

# **The BORN Brief**

SUPPORTING PEOPLE WHO SUBMIT BORN DATA

## IN THIS ISSUE...

- NEW! Clinical Report Spotlight
- NEW! BORN Congenital Anomaly Picklis
- BORN Information System (BIS) Training
- Resource
- Midwifery Updates
- BORN Annual Report



## You Asked, We Listened!

BORN has changed its password expiry duration. This means that you will only be prompted to reset your password on an **annual basis, instead of every 90 days**.

#### CLINICAL REPORT SPOTLIGHT: SAFE USE OF OXYTOCIN IN PREGNANCY

BORN has launched a new clinical report in the BORN Information System (BIS) called the **Safe Administration of Oxytocin report**. The purpose of the Safe Administration of Oxytocin report is to facilitate hospital monitoring of key safety indicators. The report is available to those with access to hospital clinical reports in the BIS, which can be granted by the BORN Local Administrator at your organization.

#### The Safe Administration of Oxytocin Report includes:

- Hospital rates, as well as level of care, birth volume and provincial comparators
- Frequencies and percentages for all BORN-specific measurement indicators referenced in the <u>Provincial Council</u> for Maternal and Child Health (PCMCH) - Safe <u>Administration of Oxytocin Guideline (2019)</u>.



To learn more about the report, watch **BORN's Safe** Administration of Oxytocin Webinar.

Other questions about viewing or interpreting this report? <u>Contact your BORN Regional Coordinator!</u>

## HEW

## THE BORN CONGENITAL ANOMALY PICKLIST IS NOW SEARCHABLE!

BORN has added search functionality to the "Congenital Anomalies Suspected" and "Congenital Anomalies Confirmed" data element picklists (Birth Child, Postpartum Child, and NICU encounters).

#### How to use the search function:

- Type an anomaly in the search bar to start filtering the picklist.
- A synonym list has been included to facilitate the search, allowing for alternate words to retrieve the same results.

Search from anomalies and synonyms	
None None	
<ul> <li>Central Nervous System (CNS) Anomalies &amp; Neural Tube Defects (NTD)</li> </ul>	
Eye Anomalies	
Ear, Face and Neck Anomalies	
Oro-facial Clefts	
Thorax Anomalies	
▼ Cardiovascular Anomalies	
Aortic arch - Double	Double aortic arch, Double AoA
Aortic arch - Interrupted	Atretic transverse aortic arch, Aortic arch obstruction
Aortic arch - Right	Right-sided aortic arch, right aortic arch
Aortic atresia/Hypoplastic aortic arch	AoAtr, Underdeveloped aortic arch, Aortic arch hypoplasia, aortic valve atresia, hypoplastic AA
Aortic valve stenosis	AS, AoS, Aortic stenosis, Narrowing of aortic valve, Valvular aortic stenosis
Arrhythmia	Irregular heart beat, Abnormal heart rate, Arrhythmias, Irregular heartbeat, Cardiac arrhythmia, Heart rhythm disorders, Cardiac rhythm disturbances, Cardiac arrhythmias; tachycardia, bradycardia

BORN reports congenital anomaly data to the Canadian Congenital Anomaly Surveillance System (CCASS).

Your submissions are critical to ensuring the capture of accurate congenital anomaly data.



## BORN INFORMATION SYSTEM (BIS) TRAINING RESOURCES

BORN has many resource documents to support your data entry, data quality, and data use. Previously available on the BORN website, all reference guides and training materials are now housed within the BIS.

TO ACCESS BIS RESOURCES AND TRAINING GUIDES:

- 1. Log in to the BIS.
- 2. Select "HELP" in the top banner.
- 3. Select "BORN Reference Guides and Training Materials".
- 4. Select the category of interest (i.e. Hospital, Midwifery, etc.)

### **MIDWIFERY UPDATES**

#### **AOM #MIDWIFERYDATAMATTERS CAMPAIGN UPDATES**

The Association of Ontario Midwives (AOM) has recently developed the following resources for Ontario midwives:

Capturing Consultations and Transfer of Care in BORN – The AOM-BORN Knowledge Translation Task Force created an **infographic** and **FAQ** to provide guidance and help to streamline BORN data-entry practice related to **documenting consultations and transfers of care** across midwifery practice groups in Ontario.

Deferred Cord Clamping (DCC) Resource – In March 2022, the Canadian Paediatric Society (CPS) released a **position statement** recommending up to 60 seconds of DCC based on improved hematological outcomes for newborns. The CPS advises that deferred cord clamping beyond 60 seconds increases the risk for hyperbilirubinemia. The AOM has since developed a **clinical data discussion around DCC, using BORN data**, which answers many questions about DCC practice, in the context of midwifery care.

#### NEW MIDWIFERY CLINICAL REPORT: Key Indicator Midwifery - Infant Summary & Pregnancy/Birth Summary

Two new Midwifery Clinical Reports are now live in the BIS: **Key Indicator Midwifery – Pregnancy & Birth and Key Indicator Midwifery – Infant.** These reports show counts and frequencies of pregnancy/birth and infant indicators, similar to those offered in the Hospital Key Indicator Reports.

#### **BORN ANNUAL REPORT**

The **BORN 2021-2022 Annual Report** is now available (<u>French version also available</u>)! You will find:

- Examples of the impact of BORN data,
- Updates on research, and
- Key numbers and stats.





