Pittsburgh Regional Healthcare Initiative
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Naida Grunden, editor

Obstetrical Working Group gears up

In 1999 PRHI produced its first report on obstetrical care in the region. The report, using data from the Pennsylvania Health Care Cost Containment Council (PHC4), focused on the rate of cesarean sections, and on the number of vaginal births after cesareans (VBACs). However, the report failed to capture the imagination of the region's obstetrical community.

"We were asking the wrong question," says Tobias Walbert, M.D., a Fulbright scholar currently serving as PRHI Fellow in charge of the OB Working Group. "We learned something important from the Cardiac Working Group. The question that really engaged the region's cardiac surgeons, really got them to work together, was this: *What processes of care led to the best outcomes and the fewest complications for mother and child?*"

The question of outcomes has begun to galvanize the work of area obstetricians, much as it did with the cardiac surgeons. And as with cardiac surgery, the rates of complications in obstetrics is relatively low—but the consequences can be devastating. Because few complications occur, it is difficult for any single hospital to collect enough data to point the way toward improvement. Data from 25,000 deliveries annually across the region creates more opportunity to study and learn about the leading causes of obstetrical complications and how to prevent them.

PRHI asked PHC4 for help in comparing state and regional data on complications of pregnancy with a focus on outcomes. This custom PHC4 report, due in March, will represent a departure from the typical recitation of rates. Instead, it will include risk-adjusted outcome data, which will help PRHI physicians analyze procedures of care.

"The PHC4 report is being developed in close cooperation with PRHI and the obstetrician community," Dr. Walbert says. "PHC4's amazing data collection ability and vast epidemiological skills offer us the unique opportunity to look at unwarranted variations in outcomes across the state."

Dr. Walbert adds, "We keep learning from the experience of the PRHI cardiac surgeons. "When they discovered unwarranted variations in their outcomes, they accepted the findings as a challenge to improve collectively. They've resisted the urge to place or dodge blame. Instead, they're focusing a huge amount of energy toward improving as a community. They're competing on quality."

The OB Working Group will be tackling an equally large task in the coming months. They will be learning what more they can do to optimize the outcomes for mothers and babies, and sharing what they learn.

THE CENTRAL QUESTION IS:

WHAT PROCESSES OF CARE LEAD TO THE BEST OUTCOMES AND FEWEST COMPLICATIONS FOR MOTHER AND CHILD?

PRHI Staff Contact

- ***Obstetrical Working Group***. This group of obstetricians is examining unwarranted variations in maternal and child outcomes across the state, not as a vehicle for blame, but as a way for an entire community to improve processes of care. **Contact: Geoff Webster**, Assoc. Director, Working Group/Registries Team Leader, 412-456-0973 websterchc@stargate.net.

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