

THE ALLIANCE FOR INNOVATION ON MATERNAL HEALTH



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH AIM

Responding to a disturbingly rising maternal mortality rate in the U.S, a national partnership of provider, public health and advocacy organizations developed the Alliance for Innovation on Maternal Health (AIM). AIM aligns national, state, and hospital level efforts to improve maternal health and safety and is poised to reduce severe maternal morbidity by 100,000 events and maternal mortality by 1,000 deaths by 2018. With funding received from the Health Resource Services Administration, AIM provides evidence-based front line resources for birth facilities and provider/public health teams to adapt and implement a series of action steps (bundles) on high risk maternal conditions. AIM support harmonized data-driven, rapid-cycle, continuous quality improvement processes to engage providers and birth facilities. Starting with states that have high rates of maternal mortality, AIM utilizes a broad variety of partners to develop state level teams for bundle implementation.

Bundles are standardized evidence-informed processes to reduce variation in response to maternal care. They are developed by multidisciplinary work groups of experts in the field representing each of our Alliance partners and specialty organizations.

Below is the current listing of bundles completed or underway:

- Prevention of Maternal Venous Thromboembolism
- Obstetric Care of Women with Opioid Use Disorder
- Obstetric Hemorrhage
- Postpartum Care Basics for Maternal Safety (First 6 weeks)
- Transition to well woman care (6 weeks to 1 year)
- Reduction of Peripartum Racial Disparities
- Safe Reduction of Primary Cesarean Births/Supporting Intending Vaginal Births
- Severe Hypertension/Preeclampsia
- Support after a Severe Maternal Event

THE ALLIANCE

American College of Nurse Midwives

American Academy of Family Physicians

American College of Obstetricians & Gynecologists

American Hospital Association

Association of Maternal & Child Health Programs

American Society for Healthcare Risk Management

Association of State and Territorial Health Officials

Association of Women's Health, Obstetric, and Neonatal Nurses

Black Mamas Matter Alliance

California Maternal Quality Care Collaborative

Critical Juncture

CityMatCH

Every Mother Counts

Genetic Alliance

Emergency Nurse Association

HealthStream

March of Dimes

National Association of Nurse Practitioners in Women's Health

National Healthy Start Association

National Institute for Children's Health Quality

National Perinatal Information Center

National WIC Association

Preeclampsia Foundation

Premier

The National Preconception Health and Health Care

Society for Maternal Fetal Medicine

Society for Obstetric Anesthesia and Perinatology

Trinity Health

Bundle Tools Include:

- Maternal early warning signs
- Reporting forms for severe maternal morbidity

State teams join AIM. These teams must have a leader; be able to provide de-identified hospital administrative data quarterly to the AIM data center; engage state public health officers; conduct multidisciplinary maternal mortality review reviews and identify champions among nursing, midwifery, and physicians

AIM is a data driven quality improvement initiative. The AIM team has identified low burden metrics for measuring bundle adoption and maternal outcomes within states and hospitals implementing the bundles. De-identified outcome, structure and process data reported to the AIM data center, is benchmarked with other similar hospitals within states and networks and reported back to the participating hospitals and states. Hospitals and states are guided to actively use the data for quality improvement.

The AIM team develops, identifies and provides an increasing number of resources for hospitals and state teams to implement the Maternal Safety Bundles. These include online, interactive and brief learning modules for staff education; check lists; work plans; direct links to tool kits and other published resources. The AIM website (www.safehealthcareforeverywoman) holds these resources and provides assistance with data management, and a contact/help center. AIM participants from hospitals and state teams are encouraged to engage in monthly calls with other states and hospital network participants as learning communities. AIM has developed a 14-state collaborative to identify the national metrics and resources required to implement the AIM bundle: Obstetric care of women with opioid use disorder. AIM is continually reviewing and revising resources for implementation and growth. All resources are open access and can be shared freely.

AIM supports participants by offering Part IV maintenance of certification for physicians and offer CEUs for nurses utilizing the online modules. AIM is developing an award program for participating hospitals.

AIM programs in low resource U.S. settings and countries are dramatically proving the basic concepts of AIM. Dedicated, health care professionals of multiple disciplines and training levels use the AIM bundles and work in concert to reduce barriers and improve communication to reduce maternal mortality and severe morbidity.

CURRENT AIM STATES

- California
- Florida
- Georgia
- Illinois
- Louisiana
- Maryland
- Michigan
- Mississippi
- New Jersey
- New York
- North Carolina
- Oklahoma
- South Carolina
- Tennessee
- Texas
- Utah
- Virginia
- West Virginia

AIM NETWORKS

- National Perinatal Information Center
- Premier
- Trinity Health

OTHER AIM SETTINGS

- Malawi
- Commonwealth of the Northern Mariana Islands
- Indian Health Service