



TEAMBIRTH



NEW JERSEY  
HEALTH CARE  
**QUALITY  
INSTITUTE**



Collaborative Session 5  
June 28, 2023

# Learning Session 5

- Implementation Check-ins
  - Boards & Atlas Surveys
  - Testing & Training
  - Discussion Guides
  - Patient Surveying
- TeamBirth Implementation Strategy
  - Revisiting Why TeamBirth
  - TeamBirth Core and Flexible
  - Postpartum Considerations
- TeamBirth Launch
  - Social Media Toolkit
  - Images and Inspiration
- Next Steps & Questions



# PI Designation & Atlas Responses

Hospital Name	PI	CITI/NIH Training	IRB Department Contacted	Atlas Responses	Labor Board Design	Postpartum Board Design
RWJ New Brunswick	Barb Kenny	Yes	Yes	47%	Installed	Installed
Virtua Mt. Holly	Dr. Michelle Salvatore	Yes	Yes	64%	Finalizing	Finalizing
St. Peter's	Kate Rasmus & Caitlyn Kenney	Yes	Yes	50%	Yes	Finalizing

**RW Barnabas HEALTH**

RM # 3122

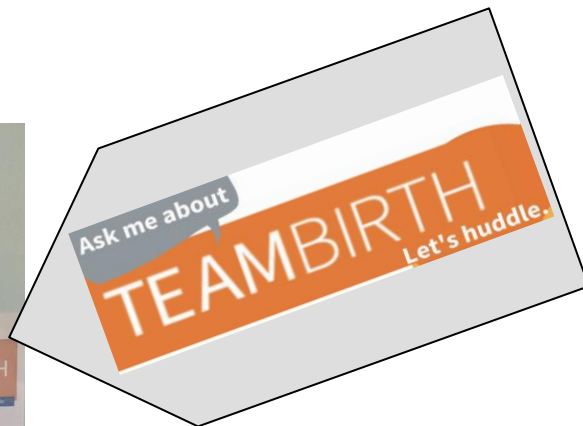
**Care Team**  
 Doctor: \_\_\_\_\_ Midwife: \_\_\_\_\_ Nurse: \_\_\_\_\_  
 Anesthesiologist/CRNA: \_\_\_\_\_  
 L&D Tech/PCA: \_\_\_\_\_

**PLAN OF CARE:**  
 Maternal: \_\_\_\_\_  
 Fetal: \_\_\_\_\_  
 Progress: \_\_\_\_\_  
 Next Assessment: \_\_\_\_\_  
 Early Labor Active Labor Pushing

**HEMORRHAGE RISK:**  
 Low \_\_\_\_\_  
 Medium \_\_\_\_\_  
 High \_\_\_\_\_

**ABOUT BABY:**  
 Girl \_\_\_\_\_ Boy \_\_\_\_\_  
 Gestation: \_\_\_\_\_  
 Feeding: Breast \_\_\_\_\_ Formula \_\_\_\_\_ Both \_\_\_\_\_  
 Born On: \_\_\_\_\_  
 Weight: \_\_\_\_\_  
 Length: \_\_\_\_\_  
 Cord Blood Kit: Yes \_\_\_\_\_ No \_\_\_\_\_  
 Cord Blood Sent: Yes \_\_\_\_\_ No \_\_\_\_\_

**TEAMBIRTH**  
 Monmouth Medical Center RWJBarnabas Health



**Room #:** \_\_\_\_\_ **Baby:** \_\_\_\_\_ **GA:** \_\_\_\_\_

**Patient Name:** \_\_\_\_\_ **Plan of Care:** \_\_\_\_\_

**Care Team:** \_\_\_\_\_ **Plan of Care:** \_\_\_\_\_

**Support Team:** \_\_\_\_\_

**Nurse:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Preferences:** \_\_\_\_\_

**Provider(s):** \_\_\_\_\_ **Progress:** \_\_\_\_\_ **Preferences:** \_\_\_\_\_

**Next Huddle:** \_\_\_\_\_ **Hemorrhage Risk Score:** \_\_\_\_\_

**Feeding:** Breast / Formula / Both  
**Newborn Medications:** Y / N  
**Cord Blood Collection:** Y / N

**Virtua Health**  
 TeamBirth Project

# Welcome to Saint Peter's University Hospital

Room #

Food ext # 5555



Date:

## Meet your Team

Patient:

Support Person:

Nurse:

Physician:

We're Having a:

GIRL



SURPRISE



BOY



Breastfeeding ☐

Both ☐

Bottle Feeding ☐

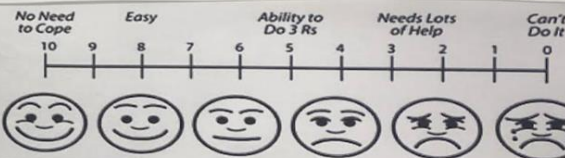
Plan of Care:

Notes:

Pre - Labor ☐

Early Labor ☐

Active Labor ☐



1  
cm

2

3

4

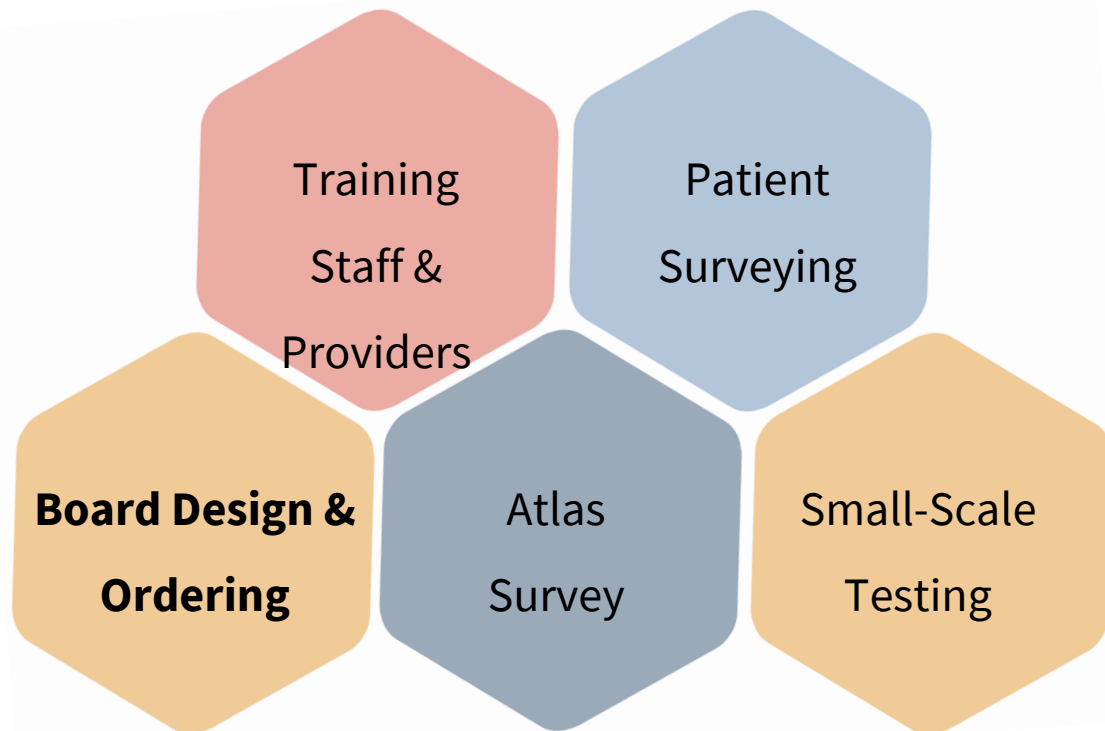
5

6

8

10

# Implementation Progress Check-in



# Train Staff & Providers

## Socialization - Get the word out!

- Infographics
  - Large poster size
  - Small pocket size
- TeamBirth information board
- TeamBirth “roadshows”
- TB info on meeting agendas
- Swag with QR code & TB info
- Online groups, social media

## Approaches to Training

- Scenario station for training
- TeamBirth education board
- Off-unit events:
  - OB clinics
  - SIM lab
- TeamBirth “roadshows”
- Office hours
- Multidisciplinary training - on the fly, come (or call in!) off-shift, combo
- Repurpose staff meetings, rounds, previously scheduled training





# TeamBirth Discussion Guides

## Admission Discussion Guide

Discuss the best next steps with your support person or doula, your nurse, and your provider based on how you are doing, how your baby is doing, and how your labor is progressing.

### If you are in EARLY LABOR

You may benefit from  
**Comfort of home environment**  
**Being active**  
**Staying close to the hospital**



Home



Nearby the Hospital

### If you are in ACTIVE LABOR\*

You may benefit from  
**Admission to hospital**  
**Monitoring**  
**Clinical care**



Labor & Delivery

**DISCUSS WITH YOUR TEAM**  
What are the benefits of birth at 39 weeks or more?

**DISCUSS: STATUS**  
How am I feeling?  
How is my baby doing?  
Where am I in labor?

**DISCUSS: OPTIONS**  
What are the benefits and risks of each option?

**DISCUSS: ACTIONS**  
What can I do to be more comfortable?  
Where can I go nearby?  
What are my options for labor support?

\* The American College of Obstetricians and Gynecologists (ACOG) defines labor as contractions that result in cervical change. Active labor typically begins at 4-6cm with accelerated cervical dilation. Your clinical team will update you on your cervical dilation and progress. This guide is designed for use with full term births.

TEAMBIRTH



This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$10,361,133.00 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [nhsa.gov](http://nhsa.gov).

## Labor Support Guide

Use this guide to identify, discuss, and select options for labor support with your team. These options can benefit you, your baby, and labor progress.

### What are your care goals?

### What options can we try?

**Mom**

Support labor

- ☐ **Movement:** Change positions, walk, dance or sway
- ☐ **Breathing:** Take deep breaths or use relaxation methods
- ☐ **Touch:** Massage, stroking, or cuddling
- ☐ **Temperature:** Apply heat or cold with water or packs
- ☐ **Environment:** Use light, smells, or sounds to create a comfortable space
- ☐ **Drink:** Have ice chips or a glass of water
- ☐ **Medications:** Start or change medications for your pain
- ☐ **Other:** \_\_\_\_\_

**Baby**

Manage wellbeing

- ☐ **Reposition:** Lay on your side, hands and knees, lunge, squat, etc.
- ☐ **Monitoring:** Change monitoring method
- ☐ **Hydrate:** Drink fluids or use an IV
- ☐ **Medications:** Change or stop medication for your contractions
- ☐ **Other:** \_\_\_\_\_

**Labor Progress**

Promote progress

- ☐ **Movement:** Change positions, walk, dance or sway
- ☐ **Breathing:** Take deep breaths or use relaxation methods
- ☐ **Tools:** Use labor support tools, like a birthing ball
- ☐ **Break Water:** Use tools to break your water
- ☐ **Medications:** Change or stop medication for your contractions
- ☐ **Other:** \_\_\_\_\_

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## Assisted Delivery Discussion Guide

Use this guide in team discussions about assisted vaginal birth or C-section. Assisting your birth with vacuum, forceps, or C-section may be appropriate if your condition meets these criteria, but discuss with your team what is best for you and your baby.

### What are your reasons for considering assisted delivery?

### What are the MINIMUM Conditions for assisted delivery?

**Mom**

Request



- ☐ You believe that assisted delivery is the best option for you after discussion with your care team

**Baby**

Concern for wellbeing



- ☐ On-going slow heart rate OR
- ☐ Far away from delivery with either:
  - ☐ Repeated slow downs in heart rate that do not improve with support
  - ☐ High heart rate that does not improve with support

Slow induction



- Either:
- ☐ Early labor (6 cm or less) for 24 hours or more
  - ☐ Medications to support contractions and waters broken for at least 12-18 hours or more

**Labor Progress**

Slow progress



- No cervical change with waters broken and 6 cm or more dilated with either:
- ☐ Good contractions for 4 hours or more
  - ☐ Medications to support contractions for 6 hours or more

Prolonged pushing without progress



- Either:
- ☐ Pushing for at least 3 hours if this is your first labor
  - ☐ Pushing for at least two hours if you have labored before

**DISCUSS WITH YOUR TEAM:**

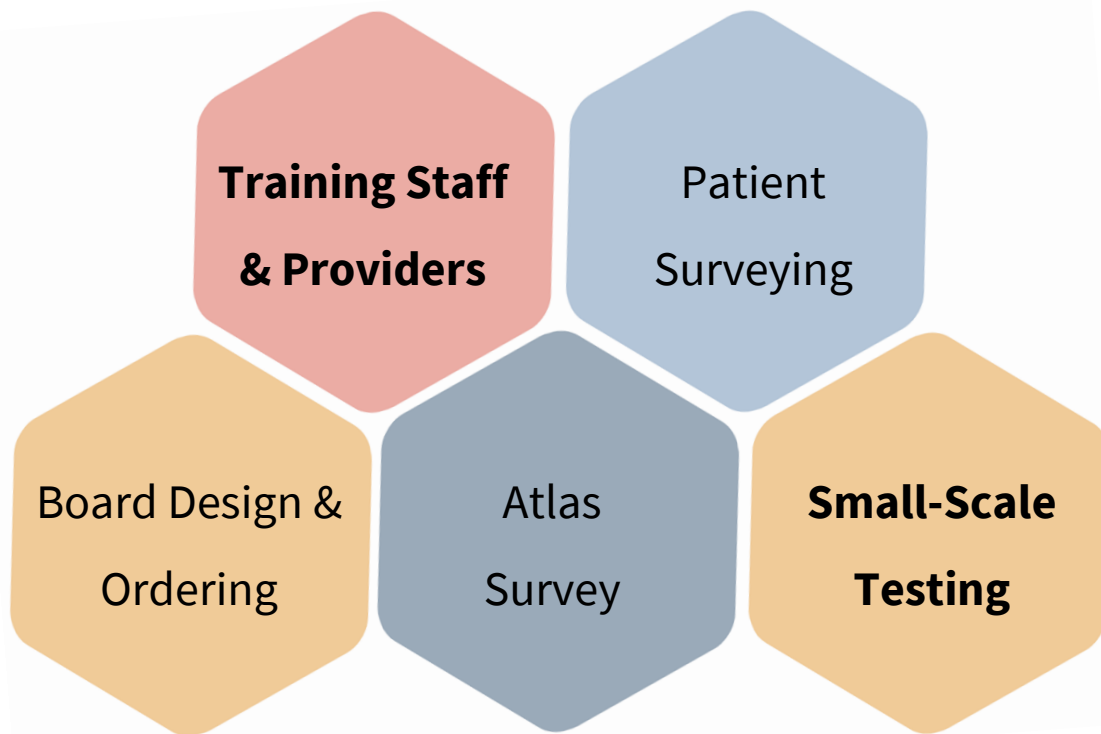
What are the **benefits and risks** of more time in labor?  
What are the **benefits and risks** of an assisted delivery?  
What **options** can we try to support my labor? (See Labor Support Guide)

TEAMBIRTH



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# Implementation Progress Check-in



# Patient comments

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“The Team Birth experience was new and honestly I enjoyed every bit of it. I liked that I had a say of **my needs and preferences and for every staff member to see** that came into my room. I like that for our specific situation my support system, adoptive parent, and myself all felt heard and accepted. In all of the delivery experiences I've heard of they have never been this nice. The way **my support system was able to advocate for me throughout the entire process** made him and myself feel safe and accepted as well.

“Team Birth is great, **feels like all obstacles are covered by multiple people with many talents, expertise. Feels like mom is part of the process**, much different than my delivery 2 years ago when I felt like things were decided for me/I was "told" what we were doing and questioned if I felt uneasy about it. Everyone was great! **Knowledgeable and we felt safe and like all things were covered no matter what may happen.**”

# Patient comments

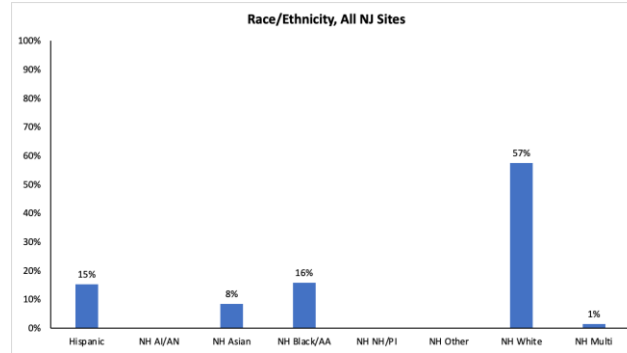
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“The *only* thing we had a problem with was during the pushing both mom and husband could tell **entire truths were not being conveyed**. we firmly believe our best interest was completely on their mind however when c-section was looking a must **just telling us would have been better** than catching glances and side conversations that said otherwise.”

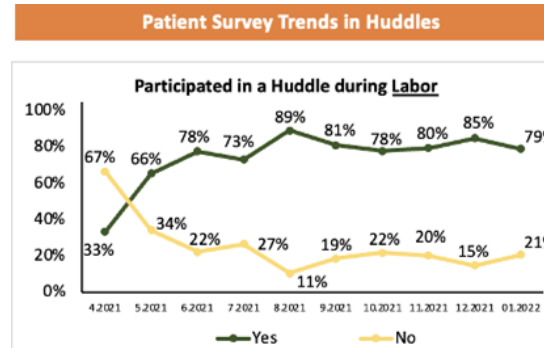
““I had a mostly positive birth experience. I **would have appreciated being asked about what I thought, and options presented as well** as be included in the provider huddle.”

# Data Report Example Data

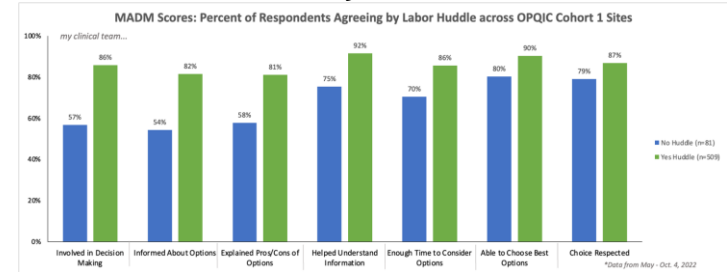
## Demographics



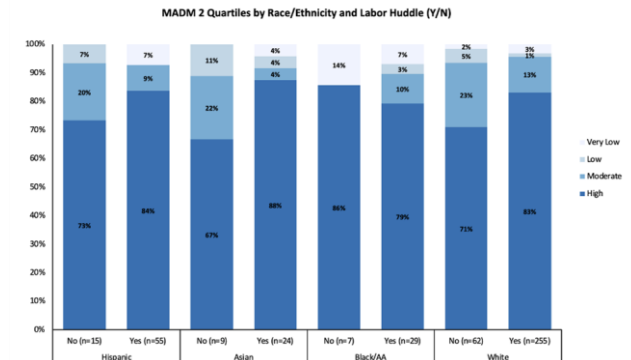
## Participation in huddles



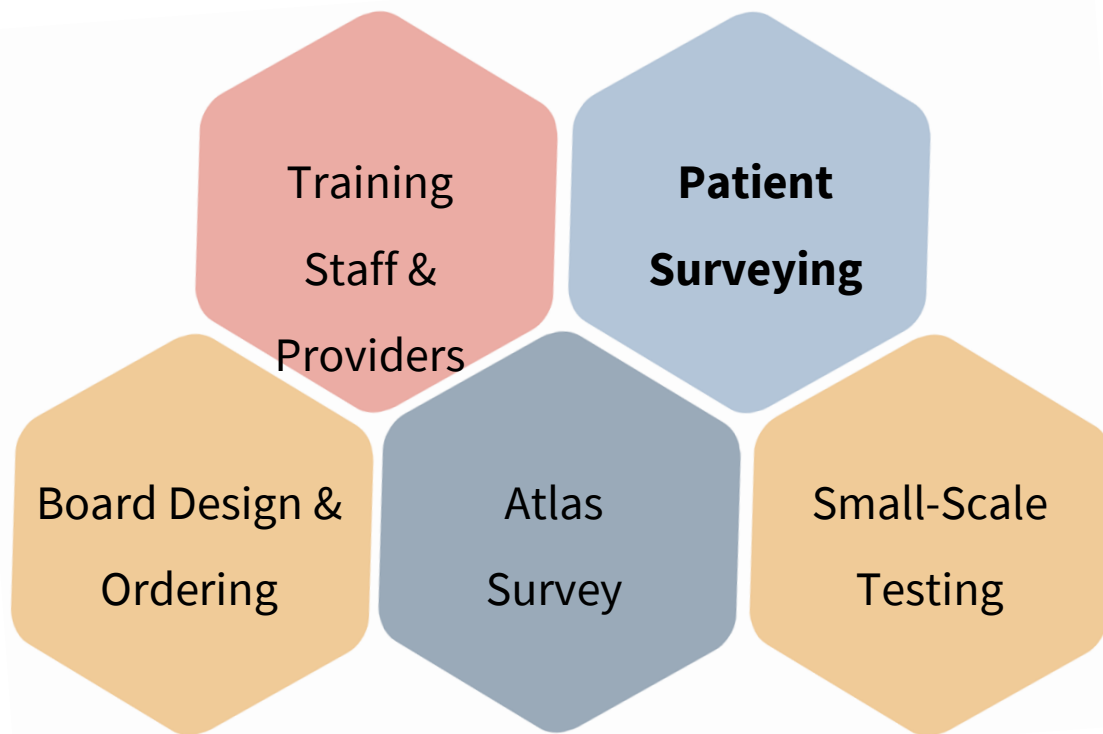
## MADM scores by huddle



## MADM scores across demographics



# Implementation Progress Check-in





## Team



*Raia*

*Asher*

*Donna*

*Dr. B*

## Preferences



*-natural, like last time*

*-but worried about induction*

## Plan of Care



### *For Raia*

*-Move around, give lots of ideas*

*-check BPs*

### *For Baby*

*-wireless all the time*

### *For Labor*

*-IV pitocin ↗ → ↗ →*

## Next Huddle



*-as needed*

*-on request*



## Postpartum Shared Planning Board

### Team:



*Alea & baby Avi*

*Aizpea*

*Trisha (nurse)*

*Dr. Sugar (Baby's Dr.)*

*Dr Chien (Alea's Dr.)*

### Preferences:



*-Go home ASAP*

*-Sleep!*

*-Breastfeeding, needing help*

### Plan of Care



#### *For Alea*

*-Cluster Care (call us when you're awake!)*

*-Sleep between feeds*

*-Shower in AM*

### Next Huddle:



*-as needed*

*-on request*

### Plan of Care



#### *For Baby Avi*

*-breastfeed on demand, no more than 3 hrs*

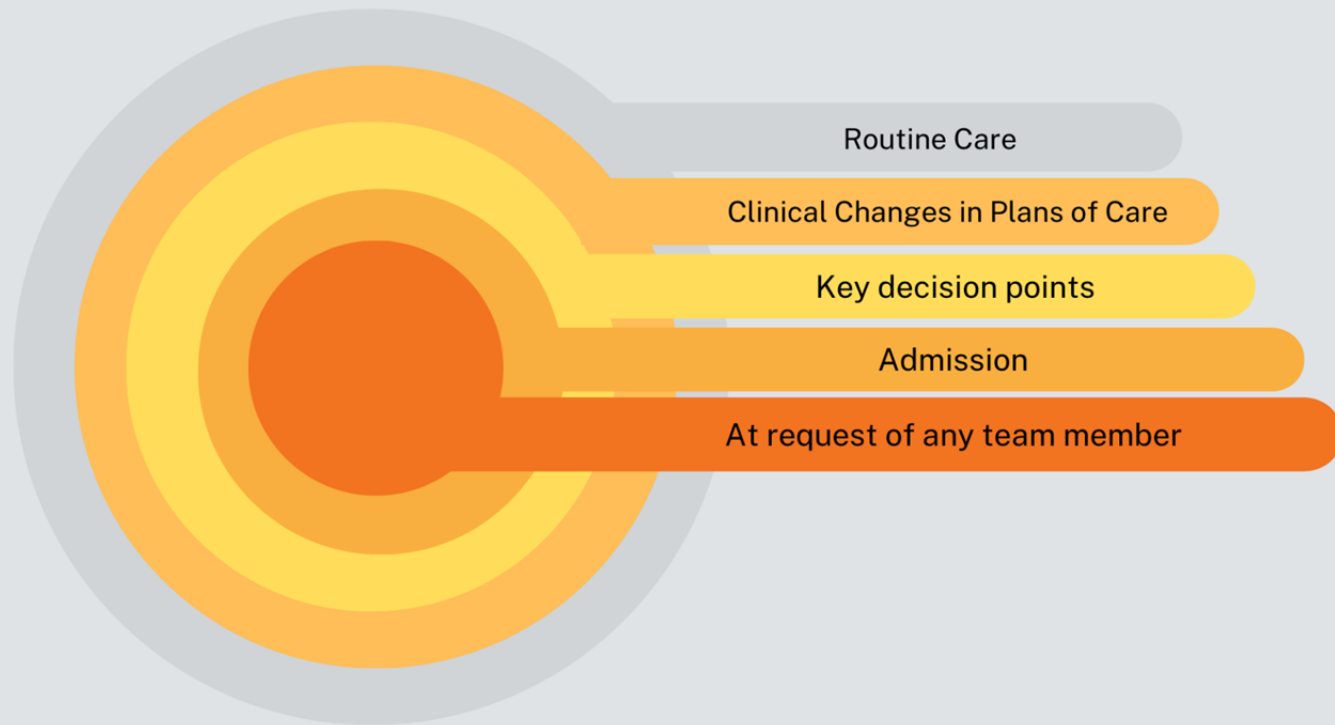
*-test  after next feed*

### Next Huddle:



*-if needed*







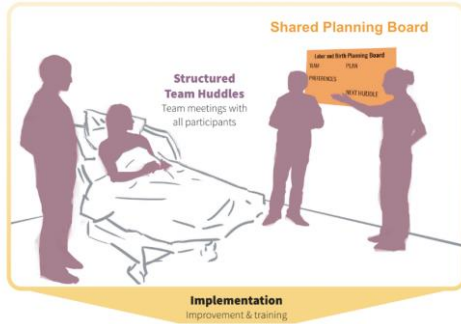
HEAR



Learn more at [cdc.gov/HearHer](https://cdc.gov/HearHer)

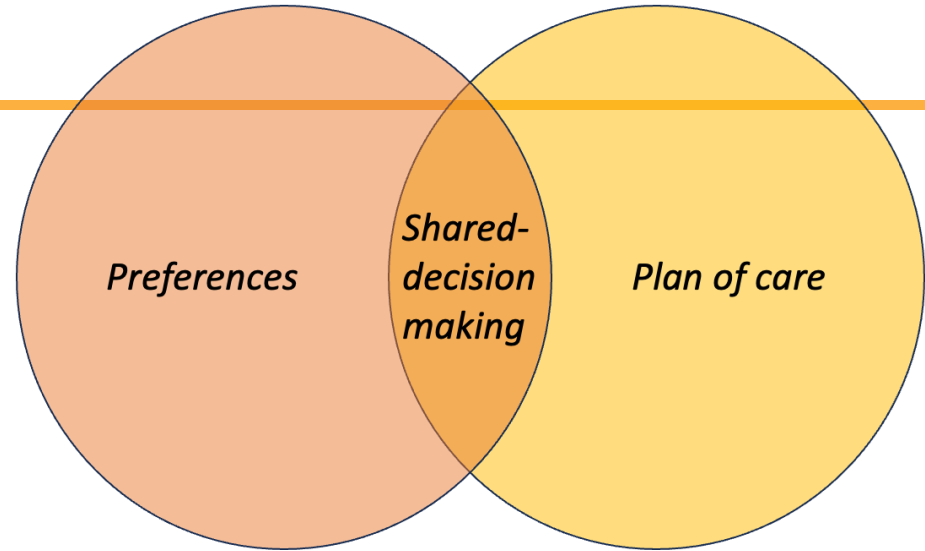
## Equal Care

Components which are critical to successful delivery of the intervention<sup>1</sup>



Labor and Delivery Planning Board	
TEAM	PLAN
	Mom:
	Baby:
	Labor Progress:
PREFERENCES	NEXT ASSESSMENT
	EARLY LABOR      ACTIVE LABOR      PUSHING

## Equitable Care



Eliciting preferences



Clearly distinguishing plan for birthing person, baby, and labor progress




# Launch the project!





# Advertise - Invite - Promote

 **The Tara Hansen Foundation**  
6h · 🌐

New Jersey continues to fight for mothers. We're excited to see the [#TeamBirth](#) program piloted here at home and we know this idea of team communication will make a difference.


**RWJBarnabas Health**  
1d · 🌐

Cooperman Barnabas Medical Center and Monmouth Medical Center deliver nearly 13,000 babies a year and we are excited to collaborate with the New Jersey Health Care Quality Institute, the New Jersey Department of Health, and Ariadne Labs to launch the [#TeamBirthNJ](#) model in New Jersey.

[#TeamBirth](#) was designed around best practices in communication, teamwork, and clinical care to ensure that people giving birth and the clinicians who are caring for them have shared input and understanding into decisions during labor and delivery. It was developed by Ariadne Labs, a joint center for health systems innovation at Brigham and Women's Hospital and the Harvard T.H. Chan School of Public Health in Boston.

[#LetsBeHealthyTogether](#)

# TEAMBIRTH



**Join Our Conversation About Team Birth... on 2 Blue!**

Three events, three days.

**Tuesday, Jan. 28 | 7 to 9 a.m.**

**Wednesday, Jan. 29 | 6 to 8 p.m.**

**Thursday, Jan. 30 | 11 a.m. to 1 p.m.**

Learn about our team approach to improving patient-centered communication. Enjoy refreshments and fun for ALL – near the Family Maternity Center entrance, in the seating area on the second floor outside the Blue zone elevator.

**NEW JERSEY 101.5**


NEWS | TRAFFIC | WEATHER | LISTEN | OUR SHOWS | MORE ▾

Q 📺 f

**TEAMBIRTH LAUNCHES AT NJ HOSPITALS TO ENHANCE LABOR AND DELIVERY**

 Mikos

 Dino Fiamma | Published: September 18, 2022

 **INTEGRIS Health** @integrishealth\_ · Oct 4, 2022

We are excited to announce that we are launching TeamBirth at five INTEGRIS Health Women's Centers this week! TeamBirth from Ariadne Labs is an evidence-based tool for improving communication and teamwork during childbirth. [rdco.io/4Uw\\_gBAYFAA](https://rdco.io/4Uw_gBAYFAA)



# TeamBirth Tees



# TeamBirth Onesies

- Color Numbers:
  - Print C0 M67 Y100 K0
  - Screen R244 G117 B33
  - Web #F37420
- We'll send the TeamBirth logo in a file following this session!







## Midwifery Birth & Wellness Center

52 likes · 72 followers

Message



Midwifery Birth & Wellness Center

May 23 · 🌐



Look for our new TeamBirth signs around the office! ☀️

"TeamBirth ensures people giving birth and the clinicians who are caring for them have shared input and understanding into decisions during labor and delivery." - ARIADNE LABS

The goal behind TeamBirth is to create a safe environment where everyone feels heard and responsible for the decisions being made during the birth process. We do this by calling regular team huddles to talk about where we are in the labor process, how everyone is feeling, and set expectations for what is to come. Through the TeamBirth model, we're able to empower those giving birth to be in control of their individual birth. This also gives us the opportunity to include their whole support system in the shared decision making process. Our team huddles include your midwife, nurse, partner, doula, family and friends - anyone who you brought to support you gets the chance to ask questions and give input during our huddles.

We have recently put out these TeamBirth signs to remind our families that they are part of their own birth team! As the person giving birth or the people supporting, you are able to request a huddle whenever you feel the need for some clarification, direction, or updates. We want these signs to serve as reminders that we are here for YOU and we will always encourage your participation in the decision making during your birth.

Feel free to ask your midwife more about TeamBirth at your next visit 😊

[#childbirth](#) [#birth](#) [#familycentered](#) [#familycenteredbirth](#) [#birthcenter](#)  
[#birthcenterbirth](#) [#njbirthcenter](#) [#midwife](#) [#njmidwife](#) [#teambirth](#)  
[#shareddecisionmaking](#)

# Social Media Toolkit



## Sample Press Release

**DRAFT: Not for release**

### Media Contact

#### **[Your Medical Center] Launches TeamBirth to Enhance Patient Experience During Labor and Delivery**

DATELINE (location, date) -- [Your Medical Center] today announced the launch of [TeamBirth](#), a new initiative to enhance the birthing experience and improve outcomes for people giving birth and their babies. TeamBirth is a communication and teamwork process that closes gaps in communication that challenge the safety and dignity of people giving birth. It was developed by [Ariadne Labs](#), a joint center for health systems innovation at Brigham and Women's Hospital and the Harvard T.H. Chan School of Public Health in Boston, MA.

"At [insert medical center name], we want all people giving birth and the clinicians who care for them to feel empowered to participate in decisions made during labor and delivery," said [spokesperson for the medical center.] "TeamBirth will move us closer to that goal by fostering teamwork and communication among physicians, nurses, staff, and the person giving birth so that our patients feel heard and supported from the moment they walk into the hospital."



# Celebratory Nourishment!





# Next Steps/Focus for July:

## **Boards and Small-Scale Testing**

- Purchase/Order boards ASAP
- Install in advance of September launch

## **Launch Planning**

- Communicate launch across clinicians, leadership, community, etc.
- Involve Marketing/Gov Affairs Teams in planning
- Plan launch festivities - Media coverage, speakers, swag

## **Clinician Training - July/August**

- Continue assigning/circulating training videos
- Execute scenario training
- Create system for tracking training completion

## **Data Collection - August**

- Develop patient surveying process
  - Will get go-ahead from Ariadne in upcoming weeks

