.

Data Collection Strategies: Learning from Wave 1 Hospitals

Wave 1 Data Collection Strategies
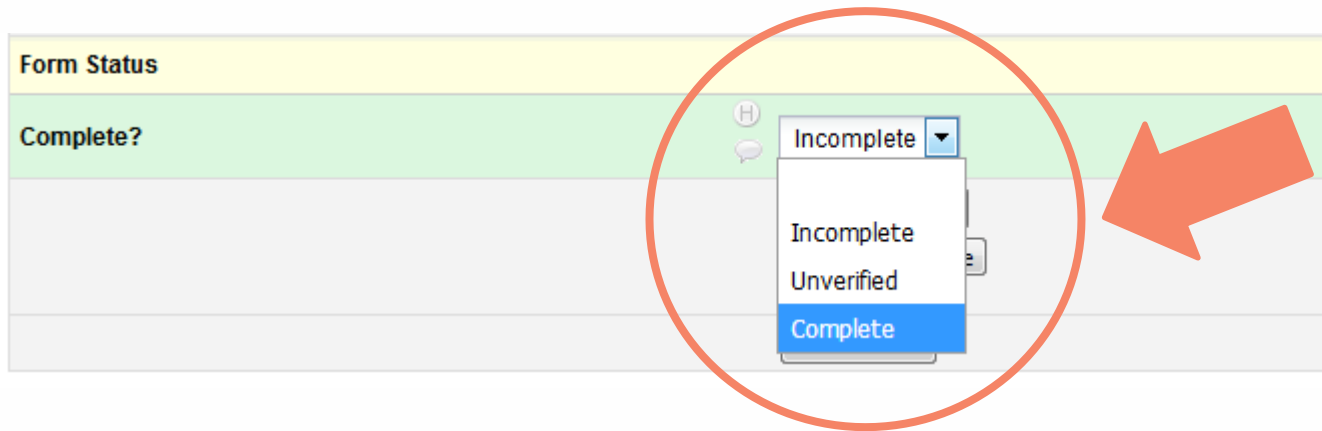
- Pele Dina, MD, FAAP; SIU School of Medicine

- Susan L. McCarty MSN, RNC-LRN, Memorial Medical Center

Additional Information

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 dweiss@northshore.org

Close Out and Save the Form

Select the appropriate status for your form. Most forms will be marked as "complete"

Don't forget to save!

Helping you use your data for BASIC success

We are SO excited to introduce a new data dashboard to optimize your monthly data review
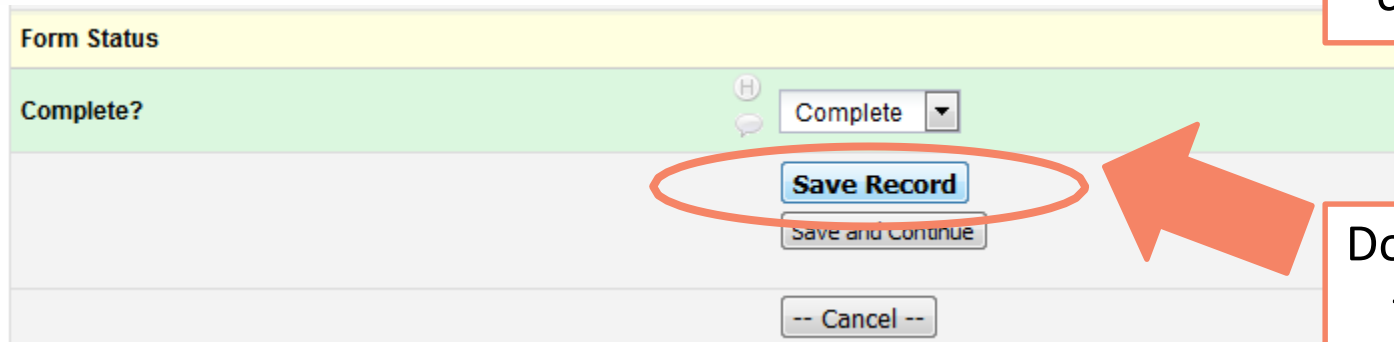
Overall Antibiotics prescribing rate with improved hospital comparison

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.

Questions?

ATTENDED THE ILPQC DATA SYSTEM TRAINING

READY TO SUBMIT DATA AND DRIVE QI!

imgflip.com
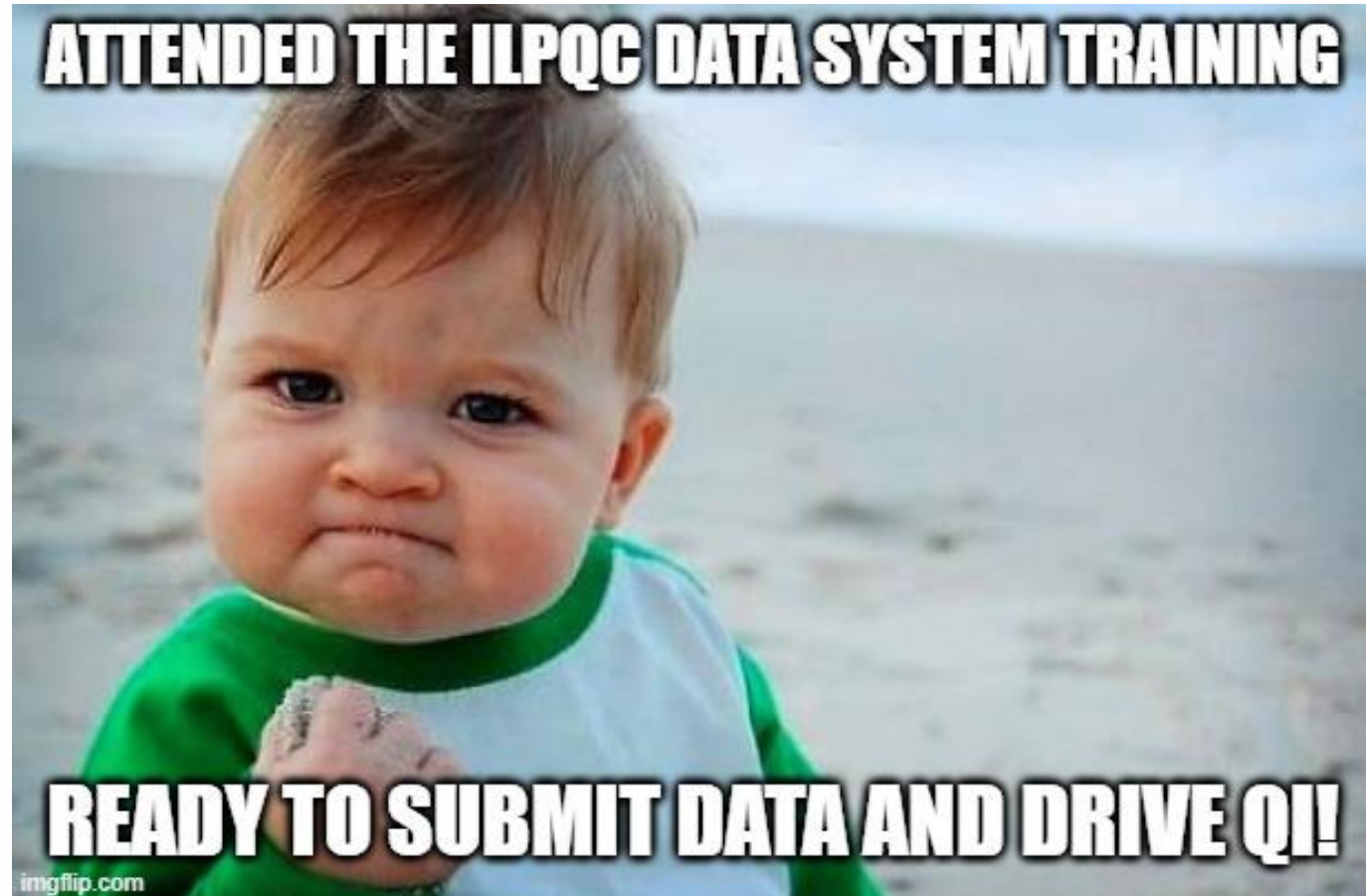
BASIC Webinars

Date	Topic
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 (3rd Monday of Month from 1-2pm CST)** (Starting January 2021)

BASIC Timeline

November
- ILPQC BASIC Data Calls
  11/18 11:00am OR 11/30 10:00am
- QI Leader Support Call
  Watch Recording

December
- Official Kick-off! December 21st
- Team Webinars start
- Baseline Data Reporting Begins (Q4 2020)

January
- Baseline Data Reporting due
- Monthly Data Reporting Begins

ILPQC
Illinois Perinatal
Quality Collaborative

Next Steps

✓ Review data form with QI team and begin data collection for baseline Quarter 4 2020 (October – December 2020).

✓ Data Forms opened December 1st, 2020 for those who had requested REDCap access.

✓ Add info@ilpqc.org to your "Safe Sender List"

✓ Email info@ilpqc.org or dweiss@northshore.org with any questions.