

**Office of the President**

**TO MEMBERS OF THE HEALTH SERVICES COMMITTEE:**

## **DISCUSSION ITEM**

*For Meeting of January 23, 2025*

### **ADVANCING EQUITABLE MATERNAL CARE: AN UPDATE FROM THE UNIVERSITY OF CALIFORNIA HEALTH CLINICAL QUALITY COMMITTEE**

#### **EXECUTIVE SUMMARY**

The University of California Health (UCH) will discuss advancing equitable maternal care across UC Health facilities. The topic's presenters include:

- Robert Cherry, MD, MS, FACS, FACHE, Chair, Interim Chief Clinical Officer, UC Health
- Nerys Benfield, MD, MPH, Chief Medical Officer, Adult Services  
Professor and Vice Chair of Quality and Safety, Obstetrics, Gynecology and Reproductive Sciences, UCSF and UCSF Health

#### **BACKGROUND**

##### **History of the UC Health Clinical Quality Committee**

At the [December 15, 2020](#) meeting, the Health Services Committee endorsed the recommendations of the UC Health Working Group on Clinical Quality, Population Health, and Risk Management for implementation by University of California Health, including that the Executive Vice President of UC Health establish the UCH CQC to report to the Health Services Committee at its meetings.

The UCH CQC is a systemwide management committee that is responsible for overseeing the overall quality performance of the University of California academic health centers, to support a value-based care performance improvement model across various UCH task forces and teams, with a prioritized focus on achieving equity in access, care, and outcomes.

The goals of the UC CQC are to:

- A. Drive systemwide improvement work that lifts the performance of all UC academic health centers.

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- B. Provide the Health Services Committee with prioritized and timely information to support its oversight function for clinical quality and safety across UCH. It is imperative that the UC CQC is able to provide the Health Services Committee with robust updates to ensure alignment of priorities across all UC academic health centers.

At the [August 17, 2022](#) meeting, the Health Services Committee decided to defer action on the recommended quality measures proposed by the University of California Health (UCH) Clinical Quality Committee (CQC). Committee Chair Pérez concluded that the Committee would defer action on this item and appoint a few Regents to work with the UCH CQC. Since then, the UCH CQC has continued its work to develop and vet potential measures, with a particular focus on population health and efforts to reduce health disparities. Regent Reilly and Regent Batchlor are now participating in the UCH CQC. After deliberation, the UCH CQC is recommending the addition of four specific measures in the population health category related to improving care management for significant chronic diseases and reducing health disparities. In addition to these measures, in the next year the UCH CQC will continue its work to develop a set of measures that addresses performance improvement opportunities related to maternal care, with an emphasis on safe and equitable care, especially among vulnerable populations. The UCH CQC will also continue its work to vet systemwide measures in the remaining three categories.

At the [August 9, 2023](#) meeting, the Health Services Committee approved the addition of quality performance metrics proposed by the University of California Health (UCH) Clinical Quality Committee (CQC). The Regents approved the addition of four categories of performance measures to the University of California Health Clinical Quality Dashboard: (1) quality and patient safety issues reported to the California Department of Public Health and the Joint Commission (including patient complaints); (2) risk management early identification of potential claims; (3) healthcare provider behaviors that undermine a safe, respectful, and reliable environment of patient care; and (4) population health, including efforts to reduce health disparities.

At the [June 12, 2024](#) meeting, the University of California Health (UCH) Clinical Quality Committee (CQC) discussed improving ambulatory access across UC Health facilities as part of the overall UC Health strategic framework. The UCH CQC discussed challenges and opportunities.

### **Equitable Maternal Care**

Healthcare inequities in maternal care and outcomes is a nationally known public health problem, especially among Blacks or African Americans, a population experiencing greater health inequities than all other groups. The State of California and UC Health are not immune to suboptimal maternal outcomes caused by racial and/or socioeconomic inequities.

### **PATH FORWARD: APPROACH**

UC Health is currently engaged in a comprehensive data analysis, including data validation tools, to identify the primary clinical and social drivers that contribute to inequities in Severe Maternal Morbidity (SMM) outcomes at each campus. This analysis, conducted in collaboration with the

Center for Data-driven Insights and Innovation (CDI2), will take into consideration Access, Process, and Outcomes.

Key clinical drivers will be addressed by integrating best practices and targeted interventions into clinical processes and the electronic health record to effectively reduce severe maternal morbidity. The Clinical Chairs of the Departments of Obstetrics and Gynecology within UC Health will serve as subject matter experts and facilitate both local and centrally integrated clinical improvement plans. UC Medical Center healthcare equity leads are expected to be essential contributors to this effort.

**UC Health efforts may include, but are not limited to:**

- 1) improving equitable access to perinatal care;
- 2) developing performance improvement activities that target preventable and treatable conditions such as heart disease, high blood pressure, infection, embolism, and hemorrhage;
- 3) maximizing UC's population health prevention programs to support mental and physical well-being;
- 4) leveraging enterprise-wide data and enhancing clinical surveillance tools; and
- 5) engaging in strategic partnerships with Medi-Cal managed care plans and community-based organizations to align objectives and interventions.