



GLOBAL AIM: Critical transitions of care for every newborn will meet the Institute of Medicine

STEEEPS criteria: Safe, Timely, Efficient, Effective, Equitable, Patient and Family Centered, and Socially Responsible

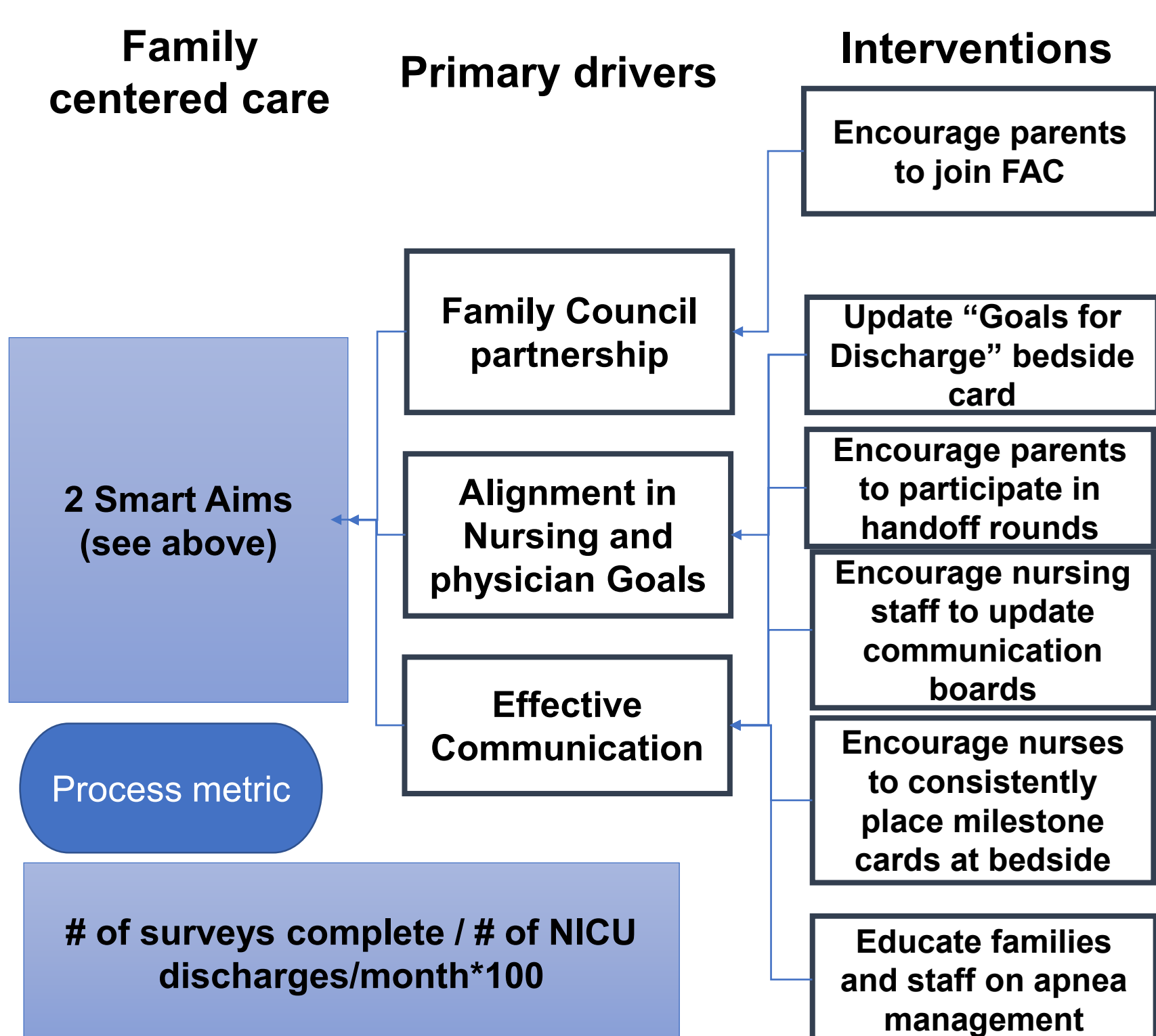
Rationale

Our family centered survey identified communication gaps in providing consistent information which led to the establishment of a Family Advisory Council. The need to focus on communication during sign off was identified as the main reason for family dissatisfaction. For example, inconsistent apnea management was identified as a major source of family frustration

2 SMART Aim

- 90% of survey responses will be agree/strongly agree for "sign off helped me understand plan of care" by July 2022.
- 75% of survey responses will be agree/strongly agree for "apnea management education received" by July 2022.

Driver Diagram



Measure Description	Numerator	Denominator	Unit of Measure	Data Source	Measurement Frequency	Check Applicable Domain(s)						
						Safety	Timeliness	Efficiency	Effectiveness	Equity	Family Centered	Responsible
OUTCOME MEASURES: recommended, not more than 2-4												
Family's understanding of plan of care during sign off	Agree/Strongly agree	# of Surveys	Percent	Discharge Survey	Every Discharge from NICU	X	X	X	X	X	X	
Family's understanding of apnea management	Agree/Strongly agree	# of Surveys	Percent	Discharge Survey	Every Discharge from NICU	X	X	X	X	X	X	
BALANCING MEASURES: recommended 1												
Nursing satisfaction	Agree/Strongly agree	# of Surveys	Percent	Nursing staff survey	Once a year	X	X	X	X	X	X	

Measure Description	Numerator	Denominator	Unit of Measure	Data Source	Measurement Frequency	Check Applicable Driver(s)			
						Communication	Teamwork	Families	Standardization
PROCESS MEASURES: recommended, 3-4									
Surveys completed	# of surveys	# of discharges	Percent	Discharge Survey and Census data	Monthly	X	X	X	X
Discharge Checklists completed	# of checklists	# of discharges	Percent	Physician folders	Monthly	X	X	X	X



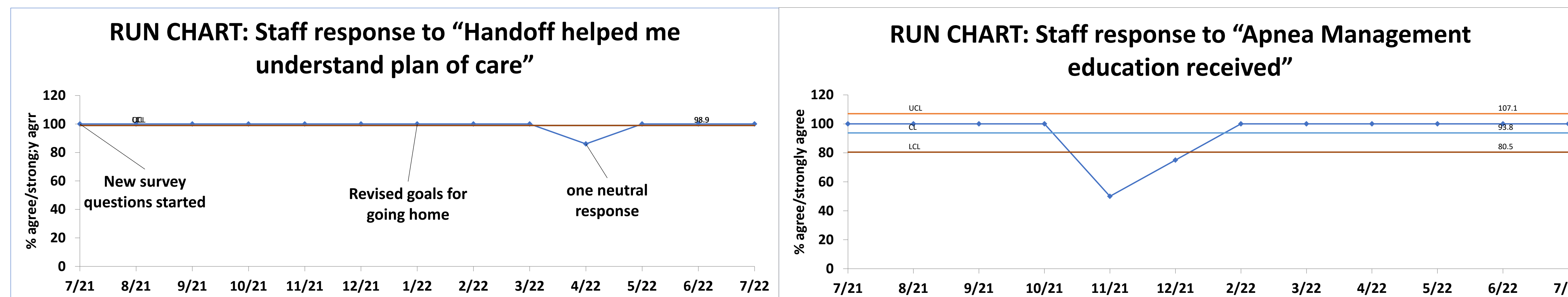
Solving Communication Gaps Utilizing a Family Advisory Council (FAC) in Neonatal Intensive Care: An Ongoing Continuing Improvement Model

Shehla Siddiqui, MD (SSiddiqui@dh.org), Kathy Donahue, MSN, John Chuo, MD, MS, Gita Jani MD

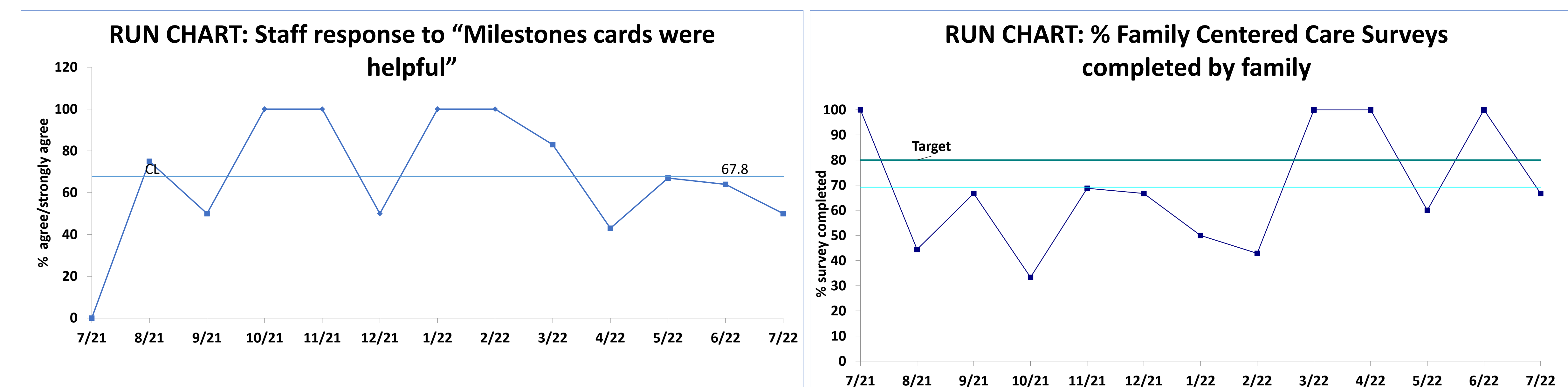


FAC led family involvement during sign off is key to improving family satisfaction

Outcomes measures:



Process measures:



Surprises and Challenges

- Creating and implementing EBP protocols to maintain consistency of care between providers and nurses was a challenge as some felt it took away from physician and nursing assessment skills resulting in "cookie-cutter care".
- Nursing staff embraced FCC and encouraged family involvement in care and decisions. This can be difficult due to the physical space of the ICN (one large room) and limited privacy for families.
- Hand-offs became even more integral in maintaining consistency of care with physicians changing every 24 hours and nurses changing every 12 hours. Now done at the bedside with on-coming and off-going physicians, nurse and family.
- Inconsistencies of care was very upsetting for families
- Establishing apnea management guidelines helped significantly in providing consistent care.

We Would Appreciate your Help With

- Encouraging and maintaining parent participation in the Family Advisory Council.
- Suggestions to achieve our outcome metrics.
- Finding what works best for families to participate: Live vs Zoom meetings, Time of Day, Day of Week, etc.

Team Acknowledgements:

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Keep A Look out.....

I'm on a

Spell Count Watch



Events:

- < 10 seconds, do not count, no need to document
- 11-20 seconds, allow baby to self-resolve & document

Definitions:

Bradycardia < 80/min for at least 10 seconds or Shorter accompanied by desaturation < 70% and/or cyanosis not associated with feeding suctioning etc.

Apnea > 20 seconds or shorter if

associated with bradycardia and/ or cyanosis

Desaturation Clinically significant if <88% with bradycardia for 10 sec or <70% without bradycardia

Balance Metric: Nursing satisfaction survey regarding sign offs

