SECTION 1
RESPECTFUL PERINATAL CARE FOR PEOPLE WITH SUBSTANCE USE DISORDERS
Stigma, bias and discrimination impact the ability of pregnant and postpartum people with substance use disorders (SUDs) to get high quality care. In 2021, the Alliance for Innovation in Maternal Health (AIM) published a revised Patient Safety Bundle for the Care of Pregnant and Postpartum People with Substance Use Disorders. This toolkit aims to provide healthcare teams and health systems in New Hampshire with needed resources to ensure all people have access to comprehensive, supportive, equitable, and evidence-based perinatal services.

Although substance use disorders affect pregnant people in all demographic groups, not all people have equitable access to necessary services. Racism and discrimination against LGBTQ2S+ individuals, low income, and rural people impact their ability to access high quality treatment and patient-centered pre- and postnatal care. Therefore, AIM calls on every healthcare system to develop trauma-informed protocols and antiracism trainings to address team member biases and ensure a respectful care environment where all pregnant people are welcomed, including pregnant people with SUD.

This toolkit was designed and developed through collaboration between the Northern New England Perinatal Quality Improvement Network (NNEPQIN) and the New Hampshire Community Health Institute, with the generous support from the March of Dimes and the New Hampshire Charitable Foundation.

1. Alliance for Innovation on Maternal Health (AIM) Initiative

The Alliance for Innovation in Maternal Health (AIM) is a coalition of over 30 organizations working toward reducing preventable maternal mortality and severe morbidity across the U.S. AIM is funded through the federal Health Resources and Services Administration and facilitated by the American College of Obstetricians and Gynecologists (ACOG). AIM’s multidisciplinary groups of national experts compile best practices around maternal health conditions and strategies for their implementation to form maternal safety bundles. Metrics for the AIM bundles assist facilities in the process of data driven quality improvement.

In 2017, AIM published the bundle “Obstetric care for women with opioid use disorder” followed by the development of web-based resources including clinical pathways. In 2021, the bundle was revised to address perinatal substance use disorders more generally. NNEPQIN has been a contributor to this AIM bundle and revision, and are proud to be an early adopter. [link to AIM SUD bundle and implementation guide here]