



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

2025 AIM Sustainability Community of Learning (COL)

Wednesday
April 16, 2025
1:00PM–2:30PM (EST)

Welcome!

This is a reminder that this meeting is intended for AIM participating and affiliated entities only and is not open to the public or press. All media requests regarding AIM should be directed to ACOG Public Affairs at communications@acog.org.



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

The Alliance for Innovation on Maternal Health is a national, cross-sector commitment designed to support best practices that **make birth safer, **improve maternal health outcomes**, and **save lives**.**

**You can find more information at
saferbirth.org.**

This program is supported by a cooperative agreement with the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UC4MC28042, Alliance for Innovation on Maternal Health. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.



Before We Get Started

- ▶ You are **muted** upon entry to the call.
- ▶ **You will have the ability to unmute** yourself during Q&A times.
- ▶ We encourage participants to **remain muted** to reduce background noise.
- ▶ If you are experiencing technical difficulties, please chat an AIM staff member or email **aimdatasupport@acog.org**

This presentation will be recorded.

Both the slides and recording will be available on the AIM Data Resources Webpage and shared in the follow-up newsletter.



Agenda

01

**Welcome &
Introductions**

02

**Upcoming
Sessions**

03

**Speaker
Presentation:
Sustainability
Champions:
Engaging
Stakeholders
in
Sustainability
Success**

04

**Breakout
Session**

05

Q/A & Closing



Meet the AIM Data Team



Izzy Taylor
Senior Manager,
AIM Data Program



Inderveer Saini
Program Data
Analyst II



Rekha Karki
Program Data
Analyst



**David
Laflamme**
Epidemiology
Contractor



Upcoming Sessions

03

Maintaining Changes in Practice and Processes through Staff Support, Training, and Collaboration

04

Sustaining the Gains Amidst Changes in Policy and the Healthcare Landscape

05

Strategic Resource Management: Ensuring Sustainability in Healthcare Implementation

06

Data Driven Strategies for Monitoring Sustainability

Visit: saferbirth.org

Resource Kits ▼

Resources ▼

Events ▼

AIM Data ▼

Contact

Event Calendar

Communities of Learning

Vimeo

AIM TAP Webinar Series

2025 AIM Annual Meeting

AIM COMMUNITIES OF LEARNING

QI Community of
Learning 2022

QI Community of
Learning 2023

Data Support
Community of
Learning

Lived Experience
Integration into QI
Community of
Learning

Obstetric Emergency
Readiness
Community of
Learning

Sustainability
Community of
Learning 2025



Meet the speakers



Jennifer Callaghan-Koru, PhD

Associate Professor, **University of
Arkansas for Medical Sciences (UAMS)**



Whitney Tolbert, MNSc, RN

Director of Nursing for Womens' and
Children's Services, Mercy Hospital in
Northwest Arkansas

**Alliance for Innovation in Maternal Health
Sustainability Community of Learning**

Sustainability Champions: Engaging Stakeholders in Sustainability Success

April 16, 2025

Jennifer Callaghan-Koru, PhD

Associate Professor, University of Arkansas for
Medical Sciences

Whitney Tolbert, MNSc, RN

Director of Nursing for Womens' and Children's
Services, Mercy Hospital in Northwest Arkansas

Learning Objectives

- 
- 1. Describe the role and qualities of effective champions
 - 2. Identify strategies that champions use to foster cultures that sustain quality care
 - 3. Design an effective communication plan that promotes transparency and ongoing engagement among hospital stakeholders.
 - 4. Establish accountability frameworks to monitor progress and ensure sustained commitment to QI initiatives.

What is a Champion?

- “Individual who dedicates themselves to supporting, marketing or ‘driving through’ and implementation, overcoming indifference or resistance that the intervention may provoke in an organization.”

Source: Powell BJ, Waltz TJ, Chinman MJ, et al. A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project. *Implementation Science*. 2015;10(1):21.

Drivers of Sustained Quality

1. Quality Control Systems

Management system is organized to anticipate and detect defects, maintain stable operations, respond to anomalies

2. Quality Improvement Efforts

Management system mounts coordinated projects to improve process capability

3. Culture of High-Performance Management

Positive trust relationship encourages and sustains frontline staff engagement in quality control and quality improvement

Source: Scoville R, Little K, Rakover J, Luther K, Mate K. Sustaining Improvement. IHI White Paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2016.

Champions Driving Culture

- ▶ Model the change
- ▶ Encourage and recognize
- ▶ Leverage personal relationships/trust
- ▶ Provide coaching/support

Who Can Be a Champion?

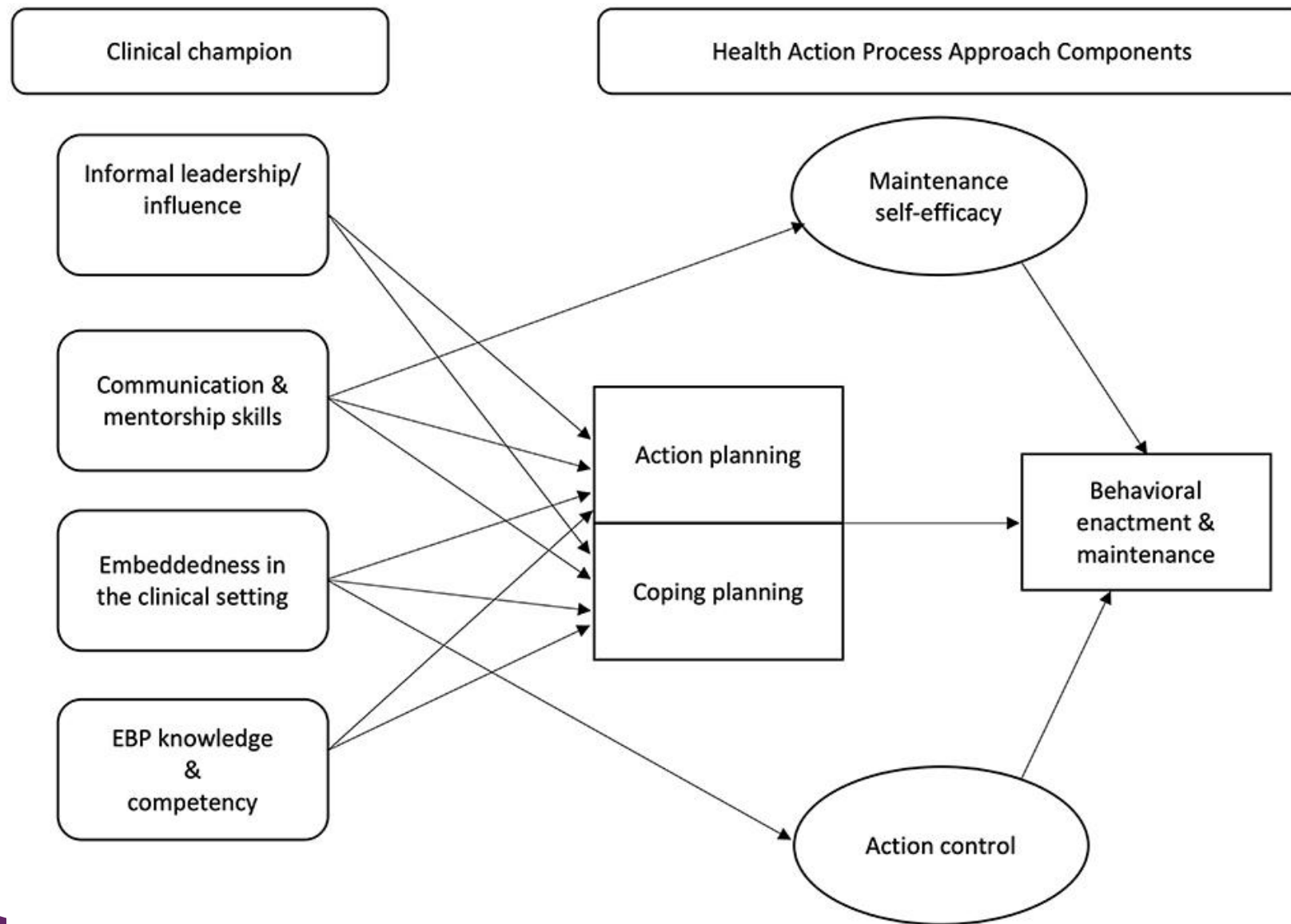
Team members embedded in the clinical setting, including:

- ▶ Directors/managers
- ▶ Formally-appointed implementation leads
- ▶ Individuals with a *passion* for the change

Characteristics of Effective Champions

- ▶ Personable, well-respected, and credible
- ▶ Personal belief in and commitment to the change
- ▶ Knowledge and competence with the change
- ▶ Negotiation/advocacy skills and political acumen
- ▶ Strong educator & presentation skills
- ▶ Enthusiasm and energy
- ▶ Maintains a positive focus

Sources: George ER, Sabin LL, Elliott PA, et al. Examining health care champions: a mixed-methods study exploring self and peer perspectives of champions. *Implementation Research and Practice*. 2022;3:2633489522107788; Miech EJ, Rattray NA, Flanagan ME, Damschroder L, Schmid AA, Damush TM. Inside help: An integrative review of champions in healthcare-related implementation. *SAGE Open Med*. 2018;6:2050312118773261.



Source: Morena AL, Gaias LM, Larkin C. Understanding the Role of Clinical Champions and Their Impact on Clinician Behavior Change: The Need for Causal Pathway Mechanisms. *Front Health Serv.* 2022;2.

Descriptions of Effective Champions

- ▶ “It's the will and the passion he has. It was as if he was on a personal mission. He would speak with so much passion and dedicate so much of his time and knowledge to [the intervention]. It was easy to follow him and know why he does what he does.”
- ▶ “She was very passionate, she was very smart, so they respected her. She was a maternal and fetal medicine doctor as well, so she was constantly consulting and advising the obstetricians, so there was a level of respect there already. She was very passionate about reducing our c-section rates, and . . . I think that kind of passion is contagious in a lot of ways.”

Sources: George ER, Sabin LL, Elliott PA, et al. Examining health care champions: a mixed-methods study exploring self and peer perspectives of champions. *Implementation Research and Practice*. 2022;3:2633489522107788; Callaghan-Koru et al. Relationships between internal facilitation processes and implementation outcomes among hospitals participating in a quality improvement collaborative to reduce cesarean births: A mixed-methods embedded case study. *Imp Sci Comm*. In Press.

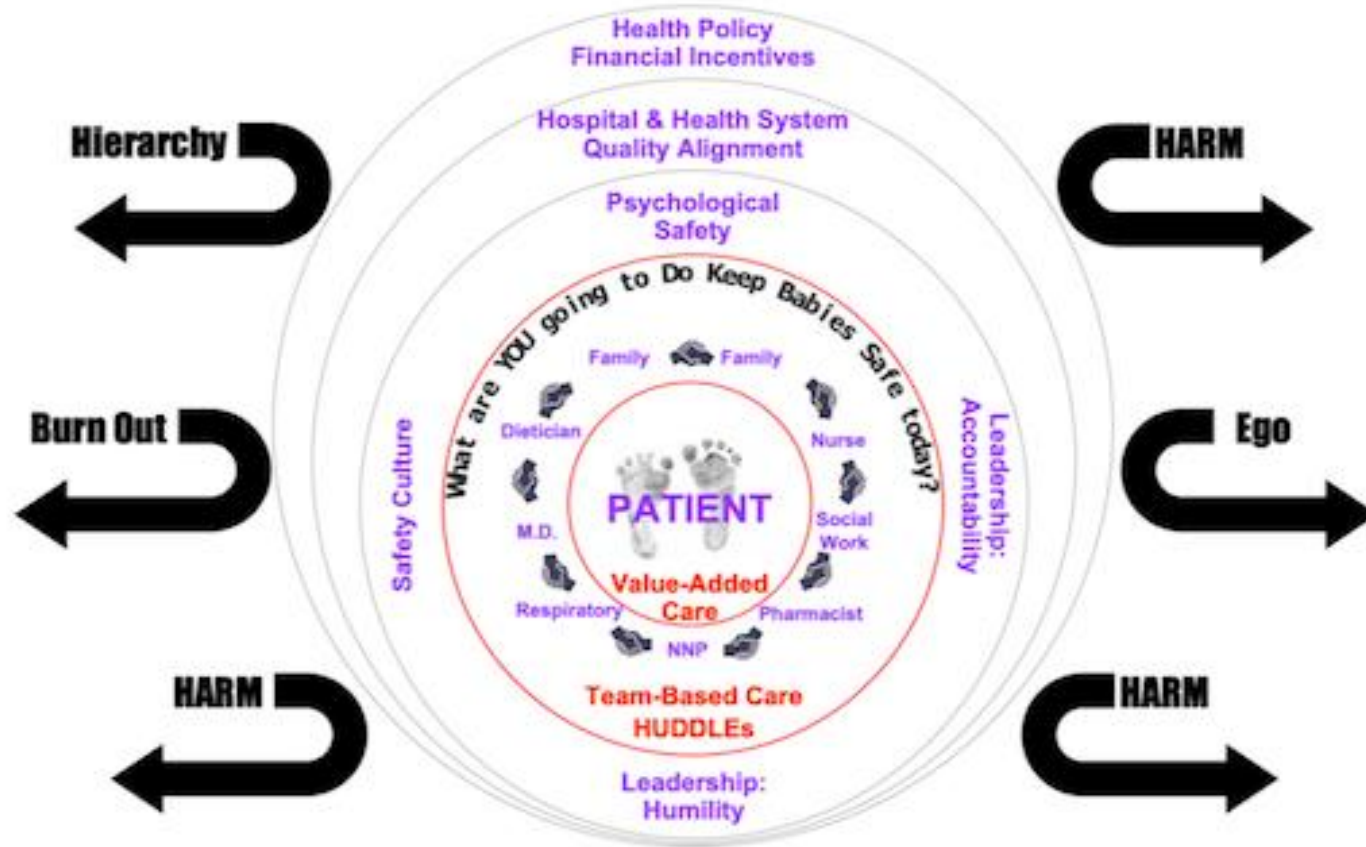
Engage champions among unit staff

- ▶ Identify team members with the qualities and passion of effective champions
- ▶ Provide protected time
- ▶ Recognize role as champion

Leadership support for champions

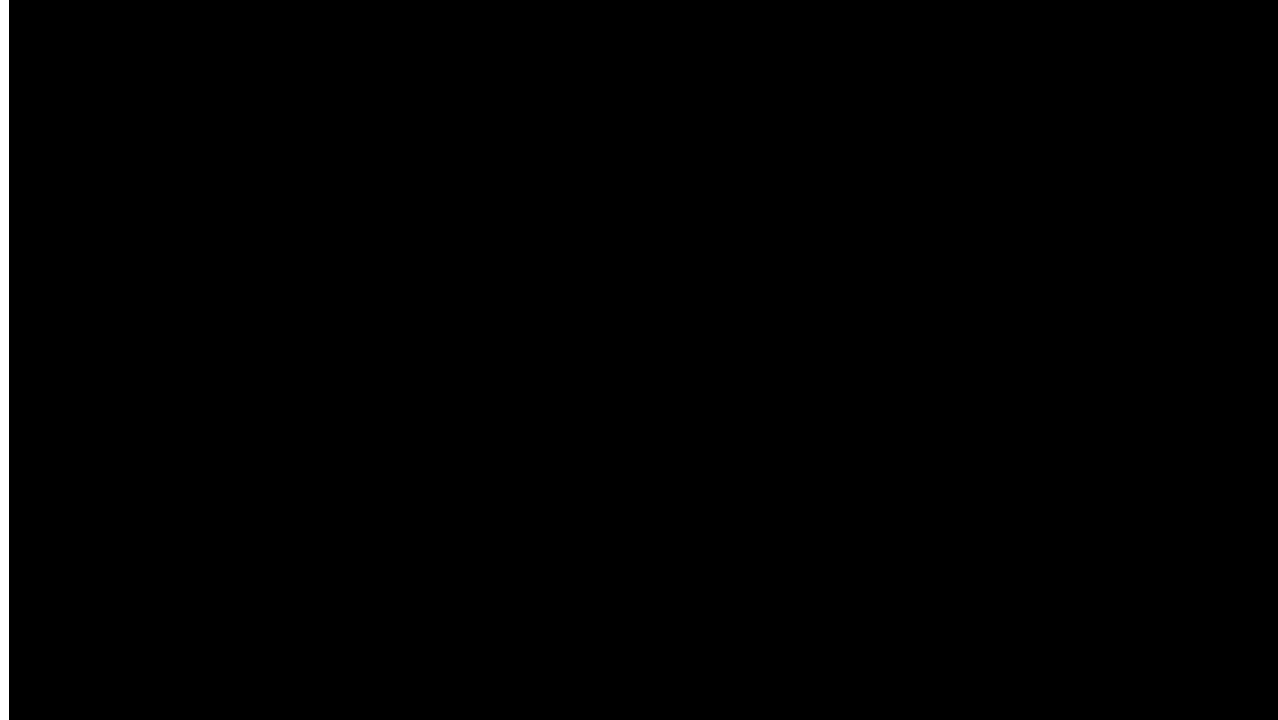
- ▶ Share your unit's goals & success with leadership
- ▶ Link unit goals to larger organizational goals
- ▶ Embed changes you are sustaining in routine reporting / quality measures

Case Example: POKE Project



Source: Profit J, Scheid A, Ridout E. First, Do No Harm: Value-driven Patient Safety in the Neonatal Intensive Care Unit. *PSNet Collection*. Published online 2019. Accessed November 1, 2022.

POKE: Championing Culture



Source: Profit J, Scheid A, Ridout E. First, Do No Harm: Value-driven Patient Safety in the Neonatal Intensive Care Unit. *PSNet Collection*. Published online 2019. Accessed November 1, 2022.

Safe Reduction of Primary Cesarean Birth

Mercy Hospital Northwest Arkansas

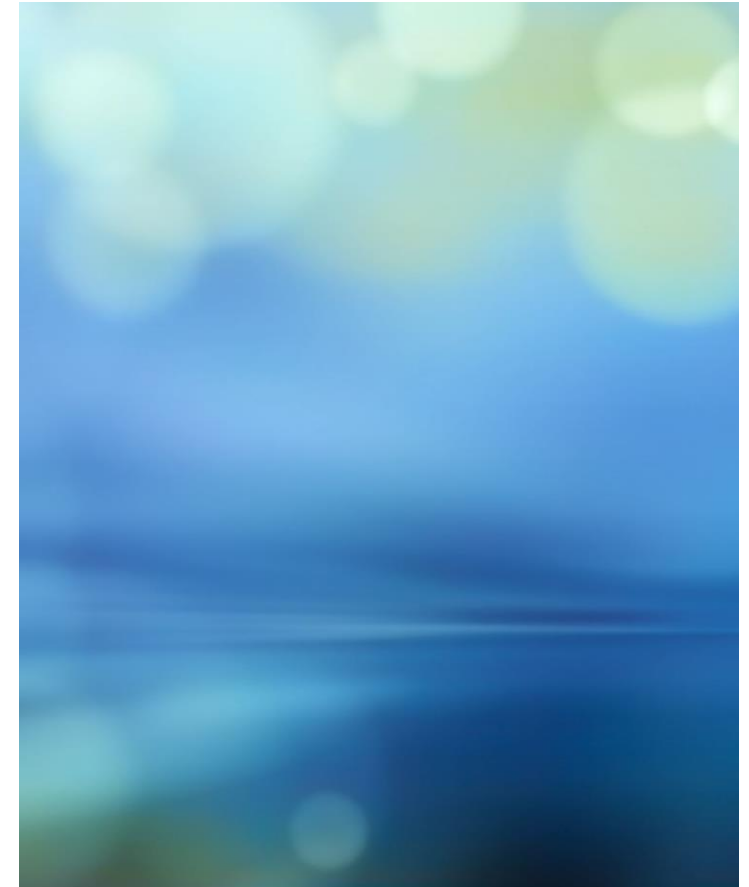
Project Champions

- ▶ OB/GYN Physician
- ▶ L&D Clinical Educator
- ▶ L&D Nurse Manager
- ▶ Quality Leader
- ▶ Medical Staff Officer



Safe Reduction of Primary Cesarean Birth: AIM Patient Safety Bundle

Readiness	• Awareness & Engagement • Unit Self Assessment & Culture Survey
Recognition & Prevention	• Education (physicians, nurses and patients) • Maslach Burnout Survey
Response	• Education • Multidisciplinary NTSV CS Reviews
Reporting and Systems Learning	• Transparent reporting • Metrics and balancing measures
Respectful, Equitable and Supportive Care	• Bedside Report • Doula Integration • Next steps...Team Birth



Mercy Hospital NWA: Learning Cycle Update, September 2023

LEARNING CYCLE PLANS

AIM

Readiness FOCUS
Drive Awareness of and
Engagement in the collaborative

MEASURES

- Participation in the Unit Self Assessment (in progress)
- Unit Culture Survey (in progress)

CHANGES

- Formalizing Doula Policy
- Sharing unblinded NTSV data
- Incorporating L&D nurses into NTSV Chart Reviews

PROGRESS THIS CYCLE

- Perinatal Nurse Navigator & Patient Education Options
- Implemented Labor Comfort & Coping Class for Patients
- Labor Birth Residency & SIM Lab
- NTSV Baseline Case Reviews (36 cases – FHR 20, IOL 14, 2 Other)
- Save the Uterus! Coworker Recognition for NTSV Vaginal Deliveries
- Unblinded Physician NTSV C-Section Rates – Distributed Monthly

LESSONS LEARNED

- IOL is status for majority of NTSV CS (81% – 52% medical/48% elective)
- FHR Concern is largest category for NTSV CS in baseline review (56%)
- Opportunity for improved documentation

PLANS FOR NEXT CYCLE

- Pt education – risks & benefits of elective labor induction
- Consider standardized induction scheduling (↓ Elective IOL)
- Drill down on FHR concern cases (strip review)
- Education on documenting MVUs, FHR corrective measures

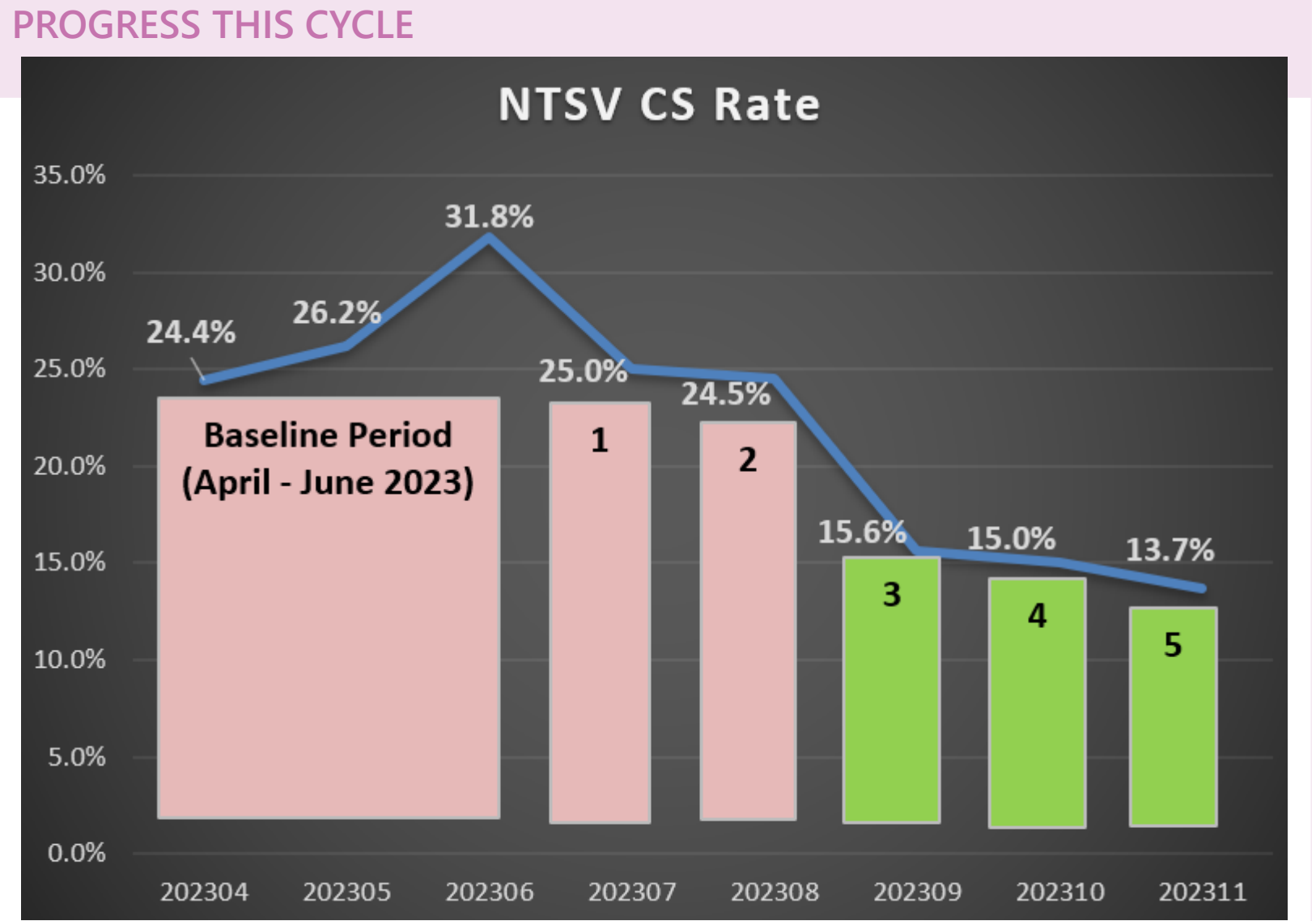


Mercy Hospital NWA: Learning Cycle Update, December 2023

Team: Whitney Tolbert & Dana Hadaway



LEARNING CYCLE PLANS
AIM
To reduce incidence of elective IOL
MEASURES
Unit Culture Survey: 40% response
Added metrics to IOL review
Episiotomy and operative vaginal delivery rates
CHANGES
Unblinded NTSV CS rates
Perinatal Case Review/Peer Review
Implemented Nitrous



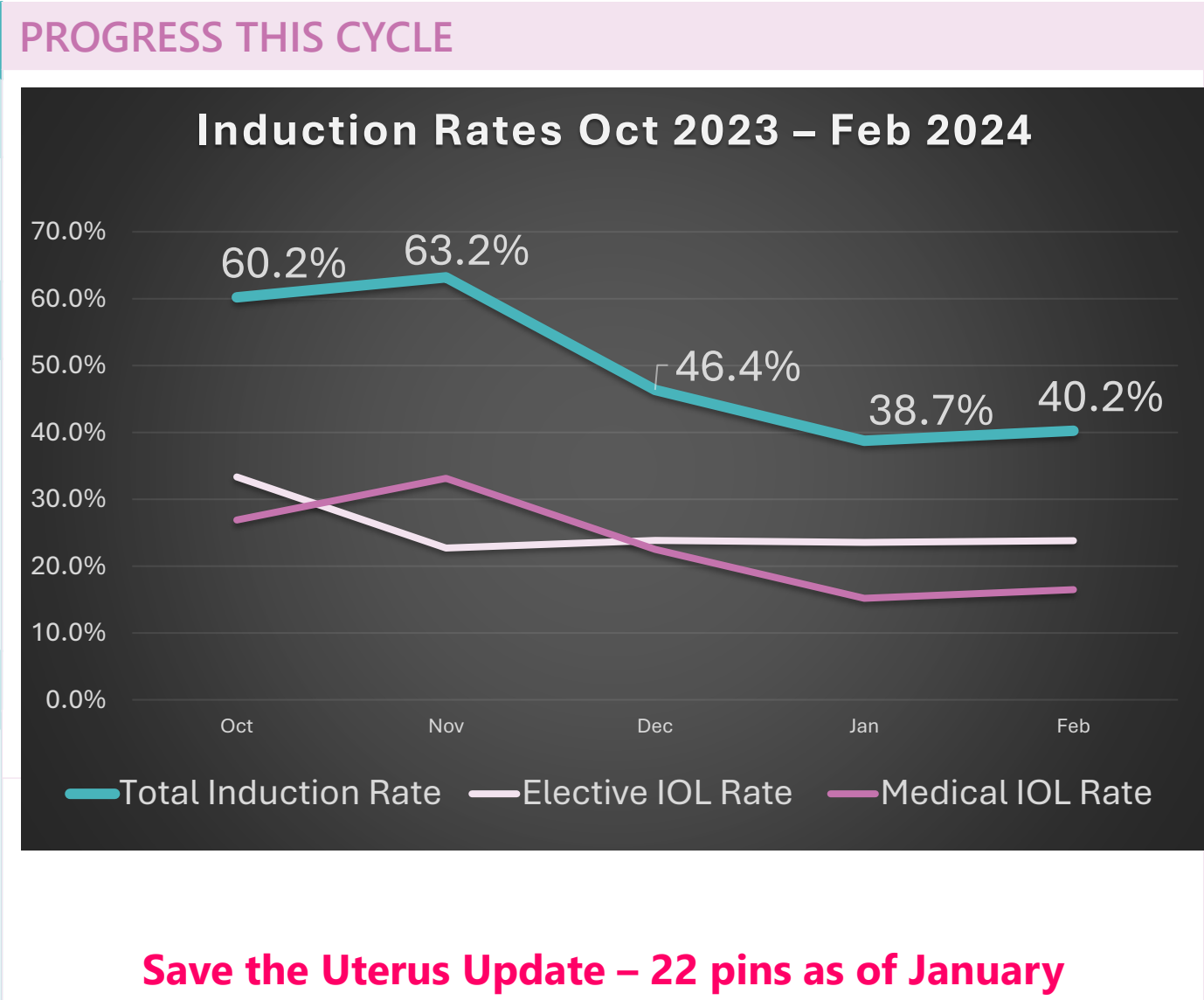
Save the Uterus Update – 12 nurses have received pins (through Oct)

Mercy Hospital NWA: Learning Cycle Update, March 2024

Team: Whitney Tolbert & Dana Hadaway



LEARNING CYCLE PLANS
AIM
To reduce incidence of elective IOL Decrease episiotomy rate
MEASURES
IOL rates – Overall IOL rate decreased
Episiotomy rates – noted increase in Oct, reported trend, now rate decreasing (next slide)
CHANGES
- Continue current monitoring & reporting - Continue reward program (Save the Uterus) - Education: Peanut balls, trauma-informed care and legal documentation - Education: Vacuum Delivery drill/skills station

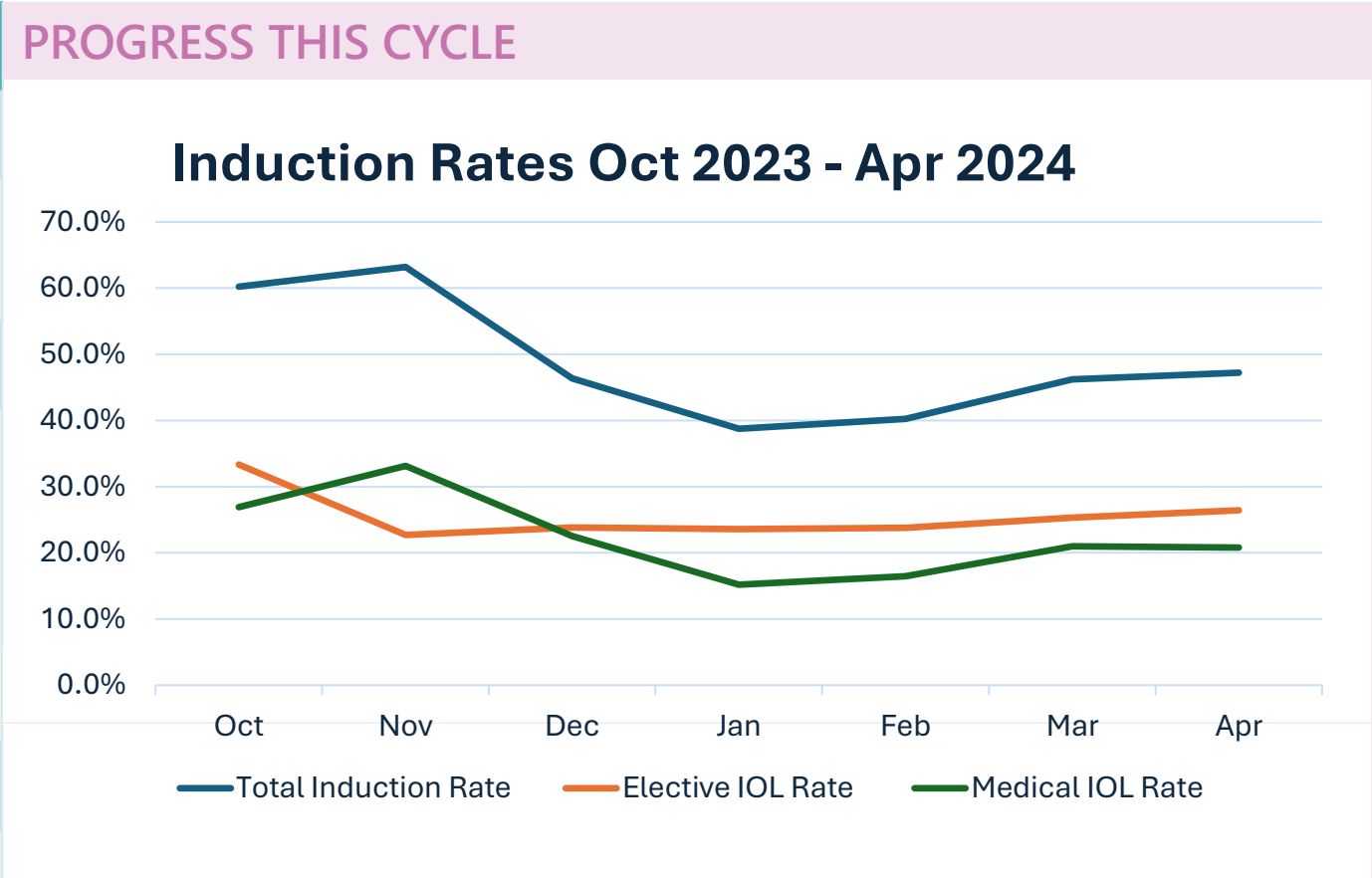


Mercy Hospital NWA: Learning Cycle Update, June 2024

Team: Whitney Tolbert & Dana Hadaway



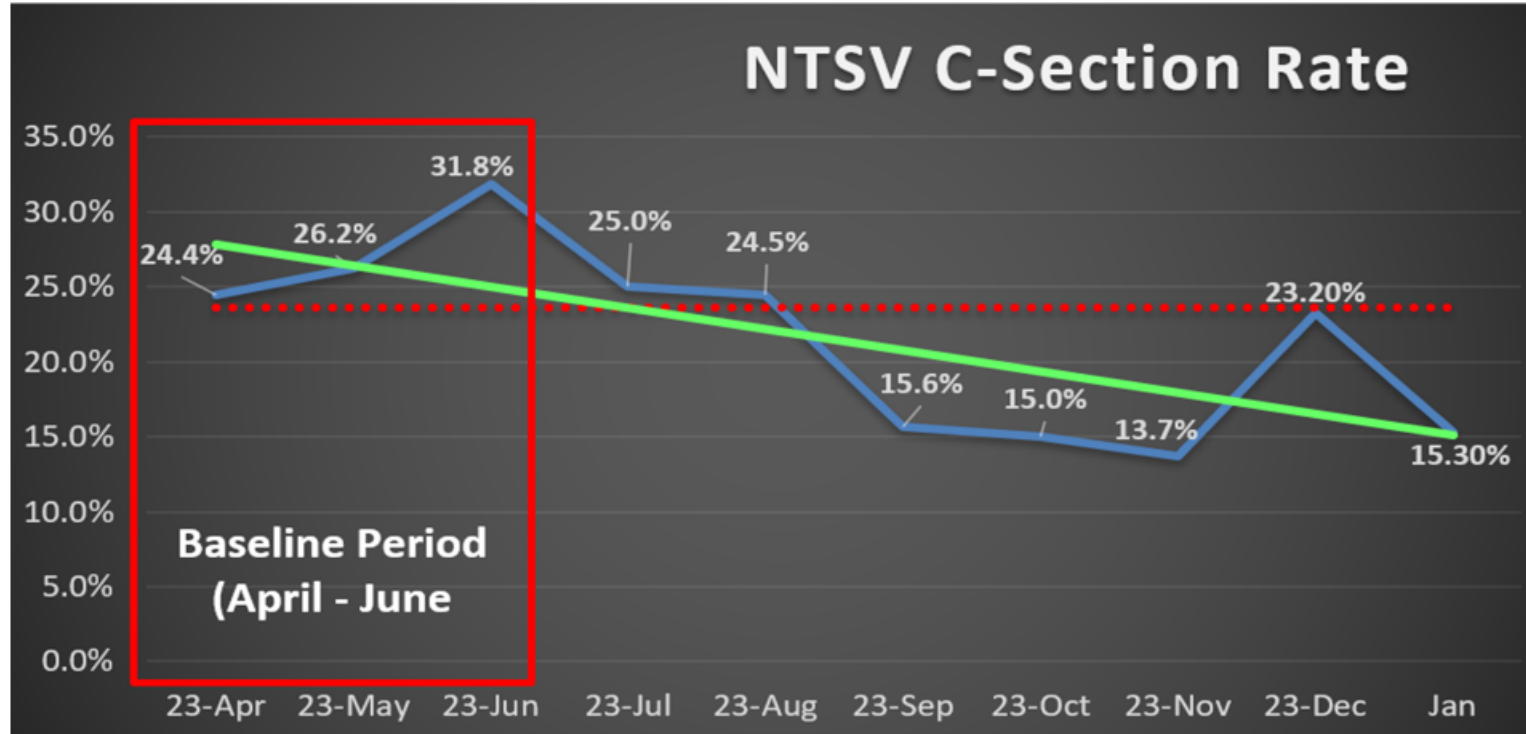
LEARNING CYCLE PLANS
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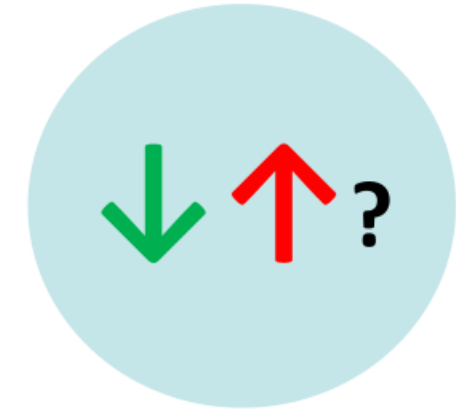
Save the Uterus Update

26 nurse pins as of April

8 nurses received uterus compression socks!



Significant decrease in NTSV CS rate beginning in September.



Noted increase in episiotomy rate in Oct; reported to our nursing & physician groups. Watched rate closely. Noted decrease back under 5% in December. Continuing to watch this and instrumental delivery rates closely.

Mercy Hospital NWA: Learning Cycle Update, March 2024

Team: Whitney Tolbert & Dana Hadaway



LEARNING CYCLE PLANS

AIM

Provide trauma-informed education to develop knowledge and skills on approaches which maximize the likelihood of vaginal birth, methods to promote labor progress, labor support and shared decision making.

MEASURES

Post-conference surveys revealed a 238% increase in confidence in nurses' ability to provide trauma-sensitive perinatal care!

CHANGES

- Continue current monitoring & reporting
- Continue reward program (Save the Uterus)
- Support nursing in new education on peanut balls, trauma informed care and documentation practices

PROGRESS THIS CYCLE

OPTIMIZING MATERNITY CARE

Driving Culture Change & Improved Outcomes

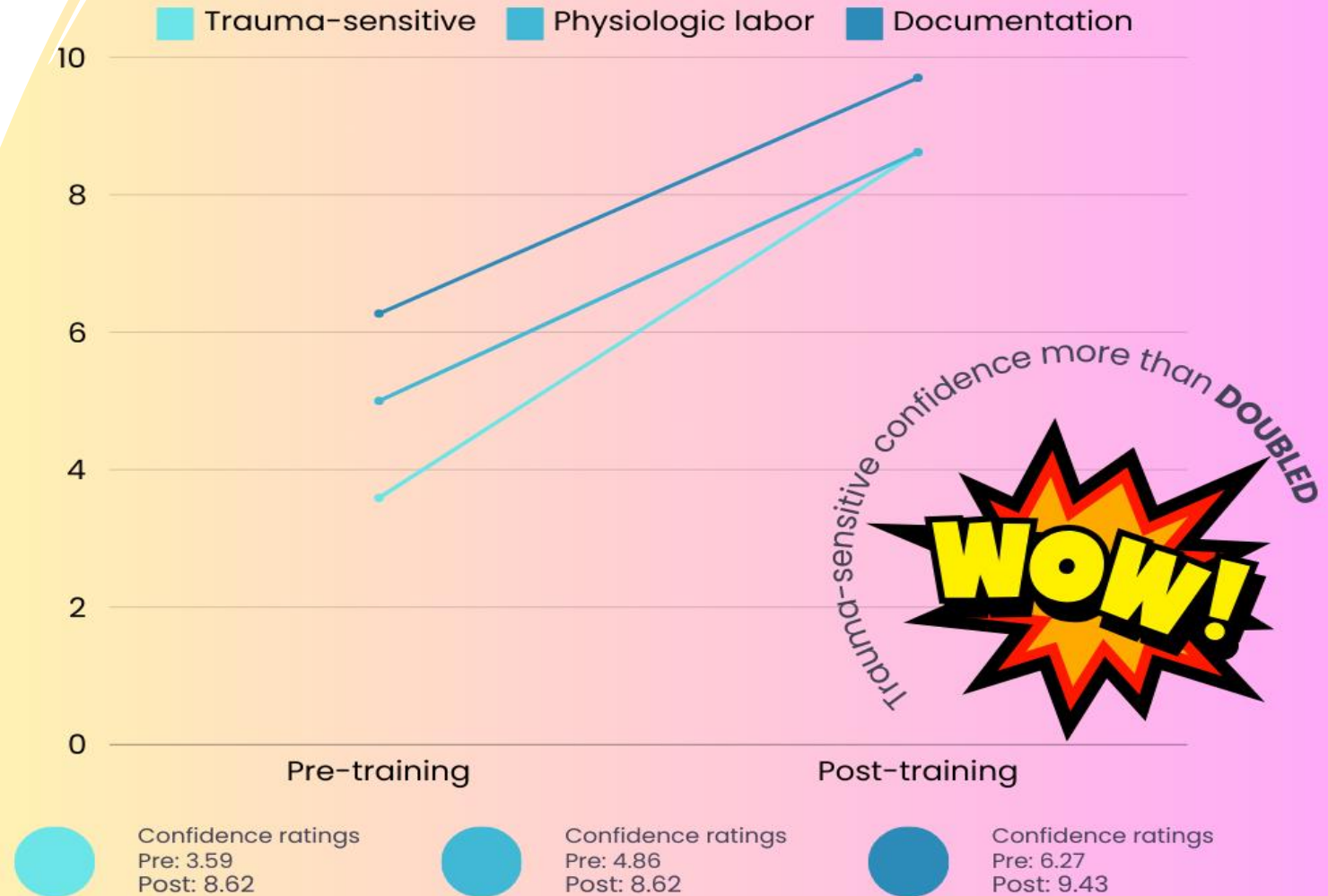


DATA



BirthNurse

Analysis of Pre & Post-conference surveys revealed a **238% increase** in confidence in nurses' ability to provide **trauma-sensitive perinatal care!**



Physiologic labor support confidence **increased 77%**

Documentation according to standard of care confidence **increased 50%!**

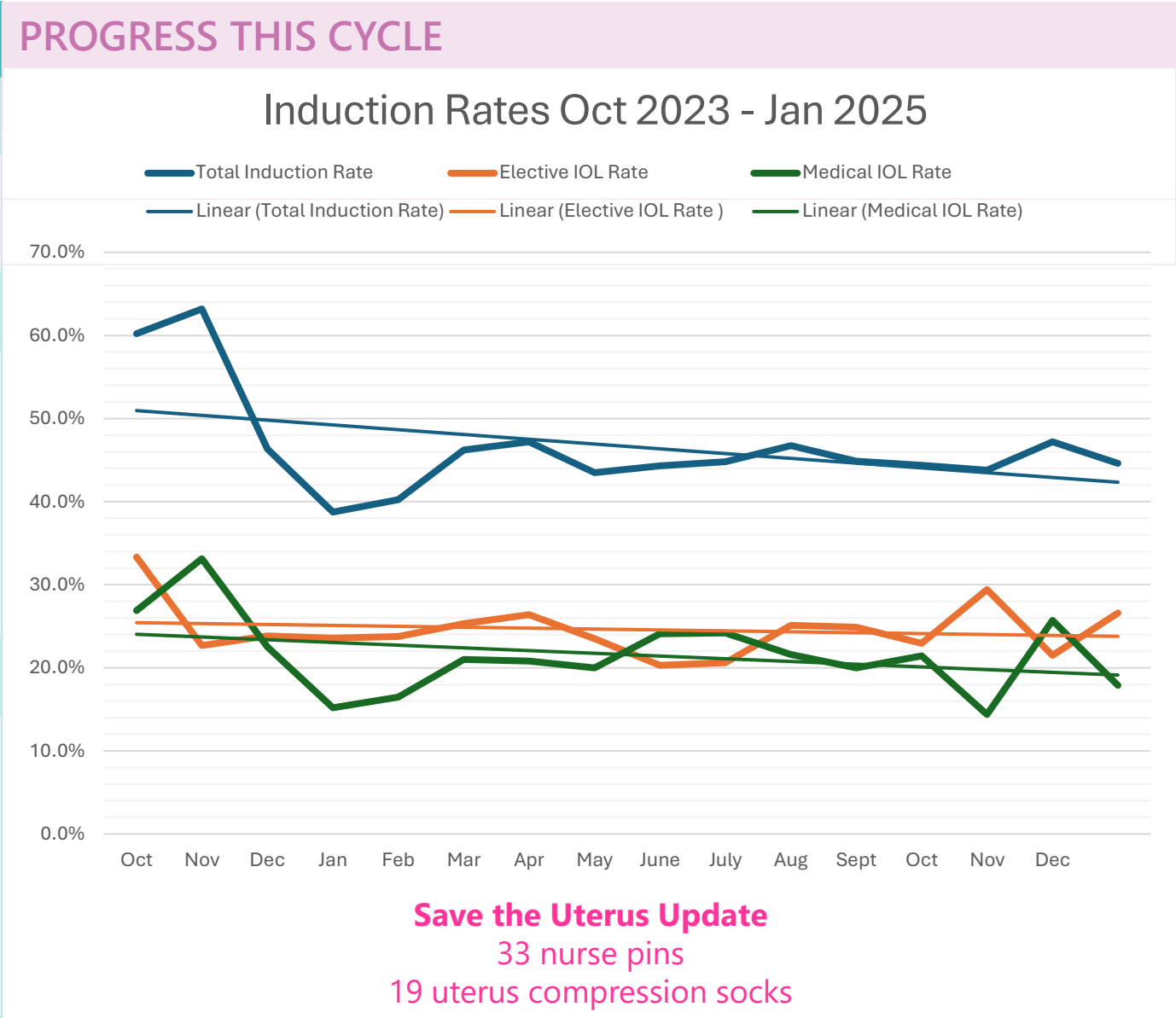
Findings were statistically significant, p-value <.001 for all 3

Mercy Hospital NWA: Learning Cycle Update, Feb 2025

Team: Whitney Tolbert & Dana Hadaway



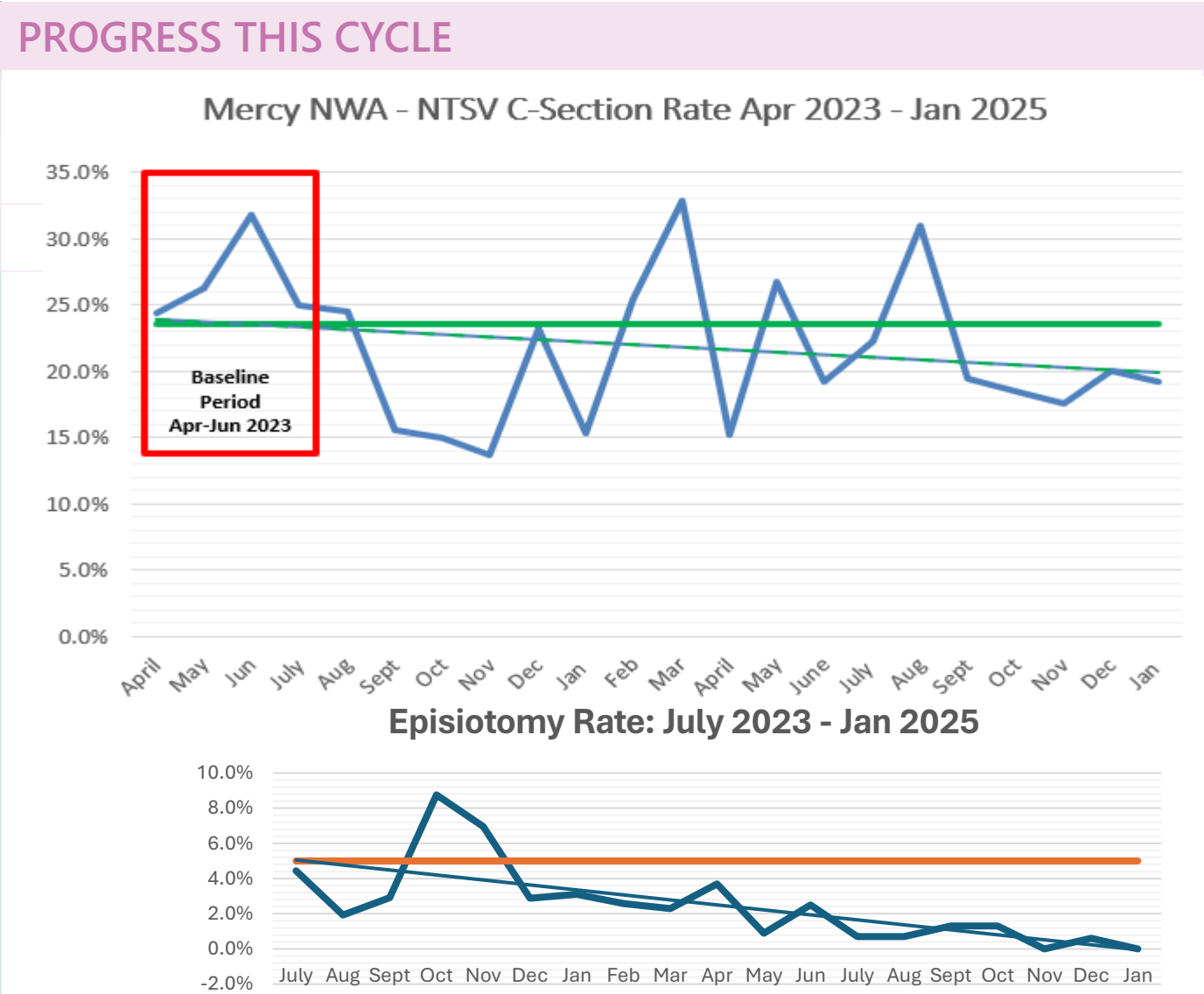
LEARNING CYCLE PLANS	
AIM	To reduce incidence of elective IOL
MEASURES	IOL rates – Overall IOL rate decreased Episiotomy rates – noted increase in Oct, reported trend, now rate decreasing (next slide) NTSV CS Rates – decreasing trend; meeting target (next slide)
CHANGES	We have saved 879 uteruses since July 2023! - Continue current monitoring & reporting - Continue reward program (Save the Uterus)



Mercy Hospital NWA: Learning Cycle Update, Feb 2025

Team: Whitney Tolbert & Dana Hadaway

LEARNING CYCLE PLANS
AIM
Monitor episiotomy rate in comparison with NTSV CS rate; goal is to maintain episiotomy rate <5% and NTSV CS rate <23.6%
MEASURES
Episiotomy rates – noted increase in Oct/Nov 2023, reported trend, now rate decreasing
NTSV CS Rates – decreasing trend; meeting target
CHANGES
- Continue current monitoring & reporting - Continue reward program (Save the Uterus) - Extended unblinded physician NTSV CS rates with transparency among all clinics





Breakout Session (15 minutes)

In the breakout room,

- ▶ Share, the best example of a champion making a quality difference in your organization, and describe:
 - ▶ What made this person effective?
 - ▶ How could others replicate their effective qualities/strategies?
- ▶ Select one quality/strategy that is the most feasibly replicated by others wishing to champion quality care. Share back with the larger group.

Share what you learned

Share one quality/strategy from your breakout room discussion that is the most feasibly replicated by others wishing to champion quality care.



Questions?

Thank you!

The slides and
recording will be
shared to all
the attendees

Any questions about
this session can be sent
to [aimdatasupport
@acog.org](mailto:aimdatasupport@acog.org)

Be sure to
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session