**AIM ANNOUNCEMENTS**

The AIM National team attended The 2019 CityMatCH Maternal and Child Health Leadership Conference 9/22-2/25, in Providence Rhode Island. AIM States and Partners were also in attendance and had the opportunity to engage in a variety of sessions regarding maternal and infant health. Program Managers Amy Ushry and Andrea Carrillo represented AIM on two panels during the conference. Amy Ushry gave a wonderful presentation on the Obstetric Care for Women with Opioid Use Disorder Bundle that caught the attention of many other conference attendees.

**UPDATE ON AIM STATES AND SYSTEMS**

**Illinois**

- In Illinois, the pregnancy-associated mortality ratio for opioid-related poisoning deaths increased 1000% between 2008 and 2017 (IDPH); killing more pregnant/postpartum women in Illinois yearly than any other cause, including hemorrhage or hypertension combined.

- Engaging OB providers in this urgent obstetric issue is essential to connect women with this life-threatening chronic disease to available life-saving treatment, engage in key clinical steps prenatally and on Labor and Delivery to care for those women, and link them to medication-assisted treatment (MAT) and Recovery Services to reduce overdose deaths, improve pregnancy outcomes, and increase the number of women who can parent their baby.

- The Illinois Perinatal Quality Collaborative Mothers and Newborns affected by Opioids (MNO) OB toolkit includes quality improvement tools and resources to help hospitals implement systems changes and engage OB providers in active clinical culture change through provider education, data sharing, and debriefs using missed opportunities reviews to improve care and outcomes. Those resources can be found at [http://ilpqc.org/?q=MNO-OB](http://ilpqc.org/?q=MNO-OB). Please reach out to info@ilpqc.org with questions.
The number of Colorado mothers dying within one year of giving birth nearly doubled from 2008 to 2013, from 24.3 deaths to 46.2 (average per 100,000 births). To strategize the best tactics to reduce those numbers, the Colorado Perinatal Care Quality Collaborative (CPCQC) hosted the first annual Maternal and Infant Care Quality Conference at History Colorado on Sept. 12. The sold-out conference with over 200 attendees featured talks on implicit bias in care settings, best practices for treating substance-exposed newborns, the safe reduction of primary Cesarean birth and connections between mental health and maternal mortality, among others.

MATERNAL HEALTH IN THE NEWS

- The Joint Commission, August 30, 2019: New Joint Commission Standards Address Rising Maternal Mortality in the US


- CDC, September 25, 2019: Maternal Characteristics and Infant Outcomes in Appalachia and the Delta

- Health Resources and Service Administration, September, 2019: HRSA-MCHB Maternal Health Awardees FY19

- Merck for Mothers, September, 2019: Safer Childbirth Cities Initiative
UPCOMING EVENTS

Missouri Kick-Off
October 18, 2019
Columbia, MO

22nd Annual Premier Women’s Health Care Conference
October 16-19, 2019
More Information Here

MoMMA’s Voices Champions for Change Summit
October 18-20, 2019
More Information Here

National Healthy Start Association Annual Conference
October 19-23, 2019
More Information Here

Oregon Kick-Off
October 28, 2019
Portland, OR

South Carolina Kick-Off
October 30, 2019
Columbia, SC

CDC MORBIDITY AND MORTALITY WEEKLY REPORT HIGHLIGHT

- On September 5, 2019 the CDC released a report in the Morbidity and Mortality Weekly Report (MMWR) highlighting data from the Pregnancy Mortality Surveillance System (PMSS), Racial/Ethnic Disparities in Pregnancy-Related Deaths—United States, 2007-2016, that documents that disparities in pregnancy-related deaths have persisted over time and by age group, education level, and place.

- This report finds that pregnancy-related deaths per 100,000 live births (the pregnancy-related mortality ratio or PRMR) for non-Hispanic black and American Indian/Alaska Native (AI/AN) women older than 30 was four to five times higher than it was for non-Hispanic white women. Even in states with the lowest PRMRs and among women with higher levels of education, significant differences persist. These findings suggest that the disparities observed in pregnancy-related death for black and AI/AN women are a complex national problem.

The report can be accessed HERE.