



DELIVERY DECISIONS INITIATIVE

TEAMBIRTH



NEW JERSEY  
HEALTH CARE  
**QUALITY  
INSTITUTE**



Collaborative Session 7  
September 27, 2023

# Collaborative Session 7

- Launch recaps and sharing!
  - Community Engagement
- Operationalizing TeamBirth
  - Culture changes
  - Scenario training
- Surveying
- Next Steps
  - Data submission process

# Virtua Mount Holly



# Virtua Mount Holly



# St. Peter's University Hospital & Mary V. O'Shea Birth Center



# St. Peter's University Hospital & Mary V. O'Shea Birth Center





## Ariadne Labs

5,715 followers

4d

"Dignity." "Meeting people where they are." TeamBirth fosters communication and teamwork so patients can have the role they want in their birth journey. Congratulations, Virtua Mount Holly Hospital on your launch, and welcome to [#TeamBirth!](#)



## Virtua Health

33,204 followers

6d · Edited

Virtua Mount Holly Hospital is officially TeamBirth NJ! And we recently held a launch event to announce this important initiative.



## Ariadne Labs

5,715 followers

4d

Welcome to [#TeamBirth!](#) We're thrilled [Saint Peter's Healthcare System](#) has launched TeamBirth at Saint Peter's University Hospital and the Mary V. O'Shea Birth Center! Thanks for your commitment to communication for every patient, every time.



## Saint Peter's Healthcare System

8,647 followers

6d

Saint Peter's celebrated the launch of TeamBirth yesterday! Labor and delivery is a team endeavor. A birth team can include patients, physicians, nurses, midwives, doulas, and support people, and each person has


something  
outcomes  
TeamBirth  
communi



## Saint Peter's University Hospital · Follow

6d ·

Saint Peter's celebrated the launch of TeamBirth yesterday! Labor and delivery is a team endeavor. A birth team can include patients, physicians, nurses, midwives, doulas, and support people, and each person has something valuable to contribute. Better communication leads to better outcomes for patients and providers. We are excited to launch the TeamBirth initiative here at Saint Peter's University Hospital to improve communication and empower every person to be part of the ... [See more](#)

 **Virtua Health · Follow** September 19 at 4:29 PM ·

Virtua Mount Holly Hospital is officially TeamBirth NJ! And we recently held a launch event to announce this important initiative.

TeamBirth NJ is an evidence-based, national model for better provider and patient communication, which is also called "shared decision-making." The initiative ensures that people giving birth and the clinicians caring for them have shared input and understanding into decisions during labor and delivery.





# Clear disparities in mistreatment during maternity care exist



Twenty percent of women report experiences of mistreatment during maternity care. 30% percent of Black, 29% of Hispanic, and 27% of multiracial people reported mistreatment.

The most common types of mistreatment reported were:

- Receiving **no response to requests for help**.
- Being shouted at or scolded.
- Not having their physical privacy protected.
- Being threatened with **withholding treatment** or made to **accept unwanted treatment**.

# Culture Shift

- Respectfully redirect conversations
- Speak humanely about patients and families
- Encourage appropriate team interactions
- Identify huddle opportunities
- Support coordination of a huddle
- Encourage use of TeamBirth board in addition to huddles

***Any team member can request a huddle***





**Standardization is equality**

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*Individualized care is critical  
for equity*

# Facilitator guidance for Scenario Prompts

## TEAMBIRTH

### Scenario Prompt A



#### Team - we are all on the same team!

- Team approach, not top-down approach (psychological safety)
- Encourage the habit of updating your own name on the board
- Use this section to signal to the whole team that a huddle is now taking place.
  - "I'm Dr. Ryan, I came by to check on you, let's have a TeamBirth huddle!"
  - "Since your doula is here now, I know you wanted to talk through options, let me call Dr. Ryan and we can huddle over the phone."
- Encourages "consent" - not doing things TO a patient, but with understanding and agreement

#### Preference/Concerns - elicit voices!

- Patient/support people are encouraged to participate in a huddle, verbally and on the shared planning board
- Establishing the default that the patient's voice matters - we want to hear you!
- Using open-ended questions to elicit thoughts, concerns, questions about the current plans
- Check in with each member of the clinical team

#### Plan - shared decision-making!

- Practice creating a separate plan for me, my baby, labor progress
  - **Mom:** *get prepped for epidural*
  - **Baby:** *watch on monitor*
  - **Progress:** *keep going! Chair or ball for now*
- Clinical team should speak out loud
  - Nursing assessments, expertise, and questions inform the plan
  - Provider expertise and recommendations form the plan
  - State what are we doing as a team, and what preferences we're addressing—this generates ideas for what to write in the plan section
- Practice writing brief, non-medical words, ideally using similar words as the patient

#### Next huddle - anyone can request a huddle!

- Another opportunity to validate the patient being heard, and the teamwork approach
- Avoid specific times, but reassure with general timeframes, reasons to revisit the plan, or as needed to provide clarification for any team member
- Nurses know providers are available as needed/if things change. Show the patient and family this!
- Close the loop on the plan; everyone should have an opportunity to participate in the huddle.

## TEAMBIRTH

Clara responds that it sounds like a good plan, and Bethany asks Jay and Susie to update the Shared Postpartum Board.

Postpartum Shared Planning Board	
Team:	Welcome, baby Oliver!
Clara	
Jay (partner)	
Bethany (midwife)	
Susie (nurse)	
Dr. Hill (Pediatrician)	
Preferences:	
-Go home ASAP	
-Minimal interruptions	
-Exclusive breastfeeding	
Room:	Plan of Care:
Baby: Oliver	Clara :
Next Huddle:	
Clara : morning	
Baby: pediatrician	
(Last)	

**Example of an updated Shared Postpartum Planning Board**  
Clara's preferences, the plan, and next assessments

"We will huddle again anytime you feel you need a change in Clara's preferences, the plan, and next assessments the first time with your nurse Susie's help. I will plan to do so sooner if you have any concerns."

Clara gets out of bed with Susie's help and uses the PRN pain medication. When Susie takes Clara's next blood pressure reading, she repeats the blood pressure again with the 153/89. She repeats the blood pressure to huddle regarding speaker phone from the bedside to huddle regarding

Susie says "Hi Bethany, I am in Clara's room and elevated blood pressure readings of 153/89 and I will take?"

Bethany says, "Hi Susie, thanks for calling me. Higher than we would like to see. Are you having vision, or pain in your upper right belly?" Clara states "Well that is good - please monitor those changes. I will have Susie check your blood"

# Practice Scenario



**Team**



**Plan of Care**



*For Raia*

*For Baby*

*For Labor*

**Preferences**



**Next Huddle**



## Team



Raia  
Asher  
Donna  
Dr. B

## Preferences



## Plan of Care



*For Raia*

*For Baby*

*For Labor*

## Next Huddle



## Team



*Raia*

*Asher*

*Donna*

*Dr. B*

## Plan of Care



*For Raia*

*For Baby*

*For Labor*

## Preferences



*-natural, like last time*

*-but worried about induction*

## Next Huddle



## Team



*Raia*

*Asher*

*Donna*

*Dr. B*

## Plan of Care



### *For Raia*

*-Move around, give lots of ideas*

*-check BPs*

### *For Baby*

### *For Labor*

## Preferences



*-natural, like last time*

*-but worried about induction*

## Next Huddle



## 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*

## Next Huddle



## 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



## 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*

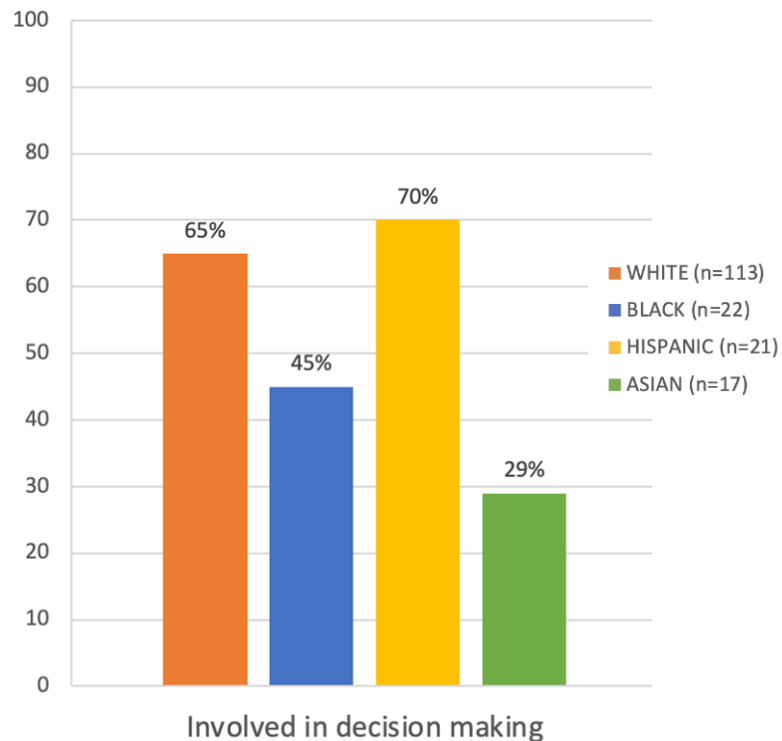


# Patient Survey Process

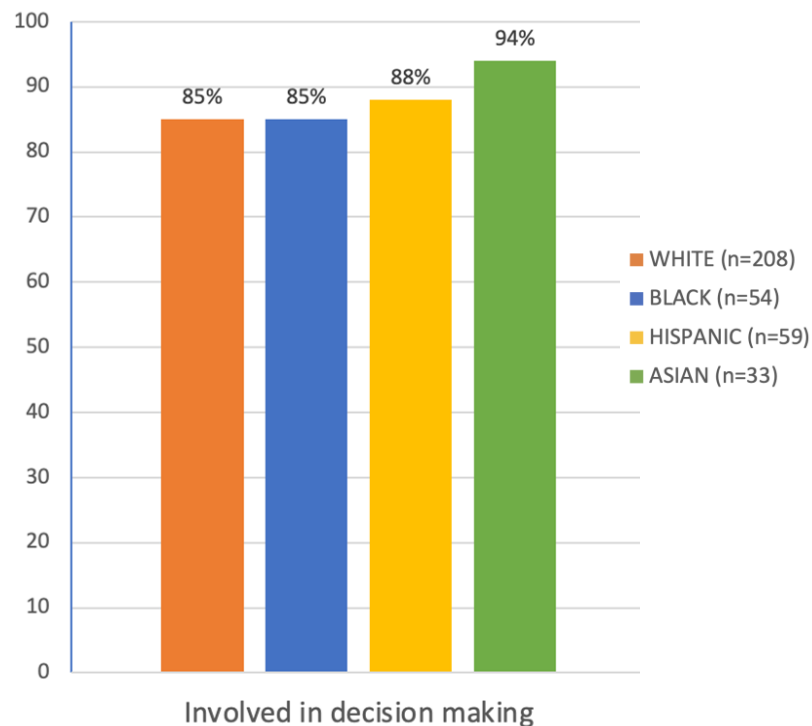


# Patient Survey Data Example

Patients that **DID NOT** Participate  
in a Labor Huddle



Patients that **DID** Participate  
in a Labor Huddle



# Changes in Comments Over Time

“Every single nurse was top-notch. Attentive, kind, enthusiastic, personal... excellent care!”

“My doctors and delivery nurses were wonderful! I truly appreciated all the care and concern.”

“The staff in labor and delivery were amazing. My water broke unexpectedly and the doctors and nurses helped my husband and I feel safe and secure.”



“Majority of my care team throughout my stay was fantastic and went above and beyond to help me **understand my options** and make me **in control** of my birth and care of my son.”

“DOCTOR was great. She made me feel in control with **making decisions**. The residents were also great!”

“We had a wonderful labor and delivery here. Excellent care. My doctor was **extremely agreeable to my personal preferences** at some times I would have appreciated some stronger preference from them, versus me being in charge.”

# Data Submissions - NJHCQI Website

[ABOUT](#)[OUR WORK](#)[MEMBERSHIP](#)[CONTACT](#)[MEDIA CENTER](#)[EVENTS](#)[RESOURCES](#)[#QIMEMBERJOBS](#)

## TEAMBIRTH NJ COHORT 2

### RESOURCES

[GENERAL INFORMATION](#)[DISCUSSION GUIDES](#)[PATIENT SURVEYING](#)[PRINCIPAL INVESTIGATORS \(PI\)](#)[STAFF TRAINING](#)[TEAMBIRTH DATA SUBMISSION FORMS](#)

- [Click here](#) to view the Monthly Birth Volume Submission Form
- [Click here](#) to view the Staff Training Submission Form
- [Click here](#) to submit a TeamBirth Story

# Monthly Data Submissions

## TEAMBIRTH MONTHLY BIRTH VOLUME SUBMISSION

Please complete this form to submit your monthly birth volume. Data should be submitted by the first Friday of the month and only include the preceding month's total birth volume.

For example, by Friday, July 7, the first Friday of July, you would submit your total birth volume for June (all births that occurred from June 1 to June 30).

Hospital Name *(Required)*

SELECT YOUR HOSPITAL NAME HERE

Name of Person Submitting Information *(Required)*

What month are you submitting data for? *(Required)*

SELECT A MONTH HERE

Please enter your site's total birth volume for the month you indicated above. *(Required)*

SUBMIT

## TEAMBIRTH STAFF TRAINING SUBMISSION

Please complete this form to report on implementation team and clinical staff that have participated in TeamBirth training at your site. Training includes completion of assigned TeamBirth training videos and/or in-person training by implementation team members.

Hospital Name - Select your site from the list below *(Required)*

SELECT YOUR HOSPITAL NAME HERE

Name of Person Submitting Information *(Required)*

Enter the number of clinicians and staff members that have completed TeamBirth Training (includes physicians, midwives, nurses, and residents) *(Required)*

Enter your site's total number of clinicians and staff members for the units who were provided TeamBirth training (includes physicians, midwives, nurses, and residents). This allows us to calculate the percentage of clinicians/staff trained. *(Required)*

SUBMIT

# Huddle Observation Form



**Guidelines:** in October, select *at least* three people to observe *at least* three huddles

