APPLY LEARNING FROM KANSAS MATERNAL MORTALITY REVIEW PROCESS

Randall Morgan MD
Taylor Bertschy DO
Maternal Mortality Rate, California and United States; 1999-2013

SOURCE: State of California, Department of Public Health, California Birth and Death Statistical Master Files, 1999-2013. Maternal mortality for California (deaths ≤ 42 days postpartum) was calculated using ICD-10 cause of death classification (codes A34, O00-O95, O96-O99). United States data and HP2020 Objective use the same codes. U.S. maternal mortality data is published by the National Center for Health Statistics (NCHS) through 2007 only. U.S. maternal mortality rates from 2008 through 2013 were calculated using CDC Wonder Online Database, accessed at http://wonder.cdc.gov; March 11, 2015.

Produced by California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division, March, 2015.
# Kansas Maternal Mortality and Severe Maternal Morbidity

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California Maternal Quality Care Collaborative

- Studied deaths-Maternal Mortality Review process
  - Cause of death
  - Pregnancy relatedness
  - Preventability
    - Good chance
    - Some chance
    - No chance
    - Unable to determine
  - Quality Improvement
California Maternal Quality Care Collaborative

- Quality Improvement
  - Bundles
    - Readiness – every unit
      - Structure
    - Recognition & prevention- every patient
      - Process
    - Response – every event
      - Outcome
  - Reporting/systems learning- every unit
Severe maternal morbidities

For every maternal mortality, there are 50-100 severe maternal morbidities

- Hysterectomy
- Pulmonary injury
- Genital urinary injury
- Renal
- Transfusion reactions
Next Initiative Task Force for Kansas Recommendation for AIM Bundle recommendations -are based on

- Kansas Maternal Mortality Review Committee findings
- ACOG’s Alliance for Innovation on Maternal Health
- Learnings from other states who have started the maternal mortality review process ahead of Kansas
- Expert observations of Kansas providers who care for women with
  - Severe maternal morbidities
  - Disparities
  - Social and mental health issues
Next Initiative Task Force recommendations

- “Severe Hypertension in Pregnancy”- involves patients, delivering physicians, emergency physicians, midwives, hospitals all sizes, outpatient clinics, diversity
- “Maternal Mental Health: Depression and Anxiety” - every woman, families, mental health screening, local resources
- “Postpartum Care Basics for Maternal Safety: Transition from Maternity to Well-Woman Care” – transition from hospital to outpatient, disparities
- “Reduction of Peripartum Racial/Ethnic Disparities” - patient, family & community advocates, health systems, care givers, health records, transitions of care
Please join us

• Please join us to make Kansas the best place to give birth, be born and raise a family.

• You can help Kansas by:
  • Joining to prevent maternal mortality
  • Supporting the initiative
  • Engaging your community, hospital, public and providers,
  • Helping find resources within your community to make Kansas safer.