A TALE OF TWO BIRTHS IN CALIFORNIA

SARA and MAYA, each expecting her first child, have similar low-risk pregnancies. How different can their birth experiences be?

The experiences of pregnant mothers at California hospitals—small or large, urban or rural—can vary dramatically.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Low-risk C-section</th>
<th>Episiotomy</th>
<th>Exclusive breastfeeding before discharge</th>
<th>Vaginal birth after C-section (VBAC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>In low-risk pregnancies, C-sections should be avoided to reduce post-surgical complications.</td>
<td>While this minor surgical procedure makes more space for the baby’s birth, it may lead to complications for the mother.</td>
<td>Breastfeeding benefits mother and baby.</td>
<td>Women who have had a C-section do not necessarily need to deliver subsequent babies by C-section.</td>
</tr>
<tr>
<td>Rate (lower is better)</td>
<td>19%</td>
<td>2%</td>
<td>88%</td>
<td>27%</td>
</tr>
</tbody>
</table>

SARA goes to a high-performing hospital. The likelihood that she will experience these procedures is:

- Low-risk C-section: 19%
- Episiotomy: 2%
- Exclusive breastfeeding before discharge: 88%
- Vaginal birth after C-section (VBAC): 27%

MAYA goes to a low-performing hospital. The likelihood that she will experience these procedures is:

- Low-risk C-section: 56%
- Episiotomy: 46%
- Exclusive breastfeeding before discharge: 19%
- Vaginal birth after C-section (VBAC): 1%

What if this variation did not exist?

If all California hospitals were high performing on maternity measures, it would mean (annually):

- 14,800 [31%] fewer C-sections
- 38,900 [84%] fewer episiotomies
- 119,900 [41%] more babies breastfed
- 12,300 [144%] more VBACs

Learn about the performance of hospitals near you at www.CalHospitalCompare.org.

The California Hospital Assessment and Reporting Taskforce (CHART) used data provided by the California Maternal Quality Care Collaborative (CMQCC) for this project. CHART is a nonprofit established to develop a statewide hospital performance reporting system using a multi-stakeholder collaborative process. CMQCC seeks to improve maternal and infant outcomes through rapid-cycle data analytics and collaborative action. Percentages reflect the weighted average of all California hospitals in the high- and low-performing categories, respectively, for each maternity measure. Learn more about the data at www.chcf.org/2births. ©2014 California HealthCare Foundation.