

# Rural Obstetric Emergency Readiness Roadmap

A Practical Framework for Rural & Critical Access Hospitals



## OVERVIEW

Rural and critical access hospitals play a vital role in ensuring safe maternal care, often with limited resources and lower delivery volumes. This roadmap provides a structured, practical approach to improving obstetric emergency readiness, aligning with national best practices and safety standards.

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### ASSESS YOUR CURRENT READINESS

Use the [AIM Obstetric Emergency Readiness Assessment Tool](#) to evaluate:

- Emergency protocols
- Medication availability
- Staff training
- Escalation procedures
- Transfer processes

**Goal:** Identify key readiness gaps and prioritize improvement efforts

*Additional Resource:* [AIM Maternal Early Warning System Implementation Resource Kit](#)

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### FOCUS ON HIGH-RISK MATERNAL EMERGENCIES

Prioritize the most common causes of maternal complications:

- Severe hypertension in pregnancy
- Obstetric hemorrhage
- Maternal sepsis
- Maternal mental health crises

**Goal:** Ensure hospital protocols align with [AIM Patient Safety Bundles](#)

*Additional Resource:* [AIM Maternal Early Warning System Implementation Resource Kit](#)

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### PRACTICE HIGH RISK, LOW VOLUME SCENARIOS (EX: SEVERE HYPERTENSION AND HEMORRHAGE)

Make protocols easily accessible to all clinical and case management staff. Hospitals should establish or update:

- Written obstetric emergency policies
- Medication protocols and dosing guidelines
- Rapid response escalation procedures
- Transfer and referral pathways

**Goal:** Develop protocols that are easily accessible and regularly reviewed

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### IMPLEMENT TEAM-BASED TRAINING

Low-volume obstetric programs benefit from structured simulation training.

- Conduct annual obstetric emergency drills
- Include nursing, physicians, EMS, and leadership
- Practice severe hypertension and hemorrhage scenarios

**Goal:** Improve response speed and team coordination

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### STRENGTHEN MATERNAL MENTAL HEALTH SCREENING

Hospitals should implement standardized screening for:

- Perinatal depression
- Anxiety
- Substance use
- If the patient scores a 9 or greater on the Edinburgh Scale, they should be provided with appropriate referrals and resources prior to discharge
- Complete follow-up calls to ensure continuity of care

**Goal:** Support maternal mental health across the perinatal continuum

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### CREATE A MATERNAL SAFETY ACTION PLAN

Hospitals should develop a structured improvement plan:

- Identify top 3-5 priority gaps
- Assign responsible leaders
- Establish timelines and measurable goals
- Track progress quarterly

**Goal:** Regularly monitor progress to ensure sustainable improvement

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### ENGAGE IN STATEWIDE COLLABORATION

Hospitals are encouraged to participate in:

- Maternal safety learning forums
- Peer policy sharing
- Education and engagement with subject matter experts
- Regional planning discussions and tabletop drills
- Collaborate with the Nebraska Perinatal Quality Improvement Collaborative (NPQIC)

**Goal:** Statewide learning accelerates improvement



## CONCLUSION

Improving obstetric emergency readiness in rural settings requires a focused, team-based, and systematic approach. By assessing current capabilities, standardizing protocols, investing in training, and engaging in collaborative learning, hospitals can strengthen maternal safety and deliver high-quality care for all patients.



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## Resources



### **Edinburgh Postnatal Depression Scale (EPDS)**

[edinburghscale-1.pdf](#)



### **Maternal Early Warning System Implementation Resource Kit – Alliance for Innovation on Maternal Health (AIM)**

[https://saferbirth.org/wp-content/uploads/AIM-MEWSIRK\\_092325.pdf](https://saferbirth.org/wp-content/uploads/AIM-MEWSIRK_092325.pdf)



### **National Maternal Mental Health Hotline**

Call or text the National Maternal Mental Health Hotline (833) 852-6262

<https://www.findhelp.org>



### **Nebraska Education Profiles - Maternal and Neonatal Outreach Education – Nebraska Perinatal Quality Improvement Collaborative (NPQIC)**

[https://npqic.org/file\\_download/inline/5173a28f-5947-4b08-a607-a5c58fc66017](https://npqic.org/file_download/inline/5173a28f-5947-4b08-a607-a5c58fc66017)



### **Nebraska Perinatal Quality Improvement Collaborative (NPQIC)**

<https://npqic.org/>



### **Obstetric Care in Rural Critical Access Hospitals: A Domestic Application of the World Health Organization Emergency Obstetric Care Framework in Rural Communities - The Journal of Rural Health - Wiley Online Library**

<https://onlinelibrary.wiley.com/doi/10.1111/jrh.70037>



### **Patient Safety Bundles For Safer Birth – Alliance for Innovation on Maternal Health (AIM)**

<https://saferbirth.org/patient-safety-bundles/>



### **Perinatal Mental Health - Patient Screening – American College of Obstetricians & Gynecologists**

<https://www.acog.org/programs/perinatal-mental-health/patient-screening>



### **Postpartum Support International**

Contact the PSI HelpLine – Call +1(800)944-4773 (4PPD)(#1 En Español or #2 English)

Text "Help" to 800-944-4773 (English)

Text en Español 971-203-7773



### **Simulation and Drills for Patient Safety – Alliance for Innovation on Maternal Health (AIM)**

<https://saferbirth.org/aim-resources/aim-cornerstones/simulations/>



### **Simulation Center Preparing Healthcare Providers for Real-World Practice – Bryan Health College**

<https://www.bryanhealthcollege.edu/bcohs/hands-on-experiences/simulation-center/>