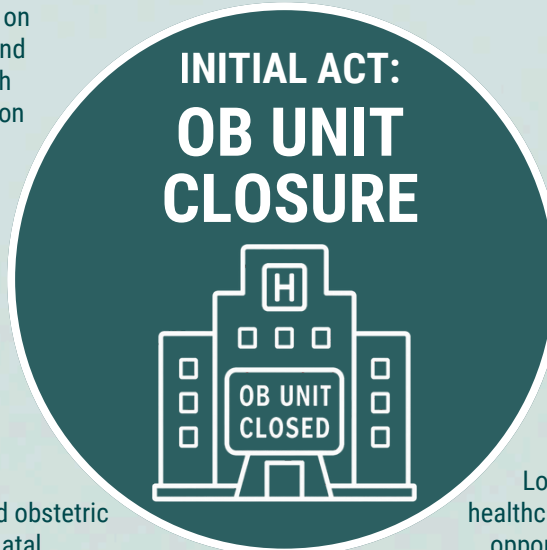


THE RIPPLE EFFECT OF OB UNIT CLOSURE

IMMEDIATE IMPACT



Disruption in services and access for families and babies to immediately available care in their community



Increased stress on birthing people and their families with outsized burden on most vulnerable populations



Increased burden on Emergency Departments



Increased obstetric and neonatal morbidity and mortality



Unintended out of hospital births



Longer driving time to prenatal care



Emergency Medical Services increased utilization, longer transport times causing loss of service in community



Loss of skilled healthcare jobs and opportunity in the community

NEXT RIPPLE OF IMPACTS



Increased burnout of Emergency Department and EMS workforce



Diminished enrollment at local pediatric and family practices



Loss of revenue from decreased use of hospital services (labs, radiology)

BROADER RIPPLE OF COMMUNITY IMPACTS



Fewer families move to area



Decreased school enrollment



Loss of younger workforce



Closure of small local businesses



OB UNIT CLOSURE DOESN'T JUST IMPACT BIRTHS – IT CREATES WAVES THAT IMPACT THE ENTIRE COMMUNITY.



The Ripple Effect of OB Unit Closure

Supporting evidence and references · Rural OB Access Workgroup

When a rural hospital closes its obstetric unit, the effects reach far beyond births. The graphic shows how a single closure ripples outward to affect birthing people and babies, the local healthcare workforce, and the broader community. The table below lists the sources supporting each impact. Numbers refer to the reference list on the following page.

Evidence behind the graphic

Impact	Sources
IMMEDIATE IMPACT	
Disruption in services and access for families and babies to immediately available care in their community	3, 6, 10, 11, 12
Longer driving time to prenatal care	6, 10, 11, 12
Emergency Medical Services increased utilization and longer transport times, causing loss of service in community	8, 9, 13
Increased stress on birthing people and their families, with outsized burden on most vulnerable populations	10, 11
Increased burden on Emergency Departments	7, 9, 13
Increased obstetric and neonatal morbidity and mortality	2, 10, 11
Unintended out-of-hospital births	2, 10, 11
Loss of skilled healthcare jobs and opportunity in the community	1, 5, 12
NEXT RIPPLE OF IMPACTS	
Increased burnout of Emergency Department and EMS workforce	8, 9, 13
Diminished enrollment at local pediatric and family practices	†
Loss of revenue from decreased use of hospital services (labs, radiology)	5, 9
BROADER RIPPLE OF COMMUNITY IMPACTS	
Fewer families move to area	10, 11, 12 †
Decreased school enrollment	12 †
Loss of younger workforce	10, 11, 12 †
Closure of small local businesses	5, 9

† Anticipated downstream effect, based on the experience of rural communities in Northern New England and the literature on rural hospital closures. Direct research on the community impacts of labor and delivery closures is limited; a federally funded study is under way (4).

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Tier supported:

Immediate impact

Next ripple

Broader ripple

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