

The Wisconsin Experience Getting In-Step with NewSTEPs Quality Indicators

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Annual Review of Patient Database

accurate count of infants screened correctly identify first and subsequent screens

Pull all specimens by birth year (with demographics)

- Sort by:
 - Mother's name
 - 2. Date and time of birth
 - 3. Patient name
- Check for repeats misidentified as first specimens
- Check for missed patient merges



Elements Added to LIMS

screening specimens

- Date and time specimens received in lab
- Date and time providers notified of presumptive positive results
- Flag for out of state births
- Discrete reasons for unsatisfactory specimens
- Flags (field-specific) for missing essential information
- Documentation of not-screened status



Elements Added to LIMS

short-term follow-up

- Worklists for follow-up unacceptable specimens
 - out of range results
- External confirmatory results
- Date of diagnosis
- Date treatment initiated



QI 1: Percent Specimens Unacceptable Due to Improper...

1a) ... collection1b) ... transport

 Reason(s) for unsatisfactory specimen are designated and stored discretely to enable count of specimens in each category



QI 2: Percent Specimens Missing State-Defined Essential Information

- Essential information
 - ✓ Birth date AND time
 - ✓ Collection date AND time
 - ✓ Birth weight
 - ✓ Gestational age
- Specimens automatically flagged when <u>any</u> of the six fields are not initially entered (*because information not provided, not legible, or otherwise problematic*)
- Able to count specimens 'missing' information at both the specimen- and field-level



QI 3: Percent Eligible Infants Without a Newborn Screen

- Wisconsin requires a card submitted for every baby born, regardless of blood collection
- If blood not collected, reason (parent refusal, transferred, deceased) is documented and stored discretely enabling tracking and follow-up

(For details, see Poster 40)



QI 4: Percent Infants Without Recorded Resolution

4a) unacceptable specimens4b) out-of-range results

- Upon final verification, specimens automatically drop to specific follow-up worklists
- Summary reports (including all specimens received for patients on follow-up worklist) allow identification of any patients lacking subsequent valid specimen



QI 5: Timeliness of Newborn Screening Activities

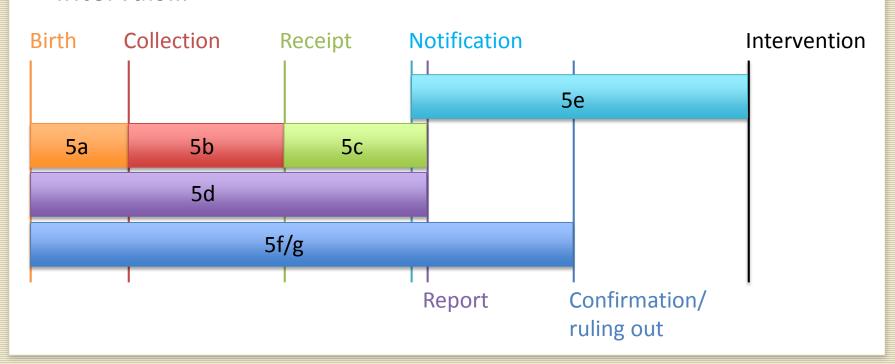
- a) Birth to collection
- b) Collection to receipt in lab
- c) Receipt to reporting out results
- d) Birth to reporting out results
- e) Notification of out-of-range results to intervention
- f) Birth to confirmation of diagnosis
- g) Birth to ruling out diagnosis

added to LIMS



QI 5: Timeliness of Newborn Screening Activities

With instant of all key events in LIMS, able to calculate time intervals...



MISSING KEY INFORMATION

DEC 1 of 24 specimens were missing any of the following pieces of key information:

BIRTH DATE and TIME BIRTH WEIGHT COLLECTION DATE and TIME GESTATIONAL AGE

Period At A Glance		% Specimens Missing Key Information			
	SEP	OCT	NOV	DEC	Period Total
Submitter (N)	0	2	0	1	3
Submitter (%)	0.0%	8.0%	0.0%	4.2%	3.1%
State (%)	3.8%	3.9%	3.8%	3.9%	3.9%

QI 2



UNSATISFACTORY SPECIMENS

DEC 2 of 24 specimens were unsatisfactory

Reason(s) For Unsatisfactory Designations:

A specimen may have more than one reason
for being deemed unsatisfactory for testing.

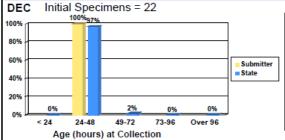


Period At A Glance		% Specimens of Unsatisfactory Quality:			
	SEP	OCT	NOV	DEC	Period Total
Submitter (N)	0	0	0	2	2
Submitter (%)	0.0%	0.0%	0.0%	8.3%	2.0%
State (%)	1.3%	1.3%	1.2%	1.1%	1.2%
Additional (N)	* 0	0	0	0	0

^{*} Specimen(s) unsatisfactory for reason(s) outside of submitter's control are excluded from submitter and state %.

QI 1



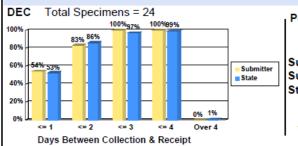


Period At A Glance	% Initial Specimens Collected Within			
	Recommended 24-48 Hours:			

	SEP	OCT	NOV	DEC	Period Tota
Submitter (N)	19	25		22	
Submitter (%) State (%)	95.0%	100.0%	100.0%	100.0%	99.0%
State (%)	96.9%	97.5%	97.7%	97.3%	97.4%

QI 5a

DAYS BETWEEN SPECIMEN COLLECTION AND RECEIPT AT WSLH



Period At A Glance

% Specimens Received Within 3 Days After Collection:

	SEP	OCT	NOV	DEC	Period Total
Submitter (N) 20	25	29	24	98
Submitter (%	() 100.0%	100.0%	100.0%	100.0%	100.0%
State (%)	96.5%	99.0%	98.2%	97.3%	97.7%

WSLH has a target goal of receiving 95% of specimens within three days after collection.

QI 5b

Included on monthly report to submitters

QI 6: Percent Infants With Out-of-Range Results (Referral to Evaluation) by Disorder

 Specimens referred to evaluation are tagged* discretely by disorder

*specific follow-up task(s) automatically added upon result verification

 Summary reports group tagged specimens by patient to obtain count for each disorder



QI 7: Incidence of Confirmed Disorder Detected

- Confirmatory results entered into LIMS
- Disorder-specific flag added manually to those patients confirmed through follow-up to be affected by disorder
- NewSTEPs case template populated for upload to data repository



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