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Summary

The Alliance for Innovation on Maternal Health (AIM) is excited to host the first Obstetric Emergency Readiness Community of Learning (COL), which is a collaborative learning series designed to support non-obstetric, lower resourced, and rural facilities. This Community of Learning is designed to share best practices and resources to prepare for recognition and response to obstetric emergencies in non-obstetrical care settings, and in facilities with limited access to specialty care providers.

All interested emergency room healthcare professionals, quality improvement coordinators, facility-based teams, and hospital leadership from all states, jurisdictions, Indian Health Service (IHS), and tribal maternal health teams are welcome.

Educational offering topics may include:

- Building a Facility-Based Rapid Response Team
- Simulations for Obstetric Readiness + Strategies for Remote Drills and Sims
- Key Considerations and Best Practices for Patient Transport
- Post Event Debriefs and System Improvements

All who register will be able to participate in the Obstetric Emergency Readiness Community of Learning in their desired capacity.

Register for AIM’s Obstetric Emergency Readiness COL here. Registration should take less than 10 minutes to complete. Should you want to review the questions asked on the registration form, please see the pdf version of the form at the end of this document to review prior to submission. Please use the link above to register; emailed copies of registration forms will not be accepted.

If you have any questions on AIM’s Obstetric Emergency Readiness COL, please refer to the Frequently Asked Questions section. You can contact AIM Program Staff (aim@acog.org) with any additional questions or concerns.
AIM will host 8 educational offerings from March 2023 through August 2023. The format and structure of educational offerings will include presentations by expert faculty on the below identified topics and opportunities for group discussion and peer learning.

*Please note the schedule for educational offerings are tentative and subject to change.*

<table>
<thead>
<tr>
<th>Educational Offering Title</th>
<th>Learning Objectives</th>
<th>*Month</th>
</tr>
</thead>
</table>
| Building Your Rapid Response Team: Considerations for In-Person and Remote Team Composition and Activation | By the end of the session, participants will be able to:  
  • Identify key in-person and/or remote members of a rapid response team  
  • Describe how to implement structures and processes for activating the rapid response team  
  • List at least 3 team communication best practices for rapid response teams | March 2023 |
| Simulations For OB Readiness in Non-OB Settings + Strategies for Remote Drills and Simulations | By the end of the session, participants will be able to:  
  • Describe the importance and value of conducting OB-related simulations and drills with ED professionals  
  • Identify at least 3 suggested obstetric emergency trainings and drills to implement with ED professionals  
  • Describe strategies for virtual or remote drills and simulations | April 2023 |
| Standardized Screening for Current or Recent Pregnancy in the ED: Implementation Strategies and Lessons Learned | By the end of the session, participants will be able to:  
  • Describe the importance and rationale for screening for current pregnancy and recent pregnancy within one year in ED settings | April 2023 |
<table>
<thead>
<tr>
<th>Session Title</th>
<th>Objectives</th>
<th>Month</th>
</tr>
</thead>
</table>
| Innovations in Technology Assisted Care                   | • Describe strategies for implementing standardized screening for current and recent pregnancy within one year in ED settings  
  • Identify at least 2 resources to use in ED settings to communicate urgent maternal warning signs to ED professionals and patients | May 2023 |
| Responding to Hypertensive Obstetric Emergencies in Non-Obstetric Settings | By the end of the session, participants will be able to:  
• Identify best practices in utilization of remote care and consultation pathways to address obstetric emergencies in non-obstetric settings  
• Name at least 3 potential remote and consultation pathways | June 2023 |
| Safe Transfer: Key Considerations and Best Practices      | By the end of the session, participants will be able to:  
• Describe key considerations for selecting modes of patient transport | June 2023 |
| Debriefing and Learning After Drills and Simulations | By the end of the session, participants will be able to:  
- Describe best practices for building relationships with regional systems of care  
- Describe best practices in preparing for, initiating, and communicating transports of obstetric patients to higher levels of care | July 2023 |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| Debriefs and Systems Improvement After an Obstetric Emergency | By the end of the session, participants will be able to:  
- Describe the value of debriefing after drills and simulations  
- Identify key elements of a debrief for drills and simulations  
- Describe strategies for using lessons learned from drills and simulations to inform follow-up skills building activities and system improvements | August 2023 |
Frequently Asked Questions

Registration & Logistics Questions

**Who in my state, jurisdiction, or hospital should attend the Obstetric Emergency Readiness COL?**

Anyone on your state, jurisdiction, hospital, Indian Health Service or tribal maternal health team may attend the Obstetric Emergency Readiness COL.

As this community of learning will provide best practices on how to recognize and respond to emergency conditions in pregnant and postpartum people, and was designed for emergency room healthcare professionals, quality improvement coordinators, and hospital leadership, we **highly recommend that staff who operate in this capacity attend this COL.**

**Will the educational offerings be recorded?**

AIM plans to record all presentations associated with educational offerings and make them widely available. AIM does not plan to record peer learning, group activities, and other individualized technical assistance associated with each educational offering.

**Will there be CEUs, or CMEs associated with the educational offerings?**

AIM is currently unable to offer CEUs, CMEs, or other continuing education credits for its webinars, Communities of Learning, and other recorded content.

**How many hours a month should I anticipate spending on the Obstetric Emergency Readiness COL?**

<table>
<thead>
<tr>
<th>Monthly Time Commitment</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Offering</td>
<td>As Desired, ~ 90 mins</td>
</tr>
<tr>
<td></td>
<td>• Expert Presentations</td>
</tr>
<tr>
<td></td>
<td>• Participate in the group/peer learning activities</td>
</tr>
</tbody>
</table>
Supplemental Funding Questions

**Who is eligible to receive supplemental funding for obstetric emergency related projects?**

State and jurisdiction teams with an executed subaward agreement with ACOG may apply for supplemental funding for obstetric emergency readiness related projects.

Supplemental funding for obstetric emergency readiness projects can be submitted via a project narrative through AIM’s [Supplemental Funding Form](#).

**Who will receive supplemental funding in my state or jurisdiction, if awarded?**

If your state or jurisdiction is awarded supplemental funding, your state or entity’s designated fiduciary body from your executed subaward agreement with ACOG will receive the funds.
2023 AIM Obstetric Emergency Readiness Community of Learning

This registration form takes less than 10 minutes to complete.

In response to the rise of maternity care deserts in the United States and more limited access to clinicians specializing in obstetrics in rural communities, AIM is developing an Obstetric Emergency Readiness Community of Learning to share best practices and resources to prepare for recognition and response to obstetric emergencies in Emergency Departments and lower-resourced inpatient obstetric care settings, with a regional focus on rural settings. AIM is hosting 8 monthly educational offerings in 2023 focused on supporting peer learning around obstetric emergency readiness.

Answer each question to the best of your ability regardless of your role.

Click the green arrow to advance the survey.

Q1 What is your full name?

Q2 What is your (work) email address?
Q3 Please identify your **collaborative state, jurisdiction, or other geographic area:**

- Alabama (1) ... AIM/ACOG Partner Organization (58)

---

Q4 Which do you **best** represent?

- State/Jurisdiction/PQC Staff (2)
- Hospital/Facility/Clinic Staff (5)
- Other (specify) (4) __________________________________________________

---

End of Block: Participant Information

---

Start of Block: State/Jurisdiction

**Display This Question:**

*If Which do you best represent? = State/Jurisdiction/PQC Staff*

---

Q5

Which projects or organizations are you affiliated with in your state or jurisdiction?

*Select all that apply*

- Alliance for Innovation on Maternal Health (1)
- Perinatal Quality Collaborative (2)
- Maternal Health Innovation Award (3)
- Department of Health (4)
- Hospital Association (5)
- Other (Specify) (6) __________________________________________________
Q6 What is your role related to AIM?

*Select all that apply*

- [ ] Lead Coordinator (1)
- [ ] Co-Lead Coordinator (2)
- [ ] Data Coordinator (3)
- [ ] Clinical Coordinator (4)
- [ ] Other (Specify) (5)

Q7 How experienced is your PQC/AIM team engaging inpatient settings that do not provide obstetric care to prepare for recognition and response to obstetric emergencies?

- [ ] Experienced (1)
- [ ] Somewhat experienced (2)
- [ ] Neither experienced or inexperienced (3)
- [ ] Somewhat inexperienced (4)
- [ ] Very much inexperienced (5)
Q8 (Optional) How has your PQC/AIM team addressed challenges and opportunities for rural obstetric care in your state or jurisdiction?

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

End of Block: State/Jurisdiction

Start of Block: Facility/Hospital/Clinic

Display This Question:

If Which do you best represent? = Hospital/Facility/Clinic Staff
And Which do you best represent? Text Response Is Not Empty

Q9 Which best represents your hospital, facility, or clinic?

○ We are a hospital or facility without obstetric services (1)

○ We are a hospital or facility with obstetric services (2)

○ We are an Indian Health Service hospital, facility, or clinic (3)

○ We are a Tribal hospital, facility, or clinic (4)

○ We are an outpatient setting that formally provides prenatal and/or postpartum care (5)

○ We are an outpatient setting that does not formally provide prenatal and/or postpartum care (6)

○ Other (Specify) (7) __________________________________________________

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
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________________________________________________________________

10
Q10 Which best describes your role at your hospital, facility, or clinic?

- OBGYN (1)
- Perinatal, L&D, or Postpartum Nurse (2)
- Nurse Midwife or Advanced Practice Nurse (3)
- Family Physician (4)
- Physician Associate (6)
- ED Physician (9)
- ED Nurse (10)
- Quality & Safety Staff (11)
- Administrative Staff (14)
- Other (Specify) (12) ________________________________________________

Q11 What is your role in relation to obstetric emergency readiness at your institution?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Q12
(Optional) What are your highest priority materials and resources needed to prepare for recognition and response to obstetric emergencies at your institution at this time?

*This may include policies, procedures, equipment, trainings, personnel, etc.*

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

End of Block: Facility/Hospital/Clinic

Start of Block: All

Q13
(Optional) Please tell us a little more about your interests in obstetric emergency readiness.

*We may share de-identified descriptions with presenters to help them better understand their audience and tailor educational content to your needs.*

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

End of Block: All