

SEVERE MATERNAL MORBIDITY REVIEW

Implementation Guide

October 2026



OUTLINE

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Supporting Resources

NPQIC developed the SMM implementation guide and three editable supporting resources to help hospital teams establish a review process in their facility. These tools offer a structured approach for consistent implementation.

SMM Review Implementation Form

Editable documents that details a birthing facility's SMM review process and supports continuity of the SMM review process when hospital personnel change.

Example SMM Facility Presentation

Editable presentation that can be used to present details of cases being reviewed and guide SMM review team meetings and discussions

SMM Tracking Sheet

Editable spreadsheet for tracking SMM processes, including cases reviewed, meeting attendance, factors contributing to morbidity, and next steps.



How the Supporting Resources Work Together

Resource name	Primary purpose	Who uses it	When it is used	Expected output
 <u>SMM Review Implementation Form</u>	Plan and document the facility's SMM review process	SMM review lead and implementation team	Before launch and when updating the process	Documented review workflow, roles, and procedures
 <u>Example SMM Facility Presentation</u>	Guide case presentations and structured team discussion	Review team facilitator and case presenters	During each SMM review meeting	Shared understanding of the case and identified contributing factors
 <u>SMM Tracking Sheet</u>	Track cases reviewed, meeting participation, contributing factors, and next steps	SMM review lead and quality improvement team	During and after each review meeting	Visible action items, owners, follow-up status, and trends

 Together, these tools help hospital teams move from planning to review to improved outcomes.



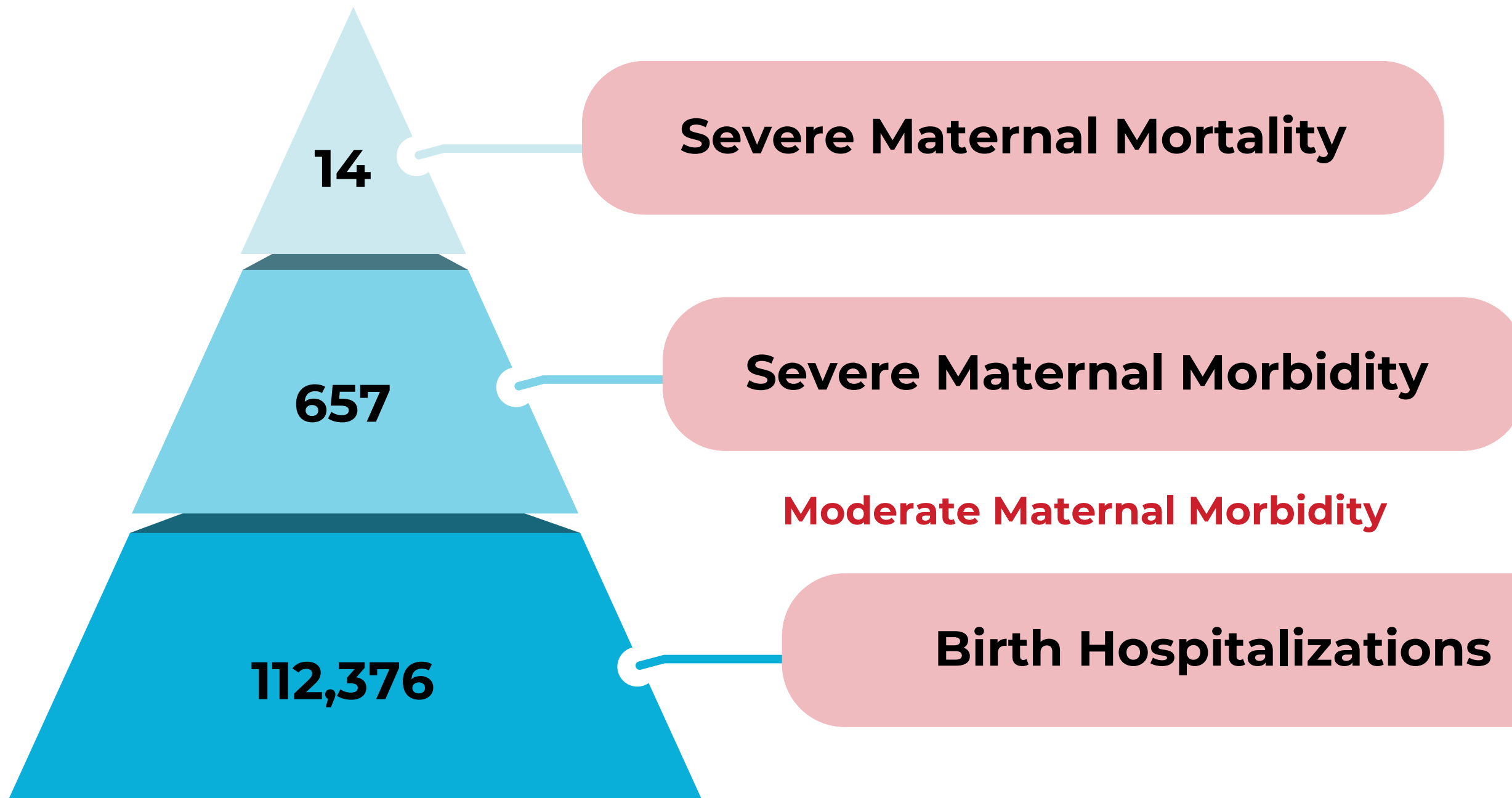
BACKGROUND

Definition



CDC defines **Severe Maternal Morbidity (SMM)** as unexpected outcomes during the delivery hospitalization that result in significant short- and long-term consequences to a person's health.

Nebraska SMM Data 2017-2021

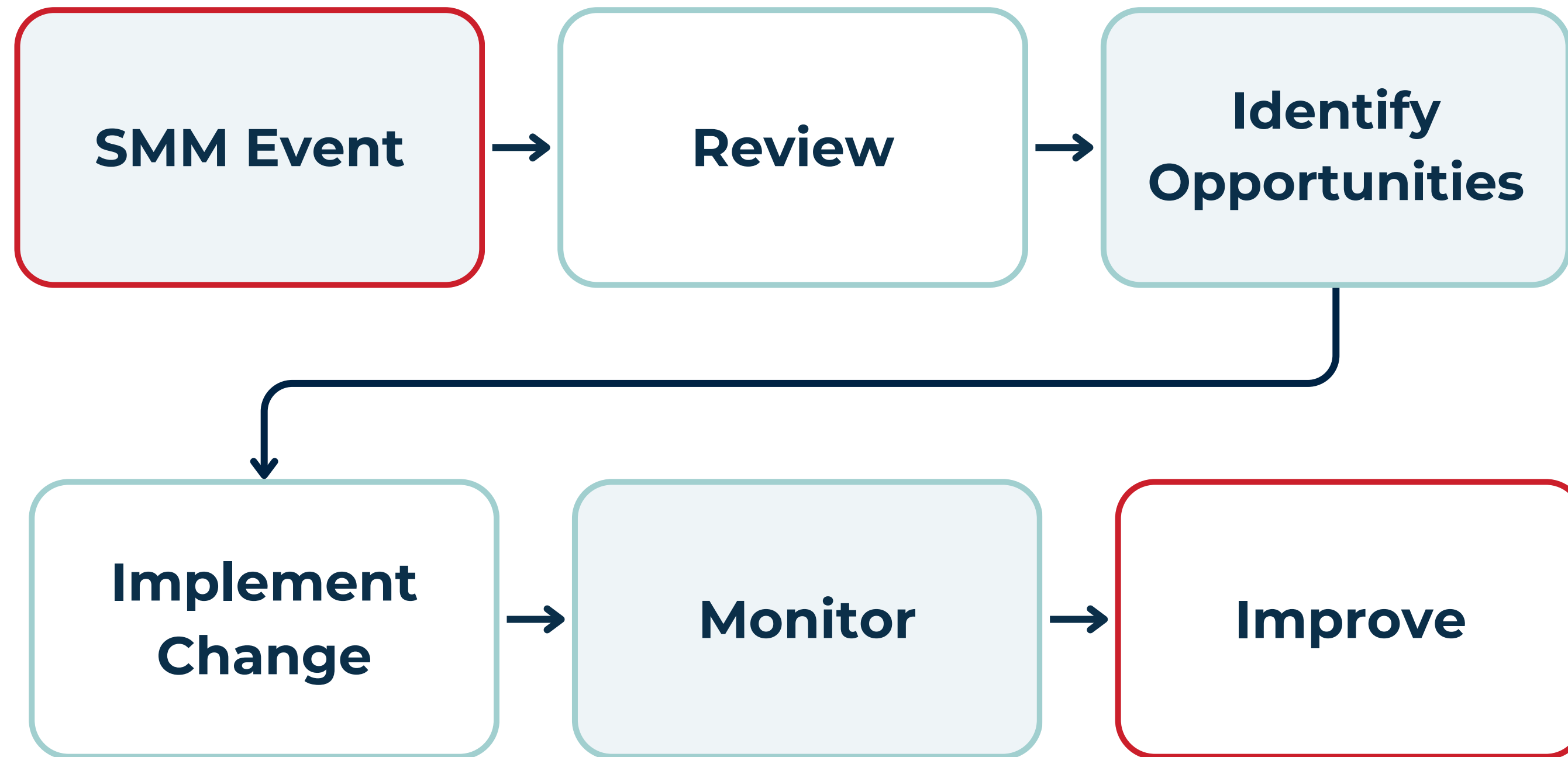


Mortality data alone may be limited for QI due to the rarity of maternal death. SMM reviews allow teams to identify opportunities across more cases.



PURPOSE

Overview



Review Purpose

Determine if SMM event is considered preventable

The event could have been averted

or

The patient did not have to get as sick as they did

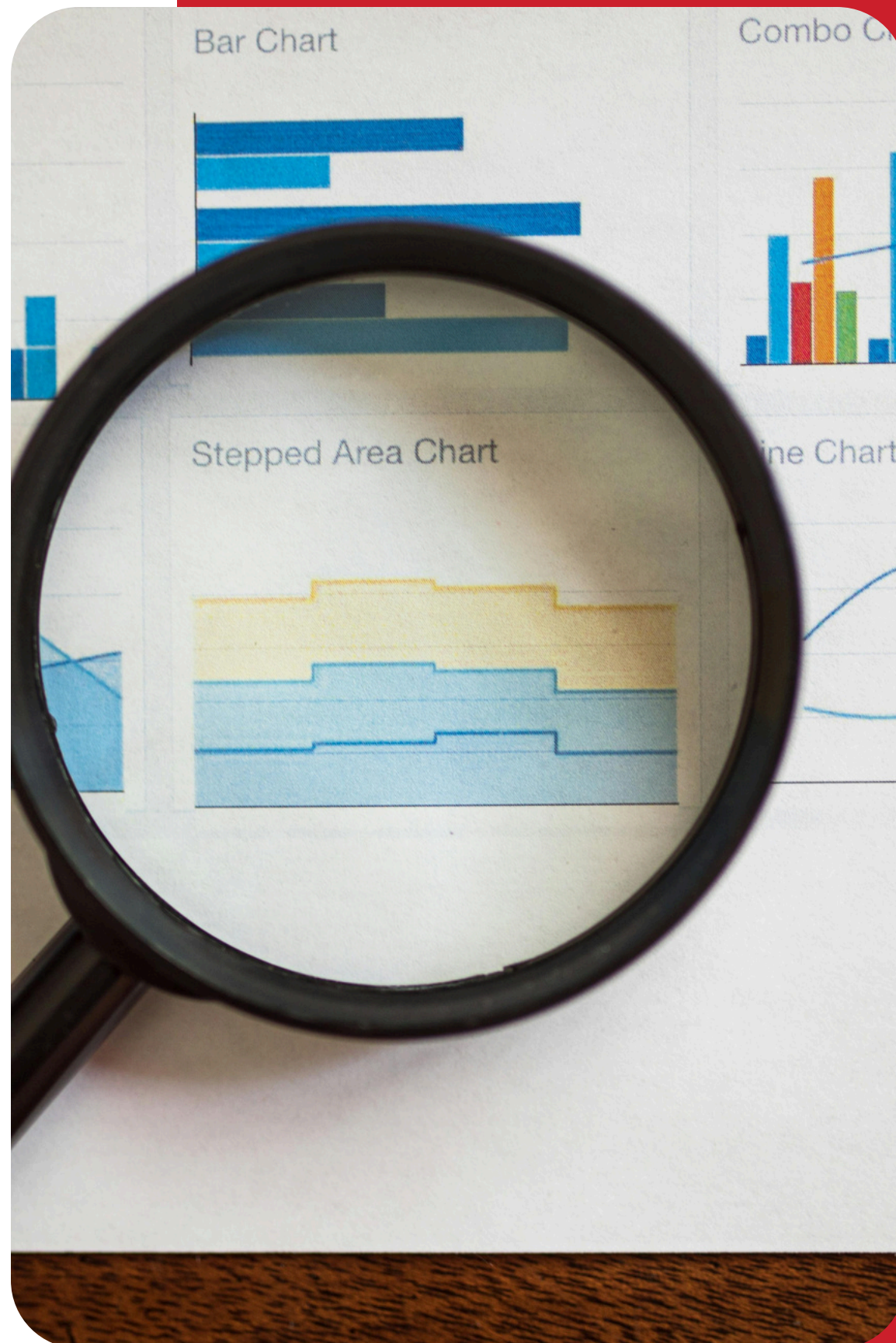
Identify facility specific quality improvement opportunities/practices that should be reinforced

Systems, policies, teamwork, communication, etc.



SMM Review does not replace root cause analysis or peer review process





REVIEW CRITERIA

Severe Maternal Morbidity

SMM INDICATORS

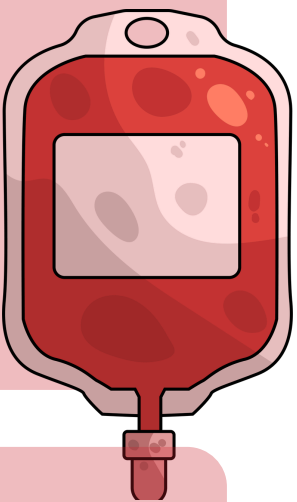
- | | |
|---|--|
| 1.Acute myocardial infarction | 11.Puerperal cerebrovascular disorders |
| 2.Aneurysm | 12.Pulmonary edema/acute heart failure |
| 3.Acute renal failure | 13.Severe anesthesia complications |
| 4.Acute respiratory distress syndrome | 14.Sepsis |
| 5.Amniotic fluid embolism | 15.Shock |
| 6.Cardiac arrest / ventricular fibrillation | 16.Sickle cell disease with crisis |
| 7.Conversion of cardiac rhythm | 17.Air and thrombotic embolism |
| 8.Disseminated intravascular coagulation | 18.Hysterectomy |
| 9.Eclampsia | 19.Temporary tracheostomy |
| 10.Heart failure / arrest during surgery or procedure | 20.Ventilation |



REVIEW CRITERIA

ACOG and SMFM Review Criteria

- 1.Transfusion of 4 or more units of blood
- 2.Admission of a pregnant or postpartum patient to an ICU



Staff identified need to review the case

Suggested Criteria for Small Volume Facilities

- Moderate Maternal Morbidities

Moderate Maternal Morbidity

Moderate Morbidities for Small Volume Facilities

1. Any transfusion related to delivery
2. Transfer for delivery related complication
3. Return to OR or Surgical Procedure following Vaginal Delivery
4. Timely treatment for severe HTN
5. ICU Admission
6. Pulmonary Edema (on CXR or given Lasix for symptoms)
7. Postpartum Fever
8. Postoperative Wound Infection
9. DVT or PE
10. All Cause Hospital Readmission within 6 weeks of discharge
11. Midtrimester Pregnancy Loss
12. Cesarean under general anesthesia



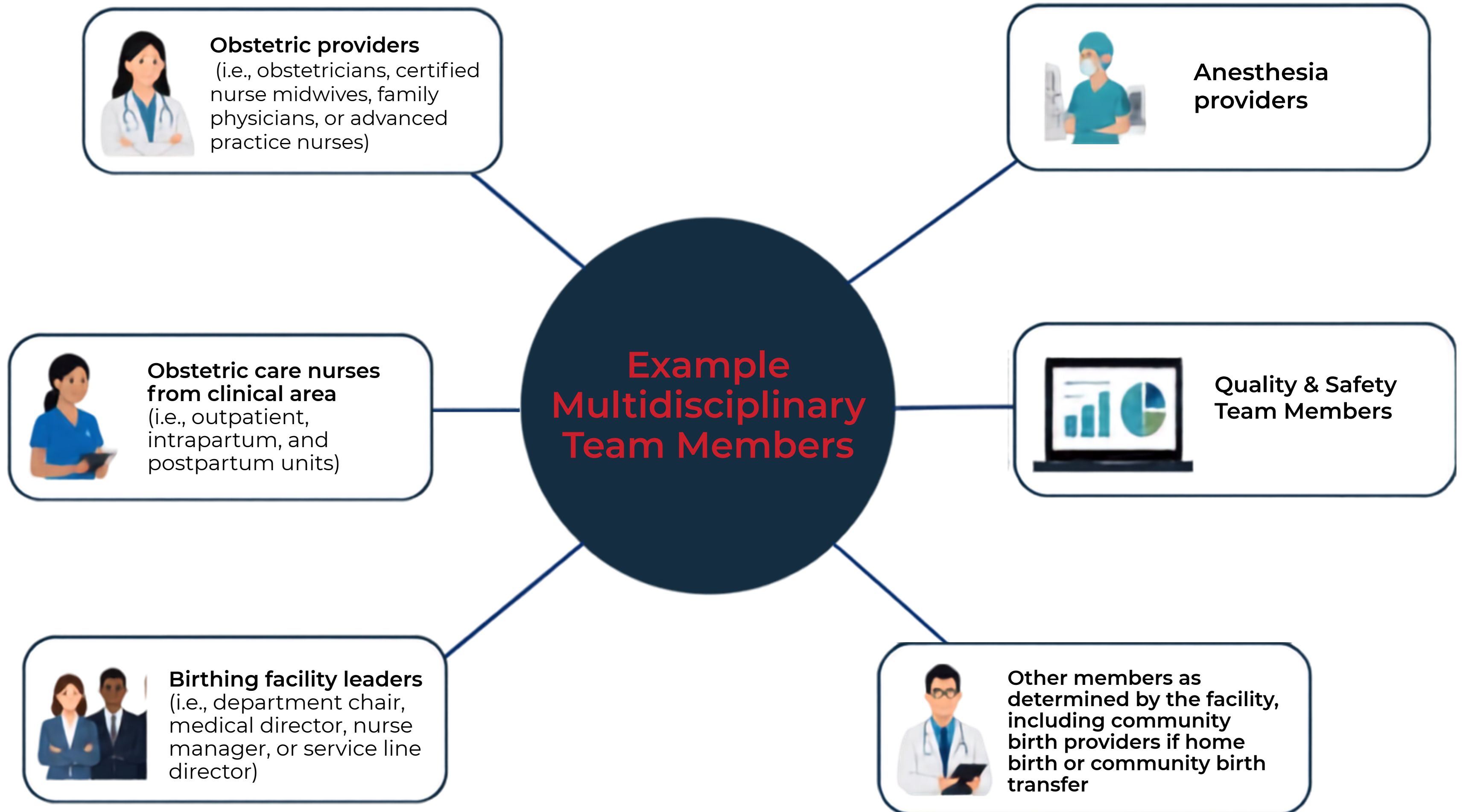


REVIEW TEAM

Multidisciplinary Team

- Establish a designated multidisciplinary standing committee at each birthing facility that reflects the professional makeup of clinicians and staff within the birthing facility
- Look for people who bring...
 - Clinical expertise
 - System knowledge
 - Different perspectives
 - QI expertise





Team Considerations



- Document team member information and clearly define roles and responsibilities
- Have more than one person trained to abstract and review cases
- Have a plan for if a reviewer was part of the case being reviewed
- Confidentiality



CHART REVIEW

SMM Review Forms

Use an SMM Review form to standardize documentation from the patient's chart and guide the team's discussion during the SMM review.

NPQIC SMM
Abstraction
Form

Updated May 2025

AIM SMM
Review Form

Updated August 2025

**Facility's own
form**

Chart Review Outline



- Background of the patient
- Relevant delivery information
- Case timeline
 - Focus on the events leading up to, during, and following the SMM event



The goal is not simply to document what happened – it is to understand why it happened and identify opportunities to improve care.

Interviews

- Provides context beyond what is documented in the chart
 - Can help you understand what happened and **why**
- Interview a variety of individuals who were directly involved or who can provide context
 - OB, MFM, Anesthesia, Vascular, OR, Transfusion Med, etc.
- Use general and condition specific questions

Benefits:

- **Clarify events, action, & decisions**
- **Gain frontline perspectives**
- **Identify contributing factors**
- **Promote open discussion**



MEETINGS

Key Components



SMM Review Meetings

- Use a presentation to tell the story of the case and guide discussion
 - NPQIC's Example SMM Facility Presentation provides an outline
 - Explain why SMM review is important
 - Keep the discussion focused on learning and improvement
 - Remember to highlight what went well
 - Capture clear next steps before ending the meeting
- Document meeting logistics, attendees, and discussion using NPQIC's SMM Tracking Sheet



Virtual Meeting Tips

- Introductions for new participants
- Encourage cameras to be on for the meeting
- Engage with participants periodically throughout the presentation
 - Use open-ended questions
 - Call out for specific roles to contribute their perspective
 - Breakout rooms for small group discussion
 - Ask if anyone opposes

Additional Tips for Meeting Facilitation

- [Virtual Facilitation Toolkit](#)
- [Introduction to Virtual Facilitation for Collaboration](#)





NEXT STEPS

Share Findings

- Teams should share data with teams as appropriate to implement, support, or sustain changes
 - Clinical teams involved in care
 - Quality & hospital leadership
 - Other teams responsible for implementing change
- Document how findings have been shared (type of meeting/group, format of data, date, notes)



When sharing findings:



Always maintain confidentiality



Focus on systems, processes, practices to be reinforced, and opportunities for improvement



Clearly communicate the recommended interventions because of the review



Track and share trends across multiple SMM reviews

Actions



- The SMM review should result in action when an opportunity for improvement is identified



- Form action plans based on contributing factors



Example: If the contributing factor was lack of communication → implement a standardized communication process such as interdepartmental handoff processes



- Document planned action, category of action, person responsible, completion date, and ongoing status



RESOURCES

Severe Maternal Morbidity Review Panel

March 26, 2026

Objectives

1. Establish the purpose and importance of conducting Severe Maternal Morbidity Reviews at birthing facilities
2. Demonstrate how to implement recommendations from the Severe Maternal Morbidity Reviews to improve patient care and outcomes
3. Describe how to establish and facilitate a Severe Maternal Morbidity Review

Panelists

- **Bryan Health:** Sam Kenning, MSN, RN, C-EFM, C-ONQS
- **CHI Health:** Rachelle Heser, MSN, APRN-CNS, C-EFM
- **Nebraska Medicine:** Lisa Ablan, BSN, RN, C-ONQS
- **Methodist Women's:** Erica Meier, MSN, RN, RNC-OB, C-EFM, C-ONQS, C-OBE



Alliance for Innovation on Maternal Health Resources



<https://saferbirth.org/severe-maternal-morbidity/>

Documents

- [Guide to SMM Chart Reviews](#)
- [Condition Specific Questions](#)
- [SMM Review Form - Factors Worksheet](#)
- [AIM Guide to Implementing the Severe Maternal Morbidity Algorithm](#)
- [SMM Codes List](#)

Webinars

- [Severe Maternal Morbidity: History and Alignment of Definitions](#)
- [Severe Obstetric Complications: What You Need to Know About PC-07 and Other Measures of Maternal Morbidity in the United States](#)
- [AIM SMM Review Form Learning Sprint](#)
- [Severe Maternal Morbidity](#)

Additional Resources

Joint Commission

- Obstetric Care Consensus #5: Severe maternal morbidity: screening and review
- Measurement and Improvement Strategies for Reduction of Severe Maternal Morbidity
- Standardized Severe Maternal Morbidity Review

ACOG

- Sentinel Event Policy (SE).
- A Multidisciplinary Model for Reviewing Severe Maternal Morbidity Cases and Teaching Residents Patient Safety Principles

