

MARCH 2023

Checklist to Raise the Bar for Maternal Health Equity and Excellence

As a Provider of Whole-Person Maternal & Newborn Care

Getting Started

Assess your organization's current conditions and activities, including:

- Latest maternal and infant health access, outcomes, quality, and experience data, stratified by self-identified race, ethnicity, level of English proficiency, disability, sexual orientation and gender identity, and type of coverage, with historical trends if available.
- Inventory and assessment of clinical maternity and reproductive healthcare services (pre-conception, pregnancy, childbirth, and postpartum practices) through the lens of whole-person care.
- Inventory and assessment of the intercultural competence of leaders and organization.
- Inventory and assessment of the capacity to support the mental health and social needs of diverse childbearing women and people.
- Assessment of the current capability to effectively and respectfully serve specific groups of people who wish to become pregnant, are currently pregnant, or recently gave birth.
- Survey of current and potential birthing people about their expectations for, and recommended improvements of, maternity-related services, co-designed with service users.
- Hospital assessment of facility readiness to support breastfeeding using CDC's mPINC 10 Steps Assessment Tool.

Allocate the necessary budget(s) to improve institutional readiness for exemplary service to diverse populations.

Establish performance metrics across executive management and other staff.

Implement best practices for equitable maternal care delivery, with a focus on mitigating the impact of racism, addressing social needs, and dismantling systemic racism and other structural inequities.

Specific opportunities to improve maternity care

- Make care more accessible (for example, through extended appointment hours, telehealth visits, co-located services, and availability of translators).
- Increase access to maternity services in rural areas. Rural health systems and hospitals without – or at risk of losing – maternity services should explore options to make essential, high-quality maternity services available.
- Ensure birthing people can access a diverse, well-equipped, and effective care team.
- Implement evidence-based practices associated with vaginal birth and reduction of safely avoidable cesarean births.
- Screen for physical and mental health and social needs at key points in pregnancy and postpartum.
- Prioritize meeting mental and behavioral health needs during pregnancy and in the postpartum period.
- Support the reliable provision of respectful maternal-newborn care.
- Expand options for prenatal care and track engagement.
- Provide non-coercive, culturally centered support for lactation.
- Provide postpartum services for at least 12 months.
- Participate in your state’s perinatal quality collaborative and in other high-impact quality improvement initiatives.
- Ensure that staff responsible for interacting with childbearing families have the skills and knowledge to reliably inform and connect them to necessary social supports.
- Implement a consistent, streamlined process for accessing financial assistance or charitable care, within and outside the provider institution, that is not punitive or predicated on the existence of medical debt.
- Establish and sustain an active and well-supported maternity-specific patient and family advisory council that is representative of the community served.
- Ensure access to high-quality, comprehensive reproductive healthcare as a necessary complement to maternal healthcare.

Find detailed recommendations and more resources at nationalpartnership.org/raisingthebar

This resource was made possible thanks to the generous support of the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

