Updates to the AIM Data Collection Plan

This document details updates to the AIM Data Collection Plan's metrics for the AIM Severe Hypertension in Pregnancy and Obstetric Hemorrhage patient safety bundles, including changes to the AIM Data Center to support these updates.

Severe Hypertension in Pregnancy

Original Metric

P2A: At the end of this quarter, what cumulative proportion of OB physicians and midwives has completed (within the last 2 years) an education program on Severe Hypertension/Preeclampsia?

P2B: At the end of this quarter, what cumulative proportion of OB physicians and midwives has completed (within the last 2 years) an education program on the Severe Hypertension/Preeclampsia bundle elements and the unit-standard protocol?

Updated Metric

P2: At the end of this reporting period, what cumulative proportion of delivering physicians and midwives has completed within the last 2 years an education program on Severe Hypertension/Preeclampsia that includes the unit-standard protocol and measures?

Rationale

We created one metric for provider education to improve clarity and reduce burden. To implement this process metric, we suggest best practices for severe hypertension be taught to delivering physicians and midwives within the context of relevant unit-standard protocols and the AIM Severe Hypertension in Pregnancy patient safety bundle elements and measures.

Changes to the AIM Data Center

Metric P2A will be updated to reflect P2's language, and P2B will be removed from the AIM Data Center.

Original Metric

P3A: At the end of this quarter, what cumulative proportion of OB nurses has completed (within the last 2 years) an education program on Severe Hypertension/Preeclampsia?

P3B: At the end of this quarter, what cumulative proportion of OB nurses has completed (within the last 2 years) an education program on Severe Hypertension/Preeclampsia?

Updated Metric

P3: At the end of this reporting period, what cumulative proportion of OB nurses (including L&D and Postpartum) has completed within the last 2 years an education program on Severe Hypertension/Preeclampsia?
Rationale
We created one metric for nursing education to improve clarity and reduce burden. To implement this process metric, we suggest best practices for severe hypertension be taught to OB nurses, including L&D and Postpartum, within the context of relevant unit-standard protocols and the AIM Severe Hypertension in Pregnancy patient safety bundle elements and measures.

Changes to the AIM Data Center
Metric P3A will be changed to reflect P3’s language, and P3B will be removed from the AIM Data Center.

Original Metric
P4: Report Numerator/Denominator
Denominator: Women with persistent (twice within 15 minutes) new-onset severe hypertension, excludes women with an exacerbation of chronic hypertension
Numerator: Among the denominator, cases who were treated within 1 hour with IV Labetalol, IV Hydralazine, or PO Nifedipine

Updated Metric
P4: Report Numerator/Denominator
Denominator: Birthing patients with acute-onset severe hypertension that persists for 15 minutes or more, including those with preeclampsia, gestational or chronic hypertension
Numerator: Among the denominator, birthing patients who were treated within 1 hour with IV Labetalol, IV Hydralazine, or PO Nifedipine (see ACOG CO #767). The 1 hour is measured from the first severe range BP reading, assuming confirmation of persistent elevation through a second reading.

Rationale
We updated P4 to align with ACOG Committee Opinion #767, which provides standardized guidance for treating pregnant people and those in the postpartum period with acute-onset severe hypertension.

Changes to the AIM Data Center
The original language for metric P4 will be changed in the AIM Data Center to that of the updated metric.

Original Metric
S3: Multidisciplinary Case Reviews
Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases of severe maternal morbidity (including women admitted to the ICU, receiving ≥ 4 units RBC transfusions, or diagnosed with a VTE?)

Updated Metric
S3: Multidisciplinary Case Reviews
Has your hospital established a process to perform multidisciplinary systems-level reviews on cases of severe maternal morbidity (including, at a minimum, birthing patients admitted to the ICU or receiving ≥ 4 units RBC transfusions)?

Rationale
We reworded this metric to improve clarity. For greatest impact, we suggest that in addition to the minimum instances for review defined in S3, hospital teams also implement missed opportunity reviews
for key bundle process measures (e.g. instances in which acute onset severe hypertension was not treated in < 60 minutes) in both unit debriefs and multidisciplinary case reviews.

Changes to the AIM Data Center
The original language for metric S3 will be changed in the AIM Data Center to that of the updated metric.

Obstetric Hemorrhage

Original Metric

**P2A:** At the end of this quarter, what cumulative proportion of OB physicians and midwives has completed (within the last 2 years) an education program on Obstetric Hemorrhage?

**P2B:** At the end of this quarter, what cumulative proportion of OB physicians and midwives has completed (within the last 2 years) an education program on the Obstetric Hemorrhage bundle elements and unit standard protocols?

Updated Metric

**P2:** At the end of this reporting period, what cumulative proportion of delivering physicians and midwives has completed within the last 2 years an education program on Obstetric Hemorrhage that includes the unit-standard protocol and measures?

Rationale

We created one metric for provider education to improve clarity and reduce burden. To implement this process metric, we suggest best practices for obstetric hemorrhage be taught to delivering physicians and midwives within the context of relevant unit-standard protocols and the AIM Obstetric Hemorrhage patient safety bundle elements.

Changes to the AIM Data Center

Metric P2A will be updated to reflect P2’s language, and P2B will be removed from the AIM Data Center

Original Metric

**P3A:** At the end of this quarter, what cumulative proportion of OB nurses has completed (within the last 2 years) an education program on Obstetric Hemorrhage?

**P3B:** At the end of this quarter, what cumulative proportions of OB nurses has completed (within the last 2 years) an education program on Obstetric Hemorrhage?

Updated Metric

**P3:** At the end of this reporting period, what cumulative proportion of OB nurses (including L&D and Postpartum) has completed within the last 2 years an education program on Obstetric Hemorrhage that includes the unit-standard protocols and measures?

Rationale

We created one metric for nursing education to improve clarity and reduce burden. To implement this process metric, we suggest best practices for obstetric hemorrhage be taught to OB nurses, including L&D and Postpartum, within the context of relevant unit-standard protocols and the AIM Obstetric Hemorrhage patient safety bundle elements and measures.
Changes to the AIM Data Center
Metric P3A will be updated to reflect P3's language, and P3B will be removed from the AIM Data Center.

Original Metric
S3: Multidisciplinary Case Reviews
Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases of severe maternal morbidity (including women admitted to the ICU, receiving ≥ 4 units RBC transfusions, or diagnosed with a VTE?)

Updated Metric
S3: Multidisciplinary Case Reviews
Has your hospital established a process to perform multidisciplinary systems-level reviews on cases of severe morbidity (including, at a minimum, birthing patients admitted to the ICU or receiving ≥ 4 units RBC transfusions)?

Rationale
We reworded this metric to improve clarity. For greatest impact, we suggest that in addition to the minimum instances for review identified in S3, hospital teams also implement missed opportunity reviews for key bundle process measures (e.g. instances in which acute onset severe hypertension was not treated in < 60 minutes) in both unit debriefs and multidisciplinary case reviews.

Changes to the AIM Data Center
The original language for metric S3 will be changed in the AIM Data Center to that of the updated metric.