

January 27, 2017

Dear Hospital Chief Executive Officer:

We are pleased to announce that the Kansas Department of Health and Environment (KDHE), the March of Dimes, the Kansas Hospital Association, and the Kansas Healthcare Collaborative (KHC) have joined together to encourage continued progress towards eliminating early elective deliveries (EED) in our state. Together, we support Kansas birthing hospitals in adopting the American Congress of Obstetricians and Gynecologists (ACOG) guidelines that highlight the importance of allowing babies to reach 39 weeks gestation through the elimination of elective labor inductions and cesarean sections. Kansas hospitals moved to adopt these practices in 2014 under the leadership of the KHC and the March of Dimes. The collaborative efforts and hard work of hospitals have resulted in a rapid and significant reduction in the statewide EED rate from 8% in 2013 to 2% in 2015 (Source: CMS Hospital Compare). This laudable achievement deserves recognition, and we are inviting you to secure this recognition.

The March of Dimes has established a national banner recognition program to recognize hospitals that have achieved EED rates below 5%. Hospitals that complete the application and meet the criteria outlined in the March of Dimes checklist (attached) will receive a customized banner that commends your hospital for its commitment to improving the quality of care for moms and babies in your community. KDHE is proud to supply banners at no cost to qualifying hospitals. Each hospital will also receive an associated press kit from the March of Dimes so that your patients, families, community leaders, and donors will be aware of your commitment to the health and safety of your community. Congratulations on your accomplishments!

Please consider participating in this recognition program. Simply **complete and submit the attached checklist by March 31** to be considered for a fourth quarter 2016 banner. Completed checklists may be emailed to [39WeeksBanner@MarchofDimes.org](mailto:39WeeksBanner@MarchofDimes.org). Please direct any questions to Danielle Jones, March of Dimes Maternal Child Health Director, at [Djones@MarchofDimes.org](mailto:Djones@MarchofDimes.org) or to Rachel Sisson, KDHE Bureau of Family Health Director, at [Rachel.Sisson@ks.gov](mailto:Rachel.Sisson@ks.gov).

Sincerely,



Susan Mosier, MD, MBA, FACS  
Secretary and State Health Officer  
Kansas Department of Health and Environment



Danielle Jones, MPH  
Maternal Child Health Director  
March of Dimes



Thomas L. Bell  
President/CEO  
Kansas Hospital Association



Kendra Tinsley, MS, CPPS  
Executive Director  
Kansas Healthcare Collaborative

The March of Dimes is partnering with the Kansas Department of Health and Environment, the Kansas Hospital Association (KHA) and the American Congress of Obstetrics and Gynecology to recognize Kansas birthing hospitals that pledge to eliminate early elective deliveries.

More than 30 years ago, the American Congress of Obstetricians and Gynecologists (ACOG) published guidelines on the importance of allowing babies to reach 39 weeks gestation to optimize brain and organ development and improve neonatal outcomes. Unfortunately, even as recently as 2012, some providers still were inducing labor or performing cesarean sections prior to 39 weeks gestation without medical necessity. The good news is that Kansas hospitals and providers have taken the lead to turn that trend around, and the March of Dimes Hospital Banner Program is designed to recognize those achievements.

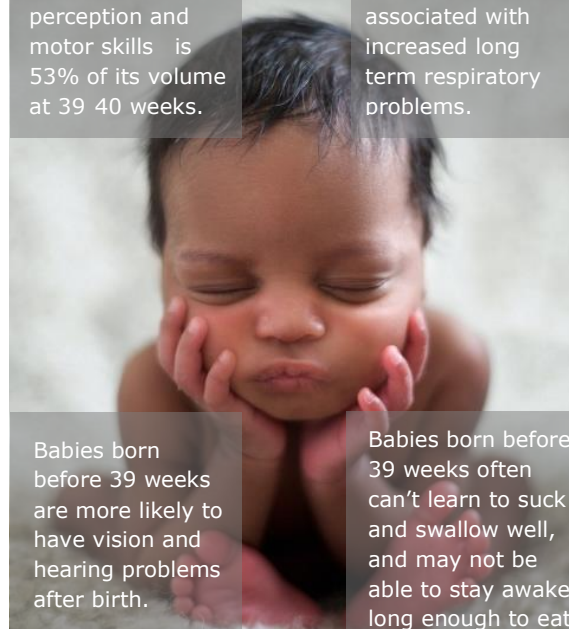
## how the program works

- 1 Complete the attached application.
- 2 Submit the completed application to [39WeeksBanner@MarchofDimes.org](mailto:39WeeksBanner@MarchofDimes.org).
- 3 Be recognized via a media event at your facility or at an upcoming March of Dimes event!

It's that easy! Read the attached FAQs if you have any additional questions. Hospitals accepted for Banner status will receive a media kit to publicize the recognition in their communities.

At 34 weeks, the volume of the cerebral cortex which controls cognition, perception and motor skills is 53% of its volume at 39-40 weeks.

Lungs may not be fully developed until 36-38 weeks, and even if they are, are often associated with increased long term respiratory problems.



Babies born before 39 weeks are more likely to have vision and hearing problems after birth.

Babies born before 39 weeks often can't learn to suck and swallow well, and may not be able to stay awake long enough to eat.

In Kansas				
Average medical cost for a healthy baby: \$4,389 <sup>1</sup>	Average medical cost for a premature baby: \$54,194 <sup>1</sup>	In 2015, 66 births per week were preterm (8.8% of all births) <sup>2</sup>	Nearly five infants die each week before ever reaching their first birthday <sup>2</sup>	In 2015, nearly 179 births were a result of early elective deliveries <sup>3</sup>
Sources: March of Dimes Premature Birth: The financial impact on business report <sup>1</sup> KDHE 2015 Annual Vital Statistics <sup>2</sup> , 2015 CMS Hospital Compare EED data <sup>3</sup> ,				

## frequently asked questions

1. How much does it cost our hospital system to apply for March of Dimes Banner status?

It is free to apply to the program. The hard part has already been done by you and your teams – now is the opportunity for you and your staff to receive the recognition you deserve.

2. If we are approved for a banner, how much will it cost?

KDHE will cover the cost of the banner and shipping to your facility through December 31, 2017. If you are not able to apply until after December 31, 2017, and need support to cover the cost of the banner, please contact us.

3. How many of the banners will we receive and how much does it cost if we want more than one to display at our facility?

You will receive one banner per hospital. Any additional banners can be ordered for \$150 per banner, plus shipping and handling charges.

4. After achieving March of Dimes Banner recognition, do we need to reapply next year?

Yes. The Banner will reflect that you are a March of Dimes Banner hospital for 2016. We know that change is sometimes easier to implement, but more difficult to sustain, so we will ask that hospitals complete the application process on a year-to-year basis to demonstrate their ongoing commitment to their communities.

5. Do we have to submit a separate application for each hospital within our system?

In most cases, yes, but if you feel an exception should be made please contact us.

6. How often do we have to report performance measures as a March of Dimes Banner hospital?

This is not an ongoing quality improvement process, so once the application has been received and approved by the March of Dimes, you will not have to submit any reports until the next year's application cycle.

Still have questions? Contact [39WeeksBanner@MarchofDimes.org](mailto:39WeeksBanner@MarchofDimes.org) or contact Danielle Jones, Director of Maternal Child Health, at the Kansas Chapter of the March of Dimes, at [Djones@MarchofDimes.org](mailto:Djones@MarchofDimes.org).

# MARCH OF DIMES

## 39+ WEEKS RECOGNITION BANNER CHECKLIST

Hospital Name:

Hospital Address:

*Contact information for person completing the checklist:*

Name:

Title:

Phone:

Email:

### POLICY AND PROCEDURES

YES

NO

1. (REQUIRED) Does the hospital have a written policy in place regarding non-medically indicated deliveries less than 39 weeks gestational age?

☐
☐

*Include a copy of the policy with this checklist*

2. (REQUIRED) Does the written policy clearly define medical indications for deliveries less than 39 weeks?

☐
☐

3. (OPTIONAL) Does the hospital have procedures in place to monitor the scheduling of cesarean sections and inductions of labor prior to 39 weeks gestational age?

☐
☐

*Include a copy of the procedures/protocol with this checklist*

### RATE

4. (REQUIRED) Does the hospital have a process to track and monitor the rate of non-medically indicated deliveries less than 39 weeks gestational age?

☐
☐

- a. (REQUIRED FOR HOSPITALS WITH 1,100 OR MORE BIRTHS PER YEAR) Is the hospital's rate of non-medically indicated deliveries less than 39 weeks gestational age below 5% (according to the PC-01 measure last reported to The Joint Commission)?

☐
☐

*Provide the rate:*

*Provide the date this measure was reported to The Joint Commission:*

<p>b. (REQUIRED FOR HOSPITALS WITH &lt; 1,100 BIRTHS PER YEAR) Is the hospital's rate of non-medically indicated deliveries less than 39 weeks gestational age below 5% (rate must be from two consecutive, previous quarters)?</p> <p><i>Provide the rate:</i></p> <p><i>Describe how the rate was calculated:</i></p>		
<p>5. (OPTIONAL FOR HOSPITALS WITH &lt; 1,100 BIRTHS PER YEAR) Does the hospital submit its rate to a regulatory agency (e.g. The Joint Commission, The Leapfrog Group, etc.)?</p> <p><i>If so, include a copy showing rates for at least six months.</i></p>	<input type="checkbox"/>	<input type="checkbox"/>
<p><i>To be signed by hospital leadership:</i></p> <p>Signature: _____</p> <p>Printed name: _____</p> <p>Title: _____</p> <p>Date: _____</p>		

## RELATIONSHIP WITH LOCAL MARCH OF DIMES CHAPTER

Please tell us about the hospital's relationship with the local March of Dimes Chapter (check all that apply):

- ☐ The hospital has a staff member (or members) that serve on March of Dimes Committee.
- ☐ The hospital has a staff member (or members) chair a March of Dimes Committee or event.
- ☐ The hospital sponsors Signature Chef Auction.
- ☐ The hospital sponsors March for Babies.
- ☐ The hospital sponsors Nurse of the Year.
- ☐ The hospital uses March of Dimes consumer education materials.
- ☐ The hospital receives March of Dimes community grant funding. List project:
- ☐ The hospital receives March of Dimes research grant funding. List project:

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☐ Other relationship, please describe:

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- ☐ I don't know
- ☐ The hospital is NOT involved with the local March of Dimes chapter.

Would you like to be connected to the local March of Dimes chapter?   ☐ Yes   ☐ No