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

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