

Where do babies' (data) come from?



NAPHSIS
Protecting Personal Identity
Promoting Public Health

VITAL STATISTICS: BUILDING BRIDGES TOGETHER

NAPHSIS ANNUAL MEETING | PITTSBURGH | MAY 31-JUNE 3, 2015

Birth Data: Where does it come from?

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Financial Disclosures

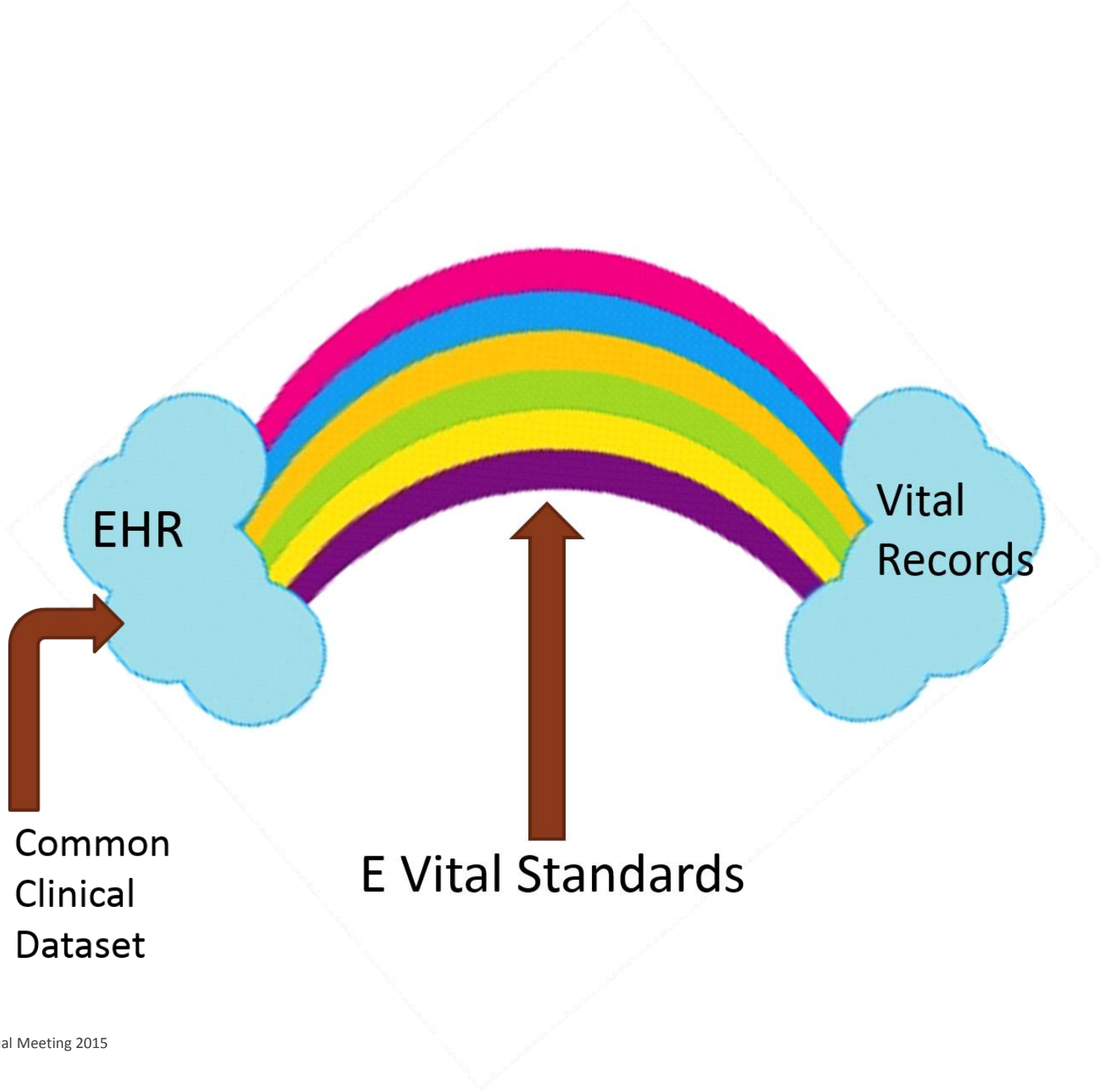
- I have no financial disclosures



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Learning Objectives

- Describe the timing of data entry into the health record during prenatal care
- Understand the role of the EHR in healthcare
- Determine who else wants the same data and for what purposes





Building Materials

Standard Work

- Build a Common Clinical Data Set
 - Share information

Data Quality

- Provenance
 - Source
 - Timing
- Characteristics
 - Qualitative vs Quantitative
 - Data element vs Free text
- How the question is worded

Information from First prenatal visit

Source: Office Visit, Ob Provider

- LMP
- Infertility Treatment
- Previous live births & other outcomes
- Height, Weight of mother
- Cigarette Smoking
- Risk Factors
 - Past medical history
 - Previous preterm birth
 - Previous Cesarean Section



Prenatal Visits

Source: Office Visit, Ob Provider

- Determine the due date
- Infections – Lab results
- Procedures performed
 - Ultrasound, Genetics testing, cerclage,
- Risk Factors
 - Diabetes
 - Hypertension
- Date of last visit and # of prenatal visits



Delivery Data

Source: Birth Facility, Maternal Record

- Onset of Labor
- Characteristics of Labor & Delivery
- Method of Delivery
- Anesthesia
- Other Procedures



Newborn Data

Source: Birth Facility, Newborn Record

- Weight
- Apgars
- Plurality and birth order
- Abnormal Conditions
- Congenital Anomalies
- Immunizations



Post Partum

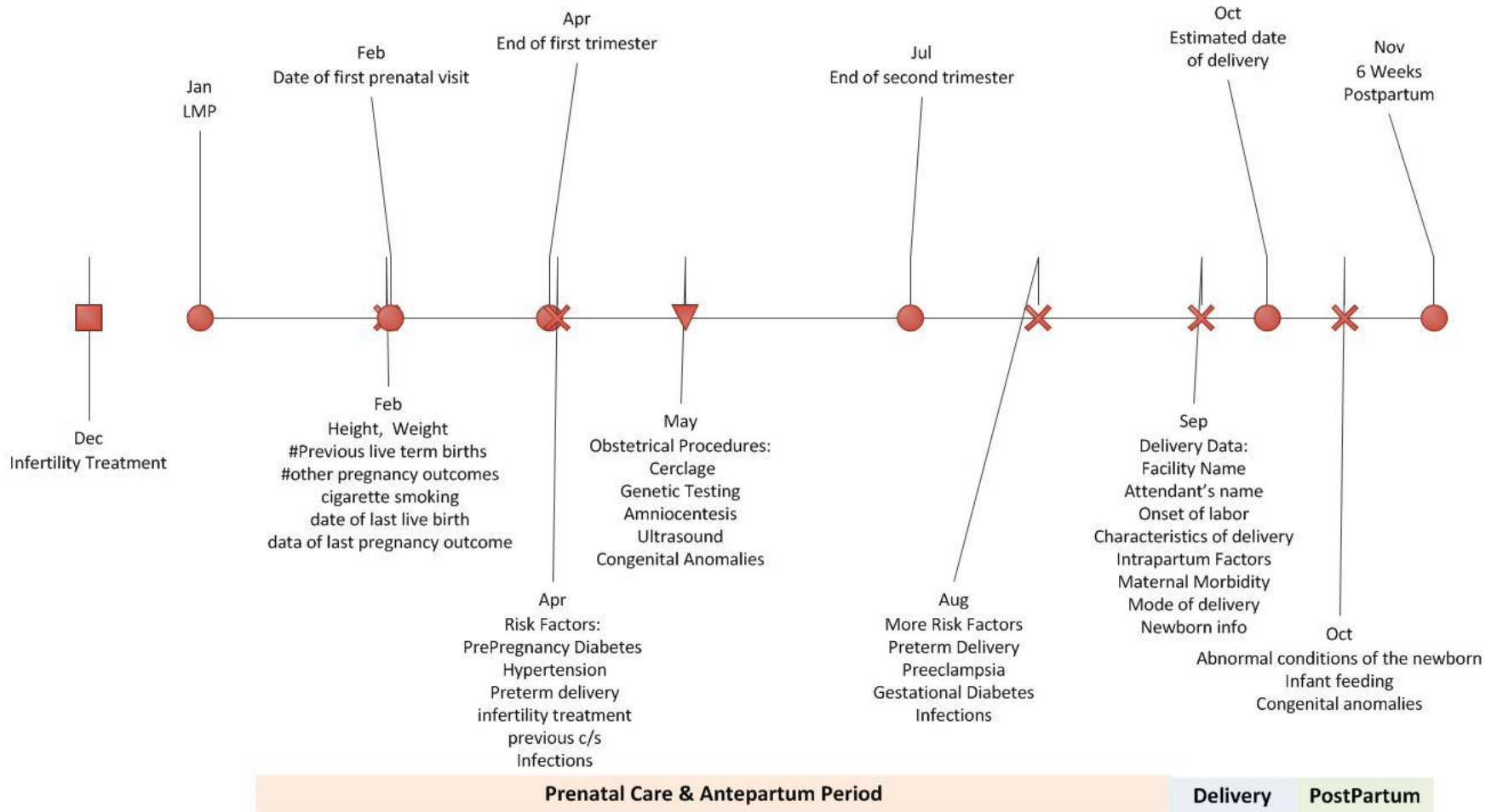
Source: Birth Facility, Maternal Record

- Maternal Morbidity
- Breastfeeding
- Discharge or Transfer



Birth Data

Sample year timeline of pregnancy from infertility treatment through 6 wk postpartum visit



Problems with current system

- Multiple Sources of Original data
 - Prenatal record never makes it to delivery site
- Manual data entry and duplicative processes
- Timeline of data spans 10 months
- Everyone is doing the same thing in many different ways



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The EHR

“By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care.”

President George W. Bush
State of the Union Address
January 20, 2004

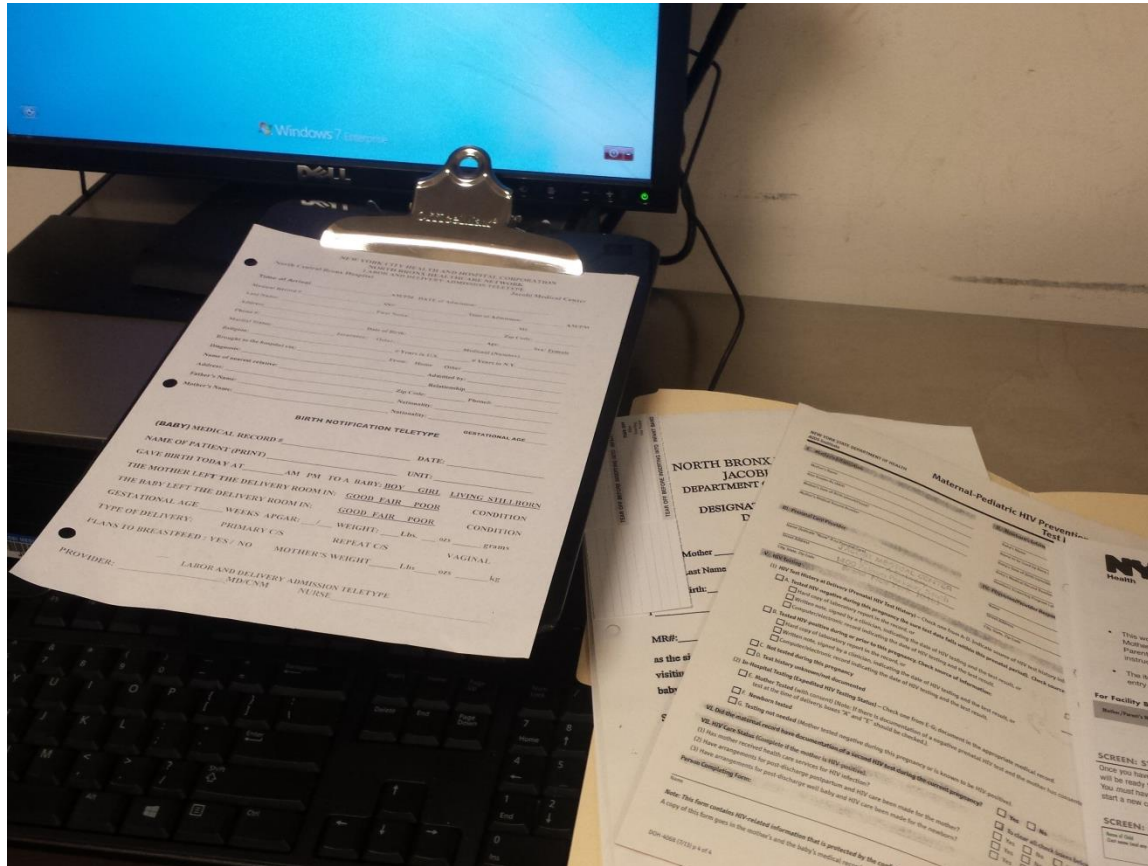
- He set a timeline of 10 years
- Added \$100 million to budget
- Created a subcabinet position in HHS

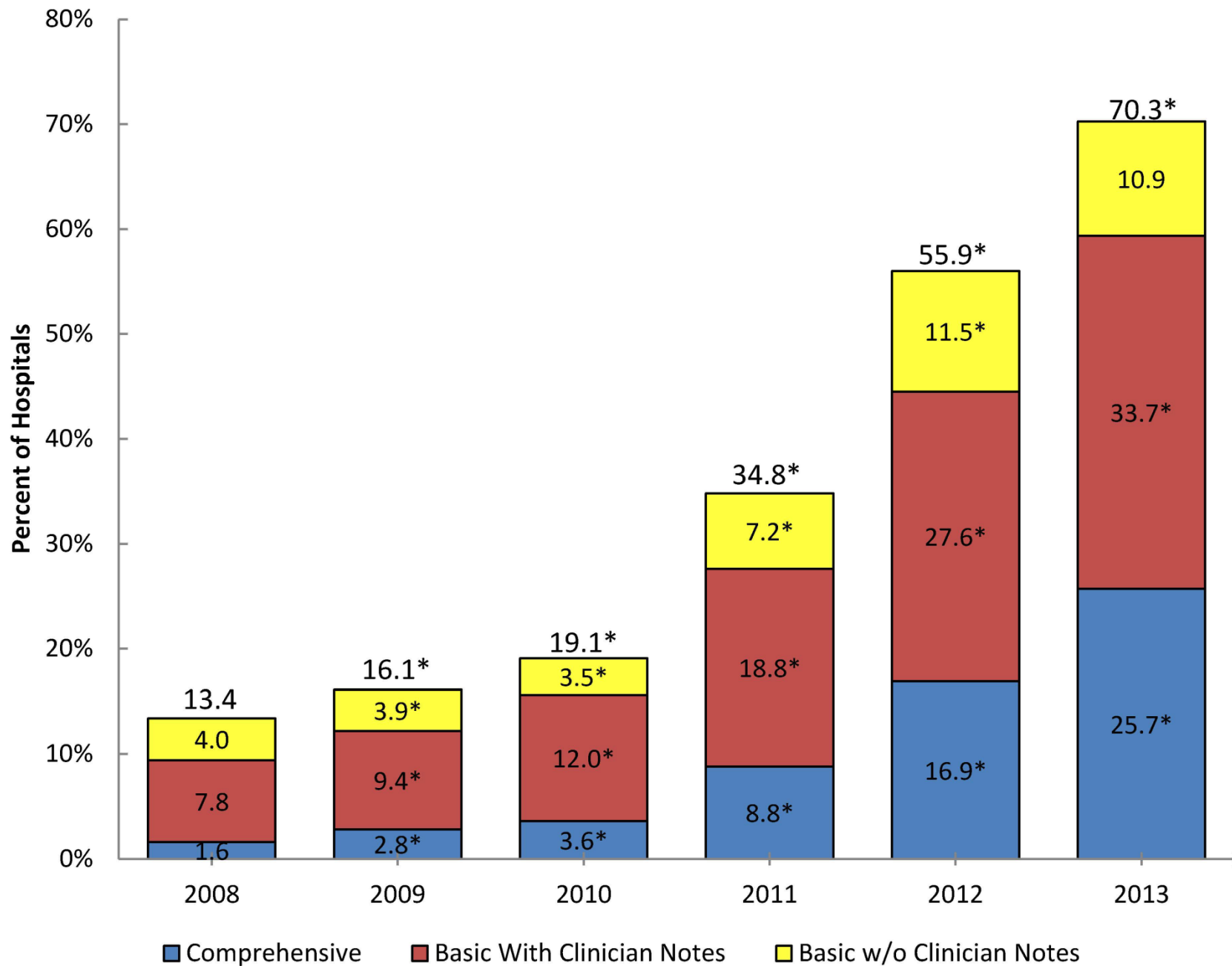
American Recovery and Reinvestment Act of 2009 (ARRA)

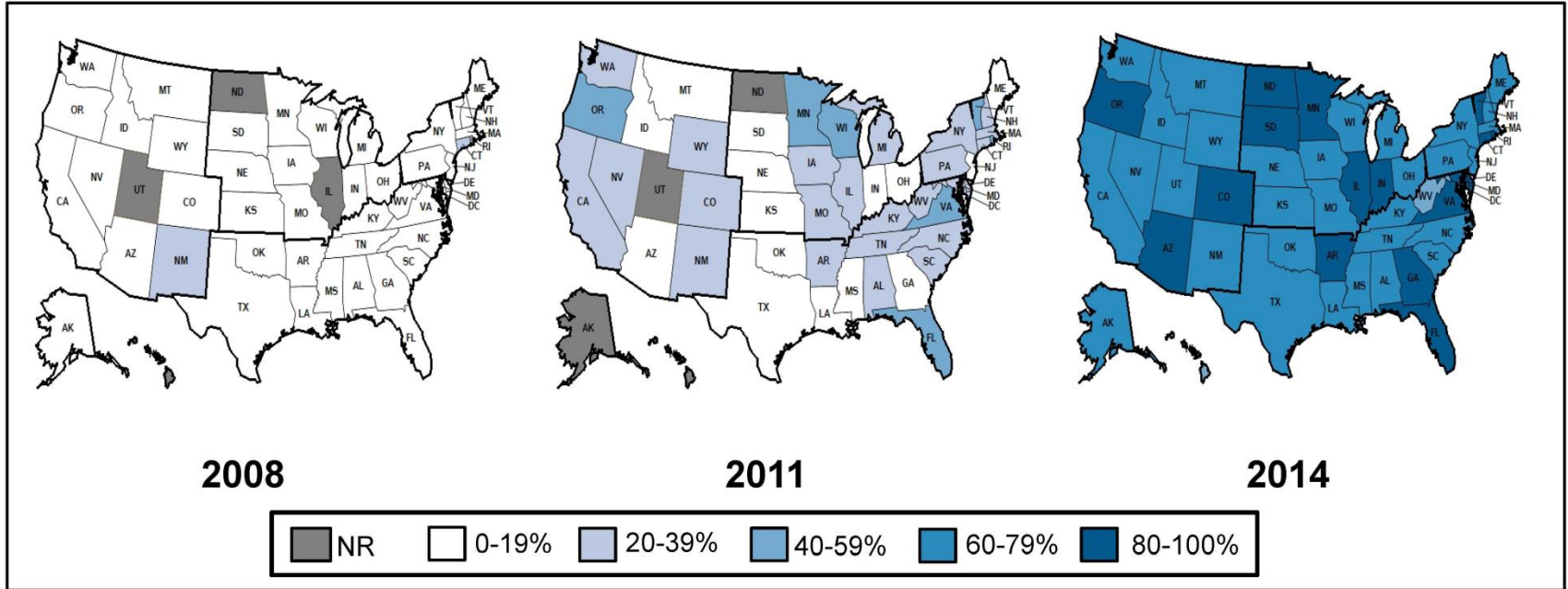
HITECH Act

Financial Incentives for Providers
Certification of EHR Technology

**Requires the meaningful use of
certified technology**







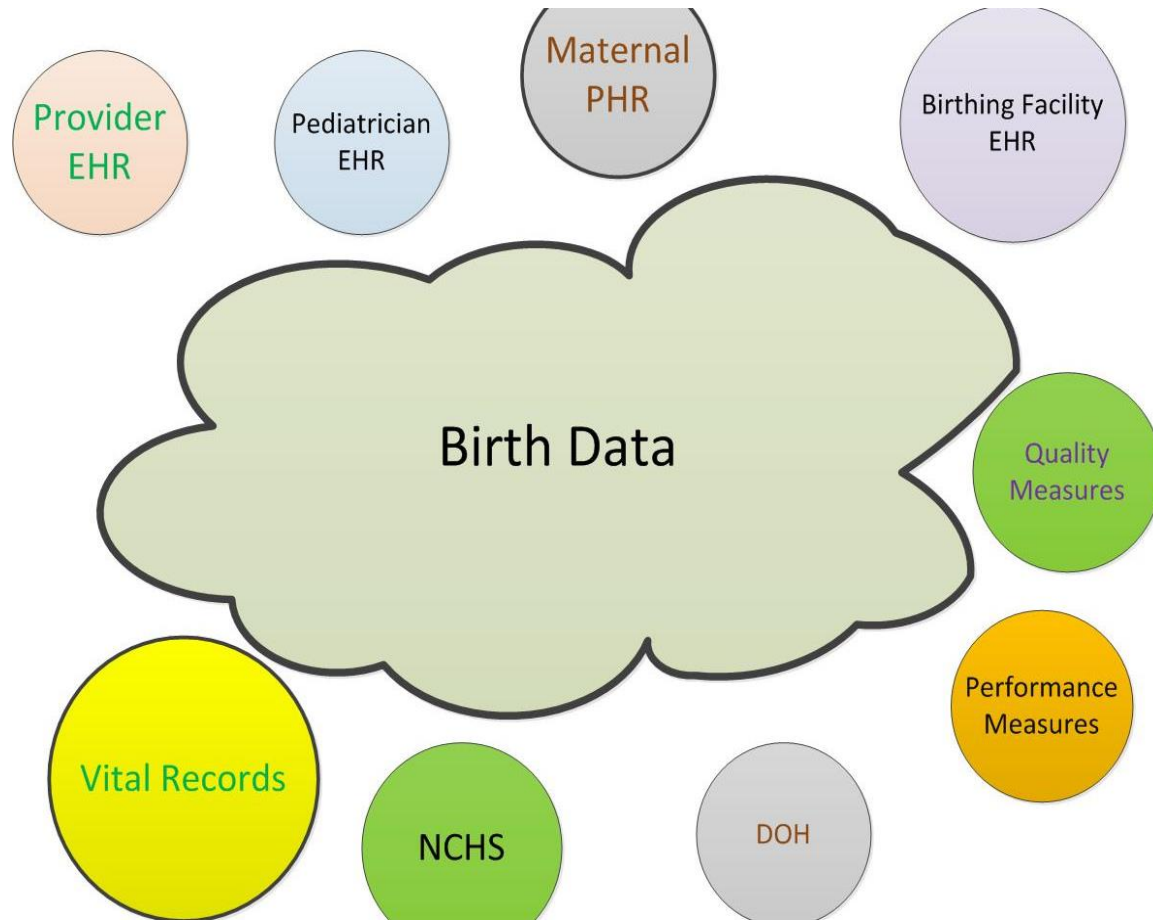
**State comparison of adoption compared to prior years.
HealthIT.gov April 2015**



Construction on the Tappan Zee

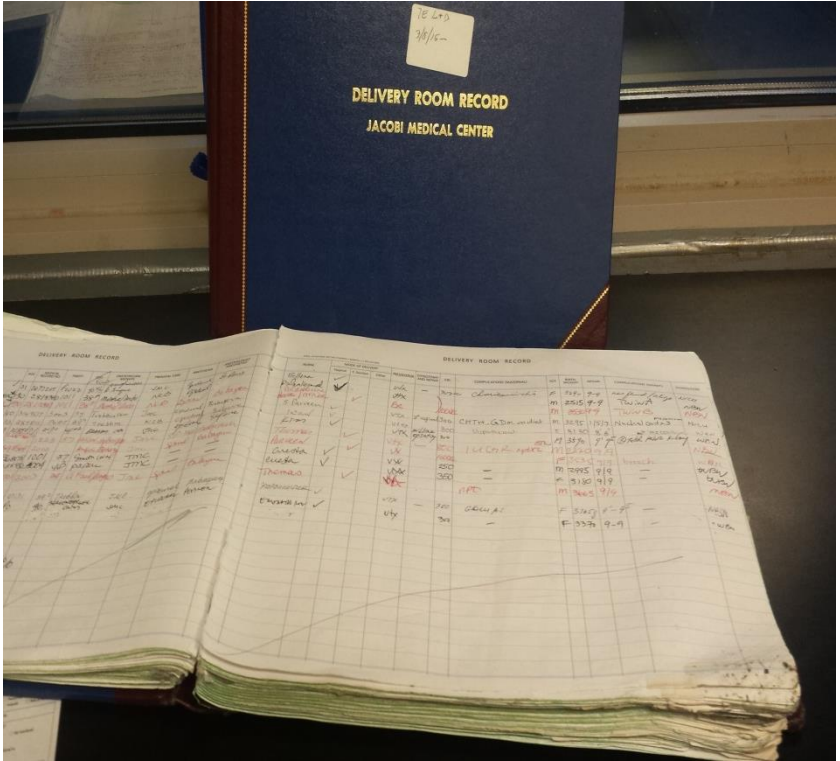
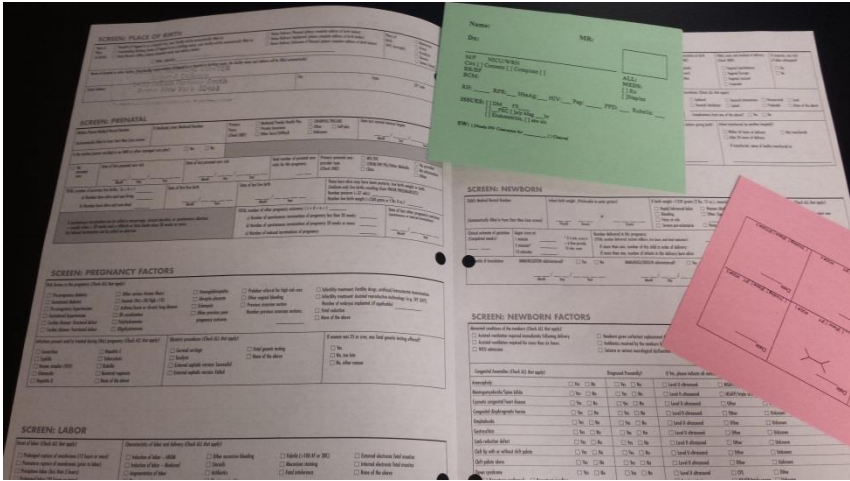
Who wants the data?





EVERYONE WANTS YOUR DATA!

Birthing Facility



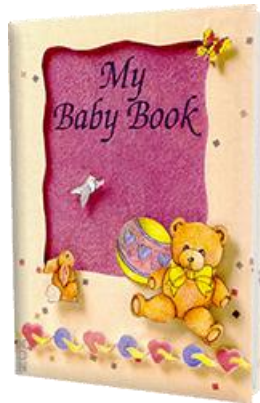
Continuity of Care

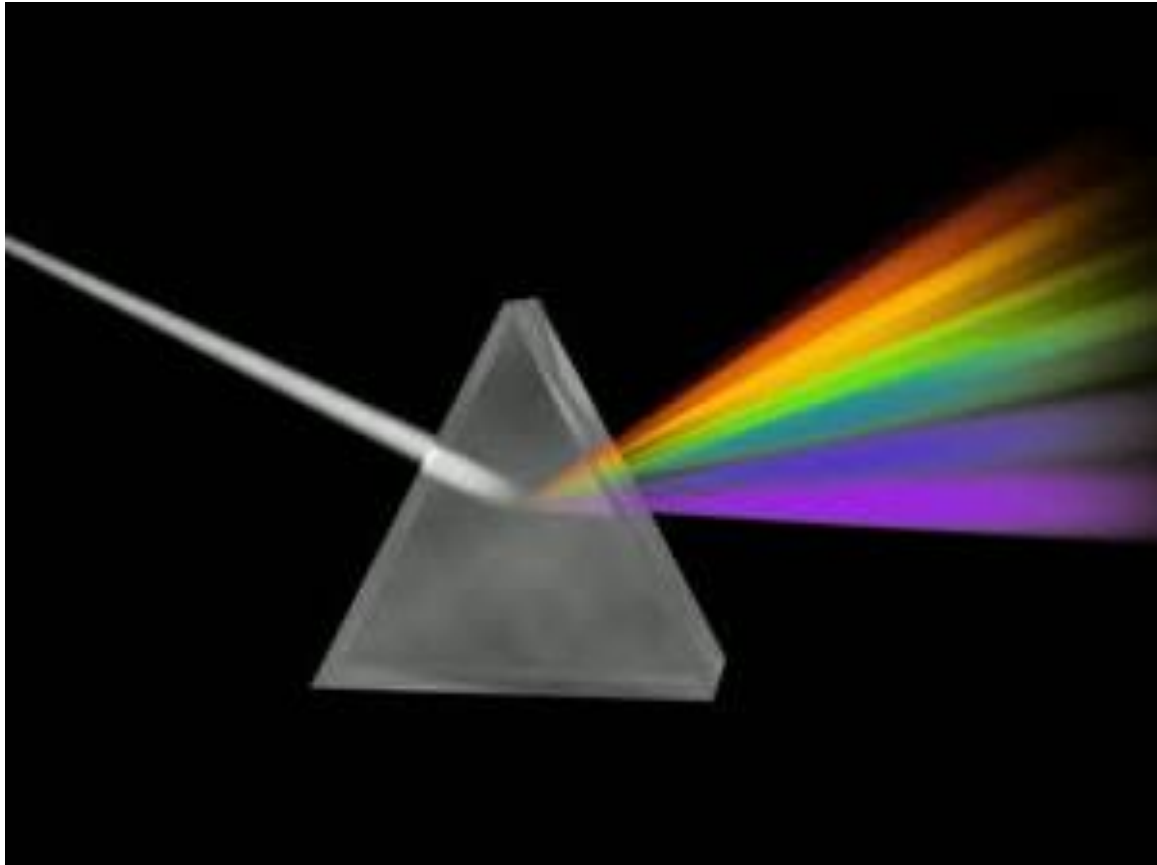
- OB providers – outpatient and inpatient
- Consultants
- Pediatricians

Performance Measures

- Establish Gestational Age
- Prenatal Care Screening
- Behavioral Health Risk Assessment
- BMI Assessment
- Elective Deliveries <39 wks
- Cesarean Deliveries for low risk nullip
- Episiotomy
- Spontaneous Labor & Birth
- Care Coordination
- Postpartum Care Follow up

Personal Health Records





Constraints and Barriers

- Resources
- Data Capture within EHR
 - Common Clinical Dataset
 - Quality and completeness
- Data Sharing
 - Messaging Standards and Technical Frameworks
 - Privacy Concerns

Integrating the Healthcare Enterprise



**IHE Quality, Research and Public Health
Technical Framework Supplement**

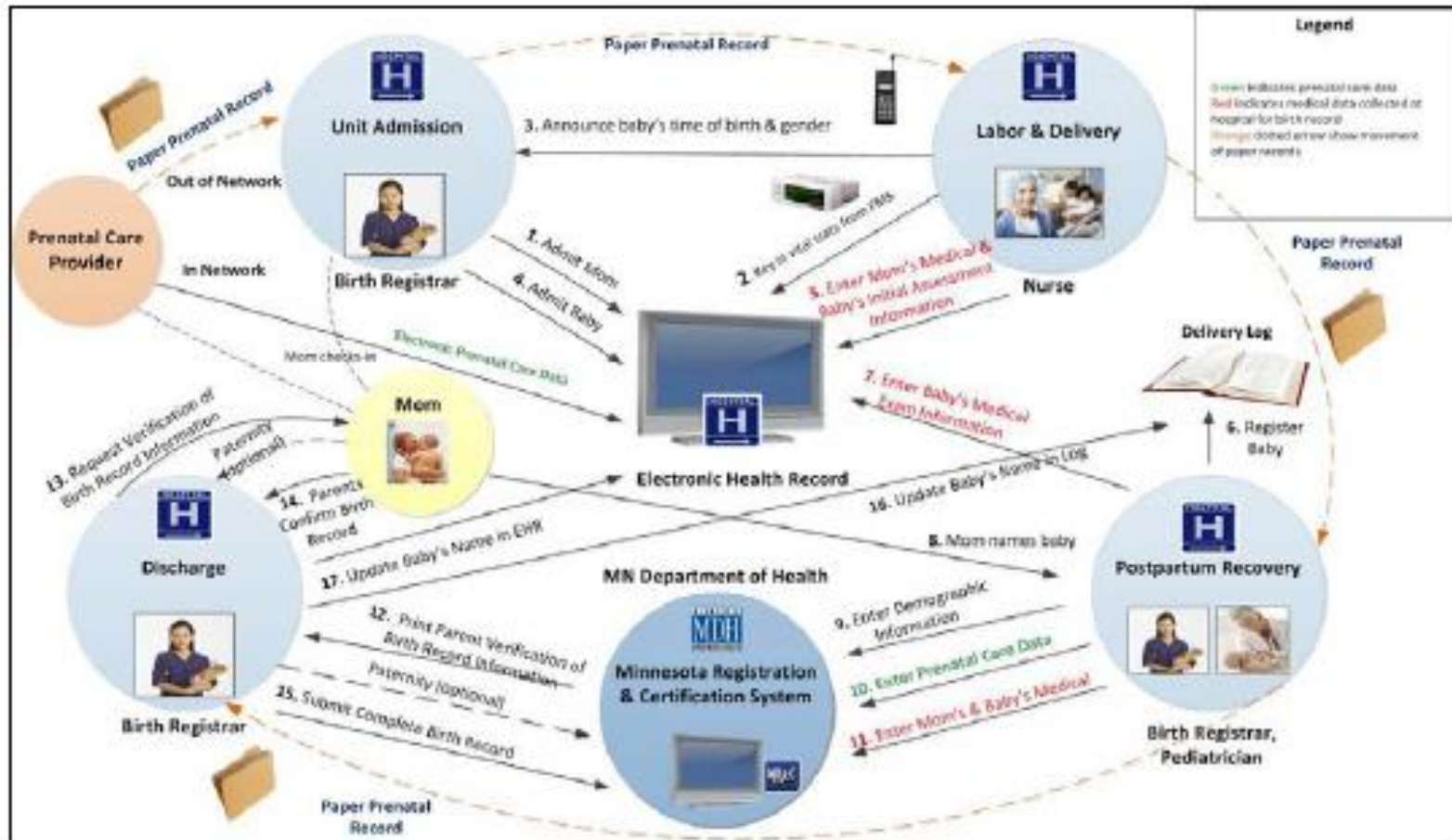
**Birth and Fetal Death Reporting-Enhanced
(BFDR-E)**

Draft for Public Comment

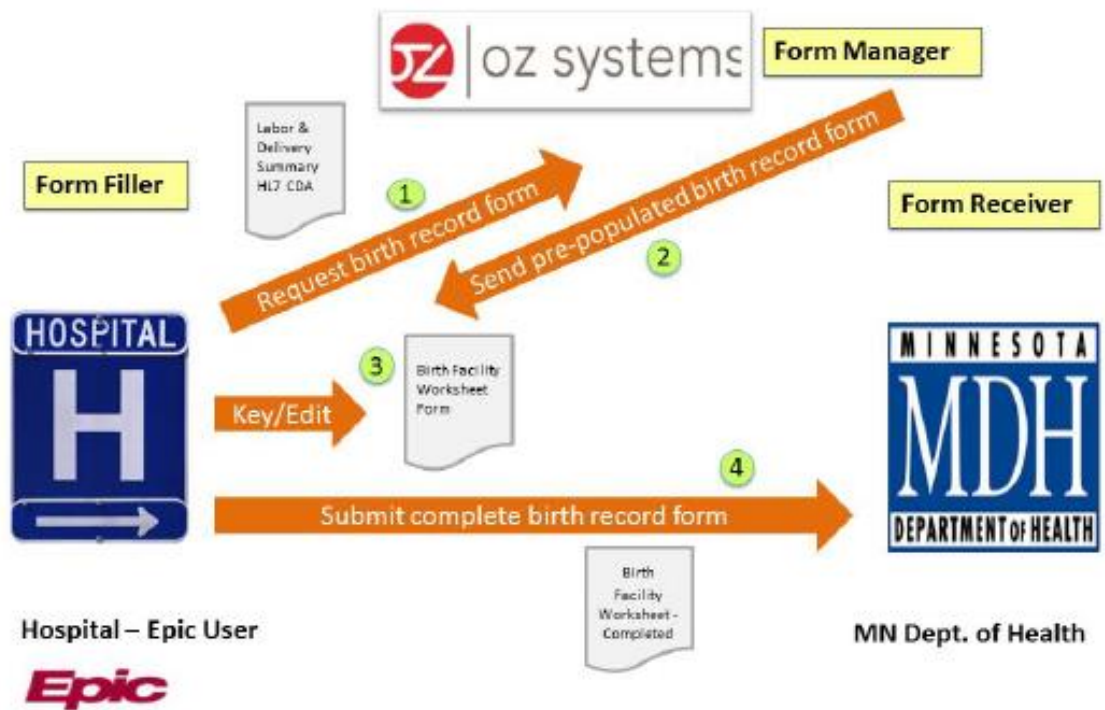
Can this be done?

- Minnesota Test Case
- Utah Test case

Figure 7. Unity Hospital's Current Birth Registration Process



Minnesota eBirth Records Project: Assessing Readiness for e-Birth Records Standards. Minnesota Department of Health, April 2014



Minnesota eBirth Records Project: Assessing Readiness for e-Birth Records Standards. Minnesota Department of Health, April 2014

Overcoming Barriers

- Policies
- Pooling our resources – working with provider organizations
 - AMA, ACOG, SMFM,ACNM, AWHONN, AAP, AAFP
- Technical Guidance to vendors on both sides of the equation
 - EHR vendors & Vital Statistics vendors



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Thank You

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