

# Franklin County Maternal and Infant Health Dashboard

Q2 2018 Quarterly Dashboard

## Infant Mortality

**Infant mortality** – or the death of a baby before his/her first birthday – is a critical indicator of community health. While national infant mortality rates are decreasing, Ohio ranks among the worst in the nation for overall infant mortality. This quarterly dashboard provides a snapshot of the most up-to-date data on infant death and selected birth indicators. For a detailed look at trends for recent years, please refer to our Maternal and Infant Health Measures Quarterly Dashboards.

## About The Data

- Date range for data is Q1 2012 - Q2 2018.
- Data are limited to Medicaid as the Payer.
- The ODM Infant Mortality Rate includes data through Q1 2017, all other measures include data through Q2 2018.

## Definitions

- **Adolescent Well-Care:** A female 12-21 years of age who had at least one comprehensive well-care visit with a primary care physician or an obstetrics gynecologist practitioner. Higher rates are better.
- **Contraceptive Care:** Women ages 15-44 at risk of unintended pregnancy who were provided a most or moderately effective FDA-approved method of contraception. Higher rates are better.
- **ODM Infant Mortality:** The Ohio Department of Medicaid (ODM) Infant Mortality Rate is the rate of Medicaid paid births in the State of Ohio where the infant died before his or her first birthday. The rates are calculated per 1,000 births. Lower rates are better.
- **Postpartum Visit:** Deliveries that had a postpartum visit on or between 21 and 56 days after delivery. Higher rates are better.
- **Prenatal Care Visit:** Deliveries that received timely prenatal care visits. Higher rates are better.
- **Preterm Birth:** A baby born less than 37 completed weeks of gestation. Lower rates are better.
- **Progesterone Usage:** Delivered a live birth where the mother was administered progesterone during a pregnancy classified as high-risk. Higher rates are better.
- **Very Preterm Birth:** A baby born less than 32 completed weeks of gestation. Lower rates are better.

## Infant Health (Lower Rates are Better)

**62,175**

Total Infant Births in Franklin County from Q1 2012 - Q2 2018

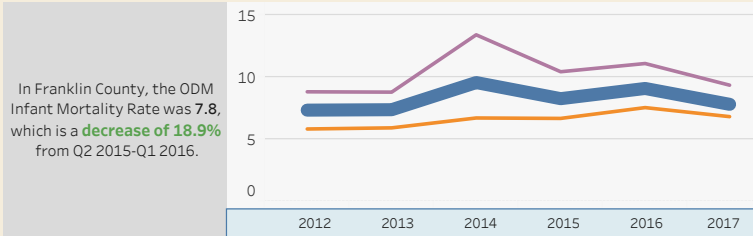
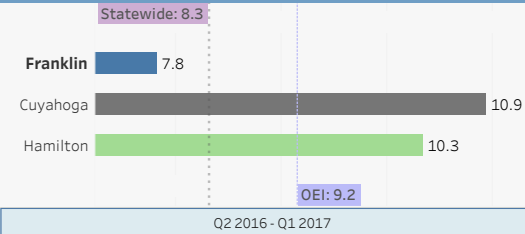
**508**

Total Infant Deaths in Franklin County from Q1 2012 - Q2 2018

### ODM Infant Mortality Rate

In Franklin County from Q2 2016-Q1 2017, the ODM Infant Mortality Rate was 7.8 per 1,000 births.

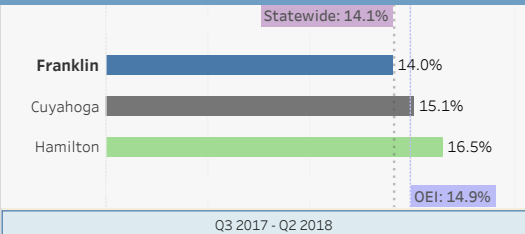
**Annual Target For Real Impact**  
From 88 to 72 Deaths



### Preterm Births

In Franklin County, the Preterm Birth Rate was 14.0%, which is a decrease of 7.9% from Q3 2016-Q2 2017.

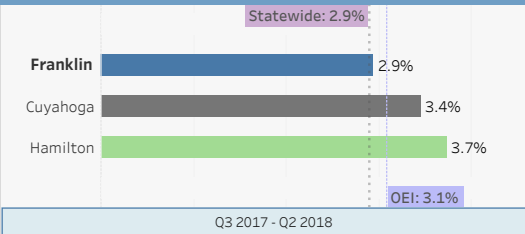
**Annual Target For Real Impact**  
From 1,555 to 1,495 PTB Infants



### Very Preterm Births

In Franklin County, the Very Preterm Birth Rate was 2.9%, which is a decrease of 11.5% from Q3 2016-Q2 2017.

**Annual Target For Real Impact**  
From 333 to 303 VPTB Infants

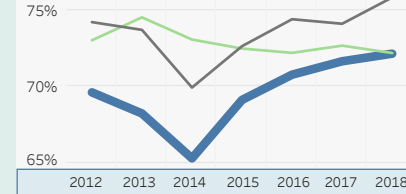
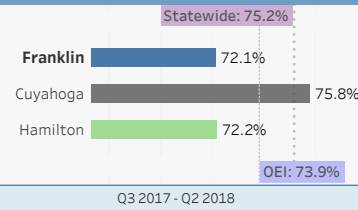


## Maternal Health (Higher Rates are Better)

### Prenatal Care

In Franklin County, 72.1% of deliveries received a prenatal care visit.

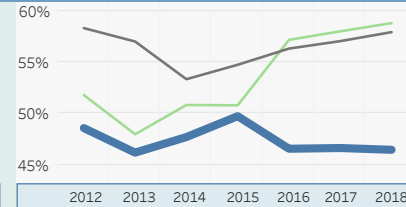
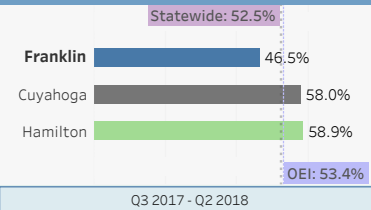
**Annual Target For Real Impact**  
From 5,780 to 5,849 Women



### Postpartum Visits

In Franklin County, 46.5% of deliveries received a postpartum visit.

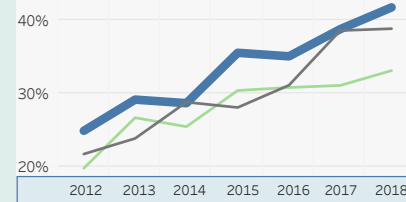
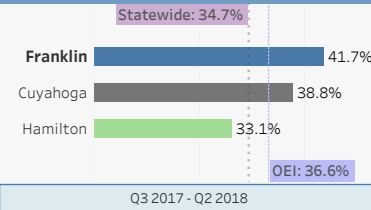
**Annual Target For Real Impact**  
From 3,960 to 4,035 Women



### Progesterone Usage

In Franklin County, 41.7% of high risk women received progesterone.

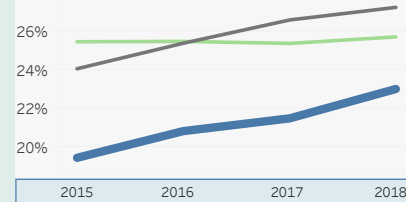
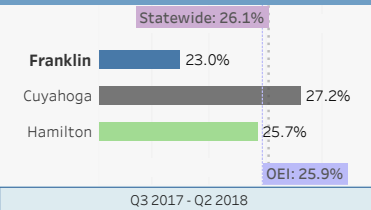
**Annual Target For Real Impact**  
From 374 to 400 Women



### Contraceptive Care

In Franklin County the Long-Acting Reversible Contraceptives usage rate is 23.0%.

**Annual Target For Real Impact**  
From 17,799 to 17,994 Women



### Adolescent Wellcare Visits

In Franklin County, the Rate of Adolescent Wellcare Visits is 42.6%.

**Annual Target For Real Impact**  
From 14,873 to 15,030 Women

