

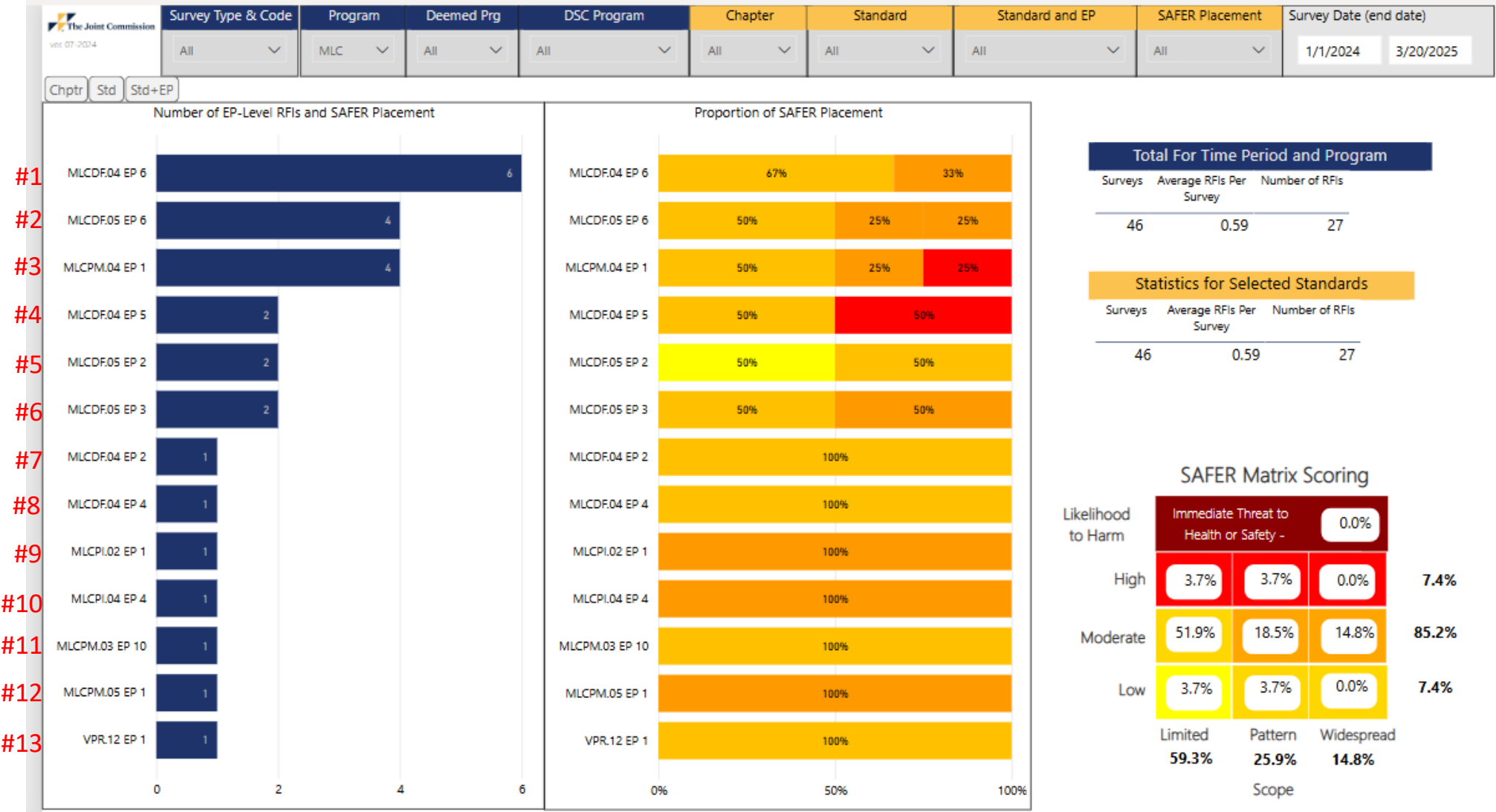


Improving Maternal Care

Through Joint Commission Maternal Levels of Care Verification

Most Frequently Cited Standards - March 20, 2025

MLC - Most Frequently Cited Standards



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#1 - MLCDF.04 The interdisciplinary program team assesses and reassesses the mother's needs.

EP 6 The interdisciplinary program team reassesses the mother as defined by the program and whenever there is a change in their condition or a change in the mother's and family's preferences. The reassessment is documented in the medical record.

#2 - MLCDF.05 The program provides care, treatment, and services according to the plan of care within their verified Maternal Levels of Care.

EP 6 To address unanticipated maternal and fetal complications that occur during labor and delivery, the program is able to do the following:

- ✓ Detect and provide initial care for conditions such as, but not limited to, hemorrhage, hypertensive disorders, medically indicated inductions, shoulder dystocia, fetal heart rate abnormalities, use of antenatal corticosteroids, and venous thromboembolism
- ✓ Safely use medications (for example, oxytocin, magnesium sulfate)
- ✓ Provide at least one registered nurse and at least one qualified birthing professional (midwife, family physician, or ob-gyn) for every delivery
- ✓ Perform emergency cesarean delivery within an interval of time that meets the needs of the mother and fetus, per the organization's policy
- ✓ Provide immediate life-saving measures and have the necessary staff readily available to care for mother and newborn at every delivery, according to current nationally recognized resuscitation guidelines

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#3 - MLCPM.04 The program uses clinical practices originating from evidence-based national guidelines or up-to-date systematic review of existing evidence to deliver or facilitate the delivery of clinical care, treatment, and services.

EP 1 The program develops and implements policies and procedures that support its clinical practices along the entire perinatal continuum. At a minimum, this includes written policies and procedures for the following:

- The care of mothers who have been assessed as clinically uncomplicated
- Prenatal screening (includes addressing the accuracy, completeness, and timeliness of the test results, and any needed intervention)
- Psychosocial risk assessment, screening, and referral for care (including, but not limited to, depression, domestic violence, and substance abuse)
- Screening and treatment of substance use disorder
- Control of infection or other communicable conditions
- Sepsis evaluation (urine, blood draws, lumbar puncture)
- Initiation of and support for breastfeeding
- Providing direct care, or stabilizing and transferring patients who require care beyond the scope of services provided by the organization
- Care practices that support spontaneous labor and birth
- Providing continuous labor support
- Planning for consultation, referral, and transfer arrangements
- Managing unexpected maternal problems
- Maternal resuscitation according to current national guidelines
- Planning for discharge and follow-up care

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#4 - MLCDF.04 The interdisciplinary program team assesses and reassesses the mother's needs.

EP 5 The interdisciplinary program team performs an early and ongoing assessment using established criteria and guidelines for identification of risk factors during the entire perinatal continuum

#5 - MLCDF.05 The program provides care, treatment, and services according to the plan of care within their verified Maternal Levels of Care.

EP 2 The program revises plans and goals for care, treatment, and services based on a reassessment, the mother's needs, and achievement of goals.

#6 - EP 3 The mother's physical symptoms are managed according to the plan of care.

#7 - MLCDF.04 The interdisciplinary program team assesses and reassesses the mother's needs.

EP 2 The interdisciplinary program team performs an initial patient assessment, as defined by the program, and documents the assessment in the patient's medical record.

#8 - EP 4 The interdisciplinary program team assesses and documents the mother's clinical symptoms and, when available, uses standardized tools.

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#9 - MLCPI.02 The program collects data to monitor its performance

EP 1 The program collects data to assess its processes and outcomes in order to determine opportunities for improvement. At a minimum, the organization collects the following data:

- Severe maternal morbidity cases as defined by the organization and based on recommendations from professional organizations or state requirements. At a minimum, cases include blood transfusions of four or more units, transfers to an intensive care unit, cardiopulmonary arrest, any return to the operating room, and eclampsia.
- Maternal mortality.
- Maternal hospital readmissions.
- Issues related to the process of transporting mothers to another organization, including mortality and morbidity during the transfers.
- The outcomes of mothers who were transferred to another organization, such as mortality, morbidity, and need for mechanical ventilation.
- Other issues identified through the perinatal care quality management process (for example, medication practices, hospital-acquired infections, and breastfeeding data).
- Issues related to providing ongoing care, treatment, and services and having suitable back-up systems and plans in place.

(For more information, refer to Standard MLCPI.04)

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#10 - MLCPI.04 The program analyzes its patient transfer process to identify opportunities for improvement.

EP 4 The program evaluates its patient transfer process within an established time frame in order to identify opportunities for improvement. Any opportunities for improvement determined by a sending or receiving organization are communicated with the organization so they can review their own process to ensure improvement

#11 - MLCPM.03 The program provides services that meet patient needs.

EP 10 The program follows its written policies for consultation, transfer arrangements, and transport of patients to the higher level of care. The needs of the population served guide decisions about which services will be provided directly or through referral, consultation, contractual arrangements, or other agreements.

#12 - MLCPM.05 The program identifies and minimizes risks to the mother.

EP 1 The Staff implements and follows protocols for medication safety, at a minimum, for the safe use of oxytocin, magnesium sulfate, antibiotics, anticonvulsants, anticoagulants, hemorrhage medications/uterotonics, cervical ripening agents, and emergency resuscitation medications.

#13 – VPR.12 The perinatal program is part of an organization that is compliant with applicable federal laws, including Medicare Conditions of Participation.

EP 1 The perinatal program must be part of an organization that is compliant with applicable federal laws, including Medicare Conditions of Participation.

Your MOLC Verification

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