

Decreased the NTSV Cesarean Section Rate from 23.2% in CY 2021 to 20.1% in CY 2025 YTD June at Northwestern Memorial Hospital. This was accomplished through development of communication tools/educational materials and data transparency.

BACKGROUND

The rapid increase in cesarean birth rates from 1996 to 2011 without clear evidence of concomitant decreases in maternal or neonatal morbidity or mortality raises significant concern that cesarean delivery is overused. Variation in the rates of nulliparous, term, singleton, vertex cesarean births also indicates that clinical practice patterns affect the number of cesarean births performed.¹



ILPQC, a State-wide Collaborative launched the *Promoting Vaginal Birth Initiative* in October 2020 to decrease the NTSV Cesarean Section rate.

N (nulliparous – first baby)

T (term ≥ 37 weeks gestation)

S (singleton no multiples)

V (vertex or head down presentation)

State of Illinois rate was 26.5% compared to the 2030 Healthy People goal of 23.6%.²

Baseline Data: October to December 2019*

- 21% NTSV Cesarean Section Rate
- 80% Compliance rate with ACOG/SMFM guidelines

*Of note baseline rates were pre-COVID. This project was launched during the COVID outbreak.

METHODS

Key Initiative Measures:

- Increase compliance in meeting ACOG/SMFM guidelines for NTSV cesarean sections. (American College of Obstetricians and Gynecologists/Society for Maternal Fetal Medicine)
- Increase the rate of providers, midwives and nurses trained on:
 - ACOG/SMFM guidelines for cesarean;
 - Labor management strategies and response to labor challenges; and
 - Protocols for facilitating decision huddles.

Interventions:

- Department Grand Rounds June 2021 (provide project overview and education on the ACOG/SMFM guidelines)
- Pre-Cesarean Decision Checklist
- Template for Documentation of Cesarean Section Indication in EMR
- Quarterly Provider Practice Report (provide Practice groups with their overall rate and individual physician rates; physician rates within each practice were unblinded in CY21Q4; practice rates were unblinded to the Department in September 2023)
- Patient Labor Induction Brochure (System Intervention)
- Staff Guide to Labor Support (System Intervention)

Pre-Cesarean Decision Checklist

Labor Induction Brochure

Staff Guide to Labor Support



RESULTS

Project Impact:

Figure 1: NTSV Cesarean Rate Trend

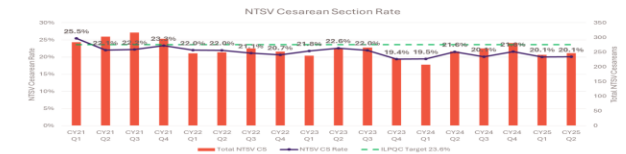


Figure 2: Rates by Race/Ethnicity

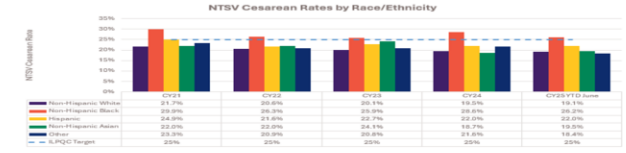
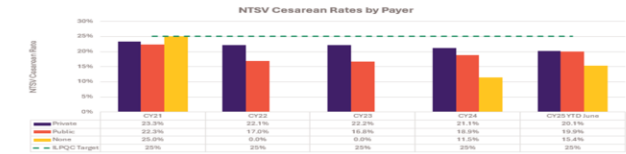


Figure 3: Rates by Payer



CONCLUSIONS

- NTSV Cesarean Section rates remain below targets. Cases are reviewed to identify opportunities to reduce disparities among race/ethnicity groups. ACOG/SMFM guidelines for indication are consistently met.
- NTSV Cesarean Section rates are tracked through our hospital Quality Committee. eCQM PC-02 data is reported to the Joint Commission as well as submitted for the USNWR Best Maternity Hospital and Leapfrog Group surveys.

REFERENCE

- (1) Safe prevention of the Primary Cesarean Delivery. Obstetrics Care Consensus No. 1. American College of Obstetricians and Gynecologists. Obstet Gynecol 2014; 123:693-711.
- (2) ILPQC PVB Factsheet 10.27.21