



North Carolina: Pursuing Perinatal Perfection

The Perinatal Quality Collaborative of North Carolina (PQCNC) is a statewide organization of the stakeholders in hospital based perinatal care. PQCNC's mission is to make North Carolina the best place to be born. PQCNC develops high value perinatal care through the execution of initiatives that optimize resources, spread best practice, reduce variation, and promote family and patient centeredness. The group is composed of maternal and infant care providers, state leaders from the Legislature and Department of Public Health, family members, DMA, other payers, the March of Dimes, and hospital administrators. PQCNC has partnered to date with 55 hospitals across the state.

In 2010 the two statewide initiatives of PQCNC Round One were completed:

- Elimination of Elective Deliveries < 39 Weeks(39 Weeks): Included 37 hospitals, accounting for 2/3 of the deliveries in the state. 39 Weeks resulted in a 43% reduction in elective deliveries less than 39 weeks. 39 Weeks prevented 370 non-indicated deliveries < 39 weeks and moved 769 deliveries, which might otherwise have been done at < 39 weeks, to greater than 39 weeks. Cost savings from this project from avoided newborn morbidity and NICU admissions alone is \$570K. Savings for reduced maternal hospital days, cesarean sections (CS) avoided, future CS and increased throughput in labor and delivery units is being analyzed. Total savings is estimated at \$2.4M.
- Prevention of Catheter Associated Blood Stream Infections (CABSI) in Newborn Critical Care Centers (NCCCs): Included 13 hospitals and over 1000 infants with 24,000 line days. The majority of these infants were VLBW at high risk for infection and resulting complications. CABSI were reduced by 50%. The collaborative had an infection rate of 1.8 episodes/1000 line days at project end. CABSI prevented 53 line infections, saved 8 lives and \$1.2M.

Two smaller PQCNC initiatives have an 18 month time horizon and are ongoing. PQCNC has deployed a web based tool for evaluating family readiness for discharge of the most fragile of infants. Hows Your Baby is providing 12 NICUs with real time feedback regarding the adequacy of discharge preparation for NICU families. PQCNC is also piloting registration of infants admitted to NCCCs in the North Carolina Immunization Registry (NCIR). PQCNC envisions this pilot as the first step towards enrollment of all NCCC admits, and eventually all newborns, in the NCIR. This will further establish the NCIR as a public health registry, reduce unnecessary immunizations and streamline electronic medical records.

PQCNC Round Two initiatives starting in January will run for 12 months. Support for Vaginal Birth (SVB) will engage 28 centers from across the state in a project aimed at reducing by 25% the cesarean section rate for first time mothers. This initiative includes centers accounting for 50% of deliveries statewide. Exclusive Use of Human Milk (EHM) in the Nursery and the NCCC, aimed at increasing EHM use 50% statewide, have enrolled 28 well nurseries and 14 NCCCs. The anticipated ROI for these projects is \$21.3M, 9 lives saved and a 2130% return.

PQCNC has funding through June 2011. An annual budget of \$975K has resulted in a conservatively estimated \$3.6M ROI, a 325% return. Support over the past year has been through a combination of UNC, CMS, and March of Dimes grants as well as Legislative support. PQCNC is actively exploring multiple other funding options in order to continue our efforts to make North Carolina a leader in perinatal care. For further information regarding PQCNC see our website at www.pqcnc.org.