



*Nebraska, Where a Great Life Starts with  
Healthy Moms and Healthy Babies*

*October 8, 2024*

*Re: Birth Equity Initiative*

Dear Clinical Leader:

In October 2023, the Nebraska Perinatal Quality Improvement Collaborative (NPQIC) launched the statewide obstetric quality improvement initiative, Birth Equity (BE). Phase One of this initiative began as a pilot in Douglas and Lancaster counties, and now the rest of the state is invited to join Phase Two. Birth equity is the assurance of the conditions of optimal births for all people with a willingness to address racial and social inequities in a sustained effort. NPQIC works alongside hospital teams to achieve this goal through: utilizing race/ethnicity medical record and quality data; engaging patients, support partners, and communities with a focus on patient-centered care; and engaging and educating providers, nurses, and staff to improve birth equity.

#### PROJECT OVERVIEW

Across the nation, maternal mortality rates have risen at an alarming rate over the last six years. Nebraska has significantly higher rates of maternal mortality than our midwestern counterparts: 25.1 versus 19.5 in Iowa and 22.8 in Kansas (Centers for Disease Control and Prevention, 2022). Further, 51.6% of Nebraska counties are considered maternity care deserts, compared to 32.6% in the U.S. (March of Dimes *Where You Live Matters* Report, 2022). Significant racial disparities in health outcomes exist for pregnant and postpartum patients in Nebraska and nationwide. In Nebraska, the preterm birth rate among Black women is 50% higher than the rate of all other women. Together we can work to address these disparities and improve birth equity (March of Dimes Report Card 2022).

The goal of the Birth Equity Initiative is to help hospitals facilitate systems and culture change to support conditions of optimal births for all people to address maternal disparities and promote birth equity through the implementation of the following key strategies:

1. Establish doula-friendly practices, including integration of doulas into the care team and implementation of a doula policy (developed in partnership with doulas)
2. Review maternal health quality data stratified by race, ethnicity, language, urban/rural residence and Medicaid status to identify disparities and address opportunities for improvement
3. Take steps to engage patients and/or community members to provide input on quality improvement efforts
4. Implement a strategy for sharing expected respectful care practices during delivery admission; and survey patients before discharge on their care experience (using the PREM tool) to provide feedback

5. Standardize a system to provide patient education prior to discharge on postpartum safety including urgent maternal warning signs and tools to improve communication with providers
6. Implement education for providers and staff on the importance of listening to patients, providing respectful care and addressing implicit bias, and provide opportunities for discussion and feedback

The Birth Equity Initiative is a foundational initiative that lays the groundwork for ongoing equity work in all statewide quality improvement initiatives to address maternal disparities and promote birth equity. NPQIC will support all birthing hospitals serving Nebraska patients with opportunities for collaborative learning, access to a data system to identify opportunities for improvement and evaluate progress over time and in comparison to other hospitals, and individualized quality improvement support to help hospitals achieve their improvement goals. Hospital teams will receive a quality improvement toolkit with resources to support implementation of key strategies to improve birth equity.

#### NEXT STEPS

The Birth Equity Initiative will kick off Phase Two with a virtual meeting on November 12, 2024 at noon, followed by monthly learning webinars. NPQIC is available to provide individualized coaching and technical assistance to participating facilities. To sign on to the initiative, please complete the Participation agreement and return to [kara.foster@unmc.edu](mailto:kara.foster@unmc.edu) by October 31, 2024.

Each Birth Equity quality improvement team must include: a provider champion, a nurse champion, and a project sponsor identified. Other recommended key team members include a: prenatal/outpatient representative, patient/family advisor or community liaison, midwife and/or doula representative, quality improvement professional, health information technology representative, equity officer (if available), medical informatics, and social worker.

As with any of our initiatives, we know that we cannot achieve lasting results without your active partnership. We hope that you will join us in these efforts. We know that if we work together, we will continue to bring about improvement in quality outcomes for mothers and babies across Nebraska and make Nebraska the best place to give birth and be born. Should you have any questions on this initiative, or on anything related to perinatal quality outcomes, please feel free to reach out to us. We look forward to your partnership.

Sincerely,



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Medical Director NPQIC



Robert Bonebrake, MD, FACOG  
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