

Regional Perinatal Centers

Tennessee Fact Sheet

- *Prematurity and low birth weight are leading causes of infant mortality in Tennessee.*
- *Tennessee's smallest and most fragile babies have a better chance of survival if they are born at an appropriate facility.*
- *Perinatal regionalization is one of five key national strategies to reduce infant mortality.*

What is the purpose of the regional perinatal system?

To provide and ensure an appropriate, accessible high-risk perinatal and neonatal health care system that meets the needs of high risk infants and women in Tennessee.

How does the system work?

Funding is provided by the State to five designated regional tertiary centers to assure that the infrastructure for high-risk perinatal services is in place statewide. This system includes 24-hour telephone consultation with physicians and nurses, professional education within the region, transportation of high-risk pregnant women and infants, and post-neonatal follow-up.

How many people are helped by the program?

Indirectly, the system impacts all mothers and babies in Tennessee by assuring that health care providers are educated on high risk perinatal care and have a system of consultation available to them. In FY 2015, Tennessee's Regional Perinatal Centers provided direct care for 5,492 high-risk neonates and 16,011 high-risk maternal patients.

Why is the system important?

The Regional Perinatal Centers provide a statewide system of high-risk maternal and infant care. Research indicates that ensuring that high-risk pregnant women and newborns receive risk-appropriate care can reduce maternal and infant morbidity and mortality.

Who is eligible?

All women and infants who are high risk are accepted for services at the five regional tertiary hospitals without regard to income if no other appropriate facility is available to manage their care.



Tennessee's Perinatal Centers

Chattanooga

- Erlanger Health System
- T.C. Thompson Children's Hospital

Johnson City

- Johnson City Medical Center Hospital

Knoxville

- The University of Tennessee Medical Center at Knoxville

Nashville

- Vanderbilt University Medical Center
- Monroe Carell, Jr. Children's Hospital at Vanderbilt

Memphis

- Regional Medical Center at Memphis

Perinatal Center Activities

Direct Clinical Care and Consultation

Care is provided to high-risk pregnant women and Tennessee's most fragile and sick infants at five centers throughout the state. Specialized care is available for women with complex medical conditions or with high-risk pregnancies. Services also support critically ill infants, including those born extremely premature or with serious conditions requiring medical or surgical care. Highly-trained staff are available for consultation with Tennessee providers 24 hours a day, 7 days a week. Outpatient consultation services are also available. In FY2015, over 61,000 consultations were performed by perinatal center staff.



Education for Community Hospitals and Providers

Expert staff from the perinatal centers travel throughout the state to provide training to staff at community hospitals. The training helps prepare staff in community hospitals and provider offices for recognizing and treating complex medical conditions. Additional training equips local staff with the knowledge and skills to stabilize critically ill infants until they can be transported to a specialized center. In FY2015, over 6,100 hours of educational training were provided throughout the state.

Technical Assistance to State Agencies

Staff from the regional perinatal centers are active and regular participants in a number of initiatives aimed at improving birth outcomes in Tennessee, including the Tennessee Initiative for Perinatal Quality Care (TIPQC), the Department of Health's Perinatal and Genetics Advisory Committees, and the Department's Infant Mortality Workgroup. During FY2015, representatives of the regional centers continued to join Department staff in participating in the federal Collaborative Improvement and Innovation Network (COIIN) efforts to reduce infant mortality. Experts from the regional perinatal centers also provide guidance throughout the year as needed, including during the revision of the transportation guidelines and educational objectives for nurses and perinatal social workers. Members also participated in ad hoc workgroups convened by the Department of Health and other agencies.

Snapshot: Perinatal Activities FY 2015

Hospital-Based Services

- 14,661 deliveries to Tennessee residents at regional obstetrical centers
- 4,579 NICU admissions to Tennessee infants
 - 44.1% low birth weight
 - 13.3% very low birth weight

Consultation Services

- 61,784 obstetrical consultations (outpatient)

Outpatient Services

- 2,831 NICU follow-up clinic visits
- 792 transports of TN infants to regional neonatal centers

Community Services

- 6,101 educational hours taught to staff throughout the state

