

1. Are there specific reasons why your hospital's C-section rate is higher than the national NTSV (nulliparous, term, singleton, vertex target of 23.9 percent)?

Jackson Health System serves a disproportionately large share of complex cases, some of which are clinically indicated for C-section.

Jackson offers comprehensive maternity care for mothers and their baby throughout Miami-Dade County at three sites: the Women's Hospital at Jackson Memorial, Jackson North Medical Center and Jackson South Medical Center. Jackson specializes in high-risk maternity care, and is one of only 11 designated regional perinatal intensive care centers in Florida and has the nation's fourth-largest neonatal intensive care centers.

Many of our C-section cases are repeat pregnancies for mothers who have previously had c-sections. Our primary C-section rate for first-time deliveries averages 23% systemwide. While we are one of the few health systems that offer vaginal delivery after C-section for mothers who choose this option, it is not always an option in a program that manages so many high-acuity cases. Our multidisciplinary team provides care for life-threatening complex pregnancies, including placental implant abnormalities or other significant medical conditions, extreme prematurity and fetal conditions. Many of these patients' lives and that of their unborn child depended on a C-section.

Our C-section rates as reported to The Joint Commission (NTSV) average at 34% systemwide, which is among the lowest in this market.

2. Are you currently part of any quality improvement projects/programs related to C-sections specifically (not just early-elective deliveries)? If yes, please specify which projects you have joined.

We have partnered with Florida Perinatal Quality Collaborative (FPQC) for many projects and utilize the tools available for reducing incidence of C-Sections.

2a. Is your hospital planning to implement any of the available QI toolkits, such as the Safe Reduction of Primary Cesarean Birth bundle from the Council on Patient Safety?

Yes

3. What specific remedies have you **already put in place to date to address your hospital's higher rate of C-sections?**

We adhere to the American Congress of Obstetricians and Gynecologists (ACOG) guidelines and utilize a multidisciplinary approach for planned C-sections. We adhere to criteria for all planned and unplanned C-sections. All planned C-sections are discussed at the beginning of each day with our OB team clinical teams and residents.

4. Do you share physician-level C-section rates internally, with physicians who practice at your hospital? If you do, how is this information used?

We share our rates through our Quality and Service Line meetings and are including C-section rates as part of the ongoing professional practice evaluation (OPPE) process.

5. Please describe the role that midwives play in your hospital.

Midwifery services are part of our community obstetric provider practices as well as an integral part of the care team at Jackson North Medical Center, Jackson South Medical Center and Women's Hospital at Jackson Memorial, where our OB triage is staffed by certified nurse midwife supporting our physician team 24/7.

6. What is your hospital's VBAC rate? Are VBAC candidates encouraged by your hospital's staff and care providers to opt for a trial of labor if desired?

Evidenced by an average VBAC rate of 3%, our teams are very supportive of our mother's choice, with greater than 90% success rate for those mothers who opt for trial of labor.

7. What changes do you plan on implementing in the future, to address your hospital's higher section rate?

Community education and sharing of best practices among our facilities, as well as continued focus on VBAC when clinically appropriate.

8. What information do you share with patients regarding their delivery options at your hospital?

In an effort to provide every woman with birth options, we educate our mothers on all birth choices. We encourage the family to discuss their personal choice with their physician so that together they find the safest delivery method that meets everyone's needs.

Please send us any educational material you send to your patients. **(please see attachments)**

9. Describe the role of your hospital's leadership (CEO, Board of Directors) in addressing your hospital's high rate of C-sections.

We report our C-section rates at the unit level, division level, system-wide service meeting and CEO Executive Leadership meeting on a monthly basis via regularly scheduled councils. We report up to our board of trustees as part of regular discussion of quality indicators.

Our CEO and board play an active role in addressing C-section rates.

At all leadership levels we take an active role to assess performance and seek opportunities to improve. This includes raising community awareness of the risks of C-sections. Since we are a center that cares for high-risk incidences of placental implantation abnormalities (Accreta/Percreta/Increta), we take C-section rates very seriously. Our efforts to date have also included improved safety initiatives including obstetric hemorrhage initiatives, hypertension in pregnancy and improving access to prenatal care for the residents of Miami-Dade County.