



ALLIANCE FOR INNOVATION  
ON MATERNAL HEALTH

# 2025 AIM Sustainability Community of Learning (COL)

**Thursday  
July 17, 2025  
1:00PM–2:30PM (EST)**



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](https://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](mailto: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:  
Strategic  
Resource  
Management:  
Ensuring  
Sustainability in  
Healthcare  
Implementation**

**04**

**Case Study &  
Breakout  
Room**

**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



# Final Sustainability COL Session

## **Session 6: Data Strategies for Monitoring Sustainability**

*August 20, 2025, at 1PM*

Visit: [saferbirth.org](https://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



**Barbara O'Brien, MS, RN**



**Lynda Krisowaty, MHS**

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

# **Strategic Resource Management: Ensuring Sustainability in Healthcare Implementation**

**July 17, 2025**

**Barbara O'Brien, MS, RN**

Director, Oklahoma Perinatal Quality Improvement Collaborative (OPQIC)

**Lynda Krisowaty, MHS**

Associate Director, Evidence & Implementation, AMCHP

# Learning Objectives

1

Identify and assess key resources required for sustaining implementation effort

2

Design flexible resource allocation strategies to address changing needs, including training and resource plans for obstetric unit closures

3

Develop contingency plans to sustain implementation efforts if resources are lost or become unavailable, focusing on resource assessment, alternative funding, and prioritizing key needs.



# Laying the Foundation for Sustainability

# What do we mean when we say “sustainability”?

*Are we trying to...*

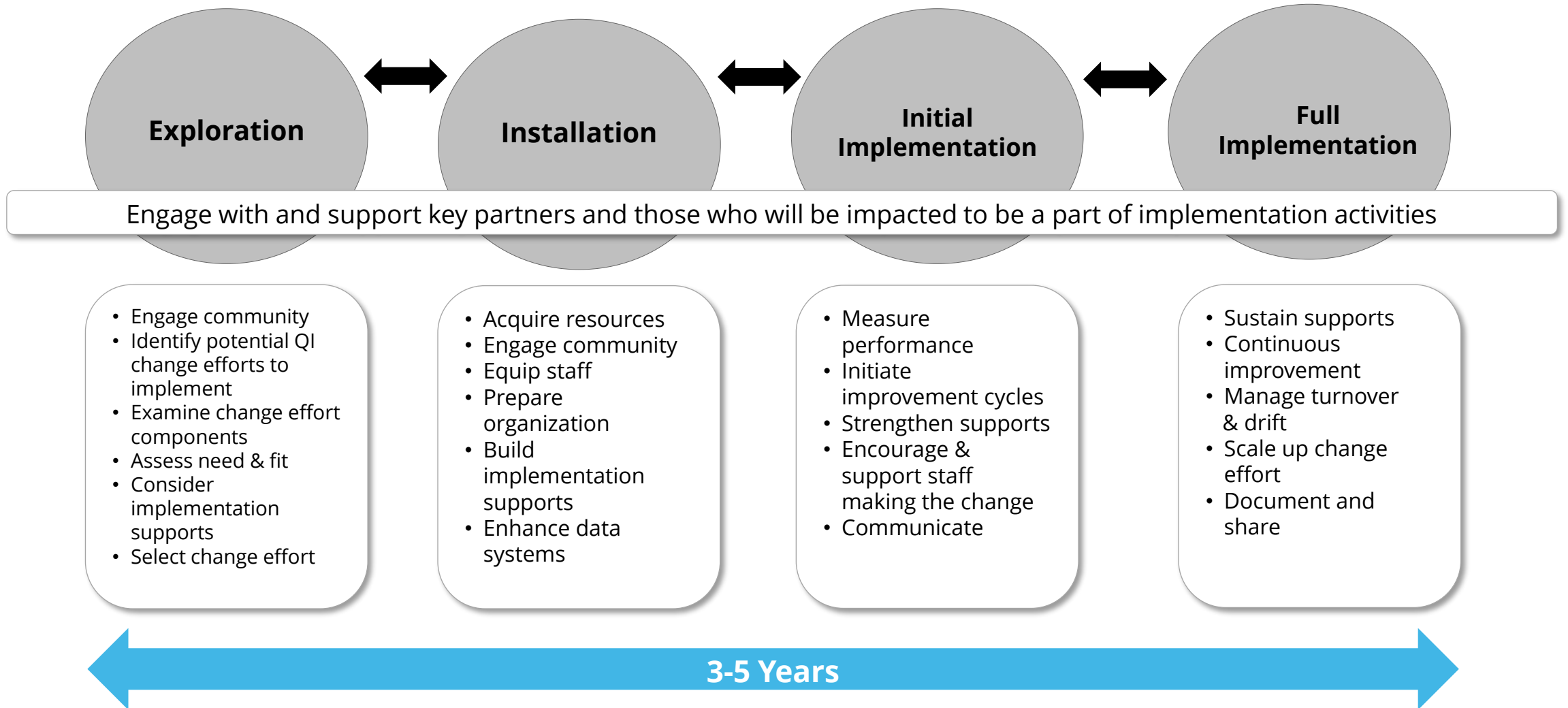
- ▶ Institutionalize this change effort within our organization?
- ▶ Continue benefits or improved outcomes for the key population served by our change effort?
- ▶ Maintain the capacity of those helping to guide/implement the change effort?
- ▶ Maintain attention to the issues addressed by the change effort even if the change itself doesn't continue?

# Sustainability Insights

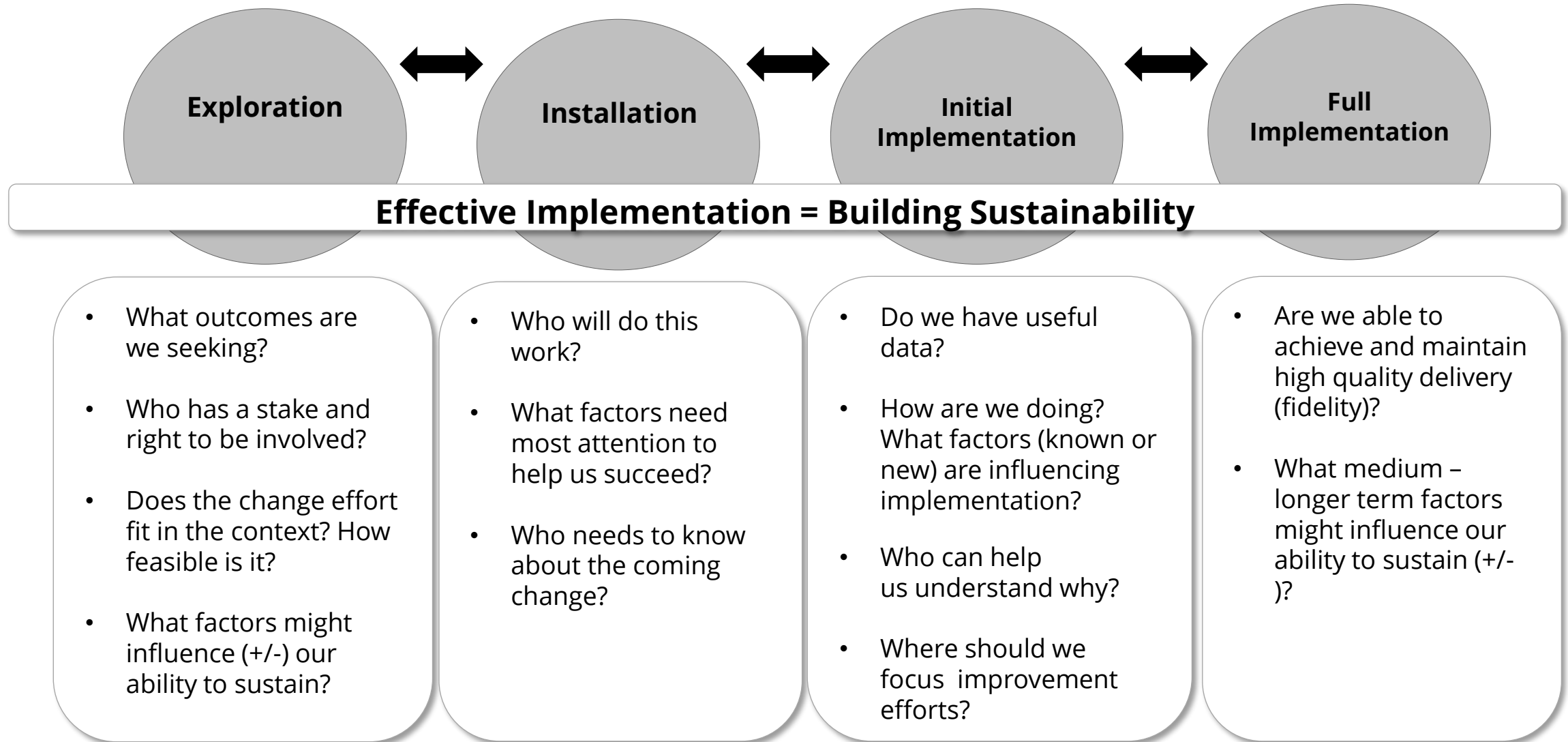
- ▶ More than just funding
- ▶ Effective implementation helps build sustainability
- ▶ Not a “one size fits all” approach
- ▶ Keep funders in mind when creating your evaluation plan and when implementing and documenting activities



# Active Implementation Stages



# Implementation and Sustainability Activities





# Identifying Resources to Support Sustainability

# Program Sustainability Assessment Tool



The screenshot shows the homepage of the Program Sustainability Assessment Tool (PSAT). The header includes the PSAT logo and navigation links: Understand, Assess, Plan, Resources, About Us, and Services. The main content area features a large image of a diverse group of people, with the text "Welcome to the online Program Sustainability Assessment Tool." and "Rate the sustainability capacity of your program to help plan for its future." A green box highlights a "GET STARTED" button. Below this, four orange circular icons represent the steps: 1. Understand (lightbulb), 2. Assess (clipboard), 3. Review (checkmark), and 4. Plan (bar chart). Each step has a brief description of what to do.

**PSAT** | Program Sustainability Assessment Tool

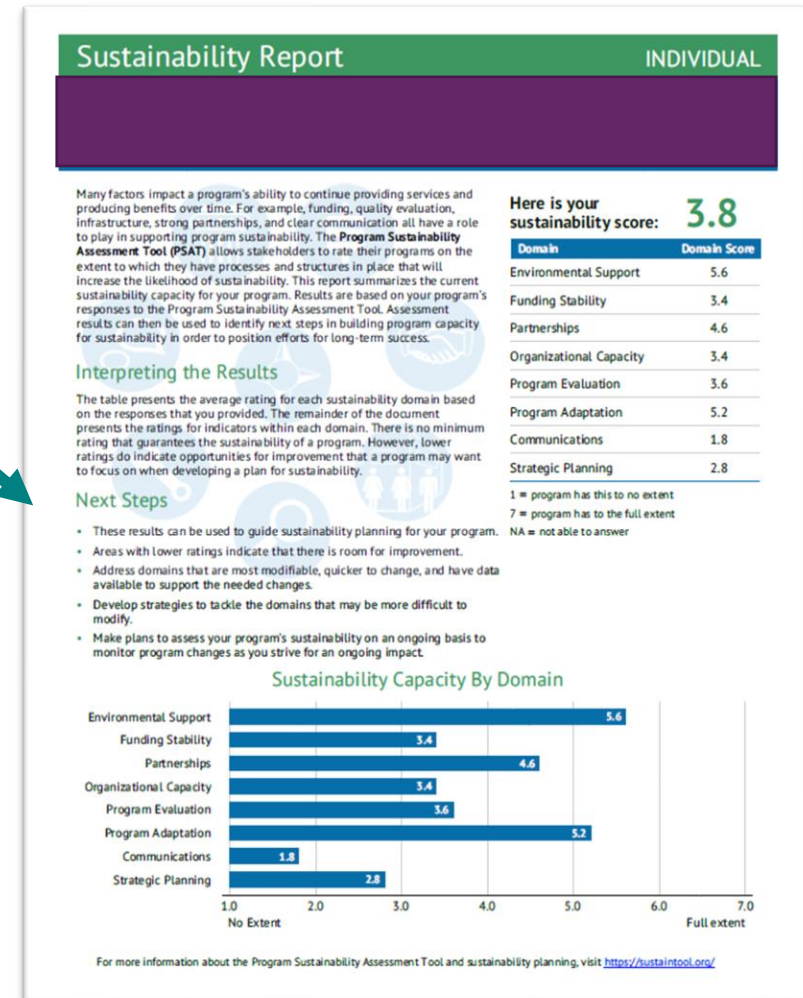
Understand Assess Plan Resources About Us Services

Welcome to the online Program Sustainability Assessment Tool.

Rate the sustainability capacity of your program to help plan for its future.

**GET STARTED**

- 1. Understand**  
Understand the factors that influence a program's capacity for sustainability.
- 2. Assess**  
Use the Program Sustainability Assessment Tool to assess your program's capacity for sustainability.
- 3. Review**  
View results from your assessment as a Sustainability report.
- 4. Plan**  
Develop an Action Plan to increase the likelihood of sustainability.



The screenshot shows a "Sustainability Report" for an "INDIVIDUAL". The report includes a "Here is your sustainability score: 3.8" and a table of domain scores. A green arrow points from the "GET STARTED" button on the PSAT homepage to the "Interpreting the Results" section of the report.

**Sustainability Report** INDIVIDUAL

Many factors impact a program's ability to continue providing services and producing benefits over time. For example, funding, quality evaluation, infrastructure, strong partnerships, and clear communication all have a role to play in supporting program sustainability. The **Program Sustainability Assessment Tool (PSAT)** allows stakeholders to rate their programs on the extent to which they have processes and structures in place that will increase the likelihood of sustainability. This report summarizes the current sustainability capacity for your program. Results are based on your program's responses to the Program Sustainability Assessment Tool. Assessment results can then be used to identify next steps in building program capacity for sustainability in order to position efforts for long-term success.

**Here is your sustainability score: 3.8**

| Domain                  | Domain Score |
|-------------------------|--------------|
| Environmental Support   | 5.6          |
| Funding Stability       | 3.4          |
| Partnerships            | 4.6          |
| Organizational Capacity | 3.4          |
| Program Evaluation      | 3.6          |
| Program Adaptation      | 5.2          |
| Communications          | 1.8          |
| Strategic Planning      | 2.8          |

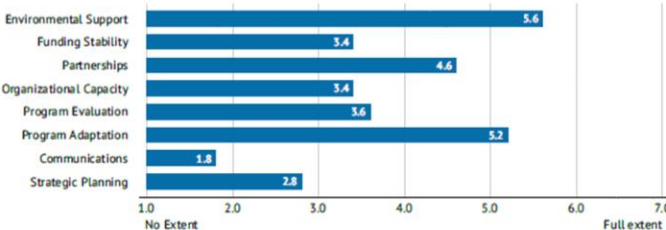
**Interpreting the Results**

The table presents the average rating for each sustainability domain based on the responses that you provided. The remainder of the document presents the ratings for indicators within each domain. There is no minimum rating that guarantees the sustainability of a program. However, lower ratings do indicate opportunities for improvement that a program may want to focus on when developing a plan for sustainability.

**Next Steps**

- These results can be used to guide sustainability planning for your program.
- Areas with lower ratings indicate that there is room for improvement.
- Address domains that are most modifiable, quicker to change, and have data available to support the needed changes.
- Develop strategies to tackle the domains that may be more difficult to modify.
- Make plans to assess your program's sustainability on an ongoing basis to monitor program changes as you strive for an ongoing impact.

**Sustainability Capacity By Domain**



A horizontal bar chart titled "Sustainability Capacity By Domain" showing scores for eight domains. The x-axis ranges from 1.0 (No Extent) to 7.0 (Full extent). The bars are blue and labeled with their respective scores.

| Domain                  | Score |
|-------------------------|-------|
| Environmental Support   | 5.6   |
| Funding Stability       | 3.4   |
| Partnerships            | 4.6   |
| Organizational Capacity | 3.4   |
| Program Evaluation      | 3.6   |
| Program Adaptation      | 5.2   |
| Communications          | 1.8   |
| Strategic Planning      | 2.8   |

For more information about the Program Sustainability Assessment Tool and sustainability planning, visit <https://sustaintool.org/>

# PSAT Vs CSAT

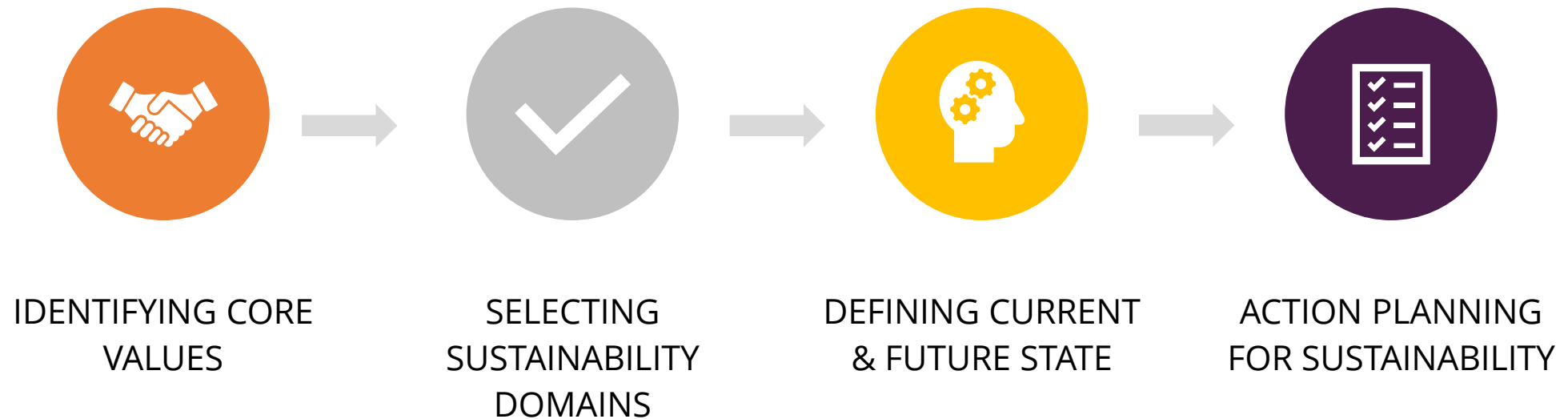
## Program Sustainability Assessment Tool

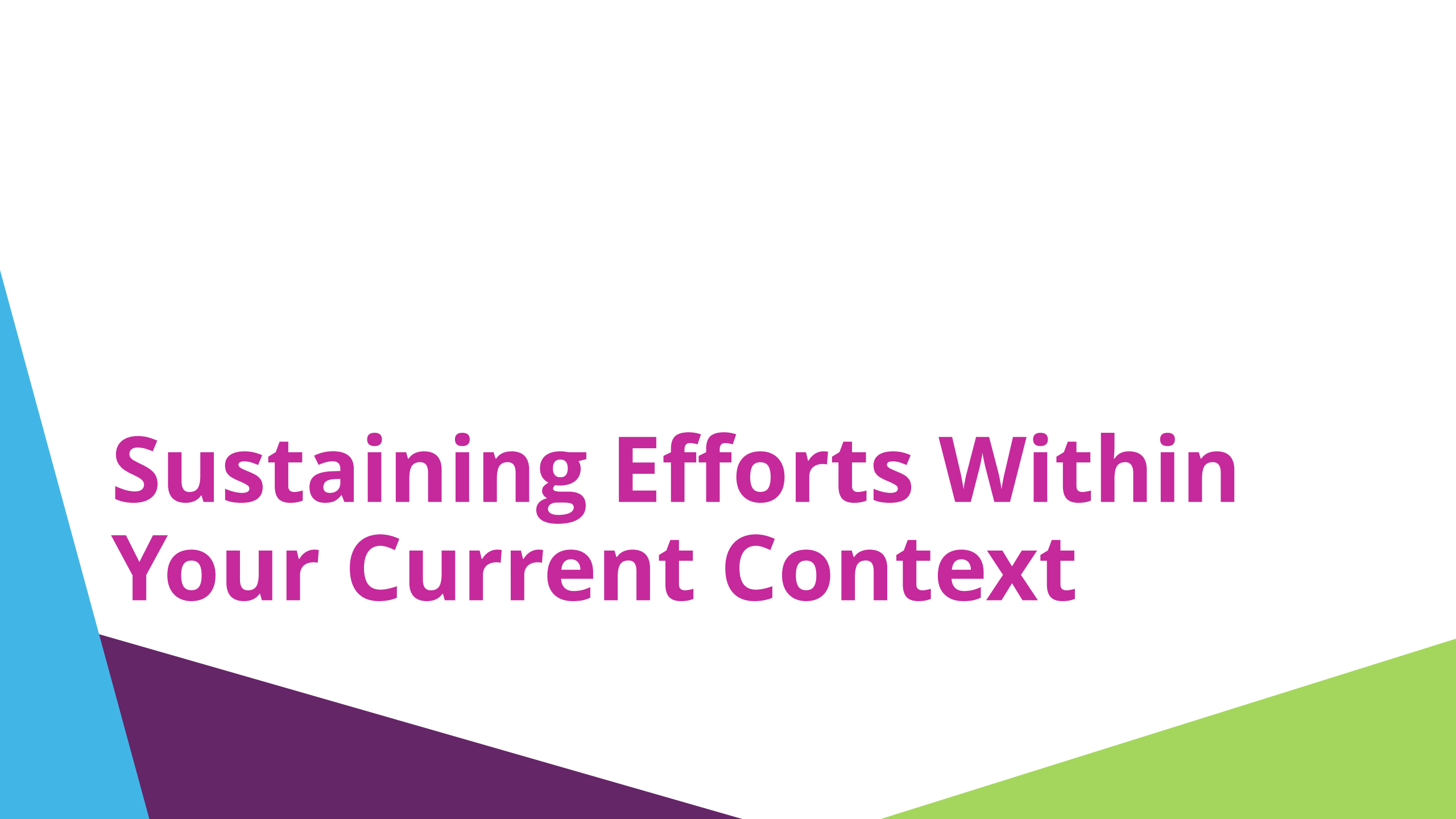
- ▶ Environmental Support
- ▶ Funding Stability
- ▶ Partnerships
- ▶ Organizational Capacity
- ▶ Program Evaluation
- ▶ Program Adaptation
- ▶ Communications
- ▶ Strategic Planning

## Clinical Sustainability Assessment Tool

- ▶ Engaged Staff & Leadership
- ▶ Engaged Partners
- ▶ Organizational Readiness
- ▶ Workflow Integration
- ▶ Implementation & Training
- ▶ Monitoring & Evaluation
- ▶ Outcomes & Effectiveness

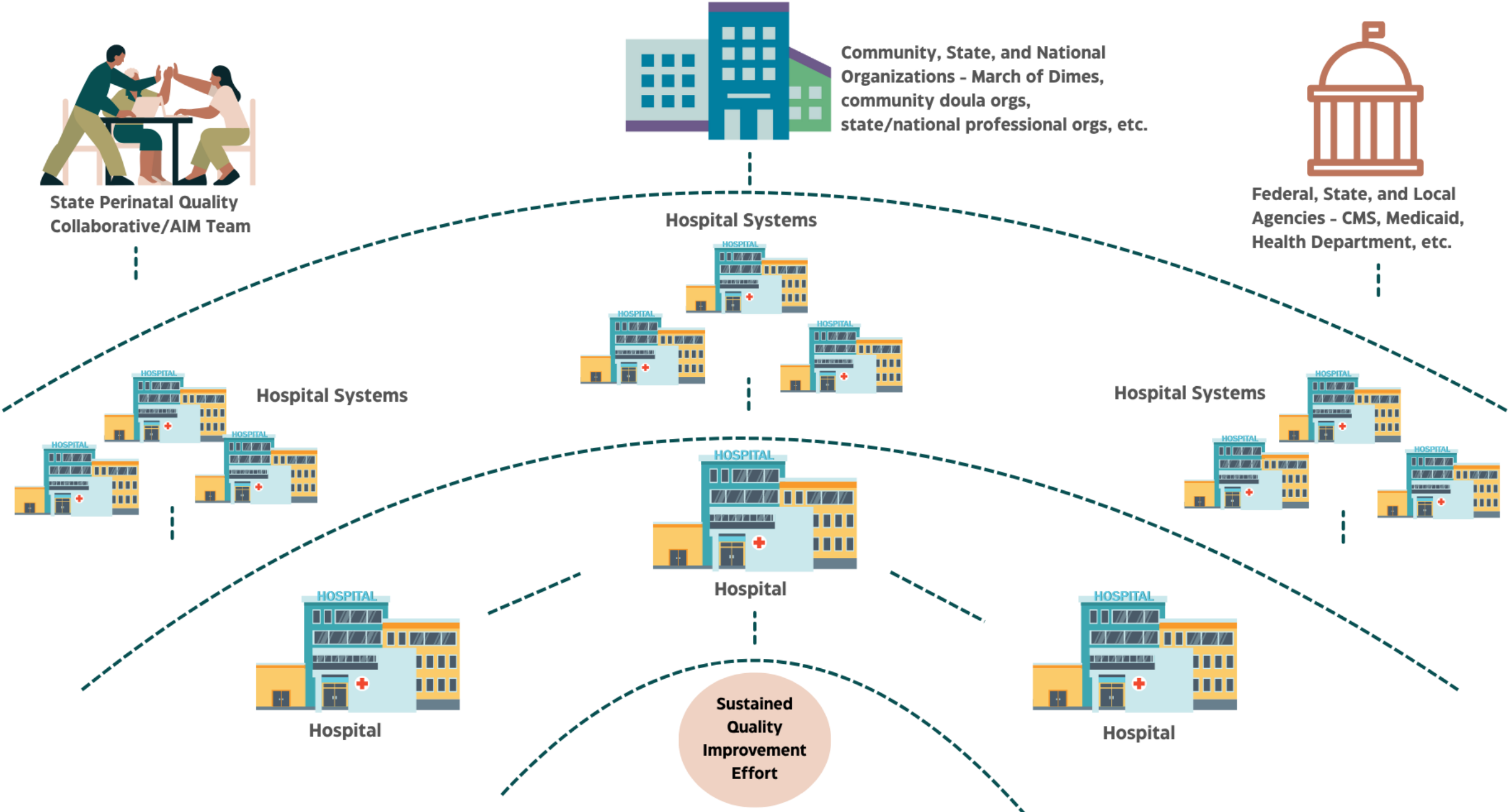
# Planning for Sustainability Tool



The background features three large, overlapping geometric shapes: a blue triangle on the left, a purple triangle at the bottom left, and a green triangle at the bottom right.

# **Sustaining Efforts Within Your Current Context**

# Systems-Level Factors Influencing Sustainability



# Hospitals

## Culture of Quality Improvement

- ▶ **Data collection**
- ▶ **Collaboration/communication** among hospital departments
- ▶ **Public recognition** of providers and staff



# Hospitals, Continued

## Culture of Accountability

- ▶ Credentialling
- ▶ National data requirements
- ▶ Reporting in **interdisciplinary** staff meetings
- ▶ Report to community
- ▶ Utilize patient partners



# Hospital Systems

- ▶ Increase leverage for culture change
- ▶ **System-wide** staff positions
- ▶ Shared staff
- ▶ Shared supplies



# State Perinatal Quality Collaborative/ AIM Team

- ▶ Assist hospitals with **QI initiatives, bundle implementation**
- ▶ Safety bundles, webinars
- ▶ Hospital **public recognition**
- ▶ Report data already reported
  - ▶ easier for community awareness
- ▶ Serve as **experts**
- ▶ **Communicate** with state/national elected officials
- ▶ Use resources from all states!



# Federal, State, and Local Agencies

## CMS – Conditions of Participation (CoPs) for hospitals and CAHs

- Required **quality improvement and clinical activities**
- **Data reporting** – public facing

## State Medicaid Agency/Contracted Entities

- **State hospital/provider requirements**, data reporting

## State/Local Health Departments

- Data
- State rules
- **MMRC, other statewide committees**
- Resources



# Community, State, and National Organizations

- ▶ Professional Organizations
  - ▶ Standards
  - ▶ Practice recommendations
- ▶ Hospital Associations
  - ▶ Perinatal Workgroup
  - ▶ Required quality activities, reporting
- ▶ State/Community Organizations
- ▶ AMCHP/ASTHO



# Contingency Planning

# Consider

- ▶ What **resources do you currently have** to support your change effort?
- ▶ How **critical** is this change effort? Can it be stopped if need be? Can it be pared down but still be effective/achieve intended outcomes?
- ▶ What **challenges might arise** in trying to implement this change effort given an uncertain environment?
- ▶ How you might **diversify funding streams, identify opportunities to share resources and costs**, etc.?
- ▶ How will you **communicate any changes** to staff, partners, and patients?

# Case Study

## **A community hospital implemented the Severe Hypertension in Pregnancy and the Postpartum Discharge Transition Bundles:**

- ▶ A Postpartum Discharge RN staff position was established to provide education and coordinate transition to outpatient care.
- ▶ A Cuff Kit Program was also established
- ▶ Data collected during implementation included:
  - ▶ Blood pressure taken at discharge
  - ▶ Warnings Signs education
  - ▶ Postpartum appointment made with appropriate timeliness
  - ▶ Readmissions with dx postpartum HTN/preeclampsia/eclampsia

# Case Study

Given the current environment:

- ▶ What challenges might arise when implementing these processes?
- ▶ What components should be prioritized?
- ▶ What resources are available?
- ▶ What data should be collected?
- ▶ What should be communicated and with whom?





# **Breakout Session (20 minutes)**

# Discussion

- ▶ Look at the PSAT or CSAT – which domains do you think you have strengths in? Where might you need to spend more time or effort? Do you have any leverage points that you can build off?
- ▶ What resources or support would be helpful for you to have to more fully sustain your work? Where can you access these resources? Consider the larger system you work within.
- ▶ Do you have a contingency plan in place? If so, what insights can you share with others about this process? If not, what might your next steps be to develop one?



# 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 complete the evaluation survey!  
It will pop up in your browser as you exit the session

Remember to register for upcoming AIM REDCap Learning Sprint!