ARIADNE LABS
DELIVERY DECISIONS INITIATIVE

TEAMBIRTH

NEW JERSEY HEALTH CARE QUALITY INSTITUTE

Cohort 4 Collaborative Learning Session #3

July 29, 2024

TeamBirth: Process Innovation for Clinical Safety, Effective Communication, and Dignity in Childbirth

Learning Session Agenda

Introduction	
TeamBirth Core Knowledge & Skills	○ Learn: Shared Planning Tool - NEXT HUDDLE ○ Learn: WHEN TO HUDDLE

TeamBirth Implementation	○ Implementation Roadmap & Timeline
	○ Current core activities:
	  ○ PROVIDE TRAINING & PRACTICE HUDDLES
	  ○ Introduce - CONDUCT PATIENT SURVEYING
	  ○ Reminder - ASSESS YOUR CONTEXT

Looking Ahead	○ Takeaways From Today ○ Action Items

Introductions

Meet your TeamBirth support

NEW JERSEY HEALTH CARE QUALITY INSTITUTE

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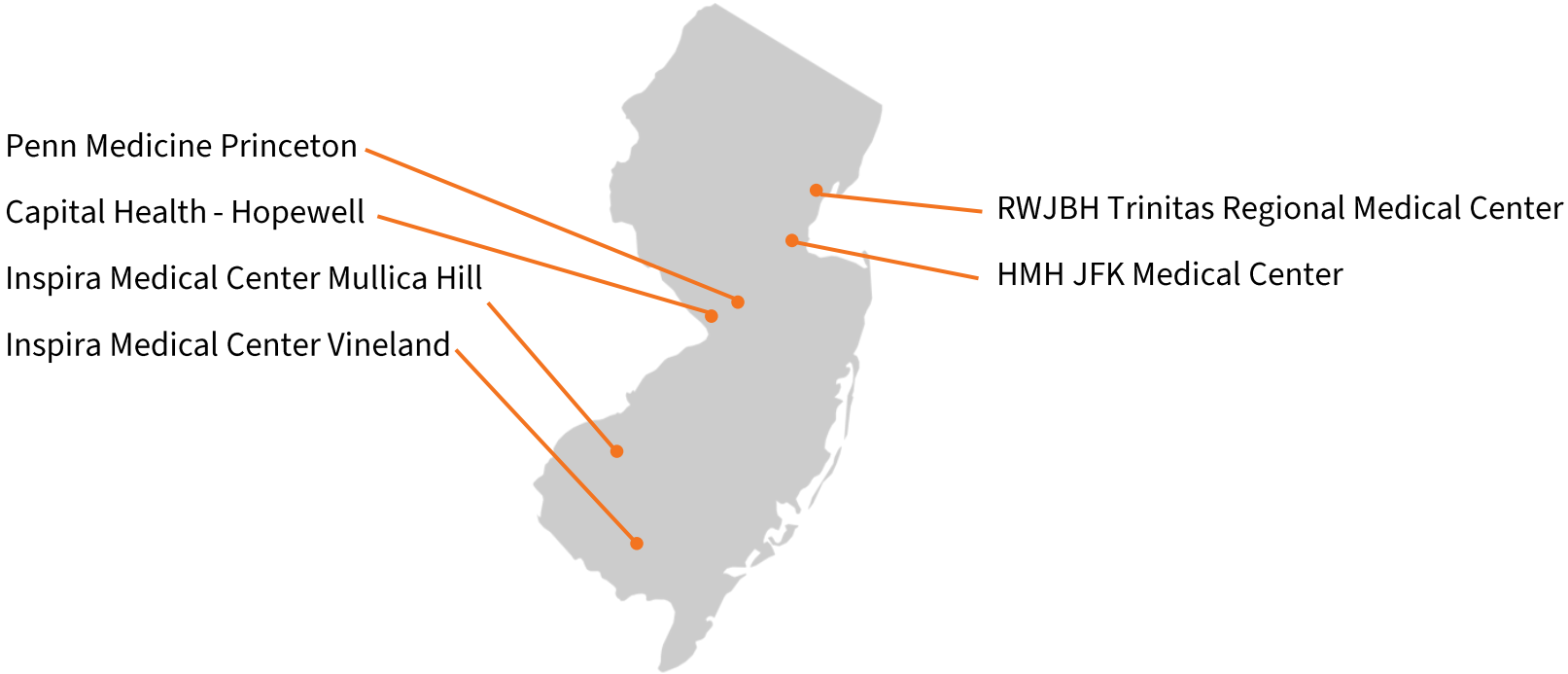
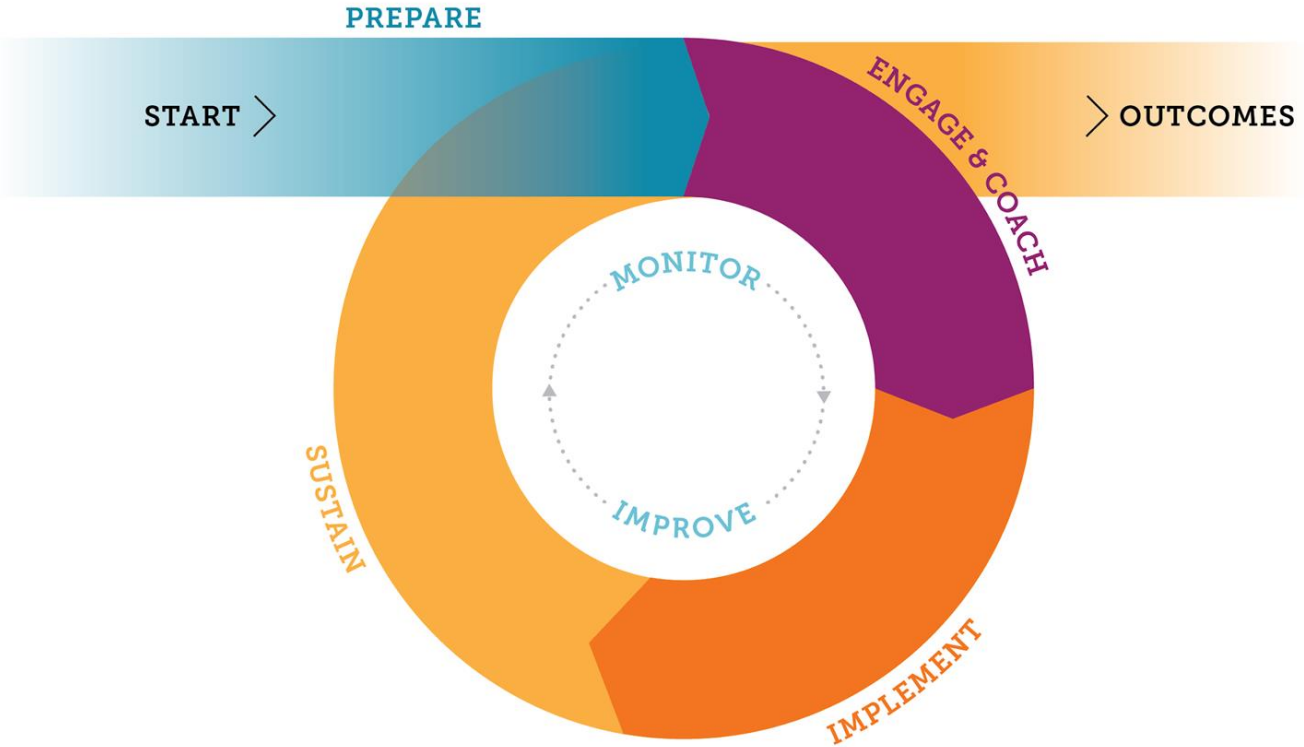


Who is here with you from your organization

TeamBirth Implementation Pathway

Guiding practice and culture change activities to ensure effective and sustainable implementation



TeamBirth Implementation Roadmap

Building on the priority implementation activities from the first session

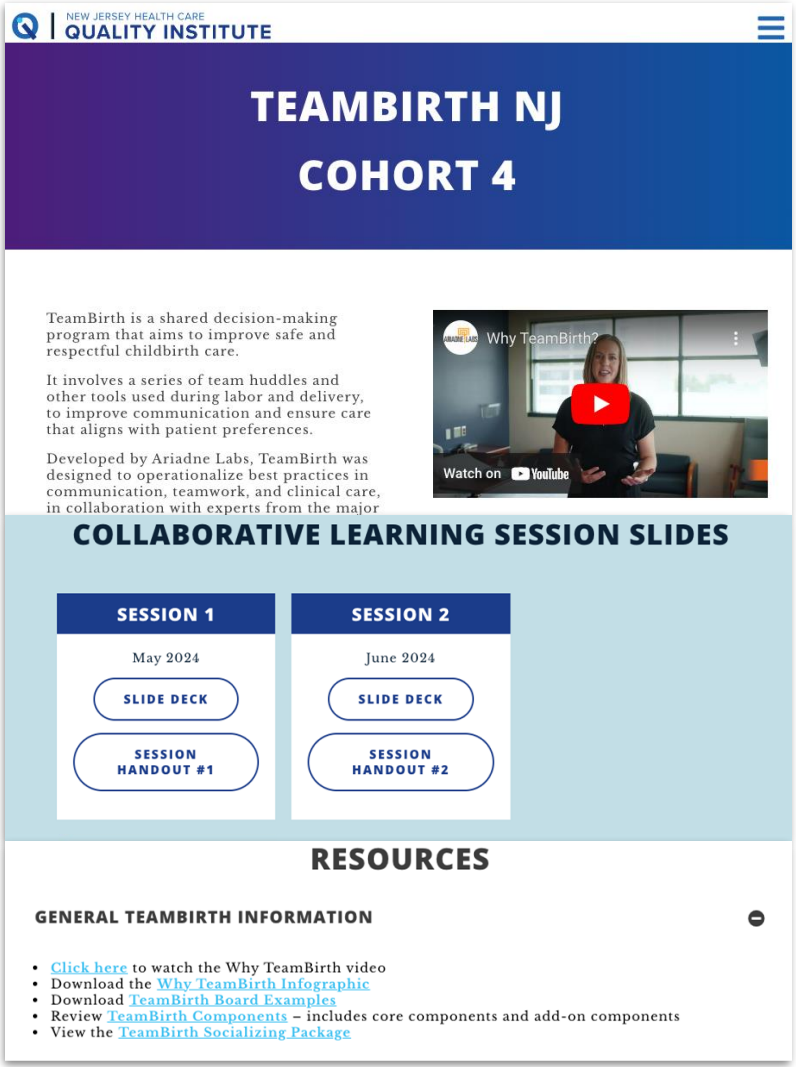
PHASE	PREPARE	ENGAGE & COACH	IMPLEMENT	SUSTAIN
CORE ACTIVITIES	✓ **Build your team** ✓ **Develop your strategy** ✓ **Assess your context** ✓ **Customize TeamBirth**	✓ **Socialize TeamBirth** ✓ **Provide training & practice huddles** ✓ **Conduct patient surveys** ✓ Test & improve	✓ Collect data & feedback ✓ Launch TeamBirth ✓ Monitor & celebrate progress	✓ Embed for sustainability ✓ Evaluate impact & continuously improve

NJHCQI TeamBirth Websites

Access your cohort's resources at this **private website**

www.njhcqi.org/teambirthnj-cohort4

Password: Cohort42024!



TeamBirth Core Knowledge & Skills

TeamBirth **Core** Components

Critical to successful delivery of TeamBirth across the maternal health continuum

1. STRUCTURED TEAM HUDDLES

Structured conversations that includes the birthing person and their support people

2. SHARED PLANNING TOOL

Visual tool that structures communication and provides space to document discussions during huddles

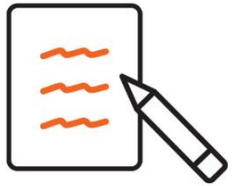
Shared Planning Tool

TEAM

PLAN

Me

Baby



Progress

PREFERENCES

NEXT HUDDLE

TEAMBIRTH

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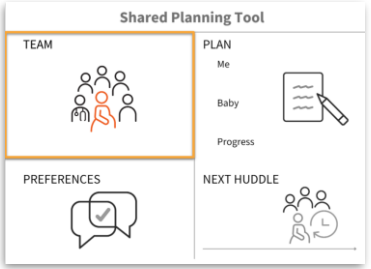
TEAM

KEY BEHAVIOR: Promote the role of each team member



INTENT

To ensure all roles have valuable input in shared decision-making

To establish **psychological safety** by providing an invitation and ongoing opportunity to participate

DETAILS

Verbalize that a TeamBirth huddle is occurring

Start with the patient followed by their support people

Ensure relevant team members are included

May include additional information (e.g. here until 7 pm shift change)

PREFERENCES

KEY BEHAVIOR: Elicit patient preferences, thoughts, & concerns to inform the current plan

INTENT

To humanize the person giving birth & gain insight to what matters most now

To give customized clinical care

To facilitate **equitable care**

DETAILS

May include referencing an already established birth plan

Expect them to change over time

They are opportunities to discuss expectations

Encourage support people to help write in this section

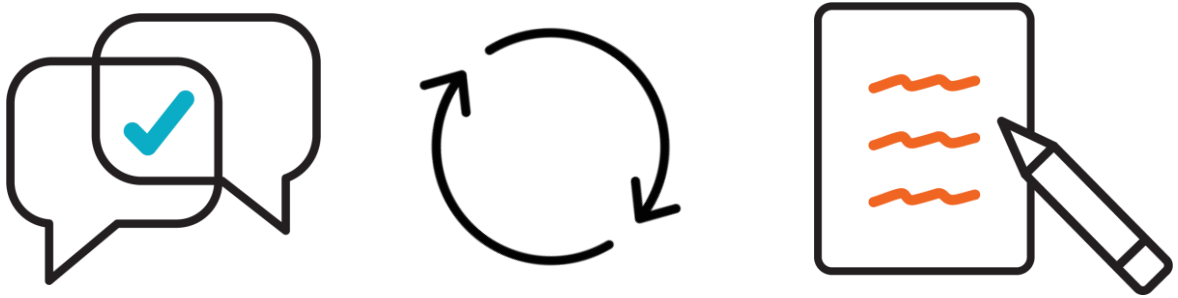
Should be written in the patient's word choice (ie. break water vs AROM)

CONNECTION: **PREFERENCES** AND **PLANS**

Patient preferences discovered in the Preferences section of the Huddle directly inform what is prioritized in the Plan section.

Elicit patient preferences that inform care planning

Distinguish the different care plans for the birthing person, baby, and labor progress



PLAN

KEY BEHAVIOR: Distinguish the different care plans

INTENT

To ensure transparency and precision during care planning

To facilitate clear communication and **shared-decision making**

DETAILS

Plan content should be written in patient friendly language

Each Huddle the Plan should be discussed even if no change is made

Can be updated more frequently as needed by the nurse

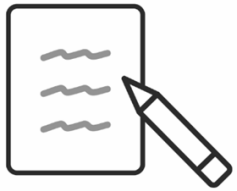
Shared Planning Tool

TEAM

PLAN

Me

Baby



Progress

PREFERENCES

NEXT HUDDLE

TEAMBIRTH

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NEXT HUDDLE

KEY BEHAVIOR: Set shared expectations for the timing of the next huddle

INTENT

To reduce uncertainty for the patient and support person

To facilitate **situational awareness**

DETAILS

Identify planned times for huddles
(e.g. next labor evaluation, in a specific time frame)

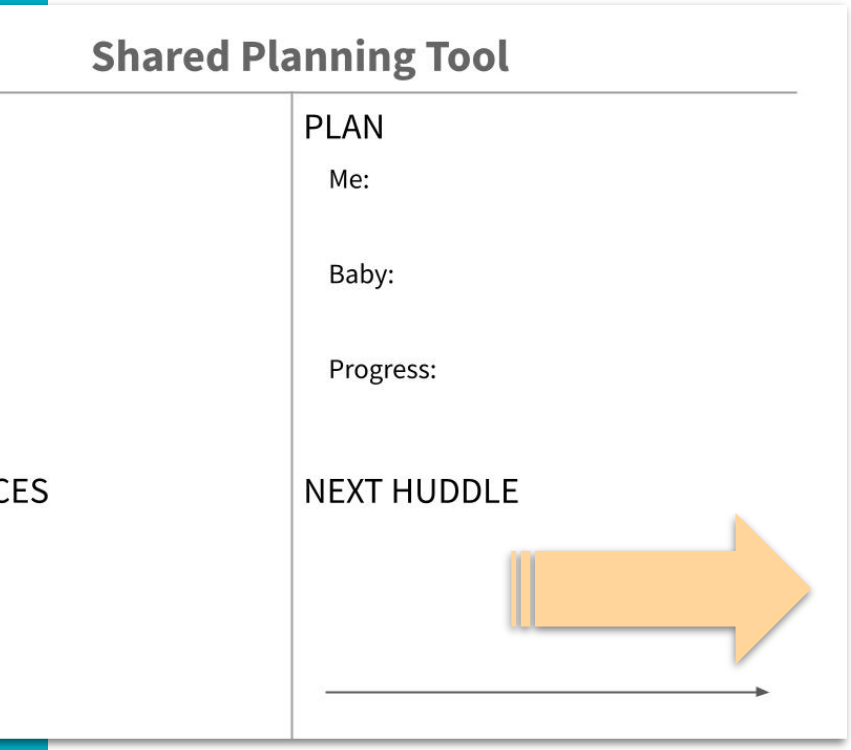
Identify likely reasons to initiate an as needed huddle
(e.g. if pain increases, a decision needs to be made)

Anyone can request a huddle

They can occur in-person or over the phone/video conference

Next Huddle

Facilitating situational awareness

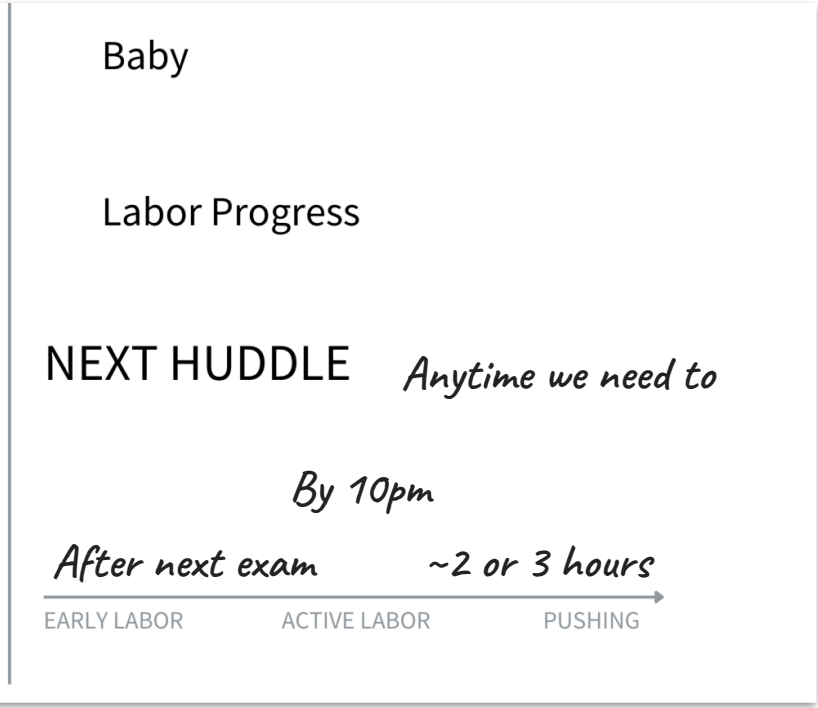


Wrapping up the Huddle based on the PLAN:

1. Set expectations and make sure the patient understands what is coming
2. Identify potential planned or as needed Huddles to note on the board

Next Huddle

Facilitating situational awareness



There is no prescribed number of huddles expected to occur per patient, per day, or per birthing experience

The goal is:

- To have a huddle anytime there is a change in conduction or care plan and by request
- *Not* to make you huddle more than is necessary for the typical standard of care

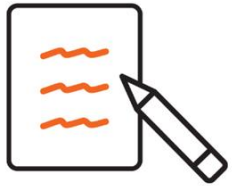
Shared Planning Tool

TEAM

PLAN

Me

Baby



Progress

PREFERENCES

NEXT HUDDLE

TEAMBIRTH

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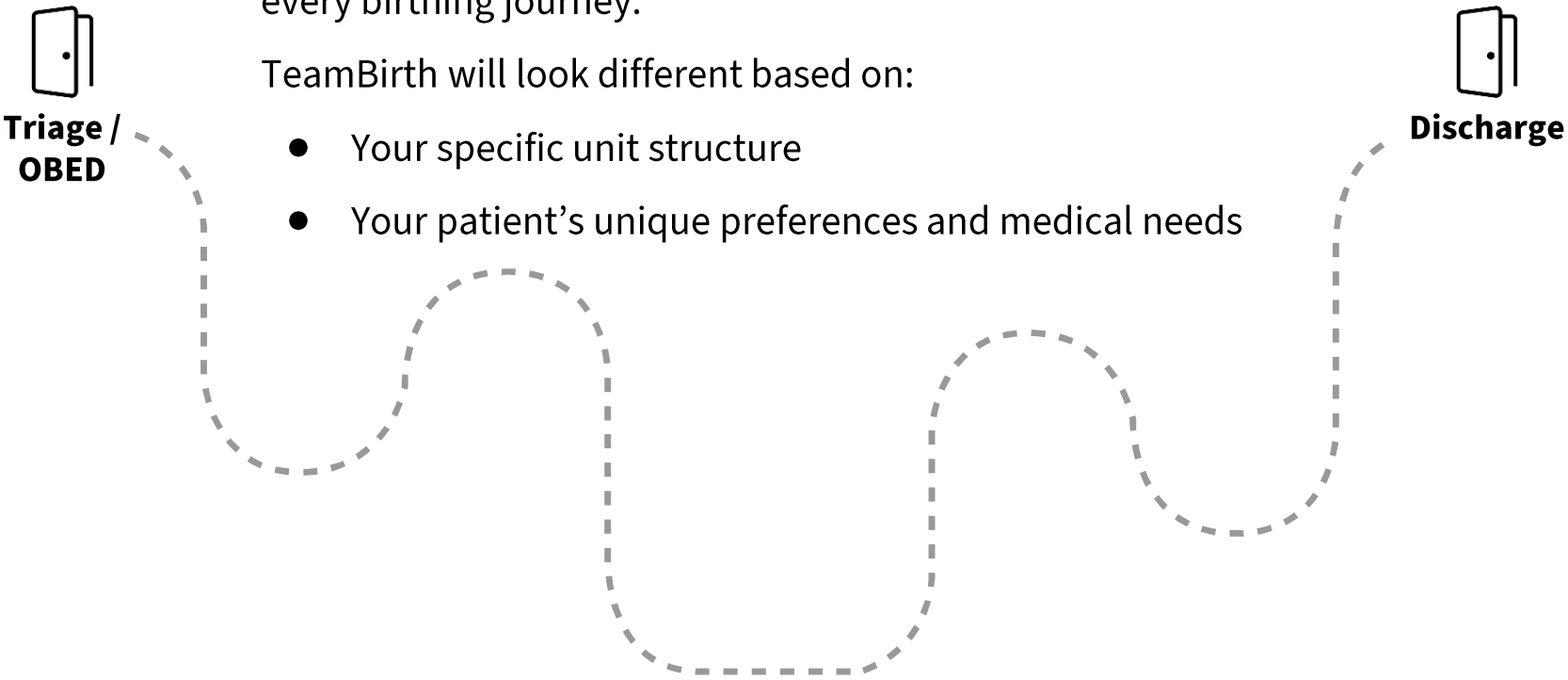
WHEN TO HUDDLE

Door to Door TeamBirth

TeamBirth sets the standard for team communication throughout every birthing journey.

TeamBirth will look different based on:

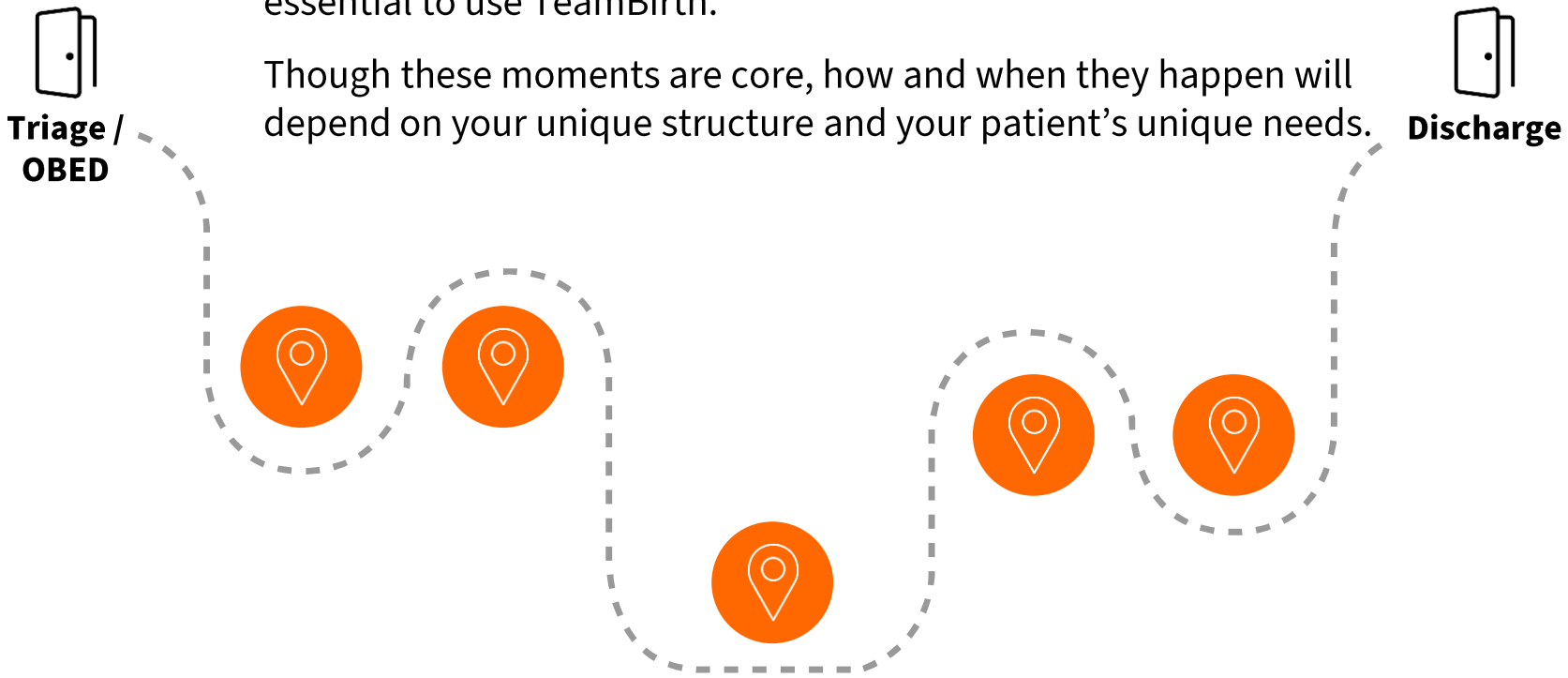
- Your specific unit structure
- Your patient's unique preferences and medical needs



Door to Door TeamBirth

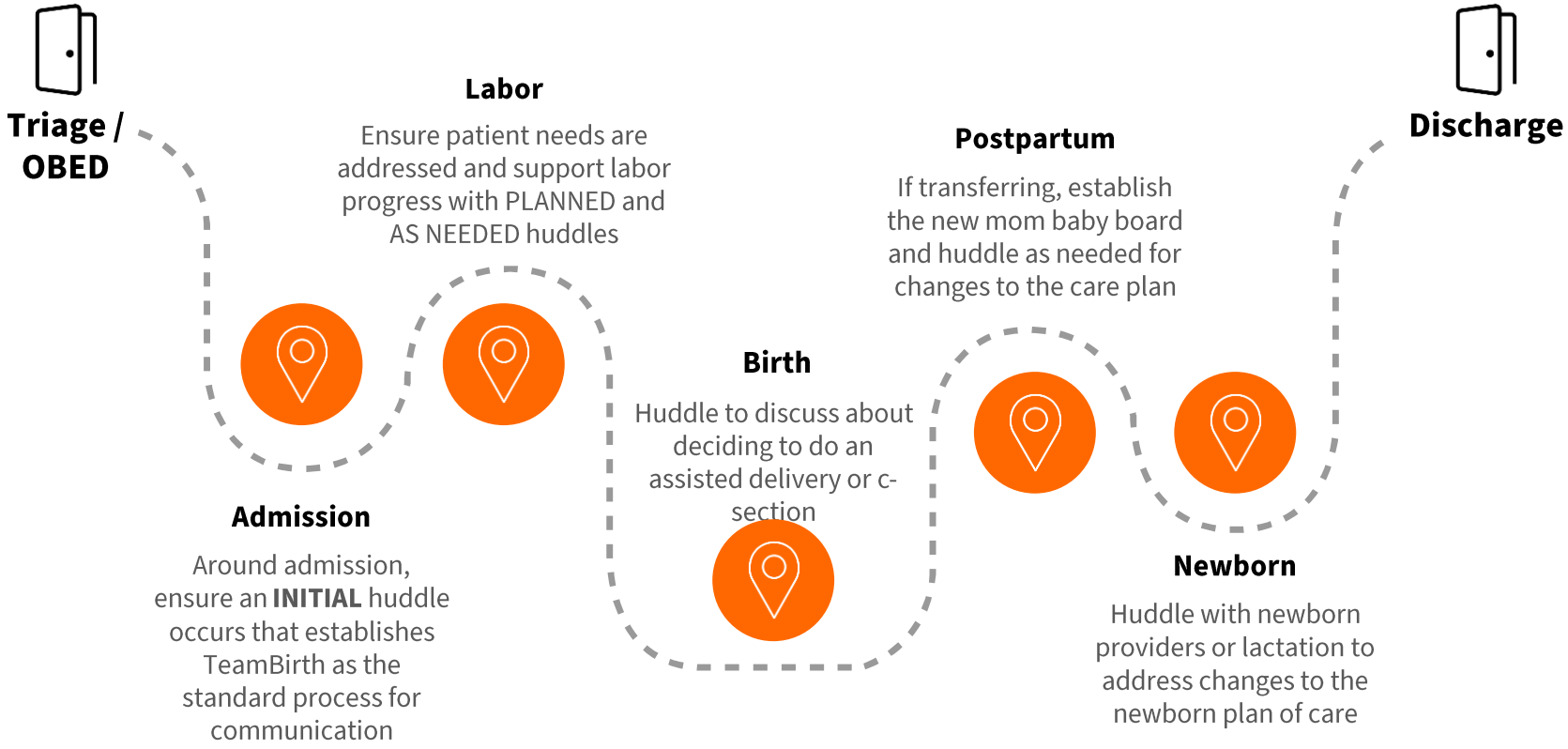
There are **key moments** throughout each journey when it is essential to use TeamBirth.

Though these moments are core, how and when they happen will depend on your unique structure and your patient's unique needs.



Door to Door TeamBirth

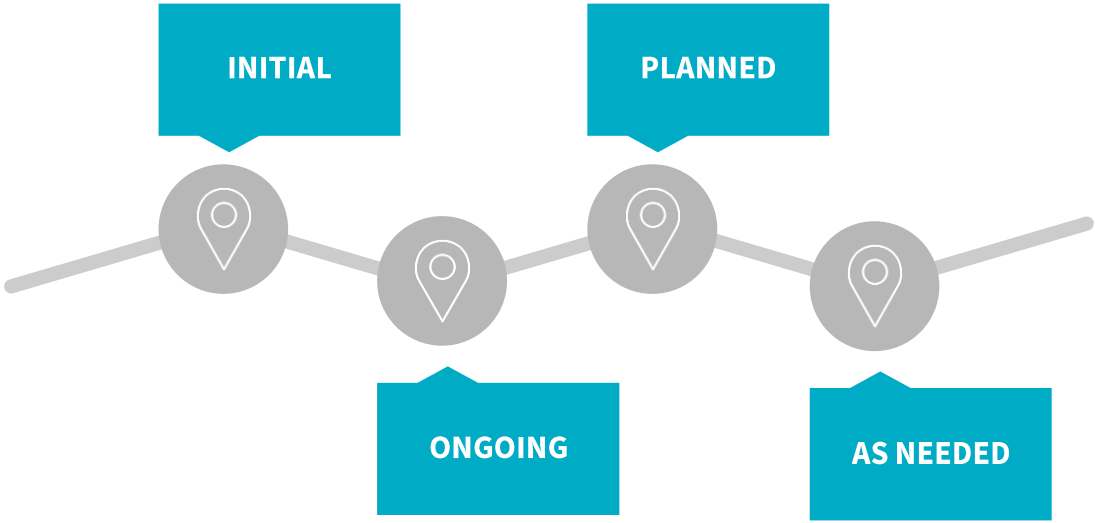
These **key moments** describe how TeamBirth is put in practice throughout the birthing journey.



Types of Huddles

These four different types of huddles help you identify and define what the **key moments** for TeamBirth look like in your unique context

They help you decide what will **spark** your huddles



Sparking a Huddle

Each huddle starts with a **spark** which is anyone identifying the need for a huddle.

There are many different reasons to huddle, but a huddle will never happen unless someone identifies the spark.

Triage / OBED

Discharge

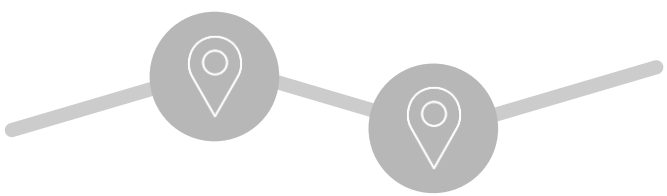
Types of Huddles

Every patient at a TeamBirth facility should experience an initial huddle

INITIAL

Occurs at or around admission to establish TeamBirth as the standard care process for communication for every patient

"Is this patient ready to admit?"



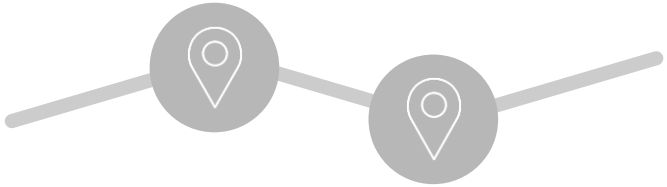
ONGOING

Occurs at key decision points, changes in the plan of care, and requests from any team member

Types of Huddles

PLANNED

Based on clinical workflows. Commonly understood time points when huddles are expected can be predicted or scheduled



AS NEEDED

Initiated when there is an unplanned update or communication need, often identified by the patient, support person, or nurse

Any member of the care team (including patients and support persons) requests a huddle

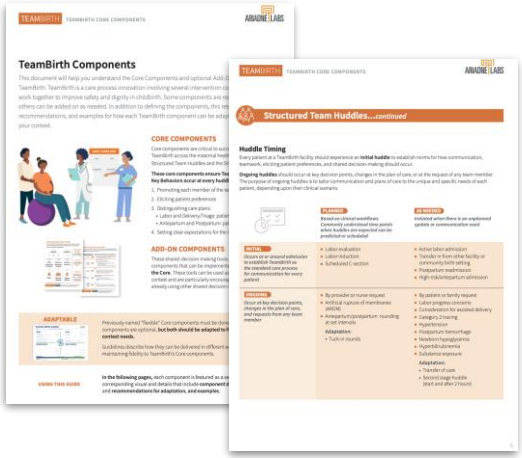
Identifying your key moments and their sparks

	PLANNED	AS NEEDED
INITIAL	» Labor evaluation » Labor induction » Scheduled C-section	» Active labor admission » Transfer in from other facility or community birth setting » Postpartum readmission » High-risk/antepartum admission
ONGOING	» By provider or nurse request » AROM » Antepartum/postpartum rounding at set intervals *Adaptation:* » *Tuck-in rounds*	» By patient or family request » Labor progress concerns » Consideration for assisted delivery » Category 2 tracing » Hypertension » Postpartum hemorrhage » **Newborn hypoglycemia** » Hyperbilirubinemia » Substance exposure *Adaptation:* » *Transfer of care* » *Second stage huddle (start and after 2 hours)*

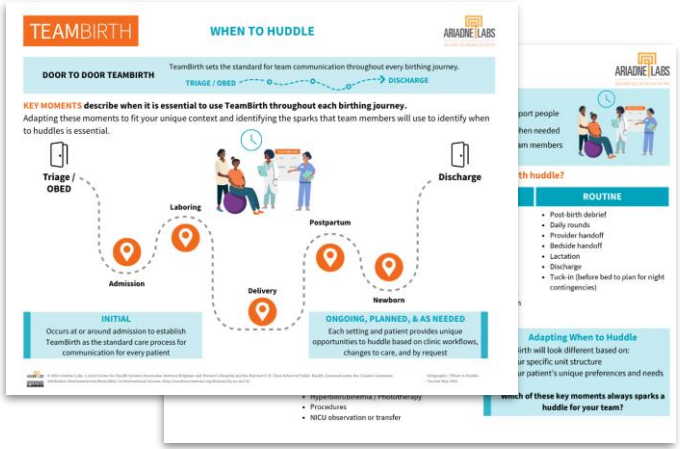
"Are we going to start supplementing with formula?"

HUDDLE TIMING

Review the TeamBirth Components resource for guidance on adapting Huddles to your unique context
go.ariadnelabs.org/TBcomponents



Use the When to Huddle infographic to align with your teams on your patient journey's unique key moments and huddle sparks

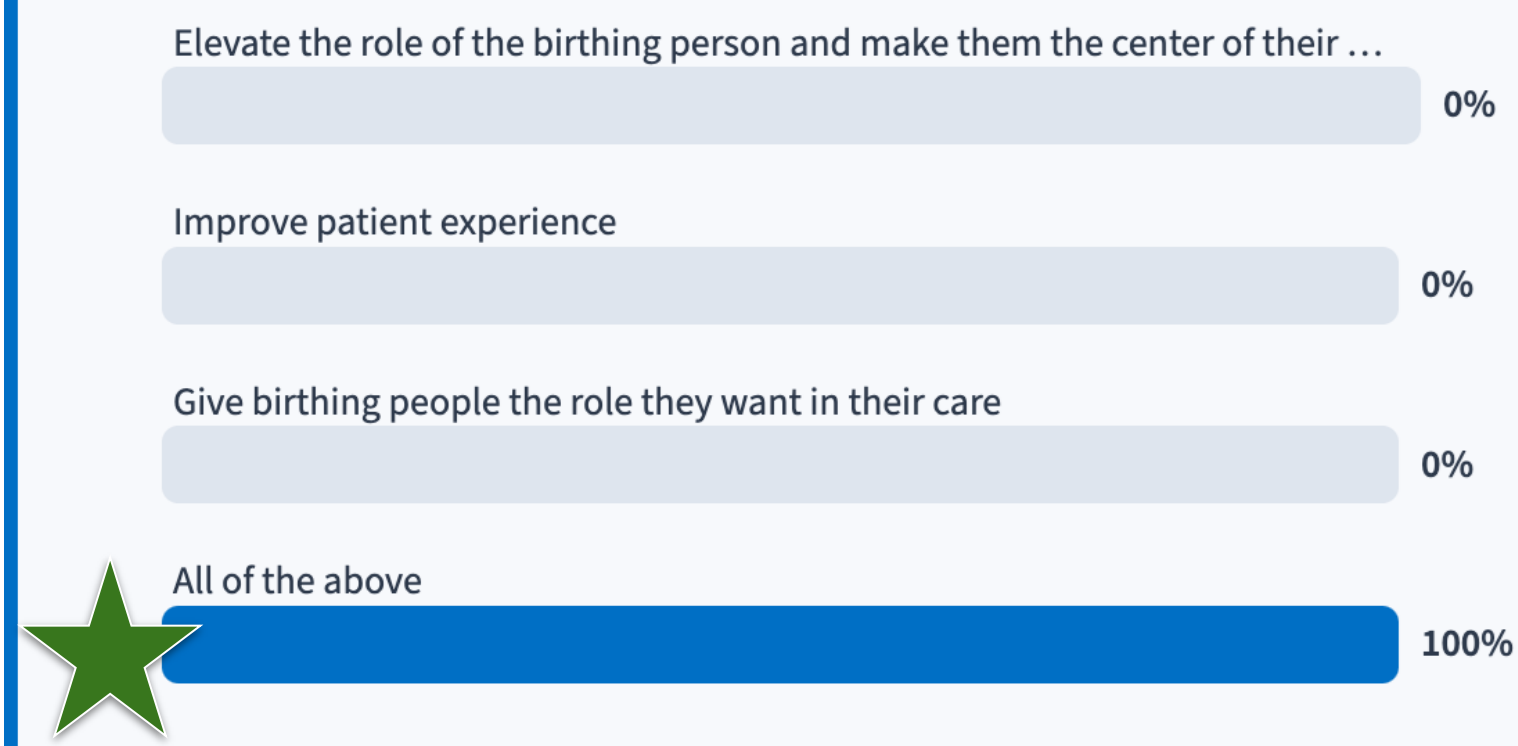


TeamBirth Knowledge Check

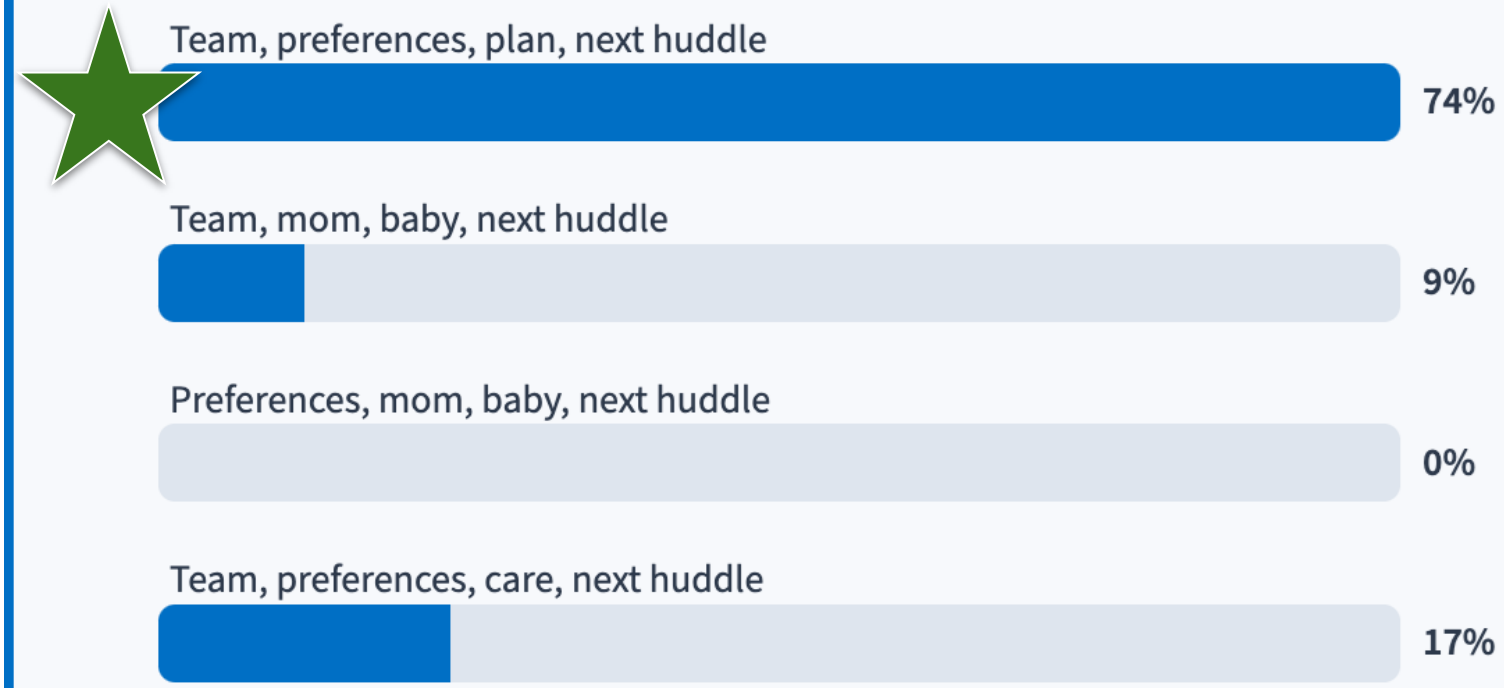
22 surveys completed

3 surveys underway

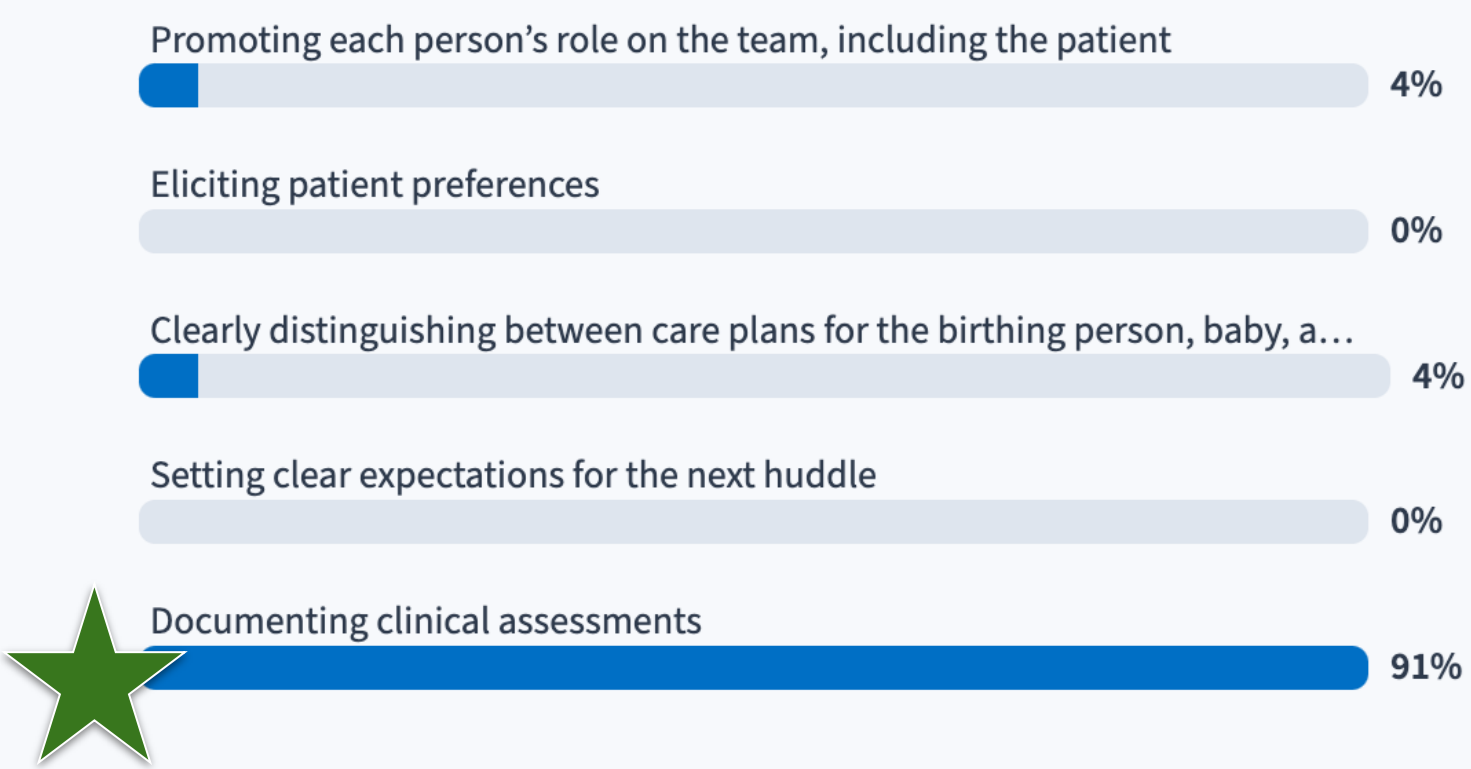
The goal of TeamBirth is to:



What are the 4 sections of the shared planning board?



Which is NOT a key behavior of a TeamBirth Huddle?



All patients should have an initial huddle at or around their admission.

On your units, what key moments do you think will be easiest for teams to spark a huddle?

At admission, before pain medications, after epidural, with routine cervical checks

provider rounding; admission, cervical exams, ped rounding, etc.

admission

category II tracing

on admission, transfer, change in patient status

Change of plan

How does this impact a normal post partum patient. If there are no issues for a huddle?

admission ,plan progress

admission ,plan progress

Triage, Admission, Change in Pain Management preference,

Admission or initiation of treatment

after multidisciplinary rounds

in between care.

labor changes,

At admission, before pain medications, after epidural, with routine cervical checks

change in pt status or pt preference

Lactation

request for pain management or epidural outside of patient's plan

Admission

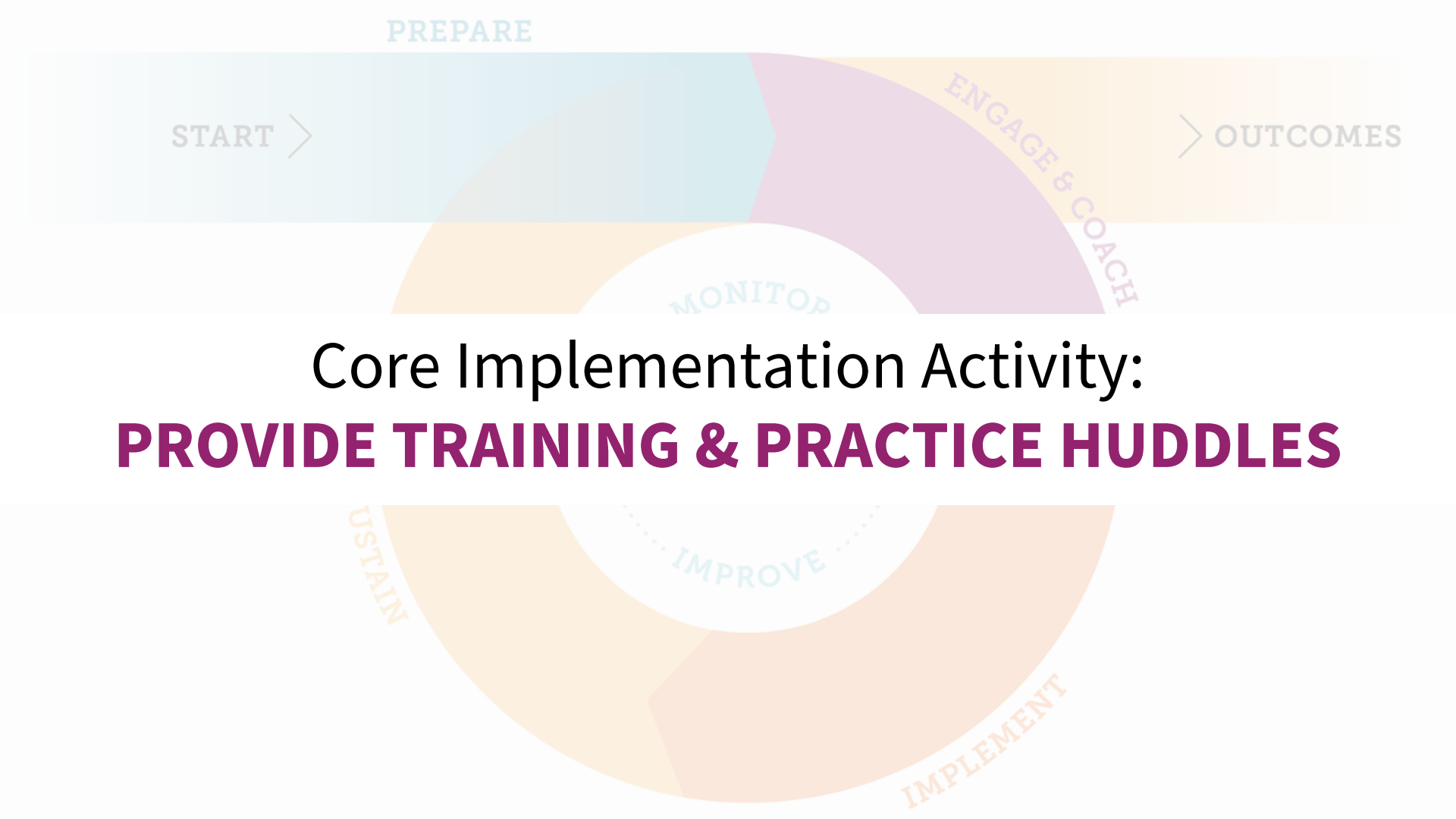
Admission or initiation of treatment

TeamBirth Implementation

TeamBirth Implementation Roadmap

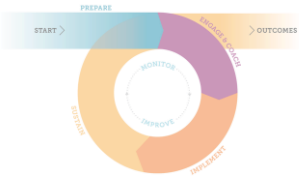
Today's focus

PHASE	PREPARE	ENGAGE & COACH	IMPLEMENT	SUSTAIN
CORE ACTIVITIES	✓ Build your team ✓ Develop your strategy ✓ Assess your context ✓ Customize TeamBirth	✓ Socialize TeamBirth ✓ **Provide training & practice huddles** ✓ **Conduct patient surveys** ✓ Test & improve	✓ Collect data & feedback ✓ Launch TeamBirth ✓ Monitor & celebrate progress	✓ Embed for sustainability ✓ Evaluate impact & continuously improve



Core Implementation Activity:

PROVIDE TRAINING & PRACTICE HUDDLES



ENGAGE & COACH PHASE

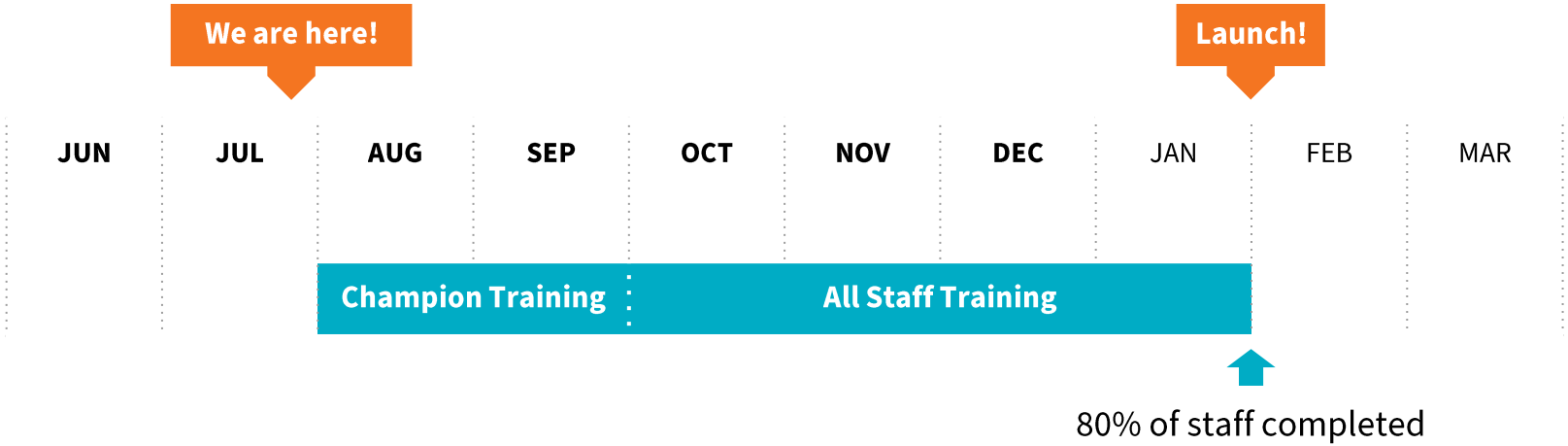
PROVIDE TRAINING & PRACTICE HUDDLES

CORE: Establish the knowledge for applying TeamBirth's components (huddles, the shared planning tool, and discussion and support guides) AND put training into practice by applying knowledge in practice scenarios with multidisciplinary groups

OBJECTIVES	Identify who should be trained Ensure everyone who received training has multiple opportunities to practice huddles Develop and begin your TeamBirth training strategy **Milestones:** ❑ All Champions completed training ❑ All clinicians completed training (goal: minimum of 80% completed by launch)
ADAPT	Your strategy for training: who, how, and when

Training Timeline

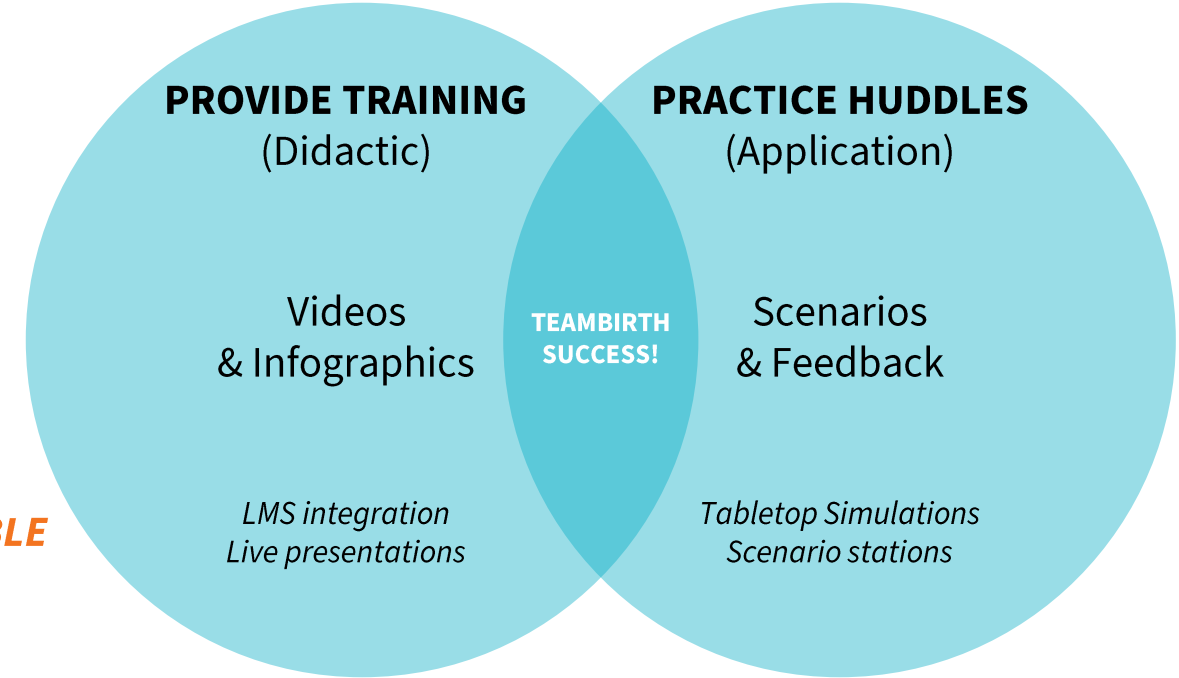
Start by training and practicing with your champions so they are ready to support staff training this fall through launch



To ensure TeamBirth success,

Ensure everyone has the necessary knowledge AND the opportunity to apply it

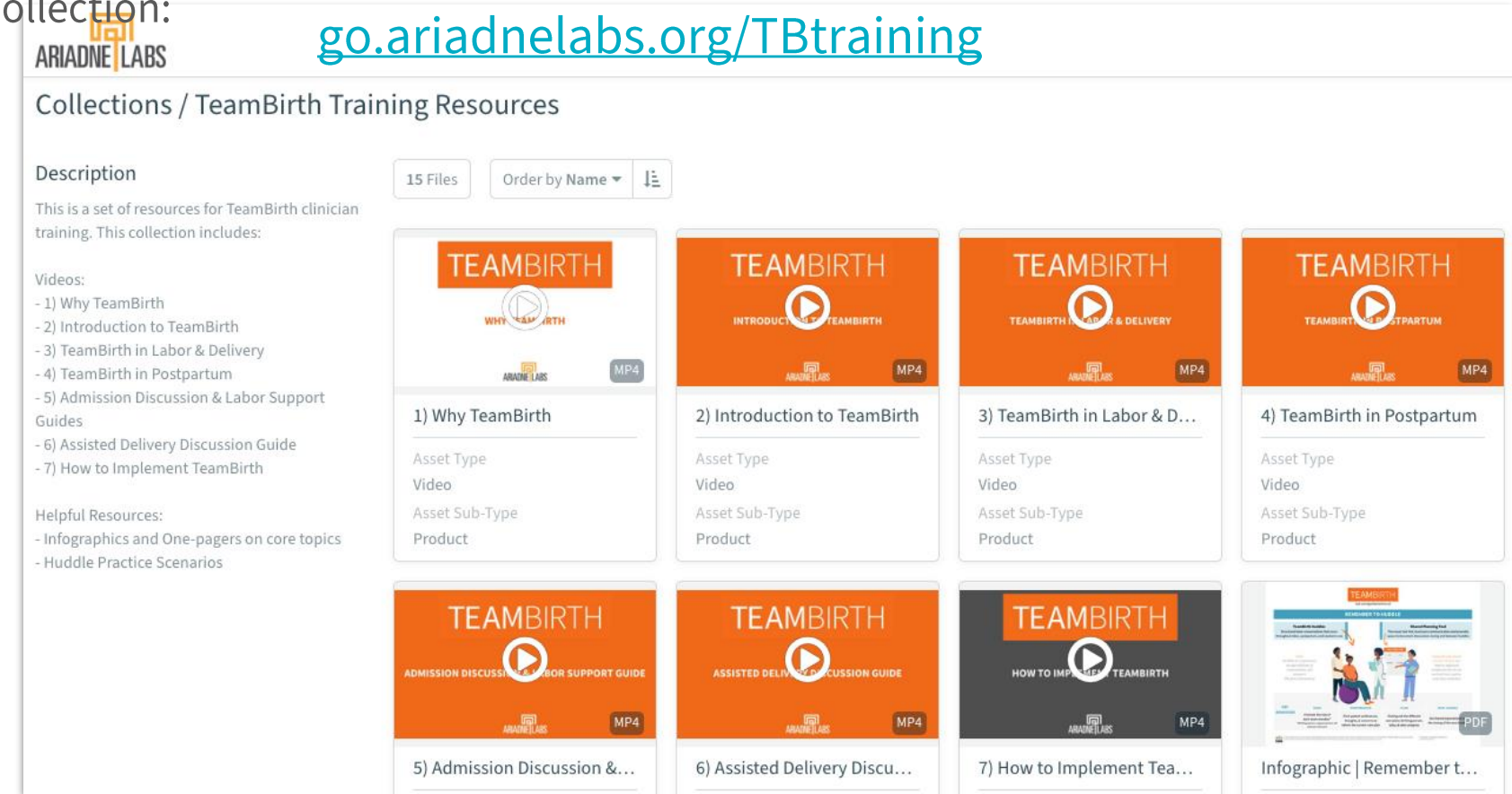
CORE IMPLEMENTATION ACTIVITY



ADAPTABLE

TeamBirth Training Videos

Access and download videos and resources via the Ariadne Labs Collection: go.ariadnelabs.org/TBtraining



Who should watch which video?

Assign staff based on the content relevant to their role

Video 1: Why TeamBirth is for everyone!

Use early and often for socialization

Implementation Team	1 - 7
OB Providers & Midwives	1 - 6
LDRP RNs, Doulas, CBEs	1 - 6
L&D RNs	1 - 3, 5 - 6
Anesthesiologists / CRNAs	1, 2, 6
Postpartum RNs, Lactation, & Newborn Providers	1, 2, 4

Provide Training

Ensure everyone has the necessary knowledge AND the opportunity to apply it

CORE Training Components	
Knowledge (Didactic) TeamBirth Videos	**Application (Action)** Huddle Practice

Adaptation for your context

- Assign videos in online learning management system
- Distribute QR codes for YouTube links
- Give your own live presentation of TeamBirth video content
- Supplement videos with TeamBirth resources like the infographics

- Role play huddle simulation in multidisciplinary groups
- Tabletop scenario practice
- Demos
- SIMs
- Combine with skills day

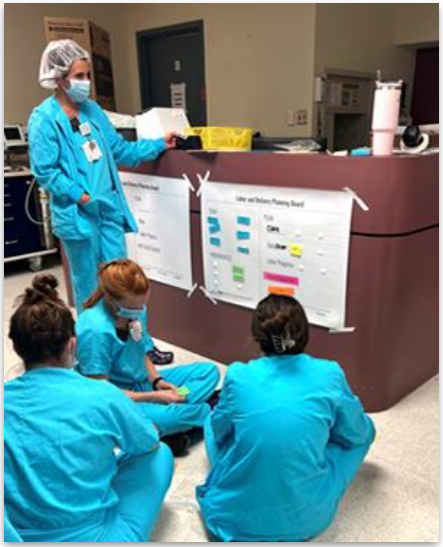
Many approaches to training

On-shift events

- Scenario station for training
- On the fly education
- TeamBirth “roadshows”
- Office hours
- TeamBirth education station
- Mini-trainings at shift changes

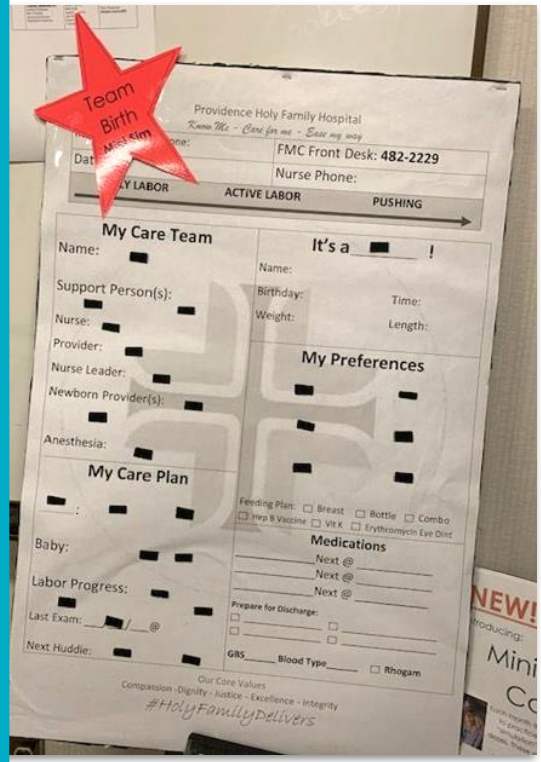
Off-shift events

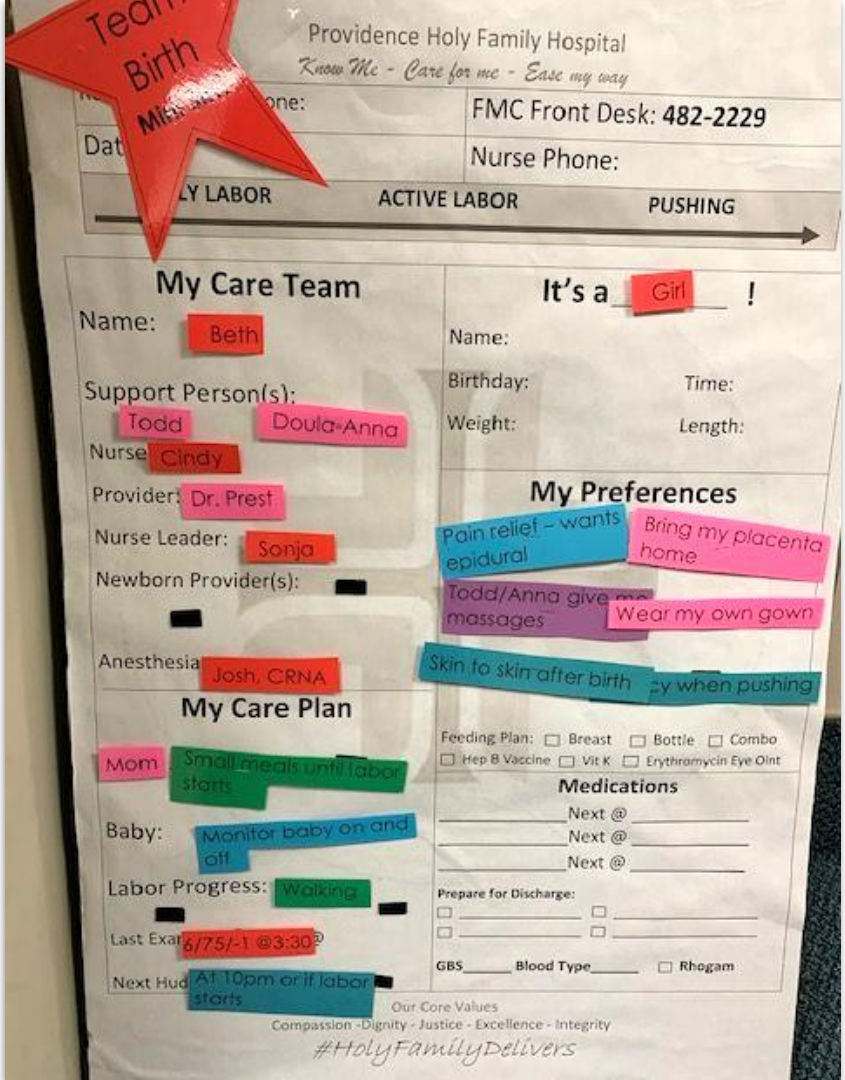
- OB clinics
- SIM lab
- Repurpose unit meetings for multidisciplinary scenario practice and discussion
- Department dinner and training
- Add huddle practice to existing skills labs



Training Tips

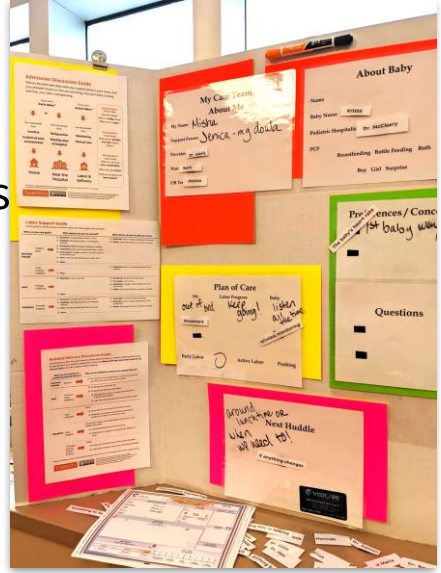
TeamBirth Scenario Station / Mini-Sims

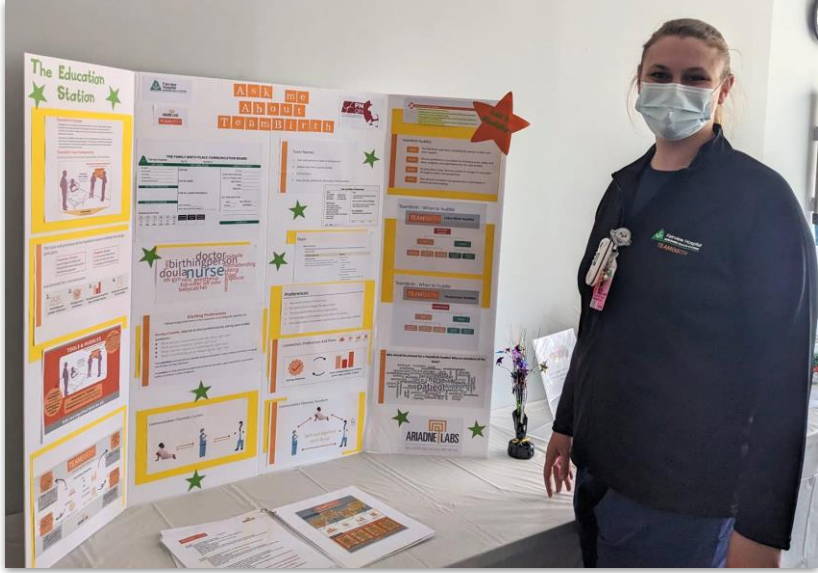


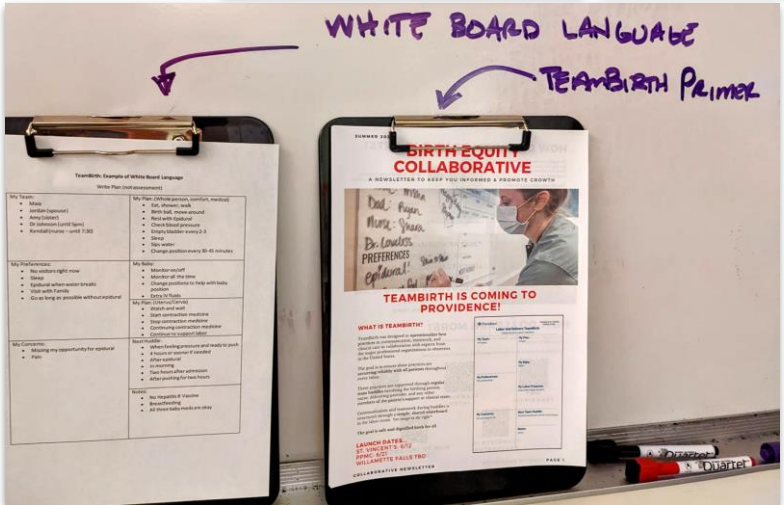


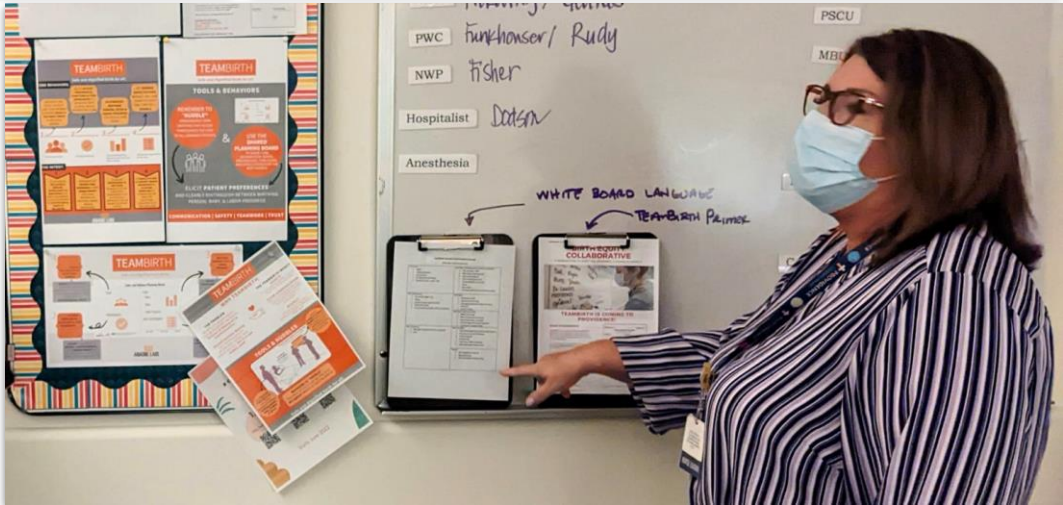
Training Tips

TeamBirth Education Stations









Training Tips

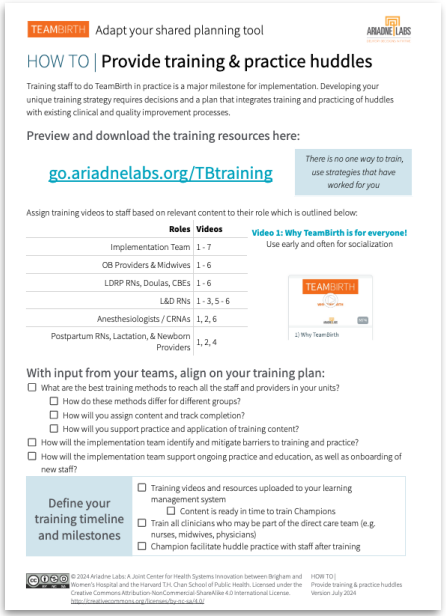
Practice, practice, practice!

Lunch training with badge buddy awards!

Develop your training strategy

There is no one way to train, use strategies that have worked for you

Use the HOW TO resource to start planning your training!



TEAMBIRTH Adapt your shared planning tool

ARIADNE LABS

HOW TO | Provide training & practice huddles

Training staff to do TeamBirth in practice is a major milestone for implementation. Developing your unique training strategy requires decisions and a plan that integrates training and practicing of huddles with existing clinical and quality improvement processes.

Preview and download the training resources here:

go.ariadnelabs.org/TBtraining

There is no one way to train, use strategies that have worked for you

Assign training videos to staff based on relevant content to their role which is outlined below:

Roles	Videos
Implementation Team	1 - 7
OB Providers & Midwives	1 - 6
LDRP RNs, Doulas, CBEs	1 - 6
L&D RNs	1 - 3, 5 - 6
Anesthesiologists / CRNAs	1, 2, 6
Postpartum RNs, Lactation, & Newborn Providers	1, 2, 4

Video 1: Why TeamBirth is for everyone!
Use early and often for socialization

With input from your teams, align on your training plan:

- ☐ What are the best training methods to reach all the staff and providers in your units?
  - ☐ How do these methods differ for different groups?
  - ☐ How will you assign content and track completion?
  - ☐ How will you support practice and application of training content?
- ☐ How will the implementation team identify and mitigate barriers to training and practice?
- ☐ How will the implementation team support ongoing practice and education, as well as onboarding of new staff?

Define your training timeline and milestones

- ☐ Training videos and resources uploaded to your learning management system
  - ☐ Content is ready in time to train Champions
- ☐ Train all clinicians who may be part of the direct care team (e.g. nurses, midwives, physicians)
- ☐ Champion facilitate huddle practice with staff after training

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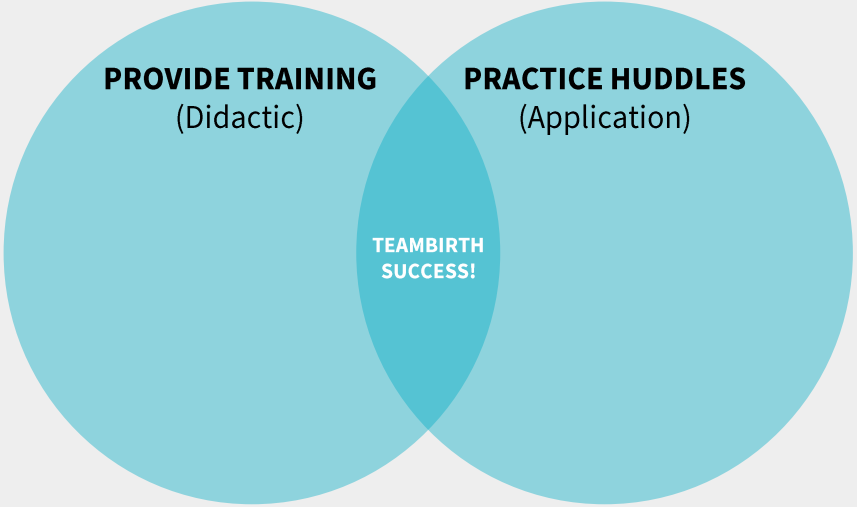
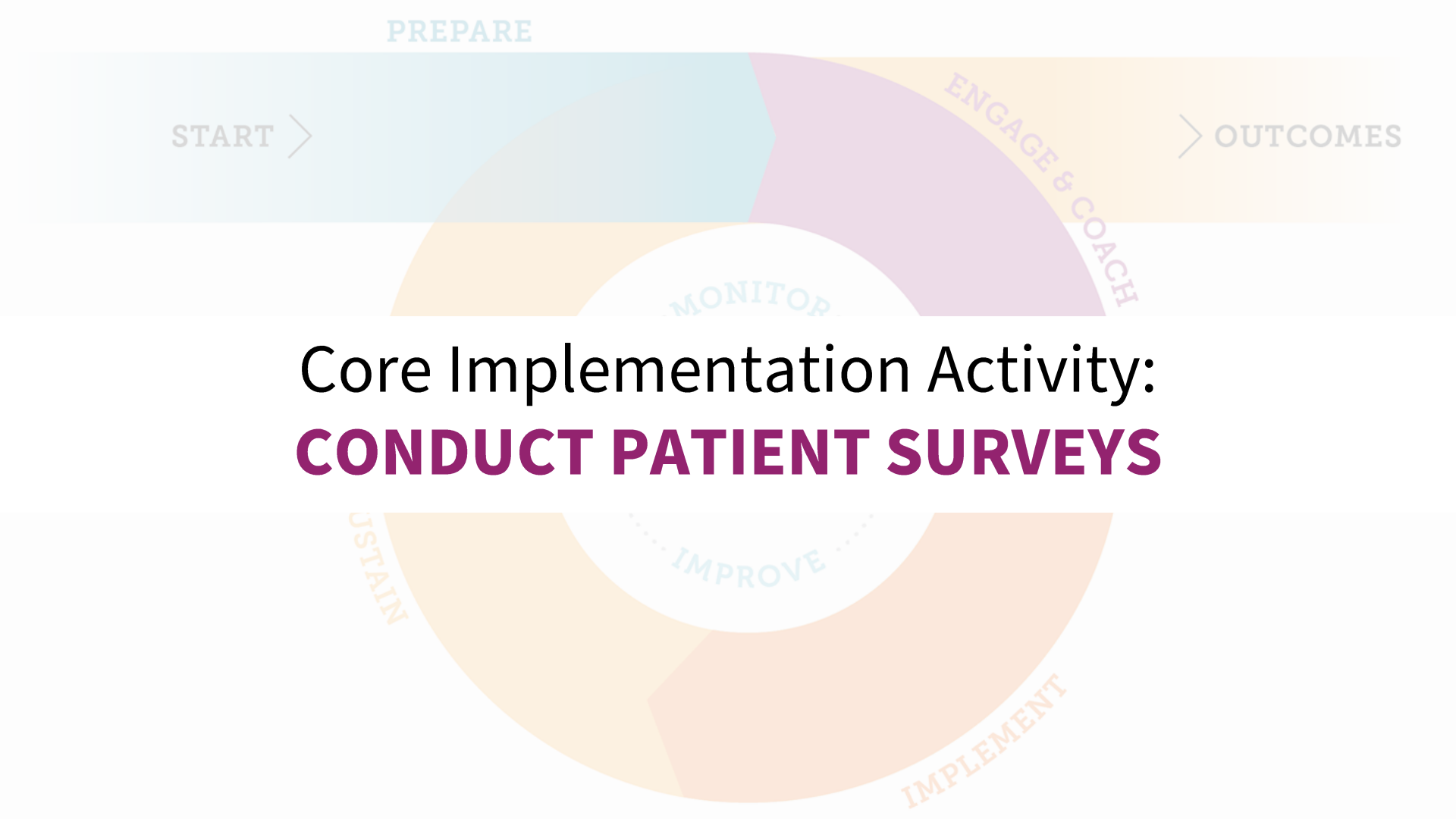
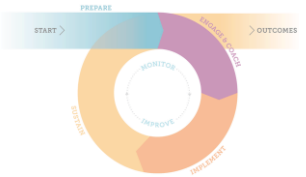
What could TeamBirth training look like for you?





Core Implementation Activity:
CONDUCT PATIENT SURVEYS



ENGAGE & COACH PHASE

CONDUCT PATIENT SURVEYS

CORE: Capture patient experience at baseline and post-launch to ensure TeamBirth progress and impact

OBJECTIVES

Develop and prepare for your patient surveying strategy

Begin baseline patient surveying several months before launch and continuing surveying for at least 6 months

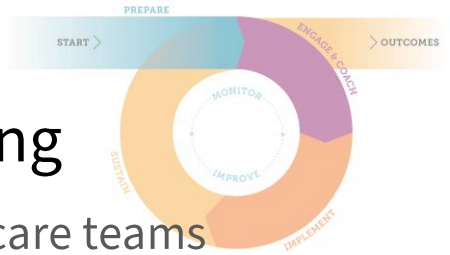
Iterate your surveying strategy to ensure robust response

Milestones:

- ❑ Baseline survey active before launch
- ❑ Switched to post-launch survey week of launch

ADAPT

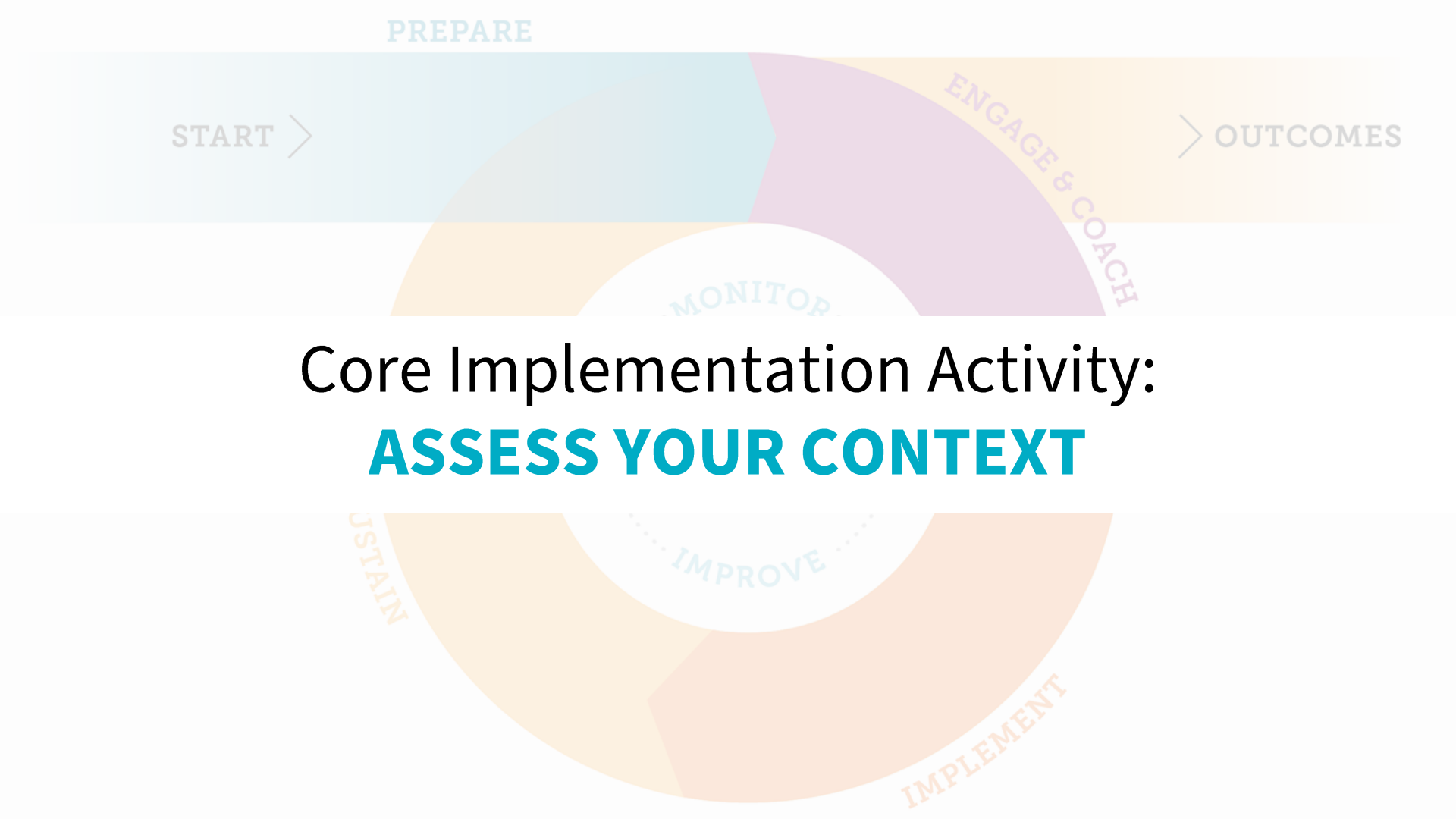
Your unique data collection strategy and methods



Your Measurement Strategy: Patient Surveying

TeamBirth implementation requires input from patients and care teams

	Patient Survey
WHO	Patients who delivered at your hospital
WHAT	Questions on: demographics, experience of huddle and board use, Mother's autonomy in decision making scale, and patient feedback on their overall TeamBirth experience
WHY	To collect first hand experiences of patients throughout implementation in order to inform opportunities for improvement and demonstrate TeamBirth impact
WHERE	Inpatient postpartum units
HOW	Via paper or digital surveys delivered according to your surveying methods and strategy
WHEN	***Baseline: Oct '24 - Jan '25*** ***Post-Launch: Week of Launch - 6 months***



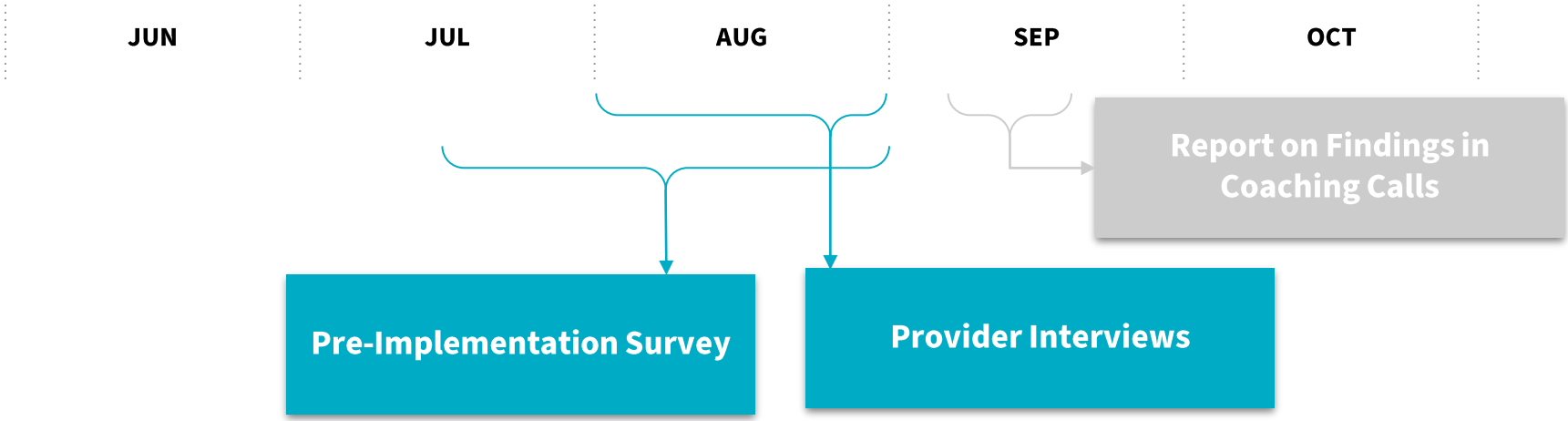
Core Implementation Activity:

ASSESS YOUR CONTEXT

ASSESS YOUR CONTEXT

Prepare for your assessment:

- Share the Atlas survey and provide reminders while advocating for survey completion to **reach the 60% response rate goal**
- Invite providers to schedule short 30 min interviews in **August**



Looking Ahead

Implementation Timeline

Launch!

	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APRIL	+
Learning Sessions *4th Monday*	**#1**	**#2**	**#3**	#4	#5	#6	#7	#8	#9	#10	#11	#12	
Coaching Calls													
Activities			**Atlas Surveying**										
				Provider Interviews									
			Design Boards			**Order & Install Boards**							
				Champion Training		**All Staff Training**							
						Baseline Patient Surveying				**Post-Launch Patient Surveying**			

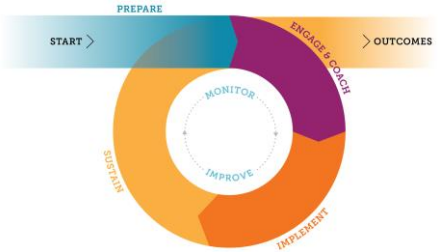
Today's Key Takeaways

Shared Planning Tool: NEXT HUDDLE

- Setting clear expectations for future huddles
- Reduces uncertainty by providing transparency
- Ensures everyone knows that anyone can request a huddle

WHEN TO HUDDLE

- All patients should have an initial Huddle to establish norms
- Ongoing, planned, and as needed Huddles will occur throughout their stay at key decision points or requests



Provide training & practice huddles

- Establish staff knowledge for applying TeamBirth's components
- Apply train via practice scenarios with multidisciplinary groups

Conduct Patient Surveying

- Collect first hand experiences of patients throughout implementation to inform opportunities for improvement and demonstrate impact

Assess Your Context

- Surveying staff to understand your strengths and opportunities for improvement is essential

Action Items

Implementation Pathway	*Action Items*	*Details & Resources*
General	Familiarize yourself with NJ Health Care Quality Institute TeamBirth pages and resources	**www.njhcqi.org/teambirthnj-cohort4** **Password: Cohort42024!**
DEVELOP YOUR STRATEGY	Use HOW TO worksheets with your implementation team to start drafting your plans	HOW TO | Develop Your Implementation, Communication, and Measurement Strategy
PROVIDE TRAINING & PRACTICE HUDDLES	Implementation Team watch training videos	Training Resources
	Use the HOW TO resource with your implementation team to start planning	HOW TO | Provide training & practice huddles
CUSTOMIZE TEAMBIRTH	Use this HOW TO resource to plan your process for tool design and testing	HOW TO | Customize Your Shared Planning Tool
ASSESS YOUR CONTEXT	Begin distributing your survey links (or QR codes)	Create a socialization & surveying flyer using this template!
	Share scheduling information with providers to schedule interviews	Doodle link. Will be shared via email and QR code!

Next Steps

Learning Session 3

August 26, 2024
12:00 - 1:00pm EST

Share your feedback!

- Anonymous
- Short survey
- Tell us what you like
- Tell us how to improve

Coaching Calls

See follow up email for Learning **Session Handout** for call agenda

Email Adelisa & Alea for

- Support and updates
- Resources
- Implementation Questions & Needs

aperez@njhcqi.org
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