



ILPQC Golden Hour Teams Call

August 15, 2017 2:00 – 3:00 pm

Introductions



- When called on, please tell us:
 - Name
 - Role
 - Institution
- Please also enter this information into the chat box!

Overview



- Updates from Neonatal Advisory Workgroup
- Golden Hour Data update on focus measures
- Temperature regulations Sara Zimmerman
- Team Talks Sharing Strategies for Sustainable Improvement on IV Glucose/Temperature at NICU Admission
- Discussion
- Next Steps

Save the Date!





ILPQC 5th Annual Conference Tuesday, December 19

Westin Lombard

Welcome to our new Neonatal Co-Lead



Dr. Justin Josephsen SSM Health Cardinal Glennon Children's Hospital

GH: Number of Hospitals Entering Data by Month





Updates from the ILPQC Neonatal Advisory Group



- Outreach to teams missing data as of May 2017
- Look for email from info@ilpqc.org to set up a time to discuss and troubleshoot
- Neonatal Advisory Group mentors in your network available for QI support
- Planning for sustainability monitoring and ILPQC Annual Conference Speakers

Golden Hour Goals



Aim: Implement resuscitation checklist of evidence-based practices with brief and debrief of the OB and nursery team in 80% of high-risk deliveries by December 2017 to reduce the rate of infants with chronic lung disease, retinopathy of prematurity and intraventricular hemorrhage

- Delivery room team communication (brief, debrief, checklist)
- Delivery room clinical practices (CPAP, surfactant, timed cord clamping)
- Family engagement (family contact pre-delivery, family present at resuscitation and NICU admission)
- Neonatal intensive care unit (NICU) admission (standardize admission, intravenous glucose and antibiotics, admission temperature)

Golden Hour Team Calls Schedule



- September: Implementation of delayed cord clamping
- October 17: Sustainability
- ILPQC will contact teams in advance of the meeting date who have demonstrated recent improvements for sharing of strategies on the monthly teams calls

Golden Hour: Remainder of 2017



- All team communications measures (80% or greater)
 - Pre-brief
 - Checklist
 - Debrief
- All family engagement measures (90% or greater)
 - Pre-resuscitation
 - During resuscitation
 - At NICU admission
- Temperature of infants upon NICU admission at 36.5-37.5°C (90% or greater)
- Delayed cord clamping (80% or greater)

Neonatal Golden Hour: Communication Practices



ILPQC: Golden Hour Initiative Communication Practices: Percent of Deliveries Utilizing Delivery Room Checklist, Prebrief, & Debrief All Hospitals, 2015-2017



Neonatal Golden Hour: Family Engagement



ILPQC: Golden Hour Initiative Family Practices: Percent of Families Receiving Pre-Contact, Present During Admission, and Present During Resuscitation All Hospitals, 2015-2017



Neonatal Golden Hour: Delivery Room Practices- DCC



ILPQC: Golden Hour Initiative Delivery Room Practices: Percent of Eligible Infants with Temp Probe Initiated within 10 minutes, Initially Stabilized with CPAP Trial, & Timed Cord Clamping 30-60 Seconds All Hospitals, 2015-2017



Neonatal Golden Hour: Admission ILC PQC Practices – Temperature and IV Glucose

ILPQC: Golden Hour Initiative Admission Practices: Percent of Admitted Infants who are Between 36.5-37.5°C on Admission (<32 weeks) & who Received IV Glucose within 1 Hour of NICU/Specialty Care Nursery Admission All Hospitals, 2015 - 2017



Admission Practices: ILC PQC Temperature Upon NICU Admission

Temperature upon NICU Admission throughout Golden Hour Initiative





ANNOUNCING: QUALITY IMPROVEMENT RECOGNITION AWARDS ILPQC GOLDEN HOUR INITIATIVE



Gold

- Data submitted for January –
 September 2017
 - +
 - 4 target process measures at goal*

SILVER

- Data submitted for January –
 September 2017
 - +
- 3 target process measures at goal*

BRONZE

- Ó Data submitted for January September 2017
 - +
- 2 target process measures at goal*

*4 Target Process Measures:

- Delayed cord clamping rate at 80% or higher
- Temperature in target range at NICU admission rate at 90% or higher
- Communications measures (brief, checklist, debrief) rates at 80% or higher
- Family engagement measures (pre, during, and NICU admit) rates at 90% or higher





- What happens after December 2017 with Golden Hour?
- What measures do we want to monitor for sustained performance in the sustainability period?



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Preventing Hypothermia in Outborn Very Low Birth Weight Infants on Admission to the Neonatal Intensive Care Unit

Sara (Hartwig) Zimmerman, RN, BSN HSHS St. John's Hospital NICU RN Rush University – DNP, NNP student



- Quality Improvement Project
- Prevent very low birth weight (VLBW) infants (≤ 1500 grams) from becoming hypothermic during transports
- Implementing a standard, evidence-based hypothermia prevention protocol and checklist
 - Regulate the use of hypothermia prevention measures

Problem Statement

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• SJH Level III NICU

- South Central Illinois Perinatal Center
 - Cares for 600 infants per year
 - 30 hospitals in the region

• SJH Neonatal Intensive Care Transport Team (NICTT)

- Transports ~128 infants per year
- 2011 2016: 59 VLBW infants transported
- 47% hypothermic at some point during transport
- 41% hypothermic upon transport team arrival
- 19% hypothermic upon admission to NICU

Literature Review

- Outcomes of preterm infants are significantly impacted by events that occur during the **initial resuscitation in the delivery room** (DeMauro et al., 2013)
- Multicenter prospective cohort study:
 - **71%** of infants <1,500 grams were hypothermic by 5 minutes of age
 - On admission to the NICU, 70% of infants remained hypothermic (De Almeida et al., 2014)
- Another study reported a significant improvement in temperatures for VLBW infants **if the transport team was present for the delivery** (Holt & Fagerli, 1999)
- Most effective hypothermia prevention strategies include hypothermia bundles (AAP & ACOG, 2012; Pinheiro, Boynton, Furdon, Dugan, & Reu-Donlon, 2011)

Methods / Implementation Plan

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Hypothermia Protocol & Checklist

Inclusion Criteria:

- <u><</u> 1500 grams
- \leq 33 weeks gestation

Distribution:

• 30 hospitals in the south – central Illinois region

Protocol Regulations:

- Ambulance/helicopter temperature
- Referring delivery room/nursery temperature
- Incubator supplies
- Incubator set temperature
- Incubator skin probe location
- Polyethylene wrap
- Hat & Blankets
- Heated gel mattress

Methods / Implementation Plan

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Hypothermia Protocol & Checklist

- Interventions follow standards of care
- This protocol is designed to direct the efforts of nursing staff at referring hospitals and the SJH NICTT, thus standardizing care within the South Central Illinois Perinatal Network



Completed checklist to be returned to Sara Hartwig Zimmerman, RN, BSN – HSHS St. John's Hospital. This form is NOT a part of the permanent record.

Goal

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By December 2017, achieve a 50% decrease in hypothermia rate post intervention in VLBW transported to our NICU

• Allow for the possibility of a reduction in morbidity and mortality of VLBW infants by eliminating the incidence of hypothermia on transports



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Sara Hartwig Zimmerman, RN, BSN HSHS St. John's Hospital <u>smh0930@gmail.com</u>

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Golden Hour Team Talks



Teams demonstrating improvements in IV Glucose and temperature at NICU admission measures:

- Edward Tonya Mangiaguerra
- Amita Alexian Brothers
- Adventist Hinsdale

Edward Hospital NICU Golden Hour

Tonya Mangiaguerrra, MSN, ACCNS-N, NICU APN



Temperature

- New plastic wrap < 29 weeks</p>
- Warming mattress < 34 weeks</p>
- Warm blankets, hat
- Weigh baby in the NICU
- Post GH results monthly for staff to review

IV Glucose

- Vanilla TPN stocked in NICU pyxis
- Pend patient in Epic
- Golden Hour order set in Epic
- Developed audit tool sheet to identify reasons for delay in treatment

Audit Tool

Patient Name

Golden Hour NICU Admission Time Line Audit

	Time
Infant arrived in NICU room	
Orders entered by MD in computer	
Umbilical lines started	
Umbilical lines finished (before xray)	
Time Xray called	
Time Xray obtained	
Time TPN fluids received	
Time TPN fluids administered to baby	
Time Antibiotics taken from Pyxis	
Time First antibiotic administered	

Comments:



Golden Hour: Focus through End of 2017



- Calls on goals, barriers and strategies for improvement, team talks, collaborative learning, and discussion
- Participate in sharing strategies for improvements in the following areas on team calls (3rd Tuesday):
 - September: Implementation of delayed cord clamping
 - October: Sustainability

Golden Hour Initiative Next Steps



- Submit June/July data as soon as possible
- Reach out to ILPQC with any QI/data support questions!
- Email info@ilpqc.org with any questions!



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