What Can Florida Do to Have California's Results* in Reducing Low Risk (NTSV) Cesarean Births?

State Level

CA	FL	
✓	✓	Annual state recognition of hospital reaching the national goal for NTSV cesarean rates
✓	✓	Online education of mothers on cesarean births and birth preferences: My Birth Matters
✓		Current publicly available NTSV cesarean rates shown by hospital for easy patient access
✓		Multiple private health insurance companies/plans incentivizing hospital participation and reducing rates
✓		Medicaid/Medicaid plans incentivizing hospitals to address overuse of cesarean delivery

Perinatal Quality Collaborative Level

CA	FL	
✓	✓	Encouraging use of the CMQCC toolkit
✓	✓	Participating in Alliance for Innovation in Maternal Health (AIM), the national organization supporting perinatal quality collaboratives in this quality improvement effort.
✓	✓	Individualizing hospital education and support thru consultation, site visit and grand rounds
✓	✓	Identifying of individual hospital issue drivers based on baseline assessment
✓	✓	Providing rapid cycle hospital QI data sharing
✓	✓	Providing hospitals with identified obstetrical provider NTSV cesarean rates
	✓	Supporting coaching calls with hospital groups using volunteer physician and nurse mentors
✓		Using paid mentors for coaching calls with 6 to 8 hospitals compared to 20+ hospitals
✓		Providing peer-to-peer education for obstetrical providers through academic detailing
✓		Offering initiatives over time in phases in order to work with fewer hospitals at one time
✓		Ongoing assessment of individual hospital performance with individualized coaching
✓		Perform individual hospital culture surveys with tailored action planning

*Rosenstein MG, Chang SC, Sakowski C, *et al*. (2021) Hospital quality improvement interventions, statewide policy initiatives, and rates of cesarean delivery for nulliparous, term, singleton, vertex births in California. *JAMA* 325(16):1631-1639.

What Did California's Maternity Hospitals Do to Get Their Results* In Reducing Low Risk (NTSV) Cesarean Births?

CA	Yours	Hospital Level
99%	❒	**CLINICAL EDUCATION**
98%	❒	Physician or nurse educational presentation
45%	❒	Manual rotation of occiput posterior
NA	❒	Supporting safe vaginal birth training
90%	❒	**LABOR SUPPORT ACTIVITIES**
53%	❒	Peanut balls
33%	❒	Doula program
86%	❒	**LABOR MANAGEMENT**
65%	❒	Labor dystocia checklist
45%	❒	Active phase huddle
45%	❒	Latent labor management
24%	❒	Electronic medical record order sets
85%	❒	**SHARING OF UNBLINDED PHYSICIAN-LEVEL NTSV CESAREAN RATES**
53%	❒	**LABOR INDUCTION**
34%	❒	Induction scheduling form
22%	❒	Induction algorithm
19%	❒	Outpatient cervical ripening
47%	❒	**PATIENT EDUCATION**
45%	❒	Patient education during triage or labor
26%	❒	Patient support after traumatic birth experience
13%	❒	**LABOR AND DELIVERY STAFF MODELS**
9%	❒	Addition of hospitalists
4%	❒	Addition of midwives

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