

# RESOURCES UFOR PUBLIC HEALTH PROJECT WATCH/ WV BIRTH SCORE



# WORKING IN APPALACHIA TO IDENTIFY AT-RISK INFANTS, CRITICAL CONGENITAL HEART

#### **2017 STATISTICS**

- 19,056 infants scored
- 16,073 WV residents

### **AMONG WV RESIDENT BIRTHS:**

- 12% High Birth Score
- 52% Medicaid
- 23% Tobacco Use During Pregnancy
- **7%** Gestational Diabetes
- **7%** <19 years of Age of Mother
- 37% Exclusively Breastfed
- 9% <2500 grams (LBWT)

### WHAT IS THE BIRTH SCORE?

A screening tool that identifies infants who are more likely to be at-risk of death within the first vear of life. The "Score" currently includes seven factors with categorical weights. Factors include: birth weight, infant sex, previous pregnancies, nicotine use during pregnancy, maternal age, maternal education and feeding intention. A score above 99 is considered "High" or atrisk. Three additional factors automatically give a high score. This includes, birth weight of less than 1500 grams, congenital abnormality, and 5 minute APGAR score of <=3. In addition to the Birth Score, three other state-mandated screenings are included on the tool: 1) Newborn Hearing Screening 2) Critical Congenital Heart Disease Screening and 3) Substance Use & NAS Surveillance data.

#### WHY BIRTH SCORE?

In 1984 Dr. David Myerberg initiated the implementation of a scoring system to identify West Virginia infants who may die of Sudden Infant Death Syndrome (SIDS) in the postneonatal time period (30 days to one year). The scoring tool was very similar to one developed by Dr. Robert Carpenter, used in England, called the Sheffield Birth Score. Dr. Myerberg named the scoring tool "WV Birth Score" and it has been used statewide since its inception in 1984.

## **WV STATE CODE**

In 1998, the WV Legislature House Bill establishing the West Virginia Birth Score Program requiring all WV birthing hospitals or facilities to ensure that a Birth Score is determined for all babies born in WV. A revised Birth Score implemented in July 2007. The revised instrument allows us to collect other information beyond the infant "Score" data which is important for the maternal/newborn population.

PROJECT WATCH is funded under a grant agreement between the WVU Department of Pediatrics and the WV DHHR- Office of Maternal Infant and Child Health.

### **PROGRAM REFERRALS**

- Primary Care Physician
- Right From The Start
- WV Birth To Three
- HealthCheck
- WV Newborn Hearing Program

### **HOW IS DATA COLLECTED?**

WV Birth facility nursing staff collect the Birth Score data and either enter it using a secure web-based form or the data is uploaded directly from the hospital EMR on a weekly basis.

# **HOW CAN DATA BE USED?**

The primary objective of the Birth Score is to link infants with a high score to primary pediatric services for close monitoring during the first year of life. In addition, surveillance data can be used to inform policy and funding decisions, public health intervention design, and research projects. WV Hospitals, Pediatricians, state law makers and researchers can benefit from using the data.

# Contact us:

Robert C. Byrd HSC PO Box 9214 Suite 2350 Morgantown, WV 26505 Phone: 304-293-7302

Fax: 304-293-5491