

# Hospital Surveys

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# 2008 IPOM Requirements—Hospital Reviews

In the 2008 IPOM, CDC recommends:

- Reviewing each delivery hospital's medical records at least once every five years
- Conducting hospital policy surveys every three years



## Why review hospital medical records?

- Reviewing hospital medical records will allow you to determine HBsAg screening and hepatitis B birth dose administration rates for individual hospitals
- This quality assurance activity with your delivery hospitals helps your program know which hospitals need further attention and education

## Why review hospital medical records? (cont'd)

- These reviews can allow you to calculate statewide estimates of HBsAg screening rates
- Hospital medical record reviews are also a way to calculate statewide birth dose rates and validate NIS birth dose rates for your jurisdiction

# Data to Collect During Hospital Record Reviews

- Delivery date/time
- Mother's HBsAg test date/result/type in mother record
- Mother's HBsAg test date/result/type in infant record
- Infant hepatitis B vaccination (yes/no)
- Date/time of vaccination

# Data to Collect During Hospital Record Reviews (cont'd)

- Infant HBIG administration (yes/no)
- Date/time of HBIG
- Consider adding other variables if collaborating with HIV, GBS, syphilis...

## Choosing Hospital Sample Size

- LQA (Lot Quality Assurance) methods were often used in the past to assess hospital maternal HBsAg screening rates, but we are now interested in multiple variables (especially the administration of a universal birth dose) and the LQA method does not easily allow the review of variables with varying expected levels of coverage

## Choosing Hospital Sample Size (cont'd)

- A suggested sample size table has been provided in the Guide to Life (Ch. 2, pg 9) using a confidence interval of  $\pm 8\%$  and various hospital birth cohort sizes and expected levels of HBsAg screening/birth dose coverage
- The sample sizes range from 22-150 records

## How do I use the table?

- Determine the hospital's annual number of deliveries to decide where they fall on the "Birth Cohort Size"
- Estimate the HBsAg screening and hepatitis B birth dose coverage for the hospital and use the lower coverage to determine the sample size

## How do I use the table? (cont'd)

### Example

Hospital X had 600 deliveries last year

The expected HBsAg screening rate is 95%

The state NIS birth dose rate is 65%

Using the 65% coverage level, the sample size for Hospital X would be 111 records



# Collaboration with other health department staff

- Consider partnering with other health department perinatal infection staff to conduct hospital medical record reviews
- By integrating data collection you can maximize your time and the hospital's time

## Collaboration with other health department staff

- Other programs have used AFIX staff to assist with some hospital reviews, since hepatitis B birth dose administration is part of the assessment—this may be dependent upon AFIX staff's workload and availability

# Deciding how to sample the hospitals in your jurisdiction

- For smaller jurisdictions, it might make the most sense to visit all birthing hospitals during a single calendar year
- The advantage to this is that the hospital sampling will be simple and the data can easily be combined to calculate statewide rates for maternal HBsAg screening and birth dose administration

## Deciding how to sample the hospitals in your jurisdiction (cont'd)

- For larger grantees, sampling all hospitals during a single year may not be feasible
- In this case, the grantee will want to consider the way that the hospitals are sampled over two or more years if statewide estimates are desired

# Sampling Assistance

- CDC may be able to provide some technical assistance on sampling to states without any statistical support available to them.

# Survey Instruments

- Grantees may use or modify the policy survey and medical record review tools that were used in the 2006 National Hepatitis B Hospital Survey or they may choose to develop their own tools

## Additional types of record reviews

- Some jurisdictions may also decide to assess records of a particular population, such as women that received no prenatal care or a specific ethnic group
- Grantees may work with CDC on an individual basis to design this type of review

