

Welcome!



Introductions & Roll Call!

Please chat your name and hospital into the chat box

Please change your name to your first name and hospital you represent

▼

Zoom Group Chat

From Me to [Everyone](#):
Aviel Peaceman, Boston Medical Center

To:

Everyone ▼

...

Type message here...

Wednesday, April 21st Agenda

Time	Topic
2:00	Welcome, Introductions, and Roll Call
2:05	NeoQIC Family Engagement Updates
2:15	Keynote Speakers – Jheanell & Jerome
2:50	Next Steps

Overall Collaborative Updates

Meg Parker, MD, MPH



Neonatal Quality Improvement Collaborative of Massachusetts

Team Spotlight - Emerson

- Emerson hospital is located in Concord, MA, and has a level 2 special care nursery.
- The Emerson Family Engagement QI team is led by Rachel Kradin, a Mother/Baby & Pediatric Social Worker.
- Within the last six months, the Emerson team has submitted five PDSAs!! These have focused on streamlining their approach to family meetings, access to lactation support, and skin-to-skin care. This work overlaps with 2 of our key drivers-- communication and hands-on-care.



Neonatal Quality Improvement Collaborative of Massachusetts

Plan Do Study Act Cycles in 2021

- Plan Do Study Act Cycles submitted in January-March 2021
 - 10 teams total have submitted
 - 14 total PDSA cycles
- Key Drivers:
 - Communication- 5
 - Social supports- 2
 - Hands on care- 7
 - Discharge planning- 0



Data Use Agreements and IRBs

- Data use agreements
 - Master agreement and “scope of work” are complete (!!)
 - This will be major focus of next few months
 - We will reach out to team leads
- IRB review complete for 13 teams
 - 5 reviewed as “QI”
 - 1 reviewed as “exempt”
- Tracks
 - 2 teams interested in “track 1”
 - 11 teams interested in “track 2”



Data Platform

- REDCap at Boston Medical Center
- 4 Forms
 - 1) Chart abstracted measure form
 - 2) Parent enrollment form
 - 3) Parent immediate discharge survey
 - 4) Parent 4-8 week discharge survey
- Inclusion criteria for chart abstracted forms:
 - Admitted at **least 1 week**
 - Admitted **January 1 2021 or later**
 - Inborn or outborn
 - Any language
- Inclusion criteria for parent reported forms
 - Same as above, except English/Spanish
 - Parent must consent

We will conduct 1 on 1 meetings with sites when you are ready with data abstraction to walk you through the process. We have spent much time vetting this process and making it as simple as possible!!

We are here to help!!

We have done this before!!



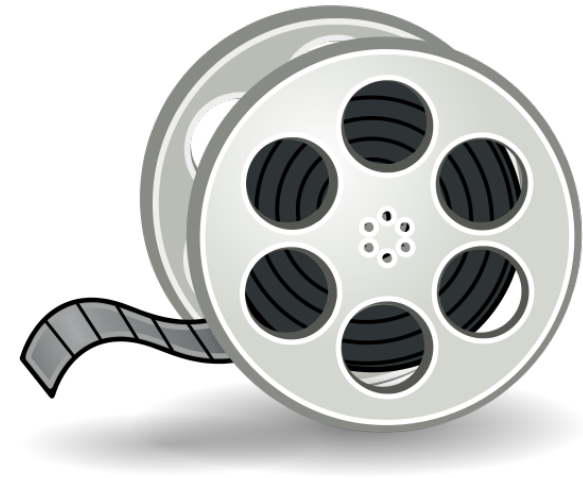
More logistics- MOC and Listserve

- MOC part 4 are nearly complete! Physicians will be able to get credits
- Listserve is live
 - Email: neoqichumanmilkqic-list@bu.edu



AAP Discharge Video Update

- **We have decided on 8 topics!**
 - Baby Discharge Readiness
 - Parent/Family Readiness
 - Parental mental health/social support
 - Safe Sleep
 - Feeding at home
 - Infant Care
 - Soothing and shaken baby
 - Follow-up medical and development care
- Next step is to narrow it down to 5 topics
- We want input from our Family Engagement team in Massachusetts and NICU families at large
- We will administer a short survey (1-2 minutes) to our collaborative members and to a variety of NICU family support groups across the US to make this decision



SPEAK UP!

SPEAK UP Champions® Implicit and Explicit Racial Bias Education

May 18 & 25, 2021
Massachusetts



INSTITUTE FOR
**PERINATAL
QUALITY
IMPROVEMENT**

www.perinatalQI.org

A Black woman is 3 to 4 times more likely to die of pregnancy-related complications than a white woman. Research shows that inequities in outcomes are primarily due to differences in how women are treated within the health care setting based on race (racism).

The SPEAK UP Champions® Implicit and Explicit Racial Bias education is 8 hours of live virtual interactive learning that outlines quality improvement strategies to support individuals and groups with dismantling racism, providing quality equitable care, and reducing health disparities.

Target Audience

Healthcare professionals who support and care for patients before, during and after pregnancy or professionals that care for newborns.

Conference Objectives

- 01** Background Knowledge
Describe factors that contribute to perinatal disparities based on a social justice framework.
- 02** Improvement Science
Outline quality improvement strategies and tactics for eliminating implicit and explicit bias when caring for women before, during, and after pregnancy.
- 03** Action Plan
Develop a quality improvement action plan for ensuring equity in perinatal outcomes.

Quotes from Previous Participants

“Eye opening!”

“I will continue to check myself and speak up when I see bias.
Excellent training! Thank you!”

“Great training. Very helpful and empowering!”

Faculty

Debra Bingham, DrPH, RN, FAAN
Renée Byfield, MS, RN, FNP, C-EFM

Sample of Learner General Comments

“I was a little nervous attending the conference, because racism is such an emotionally charged subject; but I’m SO glad I did. The speakers were amazing, the format was conducive to learning, and the breakout groups were engaging.”

“Thank you SO much! Such an inspiration & wonderful conference.”

Sample of Top Two or Three Takeaways

- *“The concept of **race as a social construct**. Discussions re: race and figuring out how to navigate in an educated and respectful way.”*
- *“**It is RACISM, not RACE**, that is a risk factor in health outcomes. Race is a social construct. **SPEAK UP!**” “I learned bout my own implicit bias and I will strive to be aware and to follow the **SPEAK UP** Program against racism. I **learned about medical abuse and mistreatments** that happened in history to Black people that I was not aware of.”*
- *“I have a better understanding of the **difference between equity and equality**. I really understand the strong disparities that are apparent in the statistics surrounding childbirth.”*
- *“The **insidiousness of bias**.”*
- *“**Daily reflections**. Not being silent.”*

New Publication on Addressing Racial Disparities in Perinatal Care Using a QI Approach



Available online at www.sciencedirect.com

Seminars in Perinatology

www.seminperinat.com



Quality improvement approaches to reduce racial/ethnic disparities in the neonatal intensive care unit

Margaret G. Parker^{a,*}, and Sunah S. Hwang^b

^aDepartment of Pediatrics, Boston Medical Center, Boston University School of Medicine, 88 E Newton St, Vose Hall, 3rd Floor, Boston, MA 02118, United States

^bDepartment of Pediatrics, Colorado Children's Hospital, University of Colorado School of Medicine, United States

ARTICLE INFO

ABSTRACT

Inequities in neonatal care quality and outcomes persist. Current models of neonatal quality improvement (QI) typically involve implementation of standardized approaches to clinical care that seek to provide consistent care to all infants and their families, which may neglect to account for the unique needs of diverse patient populations. Current approaches often fail to track outcome and process measures by important social disparity metrics, such as race/ethnicity and primary language. Despite these shortcomings, use of a QI structure has tremendous potential to address disparities in neonatal care. Crucial components of a QI approach to achieve health equity include: (1) Identifying equity goals from the inception of a project; (2) Inclusion of diverse family members on multidisciplinary teams; (3) Tracking outcome and process measures according to disparity metrics; and (4) Conducting interventions that preferentially address barriers of high-risk social groups. Hospital-system commitment to diversity and inclusion in the healthcare work force, recognition of the impact of unconscious provider bias and advocacy in the greater public health setting are needed to address underlying social inequities that impact neonatal care quality.

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Neonatal Quality Improvement Collaborative of Massachusetts

Keynote Speaker

Introduction by Molly Wylie



Neonatal Quality Improvement Collaborative of Massachusetts



5 Days!

You're having twins!

- Admitted March 19,2020 for Preterm labor
- March 23, 2020, Massachusetts Covid-19 Pandemic Lock-down
 - Stay at home advisory
 - Required to stay at the hospital for 24/7 monitoring

March 24,2020



- Jade Anita, born at 3:46pm, 1lb 11 oz
- Jacob Thomas, born at 3:48 pm, 1lb 7oz

NICU Resources

- NICU Family Program
- Covid-19 Impact
 - Constantly changing policies
 - Lack of support/connectedness



NICU Stay

- Strong nurse support
- Attentive daily to the babies and parents
- Provided informative updates no matter how small
- COVID conscious



How are they doing now?

- Jade and Jacob are thriving
- EI, NICU Grads
- 1 year old
- Crawling
- Their first words were the same
- Clapping, laughing, and discovering their voices is constant





Any Questions?



We want to know your thoughts!

“How do you feel after listening to today's talk?”



[Link to Live Results](#)

Next Steps for Teams



Next Steps

- IRB: Team leads should be working on submitting their IRBs, if you haven't done so already
 - Please feel free to reach out to us with questions!
 - Once your IRB has been approved, please let us know.
- DUA status: Master NeoQIC agreement and Scope of Work
- Update on Team Rosters



Homework and PDSA Forms

- The next monthly homework form will be due by **April 30th 2021**
 - Email instructions to follow again closer to the deadline
- This includes working on a PDSA. Please fill out as much as you can on your PDSA, even if it's just part of a new plan or an update to last month's plan!

PDSA FORM

Hospital		Date	
Team Members		PDSA #	
PDSA TITLE:			
PDSA STATUS:	<input type="checkbox"/> Planned, not initiated <input type="checkbox"/> Planned and in progress <input type="checkbox"/> Complete		

Part 1

“Aim” and “Plan” should be completed prior to initiating test, and can be updated during test as needed.

AIM

1. Which primary driver does this PDSA address?

Primary drivers for project are: (1) Communication; (2) Social support/services; (3) Hands-on care; and (4) Discharge planning

2. What is your AIM statement for your work on this key driver, including this PDSA cycle?

Use a “SMART” aim: specific, measurable, achievable, relevant, time-bound. Improve [what], from [baseline] to [goal], by [when].

PLAN

3. What is the change you are planning to test?

For new interventions, focus initially on small tests of change, rather than immediate broad implementation of new processes.



Upcoming Webinars

June 9th from 2-3 pm; focus will be team sharing in break-outs



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Thank you!

Questions?

**We enjoy working with all of you on this journey to improve
family engagement with NICU families across MA**

www.neoqicma.org



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