

Maternal Health in Rural America:

Barriers, Solutions, and Opportunities In Local Hospitals



Today's Goals



Explore

State & federal regulatory landscape, forthcoming requirements and potential implications for your facility.



Discover

Resources and best practices available through the Virginia Neonatal Perinatal Quality Collaborative and Alliance for Innovation on Maternal Health.

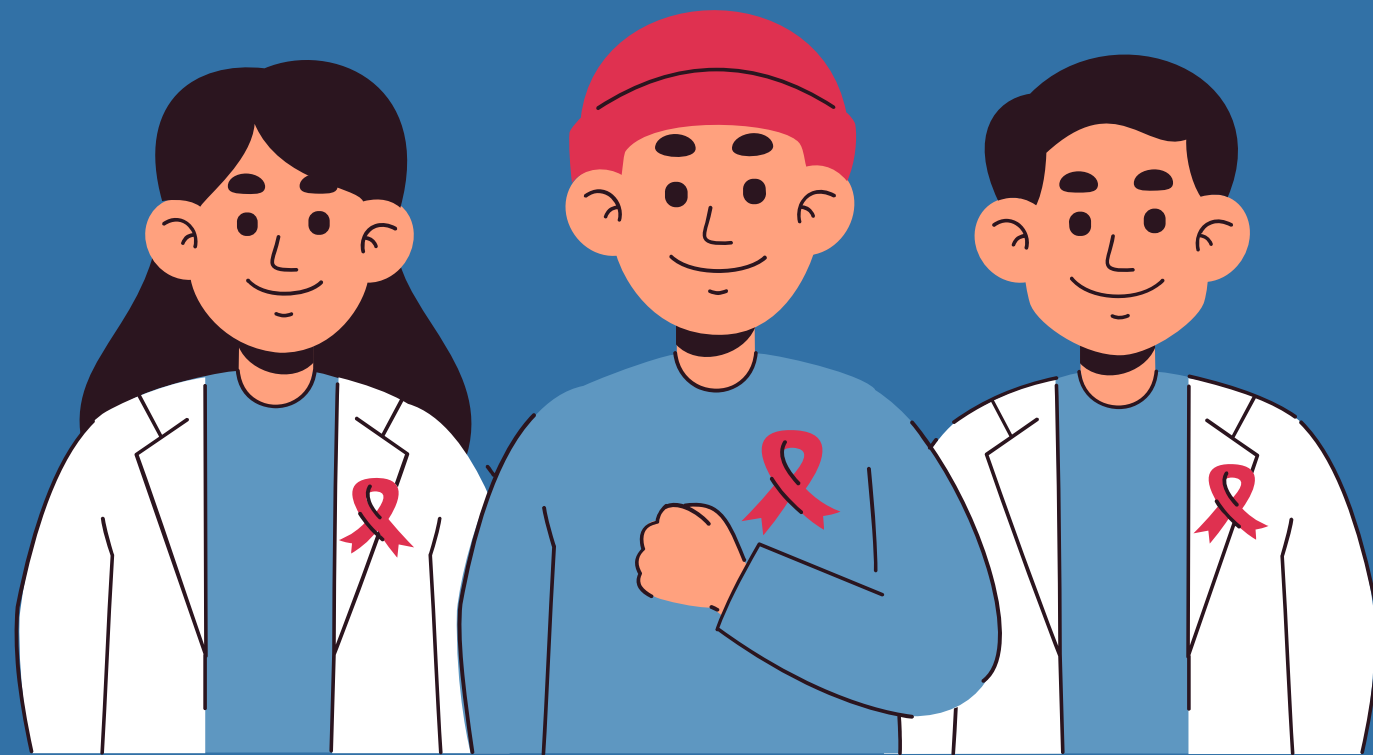
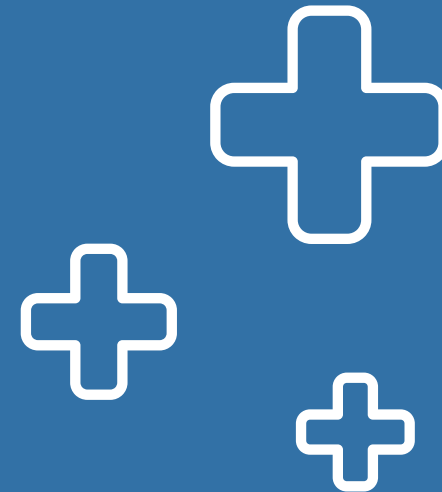


Discuss

Emerging challenges and solutions in your communities.

Regulatory Landscape

VA Legislature: HB2753



Virginia Neonatal Perinatal Collaborative (VNPC) shall...

- Develop training materials and standardized management protocols for inpatient and outpatient providers regarding treatment of OB emergencies, recognition of maternal warning signs, transfer of pregnant and postpartum patients
- Collaborate with facilities and account for their specific resources, populations, and care models
- Collect data regarding implementation of protocols & maternal health outcomes
- All hospitals with an ED or L&D, freestanding EDs, and birthing centers shall implement standardized protocols for identifying and responding to OB emergencies...based on protocols developed by the VNPC.

Regulatory Landscape

Conditions of Participation Updates

Two types of changes:

1. **OB Services** changes - apply to “CAHs providing OB services”
2. **Emergency Services Readiness** changes - apply to all CAHs



COP Updates - Effective 1/1/2026

Obstetrical Services



■ **Staffing & Organization:** Includes supervision requirements for labor, delivery, post partum, and recovery rooms; define OB privileges

■ **Delivery of Service:** Includes requirements related to equipment and specifying provisions and protocols based on nationally-recognized guidelines

■ **Staff Training:** Establish a governing body to identify staff for training; document completion of training; mechanism for staff to demonstrate knowledge

COP Updates - Effective 1/1/2027

Obstetrical Services: **QAPI Integration**

- Revised standards require use of hospital QAPI program to assess and improve health outcomes and disparities among OB patients on an ongoing basis
- Stratify data by subpopulations, use quality indicators for OB patients, analyze and prioritize health outcomes and disparities and conduct at least one PI project annually
- Required leadership engagement in Maternal Health QAPI
- Required process to incorporate Maternal Morbidity Review Committee data, if available, into the facility's QAPI program

COP Updates - Effective July 1, 2025

Emergency Services Readiness

- Evidence-based protocols
- Provisions readily available
- Annual staff training on provisions and protocols



“How can we be prepared to stabilize and transfer an obstetric emergency?”



**Upcoming webinars:
July 12 and August 5 at
12pm ET**



Obstetric Emergency Readiness Resource Kit



- Readiness
- Recognition and Prevention
- Response
- Reporting and Systems Learning
- Respectful, Equitable, and Supportive Care

Resource Kit Scope and Highlights

- ▶ This resource kit is not intended to be a response manual but rather provides background and resources for review, planning, prioritization, and adaptation to unique needs and clinical settings to support readiness efforts in advance of an obstetric emergency.
- ▶ This resource kit may particularly benefit Family Medicine and Emergency Medicine clinicians, nursing administrators, and other leaders in clinical settings that may not routinely encounter an obstetric emergency.
- ▶ Because high quality care is not possible without equitable care, centering equity in quality improvement and implementation of elements of this resource kit is crucial to address inequities that lead to disparities in health outcomes.

Download the full resource kit here: https://saferbirth.org/wp-content/uploads/FINAL_AIM_OERRK.pdf



Thank you!

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VHHA

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