

# TIMELINESS STUDY – HOSPITAL REPORTS OF ADVERSE PREGNANCY OUTCOMES RECEIVED IN 2024

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#### **PURPOSE**

Timeliness studies are performed periodically by the Illinois Department of Public Health (IDPH) Adverse Pregnancy Outcomes Reporting System (APORS) to evaluate the time hospitals take to report APORS cases. IDPH regulations require Illinois hospitals to report infants who meet the APORS case definition within seven days of the infant's hospital discharge, but the actual timeliness often varies from hospital to hospital. The assurance of timeliness is important because APORS cases are considered high-risk and, as such, are referred to local community health agencies for follow-up services. The sooner intervention services begin, the better the outcomes for high-risk infants and their families. This study assesses the performance of hospitals in making timely reports in 2024. The results are used to provide hospital-specific feedback to improve case reporting.

#### **METHODS**

In 2024, 90 hospitals reported cases to APORS either electronically through the APORS database or on paper reporting forms provided by APORS. The hospital provides the infant's QC 25:02 APORS

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hospital discharge date and the reporting date for paper reports; the reporting date is generated automatically by the data system for electronic reports. These two dates were compared to determine the hospital processing time for each report. For 2024, a total of 9,304 reports were analyzed. The average processing time was calculated for each hospital and the percentage of cases reported within the seven-day requirement. An APORS case is considered timely if the hospital completes the report within seven days of the infant's discharge. Cases for whom drug exposure was the only case condition were not included in this study because obtaining results from drug testing may take longer than seven days.

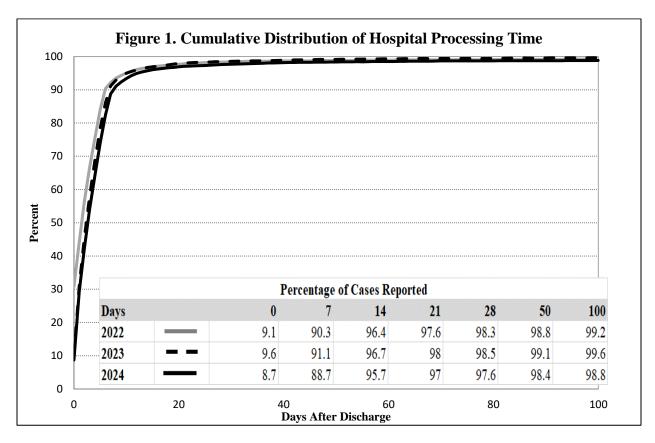
The APORS Program also looked at the time it took for reports to arrive at IDPH. The reporting date on the paper report and the date the APORS Program received the form were compared to calculate transit time. Extended transit times to IDPH mean that referrals to local community health agencies for follow-up services are slower than they should be. Transit times for cases reported through the electronic data system are zero days.

#### **RESULTS**

Processing Time for Cases Reported in 2024. Among all the cases, the processing time ranged from 0 to 596 days, with the median being three days and the mean being 7.7 days. The mean and median difference indicates a right-skewed distribution of processing times. The cumulative distributions of cases concerning reporting time are displayed in Figure 1; 42.3% of cases were reported within two days, while 88.7% were reported within the required seven days. Ninety-nine percent of cases were reported within 158 days. For comparison purposes, percentages of cases reported for 2022 and 2023 are also shown in the inset table of Figure 1. The percentage of cases reported across all time points in 2024 was lower than in 2022 and 2023.

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Table 1 shows the average hospital processing time ranged from 0 to 126 days. Sixty-five hospitals (72.2%) averaged seven or fewer days to process their reports. Hospital names on Tables 1 and 2 were eliminated to protect confidentiality. Table 2 shows that 47 (52.2%) hospitals reported 90% of cases or more within seven days of an infant's discharge.



Source: Illinois Department of Public Health, Adverse Pregnancy Outcomes Reporting System as of January 2025

Table 1. 2024 Cases: Average Time for Processing Infant Discharge Records by Hospital

Hospital Number	Number of Reports	Average Days	Hospital Number	Number of Reports	Average Days	Hospital Number	Number of Reports	Average Days
1	26	7.7	32	4	78.8	63	2	1.0
2	190	7.1	33	114	3.6	64	6	0.2
3	61	3.8	34	381	9.2	65	99	6.0
4	109	10.1	35	23	2.2	66	226	7.7
5	81	3.9	36	3	12.3	67	248	5.4
6	323	6.5	37	26	3.0	68	520	1.9
7	120	8.0	38	171	3.4	69	4	44.3
8	14	52.1	39	497	4.1	70	51	1.1
9	3	74.0	40	35	4.0	71	99	5.8
10	86	4.9	41	45	20.3	72	332	58.9
11	86	5.4	42	17	3.2	73	2	4.0
12	1	1.0	43	26	3.1	74	20	8.6
13	12	14.7	44	20	4.5	75	19	1.2
14	53	6.4	45	141	1.7	76	867	5.3
15	9	6.4	46	87	5.1	77	18	4.8
16	12	2.6	47	28	16.9	78	124	3.9
17	48	2.8	48	372	4.8	79	202	3.2
18	342	3.3	49	24	6.2	80	423	11.6
19	11	105.1	50	15	1.2	81	78	3.3
20	13	1.1	51	111	3.5	82	96	0.8
21	28	17.0	52	69	1.6	83	21	5.9
22	262	5.7	53	34	1.6	84	15	3.7
23	138	3.1	54	44	10.4	85	1	0.0
24	13	1.9	55	4	125.8	86	5	5.6
25	49	1.2	56	42	3.9	87	265	3.1
26	59	13.4	57	13	2.2	88	49	5.4
27	276	1.9	58	51	33.2	89	73	5.0
28	9	1.9	59	115	8.9	90	35	5.1
29	10	8.6	60	16	2.8			
30	6	111.8	61	8	0.6			
31	76	0.4	62	342	5.6	APORS AV	VERAGE	7.7

Source: Illinois Department of Public Health, Adverse Pregnancy Outcomes Reporting System as of January 2025.

Table 2. 2024 Cases: Percentage of Reports Submitted Within Seven Days by Hospital

Hospital Number	Number of Reports	% Reports in 7 Days	Hospital Number	Number of Reports	% Reports in 7 Days	Hospital Number	Number of Reports	% Reports in 7 Days
1	26	84.6	32	4	75.0	63	2	100.0
2	190	96.8	33	114	93.9	64	6	100.0
3	61	93.4	34	381	69.6	65	99	77.8
4	109	74.3	35	23	95.7	66	226	88.9
5	81	86.4	36	3	66.7	67	248	79.4
6	323	81.7	37	26	88.5	68	520	98.8
7	120	77.5	38	171	94.2	69	4	75.0
8	14	21.4	39	497	90.7	70	51	100.0
9	3	33.3	40	35	91.4	71	99	89.9
10	86	87.2	41	45	75.6	72	332	57.2
11	86	87.2	42	17	94.1	73	2	100.0
12	1	100.0	43	26	96.2	74	20	70.0
13	12	83.3	44	20	80.0	75	19	100.0
14	53	79.2	45	141	100.0	76	867	93.4
15	9	88.9	46	87	88.5	77	18	83.3
16	12	100.0	47	28	85.7	78	124	97.6
17	48	97.9	48	372	91.9	79	202	93.6
18	342	95.0	49	24	66.7	80	423	87.5
19	11	63.6	50	15	100.0	81	78	92.3
20	13	92.3	51	111	93.7	82	96	100.0
21	28	64.3	52	69	98.6	83	21	66.7
22	262	80.9	53	34	100.0	84	15	93.3
23	138	95.7	54	44	90.9	85	1	100.0
24	13	100.0	55	4	50.0	86	5	80.0
25	49	100.0	56	42	90.5	87	265	95.1
26	59	91.5	57	13	100.0	88	49	89.8
27	276	100.0	58	51	84.3	89	73	89.0
28	9	100.0	59	115	86.1	90	35	91.4
29	10	60.0	60	16	87.5			
30	6	50.0	61	8	100.0			
31	76	98.7	62	342	93.6	ALL APO	RS CASES	88.7

Source: Illinois Department of Public Health, Adverse Pregnancy Outcomes Reporting System as of January 2024.

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Transit Time for Cases Reported in 2024. Among all the cases, transit time ranged from 0 to 239 days and the mean being 0.10 days and the median zero days. No hospitals had an average transit time of more than seven days. Five hospitals (5.6%) had at least one record that took more than seven days in transit.

## **DISCUSSION**

Case-Level Assessment. In 2024, more cases (21%) were reported on the day after discharge than on any other day. This day, the following four days, and the day of discharge were the top reporting days, accounting for 74% of the reports. Eighty-nine percent of cases were reported within seven days of discharge, as required by administrative rules. This is a decrease from 2023, when 91% of cases were reported within seven days. Timely reporting assures that newborns can be offered case-management services soon after discharge from the hospital, when the children and families will most benefit.

Hospital-Level Assessment. The study's main objective is to assess the timeliness of reporting APORS cases at the hospital level. To that end, individual hospitals were rated based on reports received in 2024. Nine hospitals were not rated as they submitted too few cases (less than 5) to provide stable estimates. Table 3 illustrates how the categorical ratings were determined. Of the 81 rated hospitals, 65 (80.2%) met compliance standards. The percentage of hospitals meeting compliance standards in 2024 was less than in 2023, when 85.9% were compliant.

Table 3. Hospital Ratings for Compliance with Timeliness Standards in 2024

Rating	Cases Reported Within 7 Days	Number of Hospitals	Percentage
Compliant Overall	80 - 100%	65	80.2
Not Compliant	< 80%	16	19.8

A facility-specific summary report has been distributed to each hospital (see the Appendix for an example). The summary report documents each facility's level of compliance with APORS' requirements and contains information about the transit times for a facility's reports. Hospitals are also provided with the statewide report to have an overview of the study and its results.

Training and Education. Hospital training and education are essential for APORS data quality, case completeness, and timeliness. APORS webinar recordings were made available for viewing by hospital staff and perinatal administrators. Additionally, throughout the year, APORS provided individual-level training for facilities with compliance challenges or staff turnover.

APORS regards the timeliness study as an important tool for determining hospital compliance with reporting standards and will repeat this study annually. The hospital-specific timeliness reports serve as a valuable measure of facility performance and can assist hospital managers with identifying issues regarding timely reporting.

## **Appendix** Sample Report

# Illinois Department of Public Health Adverse Pregnancy Outcomes Reporting System

# Timeliness Study for Cases Submitted in 2024 Hospital Compliance Report

## January 2025

**Timeliness Standard for Reporting APORS Cases:**Cases must be reported within seven days of the infant's discharge or death.

# Hospital Name Facility ID Number

Cases	Average Time	Percent of Cases	Compliance
Reported	(Days)	Reported within 7 Days	Rating
29	3.2	89.5	Compliant

**Compliant** means that 80% to 100% of the cases were reported within seven days.

**Not Compliant** means fewer than 80% of the cases were reported within seven days.

**Not rated** means the hospital reported fewer than five cases or was an out-of-state hospital and not subject to APORS regulations.

The following information does not have a bearing on compliance or non-compliance with the timeliness standard for reporting APORS cases, but delays in reporting may impact the care a child receives after discharge from the hospital.

Average Time in Transit (Days)	Percent of Cases Received within 7 Days of Being Reported		
2.8	95%		