CDC Levels of Care Assessment Tool

Andrea Catalano, MPH

Division of Reproductive Health

LOCATe™

Background

Risk-Appropriate Care

- Strategy promoted in 1976 March of Dimes report*
- Simple concept quickly embraced by many states
- Enhanced by
  - Public health research
- Implementation complicated by
  - Reimbursement policies
  - Hospital competition
  - Regional context

Pregnant woman & neonate

+

Appropriate level of care facility

→ Improved outcomes

* Committee on Perinatal Health. Toward Improving the Outcome of Pregnancy: Recommendations for the Regional Development of Maternal and Perinatal Health Services. White Plains, NY: March of Dimes National Foundation, 1976.

LOCATe

Policy Based on Guidance

Challenges

- Reimbursement, competition, landscape
- Lack of granularity = Inconsistent policies
- AAP guidelines + X/Y/Z = State policy A/B/C*
- Absence of maternal level criteria comparable to neonatal (Until 2015**)

* Blackmon LR, Barfield WD, Stark AR. Hospital neonatal services in the United States: variation in definitions, criteria, and regulatory status, 2008. J Perinatol. 2009 Dec;29(12):788-94
** Levels of maternal care. Obstetric Care Consensus No. 2. American College of Obstetricians and Gynecologists. Obstet Gynecol 2015;125:502–15

LOCATe

A Perfect Storm

What is LOCATe?

1) **Levels of Care Assessment Tool**

2) **Produces standardized assessments**
   - Fosters collaboration across borders
   - Strengthens evidence for increased specificity in criteria

3) **Facilitates stakeholder conversations**
   - Increases (common) understanding of landscape
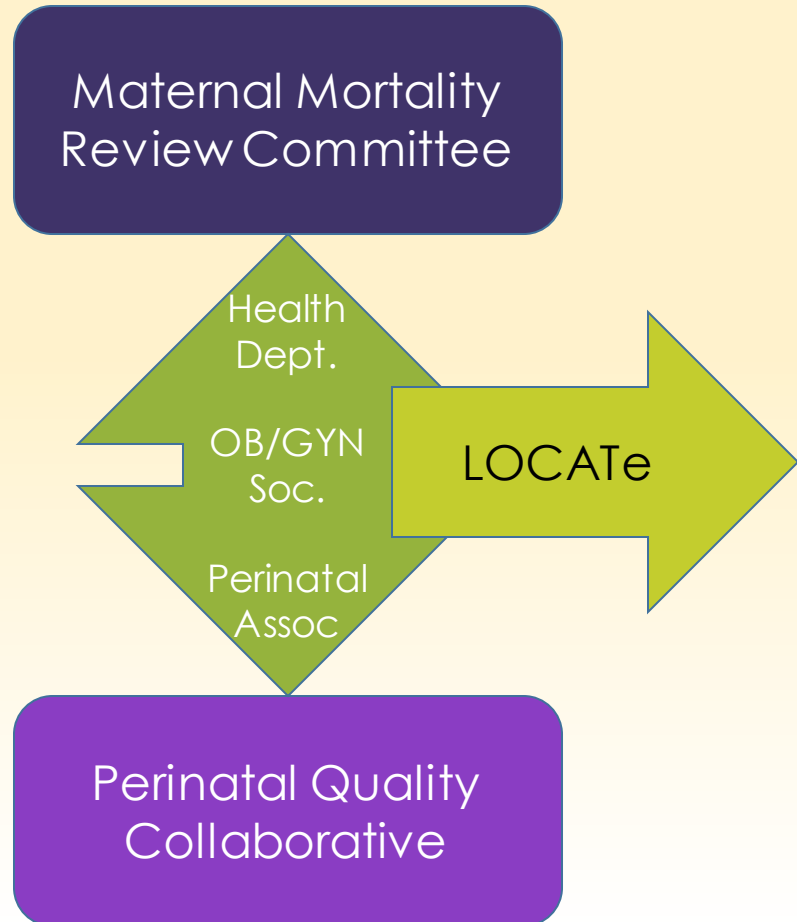   - Data driven improvements in facilities & systems

...while, minimizing burden on respondents

LOCATe

Recent Context

Maternal Mortality Review Committee

Health Dept.

OB/GYN Soc.

Perinatal Assoc

LOCATe

Perinatal Quality Collaborative

Recommendation Themes: 9 Committee Report

- Improve training
- Enforce policies and procedures
- **Adopt maternal levels of care/ Ensure appropriate level of care determination**
- Improve access to care
- Improve patient/provider communication
- Improve patient management for mental health conditions
- Improve procedures related to communication and coordination between providers
- Improve standards regarding assessment, diagnosis and treatment decisions
- Improve policies related to patient management, communication and coordination between providers, and language translation
- Improve policies regarding prevention initiatives, including screening procedures and substance use prevention or treatment programs

LOCATe

Development & Content

Design & Content

- Assessment includes questions about:
  - Hospital equipment & staffing
  - Sub-specialists & their availability
  - Self-assessment of level
  - Volume of procedures
  - Drills & protocols for maternal emergencies
  - Transports & facility-level statistics
- Platform options
  - SurveyMonkey or REDCap

LOCATe

LOCATe V8

Demographic and statistical information you will need about your facility.....

DEMOGRAPHICS

Facility name, city and state of physical location, the date the survey was completed, and the job titles of all persons who contributed information to complete this survey (example: NICU Director, DON, Quality Director, etc.)

What is the time frame (beginning and ending dates) for your maternal and neonatal data. (Please use the latest complete year of data available)

NEONATAL STATISTICS

FOR all live births (LB) delivered at your facility how many were:
o live births (Total);
o live births less than 1,500 grams (VLBW);
o live births less than 32 weeks gestation (VPTD);

And how many of the above:
o died at your facility;
o were transferred out to a higher level of care facility (high risk);
o were received back from a higher level of care facility (convalescent);

MATERNAL STATISTICS

FOR all pregnant women who delivered at your facility how many:
o were delivered (total),
o transported OUT to a higher level of care facility AFTER delivery
o received 4 or more units of blood
o were admitted to an ICU
o died at your facility (pre-discharge)

Question Example

W7. What types of **obstetric providers** does your facility have available to provide maternal care?
(mark all that apply)

- ☒ Obstetrician
- ☐ Maternal Fetal Medicine Specialist
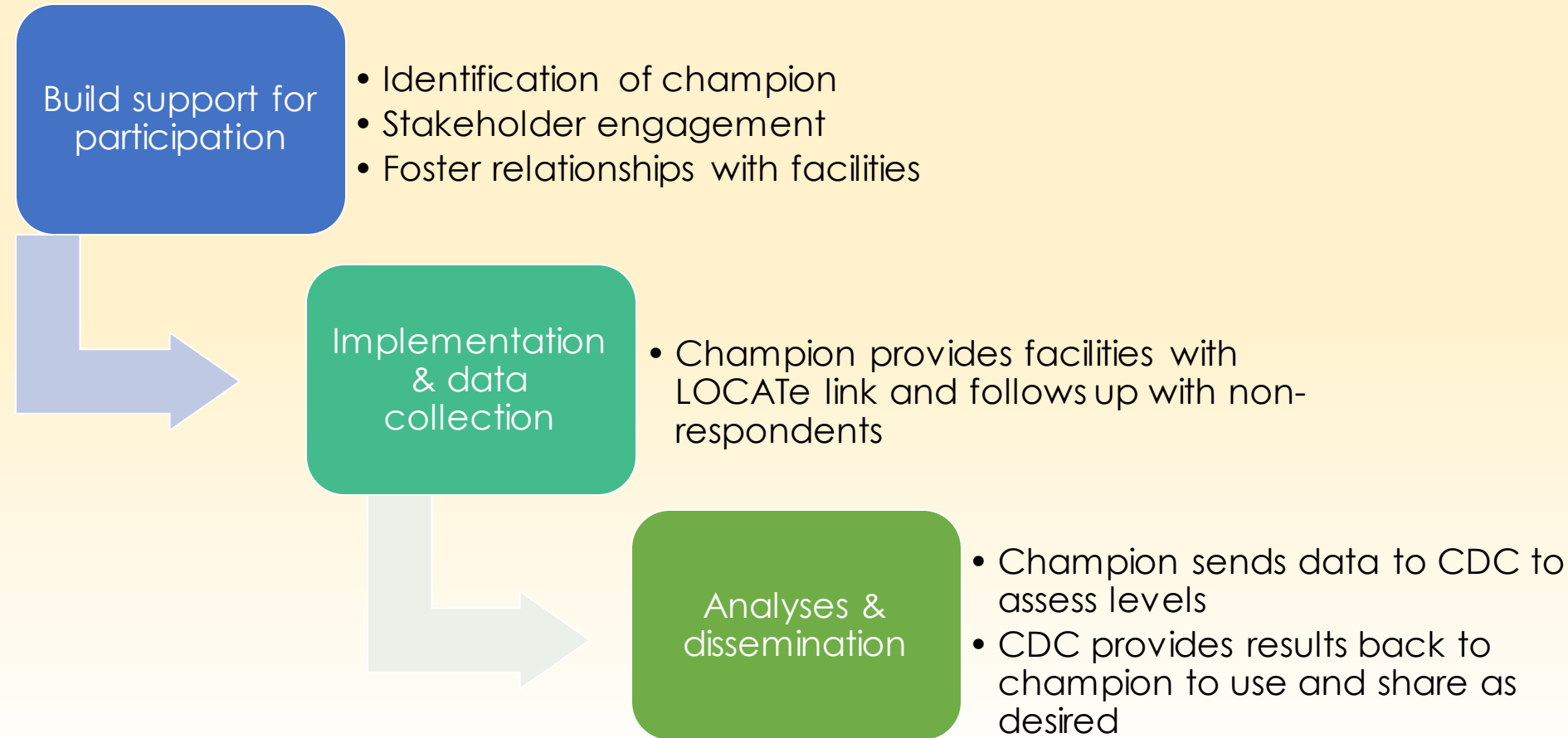- ☐ Family Medicine Physician
- ☐ Midwife
- ☐ Other (Specify: _____)
- ☐ None

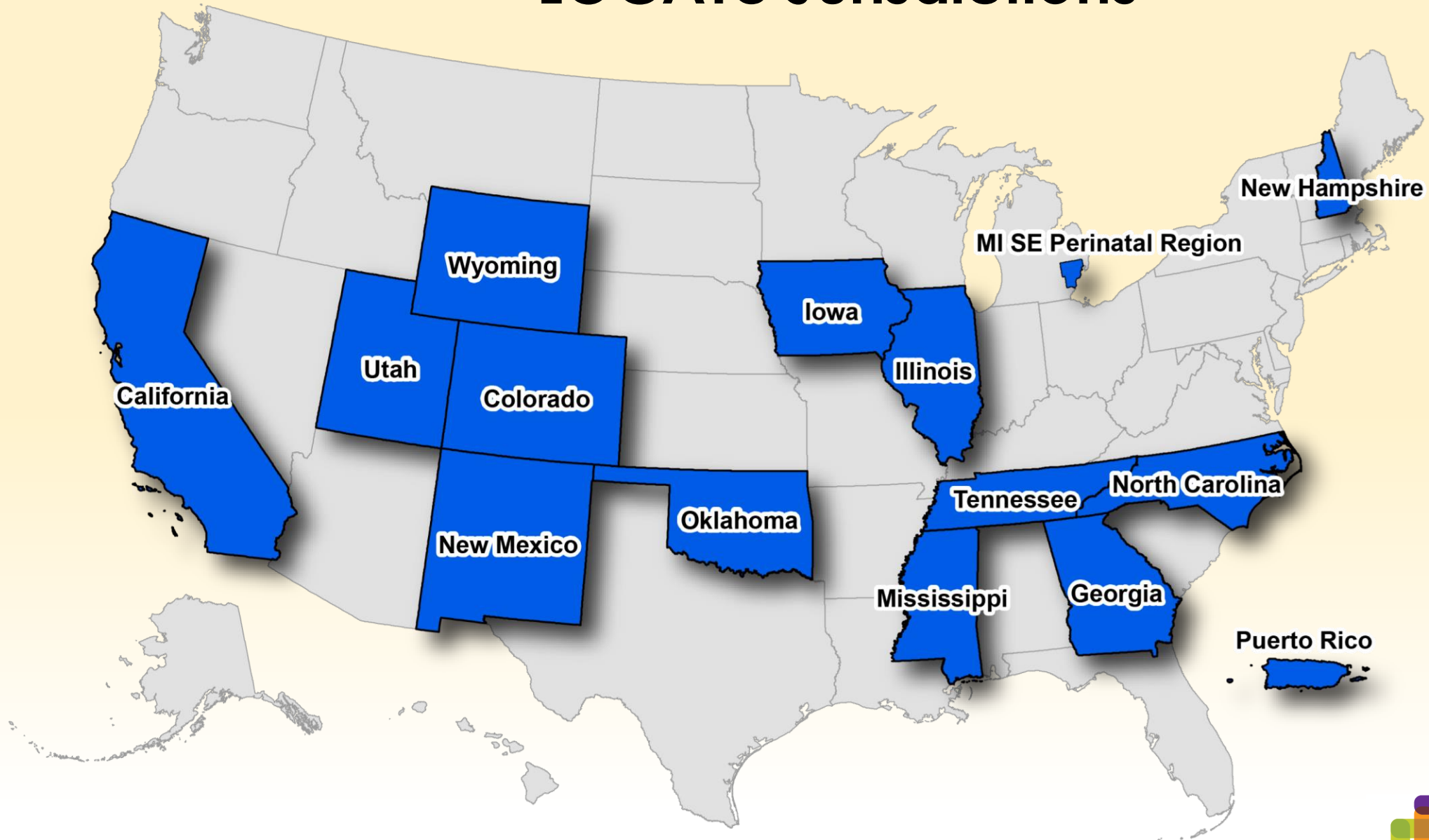N7.1 Is an **obstetrician** always available…

The LOCATe Process

Build support for participation
- Identification of champion
- Stakeholder engagement
- Foster relationships with facilities

Implementation & data collection
- Champion provides facilities with LOCATe link and follows up with non-respondents

Analyses & dissemination
- Champion sends data to CDC to assess levels
- CDC provides results back to champion to use and share as desired

LOCATe™

The LOCATe Assessment

2015 ACOG/SMFM Guidance

2012 AAP Guidance

LOCATe algorithm

SAS Program

Analysis & Dissemination Opportunities
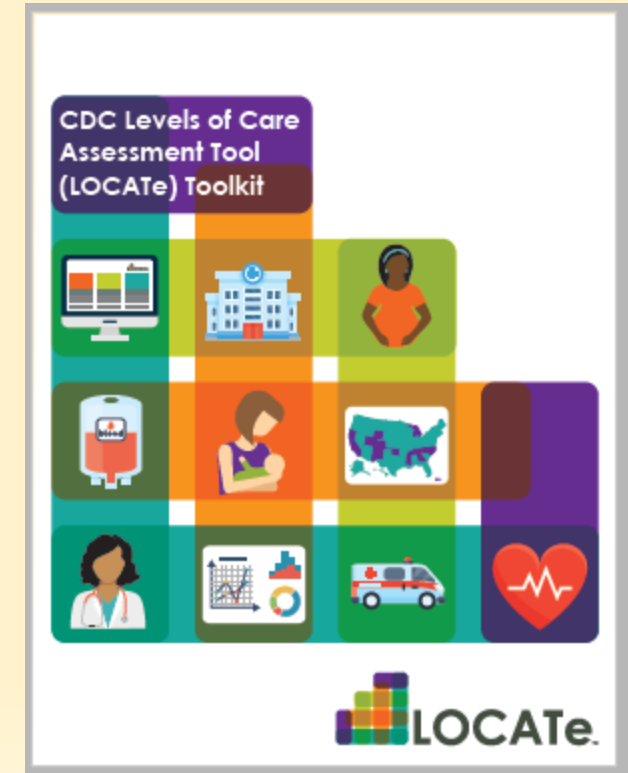
LOCATe Jurisdictions*
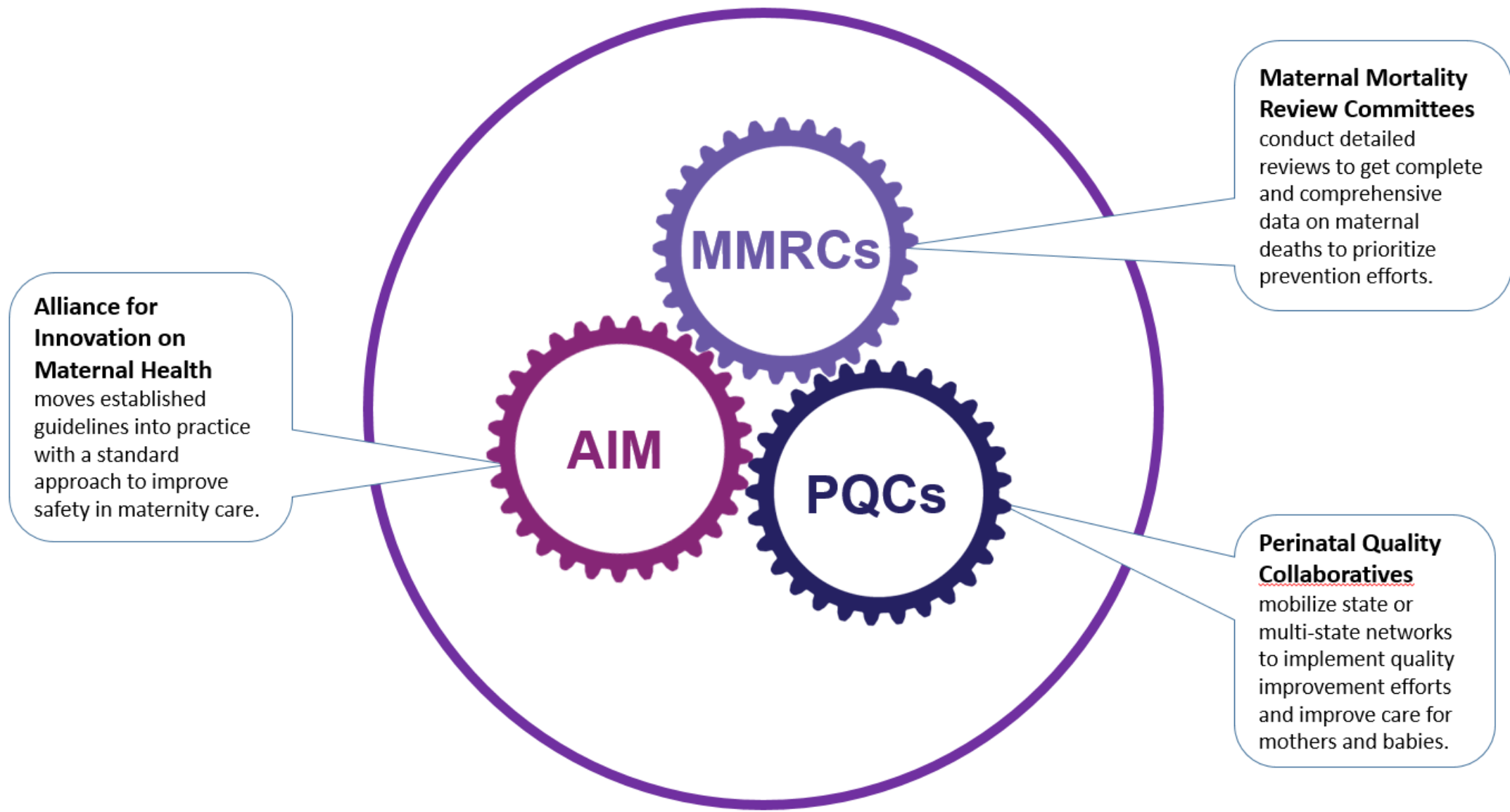

*As of 9/1/18

How LOCATe results can be used...

On-going Activities

- LOCATe toolkit
- ACOG Levels of Maternal Care Verification Program
- More Technical Assistance Materials
  - Emergency preparedness
  - Quality Improvement
  - Opportunities for telemedicine use
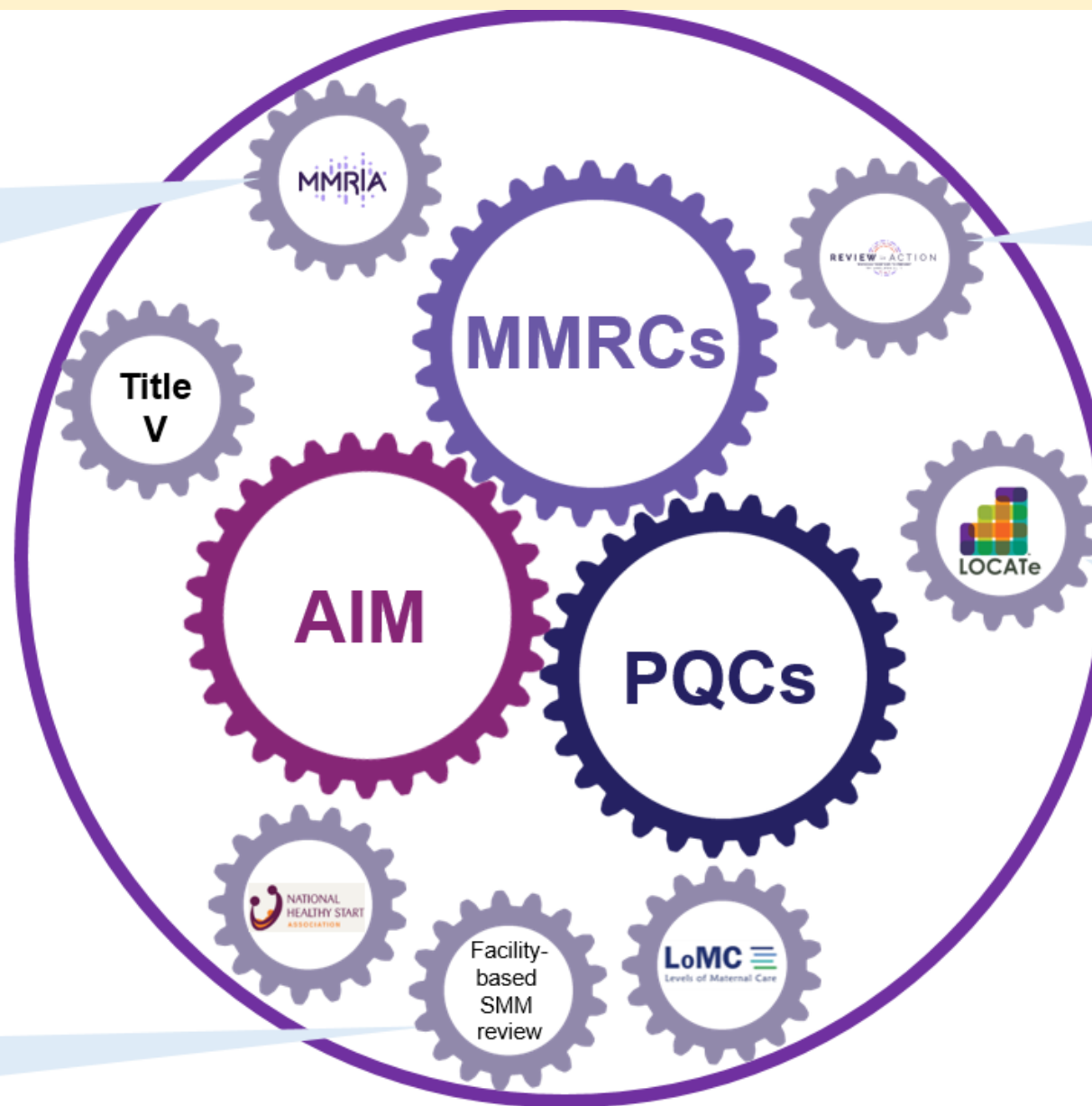- Multi-jurisdiction analysis

Maternal Mortality Review Information Application (MMRIA) strengthens critical steps of the MMRC process to empower prevention activities.

Review to Action provides tools and resources to establish, enhance, and connect MMRCs.

CDC Levels of Care Assessment Tool (LOCATe) assists states and other jurisdictions in assessing and monitoring systems of risk-appropriate maternal and neonatal care.

Facility-based SMM Review identifies severe maternal morbidity cases for quality improvement.

MMRIA

REVIEW to ACTION

LOCATe

Title V

MMRCs

AIM

PQCs

NATIONAL HEALTHY START ASSOCIATION

Facility-based SMM review

LoMC
Levels of Maternal Care

LOCATe

Thank you!

Andrea Catalano

acatalano@cdc.gov

LOCATe