

November 2014

Dear Colleague:

The New York State Department of Health (NYSDOH) is pleased to present the enclosed *New York State Perinatal Quality Collaborative (NYSPQC) Obstetrical Improvement Project Toolkit*. The materials contained in the toolkit specifically focus on reducing scheduled deliveries without a medical indication between 36 0/7 and 38 6/7 weeks gestation. This toolkit is being distributed to all New York State birthing hospitals, and is also available on the NYSPQC website (www.nyspqc.org). The toolkit contains the resources that participants of the NYSPQC Obstetrical Improvement Project have created since the inception of the initiative, relevant presentations, data and quality improvement tools, web links and references. The resources created by project participants include: scheduling forms, protocols, provider and patient education tools. We hope that you will be able to utilize these tools and resources as you continue to reduce the occurrence of scheduled deliveries without a medical indication prior to 39 weeks, and sustain the gains already made by your facility in this area.

Since September 2010, the NYSDOH has been collaborating with its Regional Perinatal Centers (RPCs) to improve and ensure the quality of obstetrical and neonatal care related to preterm births through the NYSPQC Obstetrical Improvement Project. Since the project's inception, participants have had the opportunity to learn from faculty and colleagues; receive individual coaching from faculty members; gather new knowledge on the subject matter and process improvement; share experiences and collaborate on improvement plans; and create strategies to overcome improvement barriers.

Between September 2010 and June 2014, participating RPCs reported:

- A 96.5% decrease in scheduled deliveries without medical indication during the specified gestation period, including:
 - A 95.9% decrease in inductions;
 - A 96.7% decrease in cesarean sections; and
 - A 90.7% decrease in primary cesarean sections.
- Documentation of maternal education on the risks and benefits of preterm scheduled delivery increased by 86.6%.

Early in 2012, the project aligned with the New York State Partnership for Patients (NYSPFP) to expand the project from RPCs to all birthing hospitals in New York State. NYSPFP is a joint effort by the Healthcare Association of New York State (HANYYS) and the Greater New York Hospital Association (GNYHA) under the national *Partnership for Patients Initiative* sponsored by the Centers for Medicare and Medicaid Services (CMS).

Between the expansion of the Collaborative to include Level I, II and III hospitals in June 2012 through June 2014, the approximately 80 participating RPC affiliate hospitals reported:

- An 86.2% decrease in scheduled deliveries without medical indication during the specified gestation period, including:
 - A 90.3% decrease in inductions;
 - An 84.6% decrease in cesarean sections; and
 - A 73.5% decrease in primary cesarean sections.
- Documentation of maternal education on the risks and benefits of preterm scheduled delivery increased by 87.4%.

If you have any questions, or would like more information on the NYSPQC, please contact Kristen Lawless at NYSPQC@health.ny.gov, or visit the project's Web site, www.nyspqc.org.

Sincerely,



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Enclosure