Alliance for Innovation on Maternal Health (AIM) Program Overview

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Division of Women's Health
Maternal and Child Health Bureau (MCHB)

Vision: Healthy Communities, Healthy People

Federal Overview of the AIM Initiative

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Maternal & Child Health

HRSA Overview

Vision

Healthy Communities, Healthy People

Mission

To improve health outcomes through access to quality services, a skilled health workforce, and innovative, high-value programs.

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MATERNAL AND CHILD HEALTH BUREAU STRATEGIC PLAN

Mission

To improve the health and well-being of America's mothers, children, and families.

Vision

An America where all mothers, children, and families thrive and reach their full potential.

MCHB Goals

ACCESS — Assure access to high-quality health services to improve the health and well-being for all Maternal and Child Health (MCH) populations.

OPTIMAL HEALTH — Optimize health for MCH populations.

CAPACITY — Strengthen public health capacity and workforce for MCH.

IMPACT — Maximize impact through leadership, partnership, and stewardship.

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MCHB's Efforts to Advance Maternal Health

State Systems & Innovations

- State Title V MCH Block Grant
- State Maternal Health Innovation (MHI) & State MHI Data Capacity Program
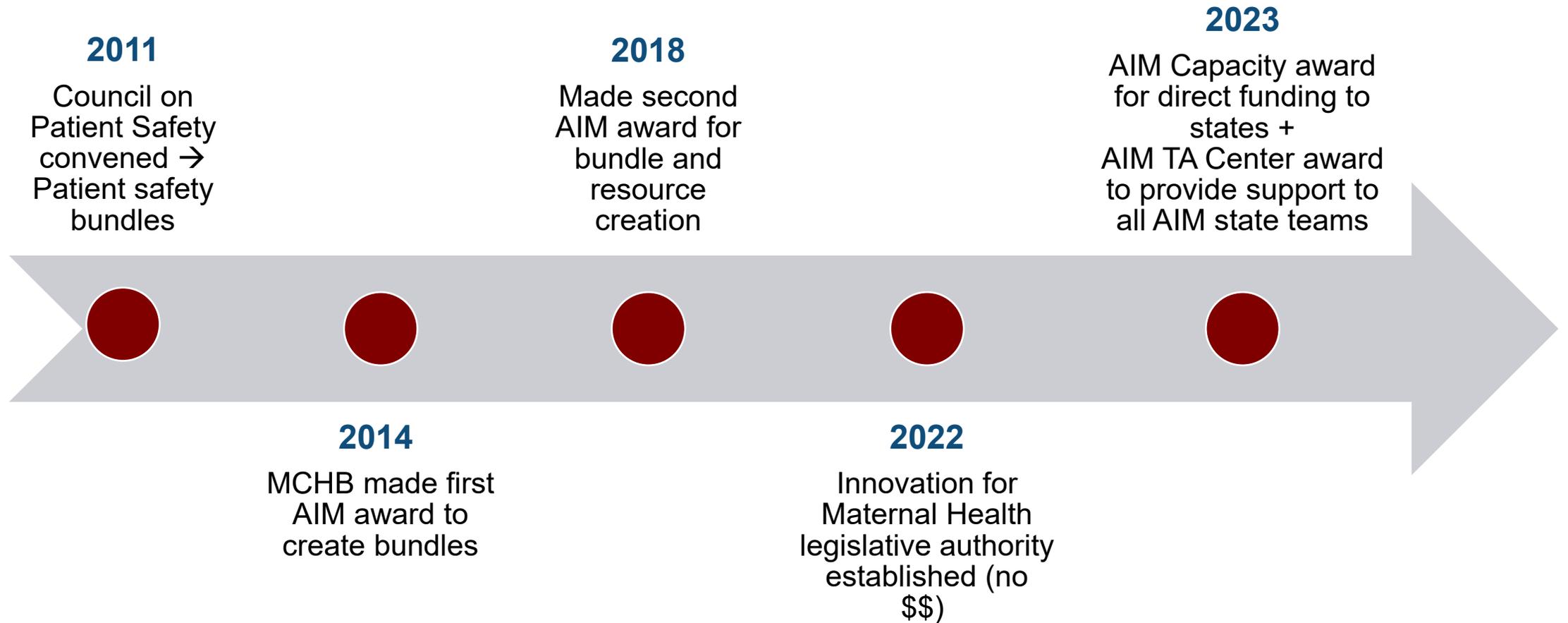- Maternal Health Training and Resource Center (MHARC)

Workforce & Quality Improvement

- **AIM Capacity (29)**
- **AIM TA Center (1)**
- Maternal Mental Health and Substance Use Disorders
- Fetal Alcohol Spectrum Disorders

Direct Support & Services

- National Maternal Mental Health Hotline
- Maternal, Infant, & Early Childhood Home Visiting (MIECHV)
- Healthy Start
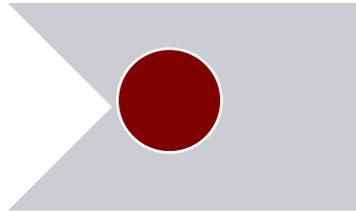- Integrated Maternal Health Services

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AIM Funding History

2011
Council on Patient Safety convened → Patient safety bundles

2014
MCHB made first AIM award to create bundles

2018
Made second AIM award for bundle and resource creation

2022
Innovation for Maternal Health legislative authority established (no $$)

2023
AIM Capacity award for direct funding to states + AIM TA Center award to provide support to all AIM state teams

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AIM Patient Safety Bundles

Sets of actionable steps to improve the quality of care provided during delivery and in the postpartum period.
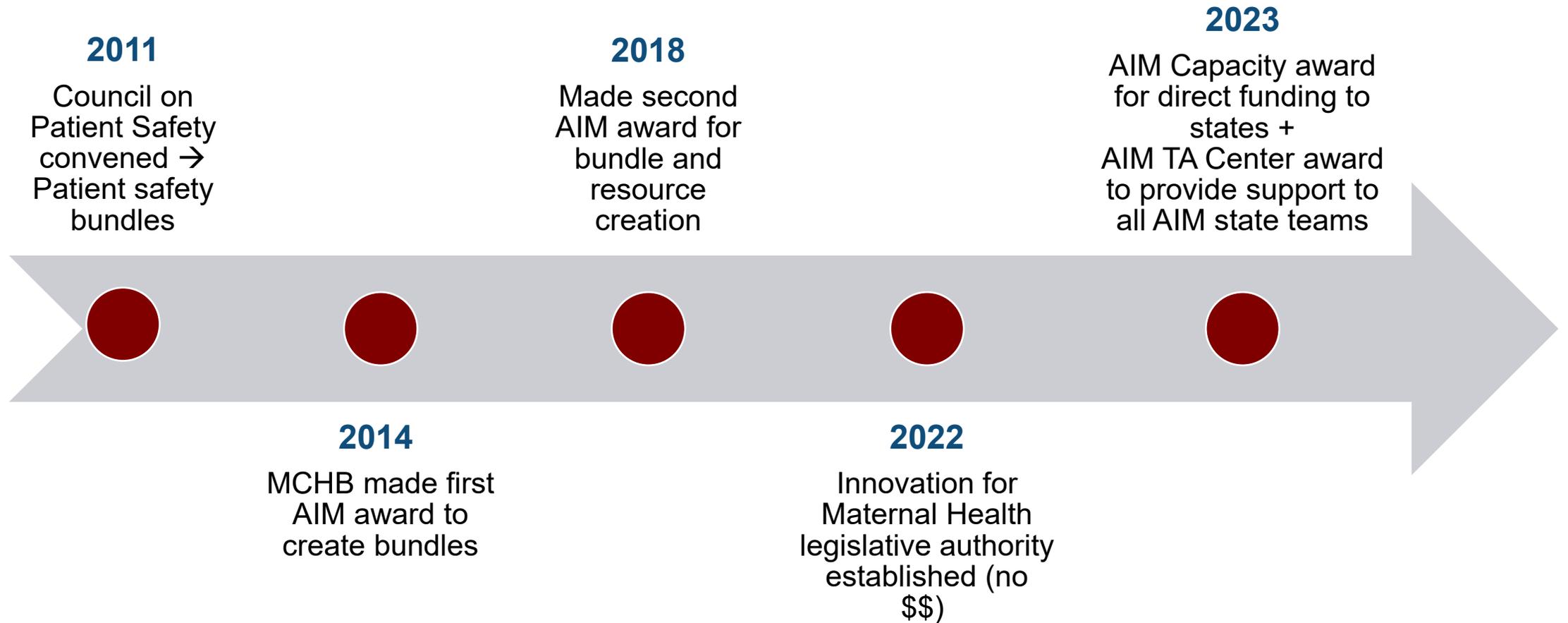
The steps are informed by research and experts in the field and include relevant best practices for each condition.

These may be protocols, provider education, policies, preparation of medication and supplies, assessments, and even more.

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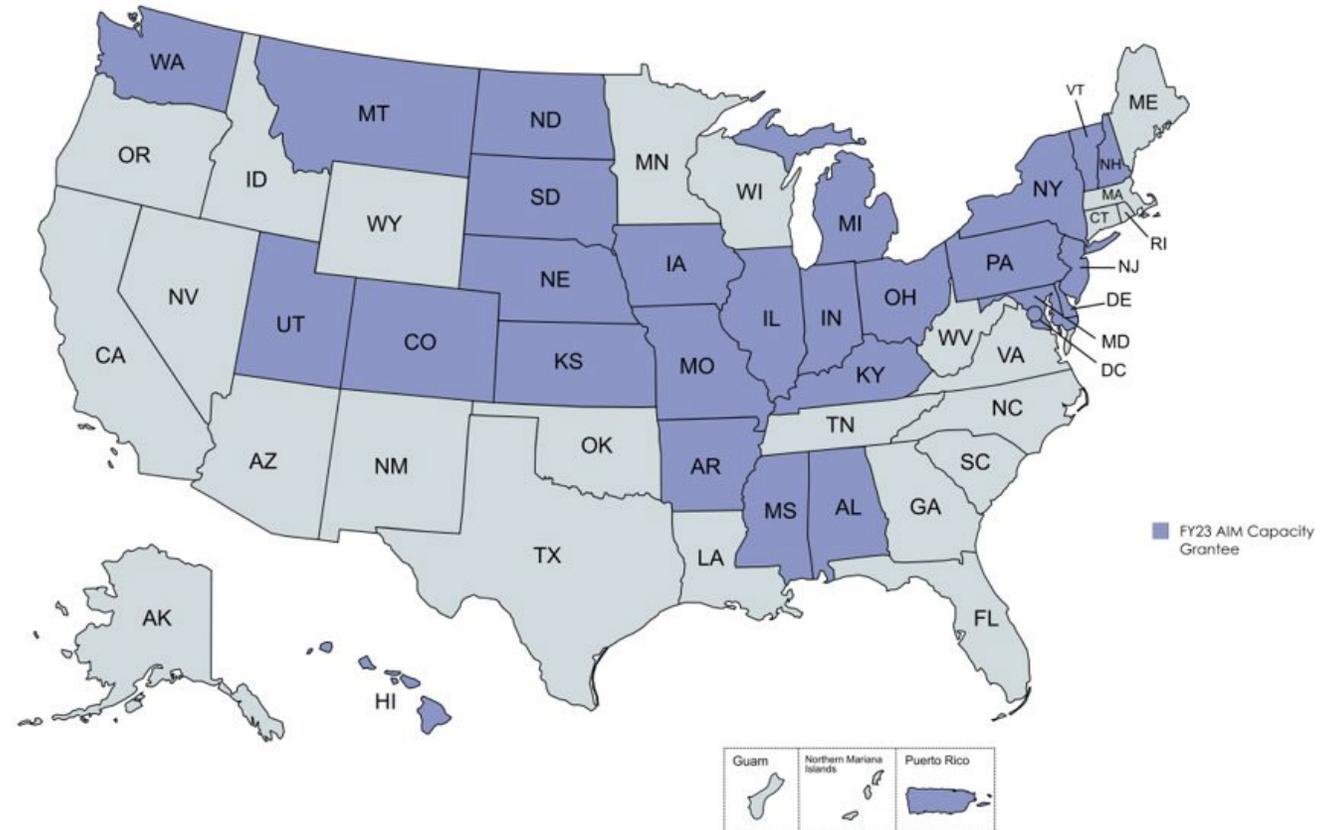
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AIM Technical Assistance (TA) Center

- The AIM TA Center provides comprehensive, high impact technical assistance to entities implementing the AIM quality improvement initiative in the United States.
  - Assistance provided supports best practices that make birth safer, improve maternal health outcomes, and save lives.

- Evolution of funding
  - From bundle implementation to development of TA resources and gathering and analyzing data from states.

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HRSA's AIM Capacity Program

- Awardees include universities, state health departments, hospital associations, and foundations

- Projects span:
  - Bundle implementation and/or sustainability
  - Increasing data capacity
  - Hospital recruitment
  - Training and education (e.g., Communities of Learning)
  - On-site TA
  - Staffing

FY23 AIM Capacity Grantee

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AIM Patient Safety Bundles

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What Are Maternal Patient Safety Bundles?

- Structured way of improving the processes of care and patient outcomes.

- Descriptive, not prescriptive.

- Collections of *evidence-informed* best practices, developed by multidisciplinary experts, that address clinically specific conditions in pregnant and postpartum women.

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AIM Patient Safety Bundles

1. Obstetric hemorrhage

2. Severe hypertension in pregnancy

3. Safe reduction of primary cesarean

4. Care of pregnant and postpartum women with substance use disorder

5. Perinatal mental health conditions

6. Postpartum discharge transition

7. Cardiac conditions in obstetric care

8. Sepsis in obstetric care

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5R's of the AIM Patient Safety Bundles

1. Readiness

2. Recognition/prevention

3. Response

4. Reporting/systems learning

5. Respectful care

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Obstetric Hemorrhage Bundle Category	Element Examples
Readiness – Every unit/team:	Maintain a hemorrhage cart or equivalent with supplies, checklists, and instruction cards for devices or procedures where antepartum, laboring, and postpartum patients are located.
Recognition/prevention – Every patient:	Measure and communicate cumulative blood loss to all team members, using quantitative approaches.
Response – Every event:	Utilize a standardized, facility-wide, stage-based, obstetric hemorrhage emergency management plan, with checklists and escalation policies for stage-based management of patients with obstetric hemorrhage, including: • Advance preparations made based on hemorrhage risk (e.g., cell saver, blood bank notification, etc.) • Evaluating patients for etiology of hemorrhage • Use of obstetric rapid response team • Evidence-based medication administration or use of nonpharmacological interventions • Appropriate activation of expanded care team and clinical resources as necessary
Reporting/systems learning – Every unit:	Perform multidisciplinary reviews of serious complications per established facility criteria to identify system issues.
Respectful care – Every unit/provider/team member:	Include each patient who experienced an obstetric hemorrhage and their identified support network as respected members of and contributors to the multidisciplinary care team and as participants in patient-centered huddles and debriefs.

Examples of AIM Impacts

Among birthing facilities implementing AIM patient safety bundles...

Alaska

22% increase in timely care for pregnant women with severe hypertension

Georgia

Proportion of hospitals with obstetric hemorrhage carts readily available **increased from 49% to 96%**

Illinois

Pregnant or postpartum women with OUD connected to OUD medication by delivery discharge **increased from 41% to 76%**

New York

Participating facilities with a universal screening protocol for SUD **increased from 33% to 86%**

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