AIM

ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

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Hospital Data Administration Guide

Version 2.0

November 2022

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Introduction

Welcome to AIM! The AIM team is excited to work with your state or jurisdiction team to set up a smooth data collection and submission process for contributing data to AIM and using the AIM Data Center to monitor bundle implementation and impact.

This document is designed for Hospital/Facility Teams to use as an introduction to and reference document for the AIM Data Center, its administrative uses and its function as a quality improvement and data reporting tool.

AIM User Functions and View Options

AIM Data Center functions and view options vary depending on your user role. This table outlines the various user roles available in the AIM Data Center, functions these uses have and what specific users can view in the portal.

User Role	User Function(s)	View Option(s)
National Administrators	Invite other national and statewide users.	• All states are identifiable, but **individual hospitals are deidentified**. • State- and hospital-level percentages of process and outcome measures. • State- and hospital-level structure measure completion statuses. • Submission status by state and deidentified hospital. • Hospital-level PDF reports by bundle, measure, and comparison type. • Transfusion coding and hospital outliers by measure.
State Administrators	• Invite other state- and hospital-level users for their state. • Add/delete and manage hospitals in their state, which includes updating hospital demographics and assigning bundles. • Submit state outcome measures. • Submit and/or edit hospital-level process and structure measures.	• **Identifiable** hospital information for their state, including demographics files and hospital-level data. • Collaborative-level percentages and averages of other AIM states. • State- and hospital-level percentages of process and outcome measures. • State- and hospital-level structure measure completion statuses. • Submission status by state and hospital. • Hospital-level PDF reports by bundle, measure, and comparison type. • Transfusion coding and hospital outliers by measure.
State Administrators – Read-Only	Read only users cannot manage users or enter data.	• **Identifiable** hospital information for their state only, including demographics files and hospital-level data.

User Role	User Function(s)	View Option(s)
		• Collaborative-level percentages and averages of other AIM states. • State- and hospital-level percentages of process and outcome measures. • State- and hospital-level structure measure completion. • Submission status by state and hospital. • Hospital-level PDF reports by bundle, measure, and comparison type. • Transfusion coding and hospital outliers by measure.
Hospital Administrators	• Add hospital-level users. • Submit hospital structure and process data.	• Outcome and process measure results for the individual hospital **only**. • Collaborative-wide outcome and process measure results for comparison. • Outcome and process measure results for **deidentified** hospitals of similar volume for comparison (if applicable).
Hospital Administrators – Read-Only	Read only users cannot manage users or enter data.	• Outcome and process measure results for the individual hospital **only**. • Collaborative-wide outcome and process measure results for comparison. • Outcome and process measure results for **deidentified** hospitals of similar volume for comparison (if applicable).

Note on Deidentified Hospitals

Only state-level administrators have access to data connected to identifiable hospitals in their state. National administrators may only view deidentified hospitals masked via Greek letter names, and hospital administrators may only view their own hospital-level data and data aggregated to the state-level.

However, national administrators **can** view certain hospital-level information, such as the birthing volume of deidentified hospitals, their urbanicity, and their NICU level.

AIM Data Center Enrollment and Logging on for the First Time

Before being invited to the AIM Data Center, AIM requires the following from enrolled states and jurisdictions:

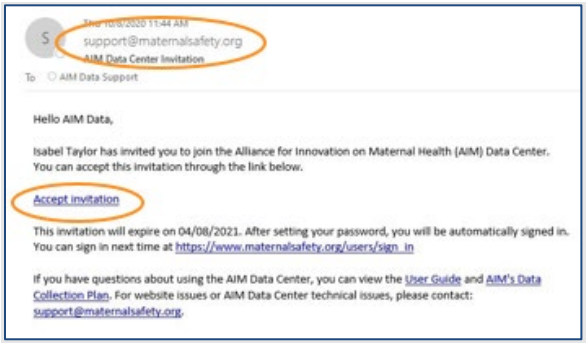
1. A fully executed subaward or participation agreement, including data use agreement, with the American College of Obstetricians and Gynecologists
2. Birthing facilities recruited to participate in AIM patient safety bundle implementation with your state or jurisdiction, which may include establishing data use agreements so their data can be shared with AIM
3. A hospital demographics file containing metadata on recruited birthing facilities
4. Additional patient safety bundle information for AIM Data Center dashboard configuration.

Note: Hospital Administrators will need to contact their primary AIM contact to initiate access to the AIM Data Center

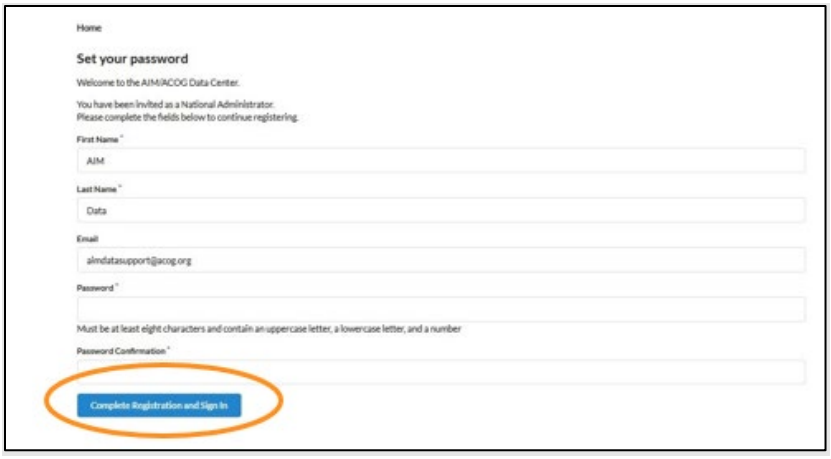
As AIM receives the above information from your state or jurisdiction team, the AIM Data Team will establish your state's dashboard in the Data Center. Your primary AIM contact will then invite hospital/facility-based users to the Data Center.

1. **Activate Your AIM Data Center Account**
    a. You will receive an email from **support@maternalsafety.org** with the subject line of "AIM Data Center Invitation."
2. **Click on the "Accept invitation" hyperlink to complete your registration in the AIM Data Center.**

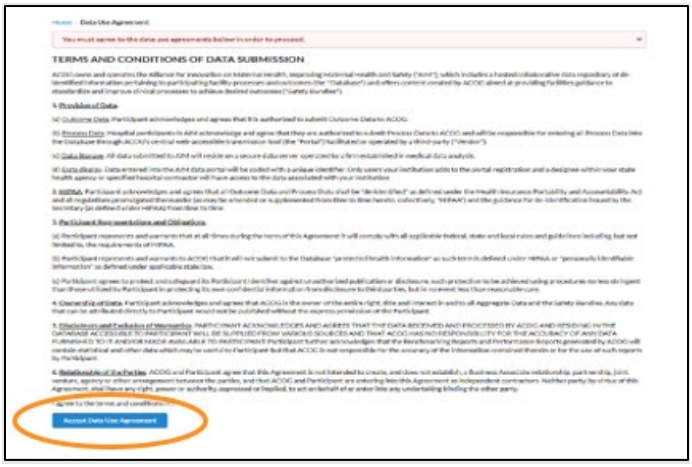
Please Note: This email is sometimes sent to Junk or Spam folders.



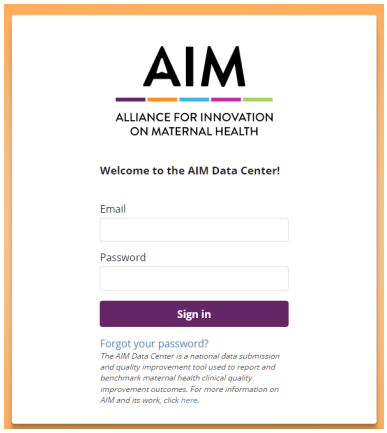
3. **Provide Account Information**
    a. On the registration page, you will be asked to enter your name, email, and password. Share these details and click "Complete Registration and Sign In."



4. **Review and Accept the Data Center's Data Use Agreement**
    a. Upon setting up your AIM Data Center account, you will be asked to review and accept the Data Center's data use agreement. This is the data use agreement found in your state or jurisdiction's subaward or participation agreement with ACOG. Once you click **"Accept Data Use Agreement,"** registration is now complete, and you have access to the Data Center.

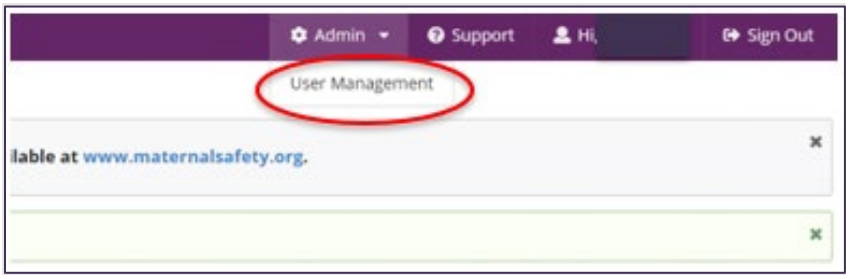


5. Sign In
    a. You may now Sign into the AIM Data Center and begin uploading data.

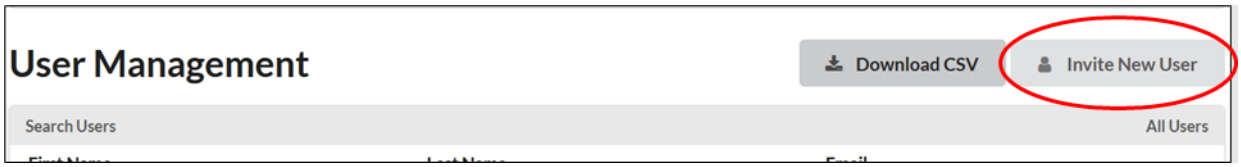


User Management

1. Under the Admin tab, click “User Management.”



2. **Click “Invite New User.”**



3. Enter their name and email and select the assigned role for each administrator being added:
    a. Hospital Administrator
    b. Hospital Read-only User (**Note:** Read-only users cannot invite new users or submit process and structure measures to the Data Center)

4. Click **“Send Invitation.”** The added user will receive an email to create their own account.
    a. **Please Note:** If the user does not receive the email within one (1) business day, please remind them to check their spam or junk folders.

Automated Data Reporting and Other Features

Data reporting and features vary based on a user's role in the AIM Data Center. National, state and hospital administrators have different viewing options due to their access to different types of data. These viewing options are described in the "AIM User Functions and View Options" section of this booklet.

This section provides an overview of the different viewing and automated data reporting features available in the AIM Data Center for hospital administrators that can be used for data analysis and reporting.

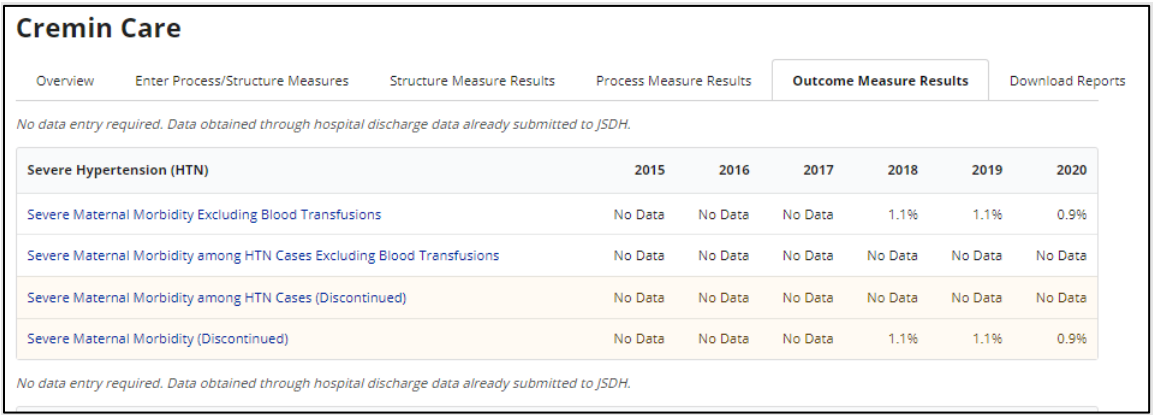
1. Dashboards

Use the Dashboards section of the AIM Data Center to view and compare specific measures by bundle, data completion, and data quality for individual hospitals as well as to compare metrics between hospitals in your collaborative. Information on specific dashboards and their features are displayed below.

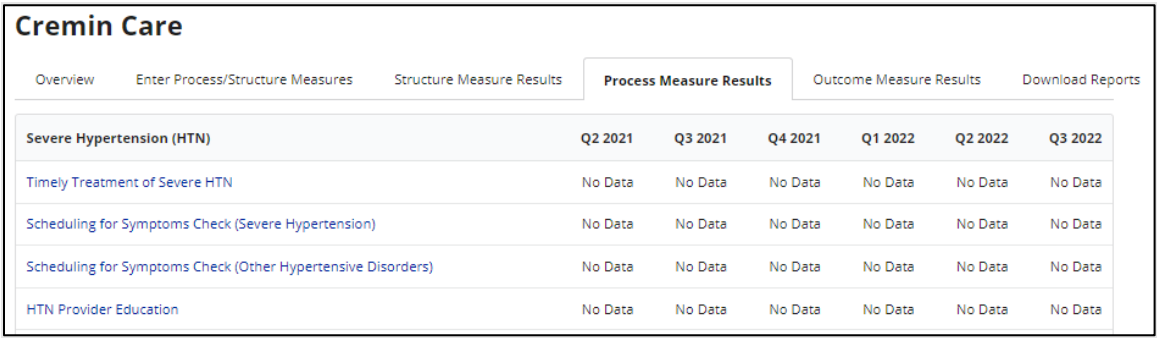
a. Facility At A Glance Dashboard

Outcome, Process and Structure Measures Tabs

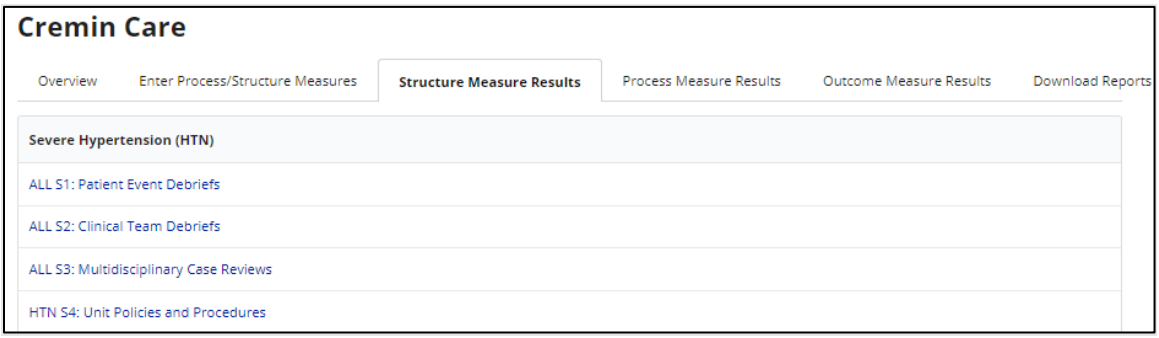
Each of these tabs in the Dashboards section is organized by bundle and measure. Initial views of these tabs show collaborative-wide percentages by year (outcome measures) or by quarter (process and structure measures).



Initial tab view: Outcome measures



Initial tab view: Process measures



Initial tab view: Structure measures

Click on specific metrics to view more detailed graphs and charts. The table below lists the types of graphs available to view, under which tab in the “Dashboards” section they are located and how these graphs may be customized.

Graph Type	Dashboard Tab	Customization Options
Comparison	Outcome Process	For process and outcome measures. • Color and group by delivery volume, NICU level, and urbanization level for comparisons. • View data by specific reporting periods or years. • Scroll down for a table reporting state-wide* and hospital-specific information.
Trendline	Outcome Process	For process and outcome measures. • View collaborative-wide trendline for a specific measure. • Choose to view by reporting period or year. • Click to hide or view percentiles.
Race-Based	Outcome	For outcome measures only. • View collaborative-wide rates by race, including numerators and denominators. • Compare data across years.
Outliers	Outcome	For outcome measures only. View outliers highlighted by hospital and reporting period.
Structure Measure Comparison	Structure	• View state-level completion of specific structure measures over time. • View date of completion overall and by specific hospital in a table.

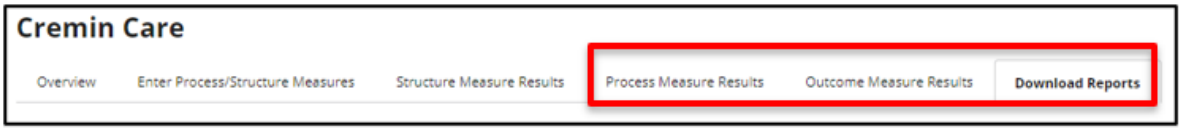
**State-wide information includes collaborative-wide rates, hospital averages, and state-wide rates for a given measure.*

A table listing the collaborative-wide rate, collaborative mean hospital rate, collaborative median hospital rate, number of hospitals contributing data to that graph and hospital-level percentages is also included underneath each graph in the "Outcome" and "Process" tabs.
A similar table is also included for each measure-specific graph in the "Structure" tab that includes the number of hospitals who completed this measure, the number of hospitals participating in AIM and contributing data to the AIM Data Center, the percent completion and a listing of all hospitals in the collaborative and their completion status.

Facility Data Reporting and Visualizations

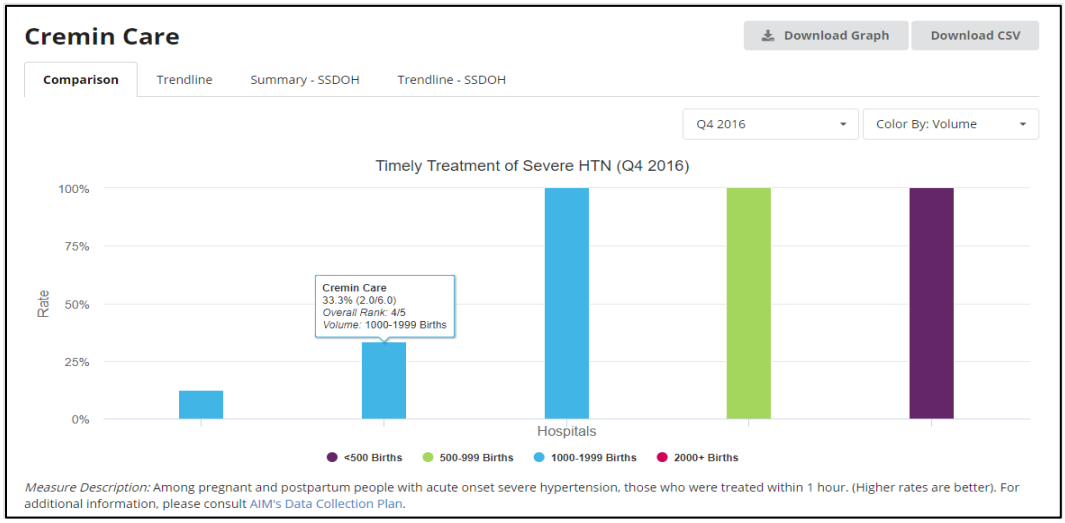
This section of the Data Center allows state and jurisdiction administrators to review hospital- and state or jurisdiction-level data reporting and visualization by patient safety bundle and measure type. User instructions are below.

Facilities may select Process Measure Results, Outcome Measure Results, or Download Reports to view all measure data summaries.



Facilities can compare against other deidentified facilities in their collaborative for a specific reporting period and based on different facility characteristics.

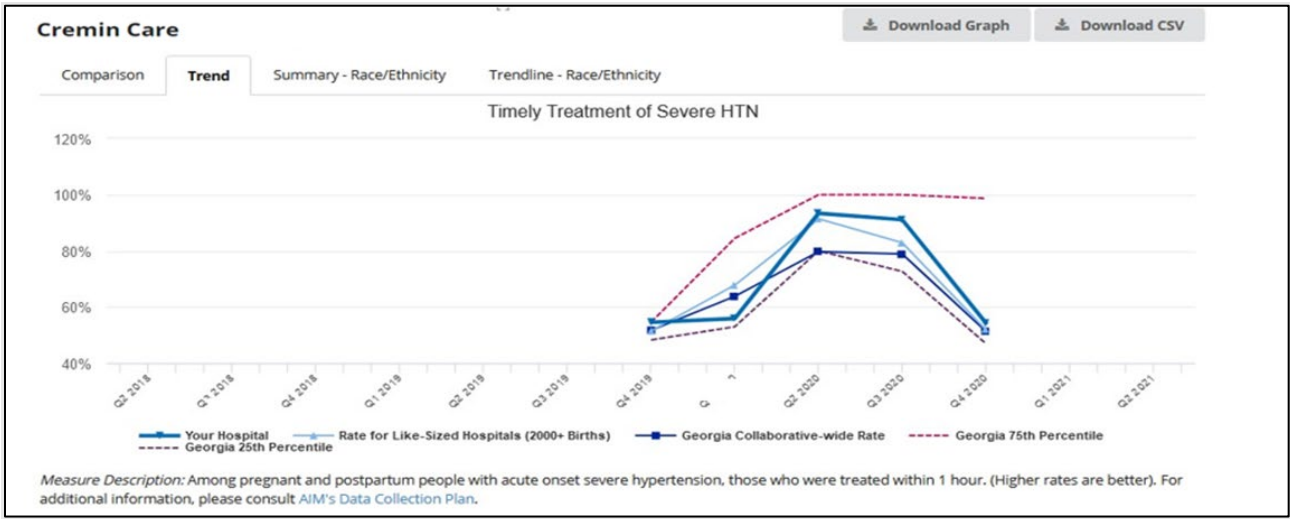
Comparison Graph



Facility administrators can benchmark against a collaborative-wide rate for processes and outcomes. Facility characteristics for comparisons include annual volume of delivery hospitalizations, rural vs urban facilities, AAP NICU level. In cases in which facility characteristics may make a facility potentially identifiable, state administrators can work with the AIM national team to mask certain characteristics' visualizations. Facilities can only view by one (1) facility characteristic – no user can drill down by multiple characteristics.

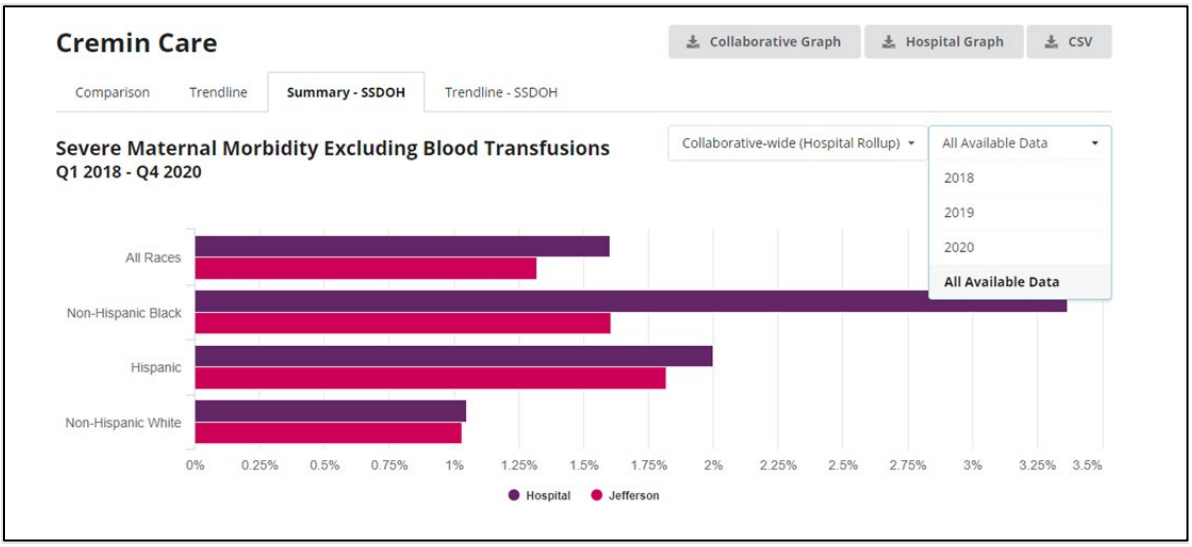
Facilities can compare against other deidentified facilities in their collaborative for a specific reporting period and based on different facility characteristics.

Measure Trendline



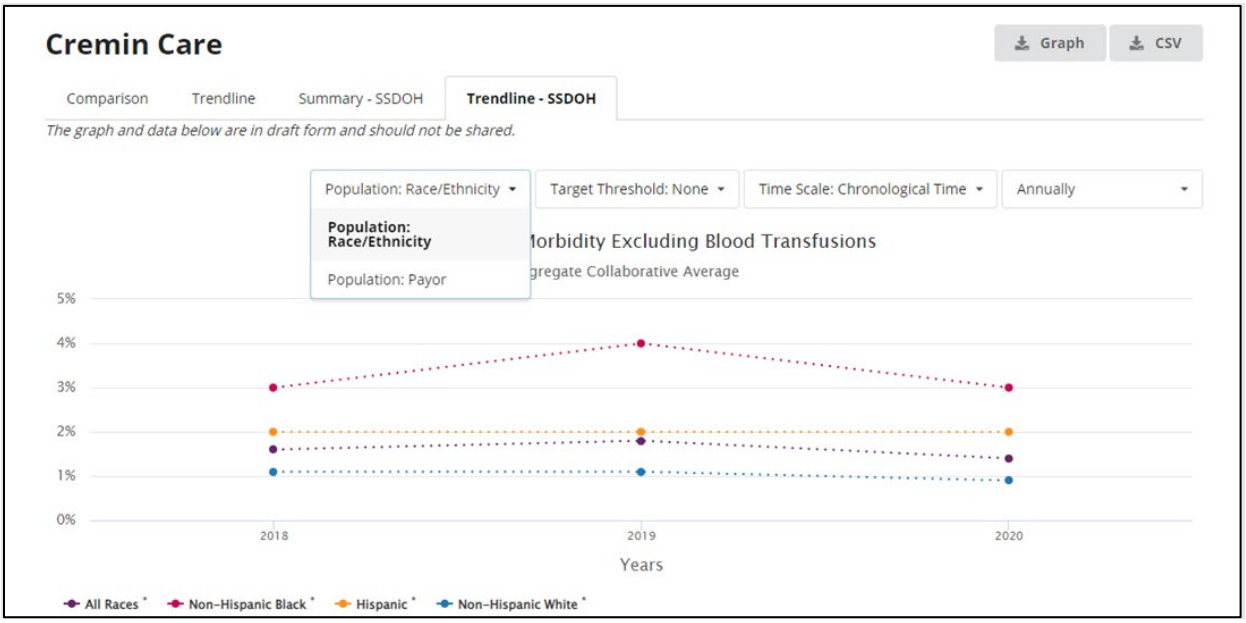
View your trendline against other facilities within the collaborative for a certain process or outcome measure. You can click on the trendline to view/hide certain lines (e.g., the 75th and 25th percentile lines).

SSDOH Comparison Graph



Facilities can benchmark their cumulative outcomes disaggregated by race and ethnicity against a collaborative-wide rate. The dropdown feature lets users choose to view cumulative data or data for a given time period.

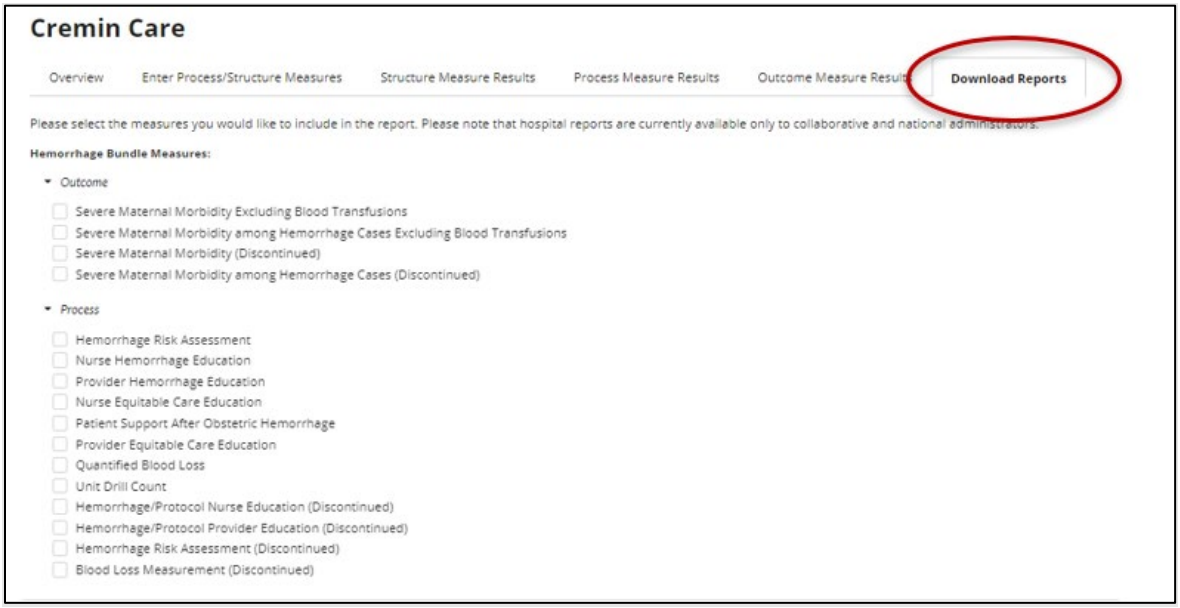
SSDOH Comparison Trendline

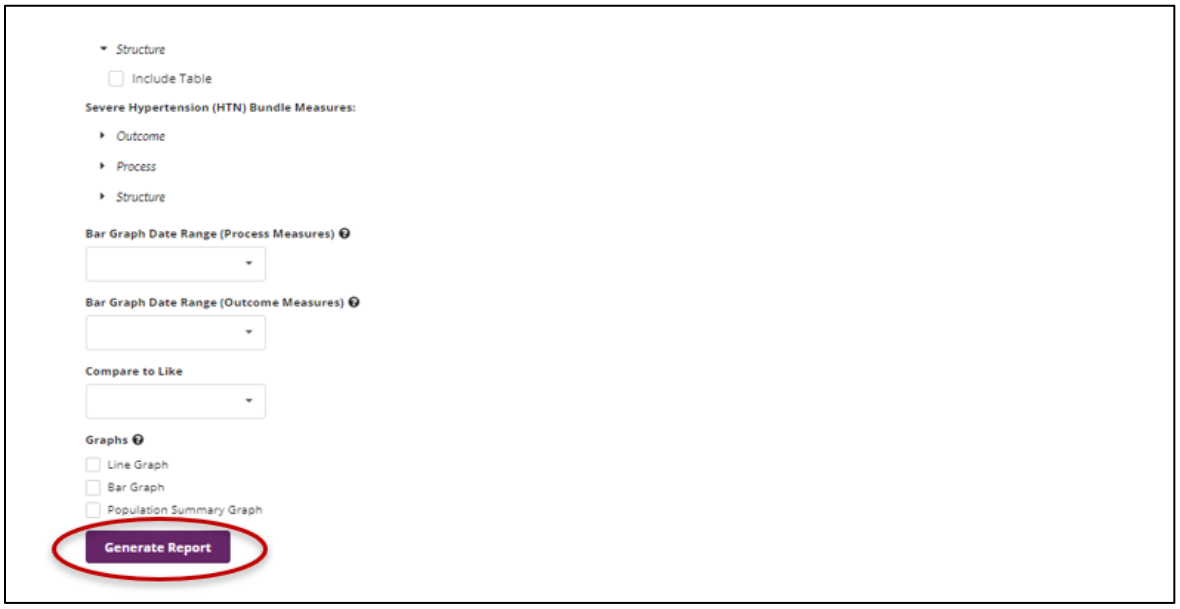


Facilities can also view collaborative-wide trendlines for measures disaggregated by race/ethnicity or payor. Facilities can also view collaborative trendlines for processes and outcomes disaggregated by race and ethnicity. Using the drop down, users can customize their visualization Users can also click the legend to hide and view certain R/E groups.

Downloadable PDF Reports

Facilities can download pdf reports containing visualizations found throughout the Data Center. Facilities may utilize the available checkboxes to select/deselect reportable measures and visualizations to further customize their PDF report. Facilities may also customize reporting date ranges.

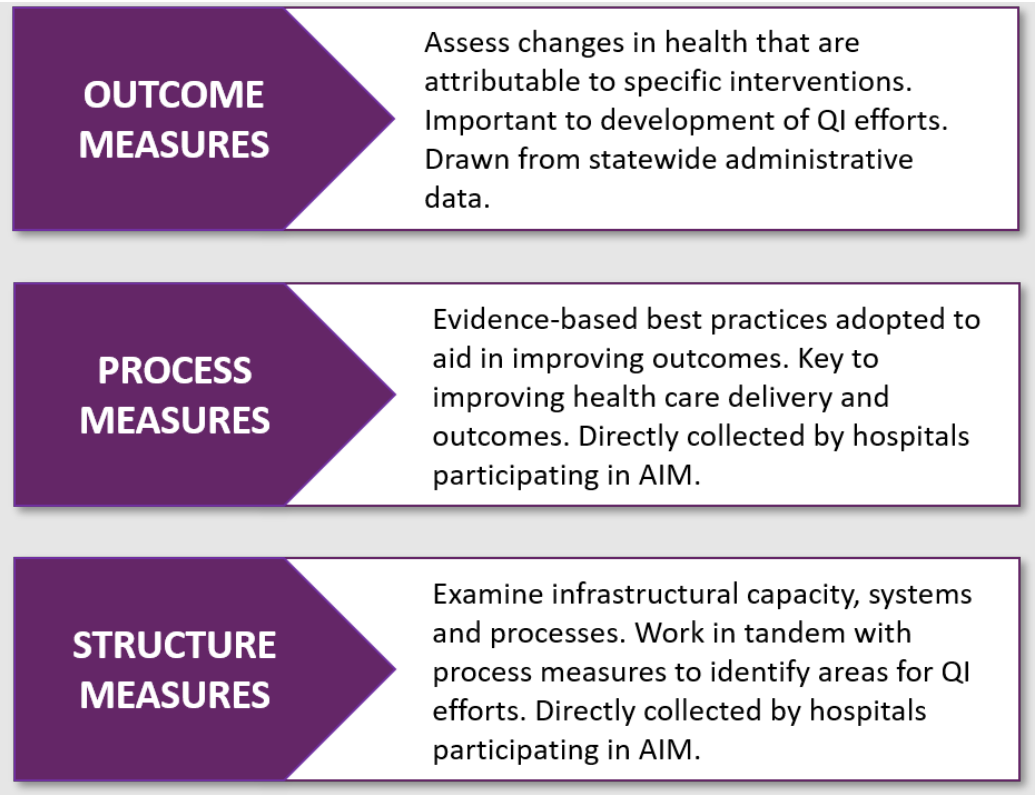




AIM Data Submission

This section of the Data Center allows state and jurisdiction administrators to submit hospital- and state or jurisdiction-level data. Use this section of Data Center to edit or add hospital-level structure and process measures data. State-based teams are responsible for calculating and reporting outcomes on behalf of participating facilities. Facility teams may report QI data directly to the AIM Data Center, or report QI data to a state-based team who upload the data to the AIM Data Center on the facility's behalf.

AIM Data Measure Types

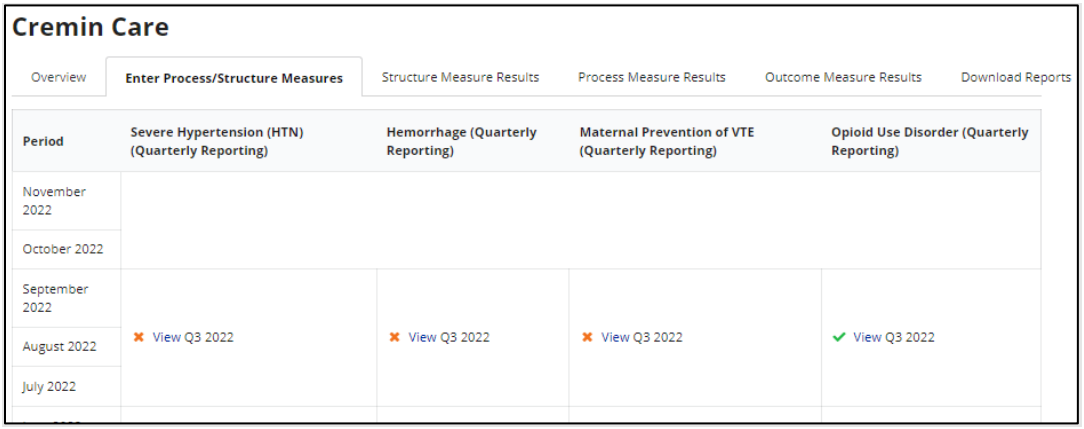


AIM Data Measure Examples

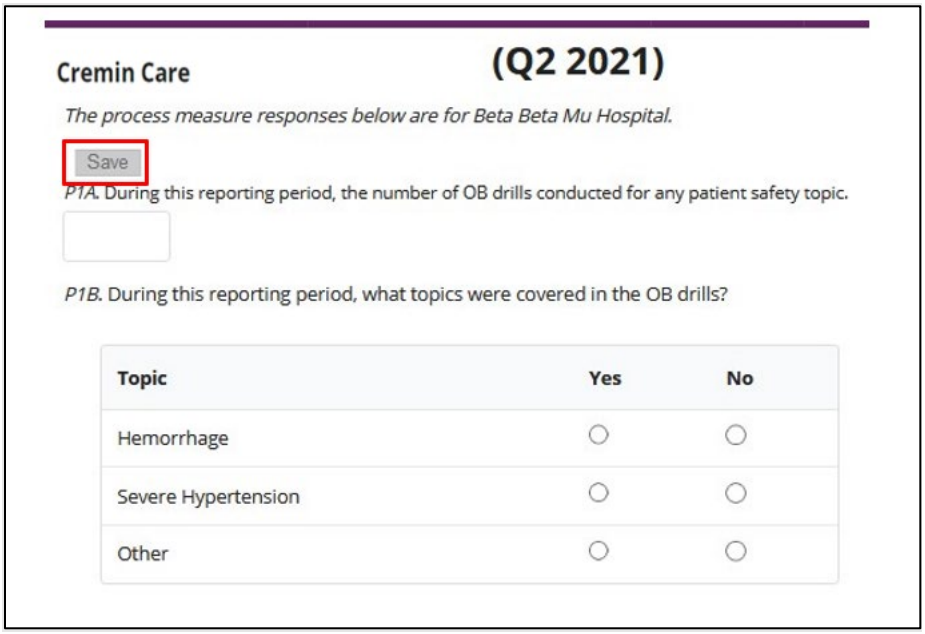
Measure	Example
Outcome	Severe maternal morbidity, NTSV Cesarean birth rate
Process	The rate of timely treatment of persistent severe hypertension
Structure	Whether a unit has a hemorrhage or crash cart

Facility Data Submission Directly to the AIM Data Center – Process Measures

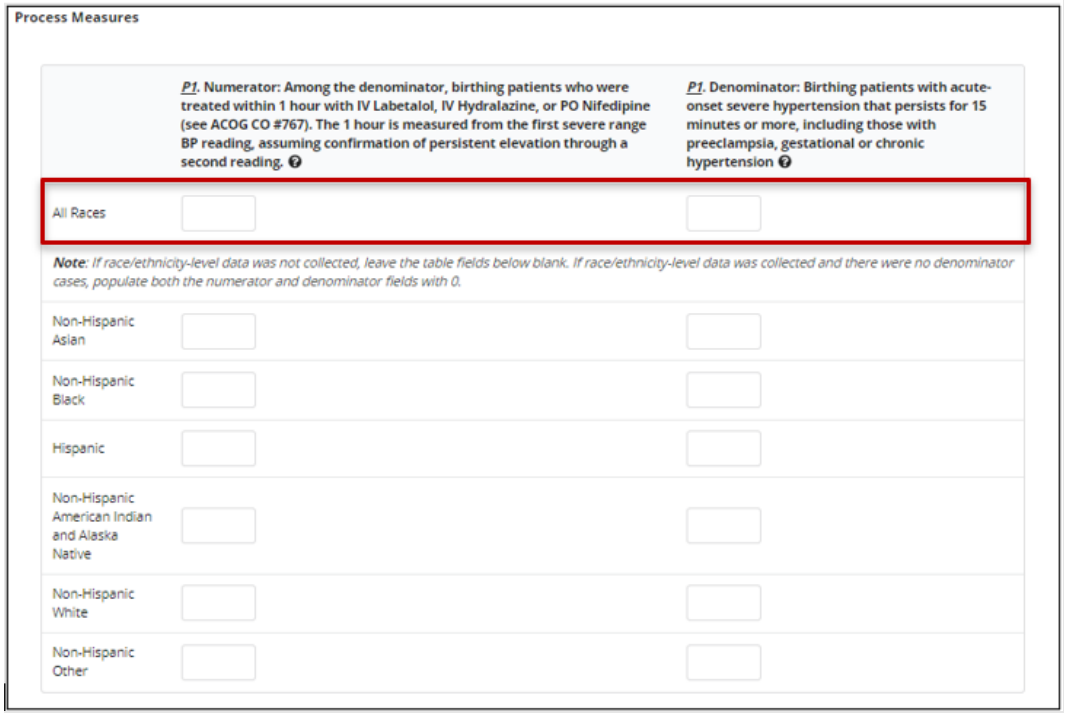
1. Facilities can navigate to the process/structure measures tab to submit process measures data for a given reporting period.



2. Following the prompts, facilities record process measure data for the given reporting period.



3. For process measures, facilities can report data disaggregated by race and ethnicity to monitor the impact of bundle implementation on reducing disparities over time.
    i. Facilities will need to report a total numerator and denominator in addition to disaggregated data.
    ii. State teams select on facilities' behalf for which racial and ethnic groups they should report process measures data.



Process Measures

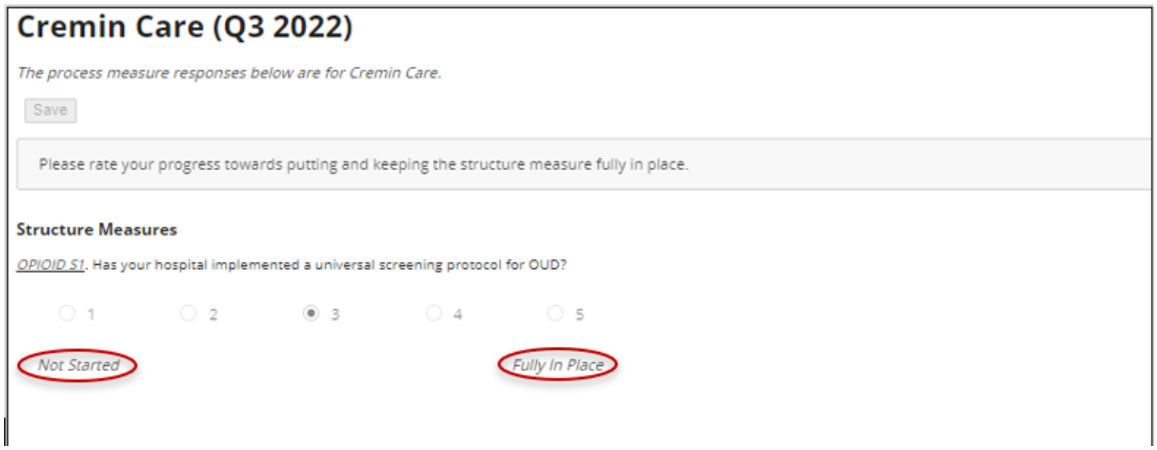
	P1. Numerator: Among the denominator, birthing patients who were treated within 1 hour with IV Labetalol, IV Hydralazine, or PO Nifedipine (see ACOG CO #767). The 1 hour is measured from the first severe range BP reading, assuming confirmation of persistent elevation through a second reading.	*P1*. Denominator: Birthing patients with acute-onset severe hypertension that persists for 15 minutes or more, including those with preeclampsia, gestational or chronic hypertension
All Races		

***Note**: If race/ethnicity-level data was not collected, leave the table fields below blank. If race/ethnicity-level data was collected and there were no denominator cases, populate both the numerator and denominator fields with 0.*

Non-Hispanic Asian		
Non-Hispanic Black		
Hispanic		
Non-Hispanic American Indian and Alaska Native		
Non-Hispanic White		
Non-Hispanic Other		

Note: For instances where there are no cases for the reporting period, please report a zero (0) for the denominator and a zero (0) for the numerator.

1. Navigate to the structure/process measures submission page.
2. Enter the dates in which each structure measure criteria were established for your hospital.
    a. If the structure measure has not yet been established, select 'Not Started.'



    b. Likert Scale
        i. AIM has developed a flexible 5-point Likert-like scale for structure measurement that ranges from 'Not Started' to 'Fully in Place'.

Not Started	1	2	3	4	5	Fully In Place

        ii. A value of **1** indicates that the team has not started working on putting the structure in place. Previously, the lack of a date or a "No" response did not differentiate between not having started working on a structure versus some other point along the way to having it fully in place.
        iii. A value of **5** (Fully in Place) aligns with current measures (i.e., Date or Yes) in terms of providing the information that the structure measure is in place. The simple labeling of the scale extremities can be universally applied to all structure measures.

Note: For more details regarding the Likert Scale, please refer to the Structure Measure Update and Transition Packet.

Appendix A: AIM Data Resources and Data Team Contacts

Quick Resource Links	
AIM Data Center	**www.maternalsafety.org**
AIM Data Center Log-In	**https://www.maternalsafety.org/users/sign_in**
AIM Data Center Demo Site	**https://demo.maternalsafety.org/** **Demo Site Hospital: Cremin Care** **Demo Site Email Logins for Hospital Data** **hospital_admin@example.com** **hospital_read_only@example.com** **Demo Site Password:** Abcd1234
AIM Data Center Resources Site	**https://saferbirth.org/aim-data/resources/**

AIM Data Team Contacts		
Contact	**When to Use**	**Access Method**
Primary AIM Contact	Please communicate with your primary AIM contact on general content questions as well as questions regarding: • AIM Data Collection Plans • Measure Specifications • Bundle Additions	If you do not have contact information for an AIM contact in your state or jurisdiction, please contact **aimdatasupport@acog.org** so we may facilitate the connection.
AIM Data Center Support	Technical issues or logistical questions regarding the AIM Data Center	**support@maternalsafety.org**
	For custom requests, inquires, support issues, adding patient safety bundles, updating hospital demo file.	**AIM Data Center Support Request Form**

If unsure of which email to use, please direct questions to aimdatasupport@acog.org.