Maternal Quality Improvement: Impact on the Front Line

David Lagrew, MD
Chief Integration and Accountability Officer
MemorialCare Health System

Sacramento Briefing
October 1, 2014
Overview

- A little about us
- Challenges facing obstetrical providers in 2014
- Where does quality improvement fit?
- Real world results -- What are the keys?
- Future challenges and solutions
MemorialCare Health System

A little about us…

- Six-hospital system and medical group based in southern Los Angeles County/Orange County
- Three hospitals provide delivery services
- Around 10,000 deliveries with a wide range of demographics and populations
- One teaching hospital (Miller Children’s and Women’s) and two private hospitals
- Long focus on women’s services
- Online perinatal database since 1998 and pilot for initial California Maternal Data Center
What Keeps Us Up at Night?

- Increasing pressure for cost containment
- Changing providers and changing patients
- Ever-increasing transparency of our performance
- Avalanche of recommended guidelines for screening and treatment
- Over and under utilization
  - Risk screening not available
  - Cesarean-section rates leading to complications in subsequent pregnancy
- Ever-present malpractice pressures
The Road to Quality Improvement (QI)

- A slow start:
  - Initial national QI efforts did not include obstetrics and gynecology given focus on Medicare patients (age 65+)
  - Providers want to improve care, but formal training was/is not part of curriculum in medical/nursing schools

- Picking up momentum now:
  - Recent changes and increased focus on issues such as early elective delivery, postpartum hemorrhage, and hypertension management have proven the benefit of QI
  - Improving processes and communication has already led to better outcomes for mothers and babies in our institutions
Real-World Results

Various MemorialCare Hospitals

- Cesarean Reduction Program/ New program for severe nausea of pregnancy
- Limiting induction of labor before 41 weeks in first pregnancy
- Hemorrhage response supply carts and drugs
- Preventing harm from hypertensive emergencies

- 1996
- 2000: “Code Green Drill” for emergent Cesarean section
- 2004: Reducing unnecessary episiotomies at vaginal delivery
- 2008
- 2011: Preventing early elective deliveries
- 2013

California HealthCare Foundation | www.chcf.org
MemorialCare Tools of Success

What are the keys?

- Culture of improvement and competitive spirit
- Systemwide Women’s Best Practice Team
- Data and feedback to providers on their performance (internal and external)
- Embedding into the electronic medical records: Screening questionnaires, order sets, rules and alerts, auto-calculating tools
- Great people!
How to Get a Good Night’s Sleep

- Must learn to:
  - Live in the new world of transparency and public comparison
  - Deal with the explosion of best practice recommendations and changes
  - Cope with scientific advances like genetic testing and personalized medicine

- How to do this?
  - Embrace changes
  - Master techniques of continuous data-driven improvement

*We find this approach gives the most success and professional satisfaction!*