

An Innovative Approach to Improve Patient/Family Education in the NICU

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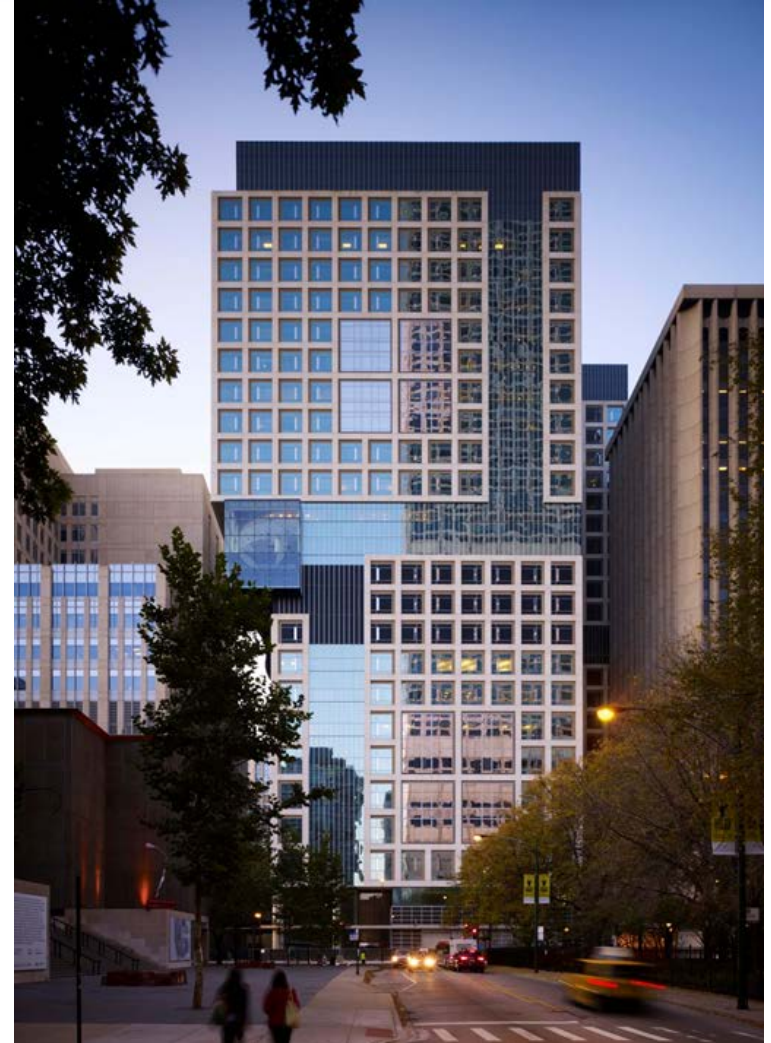
Ann & Robert H. Lurie Children's Hospital of Chicago

- Free-standing children's hospital
- Serves children from 49 states and 34 countries
- Ranked in the top 10 children's hospitals nationally (U.S. News & World Report)
 - Ranked in all 10 specialties
- Achieved 4th Magnet re-designation in 2015



Facility Facts

- 288 private rooms with plans to expand
- 1.25 million square feet
- 400+ feet tall
- 23 stories
- Rooftop heliport
- Amenities for families
- Healing environment
- LEED Gold certified



Background

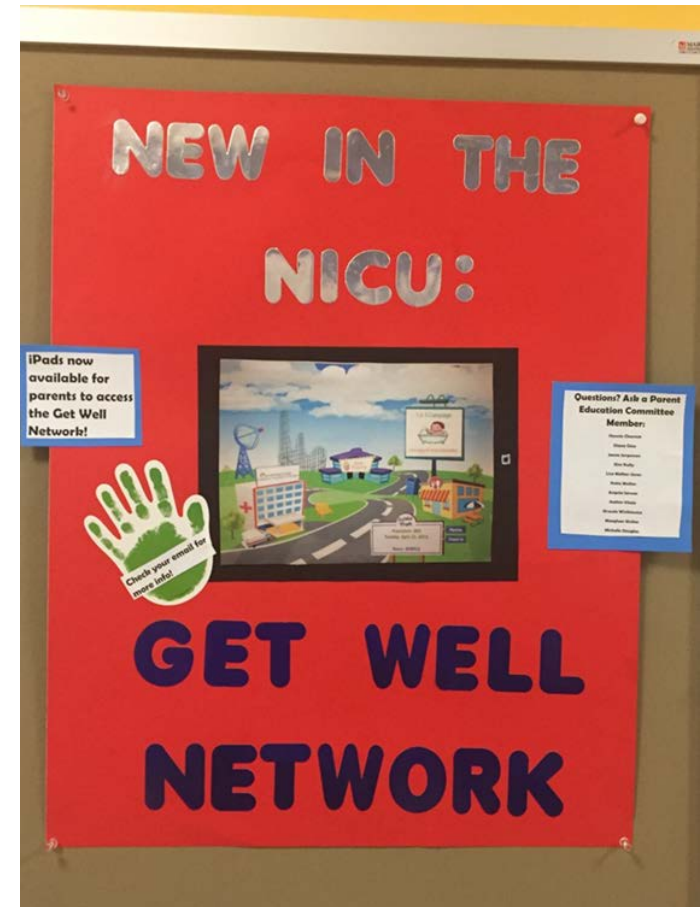
- Discharge teaching is a crucial component in preparing a family to be confident in the care of their child at home, once they leave the hospital.
- Being hospitalized with a critically ill newborn poses additional stress on parent/caregiver
- Highlights need for resources to teach families at the bedside
- Patients/Families in the Neonatal Intensive Care Unit (NICU) did not have access to the same patient education resources available in other patient care areas

Opportunity

- Extend video-based education, delivered via GetWellNetwork (GWN) system, using wireless technology to meet needs of the NICU
 - Would support standardizing discharge processes/education
 - Meet state law for mandatory SIDS education
- Achieve operational efficiencies
 - Standardize discharge teaching process in ICUs
 - Add newborn care resources for hospital-wide access
 - Provide consistent information to families

Methods

- Video education resource for families rolled out to the NICU,
 - Used iPads as mode of delivery
- Unit-based staff education was lead by NICU nurse manager
- Staff education utilized various formats
 - Communication / advertisement
 - One-to-one tutorials
 - Emails
 - Flyers
 - Unit news letters
 - Posters
 - Staff meetings (included unit-specific education councils and unit leadership).



Measuring Impact

- Outcome metrics included:
 1. Patient Experience Scores for survey question “Provider told Parent how to care for child at home”
 2. Discharge teaching initiated earlier
 3. Parent feedback regarding use of GWN-iPad solution for discharge education
- Process metrics included:
 1. Response rate to staff quizzes regarding:
 - a. Educational content
 - b. Check-in/check-out process
 2. Number of times iPads signed out for discharge education
- Go-live was April 21, 2015

Results

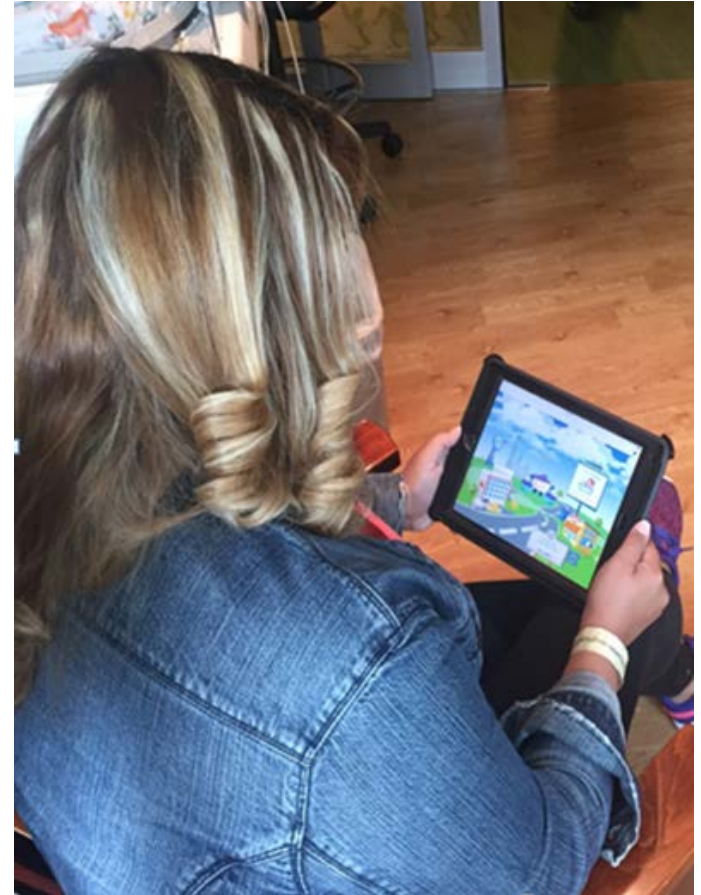
~ *Six months after implementation*

- Discharge question on patient experience survey: “Provider told parent how to care for child at home”
 - Pre-GWN iPad implementation: 85.4% (n = 41)
 - Post-GWN iPad implementation: 88.5 % (n = 61)
- Discharge teaching initiated:
 - Pre-GWN iPad implementation: 3-4 days before discharge
 - Post-GWN iPad implementation: 14 days prior to discharge



Results

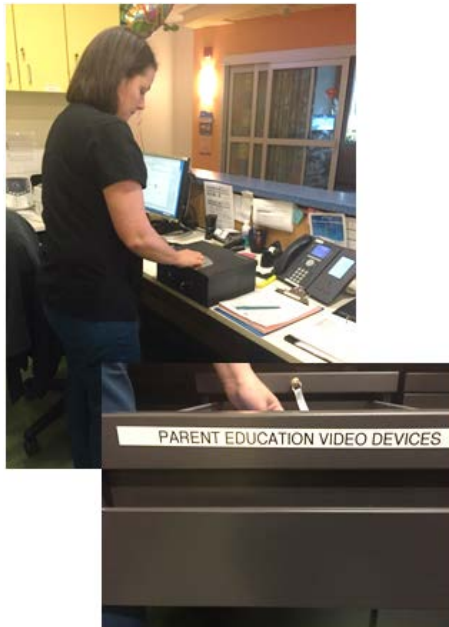
- iPads utilized 92% of the time for discharge teaching within first six months
- Qualitative feedback from parents and staff was positive. Solution provided:
 - Ease of use
 - Improved access to educational resources
 - Resources available in English and spanish
 - Information easy to understand
 - Can be reviewed repeatedly with multiple family members/caregivers



Challenges & Sustainment

- Challenges included

- Implementing new workflow
- Reinforcement of how this benefits families (despite 'extra steps')
- Keeping devices secure/charged
- Technical difficulties with app/iOS updates, and 'bugs' leading to downtime



- Sustainment needed long-term
- Some fluctuation observed over long-term for family response to “Provider told parent how to care for child at home”
 - May 2015 – Jun 2017: 83.0% (n = 94)
 - May/may not accurately capture what was covered with discharge teaching
- Still heavily used for discharge education
 - May 2015 – Jun 2017: used for education with 87% of discharges (*approximately 900 discharges*)
- Plan to add additional iPads

Contact Information



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