Perinatal Equity Initiative: Addressing Racial Disparities in Maternal and Infant Health Outcomes

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Lafayette Library & Learning Center

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CONTRA COSTA HEALTH

CMQCC Perinatal Equity Portfolio

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What is CMQCC?

Inclusive Language Notice

Currently recognized identifiers such as **“birthing people,” “mother**,” **“maternal,” “they,” “them,**” **“she,**” **“her,”** and **“pregnancy-capable person”** are used about a person who is pregnant or has given birth.

We recognize not all people who become pregnant and give birth identify as mothers or women and will use the above-recognized terms interchangeably to represent all those present in this space receiving care for pregnancy services. All persons are equally deserving of respectful patient-centered care that helps them attain their full potential and live authentic, healthy lives. The healthcare team should respect individual patient preferences regarding gendered language throughout the course of their care.

The term **“family”** is used to refer to any persons the pregnant or postpartum patient designates as such (alternatives: partners, husbands, wives, support persons, loved ones).

The term **“clinician”** is used to denote nursing and medical staff, whereas the term **“provider”** refers to a clinician with diagnosing and prescribing authority.

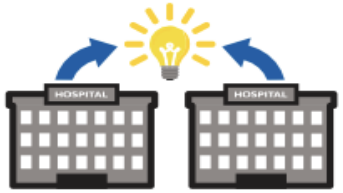
Perinatal Quality Collaboratives (PQCs)

Perinatal Quality Collaboratives:

Working Together to Improve Maternal Outcomes

Overview

Perinatal Quality Collaboratives (PQCs) serve an important role, providing infrastructure that supports quality improvement efforts addressing obstetric care and outcomes. State-based PQCs partner with hospitals, providers, nurses, patients, public health, and other stakeholders to provide opportunities for **collaborative learning, rapid response data,** and **quality improvement science support** to achieve systems-level change.



Collaborative Learning

Rapid Response Data

Quality Improvement Science Support

https://www.cdc.gov/maternal-infant-health/pqc/index.html

CMQCC was founded in 2006 at Stanford Medicine together with the State of California in response to rising maternal mortality and morbidity rates

Driving Maternity QI at Scale

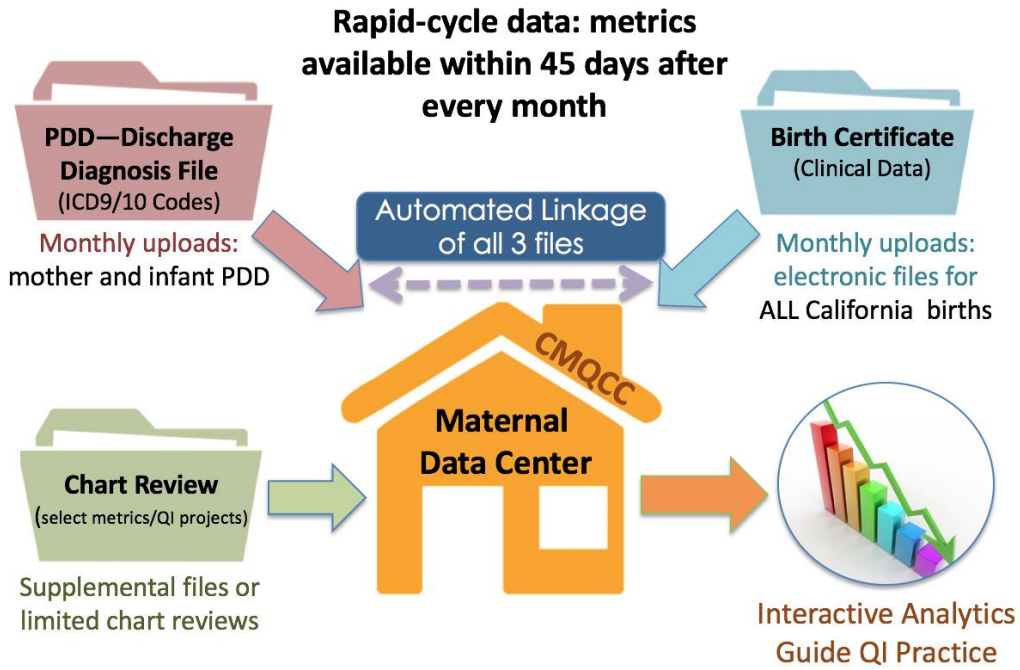
TOOLKITS
Evidence-based toolkits on leading causes of preventable maternal morbidity and mortality

MATERNAL DATA CENTER
Near real-time benchmarking data to support hospitals' quality improvement

IMPLEMENTATION
Coaching on how to implement best practices and sharing among member hospitals

ENGAGEMENT
Engaging partners around aligned goals and promoting patient awareness

Maternal Data Center



Links over 1,000,000 mother/baby records each year!

The Maternal Data Center: 2024 Hospital Members

Launched 2014
38 Hospitals
~70% of Delivery Volume

Launched in 2015
29 Hospitals
~75% of Delivery Volume

Launched in 2012
209 Hospitals
~ 99% of CA Delivery Volume

NEW! National MDC
5 Hospitals to Date
Hawaii (1) New Mexico (1) Texas (3)

281 Hospitals

500,000 deliveries per year

~15% of births nationally

Counts as of 2/28/24

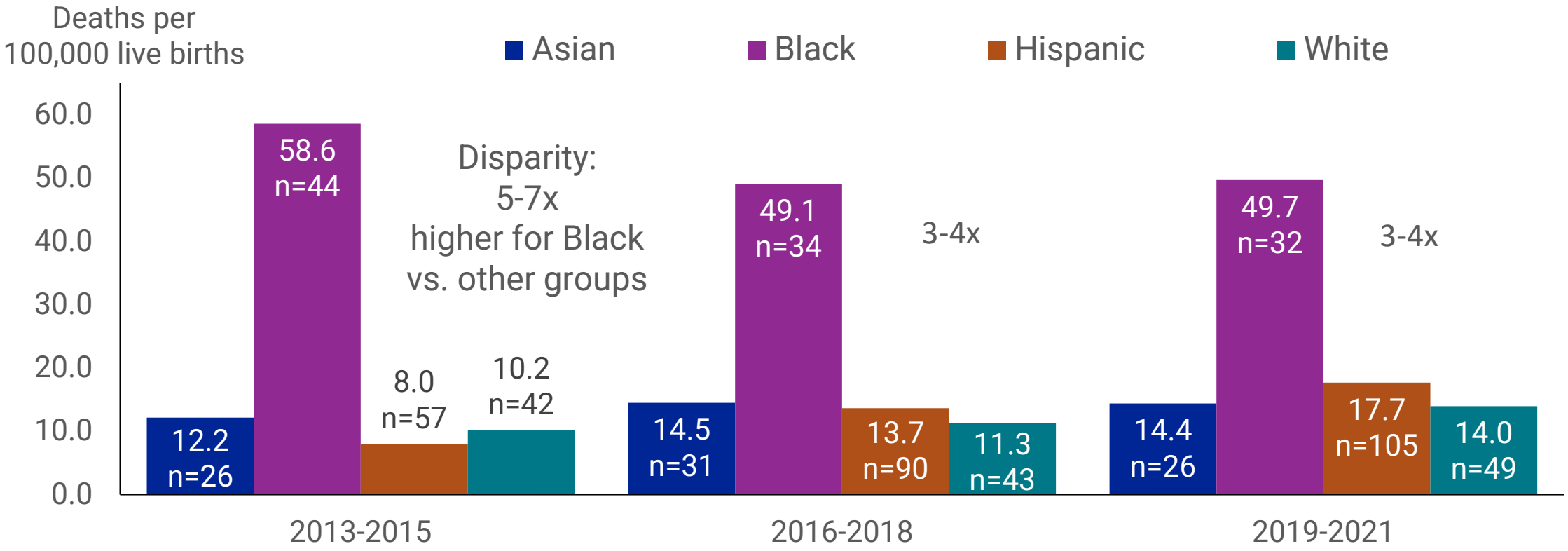
CMQCC Mission Statement

Commitment to Maternal Health Equity and Advancing Our Mission:

Our mission is to eliminate preventable morbidity, mortality, and racial disparities in maternity care across California.

Pregnancy-Related Mortality Ratio by Race/Ethnicity

California 2013-2021(N=607*)

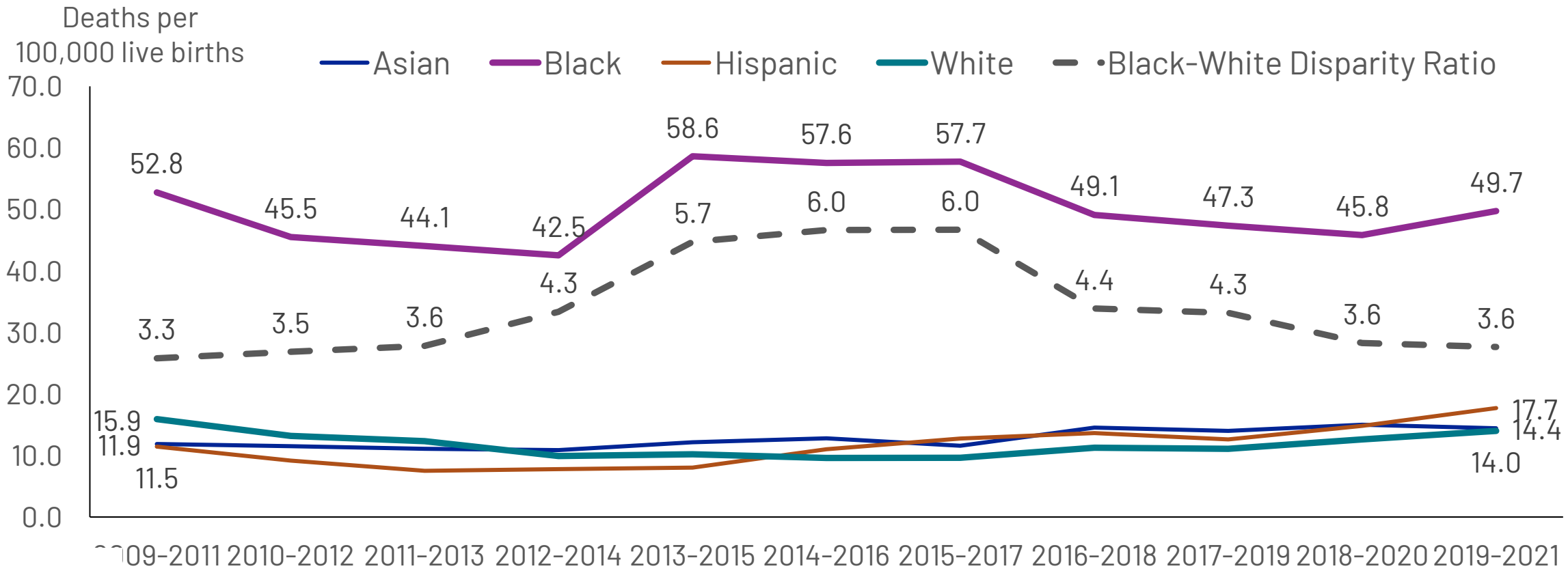


CDPH California Department of Public Health

Pregnancy-related mortality ratio (PRMR) = Number of pregnancy-related deaths per 100,000 live births. Pregnancy-related deaths include deaths within a year of pregnancy from causes related to or aggravated by the pregnancy or its management, as determined by expert committee review. *PRMRs for American Indian/Alaska Native(n=0,0,1 for 2013-2015, 2016-2018, and 2019-2021, respectively), Native Hawaiian/Pacific Islander (n=0,1,3 for 2013-2015, 2016-2018, and 2019-2021, respectively), Multiple-race (n=8,4,10 for 2013-2015, 2016-2018, and 2019-2021, respectively), and other races (n=0,1,0 for 2013-2015, 2016-2018, and 2019-2021, respectively) are not shown due to small counts.
www.cdph.ca.gov/ca-pmss

Pregnancy-Related Mortality Ratio by Race/Ethnicity

California 2009-2021



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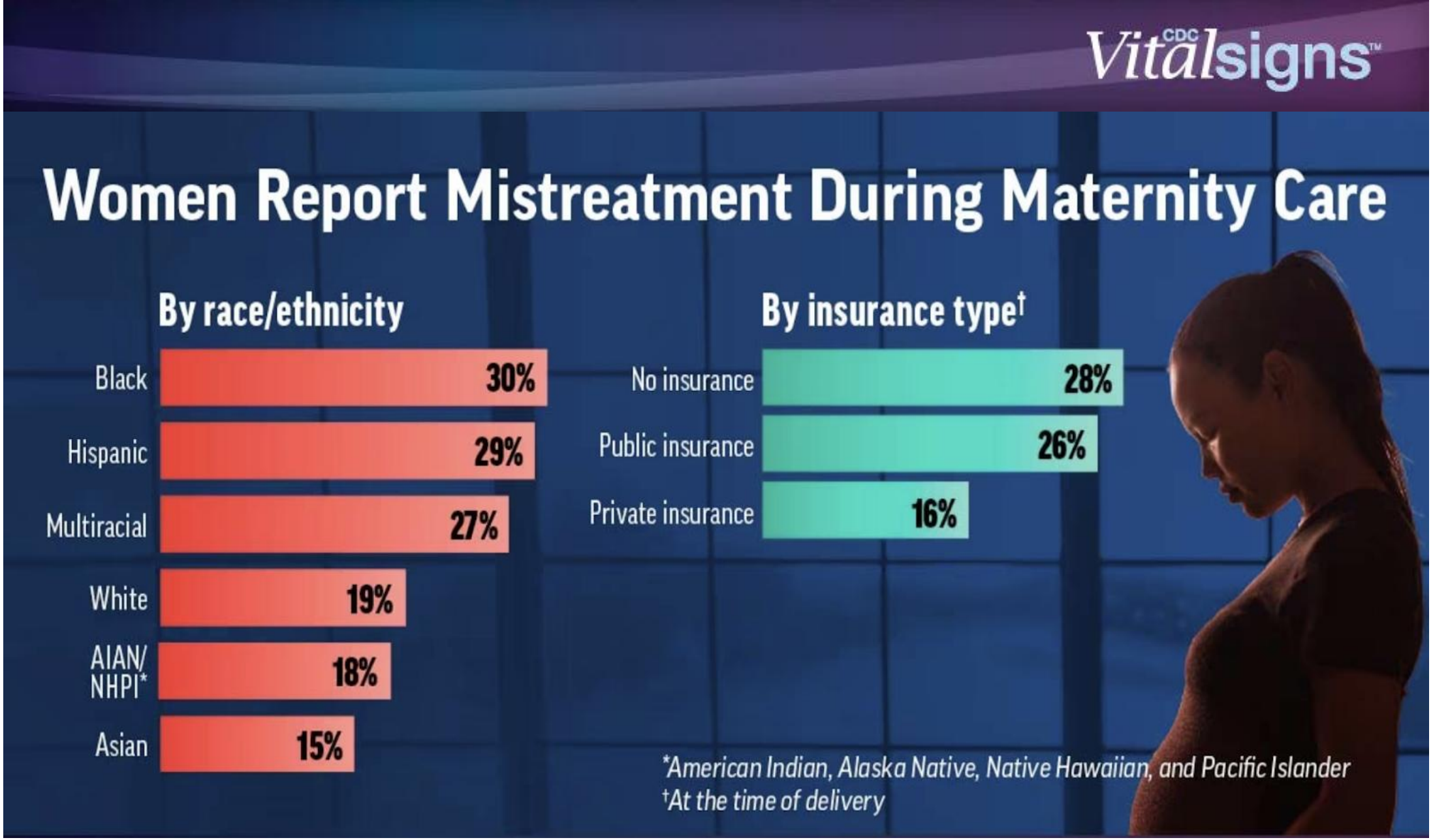
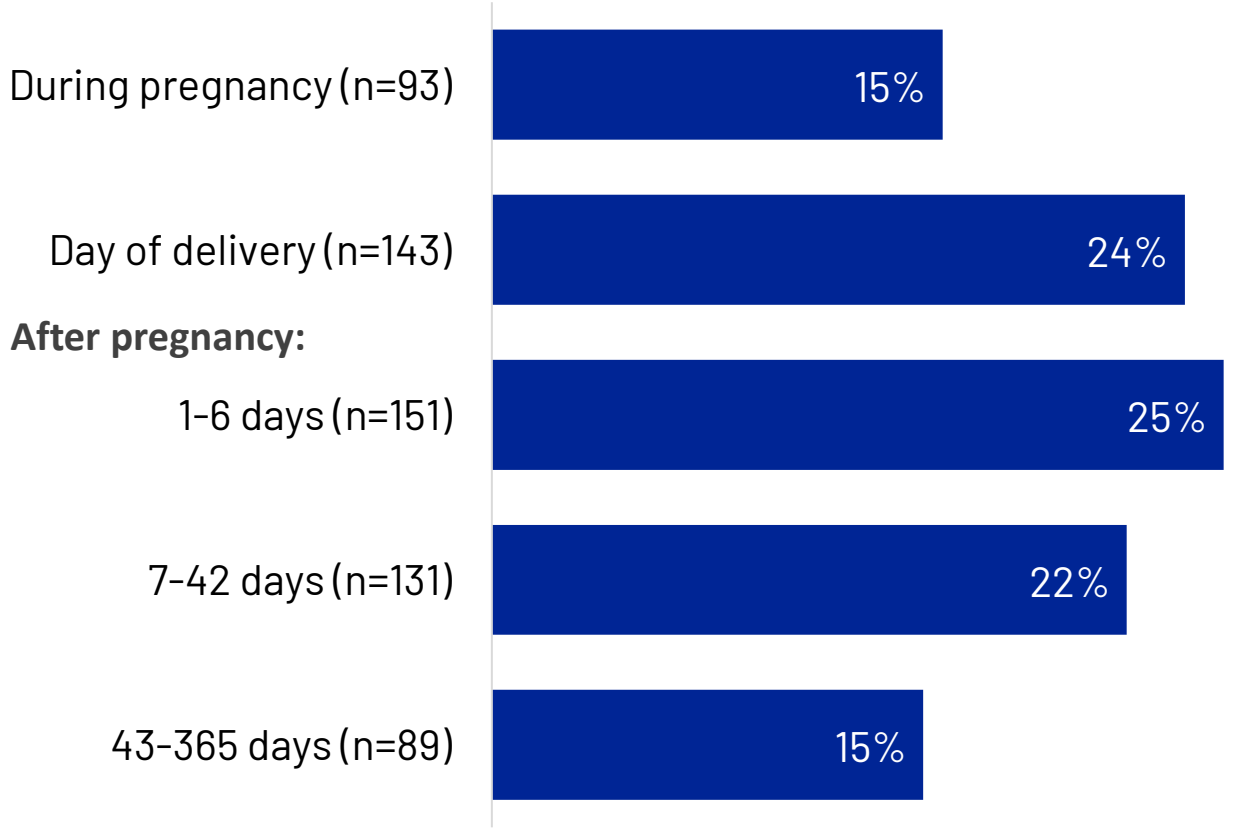


Source: CDC Vitalsigns, August 2023; https://www.cdc.gov/vitalsigns/respectful-maternity-care/index.html, accessed 1/17/25.

Pregnancy-Related Deaths by Timing to Death

California 2013-2021 (N=607)



Pregnancy-related deaths include deaths within a year of pregnancy from causes related to or aggravated by the pregnancy or its management, as determined by expert committee review.
*"delivery" refers to live births and other pregnancy outcomes resulting in fetal deaths
www.cdph.ca.gov/ca-pmss

Our Maternal Health Equity Portfolio

Current CMQCC Efforts

Current CMQCC efforts are imbued with a maternal health equity focus, prioritizing community partnerships and patient voice.

Comprehensive Approach to Addressing Disparities

CMQCC Initiatives & Projects in Partnership

Learning Initiative to Support Vaginal Birth Through an Equity Lens

Anemia

Community Birth Partnership

- Team-Based Care
- Midwife Integration
- Partnering with Doulas
- Improving Transfer of Care

Preeclampsia: Low-Dose Aspirin Campaign

CA Department of Public Health Pregnancy-Associated Review Committee

Sepsis

Post Partum Re-design

Pilot Birth Equity Initiative Tools Used By Five Pilot Hospitals

Move Beyond Implicit Bias Training

- Hospital Action Guide for Respectful and Equity Centered Care

Instill accountability

- Sharing “Commitment to Safe and Equitable Care”
- Collection of patient narratives/stories

Practice Active Listening

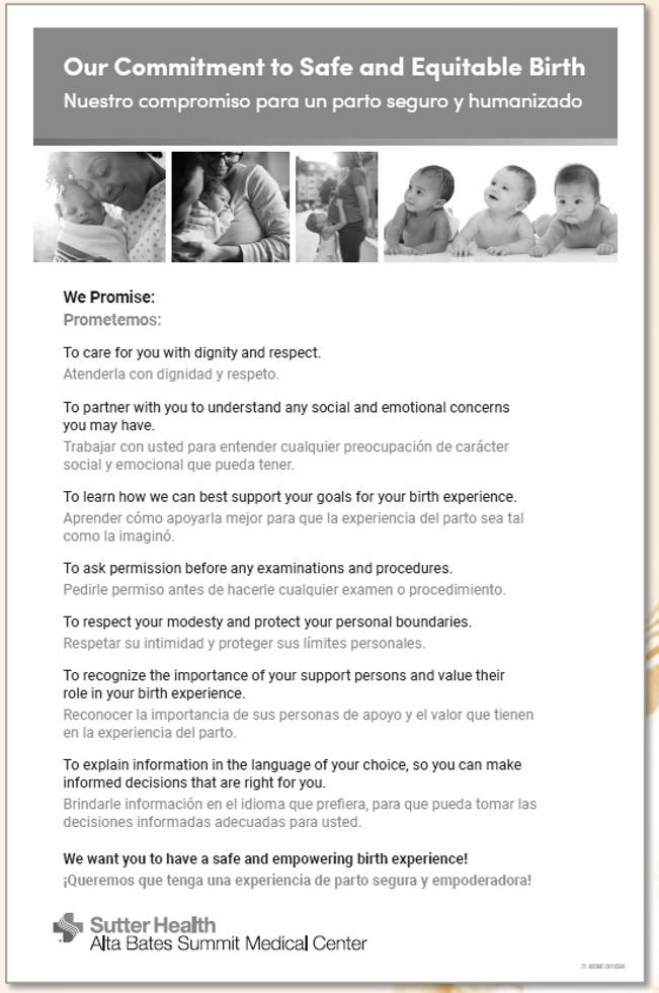
- CDC Hear HER Campaign

Use Data to Drive Change

- Stratify outcomes by race/ethnicity (CMQCC Maternal Data Center)

Change Unit Culture

- Culture of equity survey
- Address microaggressions



Our Commitment to Safe and Equitable Birth

Nuestro compromiso para un parto seguro y humanizado

We Promise:

Prometemos:

To care for you with dignity and respect.
Atenderla con dignidad y respeto.

To partner with you to understand any social and emotional concerns you may have.
Trabajar con usted para entender cualquier preocupación de carácter social y emocional que pueda tener.

To learn how we can best support your goals for your birth experience.
Aprender cómo apoyarla mejor para que la experiencia del parto sea tal como la imaginó.

To ask permission before any examinations and procedures.
Pedirle permiso antes de hacerle cualquier examen o procedimiento.

To respect your modesty and protect your personal boundaries.
Respetar su intimidad y proteger sus límites personales.

To recognize the importance of your support persons and value their role in your birth experience.
Reconocer la importancia de sus personas de apoyo y el valor que tienen en la experiencia del parto.

To explain information in the language of your choice, so you can make informed decisions that are right for you.
Brindarle información en el idioma que prefiera, para que pueda tomar las decisiones informadas adecuadas para usted.

We want you to have a safe and empowering birth experience!
¡Queremos que tenga una experiencia de parto segura y empoderadora!

Sutter Health
Alta Bates Summit Medical Center

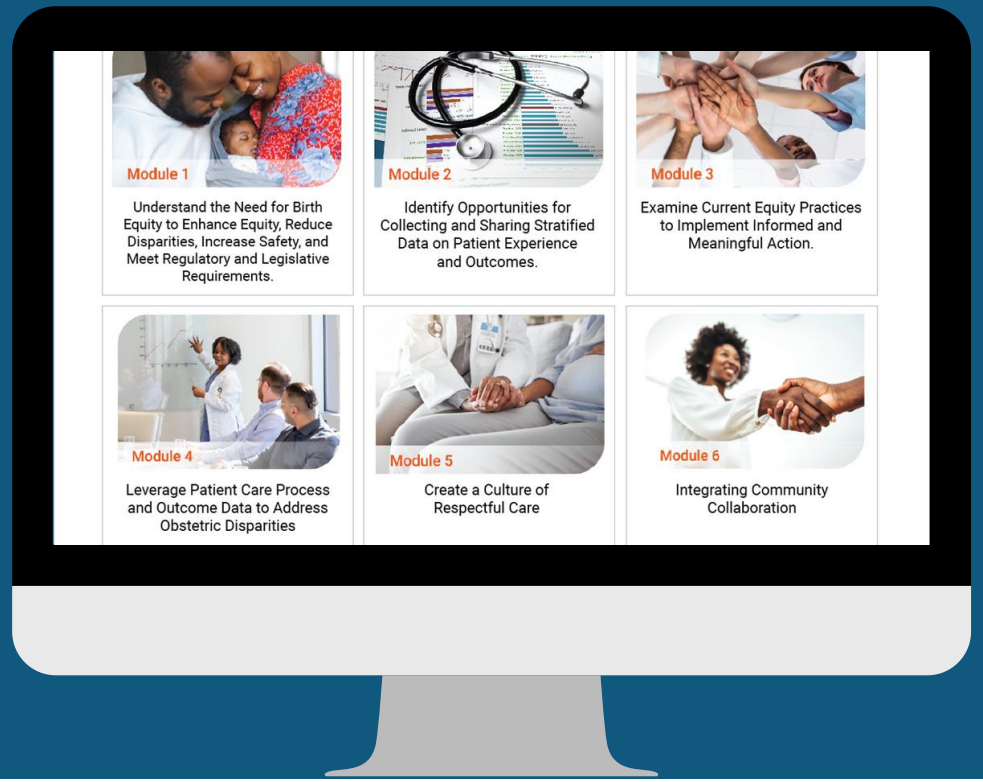
Support for Hospitals

The Hospital Action Guide for Respectful and Equity-Centered Obstetric Care

New Equity Tool:

Now available to California Hospitals

SCAN ME



Funding for this guide was provided (in part) by The Joseph and Vera Long Foundation.

Module Overview

Start Here

Welcome to the Hospital Action Guide for Respectful and Equity-Centered Obstetric Care

Learn how this guide is structured and how best to use it.

Module 1

Understand the Need for Birth Equity to Enhance Equity, Reduce Disparities, Increase Safety, and Meet Regulatory and Legislative Requirements

Shape your understanding of the problems that exist and then prepare to do the work identified in the following modules.

Module 2

Identify Opportunities for Collecting and Sharing Stratified Data on Patient Experience and Outcomes

Learn how both quantitative and qualitative data play a role in your quality improvement efforts.

Module 3

Examine Current Equity Practices to Implement Informed and Meaningful Action

Address policies, procedures and practices that can foster respectful care.

Module 4

Leverage Patient Care Process and Outcome Data to Address Obstetric Disparities

Connect Your Data to the Work

Module 5

Create a Culture of Respectful Care

Commit to Respectful, Equitable and Safe Care

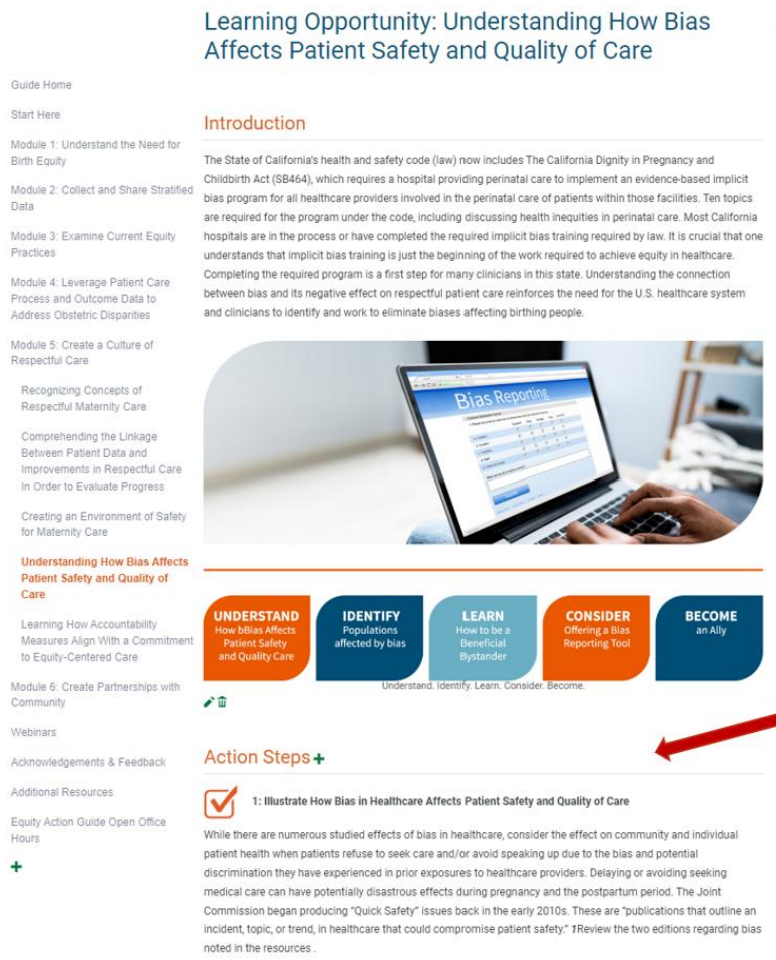
Module 6

Integrating Community Collaboration in Quality Care Initiatives

Tools and examples for creating and sustaining meaningful engagement.

Learning Opportunities & Action Steps

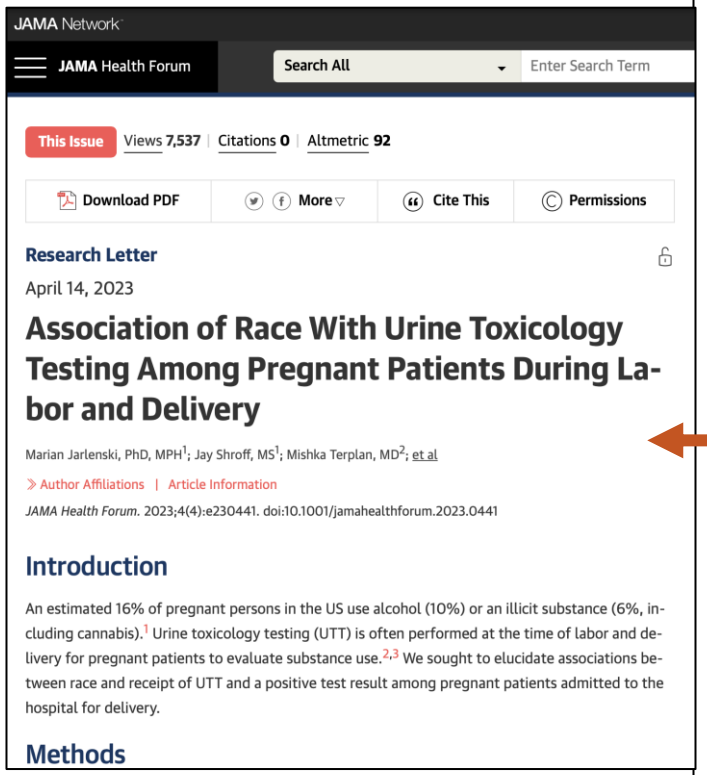
Module 5: Create a Culture of Respectful Care

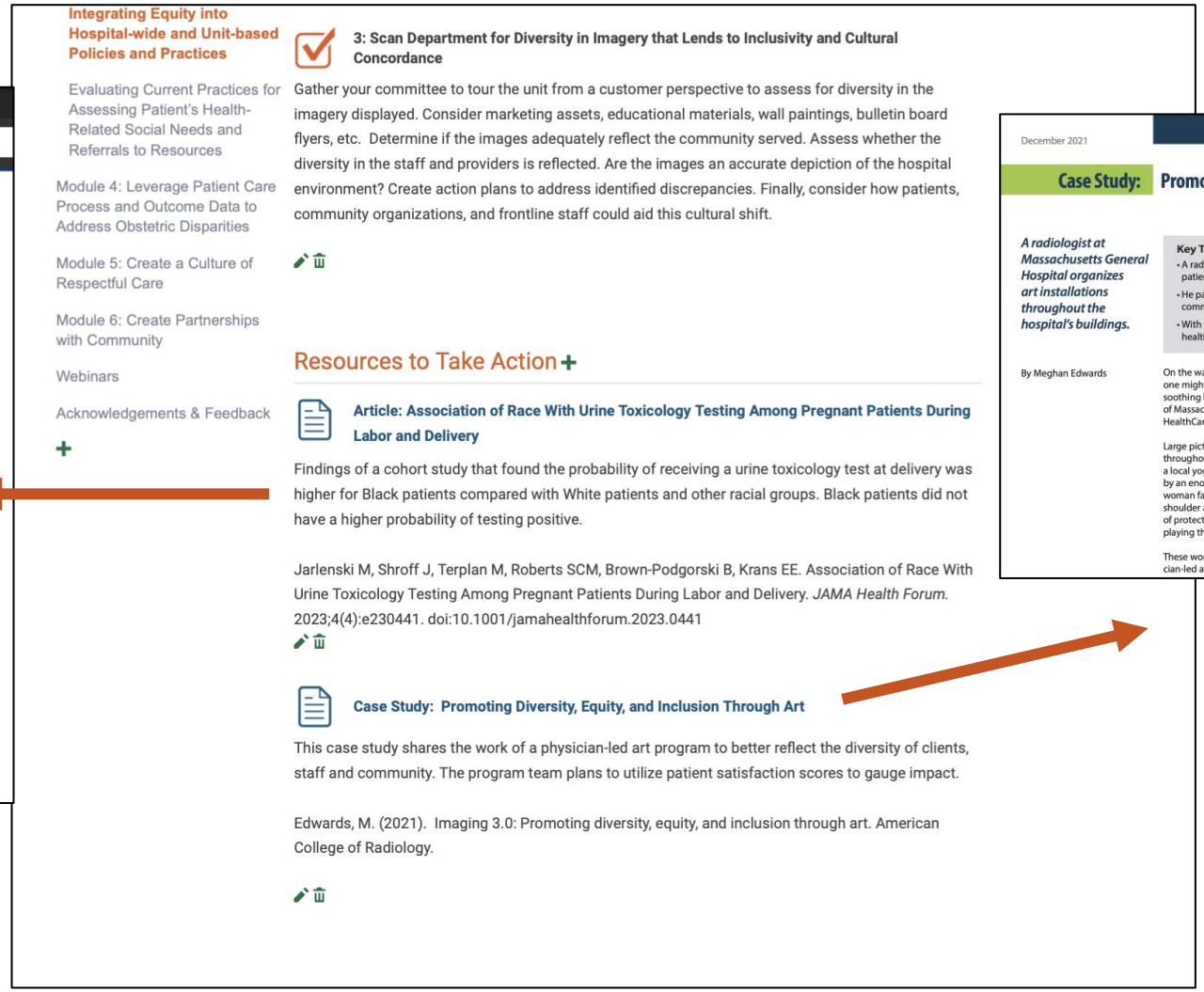


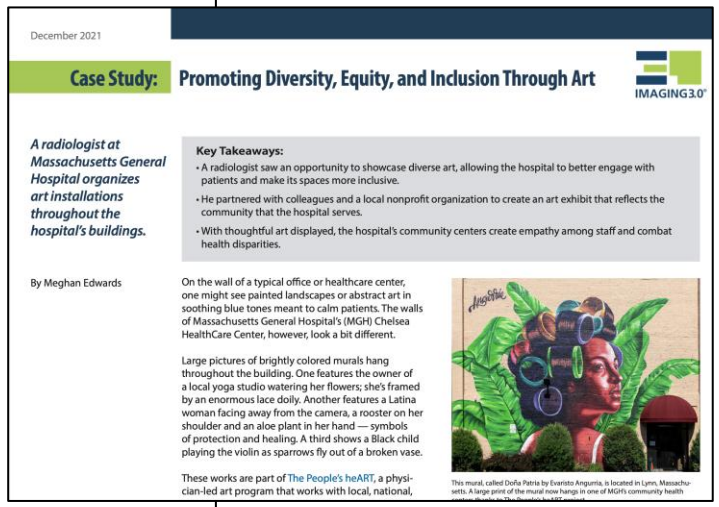
Learning Opportunity: Understanding How Bias Affects Patient Safety and Quality of Care

Action Step 1: Illustrate How Bias in Healthcare Affects Patient Safety and Quality of Care

Resources to Take Action







What Is Respectful Care?

What does it look like at the bedside?

Respectful & Equity-Centered Care

- Patient voice
- Data stratification
- Welcoming Doulas

Hospital Action Guide for Respectful & Equity-Centered Obstetric Care:

Module 5: Create a Culture of Respectful Care

"The content in this module includes the hallmarks of respectful care, linking the data to improvements in respectful care, creating a **safe and equitable environment**, and understanding how **listening and health literacy offer improved opportunities to offer respectful care**."

CMQCC Is Here to Support

Respectful & Equity-Centered Care

- Patient voice
- Data stratification
- Welcoming Doulas

Familiarize. Focus. Collect.

Action Steps +

1: Familiarize Yourself with Current Activities Related to Respectful Care in the Obstetric Care Space

The goal of a respectful care focus is to center the patient as the personal expert on bodily autonomy. Furthermore, it would create space in the healthcare team for the voices of patients and their support systems to achieve improved clinical outcomes and birthing experiences. We highlight the work of several organizations below as resources for teams working on developing a respectful culture in their organizations. You may find other examples that will inform your work in creating a culture that respects the opinions and decision making contributions of all healthcare team members.

We’d Love to Meet with Your Team

- Grand Rounds
- Perinatal Equity Workgroup
- Staff Meeting
- Senior Leadership Team

Email Christina Oldini, RN, MBA, CPHQ, at cmoldini@stanford.edu

Let's Talk

Contact Us





Info@CMQCC.org (or your email/Helpdesk)

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