AIM Biannual Reporting Survey – [SEASON YEAR]

Start of Block: Demographics
T1 Thank you for completing the [SEASON YEAR] AIM Biannual Reporting Survey! The purpose of this survey is to collect data to evaluate the reach of the AIM program, identify state and jurisdiction teams' technical assistance needs, and determine needed improvements to the program.
Unless otherwise specified, please answer all questions.
Q1 Which state or jurisdiction do you represent?
▼ Alaska Wyoming
Q2 What is your name?
Q3 What is your email address? Please enter a valid email.
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End of Block: Demographics
Start of Block: Participating Facilities

T2 This section focuses on birthing facilities participating in AIM with your state or jurisdiction team.
Q4 As of [END OF REPORTING PERIOD], what is the total number of birthing facilities in your state or jurisdiction?
This field only accepts numbers.
Q4a How many of these facilities are hospitals?
Q4b How many of these facilities are freestanding birth centers (i.e. not a labor and delivery unit within a hospital)?
 Q5 To the best of your knowledge, who else is participating in patient safety bundle implementation in your state or jurisdiction, beyond labor and delivery units in birthing hospitals? Non-birthing hospitals (hospitals without a labor and delivery unit) Operating rooms Critical care or intensive care units EMS/first responders Urgent cares Blood banks EDs (within birthing facilities) EDs (freestanding) Outpatient clinics Substance use disorder Mental health Other (comment)
Q6 How does your state or jurisdiction team define birthing facility for reporting to AIM?
Information provided gives contextual information on how birthing facilities data are reported to AIM.

Q7	
Of your state or jurisdiction's [NUMBER OF BIRTHING FACILITIES FRO facilities, how many participate in AIM with your state or jurisdiction tean REPORTING PERIOD]?	
For the purposes of reporting to AIM, please define a facility as participat any of the following criteria:	ing in AIM if it meets
 Formally plans to begin implementation of quality improvement (QI) propention patient safety bundles (PSBs) with your state or jurisdiction team 	iects based on AIM
• Currently implements QI projects based on AIM PSBs with your state or	jurisdiction team,
including pilot projects • Is sustaining QI projects based on AIM PSBs with your state or jurisdicti	ion team
• Is otherwise engaged in AIM QI activities with your state or jurisdiction to	
This field only accepts numbers.	
Q8	
Of your state or jurisdiction's [NUMBER OF FACILITIES POPULATED FF birthing facilities, how many began participating in AIM with your state of between [DATE RANGE FOR DATA COLLECTION PERIOD]?	
For the purposes of reporting to AIM, please define a facility as participat any of the following criteria:	ing in AIM if it meets
Formally plans to begin implementation of quality improvement (Q AIM nation) safety hundles (DSPs) with your state or jurisdiction to	
 AIM patient safety bundles (PSBs) with your state or jurisdiction to Currently implements QI projects based on AIM PSBs with your state 	
team, including pilot projects	
 Is sustaining QI projects based on AIM PSBs with your state or juil Is otherwise engaged in AIM QI activities with your state or jurisdiction 	
This field only accepts numbers.	
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Q9 How many birthing facilities stopped participating in AIM with your state or jurisdiction team due to permanent hospital or OB department/Labor & Delivery unit closures between [DATE RANGE FOR DATA COLLECTION PERIOD]?
This field only accepts numbers.
Q10 How many birthing facilities stopped participating in AIM with your state or jurisdiction team due to temporary hospital closures or suspensions of OB/Labor & Delivery services between [DATE RANGE FOR DATA COLLECTION PERIOD]?
This field only accepts numbers.
Q11 How many birthing facilities stopped participating in AIM with your state or jurisdiction team due to reasons other than temporary or permanent closures between [DATE RANGE FOR DATA COLLECTION PERIOD]? This field only accepts numbers.
SKIP PATTERN - Display This Question: If If How many birthing facilities stopped participating in AIM with your state or jurisdiction team due to reasons other than temporary or permanent closures between [DATE RANGE FOR DATA COLLECTION PERIOD]? Text Response Is Greater Than 0
Q12 Please share why facilities stopped participating in AIM with your state-based team for reasons other than temporary or permanent closures.
Please be as detailed and specific as possible in your response.

The following questions ask you to reflect on your state or jurisdiction team's goals and progress regarding birthing facility participation in AIM. Please be as detailed as possible in your responses.
Questions 13 and 14 will be asked when states initially enroll in AIM and no more than every
other year after enrollment.
Q13 What are your state or jurisdiction team's strategies for enrolling birthing facilities in AIM? Do you intend to engage all birthing facilities in AIM? If not all, which facilities do you focus engagement efforts on and why?
Q14 What is your strategy for engaging with birthing facilities not currently participating in AIM?

End of Block: Participating Facilities
Start of Block: Patient Safety Bundles
T3 This section focuses on AIM patient safety bundle implementation in your state or jurisdiction.
Q15 As of [INSERT DATE], which AIM patient safety bundle(s) is your team currently implementing with participating facilities?
This may include active implementation or sustaining implementation with participating facilities. Select all that apply.
□ Obstetric Hemorrhage
□ Severe Hypertension in Pregnancy
 Safe Reduction of Primary Cesarean Birth Cardiac Conditions in Obstetric Care
□ Sepsis in Obstetric Care
□ Postpartum Discharge Transition
□ Perinatal Mental Health Conditions
 Care for Pregnant and Postpartum People with Substance Use Disorder
□ ⊗ We are not currently implementing any AIM patient safety bundles
Q16
As of [INSERT DATE], how many facilities are participating in implementing each patient safety
bundle? This may include active implementation or sustaining implementation with participating
facilities.
Possible validation – check that the number of facilities implementing a single bundle doesn't exceed the total facilities participating in Q7. Allow respondents to go backwards in the survey to correct numbers if needed.
Obstetric Hemorrhage: birthing facilities
Severe Hypertension in Pregnancy: <i>birthing facilities</i>

Safe Reduction of Primary Cesarean Birth: birthing facilities Cardiac Conditions in Obstetric Care: birthing facilities Sepsis in Obstetric Care: birthing facilities Postpartum Discharge Transition: birthing facilities Perinatal Mental Health Conditions: birthing facilities Care for Pregnant and Postpartum People with Substance Use Disorder: birthing facilities Q17 Which AIM patient safety bundle(s) does your team plan to begin implementing in the next six months?
Select all that apply.
 □ Obstetric Hemorrhage □ Severe Hypertension in Pregnancy □ Safe Reduction of Primary Cesarean Birth □ Cardiac Conditions in Obstetric Care □ Sepsis in Obstetric Care □ Postpartum Discharge Transition □ Perinatal Mental Health Conditions □ Care for Pregnant and Postpartum People with Substance Use Disorder □ ⊗ We do not currently plan to begin implementing any additional AIM patient safety bundles in the next six months.
Q18 How does your state or jurisdiction decide which patient safety bundles to implement (including, if applicable, the data sources you use to inform the decision)?
End of Block: Patient Safety Bundles

Start of Block: Live Births

T4 This section focuses on live births among facilities participating with your state or jurisdiction team. [Section is asked annually in the first survey of the year]
Q18 How many live births occurred in the [NUMBER OF PARTICIPATING BIRTHING FACILITIES] birthing facilities participating in AIM with your state or jurisdiction team?
 Reporting criteria: Report aggregate live birth data among all facilities participating in AIM with your state or jurisdiction team. Use birth certificate data for reporting. Use the most recent full calendar year of data when reporting. Use occurrent births among participating facilities when reporting. Occurrent births refer to births that occurred in the state or jurisdiction your team represents, regardless of the person who gave birth's status as a state or jurisdiction resident. Finalized data are preferred, but provisional data are accepted.
Display This Question: If If How many live births occurred in the [NUMBER OF PARTICIPATING BIRTHING FACILITIES] birthing facilities participating in AIM with your state or jurisdiction team? Reporting criteria: Re Text Response Is Greater Than 0
Q19 Which calendar year did you use to report live births among facilities participating in AIM with your state or jurisdiction team?

Display This Question:

If If How many live births occurred in the [NUMBER OF PARTICIPATING BIRTHING FACILITIES] birthing facilities participating in AIM with your state or jurisdiction team? Reporting criteria: Re... Text Response Is Greater Than 0

Q20 Did you use finalized or preliminary birth certificate data to report live births among facilities participating in AIM with your state or jurisdiction team? o We used finalized birth certificate data o We used preliminary birth certificate data o We did not use birth certificate data to report live births (please explain)
Display This Question: If If How many live births occurred in the [NUMBER OF PARTICIPATING BIRTHING FACILITIES] birthing facilities participating in AIM with your state or jurisdiction team? Reporting criteria: Re Text Response Is Greater Than 0
Q21 Did you use all births, regardless of residence, to report live births among facilities participating in AIM with your state or jurisdiction team?
All births, regardless of residence, refer to occurrent births, which are births that occurred in the state or jurisdiction your team represents, regardless of the person who gave birth's status as a state or jurisdiction resident.
Resident births refer to births by people who are residents of the state or jurisdiction your team
represents. o We used resident births only
o We used all births, regardless of residence
o Other
Q22

Q22 Please share any barriers you experience accessing vital records information in your state. Please be as detailed and specific as possible in your response.

End of Block: Live Births	
Start of B	lock: Facility Engagement
	ection focuses on learning and technical assistance opportunities your state or team organized for its clinical/facility teams participating in AIM.
of education	1:1 or Small Group Technical Assistance Conferences or Summits Webinars
	Peer Mentorship or Learning Simulation and Drill Training Other
	⊗ We did not offer any educational activities to clinical/facility teams during this reporting period.

	[DATE RANGE FOR DATA COLLECTION PERIOD], has your state or jurisdiction ountered any barriers to offering educational activities to clinical/facility teams?
Select all	that apply.
	Lack of resources - State or jurisdiction team Lack of resources - Clinical/facility teams Lack of engagement, other reasons - Clinical/facility teams
	Difficulty planning and coordinating educational activities - State or jurisdiction team Other
	⊗ We have not encountered barriers offering educational activities to clinical/facility teams during this reporting period
End of Bl	ock: Facility Engagement
	ection focuses on your state or jurisdiction team's use of newly developed resources nunications preferences.
work? [T/	the following AIM resources <u>has your state or jurisdiction team used</u> to support your the list of AIM resources in the response options will be updated for each survey to e relevant AIM resources at the time the survey is released.]
Select all	that you have used.
	Patient Safety Bundle Change Packages Patient Safety Bundle Resource Listings Patient Safety Bundle Implementation Webinars Patient Safety Bundle Introduction Videos AIM for Patient Safety: Bundles at the Bedside Video Technical Assistance Presentation Webinars AIM Clinical Champions Social Media Toolkit

Q26 Which of the following AIM resources were you not aware of?	
Response options will be the same as those included in Q 25 and will be updated each survey to include recent resources.	
Q27 (Optional) How could we improve our communication about new AIM resources?	
	. —
Q28 Please rank how you prefer to receive communications from AIM.	
Click and drag each category to rank by preference. 1 is most preferred, 5 is least preferred.	
Monthly Newsletter Website Announcements Social Media Posts Standing Meetings and Check Ins Direct Emails from Program Staff	
Q29 (Optional) Please share any other feedback on AIM resources and communications.	

End	of Block: AIM Resource Utilization	
Q30 What supports does your team need to adapt implementation of AIM patient safety bundle elements based on facility resources or level of care?		