

Making It to 39 Weeks:

Florida's Campaign to Reduce Early Elective Deliveries



Florida Perinatal Quality Collaborative

AT THE LAWTON AND RHEA CHILES CENTER FOR HEALTHY MOTHERS AND BABIES



Partnering to Improve Health Care Quality
for Mothers and Babies

EED Video Interview with District XII ACOG's Chair and Vice Chair

Robert W. Yelverton, MD, and Karen E. Harris, MD, sat down with the FPQC to discuss the issue of early term elective deliveries. With the support of the March of Dimes and District XII ACOG, the FPQC will be distributing this video to maternity hospitals statewide. The below article is a teaser for the full video.

OBGYNs and others involved in maternity care have believed babies would do well at ~37 weeks because they were "term" – meaning the babies' systems had developed enough that they would do just as well outside of the uterus as inside. "We've learned in the last few years...that a pregnancy lasts 40 weeks and when babies are delivered within a week prior to that time, there are symptoms and signs that are manifested and permanent problems that can exist that are relative to prematurity." (Yelverton)

"This has become a standard of care" - Yelverton



Higher rates of NICU admissions for babies delivered prior to 39 weeks is one indicator of poorer health outcomes. These babies are most commonly admitted to the NICU for short-term health issues such as respiratory complications, feeding difficulties, sepsis and intestinal problems.

Long-term poor health outcomes also are a concern. Brain growth in a baby born prematurely never catches up to that of a full-term baby. "School performance for these infants that are born prematurely is less than full-term infants." (Harris)

"We are probably impacting these children for life." - Harris

So why do some hospitals still have high EED rates? The issue is multifaceted with no single solution. One major aspect is patients' misperceptions about pregnancy. "We have trained our patients, unfortunately, wrongly about this. And, I tell my doctors and other health care providers, we don't blame the internet for that. We are responsible for that." (Yelverton) Women still often believe it is safe to deliver at 37 or 38 weeks and may ask for deliveries for convenience or the discomforts of pregnancy.

Physician factors may include continuity of care, financial reimbursement, cross coverage with other doctors, convenience and lifestyle. Also, there are doctors who do not grasp the significance of EED complications because they rarely come across them due to the small size of their practices. Finally, most doctors have been trained that a baby at 37 weeks is mature; and, it will take quite a few years to create attitudinal and behavioral change.



So what can be done? Florida rates have dropped over the last few years, but there is more to do. Since the issue is so complicated and local to each facility, reducing EED can't be resolved by white washing the issue. "The novel approach is not just educate physicians...but actually spend some time mentoring a

"We still have our work cut out for us, big-time." - Yelverton

hospital, getting to the issues, finding out what's going on in the facility." (Harris)

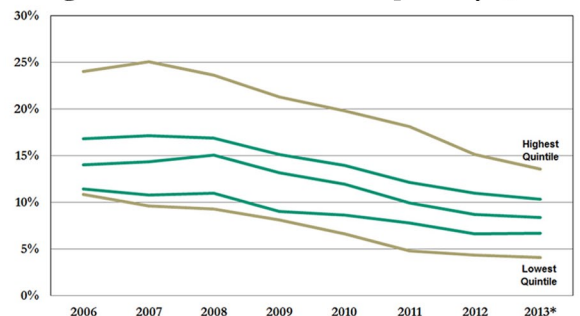
The MOD, District XII ACOG and the FPQC are here to help struggling hospitals in their efforts to reduce EED rates.

See the resources listed in the following pages to support efforts through links to materials and contact information.

For the short video, please contact Linda A. Detman, PhD, FPQC Program Manager, at ldetman@health.usf.edu or visit <http://health.usf.edu/publichealth/chiles/fpqc/eed.htm>.

According to birth certificate data, the rate of EED in Florida from 2006 to 2012 has decreased by 60%!

Percent of NMI Single Live Births <39 Wks Among Term Births for Florida Hospitals by Quintile



*PROVISIONAL Florida Live Birth Certificate Data (January - June 2013)

FPQC Resources Available to Assist Your Efforts in Reducing EED



The FPQC is pleased to provide this newsletter of resources to help your hospital reduce rates of EED. We are here to assist you with assessing and modifying hospital policies, providing educational resources and offering personal consultations. The resources we offer include:

Grand Rounds: We have leading obstetricians available to visit your hospital for Grand Rounds presentations, OB department meetings or other meetings with clinicians to discuss your EED challenges and to encourage efforts around eliminating elective deliveries before 39 weeks. Topics they can cover include: making the case for eliminating EED, how to mobilize a QI team and how to gain buy-in of your obstetrical staff.

■ As of January 2014, we have held 15 Grand Rounds presentations across the state with over 300 attendees.

■ Pre/post-test surveys demonstrated knowledge change on important learning points, such as:

- Participants indicated that they felt more qualified to discuss the risks and benefits of early delivery with patients and supported a “hard stop” approach to EED
- Participants better understood that stillbirth rates and lawsuits do not increase when non-medically indicated deliveries wait until 39 weeks
- More providers correctly answered that morbidity rates double for each gestational week a baby is delivered before 38 weeks



E-Bulletins: We publish a quarterly e-bulletin with relevant 39 week related research and share these with many of our partner organizations. You can find current and past e-bulletins at <http://tinyurl.com/FPQCbulletins>.

Provider Packets: We have developed a resource packet for providers with information on the risks of EED, talking points for your discussions with patients, support letters from District XII ACOG and a 39 week button!

Contact: To schedule Grand Rounds or order provider packets, contact Linda A. Detman, PhD, FPQC Program Manager, at ldetman@health.usf.edu or (813) 974-5865.

39 WEEK BANNER PROGRAM - RECOGNIZING HOSPITALS' ACHIEVEMENTS

The March of Dimes, District XII ACOG and the FPQC will publicly recognize those Florida hospitals that can demonstrate with data that they have an EED rate under 5%. If your hospital is eligible, you will receive a special recognition banner for display. The vinyl banner is approximately 6' by 3' and will feature your hospital's name and include the MOD and ACOG logos. Also, your hospital will be highlighted on the FPQC website. To learn more, contact Lori Reeves, MPH, Quality Improvement Initiatives, March of Dimes East Region, at lreeves@marchofdimes.com.



To learn more about the FPQC, visit <http://health.usf.edu/publichealth/chilescenter/fpqc>.

To contact the FPQC, email fpqc@health.usf.edu or call (813) 974-8888.

More Materials and Resources Available through Partner Organizations



In 2010, the March of Dimes spearheaded a campaign to eliminate non-medically indicated deliveries <39 weeks through quality improvement (QI) initiatives by creating a national collaborative comprised of the five most populous states - Florida, California, Texas, New York and Illinois. The March of Dimes and the FPQC partnered to aid the efforts of six Florida hospitals in the Big 5 Hospital QI Project, a year-long pilot test of the "California Maternal Quality Care Collaborative Elimination of Non-Medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age" toolkit. The toolkit can be located at <http://tinyurl.com/MOD39weekstoolkit>.

The project was extremely effective, and the results were published by the March of Dimes at the national level. To access the abstract, visit <http://tinyurl.com/Big5abstract>.

The March of Dimes continues to raise awareness through materials developed from an extensive marketing research study and focus groups. These materials can be found at <http://tinyurl.com/MOD39weekscatalog>.



Since 2012, the Florida Hospital Association (FHA), the FPQC and 41 birthing hospitals from around the state have worked together to reduce early elective deliveries (EED). Hospitals, participating in the FHA/Health Research & Educational (HRET) Hospital Engagement Network (HEN), implemented a "hard stop" policy and have seen EED rates fall by 80%. Moving into 2014, the goal of the FHA/HRET HEN is to reduce EED to 3% or less in participating hospitals, and to reduce OB harm by improving care and treatment for patients with preeclampsia and OB hemorrhage. FHA staff is available to assist with the development of leadership skills and engagement, safety culture, change management, quality improvement and teamwork.

Resources available at no cost to participating hospitals include:

- Change packages/toolkits
- Data support
- Face-to-face meetings
- Webinars with subject matter experts
- Coaching calls
- One-on-one improvement support
- Improvement Leaders Fellowship
- Infection Prevention Forum
- Pharmacist Roundtable

For additional information, contact Sally Forsberg, RNC, BSN, MBA, NEA-BC, CPHQ, CPC-H, FHA Director of Quality and Patient Safety, at sally@fha.org.



The Florida Association of Healthy Start Coalitions is working to increase knowledge and awareness in consumers throughout Florida about the importance of the last few weeks of pregnancy and avoiding a non-medically indicated delivery before 39 weeks. FAHSC conducted a statewide survey among pregnant women and women who had a baby within the last 18 months to understand knowledge about the last few weeks of pregnancy. Results showed that more than $\frac{3}{4}$ respondents felt it was safe to deliver before 39 completed weeks and nearly $\frac{1}{2}$ of providers offered an elective delivery. This study can be found at <http://tinyurl.com/FAHSCstudy>.

FAHSC also conducted focus groups among men and women in Florida to better understand how information is shared with parents and ways to improve patient and care provider interactions. The results of this focus group can be found in the FAHSC Prematurity Awareness Month Toolkit at <http://tinyurl.com/39weeksPAMtoolkit>.

FAHSC offers a variety of provider materials for planning events as well as materials developed for patients with information gathered from focus groups and surveys. You can locate these resources at <http://www.39weeksf.com/providers/>.

