



TeamBirth NJ Learning Session 2: Prepare

In this session, we focused on the core components of TeamBirth that must be implemented to achieve the project aims, flexible parts of TeamBirth that can be adapted to your site teams and workflows, and touched on surveying.

Key Ideas: The TeamBirth solution includes core, flexible, and add-on components. Core components are components that are critical to successful delivery of TeamBirth. Flexible components are parts that must be done, but can be delivered in different ways depending on your context. Add-on components are optional components that can be based on your context.

The core of TeamBirth includes structured team huddles and the shared planning boards:

- **Huddles** are team meetings that must at a minimum:
 - 1. include the direct care team (patient, nurse, and provider),
 - 2. give all team members the opportunity to speak,
 - 3. discuss preferences, care plans, and expectations for the next huddle, and
 - 4. occur at minimum at admission, at decision points or changes in the plan of care, or at the request of any team member.
- The **shared planning board** structures huddle communication in a way that is shared across the full team. At a minimum, the shared visual tool includes space for the team, preferences, care plans (for mom, baby, and labor progress), and next huddle.

Next Steps: Before our next coaching call, complete the following activities with your implementation team:

- > Think about the following question: where do shared decision-making and team conversations already occur in postpartum or newborn care?
- > Determine the number of clinicians you have per unit. We'll ask you to report out on:
 - the number of clinicians by type of clinician (Nurses, Midwives, Physicians, Residents) and by unit (triage, labor and delivery, postpartum).
- > Brainstorm how you will distribute the Atlas survey to staff.
 - We will share the survey link/code on the next coaching call. The plan is to start rolling out your survey strategy as soon as you receive the link/code.
- > Watch the Why TeamBirth video. Share it with other staff members.
 - Access the video here https://www.youtube.com/watch?v=EoVrSaGk7gc or on the Resource page.
- ➤ Build your implementation strategy. Review the tips on slides 27-29.
- > Determine the number of shared planning boards needed (how many rooms on units, who needs to approve, who will be responsible for ordering and installing) and consider board placement.
- > If you haven't already, identify times you can meet internally to discuss TeamBirth (add as an agenda to existing meetings or schedule separate meeting time).





For more information, review the session slides and resources on the password protected webpage for Cohort 2 implementation teams: www.njhcqi.org/teambirthnj-cohort2 (Password: Cohort2!2023). Feel free to share the public TeamBirth NJ website with other staff and colleagues who are interested in learning more about the TeamBirth NJ initiative: www.njhcqi.org/our-work/qualityimprovement.

Next Coaching call: Please bring questions and concerns. We will talk about the above and discuss Atlas and patient surveying further.

Next Collaborative call: April 26, 2023 at 12 pm.