The final weeks of pregnancy are often filled with anticipation. Is it a boy or a girl? What will he look like? Will she be healthy? Expectant mothers and their families are increasingly having non-medically indicated deliveries or cesarean sections even though they are healthy and at low risk of problems, often not giving the baby time to fully develop.

What’s behind these trends? Many factors are at work. Different hospital policies and obstetric practices play a role. In addition, women are not always engaged as full partners in their care, and are making decisions without all of the pertinent information. A March of Dimes-commissioned poll found that many mothers are often working with inaccurate information; believing the earliest point in pregnancy at which it is safe for babies to be born in otherwise healthy pregnancies is at about 35 weeks. In fact, the last few weeks of pregnancy are very important in a baby’s development; major organs such as the brain, lungs and liver are still growing. Case in point: a baby’s brain at 35 weeks weighs only two-thirds of what it will weigh at 39 to 40 weeks.

Additionally, rates of cesarean sections have risen in recent decades to nearly 33 percent despite potential health problems for mothers and babies in the days and weeks after birth, and an increased risk of problems in future pregnancies. Cesarean births are also much more expensive than vaginal births, with the average costs for cesareans about 50 percent higher than those for vaginal deliveries.

Many factors have contributed to the rise in cesarean and early elective deliveries. Understanding these forces and finding solutions that address them in a focused and coordinated way offers great opportunity for improving this critical area of health and healthcare.

ENTER THE NPP:
Established in 2007, the NPP is a partnership of more than 50 organizations from across the healthcare spectrum, working together and with others to improve health and healthcare. A guiding tenet of the Partnership is that a safe, value-driven, equitable, and affordable healthcare system will be achieved when all of those involved work together, with a shared vision and common purpose. The NPP offers consultation to the federal government on setting and achieving national improvement priorities.

New to NPP are specialized efforts focused on setting goals and facilitating coordinated action within targeted areas of health and healthcare improvement. One of these specialized initiatives was formed to improve maternity care. This work complements an effort run by the Department of Health and Human Services, called the Partnership for Patients, which seeks to reduce patient harm.
TAKING COLLECTIVE ACTION

The NPP Maternity Action Team established a set of strategies to help promote healthy mothers and healthy babies:

- Encourage widespread use of a standardized perinatal core performance measure set. The Joint Commission estimates that only four percent of its accredited hospitals report on its core set of perinatal measures developed to improve maternity care. In order to accelerate progress, it is important that all facilities use standardized measures to work from, and are on the same page in terms of collecting and reporting data.

- Help providers implement ‘hard-stop’ policies and patient-safety checklists, to prevent non-medically indicated inductions and cesareans. Offering education and training to frontline staff on how to use these tools can make a big difference in decreasing non-medically indicated inductions and cesareans.

- Focus on consistent information sharing, and the mother’s role in making informed decisions about her care. Expectant mothers and their families need trustworthy and consistent information about their pregnancy-related care from each of their healthcare providers. If these sources have conflicting information, patients may feel confused and have a difficult time acting as an informed partner in their care planning. For example, many women are not aware that with a healthy baby, waiting for labor to begin on its own after the baby has reached full development is often the best option for both mother and child. Getting everyone on the same page—mothers, families, and those providing maternity care—can be very influential in affecting change.

GET INVOLVED

Reducing early elective deliveries and cesarean births among low-risk women are important first steps toward improving the overall state of maternity care. There are many ways you can join NPP and help in this effort.

- Promote your maternity care efforts and look for partners to collaborate with using NPP’s new tool—The Online Action Registry.

- Connect with and learn from NPP members and other leaders in your healthcare sector.

- Follow NPP meetings where new ideas and successes are shared.

Resources and information about NPP’s maternity initiative can be found online at www.qualityforum.org/NPP/.