



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 users 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 <u>individual hospitals are deidentified</u>. - 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.	<u>Identifiable</u> 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.	<u>Identifiable</u> 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 <u>only</u>. • Collaborative-wide outcome and process measure results for comparison. • Outcome and process measure results for <u>deidentified</u> 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 <u>only</u>. • Collaborative-wide outcome and process measure results for comparison. • Outcome and process measure results for <u>deidentified</u> 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

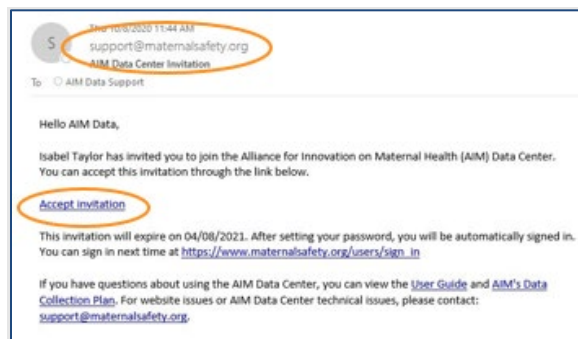
As AIM receives the above information from your state or jurisdiction team, the AIM Data Team will establish your state's dashboard in the Data Center. Your primary AIM contact will then invite hospital/facility-based users to the Data Center.

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."

Home

Set your password

Welcome to the AIM/ACOG Data Center.

You have been invited as a National Administrator.
Please complete the fields below to continue registering.

First Name *

AIM

Last Name *

Data

Email

aimdatasupport@acog.org

Password *

Must be at least eight characters and contain an uppercase letter, a lowercase letter, and a number

Password Confirmation *

[Complete Registration and Sign In](#)

4. Review and Accept the Data Center's Data Use Agreement

- 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.

Home Data Use Agreement

You must agree to the state use agreements below in order to proceed.

TERMS AND CONDITIONS OF DATA SUBMISSION

ACOG serves and supports the efforts that hospitals and health systems, including national health and safety (NHS), which includes a trusted collaborative data repository of de-identified information pertaining to participating facility processes and outcomes (the "Database") and offers content created by ACOG aimed at providing facilities guidance to monitor and improve critical processes to achieve desired outcomes ("Safety Toolkit").

1. Database Data

(a) Outcome Data. Participant acknowledges and agrees that it is authorized to submit Outcome Data to ACOG.

(b) Process Data. Hospital participants in AIM acknowledge and agree that they are authorized to submit Process Data to ACOG and will be responsible for entering all Process Data into the Database through ACOG's central web-accessible submission tool (the "Tool") facilitated or operated by a third party ("Vendor").

(c) Data Security. All data submitted to AIM will reside on a secure data center operated by a third-party vendor.

(d) Data Storage. Data entered into the AIM data center will be subject to a unique identifier. Only users with institution-wide or a designated user within your state health agency or specified hospital contract will have access to the data associated with your institution.

(e) Access. Participant acknowledges and agrees that all Outcome Data and Process Data will be "de-identified" as defined under the Health Insurance Portability and Accountability Act and all regulations promulgated thereunder (as may be amended or supplemented from time to time hereinafter, collectively, "HIPAA") and the guidance for de-identification issued by the Secretary for de-identified data pursuant to HIPAA.

2. Participant Representations and Warranties

(a) Participant represents and warrants that at all times during the term of this Agreement it will comply with all applicable federal, state and local rules and guidelines including but not limited to, the requirements of HIPAA.

(b) Participant represents and warrants to ACOG that it will not submit to the Database "sensitive health information" as such term is defined under HIPAA or "genetically identifiable information" as defined under applicable state law.

(c) Participant agrees to provide and support to Participant's facilities agreed-upon and published publications or disclosures, such as action to be addressed using its data, no less than that provided by Participant in providing its own confidential information or disclosure to third parties, but in no event, less than reasonable care.

3. Ownership of Data

Participant acknowledges and agrees that ACOG is the owner of the de-identified and anonymized data and all aggregate data and the Safety Toolkit. Any data that can be attributed directly to Participant would not be included without the express permission of the Participant.

4. Distribution and Use of Information

Participant acknowledges and agrees that the data received and processed by ACOG and provided to the Database is for research purposes only and is not to be used for any other purpose. Participant further acknowledges that the de-identified data and information generated by ACOG will contain statistical and other data which may be useful to the Participant but that ACOG is not responsible for the accuracy of the information contained therein or for the use of such reports by the Participant.

5. Relationship of the Parties

ACOG and Participant agree that this Agreement is not intended to create, and does not establish, a business associate relationship, partnership, joint venture, agency or other arrangement between the parties, and that ACOG and Participant are entering this Agreement as independent contractors. Neither party is a party to this Agreement, and neither party, in whole or in part, is acting as an agent or representative of the other party.

Agree to the terms and conditions.

[Accept Data Use Agreement](#)

5. Sign In

- You may now Sign into the AIM Data Center and begin uploading data.

AIM

ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

Welcome to the AIM Data Center!

Email

Password

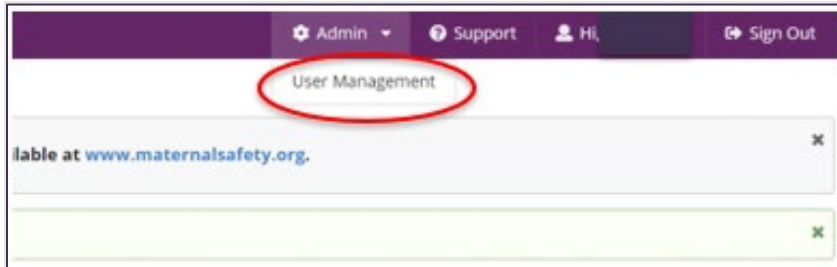
[Sign in](#)

Forgot your password?

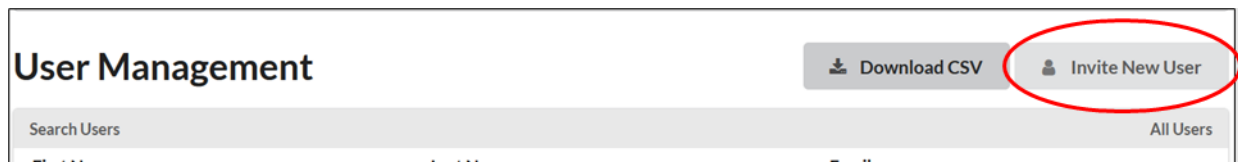
The AIM Data Center is a national data submission and quality improvement tool used to report and benchmark maternal health clinical quality improvement outcomes. For more information on AIM and its work, click [here](#).

User Management

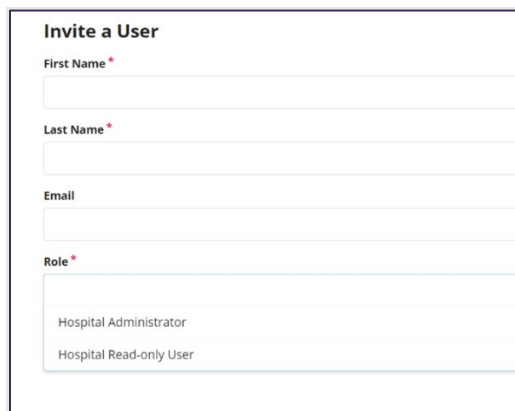
1. Under the Admin tab, click "User Management."



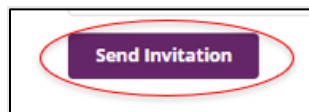
2. Click "Invite New User."



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)

A form titled 'Invite a User'. It contains four input fields: 'First Name', 'Last Name', 'Email', and 'Role'. The 'Role' field is a dropdown menu with two options: 'Hospital Administrator' and 'Hospital Read-only User'. The form is enclosed in a light grey border.

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

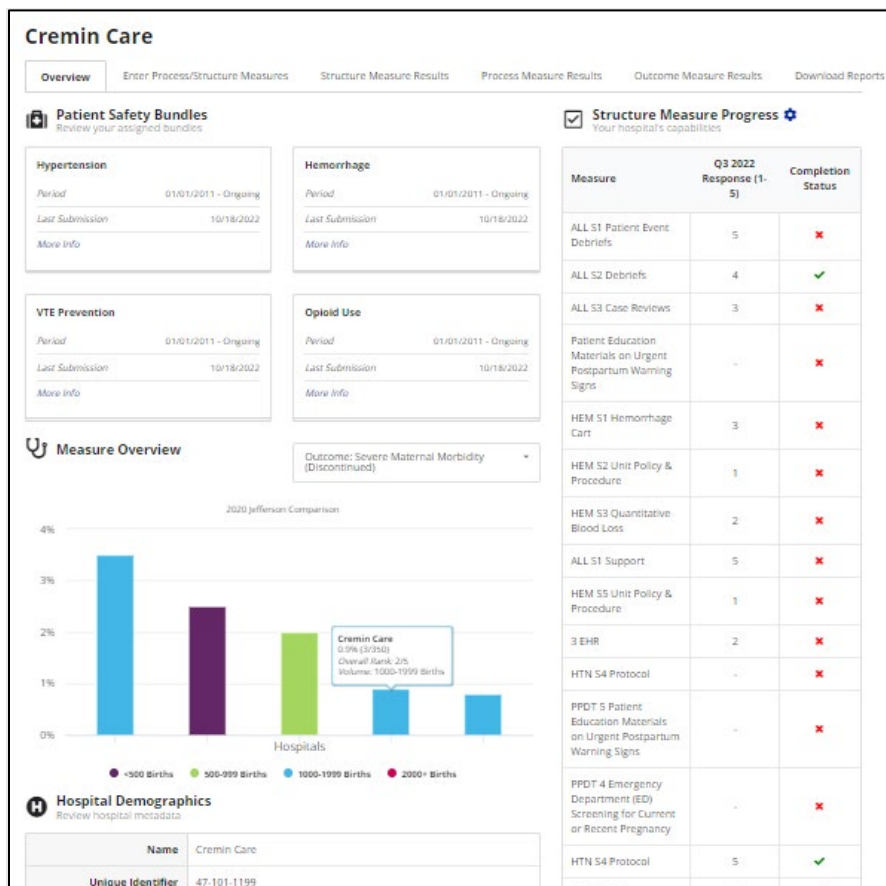
Data reporting and features vary based on a user's role in the AIM Data Center. National, state and hospital administrators have different viewing options due to their access to different types of data. These viewing options are described in the "AIM User Functions and View Options" section of this booklet.

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).

Cremin Care

Overview

Enter Process/Structure Measures

Structure Measure Results

Process Measure Results

Outcome Measure Results

Download Reports

No data entry required. Data obtained through hospital discharge data already submitted to JSDH.

Severe Hypertension (HTN)	2015	2016	2017	2018	2019	2020
Severe Maternal Morbidity Excluding Blood Transfusions	No Data	No Data	No Data	1.1%	1.1%	0.9%
Severe Maternal Morbidity among HTN Cases Excluding Blood Transfusions	No Data	No Data	No Data	No Data	No Data	No Data
Severe Maternal Morbidity among HTN Cases (Discontinued)	No Data	No Data	No Data	No Data	No Data	No Data
Severe Maternal Morbidity (Discontinued)	No Data	No Data	No Data	1.1%	1.1%	0.9%

No data entry required. Data obtained through hospital discharge data already submitted to JSDH.

Initial tab view: Outcome measures

Cremin Care						
Overview	Enter Process/Structure Measures	Structure Measure Results	Process Measure Results	Outcome Measure Results	Download Reports	
Severe Hypertension (HTN)	Q2 2021	Q3 2021	Q4 2021	Q1 2022	Q2 2022	Q3 2022
Timely Treatment of Severe HTN	No Data	No Data	No Data	No Data	No Data	No Data
Scheduling for Symptoms Check (Severe Hypertension)	No Data	No Data	No Data	No Data	No Data	No Data
Scheduling for Symptoms Check (Other Hypertensive Disorders)	No Data	No Data	No Data	No Data	No Data	No Data
HTN Provider Education	No Data	No Data	No Data	No Data	No Data	No Data

Initial tab view: Process measures

Cremin Care

Overview

Enter Process/Structure Measures

Structure Measure Results

Process Measure Results

Outcome Measure Results

Download Reports

Severe Hypertension (HTN)

ALL S1: Patient Event Debriefs

ALL S2: Clinical Team Debriefs

ALL S3: Multidisciplinary Case Reviews

HTN S4: Unit Policies and Procedures

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.

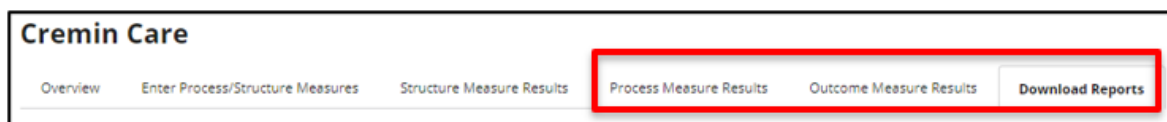
A table listing the collaborative-wide rate, collaborative mean hospital rate, collaborative median hospital rate, number of hospitals contributing data to that graph and hospital-level percentages is also included underneath each graph in the “Outcome” and “Process” tabs.

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

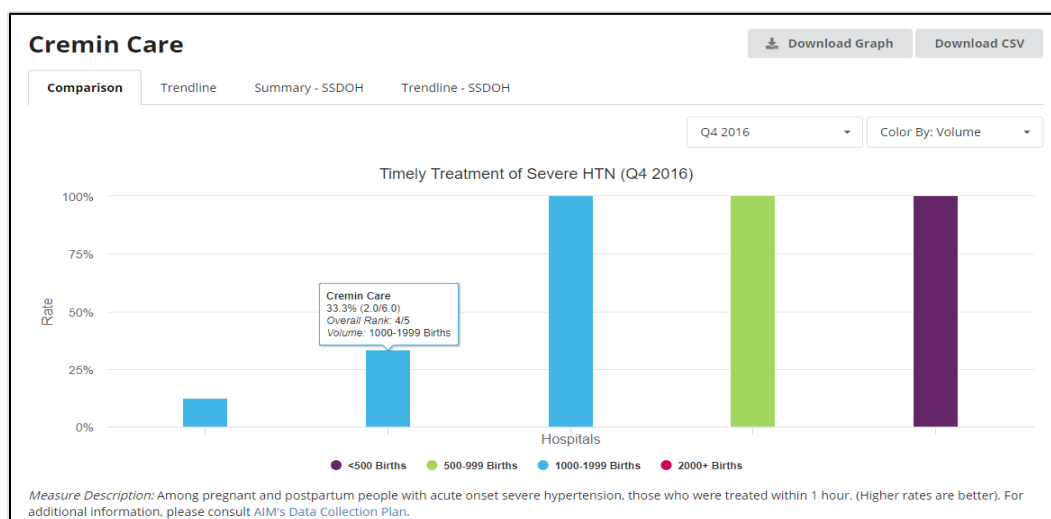
This section of the Data Center allows state and jurisdiction administrators to review hospital- and state or jurisdiction-level data reporting and visualization by patient safety bundle and measure type. User instructions are below.

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.

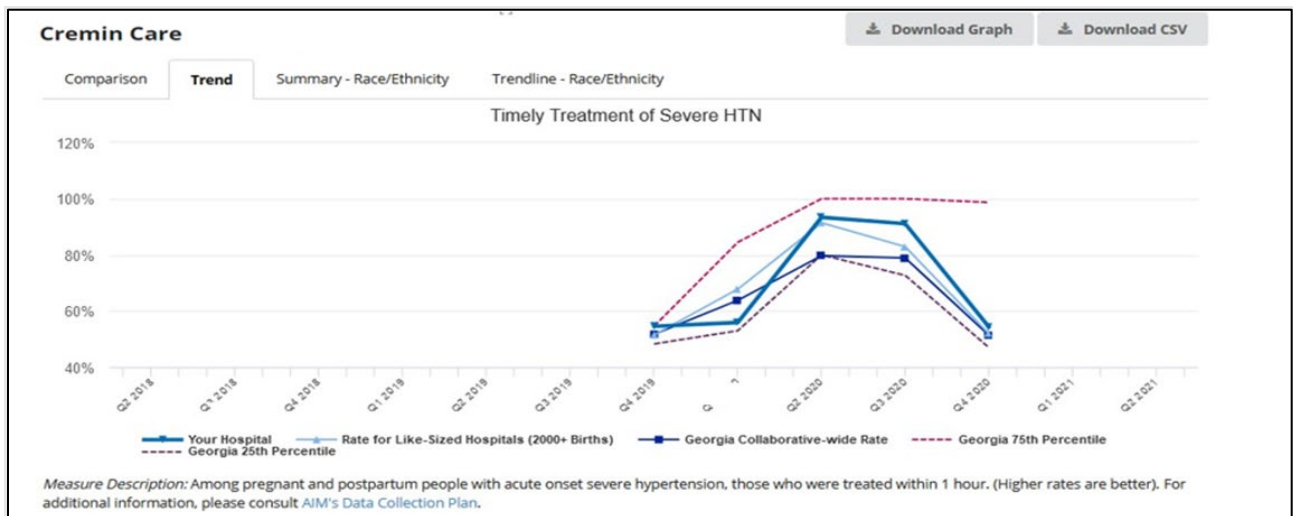
Comparison Graph



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.

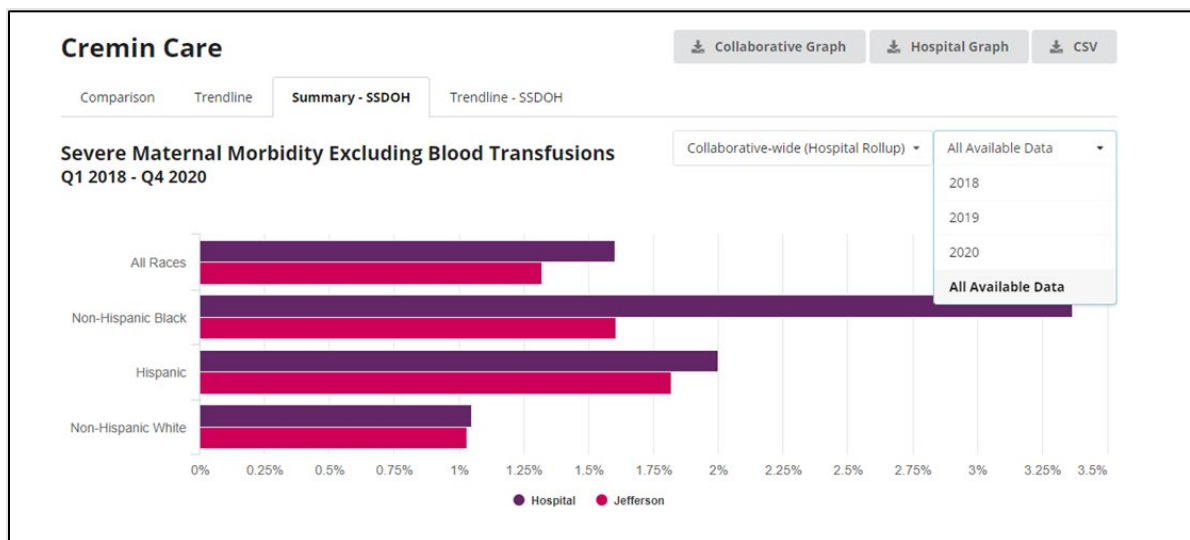
Facilities can compare against other deidentified facilities in their collaborative for a specific reporting period and based on different facility characteristics.

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.

Cremin Care

Overview Enter Process/Structure Measures Structure Measure Results Process Measure Results Outcome Measure Results **Download Reports**

Please select the measures you would like to include in the report. Please note that hospital reports are currently available only to collaborative and national administrators.

Hemorrhage Bundle Measures:

- ▼ Outcome
 - ☐ Severe Maternal Morbidity Excluding Blood Transfusions
 - ☐ Severe Maternal Morbidity among Hemorrhage Cases Excluding Blood Transfusions
 - ☐ Severe Maternal Morbidity (Discontinued)
 - ☐ Severe Maternal Morbidity among Hemorrhage Cases (Discontinued)
- ▼ Process
 - ☐ Hemorrhage Risk Assessment
 - ☐ Nurse Hemorrhage Education
 - ☐ Provider Hemorrhage Education
 - ☐ Nurse Equitable Care Education
 - ☐ Patient Support After Obstetric Hemorrhage
 - ☐ Provider Equitable Care Education
 - ☐ Quantified Blood Loss
 - ☐ Unit Drill Count
 - ☐ Hemorrhage/Protocol Nurse Education (Discontinued)
 - ☐ Hemorrhage/Protocol Provider Education (Discontinued)
 - ☐ Hemorrhage Risk Assessment (Discontinued)
 - ☐ Blood Loss Measurement (Discontinued)

▼ Structure

- ☐ Include Table

Severe Hypertension (HTN) Bundle Measures:

- Outcome
- Process
- Structure

Bar Graph Date Range (Process Measures) ⓘ

Bar Graph Date Range (Outcome Measures) ⓘ

Compare to Like

Graphs ⓘ

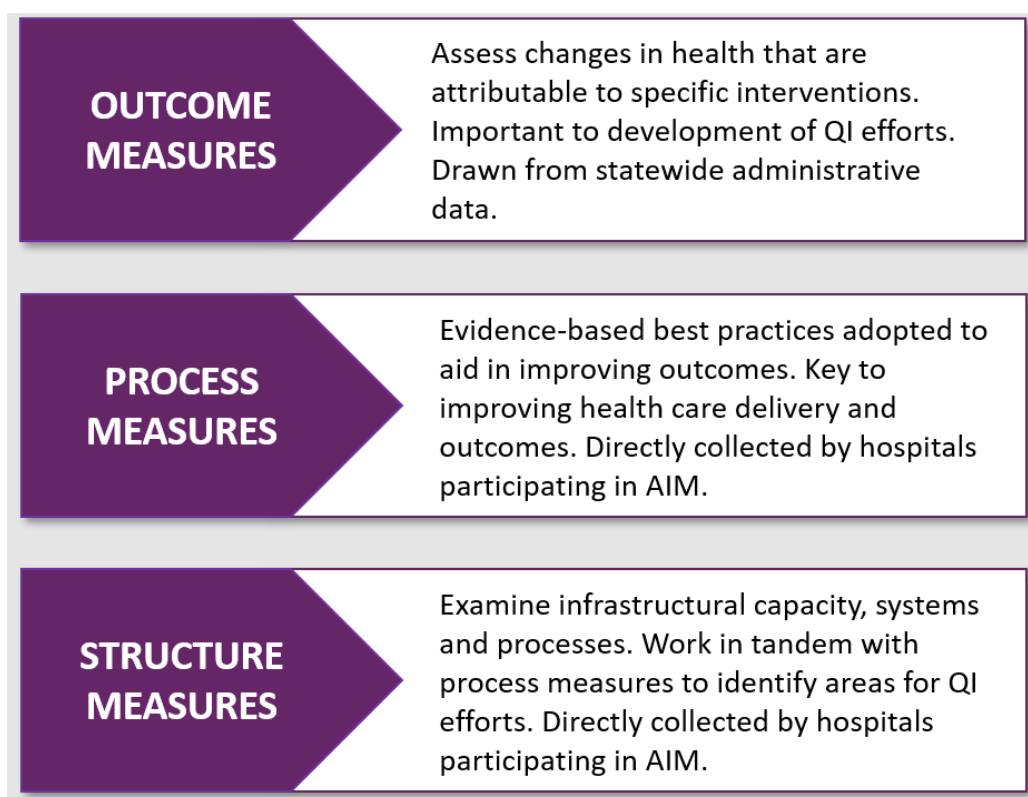
- ☐ Line Graph
- ☐ Bar Graph
- ☐ Population Summary Graph

Generate Report

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.

Cremin Care				
Overview	Enter Process/Structure Measures	Structure Measure Results	Process Measure Results	Outcome Measure Results
Download Reports				
Period	Severe Hypertension (HTN) (Quarterly Reporting)	Hemorrhage (Quarterly Reporting)	Maternal Prevention of VTE (Quarterly Reporting)	Opioid Use Disorder (Quarterly Reporting)
November 2022				
October 2022				
September 2022				
August 2022	✗ View Q3 2022	✗ View Q3 2022	✗ View Q3 2022	✓ View Q3 2022
July 2022				

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

Cremin Care

(Q2 2021)

The process measure responses below are for Beta Beta Mu Hospital.

Save

P1A. During this reporting period, the number of OB drills conducted for any patient safety topic.

P1B. During this reporting period, what topics were covered in the OB drills?

Topic	Yes	No
Hemorrhage	☐	☐
Severe Hypertension	☐	☐
Other	☐	☐

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

	<u>P1</u> . 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. ⓘ	<u>P1</u> . 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.

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

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.'

Cremin Care (Q3 2022)

The process measure responses below are for Cremin Care.

Save

Please rate your progress towards putting and keeping the structure measure fully in place.

Structure Measures

OPI/QID-5T. Has your hospital implemented a universal screening protocol for OUD?

☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5

Not Started Fully In Place

- 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
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- 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.