

NeoQIC Family Engagement Quality Improvement Collaborative Webinar

August 5, 2020



Neonatal Quality Improvement Collaborative of Massachusetts

Welcome, Introductions, and Roll Call

Meg Parker, MD, MPH

Neonatologist at Boston Medical Center

Associate Chair of the Neonatal Quality Improvement
Collaborative of Massachusetts


Improvement Advisor from the Institute for Healthcare
Improvement



Neonatal Quality Improvement Collaborative of Massachusetts

Welcome!

Please chat your name and hospital into the chat box

 **Zoom Group Chat**

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

To: Everyone ▼ ...

Type message here...

Happy World Breastfeeding Week!



Agenda

Time	Topic
2:00	Welcome, Introductions, and Roll Call
2:10	Project Updates
2:25	Hospital Spotlight: Melrose-Wakefield Hospital
2:40	Hospital Spotlight: UMass Memorial Health Care
2:55	Next Steps

Participating Level 2 and 3 NICUs in Massachusetts

- Baystate Medical Center
- Beth Israel Deaconess Medical Center
- Beverly Hospital
- BID – Plymouth
- Boston Children's Hospital
- Boston Medical Center
- Brigham and Women's Hospital
- Emerson Hospital
- Holy Family Hospital
- Lawrence Hospital
- Lowell General Hospital
- Massachusetts General Hospital
- Melrose Wakefield Hospital
- Metrowest Medical Center
- Mt. Auburn Hospital
- Newton Wellesley Hospital
- North Shore Medical Center
- Signature Healthcare Brockton Hospital
- South Shore Hospital
- Southcoast - Charlton Memorial
- Southcoast- St. Luke's
- St. Elizabeth's Hospital
- Tufts Medical Center
- UMass Memorial
- Winchester Hospital



Project Updates

Meg Parker, MD, MPH



Neonatal Quality Improvement Collaborative of Massachusetts

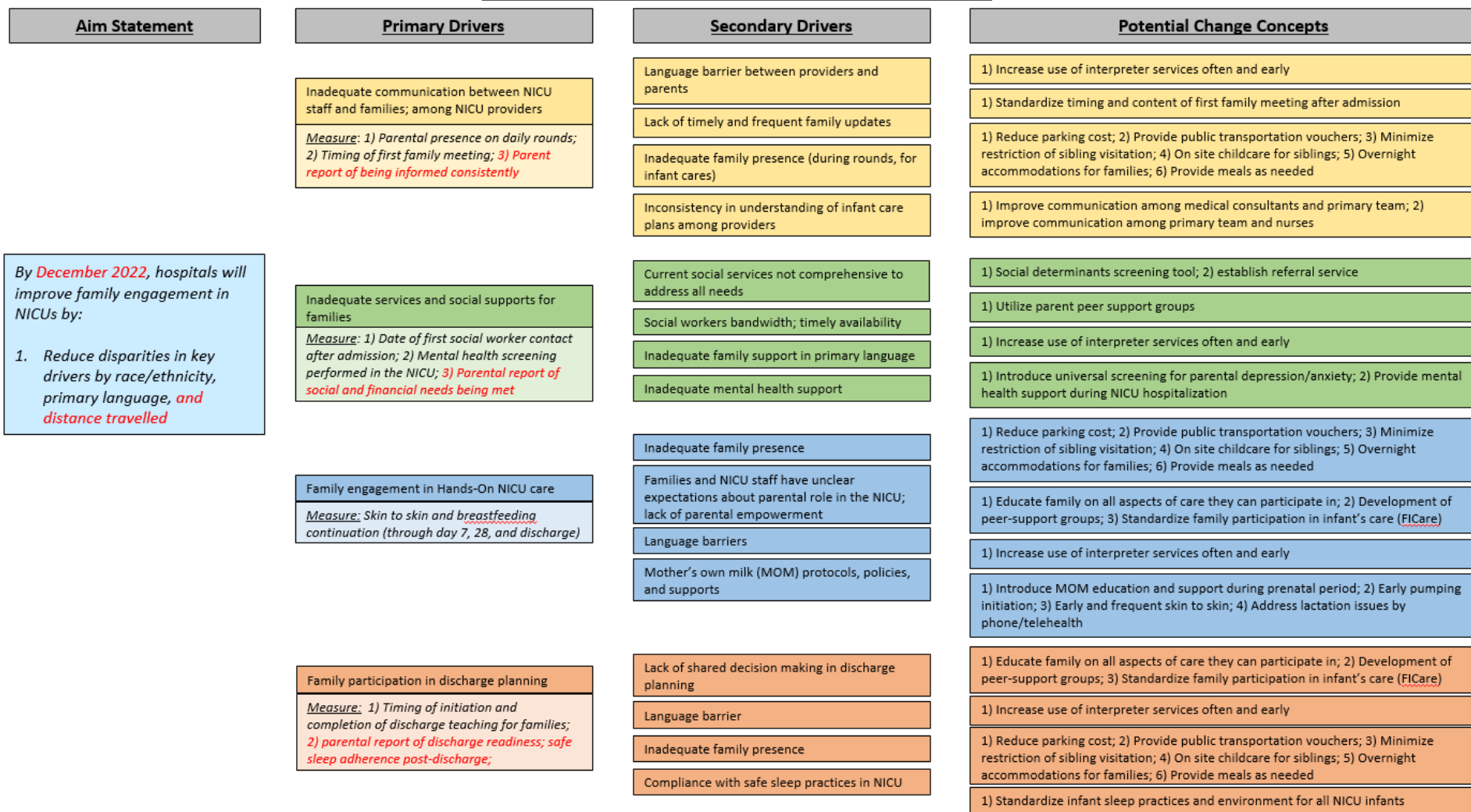
COVID-19 and Impact on Our Work

- We've continued to learn from COVID-19 that its important
- The death of George Floyd has brought to the forefront the importance of addressing racial disparities in our PNQIN work
- We know that COVID-19 will still be here for 6(+?) months, so we want to move this work forward in whatever capacity teams are able to



Key Driver Diagram- Family Engagement

Family Engagement QIC Key Driver Diagram



Key Drivers

1. Inadequate communication regarding infant medical care between NICU staff and families

2. Inadequate services and social supports for families

3. Family engagement in Hands-On NICU care

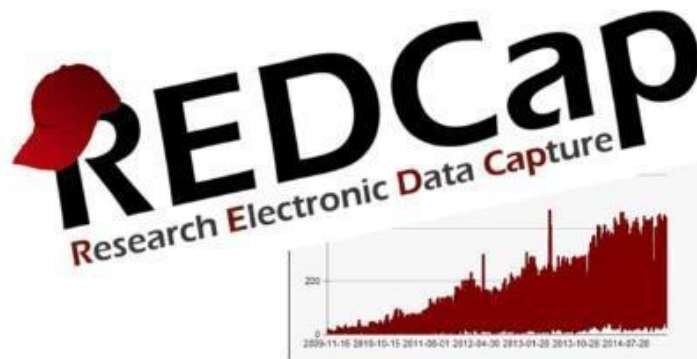
4. Family participation in discharge planning

Project Timeline

	2020				2021				2022			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Develop Data Metrics/Key Driver Diagram	X											
Pilot Data Metrics		X →										
Data Use Agreements/IRBs	X →	X →	X →									
Form multi-disciplinary hospital teams	X →											
Webinars	X	X	X	X	X	X	X	X	X	X	X	X
In-person/ virtual meetings	X		X		X		X		X		X	
Data collection and reporting				X	X	X	X	X	X	X	X	X
Interventions as PDSA cycles			X	X	X	X	X	X	X	X	X	X

Cornerstones of Perinatal Quality Collaboratives: Data Infrastructure

- We decide collaboratively as a group on a key driver diagram and set of metrics
- Teams submit data on core set of metrics
- We examine our data regularly throughout the collaborative to examine our progress
- We share our data openly to learn



Data Infrastructure- Two Tracks

- Track one: Chart abstracted measures
 - Traditional approach for NeoQIC and most perinatal QI collaboratives
 - Subset of data metrics that are tracked over time by all teams
 - Data is entered into a centralized data base (probably BMC)
 - Data use agreement needed between sites
 - IRB depends on the site
- Track two: Chart abstracted measures AND parent-reported measures
 - Because this is a family engagement collaborative, it is crucial to collect information directly from parents
 - We propose to send short, text message queries during the hospitalization and a slightly longer survey (~10 min) around discharge and post-discharge
 - This will involve asking parents permission to use their phone number and send these messages
 - Signed HIPAA waiver
 - Data use agreement to centralized data base
 - IRB needed at each site



Data strategies

- Work with institutions to create a single DUA that may include both tracks so that if a team wants to do track 1 to start, they can move to track 2 when they are ready
- Build text-messaging data queries within REDCAP and link the responses easily to the RECAP data
- Text-messaging- choose short, queries with yes/no responses or simple answer choices to increase parent responsiveness
- Discharge/post-discharge survey elements- goal overlap with data already collected at 3 hospitals understanding post-discharge infant care practices (feeding/sleeping)

Next Steps on Data

- Track one: Chart Abstracted Measures
 - In March, this group reviewed the measures and voted on feasibility
 - This is needed to move forward with IRBs and data use agreements
 - Higher priority
- Track two: Parent Reported Measures
 - We need to decide on our metrics
 - Will work more on this with the leadership team and send out for review
 - Need to better understand set up in REDCAP for text message queries
 - Also needed for IRBs and data use agreements



Next Steps on Data

- Think about the following questions for our meeting in September:
 - Do you have the bandwidth to begin monthly meetings for this project to address you interventions and small tests of change?
 - Do you think your hospital has the capacity to start the DUA process?



Any Questions?



Hospital Spotlight

Melrose-Wakefield Hospital

Kati Roe, MSN, RNC

Director, Maternal-Newborn Services



Neonatal Quality Improvement Collaborative of Massachusetts



The Impact of Covid-19 on Family Engagement in the Special Care Nursery

Kati Roe, MSN, RNC

Director | Maternal-Newborn Services

August 5, 2020

Special Care Nursery at MWH

- 10 beds
 - 3 warmers
 - 6 cribs
 - 1 negative pressure room
- Average census: 3.5 babies
- Level IIA
- Clinical Affiliation with Tufts Medical Center
 - Dr. Karen Harvey-Wilkes, Medical Director (recently retired)



Prior to Covid-19

- Visitation
 - Parents encouraged to visit
 - Relatives & siblings allowed to visit
- Interaction
 - Kangaroo care
 - Participation in care & feeding
- Accessibility
 - Business card with phone number for updates



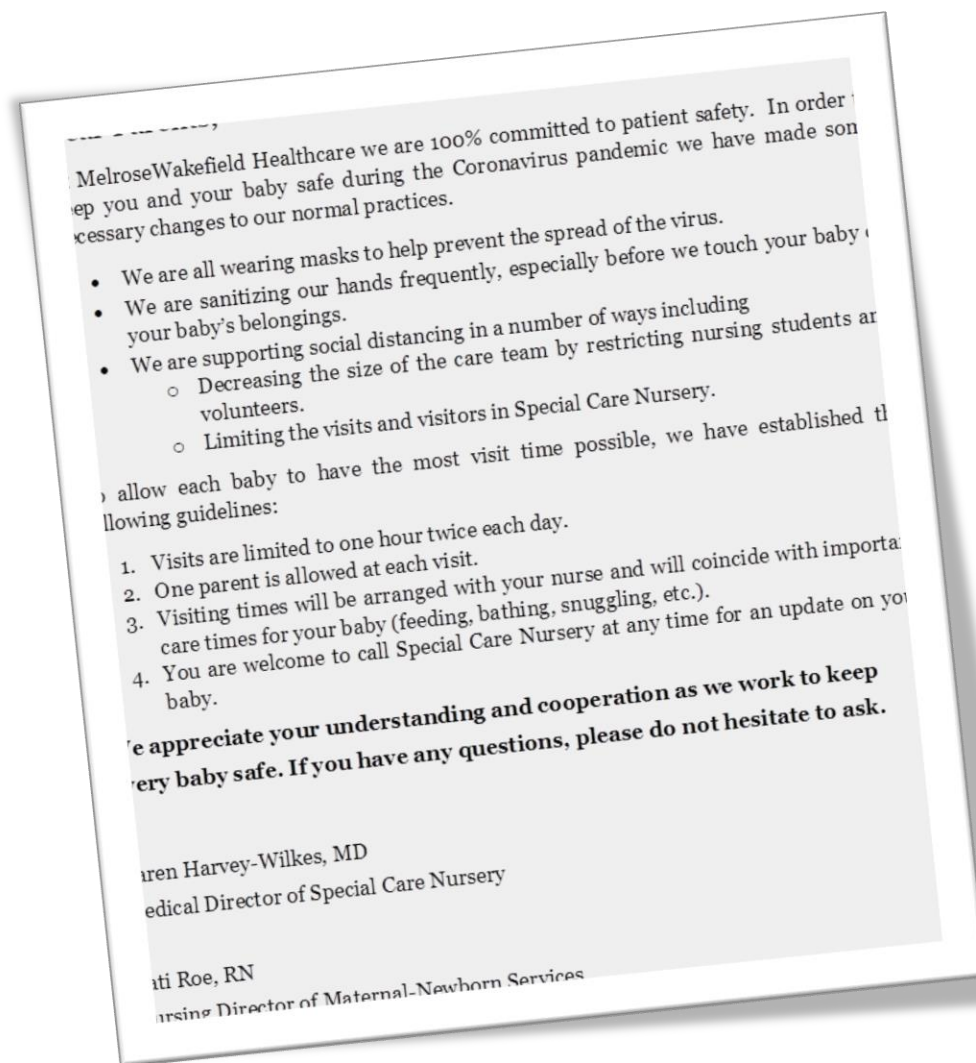
During Covid-19 Emergency

- Visitation
 - Parents allowed to visit with negative health screen & face mask
 - Relatives & siblings restricted
- Interaction
 - Kangaroo care
 - Participation in care & feeding
- Accessibility
 - Business card with phone number for updates
 - iPad for FaceTime & Zoom



Increased Census during Covid-19 Emergency

- 7 Babies with no anticipated discharges for several days
- Rearranged isolettes for social distancing
- Scheduled parent visits
 - 2x/day
 - 1 hour/visit
 - 1 parent/visit
- Encouraged parents to call/FaceTime/Zoom



Post Covid-19 Emergency

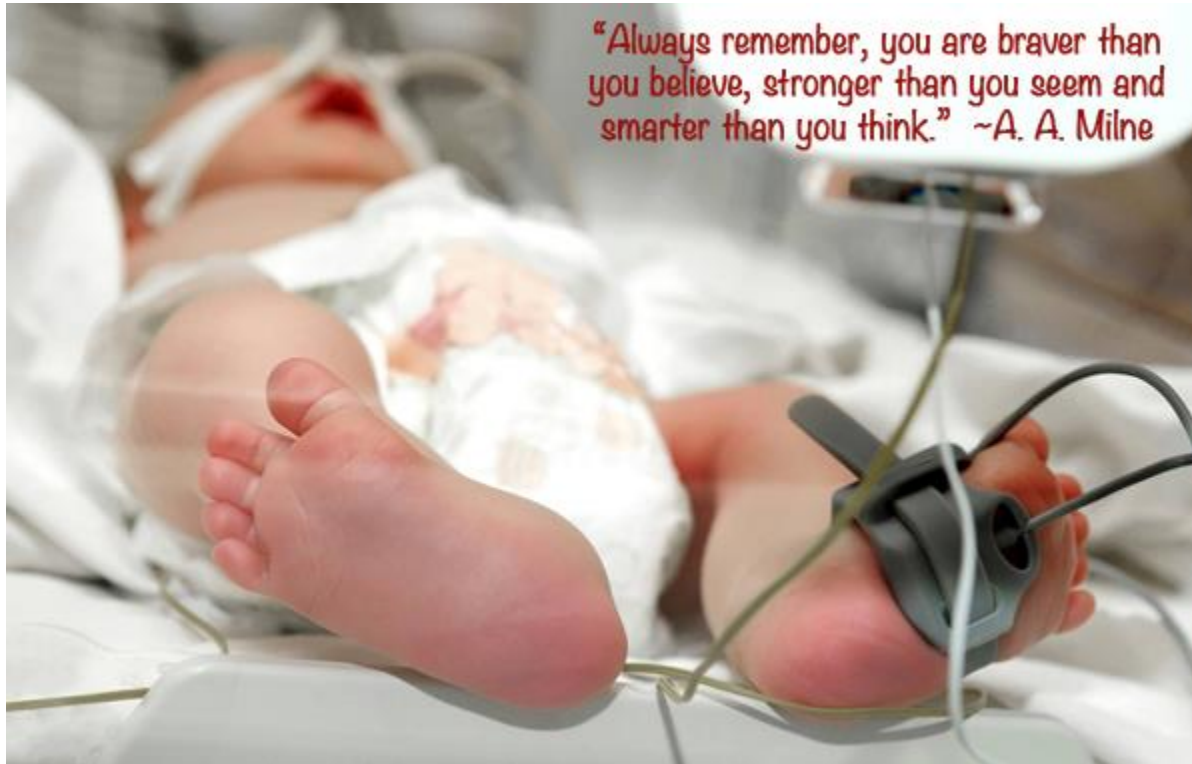
- Restricted access continues for now
 - No siblings or other family visitors
- Parents encouraged to visit
 - Health screening every day
 - Mask at all times
- Consider bed assignments to allow/encourage social distancing
- Isolation room reserved for PUI/Covid + babies

Special Accommodations

- NAS/Adoptive Parents
 - Staff relied on parents to hold/care for baby
 - Parents lived far from the hospital
 - Allowed to visit for long periods of time in a separate space
- Transfer from Tufts/Mom Covid +
 - Baby tested before accepted
 - Mom allowed to visit after afebrile and symptoms resolving x 10 days
- Baby born to Covid + mom required SCN level of care
 - Mom chose separation
 - In isolation room
 - Tested at 36 hours/negative, moved out of isolation

Family Engagement in Special Care Nursery

- Current Strengths
 - MD discusses plan of care with parents
 - Support services available to families (SW, IBCLC, PT, OT)
 - Small unit/small staff allows time for bonding with parents
- Current Gaps
 - Physical space (Large open room with no curtains or dividers)
 - Difficulty engaging families with diverse culture/language barrier
- Anticipated neoQIC/Collaborative Help
 - Tips, ideas, resources
 - Supportive conversations



Thank you!

Hospital Spotlight

UMass Memorial Health Care

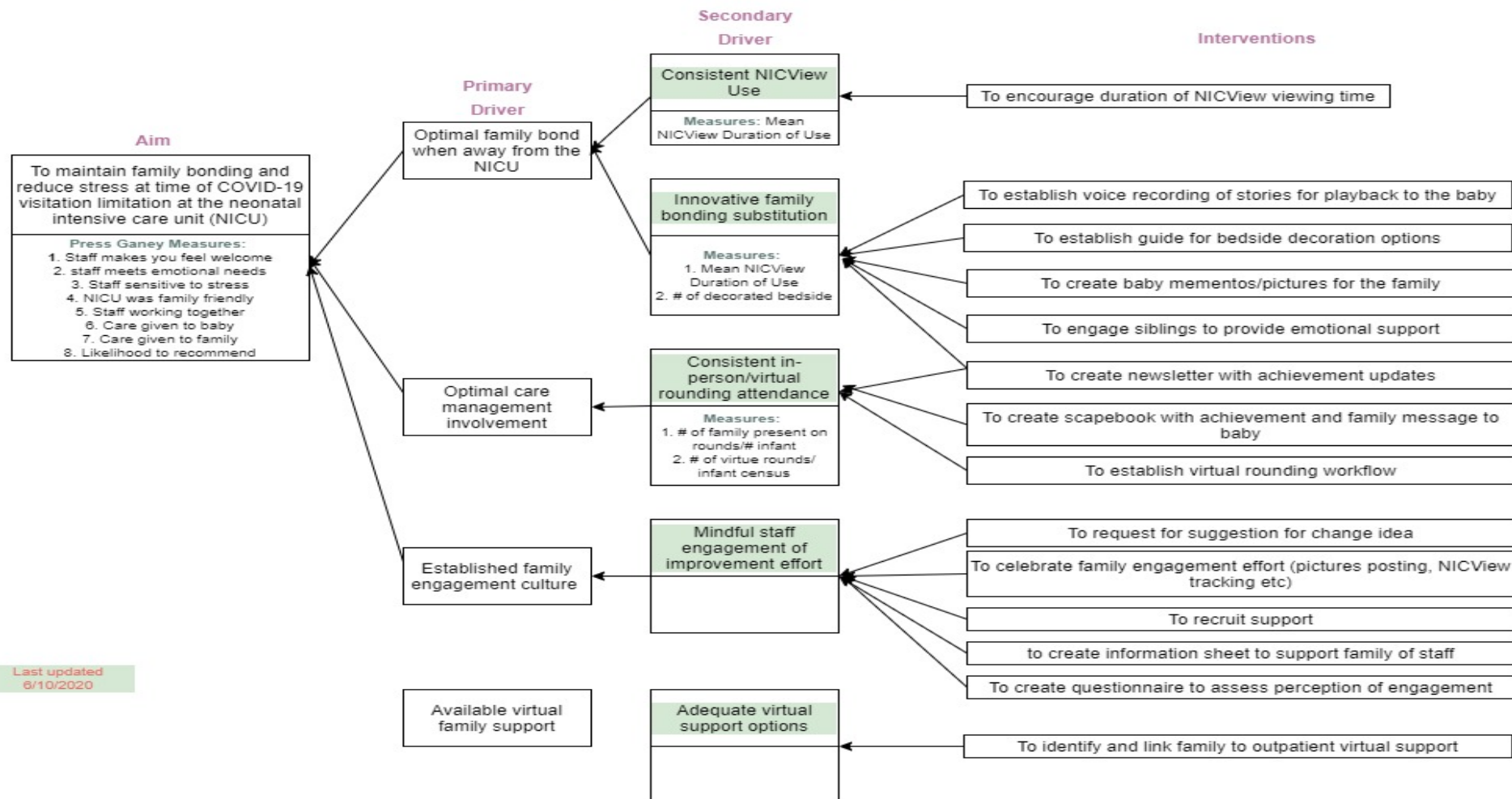
Nasim Gorji, DO

Neonatal-Perinatal Medicine



Neonatal Quality Improvement Collaborative of Massachusetts

Maintaining Family Bond and Minimizing Stress at Time of Isolation



Improving Family Presence on Rounds

Last Updated: 6/11/2020
version #

SMART Aim

Increase family presence on rounds from 10% to 50% of the daily census by October 2020

Global Aim:
Improve Family Engagement in the NICU

Primary Driver

Optimal parental ability to attend rounds

Strong parental desire to attend rounds

Comfortable rounds location

High level of provider engagement

Secondary Driver

Optimal communication from birth regarding rounding process and time

Parent-friendly terminology on rounds

Adequate ability to attend rounds when parents not present in the NICU

Optimal parental comfort with physically attending rounds

Optimal physician and NP/PA enthusiasm about parents on rounds

High level of nursing enthusiasm about parents on rounds

Intervention/ Change Idea

Admission Packet Sheet about Rounds

Adoption of Virtual Rounding

Establish efficient rounding workflow

Rounding in conference room








Advertise at faculty meeting

Advertise in weekly nursing email




Virtual Rounding



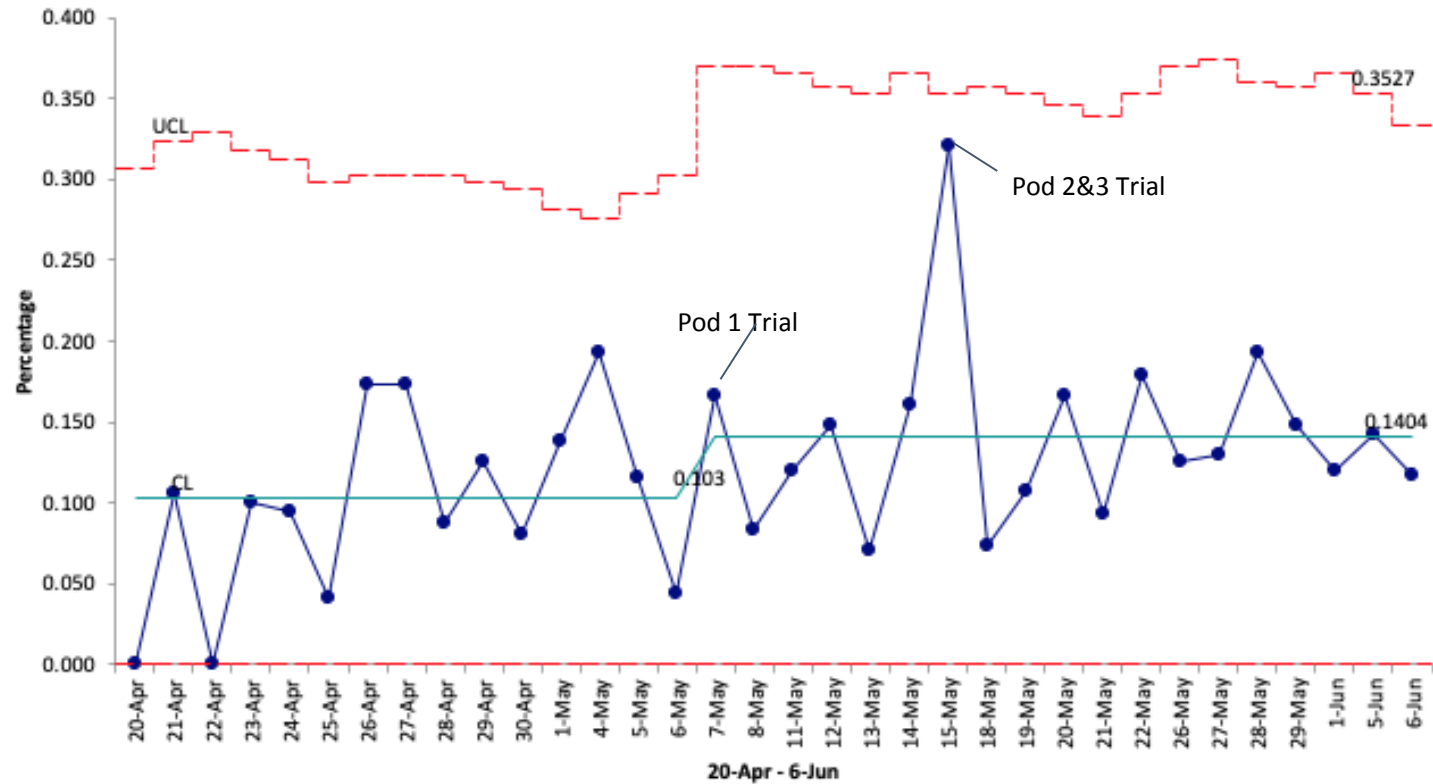
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- Rounding handout in admission packet
 - Parents download AW Touchpoint app on their phone
 - Invitation is sent to parent via text message in real time when team is rounding on infant
 - Parent accepts invitation and connection is made in virtual room
 - Invitations can also be sent via email for use on computer



Measures








- Outcome Measure
 - Number of families on rounds
 - Process Measure
 - Number of families participating in virtual rounds
 - Balancing Measure
 - Length of time spent rounding
 - Global Outcome Measure
 - Family overall satisfaction
- 

Percentage of Parents on Rounds Control Chart





Next Steps

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- Brainstorm more efficient schedule for virtual rounds - weekly schedule for families?
 - Consider use of iPads at bedside for parents to join rounds while holding infants and offer virtual rounding to inpatient mothers
 - Video platform may switch to Zoom - different but likely easier workflow
 - Launch Family Engagement online survey

Child Life Program Changes

- Increased keepsakes and memory making
- Recordings
 - Heartbeat
 - Voice recordings
- Development education both virtually and at bedside
 - Extended access to antepartum and recent grads
- NICView
- Sibling support
 - Virtual sibling hours
 - Pen Pal program
- Community resources
- Highlights from one current family

May 2020 NICU Family Calendar
All events are VIRTUAL, free & open to all NICU families.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
March of Dimes Covid-19 NICU Family Online Education Series In addition to the virtual events happening for UMass families this month, the March of Dimes is hosting a national webinar series to address the unique concerns that Covid-19 is bringing to NICU families. For a complete list of topics and registration, please visit www.marchofdimes/nicueducation						3-4p Covid-19 Education Series
3 Weekly Goal: Start working on your NICU Family Bingo card!		5 6-7p CPR & Discharge	6 6-7p Covid-19 Education Series	7 12-1p Parenting in the NICU	8 10:30a Story Hour with Child Life	9 3-4p Covid-19 Education Series
10 MOTHER'S DAY	11	12 6-7p CPR & Discharge 7-8p Parenting in the NICU	13 6-7p Covid-19 Education Series	14 12-1p Watch Me Grow 2-3p Close to Me	15 Happy National Kangaroo Care Day! 10:30a Virtual Story Hour with Child Life	16 3-4p Covid-19 Education Series
17 Weekly Goal: Read a book to your little one!	18	19 6-7p CPR & Discharge 7-8p Parenting in the NICU	20 10 Coffee Hour 6-7p Covid-19 Education Series	21 12-1p Spread Love, Not Germs	22 10:30a Story Hour with Child Life	23 3-4p Covid-19 Education Series
24 Weekly Goal: Bring in a family photo to keep at your baby's bedside.	25	26 6-7p CPR & Discharge 7-8p Parenting in the NICU	27 6-7p Covid-19 Education Series	28 12-1p Watch Me Grow	29 10a NICU Family Bingo Raffle Drawing 10:30a Story Hour with Child Life	30 3-4p Covid-19 Education Series

All classes will be held via Zoom. See reverse for details or email Emily Unadlad, the March of Dimes NICU Family Support Program Coordinator, at elindblad@marchofdimes.org with any questions.

DOWNLOAD OUR APP: My NICU Baby™

Next Steps

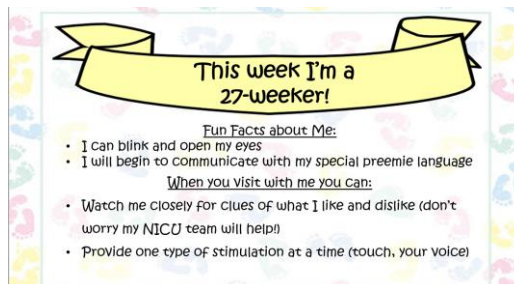
- Weekly gestational age cue cards
- NICU journey bead keepsake
- Creating All About Me Books for infants entering kinship or foster care
- Support group



Fun Facts about Me this week

☐ _____
☐ _____
☐ _____
☐ _____

NICU Journey Notes....





Participation in this NeoQIC Collaborative



- Hearing how other units are creatively keeping families involved
- Adapting technology in helpful ways
- Collaboration and energy
- Ways to keep staff engaged



UMassMemorial



University of
Massachusetts
UMASS Medical School



UMass Memorial
Children's
Medical
Center

Any Questions?



Next Steps for Teams



Multi-Disciplinary Team

- Please send us your roster if you haven't already!
 - aviel.peaceman@bmc.org
- Social workers, nurses, nursing leadership, case management, physicians, and more!
- Parents, parents, parents
 - Stipend for parents from NeoQIC leadership as a token of appreciation: ~\$200
 - We will focus on how to successfully involve parents on your team
- If you have any questions or need assistance with setting up your multi-disciplinary team, **please let us know** and we're happy to help.



Data infrastructure

- Think about what track would work best for your team and reach out to us for questions
- Review the chart abstracted measures form and provide feedback
- Leadership team will work hard on finalizing chart abstraction form and developing the parent-reported measures for your review



Upcoming Virtual Meeting

- Our first in person meeting got pushed due to Covid-19, so we are now holding it virtually over two days in September:
 - Tuesday, September 15th from 1-3 pm
 - Wednesday, September 16th from 1-3 pm
- Calendar invitations have been sent out to the group
- We will still have our original Keynote Speaker, **Lelis Vernon**:
 - Faculty Family Leader - Micropreemie Care Team II - Vermont Oxford Network
 - Clinical Advisor, QI Measures - American Academy of Pediatrics, Section of Neonatal Perinatal Medicine
 - Advisory Board Member - Dep. of Perinatal and Neonatal Medicine Research Lab - Stanford University
 - Clinical Guidelines Committee - American College of Physicians
 - Executive Committee - National Network of Perinatal Quality Collaboratives - CDC / QI Family Leader - Florida PQC
 - Leadership Team . - NEC Society / PCORI



Upcoming Virtual Meeting

- During the virtual meeting, we will set aside time for teams to convene to work together
- While this may not be possible to do in person together, we encourage teams to organize your own Zoom or conference line for this segment of the meeting
- We will provide worksheets and accompanying materials ahead of time
- If you have any questions about how to best set this up, let Aviel know (aviel.peaceman@bmc.org) and we can help you



Thank you!

Questions?

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

www.neoqicma.org



Neonatal Quality Improvement Collaborative of Massachusetts