

DPH Designated Maternal Centers
Self-Assessment Tool

Category	Level I Maternal Center	Level II Maternal Center	Level III Maternal Center
Definition	A Level I maternal center must be able to provide care for low- to moderate-risk pregnancies with the ability to detect, stabilize, and initiate management of unanticipated maternal-fetal or neonatal problems that occur during the antepartum, intrapartum, or postpartum period until the patient can be transferred to a facility at which specialty maternal care is available. Examples of appropriate patients are women with term twin gestation, trial of labor after cesarean, uncomplicated cesarean, or preeclampsia without severe features at term.	A Level II maternal center must offer care for moderate- to high-risk antepartum, intrapartum, or postpartum conditions, such as preeclampsia or placenta previa with no prior uterine surgery.	A Level III maternal center must be capable of providing care to patients with more complex maternal medical conditions, obstetric conditions, and fetal conditions, such as moderate maternal cardiac disease, suspected placenta accreta or placenta previa and previous uterine surgery, suspected placenta percreta, adult respiratory distress syndrome, acute fatty liver of pregnancy, coagulation disorders, complex hematologic or autoimmune disorders, and expectant management of preeclampsia with severe features remote from term.
Neonatal Resuscitation	1. Provide at least one caregiver to be present at every delivery whose primary responsibility is for the newborn infant, and a person who has successfully completed the Neonatal Resuscitation Program and can be immediately available to be onsite to perform neonatal resuscitation, including endotracheal intubation and administration of medications.	1. Provide at least one caregiver to be present at every delivery whose primary responsibility is for the newborn infant, and a person who has successfully completed the Neonatal Resuscitation Program and can be available to be onsite to perform neonatal resuscitation, including endotracheal intubation and administration of medications.	1. Provide at least one caregiver to be present at every delivery whose primary responsibility is for the newborn infant, and a person who has successfully completed the Neonatal Resuscitation Program and can be available to be onsite to perform neonatal resuscitation, including endotracheal intubation and administration of medications.
Maternal Resuscitation	2. Have written policies and procedures in place for the	2. Have written policies and procedures in place for the	2. Have written policies and procedures in place for the stabilization and

DPH Designated Maternal Centers
Self-Assessment Tool

	<p>stabilization and resuscitation of the pregnant or postpartum patient in accordance with current standards of medical practice.</p> <p>3. Have staff members physically present at all times who have completed Advanced Cardiac Life Support training and who have the skills to perform a complete resuscitation on the mother.</p> <p>4. Have resuscitation equipment immediately physically present at all times in the labor and delivery, antepartum, and postpartum areas, including difficult airway management equipment for pregnancy and postpartum patients.</p>	<p>stabilization and resuscitation of the pregnant or postpartum patient in accordance with current standards of medical practice.</p> <p>3. Have staff members physically present at all times who have completed Advanced Cardiac Life Support training and who have the skills to perform a complete resuscitation on the mother.</p> <p>4. Have resuscitation equipment physically present at all times in the labor and delivery, antepartum, and postpartum areas, including difficult airway management equipment for pregnancy and postpartum patients.</p>	<p>resuscitation of the pregnant or postpartum patient in accordance with current standards of medical practice.</p> <p>3. Have staff members physically present at all times who have completed Advanced Cardiac Life Support training and who have the skills to perform a complete resuscitation on the mother.</p> <p>4. Have resuscitation equipment physically present at all times in the labor and delivery, antepartum, and postpartum areas, including difficult airway management equipment for pregnancy and postpartum patients.</p>
<p>Protocols for high-risk conditions</p>	<p>5. Have the capability to implement the Alliance for Innovation on Maternal Health (“AIM”) patient safety bundles for common causes of preventable maternal morbidity, such as management of maternal venous thromboembolism, obstetric hemorrhage, and maternal severe hypertension in pregnancy.</p>	<p>5. Have the capability to implement patient safety bundles for common causes of preventable maternal morbidity, such as management of maternal venous thromboembolism, obstetric hemorrhage, and maternal severe hypertension in pregnancy.</p>	<p>5. Have the capability to implement patient safety bundles for common causes of preventable maternal morbidity, such as management of maternal venous thromboembolism, obstetric hemorrhage, and maternal severe hypertension in pregnancy.</p>

DPH Designated Maternal Centers
Self-Assessment Tool

Laboratory	6. Have laboratory testing readily available at all times.	6. Have laboratory testing readily available at all times.	6. Have laboratory testing readily available at all times.
Blood Bank	7. Have blood bank services readily available at all times, including an ability to initiate massive transfusion protocol, with a process to obtain more blood component therapy as needed.	7. Have blood bank services readily available at all times, including an ability to initiate massive transfusion protocol, with a process to obtain more blood component therapy as needed.	7. Have blood bank services readily available at all times, including an ability to initiate massive transfusion protocol and in-house availability of all blood components.
Intensive Care Unit / Surgery			8. Provide onsite medical and surgical intensive care units that accept pregnant women and women in the postpartum period, have adult critical care providers physically present at all times, and have a maternal-fetal medicine specialist readily available at all times to actively communicate or consult for all obstetric patients in the intensive care unit. 9. Have appropriate equipment and personnel physically present at all times to ventilate and monitor women in labor and delivery until they can be transferred safely to the intensive care unit.
Diagnostics	8. Provide limited obstetric ultrasonography with interpretation readily available at all times.	8. Provide standard obstetric ultrasound imaging with interpretation readily available at all times. 9. Provide computed tomography scanning, magnetic resonance imaging,	10. Provide standard obstetric ultrasound imaging with interpretation readily available at all times. 11. Provide computed tomography scanning, magnetic resonance imaging, non-obstetric ultrasound imaging, and maternal echocardiography with

DPH Designated Maternal Centers
Self-Assessment Tool

		non-obstetric ultrasound imaging, and maternal echocardiography with interpretation available to be onsite or by telemedicine.	<p>interpretation readily available at all times.</p> <p>12. Provide specialized obstetric ultrasound and fetal assessment, including Doppler studies, with interpretation readily available remotely, but does not have to be available twenty-four (24) hours a day, seven (7) days a week.</p> <p>13. Provide basic interventional radiology capable of performing uterine artery embolization readily available at all times.</p>
Perinatal Pathology			14. Have a process for providing perinatal pathology services.
Genetic Counseling			15. Provide a program for genetic diagnosis and counseling for genetic disorders or a policy and process for referral to an appropriate provider for genetic consultation.
Breastfeeding	9. Have a written breastfeeding policy that is routinely communicated to all health care staff and train all health care staff in skills necessary to implement this policy.	<p>10. Have a written breastfeeding policy that is routinely communicated to all health care staff and train all health care staff in skills necessary to implement this policy.</p> <p>11. Ensure lactation support services are available to be onsite.</p>	<p>16. Have a written breastfeeding policy that is routinely communicated to all health care staff and train all health care staff in skills necessary to implement this policy.</p> <p>17. Ensure lactation support services are available to be onsite.</p>

DPH Designated Maternal Centers
Self-Assessment Tool

Unassigned patients	10. Provide emergency care and transport for unassigned patients.	12. Provide emergency care and transport for unassigned patients.	18. Provide emergency care for unassigned patients.
Perinatal Education	11. Provide perinatal education at frequent intervals concerning high-risk events to medical, nursing and ancillary staff, in order to prepare for such emergencies.	13. Provide perinatal education at frequent intervals concerning high-risk events to medical, nursing and ancillary staff, in order to prepare for such emergencies.	19. Provide perinatal education at frequent intervals concerning high-risk events to medical, nursing and ancillary staff, in order to prepare for such emergencies.
Quality Improvement	12. Participate in the Georgia Perinatal Quality Collaborative or a comparable state, regional, or national quality improvement collaborative.	14. Participate in the Georgia Perinatal Quality Collaborative or a comparable state, regional, or national quality improvement collaborative.	20. Participate in the Georgia Perinatal Quality Collaborative or a comparable state, regional, or national quality improvement collaborative.
Transports / Transfers	13. Have guidelines and mechanisms in place for specialty consultations and have an agreement in place with a Regional Perinatal Center or a Level III receiving facility, as designated by the Georgia Department of Community Health Certificate of Need program, for the timely transport of patients who require a higher level of care.	15. Have guidelines and mechanisms in place for specialty consultations and have an agreement in place with a Regional Perinatal Center or a Level III receiving facility, as designated by the Georgia Department of Community Health Certificate of Need program, for the timely transport of patients who require a higher level of care.	21. Have a documented mechanism to facilitate and accept maternal transfers and transports.

DPH Designated Maternal Centers
Self-Assessment Tool

<p>Director of Obstetrical Services</p>	<p>1. A director of obstetrical services on staff who is an obstetrician, or who is a board certified family practitioner with obstetrical privileges.</p>	<p>1. A director of obstetric services on staff who is an obstetrician with experience in obstetric care or board certified in another specialty with privileges and expertise in obstetric care including with surgical skill and privileges to perform a cesarean delivery.</p>	<p>1. A director of obstetric services on staff who is a board certified obstetrician.</p>
<p>Obstetric Providers</p>	<p>2. A registered nurse trained in maternal care with level-appropriate competencies as demonstrated by nursing competency documentation and a midwife, family physician, or an obstetrician readily available at all times to attend every birth.</p> <p>3. A physician with privileges to perform emergency cesarean delivery readily available at all times.</p>	<p>2. An obstetrician or a family physician with obstetric fellowship training or equivalent training and skills in obstetrics, and with surgical skill and privileges to perform cesarean delivery readily available at all times.</p>	<p>2. An obstetrician physically present at all times.</p>
<p>Perinatal Nurse Manager/Nursing</p>	<p>4. A perinatal nurse manager on staff who is a registered nurse with level-appropriate formal training and experience in maternal care, and preferably a Bachelor of Science in Nursing.</p>	<p>3. A perinatal nurse manager on staff who is a registered nurse with level-appropriate formal training and experience in maternal care, and preferably a Bachelor of Science in Nursing.</p> <p>4. Registered nurses trained in maternal care with level-appropriate competencies as</p>	<p>3. A perinatal nurse manager on staff who is a registered nurse with a Bachelor of Science in Nursing and adequate numbers of registered nurses who have special training and experience in the management of women with complex and critical maternal illnesses and obstetric complications.</p>

DPH Designated Maternal Centers
Self-Assessment Tool

		demonstrated by nursing competency documentation readily available at all times.	
Maternal-Fetal Medicine		5. A maternal-fetal medicine specialist who is available at all times for consultation onsite or by telephone or telemedicine.	4. A maternal-fetal medicine specialist with inpatient privileges readily available at all times onsite or by telephone or telemedicine. The maternal-fetal medicine specialist must be able to be physically present to provide direct care within twenty-four (24) hours of a request.
Specialists		6. Internal or family medicine physicians and general surgeons readily available at all times for obstetric patients.	5. Subspecialists, such as specialists in critical care, general surgery, infectious disease, hematology, cardiology, nephrology, neurology, gastroenterology, internal medicine, behavioral health, and neonatology, readily available at all times for inpatient consultation.
Anesthesiologist	5. An anesthesia provider, such as an anesthesiologist, nurse anesthetist, or an anesthesiologist assistant working with an anesthesiologist, for labor analgesia and surgical anesthesia readily available at all times.	7. An anesthesiologist readily available at all times.	6. An anesthesiologist physically present at all times. 7. A director of obstetric anesthesia services who is a board certified anesthesiologist with obstetric anesthesia fellowship training or experience in obstetric anesthesia.
Pharmacist			8. A pharmacist who is physically present at all times.