

Reduction of Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Births

WEBINAR SERIES

New Jersey Hospital Association, Princeton

Join the New Jersey Perinatal Quality Collaborative (NJPQC) as it kicks off a content webinar series on the Reduction of Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean births. The series is comprised of four webinars and will provide hospital clinical staff with best practices in the respective area and aid in improving maternal health and safety. Hospitals will be informed of best practices in preventing NTSV Cesarean births with the help of content expert Suzanne Spernal, DNP, APN-BC, RNC-OB, CBC. Presentations will include content designed to facilitate and support best practice sharing for hospitals wishing to engage these efforts in their own organizations.

OVERVIEW

The rise in cesarean rates has resulted in significant health (e.g. placenta accreta and previa, uterine rupture, hemorrhage and adhesions), social and economic costs for American women. California Maternal Quality Care Collaborative developed a standardized population for assessing cesarean births that focuses on the all-important first birth. This measure, NTSV Cesarean section birth rate, identifies the proportion of live singleton babies born at or beyond 37.0 weeks gestation to women in their first pregnancy and in the vertex presentation (no breech or transverse positions) via cesarean birth. The U.S. Department of Health and Human Services in its Healthy People 2020 project simplified the name to “Low-Risk Cesarean Birth among First Time Pregnant Women.” However, there are certainly higher risk patients that remain in the denominator but have very little impact.

The Joint Commission (TJC) subsequently adopted this metric in 2010 and requires all hospitals with more than 300 births to report their results as part of the Perinatal Core Measure Set. The Leapfrog Group and Centers for Medicare and Medicaid Services have also adopted this measure which was re-endorsed by the National Quality Forum’s [Perinatal and Reproductive Health measures](#) (link is external) in 2016 and TJC now stewards.

OBJECTIVE | Achieve a 20 percent reduction in the rate of NTSV C-section deliveries in New Jersey birthing hospitals by December 2019

TIMEFRAME | January - December 2019

KEY DRIVERS

- Assure Readiness – every patient, provider and facility
- Improve Recognition and Prevention – every patient
- Standardize Response - to every labor challenge
- Establish a culture of Reporting/Systems Learning

TARGET AUDIENCE | New Jersey Perinatal Quality Collaborative members; hospital clinical staff

Webinar #1 | Recognition & Prevention

MONDAY, MARCH 4, 2019 – 10 A.M., EST (RESCHEDULED FROM 2/25)

TOPIC | Early Labor, Labor Support, Pain Management, Doulas, Intermittent Monitoring

LEARNER OUTCOME | The learner will be able to describe what the coping with labor algorithm is and will be able to record an innovative approach to labor pain.

WEBINAR LOGIN INFORMATION | Event address for attendees:

<https://njha.webex.com/njha/onstage/g.php?MTID=e6a29105c9665a9bcf9708e491e36b17d>

Webinar #2 | Response * * * NEW DATE * * *

MONDAY, JUNE 17, 2019 – 10 A.M., EST

TOPIC | Labor Management, Fetal Surveillance, Dystocia, Induction of Labor, Management of Malposition

LEARNER OUTCOME | The learner will have an in-depth understanding of labor management and fetal surveillance and will be able to record the ACOG standard for active labor.

WEBINAR LOGIN INFORMATION | Event address for attendees:

<https://njha.webex.com/njha/onstage/g.php?MTID=e02386c8fd486c1f5e2f7b30d94e4cb4c>

Webinar #3 | Reporting Systems / Learning

MONDAY, JULY 29, 2019 – 10 A.M., EST

TOPIC | Performance Measures, Data, Overall Quality Improvement Tools

LEARNER OUTCOME | The learner will be able to list two performance measures related to preventing cesarean births.

WEBINAR LOGIN INFORMATION | Event address for attendees:

<https://njha.webex.com/njha/onstage/g.php?MTID=ec60a3807629ae7accbb94fce0f681ce9>

Webinar #4 | Readiness – Patient

MONDAY, OCT. 28, 2019 – 10 A.M., EST

TOPIC | Childbirth Education, Shared Decision Making, Birth Plans, Payment Reform

LEARNER OUTCOME | The learner will be able to describe the importance of “readiness” as related to the patient and will be able to list two strategies for engaging patients in shared decision making around non-medically indicated cesarean births.

WEBINAR LOGIN INFORMATION | Event address for attendees:

<https://njha.webex.com/njha/onstage/g.php?MTID=e2b3b78e3e8fdb91efad214a42fa82061>

After successfully completing each course, the learner will identify three quality initiatives related to NTSV and transferrable to their organization. (*Successful completion of the course is defined as 95 percent attention of the didactic learning session and a completed course evaluation.*)

The NJPQC is a statewide partnership of committed stakeholders working together to improve the quality and safety of care provided to New Jersey's mothers and babies. This Collaborative, led by New Jersey Hospital Association's Health Research and Educational Trust of New Jersey (HRET), is one of 13 state organizations awarded funding to improve the quality of perinatal care through a grant of up to \$1 million over the course of five years from the Centers for Disease Control and Prevention.

Funding for this project was made possible (in part) by the Center for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers/moderators do not necessarily reflect the official policies of the DHSS, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

CONTINUING EDUCATION CREDITS

Medical Society of New Jersey Accreditation Statement

This live activity has been planned and implemented in accordance with the accreditation requirements and policies of the Medical Society of New Jersey (MSNJ) and through the providership of the Health Research and Educational Trust of New Jersey (HRET). HRET is accredited by the Medical Society of New Jersey to provide continuing medical education for physicians.

HRET designates this live webinar activity for **1.0 AMA PRA Category 1 Credits.**TM Physicians should claim only the credits commensurate with the extent of their participation in the activity.

New Jersey State Nurse Association Accreditation Statement

This live activity has been planned and implemented in accordance with the Essential Areas and policies of the American Nurses Credentialing Center's Commission on Accreditation and New Jersey State Nurses Association by the Health Research and Educational Trust of New Jersey.

Health Research and Educational Trust of New Jersey is an approved provider of continuing nursing education by the New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Provider Number P131-2/18-21.

This live webinar activity provides **1.0** contact hours per webinar in the series.

There are no conflicts of interest, sponsorship or financial/commercial support being supplied for this activity. Accredited status does not imply endorsement by the provider or American Nurse Credentialing Center's Commission on Accreditation of any commercial products displayed in conjunction with an activity.

American College of Healthcare Executives: (pending)

As an independent charter Chapter of the American College of Healthcare Executives, the ACHE-NJ is authorized to award **1.0** hours of ACHE Qualified Education credit toward advancement or recertification in the American College of Healthcare Executive per webinar.

Participants in this program who wish to have it considered for ACHE Qualified Education credit should list their attendance when they apply to the American College of Healthcare Executives for advancement or recertification.

DISCLOSURE INFORMATION

Full disclosure will be provided during the educational activity.