Perinatal Data Collection (PDC) Reporting and Submission Requirements

Document Number PD2010_072
Publication date 17-Dec-2010
Functional Sub group Clinical/ Patient Services - Maternity
Clinical/ Patient Services - Records
Clinical/ Patient Services - Information and data

Summary Perinatal Data Collection (PDC) is a statewide surveillance system which monitors patterns of pregnancy care, services and pregnancy outcomes.

Replaces Doc. No. Midwives Data Collection (MDC) Reporting and Submission Requirements [PD2005_636]

Author Branch Health System Information & Performance Reporting
Branch contact HSIPR 9391 9199

Applies to Area Health Services/Chief Executive Governed Statutory Health Corporation, Affiliated Health Organisations, Affiliated Health Organisations - Declared, Community Health Centres, Private Hospitals and Day Procedure Centres, Public Hospitals

Audience Administration, nursing, midwives, medical records

Distributed to Public Health System, Ministry of Health, Private Hospitals and Day Procedure Centres

Review date 17-Dec-2015

Policy Manual Patient Matters
File No. 10/2857
Status Rescinded
Rescinded By PD2015_025

Director-General

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is mandatory for NSW Health and is a condition of subsidy for public health organisations.
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PERINATAL DATA COLLECTION (PDC) REPORTING AND SUBMISSION REQUIREMENTS

PURPOSE
This Policy Directive is effective from 1 January 2011. It covers reporting and submission requirements for the Perinatal Data Collection (PDC), which is a state wide surveillance system that monitors patterns of pregnancy care, and maternal and newborn outcomes.

MANDATORY REQUIREMENTS
This policy applies to all midwives and doctors working in public and/or private facilities where a birth occurs. Reporting of all births in NSW to the PDC is a statutory requirement under the NSW Public Health Act, 1991.

PDC forms, or an electronic equivalent, must be completed for all births in NSW, including live born babies regardless of gestational age or birth weight, and stillborn babies of at least twenty (20) weeks gestation OR four hundred (400) grams birth weight. In the case of multiple births, a separate form must be completed in full for each baby.

From 1 January 2011, all data, either electronic or hard copy (paper), must be submitted in accordance with the timeframes described in section 1.3 of the attached Perinatal Data Collection (PDC) Reporting and Submission Requirements: Procedure.

Section 2 of the Perinatal Data Collection (PDC) Reporting and Submission Requirements: Procedure details the data items to be reported and section 5 details the mandatory security requirements for data management.

IMPLEMENTATION
Chief Executives are to ensure:

- This policy directive is distributed to all staff involved in collecting and supplying data for the PDC. This includes staff of obstetric and neonatal units and medical record staff.

- Electronic systems are able to collect the data items in accordance with the attached document Section 2 of Perinatal Data Collection (PDC) Reporting and Submission Requirements: Procedure.

- Hard copy (paper) forms are made available for midwives, nurses and medical record staff for hospitals that do not have a computerised maternity information system.

REVISION HISTORY

<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Amendment notes</th>
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<tr>
<td>December 2010</td>
<td>Director-General</td>
<td>Replaces PD2005_636</td>
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<td>December 2005</td>
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ATTACHMENTS
1. Perinatal Data Collection (PDC) Reporting and Submission Requirements: Procedures.
Perinatal Data Collection (PDC) Reporting and Submission Requirements

Issue date: December 2010
PD2010_072
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1 BACKGROUND

1.1 About this document

From 1 January 2011, this Policy Directive rescinds and replaces Policy Directive PD2005_636 concerning the NSW Midwives Data Collection. This policy directive applies to reporting of births to the NSW Perinatal Data Collection (PDC) from 1 January 2011.

The Perinatal Data Collection (PDC) is a state wide surveillance system, which monitors patterns of pregnancy care, and maternal and newborn outcomes.

1.2 Key definitions

PDC forms, or an electronic equivalent, must be completed for all births in NSW, including live born babies regardless of gestational age or birth weight and stillborn babies of at least twenty (20) weeks gestation OR four hundred (400) grams birth weight. In the case of multiple births, a separate form must be completed in full for each baby.

1.3 Legal and legislative framework

Reporting of all births in NSW is a requirement of the NSW Public Health Act, 1991. Data submitted on hard copy (paper) should be submitted within thirty (30) days of the baby being discharged. Electronic data should be no later than one month after the close of each quarter, based on the date of discharge of the baby. The following table summarises the due dates for electronically submitted PDC data:

<table>
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<th>Time period</th>
<th>Date of data submission</th>
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<tr>
<td>Quarter 1 (1 Jan - 31 Mar)</td>
<td>01 May</td>
</tr>
<tr>
<td>Quarter 2 (1 Apr - 30 Jun)</td>
<td>01 August</td>
</tr>
<tr>
<td>Quarter 3 (1 Jul - 30 Sep)</td>
<td>01 November</td>
</tr>
<tr>
<td>Quarter 4 (1 Oct - 31 Dec)</td>
<td>01 February (the following year)</td>
</tr>
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2 DATA ITEMS TO BE REPORTED

2.1 Demographic details of mother

- Unit record number of Mother
- Hospital name
- Hospital code
- First name
- Family name
- Address
- Mother’s date of birth
- Indigenous status of mother

2.2 Previous Pregnancies

- Previous pregnancy greater than 20 weeks
- Number of previous pregnancies greater than 20 weeks
• Was the last birth by caesarean section
• Total number of previous caesarean sections

2.3 This pregnancy
• Estimated date of confinement (EDC)
• Was antenatal care received
• Duration of antenatal care
• Number of antenatal visits
• Diabetes mellitus
• Gestation diabetes
• Chronic hypertension
• Preeclampsia
• Gestational hypertension
• Hepatitis B surface antigen positive
• Smoking in first half of pregnancy
• Average number of daily cigarettes smoked in first half of pregnancy
• Smoking in second half of pregnancy
• Average number of daily cigarettes smoked in second half of pregnancy

2.4 Labour and delivery
• Onset of labour
• Type of augmentation or induction of labour
• Indication for induction of labour
• Presentation at birth
• Anaesthesia for labour
• Type of birth
• Main indication for caesarean section
• Anaesthesia for delivery
• Perineal status
• Episiotomy
• Surgical repair of the vagina or perineum
• Management of the third stage

2.5 Baby
• Unit record number of the Baby
• Baby birth date
• Sex
• Plurality
• Plurality number
• Birth weight
• Estimated gestational age
• Apgar
• Resuscitation of baby
• Indigenous status of baby

2.6 Maternity care
• Model of care
• Continuity of carer program
• Mother referred from another hospital
• Referral hospital
• Referral before or after the onset of labour
• Place of birth

2.7 Postnatal care of mother and baby
• Postpartum haemorrhage requiring blood transfusion
• Congenital condition
• Admitted to SCU/NICU
• If admitted to NICU: was the congenital condition the main reason for admission
• Vitamin K
• Hepatitis B birth dose

2.8 Discharge status of mother and baby
• Discharge status of mother
• Discharge status of baby
• Mother’s date of discharge or transfer
• Hospital mother transferred to
• Baby feeding on hospital discharge
• Baby’s date of discharge or transfer
• Hospital baby was transferred to
• Baby transferred by NETS

3 METHOD OF REPORTING
• Data may be submitted electronically or by paper form
• Data submitted electronically must be provided in a specified format, which may be obtained from the Project Officer, Data Collections and Quality Unit
• Data submitted on paper form must be completed and returned to NSW Department of Health within thirty (30) days of the baby being discharged. The PDC forms can be obtained from Industrial Printing Co. by faxing or emailing the Order Form accompanied with the local Purchase Order.

   Industrial Printing Co.
   Telephone: 02 6352 3555
   Facsimile: 02 6352 2446
   Email: print@ipc.com.au

4 DATA QUALITY
• Data quality checks are made to ensure that all fields are complete and there are no inconsistencies in the data within a particular record.
• Incomplete records or records with errors will be returned to the hospital of origin and must be completed and/or corrected and returned to the Data
Collections and Quality Unit of the NSW Department of Health within the time stipulated.

- In order to validate the enumeration of births, each year a list of reported births are sent to each hospital and validated against the hospital birth register.

5 SECURITY OF DATA

- Data sent in hard copy (paper) format must be kept secure at all times. This means records must be sent by secure post (or courier) using a service that records the name of persons handling the data.
- Data sent in hard copy should be submitted to:
  NSW Perinatal Data Collection
  Data Collections and Quality Unit
  Demand and Performance Evaluation Branch
  NSW Department of Health
  Locked Bag 961
  North Sydney, NSW 2059
- Electronic data submitted by public hospitals must be loaded into the secure website provided by NSW Department of Health at https://mdcos.health.nsw.gov.au
- Electronic data from private hospitals must be zipped and password protected before emailed to the Project Officer for NSW Perinatal Data Collection at Elvis.Maio@doh.health.nsw.gov.au

6 PDC INFORMATION – ACCESS AND DISSEMINATION

- Summary information for NSW is published annually in the NSW Mothers and Babies Report.
- De-identified unit record data are provided to the AIHW National Perinatal Statistics Unit for inclusion in the national perinatal data collection.
- De-identified unit record data may be obtained via the Health Outcomes Information Statistical Toolkit (HOIST), which is accessible by staff of the NSW Department of Health and public health services subject to signing of a confidentiality agreement.
- Access to de-identified PDC unit record data may also be sought by written request to the Director, Centre for Epidemiology and Research.

7 FURTHER INFORMATION

For further information about this policy directive or the PDC, contact

Elvis Maio  
Project Officer, Data Collection and Quality Unit  
Demand and Performance Evaluation Branch

Phone: 02-9391 9199  
E-mail: Elvis.Maio@doh.health.nsw.gov.au

or requests may be faxed to the Data Collections and Quality Unit on 02-9391 9070