

## Agencies Assuring Maternal Health Care (AAMHC) Audit Tool

Health Department: \_\_\_\_\_ Date: \_\_\_\_\_ Reviewers: \_\_\_\_\_

Local Health Departments (LHD) that do not provide prenatal care (PNC) must submit a Memoranda of Understanding (MOU) that clearly outlines how clients who reside in their respective county will receive services. Please refer to the Guidelines for LHD Assurance of Low Risk Maternal Health Services found on the Women Infant and Community Wellness Section website. **This plan must be included with the signed Maternal Health Agreement Addendum each fiscal year to be reviewed by the Maternal Health Branch (MHB) staff.** All LHD will ensure the following:

**The Local Health Department (LHD) shall ensure the provision of the following, whether they provide prenatal care (PNC) or not:**

		Yes/No
5. a	Provide pregnancy testing and referral as appropriate.	
6.a	A Memoranda of Understanding (MOU) with a local healthcare provider that has been signed within the last 3 years	
6. a.1	Clients at or below 100% of the Federal Poverty Level are not charged for prenatal care by the contracting agency	
	Audit done of assuring agency, if MOU is with an agency other than another local health department. The requirements of the audit should be based on the terms outlined in the MOU.	

### Staff Requirements and Training

Agencies providing or assuring prenatal services must meet the following requirements or have the following policies:

		Yes/No
		NA
J1	The Maternity Nurse Supervisor, Care Managers for Care Management for High Risk Pregnancies (CMHRP), Health and Behavior Intervention Supervisor and Clinical Social Workers shall have active electronic mail membership and direct access to the Internet.	

### Quality Assurance (Items below should be evidenced by policy, procedure, or documentation)

B2	Report interruption of services or inability to meet quality assurance deliverables within 14 days to the Maternal Health Branch State Nurse Consultant.	
B3	Use of interpreter services for all maternal health programs.	
B4	Demonstrate excellence in customer friendly services as evidenced by policies, training, and/or annual patient satisfaction surveys.	
B5	All staff, clinical and non-clinical, shall participate in at least one training annually focused on health equity, health disparities, or social determinants of health to support individual competencies and organizational capacity to promote health equity.	

**Policies/Procedures**

The Local Health Department shall develop and follow policies or procedures for facilitating early entry into prenatal care for the following:

Yes/No

NA

C1	Follow-up of positive pregnancy test to assure patient has access to healthcare provider.	
C3	Referral to Women, Infants and Children (WIC) upon confirmed results of a positive pregnancy test.	
C4/C5	Completion of presumptive eligibility determination and referral for Medicaid eligibility determination for all patients requesting this service.	
C9	Provision of community and patient maternal health education services within the jurisdiction of the Local Health Department. Education services shall promote healthy lifestyles for positive pregnancy outcome.	
C24	All standing orders or protocols developed for nurses in support of this program must be written with the NC Board of Nursing components. All LHD shall have a policy in place that supports nurses working under standing orders.	

**Other Possible Services: \*Please note that there are additional Maternal Health services a local agency can offer (General Services A2-A6): Childbirth education, Maternal Care Skilled Nurse Home Visits, Care Management for High-Risk Pregnancies, and Health and Behavior Intervention. The ones listed below will be reviewed by your Regional Nurse Consultant at the time of audit with an additional audit tool\***

Yes/No  
NA

A3	Provide Childbirth Education (CBE) classes.	
A4	The Local Health Department may provide Maternal Care Skilled Nurse Home Visits.	