# PVB AIMs & Measures

<table>
<thead>
<tr>
<th>Overall Initiative Aim</th>
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<tbody>
<tr>
<td>70% of participating hospitals at or below 24.7% C/S delivery rate (Healthy People 2020) among NTSV births</td>
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<tr>
<td>Overall state C/S rate among NTSV births at or below 24.7%</td>
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## Structure Measures

- Implement provider and nurse education and other strategies to achieve buy-in.
- Implement standardized protocol/processes for induction, labor support management and response to labor and fetal heart rate abnormalities.
- Implement and integrate PVB order sets, protocols and documentation into the EMR.
- Implement cesarean decision checklist using ACOG/SMFM labor guidelines.
- Implement decision huddles and/or decision debriefs with appropriate care team to standardize use of ACOG/SMFM guidelines and checklist.
- Implement workflow process using ACOG/SMFM cesarean decision checklist through shared decision making with patient (decision huddle with provider, nurse and patient to review treatment options, risk/benefits, and ACOG/SMFM guidelines).
- Implement standardized patient education with positive messaging promoting vaginal birth strategies and techniques for women and families.
- Integrate process to review and share data that includes provider-level data with clinical team.

## Process Measures

- Percentage of providers and nurses receiving standardized education regarding:
  a) ACOG/SMFM labor guidelines
  b) labor management strategies/response for labor challenges
  c) protocol for facilitating decision huddles and/or decision debriefs
- 80% of cesarean deliveries among NTSV births meeting ACOG/SMFM criteria for cesarean (based on random sample of deliveries):
  a) NTSV spontaneous labor arrest/labor dystocia/FTP/CPD;
  b) NTSV induced labor management;
  c) FHR abnormalities