## **Process**

### Inputs

- Legislative authority and protections
- Authority to access required data
- Confidentiality
- Immunity for committee members from subpoena
- Leadership buy-in
- Staff
- Funding
- Defined scope and explicit protocols
- Data
- Vital records
- Medical records
- Social Service Records
- Defined stakeholders and membership
- With status or authority to implement recommendations within their organizations
- Broad representation

#### Activities

- Secure any missing inputs (from previous column)
- Periodically recruit and train committee members
- Identify cases and select cases for abstraction
- Abstract cases and produce case summary
- Convene committee meeting, review cases, and make key committee decisions
- Disseminate recommendations
- Identify implementation resources

# Outputs

- Fully functional and sustainable MMRC
- · Robust, accurate data
- Health surveillance and data analysis build evidence base
- Recommendations
- Reports and presentations
- Campaigns, trainings, and initiatives

#### Short

- Awareness of the existence and recommendations of the MMRC among the public, clinicians, and policy makers
- Adoption of policy changes by health systems
- Implementation of data driven recommendations e.g. evidence based practices, screenings, and patient education by providers, etc.

# Outcomes

- Widespread adoption of patient safety bundles and/ or policies that reflect the highest standard of care
- Access to holistic care during pregnancy and postpartum period e.g. prenatal, diabetes, mental health, and substance use disorder care, etc.
- Coordination of care across providers
- Elimination of disparities in pregnancy-related deaths

#### Long

- Elimination of preventable maternal death
- Reduction in maternal morbidity
- Improvement in population health for women of reproductive age including reductions in hypertension, obesity, smoking, substance use, and other chronic diseases

MMRC recommendations are part of a cycle of continuous quality improvement for health systems.

## Assumptions

State has a task force, perinatal quality collaborative or other infrastructure to implement MMRC recommendations. State has a funded, functioning system for conducting quality autopsies



#### **Contextual Factors**

- Geography
- Political will and support





to Eliminate Maternal Mortality

