

Maternal Health Benchmarking Survey Guide:

*Using Data to Strengthen Maternal
and Infant Health*

March 2026 Edition



NEW JERSEY
HEALTH CARE
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1. Introduction and Overview

The **Maternal Health Benchmarking Survey** supports hospitals and health systems in **using data to strengthen clinical, operational, and organizational practices** to improve maternal health. Through structured self-assessment and comparison to statewide and national, evidence-based standards, the survey helps organizations better understand how maternal health care is delivered across inpatient, outpatient, and community settings.

This collaborative approach promotes transparency, continuous improvement, and shared learning while supporting hospitals in advancing patient outcomes and organizational excellence across the maternal health continuum.

Why the Maternal Health Benchmarking Survey is Needed

Communities and states have made meaningful improvements in maternal health care; however, maternal health outcomes in New Jersey and nationwide remain concerning, with persistent and preventable disparities. Maternal deaths and severe pregnancy-related complications are more likely among people of color (Centers for Disease Control and Prevention [CDC], 2024). Black women are more than three times as likely to experience these outcomes. In New Jersey, these disparities are especially pronounced.

These disparities reflect the combined impact of clinical care, social drivers of health, and variation in hospital policies, practices, and access to services. The Maternal Health Benchmarking Survey supports hospitals in examining a range of factors through a structured, evidence-based lens that informs quality improvement and meaningful strategic change.

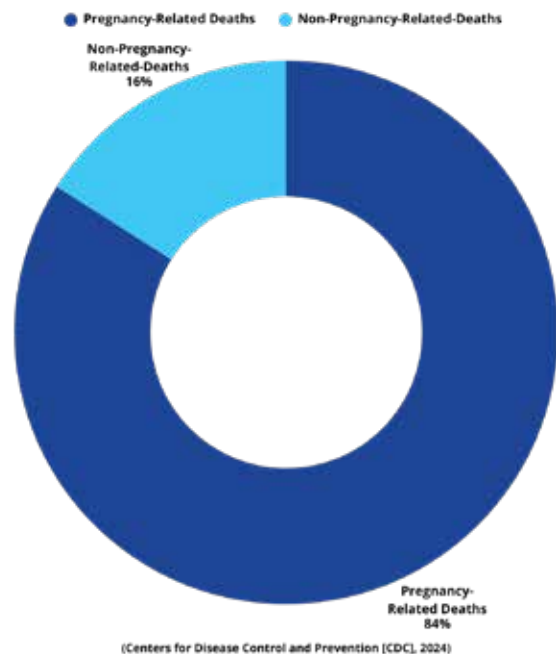
The purpose of this survey process is to shed light on improvement opportunities. It serves as a starting point for conversation, learning, and prioritization—not a judgment of performance.

How the Toolkit Should Be Used

This toolkit guides hospitals through the maternal health benchmarking survey process—from planning to reviewing and using results. It helps teams coordinate input across departments and translate findings into actionable insights.

Hospitals may adapt the process to reflect their population, staffing, and workflows needs. Teams are encouraged to revisit the survey annually to track progress over time.

Nationally, data indicates that approximately 84% of pregnancy-related deaths in the U.S. are preventable.



[Who Should Use This Toolkit](#)

This toolkit is intended for hospitals and health systems engaged in maternal care, including clinical leaders, quality improvement teams, administrators, and staff responsible for maternal health programs, policy development, data collection, or reporting.

[Survey Overview](#)

The Maternal Health Benchmarking Survey is a comprehensive self-assessment designed to evaluate hospital systems, policies, practices, and outcomes related to maternal health. It captures both quantitative and qualitative aspects of care delivery to help teams understand current performance and opportunities for improvement.

The survey was jointly developed by the [New Jersey Health Care Quality Institute](#) and [Ariadne Labs](#). It is grounded in recommendations from the [Raising the Bar for Maternal Health Equity and Excellence](#) framework, national guidelines, state policies, and best practices. It includes 86 questions and is complemented by interviews with hospital leadership, staff, and community representatives. Together, these methods provide a holistic view of hospital systems, resources, and lived experience across care settings—and insight into where focused action can drive meaningful change.

The survey gathers information across **four key areas**:

- **Health System Profile** – Leadership structure, staffing, and organizational demographics
- **Maternal Health Services** – Access to and delivery of maternal health services
- **Social Drivers of Health and Inclusion** – How the health system addresses social needs, cultural responsiveness, and inclusive care practices
- **Clinical Measures and Outcomes** – Data and performance related to quality, safety, and patient outcomes

[2. Preparing to Complete the Maternal Health Benchmarking Survey](#)

Successful completion of the survey requires early planning and intentional cross-departmental collaboration.

The survey takes a deep look at a health system's full maternal health service line, including inpatient, outpatient and clinic-based services, care transitions, and community partnerships. As such, no single individual or department will have full visibility of all areas covered by the survey. Multiple team members should contribute to each section to ensure



Tip

Teams are encouraged to share survey responses across departments. This helps ensure a richer narrative and a more complete picture of services and activities. For example, inpatient staff may be unaware of community collaborations led by population health teams.

responses are accurate, complete, and reflective of how care is delivered across the system.

Estimated Time to Complete the Survey

Teams should plan for 2–3 months to complete the survey. Teams are strongly encouraged to establish internal timelines to keep the process on track and maintain momentum.



Key Preparation Steps

➤ Confirm Leadership Awareness and Expectations

A visible commitment from organizational or maternal health leadership is critical. Their support ensures that contributing departments have the time, resources, and authority needed to complete the survey. It also signals that this work is valued and prioritized.



Tip

Have early conversations about who will review survey responses using the survey rubric. See Section 5 for more guidance.

➤ Identify a Survey Lead

Designate a survey lead responsible for coordinating inputs, tracking progress, and final submission.

➤ Establish a Multidisciplinary Survey Team

Teams may find it helpful to divide the survey into manageable sections. Assign departments or roles to take the lead on each one.

Recommended roles to include on the Survey Team:

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> • Chief Medical Officer (CMO) • Chief Nursing Officer (CNO) • Community Health Workers, including Doulas and Social Workers • Human Resources, including a Diversity, | <ul style="list-style-type: none"> <i>Equity, and Inclusion (DEI) Representative</i> • Lactation Consultant(s) • Marketing and Communications • Maternal Health Senior Leadership (Inpatient and Outpatient) • Nurse Managers and Assistant Nurse | <ul style="list-style-type: none"> Managers • Perinatal Clinicians (e.g., Obstetricians and Midwives) • Population or Community Health Representatives • Quality Improvement and/or Data Representatives |
|--|--|--|

Survey Format and Expectations

The survey includes yes/no questions, descriptive responses, stakeholder interviews, outcome measures, and document uploads.



Tip

This is an opportunity to engage staff in an organizational initiative or create space for staff who are passionate about: maternal health, quality improvement, communication, patient experiences.

When completing the survey, responses should:

- Be specific and as detailed as possible.
- Include context, such as when practices vary across sites, when data are incomplete or unavailable, or if the question is not applicable.
- Clearly indicate whether the response refers to the hospital, clinic, or other area, as applicable. **To support a comprehensive evaluation, responses should reflect practices beyond the hospital setting when relevant.**

Narrative responses help explain how policies and procedures are implemented in practice. These responses should incorporate insights from staff contributing to the survey to ensure a complete and accurate picture of care delivery.

3. Section-by-Section Guidance

3.1 Health System Profile

This section captures essential information about your health system's structure, workforce, leadership, and patient population. These details provide context for interpreting survey results.

Workforce, Leadership, and Population Data

As you complete this section, take time to outline the clinical, support, and community-based providers involved in care delivery, including internal teams and external partners. When available, include workforce, hospital board and patient demographics. This information helps reviewers understand your context and identify opportunities for improvement.

Describing Organizational Structure, Policies, and Supports

- Be specific when describing roles, partnerships, and accountability structures.
- Highlight benefits such as employment benefits and social supports, noting benefits that exceed state requirements.
- Describe financial assistance for services, including eligibility and access processes.
- Use the optional open-response space to share additional context, innovations, or limitations that may be important for understanding your responses.

3.2 Maternal Health Services

This section asks you to review the services you offer, how services connect across settings, and how they are supported by partnerships, policies, and quality improvement efforts.

Assessing Services Across the Perinatal Continuum

Begin by outlining maternal and reproductive health services offered across the perinatal continuum, including preconception, prenatal, intrapartum, and postpartum. Include services provided by the hospital, hospital-owned clinics, and other affiliated settings. Taking a system-wide view helps identify strengths and gaps in continuity of care.

Describing Partnerships and Care Transitions

This section examines how your health system collaborates with external partners, such as clinics, Federally Qualified Health Centers (FQHCs), and community-based providers. Clear descriptions will help illustrate how care is coordinated beyond hospital walls and where opportunities for stronger integration may exist.



Tip

- Include services offered through affiliated partners and note the care setting when relevant.
- Be clear about how policies are communicated and accessed.
- If data are unavailable or in development, note this and provide context.
- Use the final open-ended question to share innovations, lessons learned, or nuances not captured elsewhere.

3.3 Social Drivers of Maternal Health

This section focuses on how your health system identifies and responds to social factors that influence health outcomes. Responses should reflect both day-to-day practice and broader organizational efforts to support access, and equity.

Describing Social Needs Screening, Referrals, and Follow-Up

Consider how social needs are assessed, documented, and addressed across care settings. Outline referral pathways to community or social service organizations, including how they are tracked.

Describe Equity, Communication, and Language

This section looks at how your organization promotes equity and clear communication. Gather information on anti-racism and inclusivity training, recruitment strategies, language access services, and tools or processes that support effective communication.

3.4 Measures and Outcomes

This section focuses on how your organization collects, uses, and interprets maternal health data to support quality improvement and advance equity.

Preparing for Measure Reporting

Be prepared to identify which maternal health quality measures your organization

currently tracks. These may include national, state or system-level measures, or internally developed metrics.

You will be asked to describe how your organization captures and uses Race, Ethnicity, and Language (REaL) and Sexual Orientation and Gender Identity (SOGI) data. When available, prepare stratified results and describe how these data are used internally, shared with partners, or incorporated into improvement strategies.

Describing Data Collection Processes, Limitations, and Context

Use this section to explain how data are collected, managed, and reviewed across your organization. If data collection processes vary by setting or have known limitations (e.g., incomplete data or small sample sizes), describe these factors. If you are unable to report on certain measures, provide context and note ongoing or planned efforts to strengthen data collection.

4. Using Interviews to Complement Survey Findings

The Maternal Health Benchmarking Survey is designed to be used alongside **leadership, staff, and patient interviews** to provide a well-rounded view of care delivery. Survey responses capture formal policies, structures, and measurable practices, while interviews offer insight into how those practices are implemented and experienced day-to-day.



Tip

Use interview themes to confirm, clarify, or add context to survey responses. Pay attention to areas where interview feedback differs from survey responses, as these may signal variation in practice or areas needing further exploration.

Interview Roles and Structure

The “Maternal Health Benchmarking Survey - Interview Questions” (see Appendix A) organizes suggested questions by role and includes estimated time commitments. Depending on availability, interviews may be conducted as group or individual sessions.

Including perspectives from across roles and care settings helps ensure survey findings reflect both organizational intent and lived experience.

Recommended interview participants include:

- **Executive Leadership:** CEO or Board Member, CMO, & CNO (*group meeting*)
- **Maternal Health Senior Leadership**
- **Nursing Leadership:** Nurse managers, assistant nurse managers, & charge nurses (*group meeting*)
- **Perinatal Clinicians:** Obstetricians & midwives
- **Lactation Consultant(s)**
- **Maternal Health Social Worker(s)**
- **Quality Improvement or Data Representative(s)**
- **Population or Community Health Representative(s)**
- **Human Resources and/or Quality Representative(s)**
- **Patients Who Delivered at the Facility**

5. Submitting the Survey for Analysis

Before beginning the survey, clarify whether the survey will be completed and evaluated internally or with support from an external third party. Engaging a third party not employed by the hospital can provide an objective perspective and additional survey support. A third-party evaluator can help:

- Identify where responses may need additional detail, clarity, or consistency.
- Support project management, coordination, and timely completion.

Potential survey evaluators may include:

- Nonprofit or community-based partners
- Population or community health divisions
- Perinatal Community Advisory Board (PCAB) or Patient and Family Advisory Committee (PFAC) members
- Quality improvement organizations

Teams should confirm which platform or format will be used to submit survey responses (e.g., Qualtrics, SurveyMonkey, or an internal system). After submission, confirm that the survey has been successfully submitted. Maintaining records supports future benchmarking and follow-up surveys.

6. After Survey Submission: Reviewing and Using Your Results

After the survey is submitted, the evaluator should use the Survey

Rubric to assess submitted health system data alongside information gathered through interviews, observations, and narrative survey responses. This combined review supports a more complete understanding of current practices and areas for growth.

Benchmarking results are intended to support learning and action. Use survey findings to:

- Identify priority areas for quality improvement.
- Inform strategic planning, organizational priorities, and resource allocation.
- Track progress over time and measure change.
- Share lessons learned internally and with community and system partners.

Internal Review and Discussion

Teams should plan a dedicated internal meeting to review findings with executive and maternal health leadership. Findings should also be shared with staff and partners who contributed to the survey and, when appropriate, external community partners. Teams



Need Help?

Need Support? The Quality Institute Can Help by supporting hospitals throughout the survey process, including survey administration, coordination, interviews, and analysis. Support may

Teams are encouraged to contact **Adelisa Perez-Hudgins, Vice President of Quality,** or **Christine Ivery, Program Officer,** for questions at info@njhcqi.org.

are strongly encouraged to share performance data transparently.



Why Transparency Matters

Transparency is a powerful driver of trust and improvement. When hospitals openly share performance data—alongside clear plans for action—they demonstrate accountability and reinforce a commitment to quality.

Research demonstrates that transparency:

- **Builds trust and accountability** by signaling openness and organizational responsibility to patients, staff, and communities (National Academies of Sciences, Engineering, and Medicine [NASEM], 2020).
- **Improves quality of care** by motivating organizational improvement and professional engagement (Campanella et al., 2016; Totten et al., 2012).
- **Supports identification and reduction of disparities** when outcomes are stratified and openly examined (Howell, 2018; NASEM, 2020).
- **Strengthens internal improvement efforts** by creating shared awareness of performance gaps and aligning teams around measurable goals (Campanella et al., 2016; Shekelle et al., 2020).

Transparent reporting is not about perfection—it is about progress. By openly acknowledging strengths and opportunities for growth, organizations create a culture of learning, collaboration, shared problem-solving, and collective ownership of next steps. It also builds stronger relationships with patients, staff, and partners.

To support reflection and discussion, consider summarizing results in a report or PowerPoint. A concise, visual format can make findings easier to understand and share. Include key strengths, opportunities for improvement, and recommendations to advance care delivery.

As teams review findings, the following prompts can help guide reflection:

- Which findings are most surprising or confirm what was already suspected?
- Which findings feel most urgent or impactful?
- How do the recommendations align with current improvement efforts or strategic priorities?
- What areas require additional information or follow-up?



Tip

Using these prompts can help teams move from reflection to action and identify meaningful next steps.

How to Use the Survey Rubric

The Survey Rubric supports a consistent, objective review of survey responses. It is used to assess the clarity, completeness, and strength of submitted information and identify opportunities for improvement.

When using the rubric:

- Review responses alongside supporting documentation and qualitative inputs (e.g., interviews, observations, narrative responses).
- Consider both what is reported and the level of detail provided, including whether responses reflect system-wide practices or variation across sites.
- Use narrative comments to note strengths, gaps, and areas where clarification may be needed. Allow teams an opportunity to review and provide additional information.

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- Shekelle, P. G., et al. (2020). Public reporting as a quality improvement strategy: Updated evidence report. Agency for Healthcare Research and Quality.
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[Appendix A](#)

Maternal Health Benchmark Survey Resources

The following survey resources can be found on the Quality Institute website:

- Maternal Health Benchmarking Survey (**NEED LINK**)
- Maternal Health Benchmarking Survey - Interview Questions (**NEED LINK**)
- Maternal Health Benchmarking Survey - Rubric (**NEED LINK**)
- Maternal Health Benchmarking Survey – 1-page flyer (**NEED LINK**)

[Appendix B](#)

Frequently Asked Questions

How will our responses be used?

Responses are used internally to support benchmarking, identify strengths and opportunities for improvement, and inform shared learning across health systems.

Will our responses be evaluated or compared publicly?

The toolkit is intended to support quality improvement and learning, not public ranking or punitive evaluation.

Who should be involved in completing the toolkit?

Completing the toolkit requires collaboration across departments, including clinical leadership, data, social work, and community partners. Engaging multiple perspectives strengthens responses and reduce the burden on any one team.

What to do if data are unavailable?

If information is not available for a question, respond “not applicable” or “N/A” and include a brief explanation. Providing context helps prevent misinterpretation and separate true gaps in practice or areas out of scope.

What if we are in the early stages of work or implementation?

Early-stage efforts are important to include. Share what is currently in place, along with any plans or priorities for future development.

What if practices differ from written policies?

Describe what happens in practice. Real-world implementation provides the most useful context.

How should we respond if our health system includes multiple sites or facilities?

Responses should reflect practices across the entire system. Teams are highly encouraged to engage staff from each site to contribute to responses. This supports more accurate, complete responses and captures differences across sites. Clearly indicate the site or setting in responses.

Should we include services and practices outside the hospital setting?

Yes. The toolkit is designed to capture the full maternal health ecosystem, including hospital-based care, affiliated clinics, and partnerships with community-based organizations.

Who to contact for support?

The Survey Lead should share their contact information with anyone participating in the survey. If an external party is supporting the survey, their contact information should also be shared. Some staff may feel more comfortable raising questions or concerns with someone outside the organization.

[Appendix C](#)

One-Page Quick Start Guide

Purpose:

This survey helps your organization understand how maternal health policies, practices, and outcomes align with best practices and equity goals.

Before You Begin

- Assign a Survey Lead
- Assemble a multidisciplinary team
- Set internal deadlines

What You'll Need

- Clinical and quality data
- Workforce and leadership information
- Policies and protocols
- Community partnership details

How to Respond

- Be specific and detailed
- Indicate hospital vs. clinic vs. system-level practices
- Use narrative fields to explain context or limitations

Key Sections

1. Health System Profile
2. Maternal Health Services
3. Social Drivers of Maternal Health
4. Measures and Outcomes

Before Submitting

- Review for completeness and consistency
- Confirm uploads
- Obtain leadership review

After Submission

- Assess responses
- Plan to review and use benchmarking results

About the New Jersey Health Care Quality Institute

The New Jersey Health Care Quality Institute (Quality Institute) is an independent, non-profit organization dedicated to improving the safety, quality, and affordability of health care. Since 1997, we have led statewide efforts to transform health care by bringing together our diverse members — including health systems, insurers, providers, consumer groups, and employers — to find solutions grounded in evidence and collaboration.

Our work spans policy development, quality improvement, and community health initiatives that advance evidence-based policies and champion best practices. The Quality Institute advances maternal health across New Jersey through a comprehensive portfolio of programs focused on policy, practice, and workforce support:

- The Maternity Action Plan (MAP) advances policy solutions and strengthens midwifery integration to improve maternity care statewide.
- Perinatal Mental Health First Aid provides training for community health workers and others to recognize and respond to mental health symptoms or crises among pregnant and postpartum individuals.
- TeamBirth NJ is a statewide initiative to improve communication and ensure respectful care that aligns with patient preferences.
- Raising the Bar for Maternal Health is a statewide initiative dedicated to advancing equitable, high-quality maternal care. Through our Maternal Health Benchmarking Survey and the establishment of Perinatal Community Advisory Boards (PCAB), participating hospitals and health systems gain critical insight into care delivery across settings and embed community voices directly into perinatal decision-making.

Together, these programs promote safer and more respectful maternity care for all families. With a membership of more than 120 organizations, the Quality Institute serves as a trusted convener working to advance meaningful change in New Jersey health care.

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