

**HEALTHY  
MOMS.  
STRONG  
BABIES.**

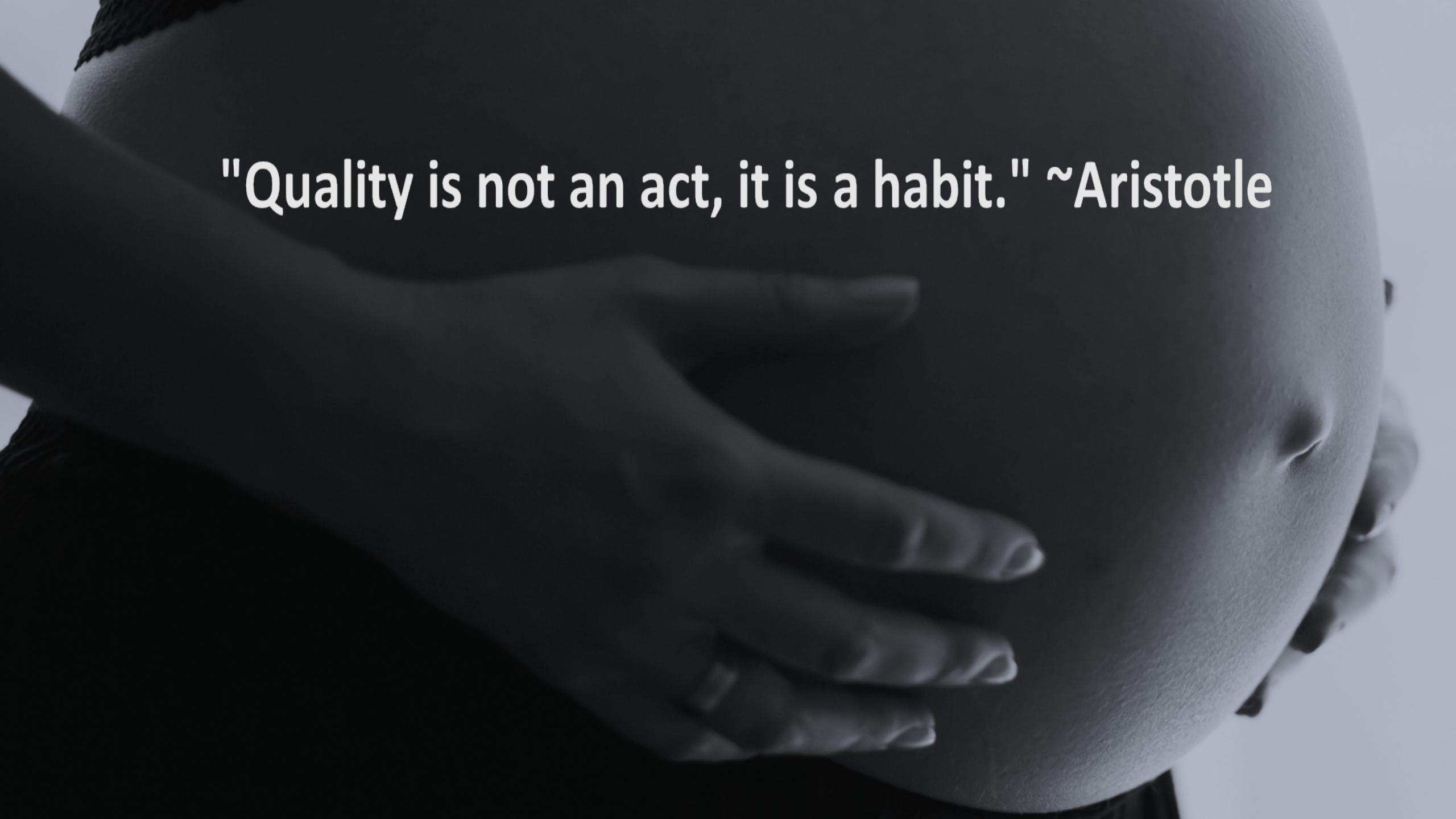


## STATE EFFORTS TO REDESIGN MATERNAL HEALTH CARE: PERINATAL QUALITY COLLABORATIVES

**Zsakeba Henderson MD, FACOG**

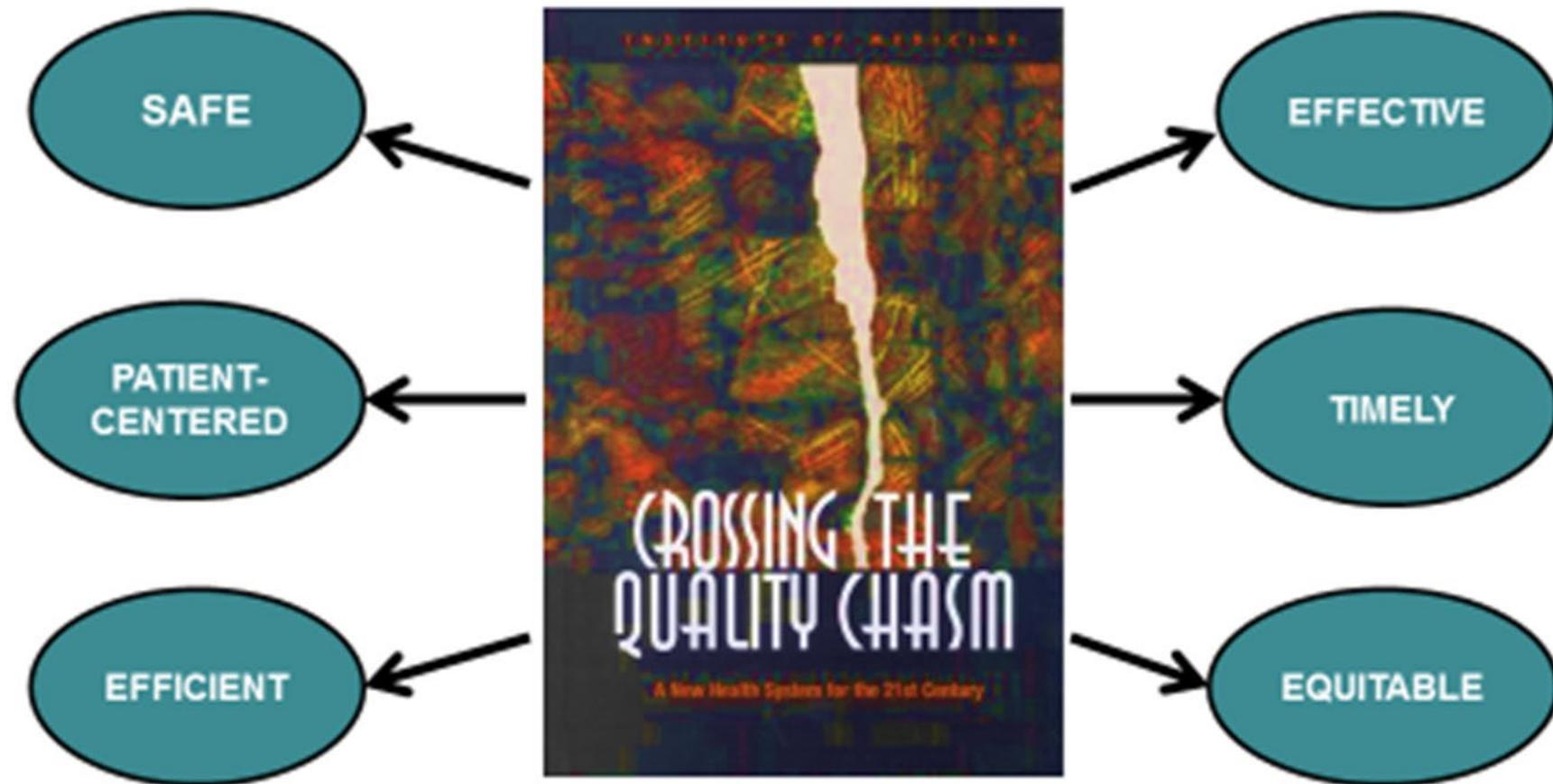
Deputy Medical & Health Officer  
Senior Vice President, MCH Impact  
March of Dimes

- Advancing Maternal Health Equity and Reducing Maternal Mortality: A Virtual Workshop
- June 7-8, 2021



"Quality is not an act, it is a habit." ~Aristotle

# SIX AIMS FOR IMPROVEMENT



*Institute of Medicine, National Academy Press, 2001*

# IMPROVING CARE IN HOSPITALS TO REDUCE MATERNAL MORBIDITY AND MORTALITY

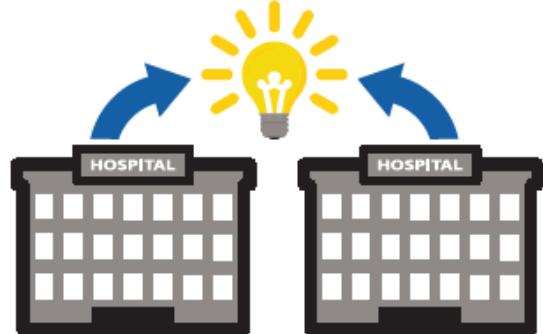
- Hospital quality may be a critical lever for improving outcomes
- More than half of maternal mortality and severe events are preventable
- Data have demonstrated that both *within-hospital* and *between-hospital* disparities exist for severe maternal morbidity.
  - Black women deliver in different and lower quality hospitals than whites
  - Quality of care received by women during childbirth may differ by race and ethnicity within individual hospitals

# PERINATAL QUALITY COLLABORATIVES (PQCS)

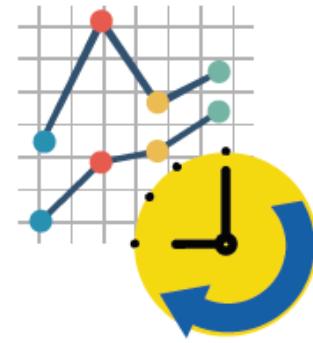
**State or multi-state networks of multidisciplinary teams that are working to improve measurable outcomes for maternal and infant health by:**

- Advancing evidence-informed clinical practices and processes using quality improvement (QI) principles
- Addressing gaps by working with clinical teams, experts and stakeholders, including patients and families
- Spreading best practices
- Reducing variation
- Optimizing resources to improve perinatal care and outcomes

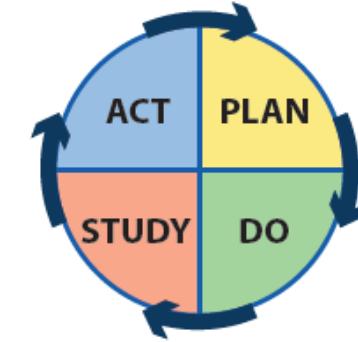
# KEY PQC STRATEGIES



Collaborative Learning



Rapid Response Data



Quality Improvement Science Support

**Ultimate Goal = improvements in population-level outcomes in maternal and infant health**

# ROLE OF REGIONAL PQCS

- Regional PQCs encourage
  - Taking on the responsibility of improving outcomes for the entire population of the region's mothers and infants
  - Understanding of one's regional network of perinatal care
  - Collaborating among teams from both the hospital and the community
  - Comparison of performance to hospitals that are operating within similar demographic, economic, and health services context
- Members of a regional quality improvement initiative represent a “community of change”

# THE POWER OF PQCS

- Active, “on the ground”, measurable change
- Ability to scale up improvements statewide
- Hospital-level leadership and ownership of efforts
- Synergy of multiple partners and stakeholders
- Power to change culture of care







## A Statewide Quality Improvement Initiative to Reduce Non-Medically Indicated Scheduled Deliveries

Marilyn A. Kacica<sup>1,2</sup> · J. Christopher Glantz<sup>3</sup> · Kuangnan Xiong<sup>1</sup> · Eileen P. Shields<sup>1</sup>  
Peter H. Cherouny<sup>4</sup>

➤ *Am J Perinatol.* 2021 May 2. doi: 10.1055/s-0041-1728835. Online ahead of print.

Clinical  
State  
Red  
Birth

## Improving the Timely Delivery of Antihypertensive Medication for Severe Perinatal Hypertension in Pregnancy and Postpartum

Patrick Schneider<sup>1</sup>, Patricia Ann Lee King<sup>2</sup>, Lauren Keenan-Devlin<sup>3</sup>, Ann E B Borders<sup>1</sup>

Heather L. Chapman, MD, MVE, Lauren King, MD, Scott D. Moore, MD, Susan E. Lusk, MD,  
Sandra Fuller, MD, Michael A. Krew, MD, Michael D. Monash, MD, Tom D. Tamm, MD,  
Jennifer L. Railit, MD, MPH, Jo M. Bouchard

Pediatrics  
December 2013, VOLUME 132 / ISSUE 6  
Quality Report

## Reducing Central Line–Associated

David Fisher, Keith M. Cochran, Lloyd P. Pro  
Daniela Testoni, Martin J. McCaffrey

Original Research  
Obstetrics

## Reduction of severe maternal morbidity from hemorrhage using a state perinatal quality collaborative

Presented at the 37th Annual Scientific Meeting of the Society for Maternal-Fetal Medicine, Las Vegas, NV, Jan. 23–28, 2017.

Elliott K. Main MD<sup>a</sup> □, Valerie Cape BA<sup>a</sup>, Anisha Abreo MPH<sup>a</sup>, Julie Vasher DNP, RNC-OB, CNS<sup>a</sup>, Amanda

ild MD, MPH<sup>a</sup>

nd Policy

Full Access

## Improvement Collaborative ing Rates in Tennessee

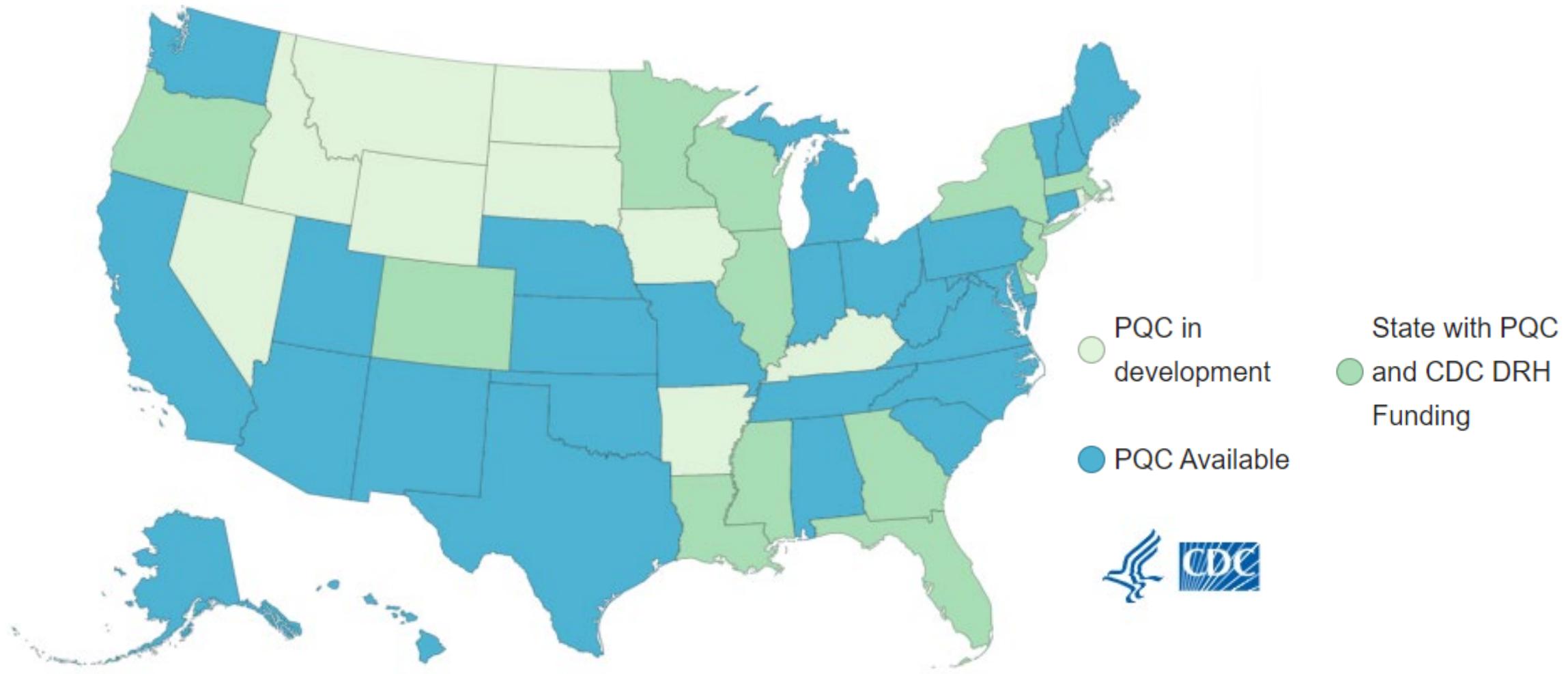
Barker, Theresa A. Scott, and Peter H. Grubb

JAMA | Original Investigation

## Hospital Quality Improvement Interventions, Statewide Policy Initiatives, and Rates of Cesarean Delivery for Nulliparous, Term, Singleton, Vertex Births in California

Melissa G. Rosenstein, MD, MAS; Shen-Chih Chang, MS, PhD; Christa Sakowski, MSN; Cathie Markow, RN, MBA;  
Stephanie Teleki, PhD; Lance Lang, MD; Julia Logan, MD, MPH; Valerie Cape, BSBA; Elliott K. Main, MD

# STATUS OF PQCS IN THE UNITED STATES



# NATIONAL NETWORK OF PERINATAL QUALITY COLLABORATIVES

- Mission
- *To support the development and enhance the ability of state perinatal quality collaboratives to make measurable improvements in statewide maternal and infant health care and health outcomes.*





**WHAT ABOUT PQCS AND EQUITABLE  
MATERNITY CARE?**

# Louisiana Perinatal Quality Collaborative (LaPQC)



The Louisiana Perinatal Quality Collaborative (LaPQC) is an initiative of the Bureau of Family Health and an authorized agent of the Louisiana Commission on Perinatal Care and Prevention. LaPQC is a public-private partnership between the Bureau of Family Health, the Louisiana Department of Health, and a group of healthcare providers, public health partners, and community organizations.

## New Illinois Initiative Aims To Reduce Racial Disparities, Improve Childbirth Outcomes

Christine Herman June 1, 2021



communication across a care team;

- an **equitable birth** is one where best practices are in place that birthing persons of color – particularly Black people – have full and equal access to the life-saving and sustaining resources available to them;
- a **dignified birth** is one where, throughout the birth process, birthing persons of color are treated with respect, given accurate communication with their health care providers, and are included in decision-making about their health care.



### New York State Birth Equity Improvement Project

The New York State Department of Health, in collaboration with its NYSPQC, began a comprehensive learning collaborative project, the **NYS Birth Equity Improvement Project** in 2021. New York State birthing hospitals and centers were invited to join this project, which seeks to assist birthing facilities in:

- identifying how individual and systemic racism impacts birth outcomes at their organizations;
- taking action to improve both the experience of care and perinatal outcomes for Black birthing people in the communities they serve.

Obstetrics Project:

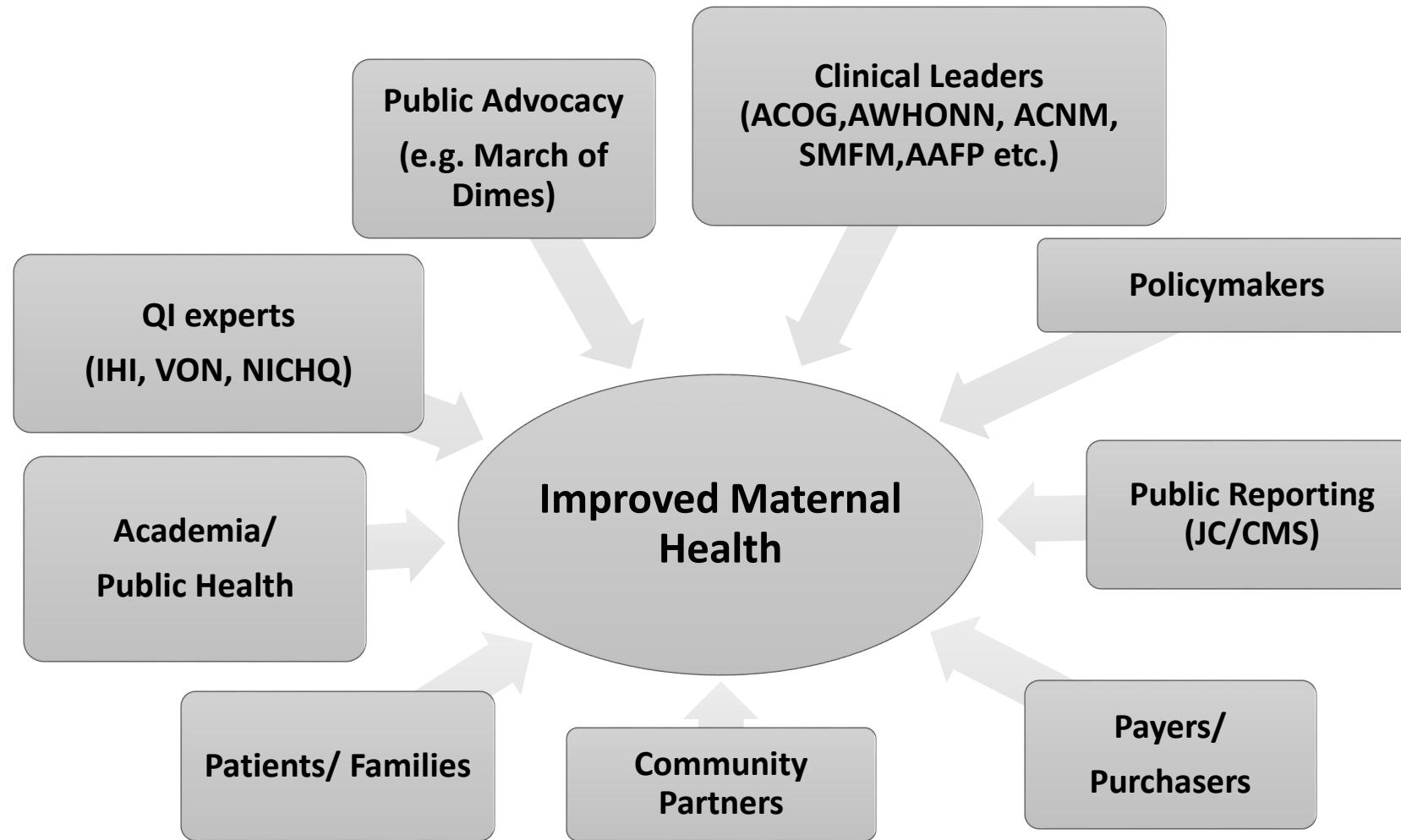
[NYSPQC Homepage](#)

# HHS-MARCH OF DIMES PUBLIC-PRIVATE PARTNERSHIP

- **Formed in November 2020 to improve Black maternal health outcomes and advance racial equity.**
- **Our vision: Every black birthing person will have a safe and respectful birth experience with access to high-quality care before, during and after pregnancy.**



# SUCCESS IN IMPROVING MATERNAL HEALTH: PARTNERSHIP IS KEY



Multiple Leverage Points are much more effective than one or two alone



# THANK YOU

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