

Ohio Infant Mortality Commission Update

Sandra Oxley Chief, Maternal, Child and Family Health Ohio Department of Health

Overview

- SB 332 Implementation Update Key Initiatives
- Home Visiting Update
- 2016 Infant Mortality Report Update



SB 332 Implementation

- Data
- Education
- HUBS
- Home Visiting



Infant Mortality Scorecards

- Infant Mortality Quarterly Reports
 - Preliminary infant mortality and preterm birth rates
 - Stillbirth rate
 - Delineated by race and ethnic group



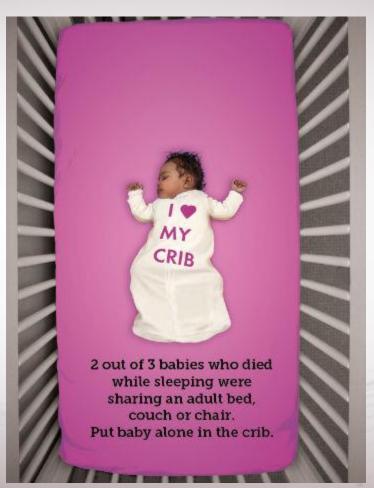
Ohio Pregnancy Assessment Survey (OPAS)

- Population-based questionnaire
- Similar to the Pregnancy Assessment Monitoring System (PRAMS) questionnaire
- Consistent with the CDC model surveillance protocol
- Oversample women in:
 - Cuyahoga, Franklin and Hamilton counties on an annual basis,
 - OWI cohort (Butler, Stark, Mahoning, Montgomery, Summit and Lucas) on a biennial basis.
- Report results annually



Education

- Shaken Baby Syndrome
- Stillbirth
- Safe sleep





Prematurity Prevention

- Develop and implement appropriate curricula designed to prepare primary care and women's health care physicians, advanced practice RNs, and PAs to provide patient counseling on efficacy-based contraceptives, including LARC devices.
- Exploring options in collaborating with medical and nursing schools.
- Hospitals shall ensure that a woman giving birth has the option of having a LARC (Long Acting Reversible Contraceptive) placed after delivery and before discharge.



HUBS

Establish a qualified community hub in each community identified by the Commission on Minority Health that lacks one, and requires Commission on Minority Health to convene quarterly meetings with HUBS to discuss performance data and best practices.



Home Visiting Changes in SB 332

- Statewide Central Intake and Referral System
- Creation of Home Visiting Consortium
- Home Visiting Summit
- Transition to paying for outcomes
- Home Visiting Benchmarks



Ohio's State Supported Home Visiting System



As of June 19, 2017





MIECHV





Measuring Success 22 Performance Measures

Preterm Birth

Low-Birth Weight

Breastfeeding

Depression Screening

Completed Depression Referrals

Well-Child Visit

Postpartum Care

Substance Abuse/Tobacco Use

Substance Abuse/Tobacco Referral

Safe Sleep

Child Injury

Child Maltreatment

Parent-Child Interaction

Early Language and Literacy Activities

Developmental Screening

Completed Developmental Referrals

Behavioral Concerns

Intimate Partner Violence Screening

Intimate Partner Violence Referrals

Primary Caregiver Education

Continuity of Insurance Coverage

Inter-Pregnancy Interval





2016 Ohio Infant Mortality Data: General Findings

Overall Number of Infant Deaths Rose While Sleep-Related Deaths Declined

Infant mortality is defined as the death of a live-born baby before his or her first birthday. An infant mortality rate is the number of babies who died duting the first year of life per 1,000 live births. Ohiois target is to achieve fewer than 60 infant deaths per 1,000 live births in every racial and ethnic group which aligns with the national Healthy People 2020 objective established in 2010.³ Ohiois infant mortality rate in 2010 was 7.7 infant deaths per 1,000 live births.

In 2016, 1,024 Ohio infants died before their first birthday (Table 1), compared to 1,005 in 2015, a 1.9 percent increase. From 2015 to 2016, the number of infant deaths increased by 30 for white infants, and by two for black infants. The number of infant deaths of unknown race decreased by 15 as fewer birth mothers declined to list a race and/or fewer coroners did not indicate race on death certificates.

Chaids All Races Infant Mortality Rate was 7.4 in 2016, up slightly from 7.2 in 2015 (Table 2). Otho Infant mortality rates for white and black infants as well as for infants of Hispanic ethnicity all increased from 2015 to 2016, with black infants dying at nearly three times the rate as white infants. However, Ohiols Infant mortality rates have been trending downward significantly since at least 1990 (Figure 1).

Prematurity-related conditions continue to be the leading cause of infamt death in Ohio (Rgure 3). While the number of prematurity-related infant deaths increased from 2015 to 2016, Ohio's prematurity infant mortality rate has not changed significantly in the past decade.

The number of infant deaths from external injury which includes some sleep-related deaths declined from 2015 to 2016. Suffocation is the leading cause of injury-related death for babies before their first birthdays. Babies who sleep on couches or chains, in bed with another person, or on their stomachs are more likely to deliferor suffocation. In 2016, Ohio Child Fatality Review boards identified 117 sleep-related infant deaths — 33 fewer than in 2015. Stiff, sleep-related infant deaths are among the most preventable infant deaths by practicing the ABCs of safe sleep — place babies Alone, on their Back, in a Crib. See Appendix C for more information about 2016 sleep-related infant deaths.

Table 1: Ohio Infant Mortality, by Race and Ethnicity (2016)

Стер	Infant Deaths (Humber)	Infant Mortality Bate (Per 1,000 Live Births)
Race		
All faces	1,024	7.4
White	610	5.8
Black	369	15.2
American Indian	2	•
Asian / Pacific Islander	11	3.8**
Unknown	25	6.3
Ethnidty		
Hispanic	54	7.3
Non-Hayanic***	970	7.4

^{*}Rates based on fewer than 10 deaths are considered unreliable and are suppressed

2016 Ohio Infant Mortality Report



^{**} Rates based on fewer than 20 infant deaths should be interpreted with caution.

^{***}Mon-Hispanic births and deaths include those of unknown ethnicity

Healthy People 2020 is a national collaborative established in 2010 that provides science-based, national objectives for improving the health of Americans. It is managed by the federal Office of Disease Prevention and Health Promotion within the U.S. Department of Health and Human Services.

^{1 2016} Ohio Infant Mortality Oata: General Findings

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Race		
All Races	1,024	7.4
White	610	5.8
Black	369	15.2
American Indian	2	*
Asian/Pacific Islander	18	3.8**
Unknown	25	6.3
Ethnicity		
Hispanic	54	7.3
Non-Hispanic***	970	7.4

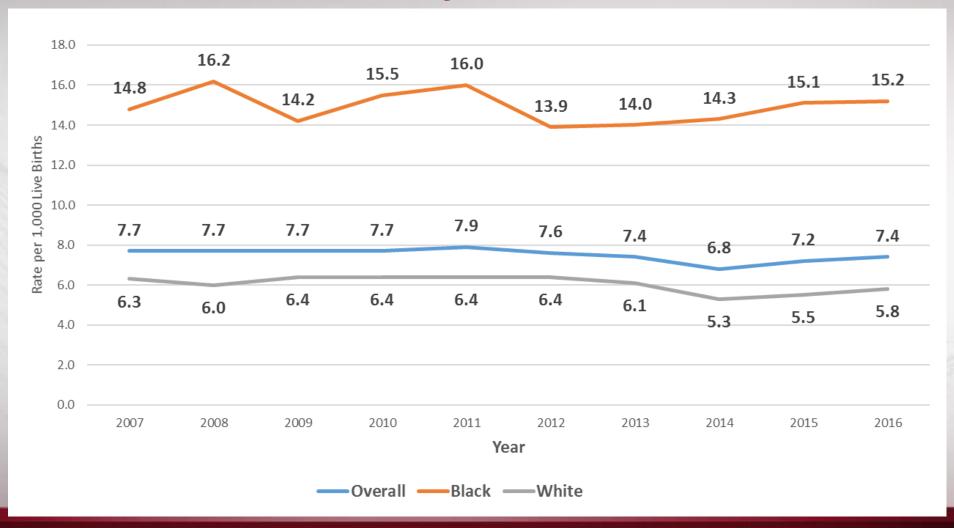
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Infant Mortality Rate 2007-2016





Causes of Infant Death in Ohio (2016)

Figure 3: Proportion of Causes of Infant Death in Ohio (2016) 19% 30% Prematurity-Related Congenital Sudden Infant Death Syndrome 7% Obstetric Conditions Birth Asphyxia 4% Perinatal Infections Other Infections External Injury 19% Other Causes 7% Source: Ohio Department of Health, Bureau of Vital Statistics.



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