TexasAIM
Implementing AIM Maternal Safety Bundles in Texas
Welcome

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Chair, Maternal Mortality & Morbidity Task Force
Learning Objectives

• How TexasAIM can support your hospital in your efforts to improve care
• The hospital experience with implementing maternal safety bundles
• The requirements and benefits of participation
• Instructions on how to enroll in TexasAIM
## Confirmed Maternal Deaths by Timing and Cause of Death, 2012-2015, Texas

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>While Pregnant</th>
<th>0-7 Days Post-partum</th>
<th>8-42 Days Post-partum</th>
<th>43-60 Days Post-partum</th>
<th>61+ Days Post-partum</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Amniotic Embolism</td>
<td>1</td>
<td>9</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Cardiac Event</td>
<td>2</td>
<td>12</td>
<td>9</td>
<td>5</td>
<td>27</td>
<td>55</td>
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<tr>
<td>Cerebrovascular Event</td>
<td>0</td>
<td>8</td>
<td>9</td>
<td>1</td>
<td>9</td>
<td>27</td>
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<tr>
<td>Drug Overdose</td>
<td>0</td>
<td>3</td>
<td>7</td>
<td>5</td>
<td>49</td>
<td>64</td>
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<tr>
<td>Hemorrhage</td>
<td>3</td>
<td>12</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>Homicide</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>32</td>
<td>42</td>
</tr>
<tr>
<td>Hypertension/Eclampsia</td>
<td>0</td>
<td>7</td>
<td>4</td>
<td>0</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td>Infection/Sepsis</td>
<td>1</td>
<td>3</td>
<td>14</td>
<td>3</td>
<td>11</td>
<td>32</td>
</tr>
<tr>
<td>Pulmonary Embolism</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>13</td>
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<tr>
<td>Substance Use Sequelae (e.g., liver cirrhosis)</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>5</td>
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<tr>
<td>Suicide</td>
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<td>1</td>
<td>2</td>
<td>2</td>
<td>28</td>
<td>33</td>
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<tr>
<td>Other</td>
<td>5</td>
<td>5</td>
<td>6</td>
<td>3</td>
<td>44</td>
<td>63</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>16</strong></td>
<td><strong>64</strong></td>
<td><strong>64</strong></td>
<td><strong>23</strong></td>
<td><strong>215</strong></td>
<td><strong>382</strong></td>
</tr>
</tbody>
</table>

Confirmed Maternal Deaths by Timing and Cause of Death, 2012-2015, Texas
Maternal Mortality and Morbidity are Preventable

From: Main et al. Obstet Gynecol 2015;125(4):938-947
Sec. 34.0156. MATERNAL HEALTH AND SAFETY INITIATIVE.

(a) Using existing resources, the department, in collaboration with the task force, shall promote and facilitate the use among health care providers in this state of maternal health and safety informational materials, including tools and procedures related to best practices in maternal health and safety.
Alliance for Innovation on Maternal Health (AIM)

- AIM is a national data-driven maternal safety and quality improvement initiative based on proven implementation approaches to improving maternal safety and outcomes in the U.S.

- AIM is modified to best fit each hospital’s needs and circumstances.
AIM Maternal Safety Bundles

AIM Maternal Safety Bundles are proven, evidence-based strategies used to improve maternal safety and health care quality.

Each bundle focuses on a specific maternal health and safety topic and has 4 components:

- Readiness
- Recognition & Prevention
- Response
- Reporting/Systems Learning
Texas as an AIM State

LEAD COORDINATING BODY
Texas Department of State Health Services
TexasAIM Implementation Workgroup

**Mission**
- To guide and facilitate implementation of AIM maternal safety bundles

**Charges**
- Provide subject matter expertise and facilitate linkages throughout implementation process
- Promote recruitment and continued engagement of AIM participants
- Participate in monthly workgroup calls
TexasAIM Goals

1. Participation from more than 75% of Texas birthing facilities

2. Engage 50% or more participating birthing facilities in a Learning Collaborative

3. Support birthing facilities as they implement bundles

4. Foster partnerships to develop and align infrastructure and resources to support TexasAIM Goals
TexasAIM Bundle Focus

• DSHS plans to implement the following bundles through TexasAIM:
  • Obstetric Hemorrhage
  • Obstetric Care for Women with Opioid Use Disorder
  • Severe Hypertension in Pregnancy

• Initial enrollment will focus on the Obstetric Hemorrhage Bundle
Obstetric Care for Women with Opioid Use Disorder Bundle

• AIM is still finalizing the development of the Obstetric Care for Women with Opioid Use Disorder Bundle and is planning to launch implementation of the bundle this summer.

• DSHS and HHSC will **pilot** the Opioid bundle first in hospitals with experience working on maternal Opioid Use Disorder and Neonatal Abstinence Syndrome initiatives.

• DSHS plans to implement the first cohort for interested TexasAIM hospitals in 2019.
TexasAIM Participation Options

• DSHS is currently accepting commitments from interested hospitals to be a part of TexasAIM

• For interested hospitals, we are offering two levels of commitment:
  • TexasAIM Basic
  • TexasAIM Plus
## Participation Options

<table>
<thead>
<tr>
<th>Service</th>
<th>TexasAIM Basic</th>
<th>TexasAIM Plus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete Readiness Assessment</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Form Improvement Team</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Report Measures to Data Portal</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Face-to-Face Meeting</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Networking and Technical Assistance</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Collaborative Meeting and Calls</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Report Additional QI Measures</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Coaching and Training Calls</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Share Learning with other Hospitals</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>In-Person Learning Sessions</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Targeted Support and Site Visits</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Peer-to-Peer Mentoring</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Link to Resources and Partnerships</td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>
Participants of TexasAIM Basic will be required to:
• Complete Intake Assessment
• Form Improvement Team
• Report Measures to Data Portal
• Attend a Face-to-Face Meeting in June

Participants will also receive:
• Quality Improvement Webinars
• Network Opportunities
• Technical Assistance
• Recognition of Participation
TexasAIM Plus

Participants of TexasAIM Plus will be required to:
  • Complete all of the TexasAIM Basic requirements
  • Sign a Charter
  • Collaborative Meetings and Calls
  • Report up to 5 Additional Measures

Participants will also receive:
  • Targeted Support from Faculty
  • Coaching and Training Calls
  • Site Visits
  • Collaborative Learning
  • Peer-to-Peer Mentoring
  • Resources and Partnerships
TexasAIM Plus

Engagement, Enrollment, and Preparation

Learning Session 1
Fall 2018

Learning Session 2
Spring 2019

Learning Session 3
Summer '19

Harvest
Winter 2019

Action Period 1
Process Measures

Submitted by Hospitals Quarterly

- How many OB drills were performed on your unit for any maternal safety topic?
- What were covered in the OB drills?
- What cumulative proportion of OB physicians and midwives has completed an education program on OB Hemorrhage?
- What cumulative proportion of OB physicians and midwives has completed an education program on OB Hemorrhage bundle elements and the unit-standard protocol?
- What cumulative proportion of OB nurses had completed an education program on OB Hemorrhage?
- What cumulative proportion of OB nurses has completed an education program on OB hemorrhage bundle elements and the unit-standard protocol?
- What cumulative proportion of mothers had a hemorrhage risk assessment with risk level assigned, performed at least once between admission and birth and shared among the team?
- What proportion of mothers had measurement of blood loss from birth through the recovery period using quantitative and cumulative techniques?
Structure Measures

Submitted by Hospitals when Completed

• Has your hospital developed OB specific resources and protocols to support patients, family and staff through major OB complications?
• Has your hospital established a system to perform regular formal debriefs after cases with major complications?
• Has your hospital established a process to perform multidisciplinary systems-level review on all cases of severe maternal morbidity?
• Does your hospital have OB hemorrhage supplies readily available, typically in a cart of mobile box?
• Does your hospital have an OB hemorrhage policy and procedure that provides a unit-standard approach using a stage-based management plan with checklists?
• Were some of the recommended OB hemorrhage bundle processes integrated into your hospital EMR system?
DSHS obtains the required outcome measures from the Hospital Discharge Data that hospitals submit to DSHS’ Center for Health Statistics.

The Outcome Measures that will be collected are:

- Severe Maternal Morbidity
- Severe Maternal Morbidity (excluding cases with only a transfusion code) among All Delivering Women
- Severe Maternal Morbidity Among Hemorrhage Cases
- Severe Maternal Morbidity (excluding cases with only a transfusion code) among Hemorrhage Cases
TexasAIM Plus Measures
Submitted by Hospitals Monthly

- Hospitals participating in TexasAIM Plus will submit up to 5 additional quality improvement measures monthly.

- These measures are still in development and will be announced soon.
All Hospitals Provide Discharge Data Monthly (Established Process with DSHS Center for Health Statistics)

Hospitals Can:
- Track Progress
- Compare with Other Hospitals (deidentified)
- Monitor Outcomes
- Generate Reports

THA Provides Regular Reports Back to Hospitals
UNIVERSITY OF ROCHESTER MEDICAL CENTER (AKA STRONG MEMORIAL HOSPITAL)

J. Christopher Glantz, MD, MPH
Professor of OBGYN and Public Health Sciences
Director of Perinatal Outreach
BUNDLES AND BUY-IN

• Discussed potential preventability and need for improvement (hemorrhage, hypertension, VTE)
  • Faculty and dept admin meetings, and at affiliate hospitals

• Rationale for bundles
  • Structured, short, evidence-based guidelines that improve outcome

• Consensus within multiple organizations
  • Department of Health, ACOG, National Partnership for Maternal Safety, Joint Commission, etc.
**PROCESS**

• OBGYN Departmental “champions” identified
  • OB/MFM (me), Dept Chair, Patient Safety and QA/QI Nurses, Nurse Educator
  • Emphasize dept commitment and keep issues in front of staff
    • Simulations and RCAs incorporated bundle recommendations
    • Liaison with DOH/ACOG; point-people for QI projects

• Reviewed current hospital protocols/policies
  • Most were current, but some needed updating/optimization
OB HEMORRHAGE: AREAS FOR IMPROVEMENT

• Hemorrhage Risk Assessment
  • IT designed automated EMR system to flag high-risk women

• Massive Transfusion Protocol
  • Met with Blood Bank to modify OB MTP to fit OB needs
  • Educated staff in MTP indications and initiation

• Hemorrhage Cart
  • Assembled cart to ensure immediate availability of necessary items
PARTICIPATION IN NYSDOH PERINATAL QUALITY CONSORTIUM

• Support, guidance, and encouragement from the NYSDOH
• Conference calls, webinars, in-person meetings
• Sharing information, common problems/barriers and hospital-based solutions, modifications of bundles
• Data collection and tracking
  • Balance motivation with data collection fatigue
  • Identify progress and of areas for improvement
  • Keeps issues in forefront
Implementing AIM Bundles

- Jennifer Leach, RN, BSN
- Director of Nursing for Women’s & Children’s Services
- Peggy V. Helmerich Women’s Health Center
- Tulsa, OK
Feasibility

Identify the need & reason for change

Identify patient population

Identify key individuals

– LIP’s, Nursing staff, Ancillary, i.e., Pharmacy, IT, Lab, HIM (Health Information Management), Executive Team
Promoting Safety of Culture

• Researched current literature from reputable sources, i.e., ACOG, California Perinatal Quality Collaborative, Oklahoma Perinatal Quality Collaborative

• Educated key stakeholders, bedside staff, patients
  – Increased awareness regarding current state of practice and the need to reach the goal of current standards and recommendations of practice
  – Improved engagement
Improving Outcomes

- Improved morale amongst practitioners and nursing staff
- Increased confidence in quality of care provided to patients
- Increased patient satisfaction by providing awareness to current treatment plan
- Decreased risk and liability of hospital
- Elevates reputation in community
Maternal Levels of Care

• Implementation of safety bundles is included in rules for all maternal levels of care in Texas

• TexasAIM program implementation provides hospitals a simple, successful program with significant support
DSRIP

• Delivery System Reform Incentive Payments (DSRIP) is a program through the 1115 Waiver.

• Current DSRIP Providers have the option to earn incentive payments for submitting provider generated certification of participation in AIM Bundle for OB Hemorrhage

• If you are a DSRIP Provider, please contact your DSRIP contact for more information.
Next Steps
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team
Establish Access to AIM Collaborative Knowledge Base
Establish Access to the AIM Data Portal
Complete TexasAIM Intake Assessment
Review the AIM Maternal Safety Bundles and Assess your Priorities
Promote TexasAIM Within your Facility and to Your Community
Next Steps

**Complete TexasAIM Enrollment Form**
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TexasAIM Enrollment Form

• In order to enroll in TexasAIM, hospitals will need to complete the TexasAIM Enrollment Form, which can be found on the TexasAIM website: https://www.dshs.texas.gov/mch/texasaim/

• The form will require:
  • Basic Hospital Information
  • Identify Multi-Disciplinary Team
  • Level of Participation Selection
  • CEO Signature

• Send completed forms to TexasAIM@dshs.texas.gov
Next Steps

Complete TexasAIM Enrollment Form

**Convene Multi-disciplinary Maternal Health & Safety Improvement Team**

Establish Access to AIM Collaborative Knowledge Base

Establish Access to the AIM Data Portal

Complete TexasAIM Intake Assessment

Review the AIM Maternal Safety Bundles and Assess your Priorities

Promote TexasAIM Within your Facility and to Your Community
Maternal Health & Safety Improvement Team

All hospitals will need to identify a Maternal Health and Safety Improvement Team, which consist of:

- **Key Contact Person:** A staff member charged to liaise with DSHS.
- **Technical Leader:** Staff member who is a subject matter expert.
- **Clinical Leader:** A physician who believes in this effort and will support the required change in process.
- **Day-to-Day Leadership:** Responsible for driving improvement every day.
- **Project Sponsor:** An executive authority to coordinate with senior management and across the organization.
- **Others as Needed**
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team

**Establish Access to AIM Collaborative Knowledge Base**

Establish Access to the AIM Data Portal
Complete TexasAIM Intake Assessment
Review the AIM Maternal Safety Bundles and Assess your Priorities
Promote TexasAIM Within your Facility and to Your Community
AIM Collaborative Knowledge Base

• AIM’s Collaborative Knowledge Base can be accessed by creating an account at the following link:
  https://acogaim.freshdesk.com/support/login

• We also encourage hospital teams to familiarize themselves with the information on
  http://safehealthcareforeverywoman.org/aim-program/
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team
Establish Access to AIM Collaborative Knowledge Base

**Establish Access to the AIM Data Portal**
Complete TexasAIM Intake Assessment
Review the AIM Maternal Safety Bundles and Assess your Priorities
Promote TexasAIM Within your Facility and to Your Community
Access to the AIM Data Portal

• DSHS will input hospital information needed to access the data portal

• Upon first login hospitals are required to agree to AIM’s data use agreement.

• For more information on the data use agreement, please contact TexasAIM@dshs.texas.gov.
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team
Establish Access to AIM Collaborative Knowledge Base
Establish Access to the AIM Data Portal

**Complete TexasAIM Intake Assessment**

Review the AIM Maternal Safety Bundles and Assess your Priorities
Promote TexasAIM Within your Facility and to Your Community
Intake Assessment

• Approx. 30 question survey completed by the hospital team

• Questions on specific processes and policies for obstetric care

• Answers will help DSHS better support the efforts of hospitals

• Will be repeated to track progress
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team
Establish Access to AIM Collaborative Knowledge Base
Establish Access to the AIM Data Portal
Complete TexasAIM Intake Assessment

**Review the AIM Maternal Safety Bundles and Assess your Priorities**

Promote TexasAIM Within your Facility and to Your Community
Review Bundle & Identify Priorities

- Review bundle activities and compare with the results from the intake assessment.

- Identify the priorities your hospital will focus on.

- Training on and tools for Quality Improvement will be provided for TexasAIM Plus Hospitals.
Next Steps

Complete TexasAIM Enrollment Form
Convene Multi-disciplinary Maternal Health & Safety Improvement Team
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Establish Access to the AIM Data Portal
Complete TexasAIM Intake Assessment
Review the AIM Maternal Safety Bundles and Assess your Priorities

Promote TexasAIM Within your Facility and to Your Community
Promote TexasAIM

• AIM seeks to develop a culture of safety, requiring whole hospital engagement.

• Opioid Use Disorder bundle will extend that culture beyond the hospital and into the community

• DSHS is currently developing promotional tools for hospitals to utilize.
TexasAIM Leadership Summit and Orientation

• June 4th in Austin, Texas

• The goal of this meeting is to kickoff the TexasAIM initiative with enrolled hospitals.

• For hospitals participating in TexasAIM Plus, we will begin the learning collaborative activities.
Recap

The TexasAIM Enrollment Form can be found on our website
https://www.dshs.texas.gov/mch/texasaim/

If you have any questions, or would like us to set up a conference call with your hospital, please contact us at TexasAIM@dshs.texas.gov.
Questions?