

PERINATAL QUALITY INDICATORS

GOAL

- Statewide measures to inform Quality Improvement
 - Maternal and Neonatal
 - Start small – 5-6 measures for both maternal and Neonatal
 - Grow over time
 - Generate reports useful to TCHMB, hospitals and other Texas stakeholders available in one place
 - Disaggregation by race, ethnicity, RAC, level of care, etc.
 - Allow for hospitals to see their own performance in relation to statewide and RAC
 - Use to inform TCHMB QI initiatives
 - Low burden to hospitals
 - Where possible, choose measures already reported or calculated by many hospitals

POTENTIAL MEASURES

- Maternal
 - Number of women who delivered
 - Number of liveborn infants
 - Number of women transferred to higher level of care/another hospital
 - Comparative NTSV cesarean – NQF-JC-SMFM
 - Maternal Mortality
 - Severe Maternal Morbidity—CDC, PC-07
- Neonatal
 - Number of liveborn infants
 - Number of infants admitted to NICU
 - Neonates transferred to another hospital
 - Mortality
 - Unexpected Newborn Complications—CMQCC and IC

THANK YOU

- We would value your input on these or other potential measures, especially Neonatal measures