

PDR BULLETIN

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New PDR Implementation Update

As we enter 2018, we are getting close to implementing the new Perinatal Data Registry. The building of the PDR by the development team is in progress and moving closer towards user testability.

Our development includes working with various system owners in the province to enhance linkages and integration with different data sources. These include patient care information systems, CIHI and ADT systems. At the same time, we are tackling numerous change management activities to ensure a smooth roll-out for users of the Provincial Perinatal Forms, including education for coders and healthcare providers. The implementation team is currently conducting a full Private Impact Assessment (PIA). As we get closer to the release of the new PDR, there will be increased communication with users and stakeholders. Each region will be contacted soon to plan a coordinated roll-out as each site will be on boarded according to when they are ready to begin collection for the 18/19 fiscal year. We anticipate the majority of users will be collecting on the new system by June 2018."

Provincial Perinatal Form Revision Update

In conjunction with the implementation of the new PDR, we have revised and redesigned the following eight Provincial Perinatal Forms:

- **Triage and Assessment**
- **Labour and Birth Summary**
- **Antenatal Record Part 1 and 2**
- **Labour Partogram**
- **Newborn Record Part 1 and 2**
- **Newborn Clinical Path**
- **Postpartum Clinical Path**
- **Newborn Resuscitation Record**

Provincial Perinatal Forms were redeveloped through meaningful consolidation with users. Consultation has enabled us to add additional data fields and improve formatting to ensure ease of use for nurses, primary care providers, and coders. By the end of March, form revision will be completed, and at that time, we anticipate a staggered roll-out of revised forms with accompanying education and training. As we get closer to the implementation of the new forms, we will be sending out information alerting users of changes to the revised and redesigned forms.

Your Work In Action

Did you know that coders play an instrumental role in improving maternal-fetal and newborn outcomes across BC?

Data abstracted from the provincial forms by coders are used by the PSBC surveillance team to describe and monitor trends in perinatal health in BC. The surveillance team then provides health care providers, policymakers, planners, administrations, and researchers with timely, relevant, and high-quality data to improve maternal-fetal and newborn outcomes. Data analysis enables PSBC to facilitate systems planning, guide decision making, and enhance knowledge generation and translation across every region of BC.



Perinatal Services BC
An agency of the Provincial Health Services Authority



PSBC Facility Indicators

At the facility level, PSBC publishes data for six maternal and neonatal indicators. The selected indicators are based on general relevance and validity of data from facilities and are measurable, clinically meaningful, and evidence-based. These indicators are:

1. Vaginal delivery for eligible first-time mothers
2. Early repeat cesarean delivery
3. Post-date induction done early
4. Only intermittent auscultation in low-risk deliveries
5. Healthy babies fed only breast milk
6. Attempted VBAC for eligible women

Facility-level data helps us to understand local trends in perinatal health better and develop region-specific interventions to address concerns and celebrate successful outcomes. Click [here](#) to find out more about the maternal and fetal indicators that PSBC collects.

What is the facility level-indicator data telling us?

- 72% of eligible first-time mothers at Vernon Jubilee Hospital have vaginal deliveries
- 30% of mothers at Peace Arch Hospital have early term

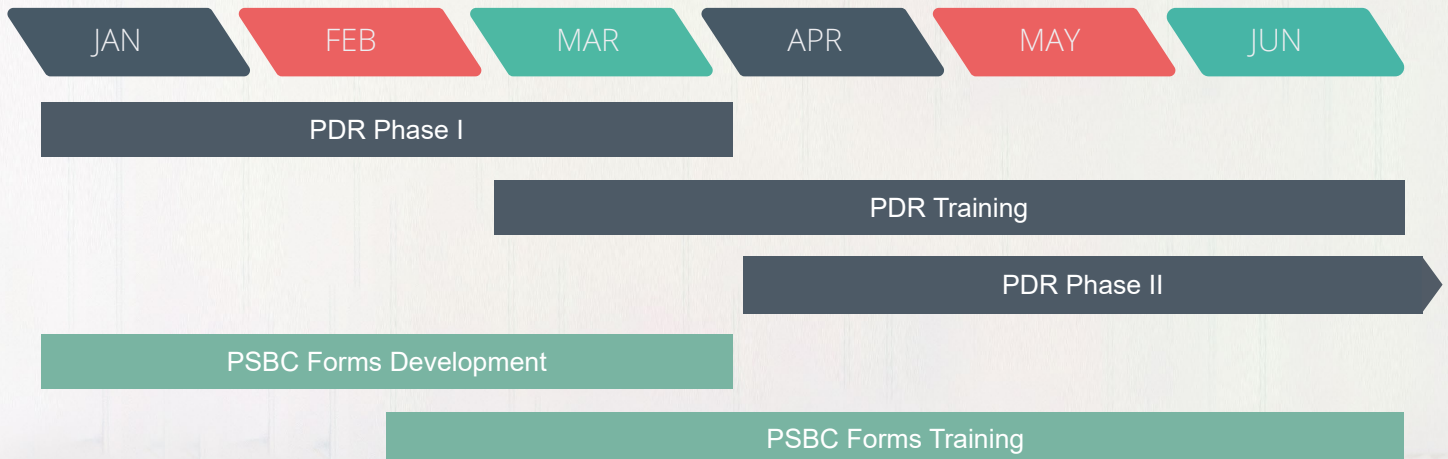
repeat cesarean delivery without induction

- 0.8% of mothers at St. Paul's Hospital have post-date inductions early
- 76% of low-risk deliveries at Nanaimo Regional General Hospital have only intermittent auscultation
- 90% of healthy babies are fed only breastmilk at Haida Gwaii Hospital and Health Centre
- 31% of eligible women at the University Hospital of Northern British Columbia attempt VBAC

These indicators are important to coders because the data enables PSBC to provide accurate information for expectant mothers and their families, and primary care providers. With these indicators, we can offer more information on local health facilities and the maternity care system in BC. Data enables expectant mothers and their families to be better informed about the health services they receive and helps them prepare for their birth experience.

The accuracy and usefulness of these indicators are dependent on coders across the province. Keep up the great work!

PDR Implementation Timeline



We're Here to Help! |

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