Guidance for Vermont Oxford Members on Completing
The Leapfrog Group Hospital Survey High-Risk Delivery Measures

The VON numbers that you need can be found only on Vermont Oxford Network’s Nightingale Internet Reporting System.

If you have a username and password, go to: https://nightingale.vtoxford.org

Enter your Member Login email address and password in the boxes provided. Then click the Sign In button. At the next screen, if you have access to data at more than one center, choose the appropriate center from the drop-down menu.

If you need to reset your password, click on Reset Forgotten or Expired Password.

If you do not have access to Nightingale, click on Register New User. Complete the form and the system will send an e-mail to your center’s VON Services Administrator requesting that s/he create an account for you. Please contact your VON Services Administrator with any questions about Nightingale access. If you do not know your center’s VON Services Administrator, please contact your Vermont Oxford Network Account Manager.
A Note on Which Year to Report

Vermont Oxford Network collects data on the current calendar year. However, these data are preliminary and not “closed out.” Close out of the previous calendar year occurs from January to June, and complete Vermont Oxford Network data for the previous calendar year are posted to Nightingale by August. Leapfrog Hospital Surveys are first due in June, although centers can update surveys later. Therefore, the “year” of data that a center reports to The Leapfrog Group depends on the month in which the center completes the Leapfrog Hospital Survey.

If you are completing the Leapfrog Hospital Survey in 2020:

- **Surveys submitted prior to September 1, 2020**: 2018 VON data
- **Surveys (re)submitted on or after September 1, 2020**: 2019 VON data

If you have any questions, please contact your Vermont Oxford Network Account Manager.

A Note on the Leapfrog Scoring

The Leapfrog score is created using the following:

- The number of very-low-birth-weight infants (infants < 1500 g) admitted by your center
  OR your center’s Death or Morbidity SMR
  AND
  Your center’s antenatal steroid rate for infants 24-33 weeks GA

- To meet the standard a hospital needs:
  - A volume of 50 or more and an antenatal steroid rate of 90% or greater OR
  - A Death or Morbidity SMR and lower and upper bounds all below 1 (e.g., SMR: 0.6; LB: 0.2; UB: 0.8) and an antenatal steroid rate of 90% or greater

To Find the Death or Morbidity SMR

Click on the “Risk Adjusted” tab

Click in the “Add Measure” box, choose “Death or Morbidity” from the Add Measure drop-down menu, and click “Add Measure.” Make sure the “1 Year” box is blue, and the Population is 501 to 1500 Grams. The “Year” drop-down menu will automatically set to the last year for which your center has closed out data.
To Report the Death or Morbidity SMR

You will report the Death or Morbidity SMR (shrunken), SMR 95% Lower, and SMR 95% Upper. You will also report the N of infants next to the SMR. **These numbers are found in the table below the chart.**

In the example below, the N is 595. The SMR is 1.0. The SMR 95% Lower is 0.9. The SMR 95% Upper is 1.1.

Note: The SMR 95% Lower is always less than the SMR. The SMR 95% Upper is always more than the SMR.
To Find Antenatal Steroids, GA 24 to 33

Click on the “Comparison Data” tab. Click “Clear All Measures.”

In the box, start typing “antenatal” and Antenatal Steroids – GA24-33 will appear in the box. Click on it and click on “Add Measures”. From the “Start Year” and “End Year” drop-down menus, if you are running your report on or before September 1, 2020, change the “Year” drop-down menu in the right-hand column to 2018. If you are running your report after September 1, 2020, change the “Start Year” and “End Year” drop-down menus to 2019. Make sure that the population is “All VLBW Infants,” the location is “All Infants,” and that “Show Survivors Only” is not checked.
To Report Antenatal Steroids, GA 24 to 33

The data can be found in the table below the chart. The numerator is the Cases. The denominator is the N. In the example below, the numerator is 389 and the denominator is 440. The numerator is always smaller than the denominator.
To Report Very-Low-Birth-Weight Volume

Please follow these instructions from The Leapfrog Group:

Hospitals electing to report on Volume for High-Risk Deliveries instead of using their VON Report, need to select Volume in Section 4F, Question #3 and then answer questions #4-5 based on Leapfrog's measure specifications which are provided in the Hard Copy of the Survey (available for download here: http://www.leapfroggroup.org/survey-materials/survey-and-cpoematerials).