Maternal Levels of Care Verification

Delivering Confidence Across All Levels of Maternal Care

A program to help reduce maternal morbidity and mortality outcomes by ensuring women receive risk-appropriate care.
Agenda

Maternal Levels of Care Verification and why it is important

Requirements for verification & Onsite review process

Steps to become verified

Q & A

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The Joint Commission
A Collaborative Effort with ACOG

Collaborating with the American College of Obstetricians and Gynecologists (ACOG), Joint Commission offers this program to facilities that provide obstetric and maternal-fetal medicine (MFM) care.

Joint Commission experts provide an objective assessment of a facility’s capabilities to verify the hospital accepts only the patients it has the expertise, equipment, and resources to care for.
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Levels of Maternal Care

The Joint Commission Webinar
September 2021
Maternal Mortality During 1990-2013

Trends in Severe Maternal Morbidity

Rates of Severe Maternal Morbidity per 10,000 Delivery Hospitalizations:
U.S., 1993-2014

- Overall Rate of SMM
- Blood Tranfusions
- SMM Rate Excluding Blood Tranfusions

Background: LoMC Obstetric Care Consensus

- Originally published (with SMFM): 2015
  - Most recent revision published in 2019
- Framework for regional hospital relationships
  - Standardized description of facility capabilities, resources, personnel
- Purpose: reduce morbidity/mortality by ensuring that obstetric facilities are prepared to provide risk-appropriate care
  - Encourage development of collaborative relationships in regions
  - Ensure that if services need to be escalated, there is a seamless process for consultation or transfer
  - “Care at the right place at the right time”
Background: Implementation

• Early discussion after original OCC: “translate” guidance into an implementable program
  • CDC LOCATe
  • ACOG Verification program

• ACOG verification program developed
  • Partnership with CDC, SMFM, NPIC, AZ Perinatal Trust
  • Pre-site visit review, site visit, post-visit report, feedback
  • Piloted in 14 hospitals in 3 states (2017)
    • GA, IL. WY
  • Commentary published in the Green Journal (December 2017)
Background: Texas

• Maternity designation legislated
  • HB 15 and HB 3433

• TX Department of State Health Services (DSHS) given responsibility for conducting the program
  • Rules published in 2018
  • Designation required (initially) by September 2020

• ACOG launched verification program in TX in 2018
  • Verify compliance with TX Administrative Code
    • DSHS provides designation
  • Over 60 hospitals surveyed by mid-2021
LoMC: Current Status

• Growing interest and activity in the last several years
  • Many calls and e-mails…….

• Recent collation of state-based activities related to LoMC
  • “LoMC Map” available on ACOG website
  • Many states are interested and at some level of being “in process” for LoMC activities
    • Significant variation; many are in “early stages”
  • Considerations:
    • Mandated versus voluntary participation
    • Self-assessment versus verification
    • How to administer, how to finance
ACOG Implementation Map

**Green:** state has LoMC guidelines

**Gray:** state does not have LoMC guidelines
Collaboration with The Joint Commission

• Collaboration recently launched

• Rationale:
  • TJC mission is to improve health care and to aid health care organizations in providing safe and effective care
  • Overall goal is to improve care for women
    • Focus on risk-appropriate care; quality improvement
  • TJC has the infrastructure to facilitate widespread implementation over a short time period
    • Able to expand LoMC more broadly and more quickly; national reach
Collaboration with The Joint Commission

- TJC and ACOG teams are developing the verification process
  - Verification process is modeled after certification programs
  - Standards have been developed
  - On-site survey process currently being developed
- TJC to work with states and systems regarding participation
  - Have already had numerous calls and meetings with interested states and health systems
- Verification program to launch in January 2022
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Why this Program Matters

- The U.S. is ranked 59th in the world for maternal mortality outcomes.¹

- Maternal Levels of Care Verification aims to dramatically improve outcomes by promoting collaboration among facilities and providers.

¹ The World Health Organization, 2019.
Maternal Levels of Care (MLC) – General Program Overview

The MLC has been informed by the ACOG Levels of Maternal Care (LoMC) and additional standards have been developed in collaboration with ACOG.

The Joint Commission will conduct on-site surveys to perform the MLC verification.

The MLC will be a three-year verification cycle.

MLC is open to acute care hospitals and critical access hospitals who are otherwise in compliance with CoPs and federal laws.
Minimize Risks and Improve Outcomes

Verification helps ensure patients get matched with the appropriate level of care needed to attain optimal outcomes.
Four Levels of Care Assessed

**Level I: Basic Care** – Care for low to moderate-risk pregnancies, demonstrating the ability to detect, stabilize, and initiate management of unanticipated maternal-fetal or neonatal problems that occur during the antepartum, intrapartum, or postpartum period until the patient can be transferred to a facility at which the specialty maternal care is available.

**Level II: Specialty Care** – Level I, plus moderate- to high-risk antepartum, intrapartum, and postpartum conditions.

**Level III: Subspecialty Care** – Levels I and II, plus care for more complex maternal medical conditions, obstetric complications, and fetal conditions.

**Level IV: Regional Perinatal Health Care Centers** – Levels I, II, III, plus on-site medical and surgical care of the most complex maternal conditions and critically ill pregnant women and fetuses throughout antepartum, intrapartum, and postpartum care.

*With verification, a facility can strengthen the community’s confidence in the quality and safety of its services and treatments.*
POLL QUESTION!
On-site Survey Process—Overview

- Similar to current accreditation and certification process
- 1 or 2 reviewers for 1- or 2-days
  - All reviewers are experienced OB practioners
- Sample agenda includes:
  - Opening conference
  - System tracers (HR/competency/credentialing)
  - Unit Tours
  - Individual Tracers
On-site Survey Process—Goals

• Assess the organization’s processes and procedures related to maternity care by interview staff and personnel
• Assess compliance with the organization’s policies and procedures through individual trace activity
• Assess the organizations performance improvement plan and offer suggestions and education
• Share evidence-based practices
On-site Survey Process—Post visit

• When our reviewers leave, the organization will be given a preliminary report with opportunities for improvement
• The organization will have 60 days to submit an evidence of compliance summary (ESC)
• Once the ESC is accepted by central office, the organization will be given a letter stating their obstetric unit has been verified at “x” level of care
• This is good for 3 years
  • Organizations can request to move up or down a level at any time, but this will require another on-site review
Maternal Levels of Care Verification—Standards Example

MLCPM.03, EP 4
The program provides support from other departments such as anesthesia, respiratory, radiology, ultrasound, laboratory, and blood bank services 24 hours a day, 7 days a week. Suitable backup systems and plans are in place that meet the emergent needs of the mother.

Level of Care I:
- a. An anesthesia provider with the capability to administer labor analgesia and surgical anesthesia is readily available at all times, per the organization’s policy.
- b. The program has the ability to initiate a massive transfusion protocol and has a process in place to obtain more blood components, including platelets, if needed.
- c. The program has limited obstetric ultrasonography with interpretation readily available at all times, per the organization’s policy.
Level of Care II: (requirements for Level of Care I plus)
d. Radiologic services with interpretation are readily available per the organization’s policy and include computed tomography scan, magnetic resonance imaging, non-obstetric ultrasound imaging, standard obstetric ultrasound imaging, and maternal echocardiography.

Level of Care III: (requirements for Level of Care II plus)
e. In-house availability of all blood components.
f. Specialized obstetric ultrasound and fetal assessment, including Doppler studies, with interpretation readily available at all times, per the organization’s policy.
g. Basic interventional radiology (capable of performing uterine artery embolization), readily available at all times, per the organization’s policy.
h. Appropriate personnel and equipment available on site 24 hours a day, 7 days a week to provide the capability to ventilate and monitor women in labor and delivery until they can be safely transferred to the intensive care unit.
Maternal Levels of Care Verification—Standards Example

Level of Care III: (requirements for Level of Care II plus)
i. Availability of adult medical and surgical intensive care units that accept pregnant women and women in the postpartum period. The intensive care units are staffed by adult critical care providers on site 24 hours a day, 7 days a week.
j. Board certified anesthesiologist is on site 24 hours a day, 7 days a week.

Level of Care IV: (requirements for Level of Care III plus)
k. On-site medical and surgical capabilities for complex maternal conditions.
l. On-site intensive care unit care for obstetric patients who are primarily or co-managed by a maternal fetal medicine team. (Co-management includes at least daily rounds by a maternal-fetal medicine specialist physician with interaction with the intensive care unit team and other subspecialists with daily documentation)
m. A board-certified anesthesiologist with obstetric anesthesia fellowship training or experience in obstetric anesthesia physically present on site 24 hours a day, 7 days a week.
Maternal Levels of Care Verification—Standards Key Focus Areas

Manual will consist of 5 chapters

- Verification Participation Requirements
- Information Management
- Delivering or Facilitating Care
- Performance improvement
- Program Management
MLC Chapter Highlights – Information Management

- Continuity of patient health information
- Addresses patient care in transfer to higher levels of care
- Assessments of maternal outcomes for process improvement and tracking
- Ensures information collected lends itself to inform decisions for future processes
MLC Chapter Highlights – Delivering or Facilitating Care

- Focus on family centered care
- Development of Plan of Care using risk identification and evidence-based clinical practice guidelines
- Care provided within organizational level of care
- Cross cutting approach between orgs to get the Mother to the correct level of care
- Care coordinated across the continuum of the perinatal event
MLC Chapter Highlights – Performance Improvement

- Access performance improvement, specifically the organization’s perinatal program using an interdisciplinary approach

- Requires organization to conduct performance improvement projects for:
  • Severe maternal morbidity and mortality (SMM)
  • Transport process, including maternal outcome
  • Issues related to ongoing care
  • Other issues as chosen by the organization
MLC Chapter Highlights – Program Management

• Ensures organization has the right elements in place per MLC:
  • resources
  • personnel
  • training

• Focuses on relationships between the Levels of Care for:
  • coordination
  • communication
  • education
  • assistance with quality improvement efforts
Lindsay Parker
Associate Director, Hospital Certification
The Program...

- Provides a standardized description of maternity facility capabilities and personnel
- Provides a framework for integrated systems that addresses maternal health needs from basic to high-risk
- Confirms hospitals have a plan for assessing risk and referring patients to a higher level of care facility in obstetric emergency situations
- Enables EMS to know which facilities have the appropriate services, staff, and equipment to care for patients who develop complications
- Promotes collaboration among area health care organizations with differing levels of care
- Encourages Levels III and IV organizations to provide education and training to Levels I and II
- Encourages state and regional authorities to work together, facilitating a coordinated system of care and policies to improve outcomes in communities
Accreditation. Certification. Verification.

Maternal Levels of Care Verification

This program assesses a facility’s care level based on ACOG’s Obstetric Care Consensus.

- Helps to assure stakeholders that providers have the clinical capabilities and expertise to safely provide the services they offer.
- Facilitates collaboration between providers, hospitals, and EMS so that high-risk patients get routed to facilities equipped to handle complex or emergent obstetric cases.

Accreditation and Certification

The Joint Commission has long been the most recognized, respected name in accreditation and certification for a broad range of specialties.

- Evaluates providers’ and healthcare systems’ quality of care and performance through in-depth surveys, detailed data analyses, and ongoing monitoring.
What to Expect

A comprehensive on-site review to verify the level of care provided at a hospital.

- Levels I, II – 1-day assessment by one Joint Commission reviewer
- Levels III, IV – 2-day assessment by one Joint Commission reviewers

The assessment also verifies that agreements are in place with providers of other levels of care to ensure the smooth transfer of patients in need of advanced services.

*The Joint Commission uses a collaborative approach, providing you valuable feedback and recommendations.*
The Steps to Apply

Verification Roadmap

- Connect with your Associate Director
  - Contact verification@jointcommission.org

- Before the Application
  - Review standards in E-dition® and analyze gaps
  - Project plan to address gaps
  - Identify a ready date

- Complete Application on Connect® portal
  - Identify Clinical Practice Guidelines
  - Complete Performance Improvement Plan

- Prepare for Onsite Review
  - Use the Review Process Guide on Connect® portal

- Onsite Review
Reminders...

- Standards & Pre-application available now!
  - Verification@jointcommission.org

- Save the dates:
  - MLC launch event on November 12, 2021
  - MLC live on January 2022
Reduce Morbidity & Mortality

ACHIEVE MATERNAL LEVELS OF CARE VERIFICATION

The Verification program aims to reduce maternal morbidity and mortality by encouraging the growth and evolution of systems that help ensure patients receive risk-appropriate maternal care.

- Several states have passed legislation to establish levels of maternal care designations for all hospitals that provide maternity care. And more states are expected to do the same.
Strengthen Community Confidence, Advance Community Health

Contact us about the advantages of Maternal Levels of Care Verification for your organization.

630-792-5291 | verification@jointcommission.org

Maternal Levels of Care Verification is offered by The Joint Commission in collaboration with the American College of Obstetricians and Gynecologists.
Questions
Thank you!