

Better Maternal Outcomes: An IHI Rapid Improvement Network

Rural Hospital Wave



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Each year, at least 700 women in the US die due to complications in childbirth. For each instance of maternal mortality, approximately 100 women experience complication-related harm. US maternal mortality rates have worsened over the last 15 years, at a time when rates in other countries have improved. In the US, the burden of mortality and morbidity falls disproportionately on African-American women with maternal mortality rates three to four times higher than that of white women.[i] Mortality risk from causes related to pregnancy and childbirth is significantly higher for women living in rural areas compared to women living in urban areas. These disparities are deeply rooted in socioeconomic and demographic factors, geography, and issues related to the health care workforce. In spite of these challenges, rural hospitals around the country strive to provide safe, high quality maternity care.

Wave 3 of the Better Maternal Outcomes Rapid Improvement Network is designed for providers in rural hospitals and health systems who are committed to improving maternal outcomes and delivering safe, equitable, and respectful care in their maternity services. Participating organizations will learn how to spread best practices and protocols through a variety of shared learning formats and practical, how-to guidance. The goal of the network is to equip participants with the knowledge and skills to needed to reliably implement promising practices and improve care delivery for all women and newborns.

What participants can expect

- Education and programming focused on critical safety issues including severe hypertension and preeclampsia, venous thromboembolism, obstetric hemorrhage, safe reduction of Cesarean births, and a host of emerging issues specific to rural settings
- Real-world examples and learning from rural hospitals and providers who have developed innovative models and strategies
- Quality improvement tools to help participants reach their goals and bridge the gap between "what we know" and "what we do," including a learning system platform to connect providers, organizations, and communities doing similar work
- Support for hospital teams on rapid testing to identify what works in different contexts and conditions at scale
- Access to results and learning from other related initiatives, including partnerships with communities focused on reducing disparities and improving equity in maternal outcomes
- An action-orientation: IHI will use existing assets, projects, and relationships to move participants into actions that will improve birth equity, dignity, and maternal outcomes.

Details about the network

Participants will enroll in a 6-month wave with a cohort of other hospitals and providers working in rural areas. The wave will include:

- More than 10 live webinars, and virtual office hours with experts from many facets of the system (research, clinical leadership, quality and safety leaders, mothers, and front-line clinicians), providing practical, how-to advice for improving maternity care in rural settings
- Virtual peer-to-peer networking opportunities around a variety of topics and interests
- How-to-guides and quality improvement tools customized to support bundle implementation and build local improvement skills

Learn More

To learn more and enroll in the spring 2020 wave, visit **ihi.org/maternalhealth**

[i] Louis JM, Menard MK, & Gee RE. (2015). Racial and ethnic disparities in maternal morbidity and mortality. Obstetrics and Gynecology, 125(3):690-4.



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